

Cardiac MRI – Medicare Criteria

Patients must be referred by a Specialist or Consultant Physician.

Item Number	Description
Scan of cardiovascular system for:	
63385 Payable on two occasions in any 12 month period	Congenital disease of the heart of a great vessel
63388	Tumour of the heart of a great vessel
63391	Abnormality of thoracic aorta
63395 Payable once in 12 months	Assessment of myocardial structure and function, if the request indicates that: <ul style="list-style-type: none"> • The patient presented with symptoms consistent with arrhythmogenic right ventricular cardiomyopathy (ARVC); OR • Investigative findings in relation to the patient are consistent with ARVC
63397 Payable once in 36 months	Assessment of myocardial structure and function, if the request indicates that: <ul style="list-style-type: none"> • The patient is asymptomatic; AND • Has one or more first degree relatives diagnosed with confirmed ARVC
63401 Payable on three occasions in any 12 month period	Vascular abnormality in a patient with a previous anaphylactic reaction to an iodinated contrast medium

To find locations where these complex scans can be performed, please visit our billing guide –

www.qldxray.com.au/billingguide

