

Circumstances where constraints are applied to eligibility for the Medicare rebate

Test	Medicare Rule
Activated protein C resistance	In a patient with a history of venous thromboembolism OR in a first degree relative of a person who has a proven defect of antithrombin III, protein C, protein S or activated protein C resistance
Active B12 (holoTranscobalamin)	Only attracts a rebate if Vitamin B12 is low or equivocal
Antithrombin III	In a patient with a history of venous thromboembolism OR in a first degree relative of a person who has a proven defect of antithrombin III, protein C, protein S or activated protein C resistance
Amino acid quantitation. (plasma, CSF, urine)	Maximum of 4 tests in 12 months for diagnosis of inborn errors of metabolism
BCRABL, PML-RARA	In the diagnosis and monitoring of patients with laboratory evidence of: <ul style="list-style-type: none"> • acute myeloid leukaemia (AML) • acute promyelocytic leukaemia (APML) • acute lymphoid leukaemia (ALL) • chronic myeloid leukaemia (CML)
Bile acids	Maximum of 3 tests in a pregnancy
BRAF mutation analysis	For establishment of BRAF V600 mutation status in tumour tissue prior to dabrafenib or vemurafenib therapy in a patient with unresectable stage III or stage IV metastatic cutaneous melanoma, requested by or on behalf of the treating specialist
BRCA1/BCRA2	<p>In a patient with platinum-sensitive relapsed ovarian, fallopian tube or primary peritoneal cancer with high grade serous features or a high grade serous component, and who has responded to subsequent platinum-based chemotherapy. OR</p> <p>Characterisation of germline gene mutations, requested by a specialist or consultant physician, including copy number variation in BRCA1 and BRCA2 genes and one or more of the following genes STK11, PTEN, CDH1, PALB2, or TP53 in a patient with breast or ovarian cancer for whom clinical and family history criteria, as assessed by the specialist or consultant physician who requests the service using a quantitative algorithm, place the patient at >10% risk of having a pathogenic mutation identified in one or more of the genes specified above. OR</p> <p style="text-align: right;"><i>More over page...</i></p>

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	<p>Characterisation of germline gene mutations, requested by a specialist or consultant physician, including copy number variation in BRCA1 and BRCA2 genes and one or more of the following genes STK11, PTEN, CDH1, PALB2, or TP53 in a patient who is a biological relative of a patient who has a pathogenic mutation identified in one or more of the genes specified above.</p>
Cystic Fibrosis screen	<p>Testing of a patient for cystic fibrosis for the purpose of investigating, making or excluding a diagnosis of cystic fibrosis related disorder when requested by a specialist or consultant physician. The patient must have clinical or laboratory findings suggesting there is a high probability suggestive of cystic fibrosis or related disorder. OR</p> <p>Testing of a pregnant patient whose carrier status for cystic fibrosis, as well as their reproductive partner carrier status, is unknown, for the purpose of determining the risk of cystic fibrosis variants being present in the fetus, in order to make or exclude a diagnosis of cystic fibrosis or a related disorder in the fetus when requested by a specialist or consultant physician. The fetus must have ultrasonic findings of echogenic gut, with unknown familial cystic fibrosis variants. OR</p> <p>Testing of a patient with a laboratory-established family history of cystic fibrosis, for the purpose of determining whether the patient is an asymptomatic genetic carrier of the cystic fibrosis variants when requested by a specialist or consultant physician. The patient must have a personal risk of being a heterozygous genetic carrier of at least 6%. (This includes immediately family and first degree relatives but excludes relatedness of second cousins or more distant relationships). OR</p> <p>Testing of a patient for cystic fibrosis for the purpose of determining the reproductive risk of the patient with their reproductive partner because their reproductive partner is already known to have cystic fibrosis, as requested by a specialist or consultant physician. OR</p> <p>Testing of a pregnant patient, where one or both prospective parents are known to be a genetic carrier of cystic fibrosis for the purpose of determining whether cystic fibrosis variants are present in the fetus in order to make or exclude a diagnosis of cystic fibrosis or a related disorder in the fetus, when requested by a specialist or consultant physician. The fetus must be at 25% or more risk of cystic fibrosis or a related disorder because of known familial cystic fibrosis transmembrane conductance regulator variants.</p>

