Health Insurance Legislation Amendment (2025 Measures No. 2) Regulations 2025

I, the Honourable Sam Mostyn AC, Governor-General of the Commonwealth of Australia, acting with the advice of the Federal Executive Council, make the following regulations.

Dated 29 May 2025

Sam Mostyn AC
Governor-General

By Her Excellency's Command

Mark Butler
Minister for Health and Ageing

OPC67263 - B

Contents

1 Name

This instrument is the *Health Insurance Legislation Amendment (2025 Measures No. 2) Regulations 2025*.

2 Commencement

(1) Each provision of this instrument specified in column 1 of the table commences, or is taken to have commenced, in accordance with column 2 of the table. Any other statement in column 2 has effect according to its terms.

Commencement information

Column 1	Column 2	Column 3
Provisions	**Commencement**	**Date/Details**
1. The whole of this instrument	Immediately after the commencement of the *Health Insurance Legislation Amendment (Indexation) Regulations 2025*.	1 July 2025

Note: This table relates only to the provisions of this instrument as originally made. It will not be amended to deal with any later amendments of this instrument.

(2) Any information in column 3 of the table is not part of this instrument. Information may be inserted in this column, or information in it may be edited, in any published version of this instrument.

3 Authority

This instrument is made under the *Health Insurance Act 1973*.

4 Schedules

Each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this instrument has effect according to its terms.

Schedule 1—General amendments

Part 1—Diagnostic imaging services table

Division 1—Whole body FDG PET studies

Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020

1 Schedule 1 (cell at item 61612, column 2)

Repeal the cell, substitute:

Whole body FDG PET study for the initial staging of cancer, for a patient who is considered suitable for active therapy, if:

(a) the cancer is a typically FDG-avid cancer; and

(b) there is at least a 10% likelihood that the PET study result will inform a significant change in management for the patient

Applicable once per cancer diagnosis (R)

2 Schedule 1 (cell at item 61614, column 2)

Repeal the cell, substitute:

Whole body FDG PET study, following initial therapy, performed for the evaluation of suspected residual, metastatic or recurrent cancer in a patient who is undergoing, or is suitable for, active therapy, if the cancer is a typically FDG-avid cancer (R)

Division 2—MRI equipment

Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020

3 Subclause 2.5.1(2) of Schedule 1

Repeal the subclause.

4 Subparagraphs 2.5.1(3)(c)(ii) and (4)(c)(ii) of Schedule 1

Omit "or partial eligible equipment mentioned in clause 2.5.6".

5 Clause 2.5.5 of Schedule 1

Repeal the clause, substitute:

2.5.5 MRI and MRA services—eligible equipment

For the purposes of clause 2.5.1, equipment is eligible equipment if it is:

(a) included on the Diagnostic Imaging Register in relation to the location specific practice number for the comprehensive practice at which it is located; and

(b) made available to the practice by a person who is subject to a current deed with the Commonwealth that relates to the equipment so included on the Register.

6 Clause 2.5.6 of Schedule 1

Repeal the clause.

7 Clause 2.5.14 of Schedule 1 (heading)

Omit "**and 22**", substitute "**, 22 and 32**".

8 Clause 2.5.14 of Schedule 1

Omit "and 22", substitute ", 22 and 32".

9 In the appropriate position in Part 4 of Schedule 1

Insert:

Division 3—Health Insurance Legislation Amendment (2025 Measures No. 2) Regulations 2025

Subdivision A—Preliminary

4.6 Definitions

In this Division:

amending instrument means the *Health Insurance Legislation Amendment (2025 Measures No. 2) Regulations 2025*.

commencement day means the day the amending instrument commences.

pre-commencement period, for relevant MRI equipment, means the period:

(a) that begins on the date from which the age of the equipment is worked out under subclause 1.2.2(1); and

(b) that ends immediately before the commencement day.

relevant MRI equipment means MRI equipment, in relation to which:

(a) immediately before the commencement day, both of the following apply:

(i) the equipment is located at the premises of a comprehensive practice located in a Modified Monash 1 area;

(ii) the equipment is neither eligible equipment nor partial eligible equipment (within the meaning of this instrument as in force immediately before the commencement day); and

(b) on and after the commencement day, all of the following apply:

(i) the equipment continues to be located at the premises of, and is included on the Diagnostic Imaging Register in relation to the location specific practice number for, the comprehensive practice;

(ii) the equipment is made available to the comprehensive practice by a person who is subject to a current deed with the Commonwealth that relates to the equipment so included on the Diagnostic Imaging Register;

(iii) the age of the equipment exceeds the new effective life age for MRI equipment.

