
Medicare Benefits Schedule Review Taskforce

Taskforce Findings

Diagnostic Imaging Clinical Committee – Knee Imaging Report

This document outlines the Medical Benefits Schedule (MBS) Taskforce’s recommendations relating to knee imaging.

The Taskforce considered the recommendations from the Diagnostic Imaging Clinical Committee and feedback from public consultation on the knee imaging report.

The Taskforce endorsed most of the recommendations from the Diagnostic Imaging Clinical Committee relating to knee imaging and submitted them to the Minister for Health for Government consideration.

Number of items reviewed	22
Number of recommendations made	4

Taskforce recommendations

1. 63513 and 63514 – MRI scan knee

- △ For items 63513 and 63514, remove the current requirement of mandatory plain radiography before an MRI in patients under the age of 16 years.

2. 63560 and 63561 – MRI scan knee

- △ Remove the ability for a GP to request MRIs for patients over 50 years of age, but retain specialist requesting for any age group.
- △ Restrict the number of GP-referred MRIs to three per patient per annum.
- △ An intensive education program for GPs, radiologists, and consumers on the Medicare item descriptors and clinical indications for knee imaging.
- △ Review and audit activities for GPs and radiologists 12 months post-implementation to ensure the criteria for knee imaging are met.

3. 57518, 57521, 57535 and 57536 – X-ray of foot, ankle, leg, knee or femur

- △ Separate the MBS items for the knee from the current X-ray items, which encompass foot, ankle, leg, knee and femur.

4. 56619, 56625, 56659 and 56665 – CT scan of extremities

- △ Separate the MBS items for the knee from the current CT items, which encompass all extremities.