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Cu, Zn, Mn, Se (Copper, Zinc, Manganese, Selenium)	3 tests in 6 months
EGFR genetic testing	For establishment of EGFR gene status in tumour tissue prior to erlotinib, gefitinib or afatinib therapy in a patient with locally advanced or metastatic non-small cell lung cancer, requested by or on behalf of the treating specialist
Eosinophil Cationic Protein	Maximum of 3 tests in 12 months in the monitoring of corticosteroid therapy for asthma in a child under 12 years
Factor V Leiden PCR/ Prothrombin Gene mutation	In a patient with a history of venous thromboembolism OR in a first degree relative of a person who has a proven mutation of Factor V Leiden
Faeces culture	Maximum of 1 test in 7 days
Faeces ova, cysts, parasites	Maximum of 2 test in 7 days
First or second trimester screen	Maximum of 1 screen in a pregnancy. Note performed by VCGS who charge a fee.
FOBT	Maximum of 3 tests in 28 days
Fragile X PCR Gene Test	In a patient with intellectual disability, ataxia, neurodegeneration or premature ovarian failure, OR in a first degree relative of a person with a known mutation of Fragile X gene
Free T4 or Free T3	Medicare rebate only applies if any of the following criteria are recorded as clinical notes: <ul style="list-style-type: none"> • TSH is abnormal • Monitoring thyroid disease • Psychiatric investigations or dementia • Infertility investigation or amenorrhoea • Investigating sick euthyroid syndrome in an admitted patient • Pituitary dysfunction suspected • On drugs interfering with thyroid function or metabolism
Fructosamine	Maximum of 4 tests in 12 months in the management of established diabetes
Haemochromatosis gene testing	Detection of C282Y and other mutations in a patient with: <ul style="list-style-type: none"> • elevated transferrin saturation or elevated serum ferritin on repeat testing • a first degree relative with haemochromatosis • a first degree relative with homozygosity or compound heterozygosity for the C282Y genetic mutation or other recognised genetic mutations for haemochromatosis

Test	Medicare Rule
HbA1c	1 test per 12 months for diagnosis of diabetes in asymptomatic patients at high risk
HbA1c (in pregnancy)	Maximum of 6 tests in 12 months in the management of pre-existing diabetes where the patient is pregnant
HbA1c (in diabetes)	4 tests in 12 months for management of established diabetes
Hep B virus DNA - quantitative	<ul style="list-style-type: none"> • 1 test in 12 months if Hep B carrier and not on treatment • 4 tests in 12 months if Hep B carrier and on treatment
Hep C virus RNA - qualitative, for diagnosis	<p>Maximum of 1 test in a 12 months in the following circumstances:</p> <ul style="list-style-type: none"> • patient is Hepatitis C antibody positive • patient is Hepatitis C antibody indeterminate • testing of Hepatitis C status in an immunosuppressed or immunocompromised patient • detection of acute Hepatitis C prior to seroconversion where necessary for clinical management of the patient
Hep C virus RNA - qualitative, for monitoring	Maximum of 4 tests in 12 months in a patient undergoing anti-viral therapy for chronic Hepatitis C
Hep C virus PCR - quantitative (viral load)	<ul style="list-style-type: none"> • Pre-treatment evaluation for antiviral therapy for chronic Hepatitis C • OR assessment of efficacy of antiviral therapy (maximum 2 tests per 12 months)
Hep C virus genotype	<ul style="list-style-type: none"> • Patient is Hepatitis C PCR positive AND being evaluated for antiviral therapy for chronic Hepatitis C (maximum 1 test per 12 months)
HER2 genetic testing	For establishment of HER2 gene status in tumour tissue prior to trastuzumab therapy in a patient with breast cancer, requested by or on behalf of the treating specialist
HIV genotype	Maximum of 2 tests in 12 months
HoloTranscobalamin	1 test per 12 months Only attracts a rebate if Vitamin B12 is low or equivocal
IgE, total	<ul style="list-style-type: none"> • Maximum of 2 tests in 12 months • Maximum of 6 tests in 12 months in follow-up of a patient with IgE secreting-myeloma, allergic bronchopulmonary Aspergillosis, or proven congenital immunodeficiency
IgE, specific (RAST)	Maximum of 4 requests in 12 months for specific IgE to single or multiple allergens. (Max 4 tests/episode)