Subdivision B—Capital sensitivity requirements for relevant MRI equipment

4.7 Applicable life age and restriction on items for relevant MRI equipment

Applicable life age

(1) Despite subclause 1.2.2(2), the applicable life age for relevant MRI equipment is the maximum extended life age of the equipment if subclause (2) or (3) of this clause applies.

(2) This subclause applies to relevant MRI equipment if:
  (a) an additional reasonable investment has been made during the pre-commencement period for the equipment; and
  (b) the investment improves the overall performance of the equipment so that it is equivalent to new MRI equipment supplied in Australia at the time of the improvement.

(3) This subclause applies to relevant MRI equipment if:
  (a) the Secretary grants a validation under subclause 4.9(2) in respect of the equipment; and
  (b) before the end of the period of 12 months beginning on the day the validation is granted, the equipment is improved such that its overall performance is equivalent to new MRI equipment supplied in Australia at the time of the improvement.

Restriction on items—services performed on validated relevant MRI equipment

(4) If the Secretary grants a validation under subclause 4.9(2) in respect of relevant MRI equipment, an item in this Schedule does not apply to a service that is performed on that equipment on a day that is before the day the validation was granted.

Subdivision C—Validation of relevant MRI equipment subsequently meeting capital sensitivity requirements

4.8 Equipment unable to be improved before commencement day—applying for validation of subsequently improved equipment

Applying for validation

(1) The relevant proprietor for relevant MRI equipment may apply to the Secretary for validation under clause 4.9 in respect of the equipment if:
  (a) during the pre-commencement period for the equipment, the relevant proprietor took steps to make an additional reasonable investment that would improve the overall performance of the equipment so that it would be equivalent to new MRI equipment supplied in Australia at the time of the improvement; and
  (b) the improvement is not completed before the commencement day.

Note: For ***relevant proprietor***, see clause 1.2.4.

(2) The application must:
  (a) be in writing; and

(b) be made within the period of 3 months beginning on the commencement day; and

(c) set out:

(i) reasons why the proprietor was unable to complete the improvement before the commencement day; and

(ii) an explanation of how the equipment has been, or will be, improved; and

(iii) if the improvement has not been completed—the steps taken by the proprietor to ensure that it will be completed before the end of the period of 12 months beginning on the day the validation is granted, and the date on which it will be completed.

Notifying proprietor of receipt of application

(3) If:

(a) the Secretary receives an application under subclause (1) for a validation in respect of the equipment; and

(b) the application complies with subclause (2);

the Secretary must notify the relevant proprietor for the equipment in writing that the Secretary has received the application.

4.9 Equipment unable to be improved before commencement day—granting validation of subsequently improved equipment

Scope of this clause

(1) This clause applies if, under subclause 4.8(3), the Secretary notifies the relevant proprietor for relevant MRI equipment that the Secretary has received an application for validation of the equipment.

Granting validation

(2) The Secretary must, by notice in writing given to the proprietor:

(a) subject to subclause (3) of this clause, grant the validation; or

(b) refuse to grant the validation.

(3) The Secretary must not grant the validation unless the Secretary is satisfied that both of the following apply:

(a) due to circumstances beyond the control of the proprietor, the proprietor was unable to complete the improvement before the commencement day;

(b) the improvement has been or will be completed before the end of the period of 12 months beginning on the day the validation is granted.

(4) The Secretary must make a decision on the application under subclause (2) within 28 days after notifying the proprietor as mentioned in subclause (1).

Effect of validation on capital sensitivity requirements

(5) If the Secretary grants a validation in relation to equipment that is still to be improved, clause 1.2.1 does not apply to a service that is performed on the equipment during the period:

(a) starting when the Secretary grants the validation; and

(b) ending on the earliest of the following:

(i) the day the improvement is completed;

(ii) the day that is 12 months after the day the validation is granted.

Note: If the improvement is completed as proposed within the period of 12 months beginning on the day the validation is granted, then the applicable life age of the equipment is the maximum extended life age of MRI equipment: see clause 4.7.