Test	Medicare Rule
JAK2 genetic testing	In a patient with clinical and laboratory evidence of polycythaemia vera or essential thrombocythaemia requested by or on behalf of the treating specialist
KRAS gene mutation	For establishment of KRAS gene mutation status in tumour tissue prior to cetuximab or panitumumab therapy in a patient with metastatic colorectal cancer, requested by or on behalf of the treating specialist
Lead	Maximum of 3 tests in 6 months except for testing for occupational lead exposure
Lipoprotein EPG for lipoprotein subclasses	Maximum of 2 tests in 12 months in the following circumstances: <ul style="list-style-type: none"> • If the cholesterol is >6.5 mmol/L and triglyceride >4.0 mmol/L • In the diagnosis of types III and IV hyperlipidaemia
Lymphocyte functional assay	Maximum of 2 tests in 12 months
Mn (manganese)	Maximum of 3 test in 6 months
Metals - nutritional &/or toxicity	Maximum of 3 tests in 6 months
MPL genetic testing	In a patient with clinical and laboratory evidence of polycythaemia vera or essential thrombocythaemia requested by or on behalf of the treating specialist
MTHFR mutation	In a patient with a history of venous thromboembolism or pulmonary embolism (DVT/PE) OR in a first degree relative of a person who has a proven mutation of MTHFR
Neutrophil function testing	Maximum of 2 tests in 12 months
NRAS gene mutation	For establishment of NRAS gene mutation status in tumour tissue prior to cetuximab or panitumumab therapy in a patient with metastatic colorectal cancer, requested by or on behalf of the treating specialist
Protein C	In a patient with a history of venous thromboembolism OR in a first degree relative of a person who has a proven defect of antithrombin III, protein C, protein S or activated protein C resistance
Protein electrophoresis (EPG)	Maximum of 1 test in 28 day period
Protein S	In a patient with a history of venous thromboembolism OR in a first degree relative of a person who has a proven defect of antithrombin III, protein C, protein S or activated protein C resistance

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Prothrombin gene mutation PCR	In a patient with a history of venous thromboembolism or pulmonary embolism (DVT/PE) OR in a first degree relative of a person who has a proven mutation of prothrombin gene
PSA - total (established prostate disease)	No limit Clinical history of previous prostatic disease must be noted on request form.
PSA - total (screening)	Maximum of 1 test in a 12 month period
PSA - free and total (ratio)	May be charged dependant on result. Maximum of 1 test in a 12 months for follow-up of previous total PSA result between age-related median value and upper reference limit Maximum of 4 tests in a 12 months for follow-up of previous total PSA result between age-related upper reference limit and <10µg/L Clinical history of previous abnormal PSA result must be noted on request form
RAST (Specific IgE)	4 requests in a 12 month period (Maximum 4 tests/episode)
Semen examination	Maximum of 4 tests in 12 months other than post-vasectomy semen examination
Selenium (Sn)	3 tests in 6 months
Thyroid Function Tests	For a patient, if at least one of the following conditions is satisfied: <ul style="list-style-type: none"> • the patient has an abnormal level of TSH • the tests are performed: <ul style="list-style-type: none"> - for the purpose of monitoring thyroid disease in the patient - to investigate the sick euthyroid syndrome if the patient is an admitted patient - to investigate dementia or psychiatric illness of the patient - to investigate amenorrhoea or infertility of the patient • the medical practitioner who requested the tests suspects the patient has a pituitary dysfunction • the patient is on drugs that interfere with thyroid hormone metabolism or function
Tumour Markers	AFP, CA 15.3, CA 125, CA 19.9, CEA, HCG, CASA, NSE, Thyroglobulin. Monitoring of malignancy, or in the detection or monitoring of hepatic tumours, gestational trophoblastic disease, or germ cell tumour. Maximum of 2 tests per episode

Test	Medicare Rule
Tuberculosis Quantiferon Gold	For the detection of latent tuberculosis in the following. <ul style="list-style-type: none"> • a person who has been exposed to a confirmed cases of active tuberculosis • a person who is infected with human immunodeficiency virus • a person who is to commence, or has commenced, tumor necrosis factor (TNF) inhibitor therapy • a person who is to commence, or has commenced, renal dialysis • a person with silicosis • a person who is, or is about to become, immunosuppressed because of a disease, or a medical treatment, not mentioned in the above.
Urinary drug screen (monitoring of drug abuse rehabilitation)	Maximum of 36 tests in 12 months
Vitamins A, B1, B2, B3, B6, C, E	1 request for 1 or more tests per 6 months
Vitamins B12	1 test per 12 months
Vitamin B12 Active	Only attracts a rebate if Vitamin B12 is low or equivocal
Vitamin D	For investigation of a patient who has one of the following: <ul style="list-style-type: none"> • has signs or symptoms of osteoporosis or osteomalacia • has increased alkaline phosphatase and otherwise normal liver function test • has hyperparathyroidism, hypo- or hypercalcaemia, or hypophosphataemia • is suffering from malabsorption (for example, because the patient has cystic fibrosis, short bowel syndrome, inflammatory bowel disease or untreated coeliac disease, or has had bariatric surgery) • has deeply pigmented skin, or chronic and severe lack of sun exposure for cultural, medical, occupational or residential reasons • is taking medication known to decrease 25OH-D levels (for example, anticonvulsants) • has chronic renal failure or is a renal transplant recipient • is less than 16 years of age and has signs or symptoms of rickets • is an infant whose mother has established vitamin D deficiency • is a exclusively breastfed baby and has at least one other risk factor mentioned in a paragraph in this item • has a sibling who is less than 16 years of age and has vitamin D deficiency
Zinc (Zn)	3 tests in 6 months