Subdivision D—Modified application of Subdivision BB of Division 1.2

4.10 Reconsideration by Secretary—refusal to validate relevant MRI equipment

(1) For the purposes of a decision under clause 4.9 to refuse to grant a validation in respect of relevant MRI equipment, clauses 1.2.11 and 1.2.12 are modified as set out in this clause.

(2) Subclause 1.2.11(1) is modified by adding at the end of the subclause:

"; or (d) a decision under clause 4.9 to refuse to grant a validation in respect of relevant MRI equipment."

(3) Clause 1.2.11 is modified by omitting subclause (6).

(4) Clause 1.2.12 is modified by omitting subclause (4).

Division 3—Other amendments

Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020

10 Paragraph 1.2.2(4)(c)

Omit "is currently", substitute "has been".

11 Schedule 1 (cell at item 60506, column 2)

Repeal the cell, substitute:

Fluoroscopy, using a mobile image intensifier, that:

(a) lasts less than 1 hour; and

(b) is in conjunction with a surgical procedure;

not being a service associated with a service to which another item in this Group applies (R) (H)

12 Schedule 1 (cell at item 60509, column 2)

Repeal the cell, substitute:

Fluoroscopy, using a mobile image intensifier, that:

(a) lasts 1 hour or more; and

(b) is in conjunction with a surgical procedure;

not being a service associated with a service to which another item in this Group applies (R) (H)

13 Paragraph 2.4.5(1)(b) of Schedule 1

Omit "in", substitute "is".

14 Clause 2.5.4 of Schedule 1 (cell at table item 1, column 2)

Repeal the cell, substitute:

A person who is a specialist in diagnostic radiology

15 Clause 2.5.9 of Schedule 1 (table item 9, column 1)

After "63391", insert "(other than 63390)".

Part 2—General medical services table

Division 1—Group D1

Health Insurance (General Medical Services Table) Regulations 2021

16 Schedule 1 (item 11000, column 2, paragraph (a))

Omit "or 11009", substitute ", 11009 or 11205".

17 Schedule 1 (item 11000, column 2)

Omit "devices (Anaes.)", substitute:

devices
(Anaes.)

18 Schedule 1 (at the end of the cell at item 11205, column 2)

Add ", other than a service associated with a service to which item 11000, 11340, 11341 or 11343 applies".

19 Schedule 1 (at the end of the cell at item 11210, column 2)

Add ", performed by or on behalf of a specialist or consultant physician in the practice of the specialist's or consultant physician's speciality".

20 Schedule 1 (at the end of the cell at item 11211, column 2)

Add ", performed by or on behalf of a specialist in the practice of the specialist's specialty of ophthalmology".

Division 2—Amendments to item descriptions in Group T2, including to add a new line to the description

Health Insurance (General Medical Services Table) Regulations 2021

21 Schedule 1 (item 15930, column 2, paragraph (c))

Omit "with", substitute "to implement".

22 Schedule 1 (item 15930, column 2, paragraph (d))

Omit "utilised", substitute:

utilised
Applicable up to twice per plan per day

23 Schedule 1 (items 15932, 15934 and 15936, column 2, paragraph (d))

Omit "record", substitute:

record
Applicable up to twice per plan per day

24 Schedule 1 (item 15938, column 2, paragraph (b))

Repeal the paragraph, substitute:

(b) image-guided radiation therapy (IGRT) imaging is used to implement an IMRT plan at a level that is equivalent to or higher than that described in item 15910

Applicable up to twice per plan per day

25 Schedule 1 (item 15940, column 2, paragraph (b))

Omit "a complex IMRT plan at a level that is equivalent to or higher than that described in item 15914", substitute "an IMRT plan at a level that is equivalent to or higher than that described in item 15910".

26 Schedule 1 (item 15940, column 2, paragraph (d))

Omit "record", substitute:

record

Applicable up to twice per plan per day

27 Schedule 1 (item 15942, column 2, paragraph (b))

Omit "that is equivalent to or higher than that".

28 Schedule 1 (item 15942, column 2, paragraph (d))

Omit "record", substitute:

record

Applicable once per day

29 Schedule 1 (item 15944, column 2, paragraph (b))

Omit "that is equivalent to or higher than that".

30 Schedule 1 (item 15944, column 2, paragraph (d))

Omit "record", substitute:

record

Applicable once per day

31 Schedule 1 (item 15946, column 2, paragraph (b))

Repeal the paragraph, substitute:

(b) a specialised technique is used to implement a treatment plan with general anaesthetic or sedation supervised by an anaesthetist

Applicable once per day

32 Schedule 1 (cell at item 15948, column 2)

Repeal the cell, substitute:

Megavoltage treatment—level 5

Specialised radiation therapy treatment and verification, if:

(a) the treatment is delivered using a device that is included in the Australian Register of Therapeutic Goods; and

(b) a specialised technique, such as total skin electron therapy (TSE) or total body irradiation (TBI), is used to implement a treatment plan described in item 15926

Applicable up to twice per day

Division 3—Amendments to item descriptions in Group T8

Health Insurance (General Medical Services Table) Regulations 2021

33 Schedule 1 (cell at item 42504, column 2)

Repeal the cell, substitute:

Implantation of a micro-bypass glaucoma surgery device or devices into the suprachoroidal space or the trabecular meshwork, if conservative therapies have failed, are likely to fail, or are contraindicated (H) (Anaes.)

34 Schedule 1 (item 42505, column 2)

Omit "from the eye of a trans-trabecular drainage device or devices", substitute "of a micro-bypass glaucoma surgery device or devices from the suprachoroidal space or the trabecular meshwork".

35 Schedule 1 (item 42506, column 2)

Omit "with or without sphere", substitute "without insertion of".

36 Schedule 1 (item 42509, column 2)

Omit "integrated implant", substitute "non-integrated implant, without muscle attachment".

37 Schedule 1 (cell at item 42510, column 2)

Repeal the cell, substitute:

Eye, enucleation of, with insertion of coralline or other integrated implant, including:

(a) for a coralline implant—attachment of at least the 4 rectus muscles (with or without oblique muscles) to:
  (i) the implant; or
  (ii) the implant wrap; or

(b) for another integrated implant—fashioning of myoconjunctival insertion of extraocular muscles

(H) (Anaes.) (Assist.)

38 Schedule 1 (item 42530, column 2)

Omit "with or without biopsy, requiring removal of bone", substitute "of, requiring removal of bone (orbitotomy) for access, with subsequent drainage or biopsy, including repair of any bone or soft tissue surgical defect, other than a service associated with a service to which item 45590 or 45594 applies on the same side".

39 Schedule 1 (item 42533, column 2)

Omit "with drainage or biopsy not requiring removal of bone", substitute "without requiring removal of bone (orbitotomy) for access, with drainage or biopsy, including repair of any bone or soft tissue surgical defect".

40 Schedule 1 (item 42536, column 2)

After "exenteration of,", insert "including repair of any bone or soft tissue surgical defect,".

41 Schedule 1 (item 42539, column 2)

Omit "with removal of tumour or foreign body, requiring removal of bone", substitute "requiring removal of bone (orbitotomy) for access, with removal of tumour or foreign body (not incisional biopsy), including repair of any bone or soft tissue surgical defect".

42 Schedule 1 (item 42542, column 2)

After "aspect", insert ",".

43 Schedule 1 (item 42542, column 2)

After "body", insert "(not incisional biopsy), including repair of any bone or soft tissue surgical defect".

44 Schedule 1 (item 42590, column 2)

After "lateral", insert ", excluding when performed in conjunction with cosmetic blepharoplasty".

45 Schedule 1 (item 42623, column 2)

After "Dacryocystorhinostomy", insert ", external or endonasal approach, including any sinus, turbinate or uncinate operation performed by same surgeon for access, with or without silicone intubation/stenting".

46 Schedule 1 (item 42626, column 2)

After "Dacryocystorhinostomy", insert ",".

47 Schedule 1 (item 42626, column 2)

After "performed", insert ", external or endonasal approach, including any sinus, turbinate or uncinate operation performed by same surgeon for access, with or without silicone intubation/stenting".

48 Schedule 1 (cell at item 42629, column 2)

Repeal the cell, substitute:

Dacryocystorhinostomy, with placement of a permanent bypass tube from the conjunctival sac to the nasal cavity (H) (Anaes.) (Assist.)

49 Schedule 1 (item 42632, column 2)

After "flap", insert ", other than a service associated with a service to which item 42686 applies".

50 Schedule 1 (item 42647, column 2)

After "42686", insert "or 42650".

51 Schedule 1 (item 42650, column 2)

After "after-care)", insert ", other than a service associated with a service to which item 42647 applies".

52 Schedule 1 (item 42686, column 2)

After "of", insert ", other than a service associated with a service to which item 42632 or 42647 applies".

53 Schedule 1 (item 42705, column 2)

Omit "a trans-trabecular drainage device or devices", substitute "insertion of a micro-bypass glaucoma surgery device or devices into the suprachoroidal space or trabecular meshwork".

54 Schedule 1 (cell at item 42713, column 2)

Repeal the cell, substitute:

Iris or ciliary body suturing, McCannel technique or similar, for:

(a) fixation of intraocular lens; or

(b) repair of iris defect or cyclodialysis cleft

(H) (Anaes.) (Assist.)

55 Schedule 1 (item 42744, column 2)

Omit "procedure", substitute "surgery".

56 Schedule 1 (item 42746, column 2)

Omit ", filtering operation for", substitute "filtering surgery".

57 Schedule 1 (item 42749, column 2)

Omit ", filtering operation for, if previous filtering operation", substitute "filtering surgery, if previous filtering surgery".

58 Schedule 1 (cell at item 42752, column 2)

Repeal the cell, substitute:

Insertion of glaucoma drainage device incorporating an extraocular reservoir (H) (Anaes.) (Assist.)

59 Schedule 1 (cell at item 42755, column 2)

Repeal the cell, substitute:

Any of the following:

(a) removal of glaucoma drainage device incorporating an extraocular reservoir;

(b) insertion or removal of intraluminal stent;

(c) tying off of lumen

One eye (H) (Anaes.) (Assist.)

60 Schedule 1 (item 42773, column 2)

Omit "other than a service associated with a service to which item 42776 applies", substitute "as an independent procedure".

61 Schedule 1 (item 42794, column 2)

Omit "filtration", substitute "filtering".

62 Schedule 1 (item 42808, column 2)

Omit "peripheral".

63 Schedule 1 (item 42818, column 2)

After "Retina,", insert "or ciliary body,".

64 Schedule 1 (item 42818, column 2)

Omit "in association with item 42770 or 42809", substitute "in conjunction with item 42809".

65 Schedule 1 (item 42863, column 2)

After "Eyelid", insert "(upper or lower)".

66 Schedule 1 (item 42863, column 2)

After "of", insert ", by open operation on and direct release of the lid retractors, one eye".

67 Schedule 1 (item 42866, column 2)

After "eyelid", insert ", excluding when performed in conjunction with closure of the retractors using conjunctival approaches for fat pad reduction or orbital surgery".

68 Schedule 1 (cell at item 42872, column 2)

Repeal the cell, substitute:

Direct eyebrow lift in paretic states, or in involutional states, if:

(a) vision is obscured as evidenced by the resting of upper lid skin on the eyelashes in straight ahead gaze; and

(b) photographic evidence demonstrating the clinical need for this service is documented in the patient notes

(Anaes.)

69 Schedule 1 (item 45590, column 2)

After "item", insert "42530 or".

70 Schedule 1 (item 45594, column 2)

After "item", insert "42530,".

Division 4—Items to be repealed from Group T8

Health Insurance (General Medical Services Table) Regulations 2021

71 Schedule 1 (items 42524, 42593, 42738, 42739, 42740, 42741, 42806, 42807 and 43023)

Repeal the items.

Division 5—New items in Group T8

Health Insurance (General Medical Services Table) Regulations 2021

72 Schedule 1 (after item 42749)

Insert:

42750	Subconjunctival injection of antifibrotic agent following glaucoma filtering surgery, as an independent procedure (Anaes.)	62.20

73 Schedule 1 (at the end of Subgroup 9 of Group T8)

Add:

43030	Paracentesis of anterior chamber or vitreous cavity, or both, for either or both of the following: (a) the injection of therapeutic substances; (b) the removal of aqueous or vitreous humours for diagnostic or therapeutic purposes; as an independent procedure of the left eye	350.85
43032	Paracentesis of anterior chamber or vitreous cavity, or both, for either or both of the following: (a) the injection of therapeutic substances; (b) the removal of aqueous or vitreous humours for diagnostic or therapeutic purposes; as an independent procedure of the right eye	350.85
43034	Paracentesis of anterior chamber or vitreous cavity, or both, for either or both of the following: (a) the injection of therapeutic substances; (b) the removal of aqueous or vitreous humours for diagnostic or therapeutic purposes; as an independent procedure of the left eye, for a patient requiring the administration of anaesthetic by an anaesthetist (Anaes.)	350.85
43036	Paracentesis of anterior chamber or vitreous cavity, or both, for either or both of the following: (a) the injection of therapeutic substances; (b) the removal of aqueous or vitreous humours for diagnostic or therapeutic purposes; as an independent procedure of the right eye, for a patient requiring the administration of anaesthetic by an anaesthetist (Anaes.)	350.85
43038	Intravitreal injection of therapeutic substances, or the removal of vitreous humour for diagnostic purposes, one or more of, as a procedure associated with other intraocular surgery of the left eye (Anaes.)	350.85
43040	Intravitreal injection of therapeutic substances, or the removal of vitreous humour for diagnostic purposes, one or more of, as a procedure associated with other intraocular surgery of the right eye (Anaes.)	350.85
43050	Choroidal detachment, repair by external drainage (H) (Anaes.) (Assist.)	786.50

Division 6—Telehealth Attendance Determination

Health Insurance (General Medical Services Table) Regulations 2021

74 Clause 7.1.1 of Schedule 1 (definition of *Telehealth and Telephone Determination*)

Repeal the definition.

75 Clause 7.1.1 of Schedule 1

Insert:

Telehealth Attendance Determination means the *Health Insurance (Section 3C General Medical Services – Telehealth Attendances) Determination 2021*.

76 Amendments of listed provisions—Telehealth Attendance Determination

Omit "and Telephone" (wherever occurring) and substitute "Attendance" in the following provisions:

(a) Schedule 1 (item 228, column 2, paragraph (b));
(b) Schedule 1 (item 792, column 2, note);
(c) subclause 2.16.12A(2) of Schedule 1 (table);
(d) subclauses 2.20.6(8A), (8B), (8C) and (8D) of Schedule 1;
(e) sub-subparagraph 2.20.7A(2)(a)(i)(C) of Schedule 1.

Division 7—Other amendments

Health Insurance (General Medical Services Table) Regulations 2021

77 Subclause 1.1.5(2) of Schedule 1 (paragraph (g) of the example)

Repeal the paragraph, substitute:

(g) dietitians;

78 Subclause 1.2.4(1) of Schedule 1

After "92613", insert ", 92614".

79 Schedule 1 (item 104, column 2)

After "109", insert ", 125".

80 Schedule 1 (item 105, column 2)

After "item", insert "126 or".

81 Schedule 1 (at the end of Group A3)

Add:

125	Professional attendance lasting at least 45 minutes at consulting rooms or hospital, by a specialist in the practice of the specialist's specialty of gynaecology, following referral of the patient to the specialist by a referring practitioner—initial attendance in a single course of treatment, if: (a) the specialist takes a comprehensive history, including psychosocial history and medication review; and (b) the specialist undertakes any of the following that are clinically relevant: (i) a comprehensive multi-system physical examination; (ii) consideration of multiple complex diagnoses; (iii) discussion of all treatment options available; (iv) assessment of pros and cons of each treatment option given patient characteristics and medical history; (v) consideration, discussion and provision of necessary referrals for clinically appropriate investigations or treatment; (vi) communication of a patient-centred management plan; and (c) the specialist makes available to the patient or carer written documentation that outlines treatment options and information on associated risks and benefits; and (d) another attendance on the patient did not take place on the same day by the specialist in the same single course of treatment	178.70

126	Professional attendance lasting at least 45 minutes at consulting rooms or hospital, by a specialist in the practice of the specialist's specialty of gynaecology, following referral of the patient to the specialist by a referring practitioner—an attendance after the initial attendance in a single course of treatment, if: (a) the specialist takes a comprehensive history, including psychosocial history and medication review; and (b) the specialist reviews implemented management strategies; and (c) the specialist undertakes any of the following that are clinically relevant: (i) update of management plan; (ii) performance of a physical examination; (iii) discussion of treatment options; (iv) consideration, discussion and provision of necessary referrals; (v) provision of appropriate education; and (d) the specialist makes available to the patient or carer written documentation that outlines treatment options and information on associated risks and benefits; and (e) another attendance on the patient did not take place on the same day by the specialist in the same single course of treatment	89.40

82 Schedule 1 (items 132 and 133, column 2, paragraph (c))

Omit "or 119", substitute ", 119, 91824, 91825, 91826 or 91836".

83 Clause 2.16.18 of Schedule 1 (paragraph (a) of the example)

Repeal the paragraph, substitute:

(a) dietitians;

84 Schedule 1 (after item 38325)

Insert:

38326	Use of optical coherence tomography (OCT) during transluminal insertion of stents, to optimise procedural strategy, appropriate stent size and assessment of stent apposition, if: (a) the patient is documented with: (i) one or more lesions located at a bifurcation; and (ii) a planned side branch at least 2.5 mm in diameter by angiographic visual estimation; or (b) the patient is documented with stent thrombosis; or (c) both: (i) the patient is documented with one or more lesions at least 28mm in length; and (ii) either of the following apply: (A) a service to which this item applies is not performed in association with a service to which item 38325 applies because of paragraph (b) of that item; (B) a service to which this item applies is not performed, in relation to a lesion, in association with a service to which item 38325 applies because of paragraph (a) of that item, performed in relation to the same lesion; if performed in association with a service to which item 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies	539.15

Applicable once per episode of care (for one or more lesions) (H)

85 Clause 7.1.1 of Schedule 1 (after paragraph (a) of the definition of *eligible allied health provider*)

Insert:

(aa) a dietitian;

(ab) an exercise physiologist;

Part 3—Pathology services table

Health Insurance (Pathology Services Table) Regulations 2020

86 Schedule 1 (cell at item 66838, column 2)

Repeal the cell, substitute:

Quantification of either or both of total vitamin B12 and holotranscobalamin

Applicable not more than once in 11 months

87 Schedule 1 (cell at item 66839, column 2)

Repeal the cell, substitute:

Quantification of methylmalonic acid or homocysteine, rendered in the same patient episode as a service to which item 66838 applies if the result of that service is inconclusive or abnormal

Applicable not more than once in 11 months

88 Schedule 1 (after item 66841)

Insert:

66842	Quantification of one or more of total vitamin B12, holotranscobalamin, methylmalonic acid or homocysteine for a patient: (a) who: (i) is still experiencing symptoms of vitamin B12 deficiency 3 to 6 months after a service described in item 66838 or 66839 was rendered for the patient; or (ii) obtained inconclusive results from a service described in item 66839; or (b) to whom one or more of the following applies: (i) the patient has a diet low in vitamin B12; (ii) the patient has a family history of vitamin B12 deficiency or an autoimmune condition; (iii) the patient has previously had abdominal or pelvic radiotherapy; (iv) the patient has previously had surgery involving the gastrointestinal tract; (v) the patient uses, or has a recent history of using, recreational nitrous oxide; (vi) the patient requires monitoring of vitamin B12 treatment; (vii) the patient uses vitamin B12-antagonistic medicines; (viii) the patient has one or more clinical conditions with a recognised risk of vitamin B12 deficiency	23.60

89 Schedule 1 (cell at item 69333, column 2)

Repeal the cell, substitute:

Urine examination (including serial examinations), if:

(a) the patient has symptoms of urinary tract infection or kidney disease, or is a clinically-indicated asymptomatic patient who is:
(i) pregnant; or
(ii) less than 16 years of age; or
(iii) a renal transplant recipient; or
(iv) suffering from recurrent urinary tract infections; or
(v) being investigated or monitored for kidney disease; or

(vi) undergoing urinary tract instrumentation, a urological procedure or transurethral resection of the prostate; and

(b) the examination is performed by any means other than simple culture by dip slide, including:
(i) cell count; and
(ii) culture; and
(iii) colony count; and
(iv) (if performed) stained preparations; and
(v) (if performed) identification of cultured pathogens; and
(vi) (if performed) antibiotic susceptibility testing; and
(vii) (if performed) examination for pH, specific gravity, blood, protein, urobilinogen, sugar, acetone or bile salts

Part 4—Other amendments

Health Insurance Regulations 2018

90 Subsection 28(1) (table item 9, column 2)

After "228", insert ", 19000".

91 Subsection 28(1) (table item 18, column 2)

Before "699", insert "695,".

92 Section 44 (after table item 1)

Insert:

1A	I2	57410, 57413