



# New Medicare Benefits Schedule (MBS) item for faecal calprotectin testing for symptomatic patients with Inflammatory Bowel Disease

Last updated: 15 October 2025

- Effective from 1 November 2025 a new MBS item 66525 will be available for faecal calprotectin (FC) testing for the management of symptomatic patients with inflammatory bowel disease (IBD).
- The Medical Services Advisory Committee (MSAC) supported FC testing in symptomatic patients with IBD, to help determine whether symptoms are due to increased IBD activity, and for monitoring after an IBD flare.
- This change is relevant to medical practitioners managing symptomatic IBD patients, who will now be able to request testing under the new item 66525 for the management of their symptomatic patients with an established diagnosis of IBD.

## What are the changes?

The new item (66525) allows practitioners to request a Medicare funded pathology service for symptomatic diagnosed IBD patients to inform the management of their disease.

## Why are the changes being made?

As IBD can greatly affect a person's emotional and social wellbeing, [guidelines](#) recommend it be regularly monitored as part of standard management and treatment. In November 2024, the MSAC supported application 1761 for FC testing in patients with symptomatic inflammatory bowel disease (<https://www.msac.gov.au/applications/1761>). MSAC did not support the proposal for FC testing in asymptomatic patients.

IBD is not one disease but a group of conditions that are characterised by recurring inflammation of the gastrointestinal (GI) tract. These conditions include Crohn disease and ulcerative colitis. People with active IBD can have symptoms such as diarrhoea, stomach pain, weight loss and fatigue. If left untreated, IBD can lead to hospital admission, anaemia (when there are not enough red blood cells to carry oxygen around the body) and surgery, among other things.

## What does this mean for requestors?

To supplement the existing MBS items (66522/66523) for the diagnosis of IBD, the new test can be requested by a specialist or consultant physician, or any practitioner provided the patient is under the care of a specialist or consultant physician, for the management of

symptomatic patients with an established diagnosis of IBD. Existing MBS item 66522 is an FC test used for the diagnosis of IBD that can be requested by general practitioners, and item 66523 is for patients being treated by a Specialist Gastroenterologist, where the initial FC test was inconclusive. These tests are rendered by Approved Pathology Practitioners.

## How will these changes affect patients?

Subject to the passage of legislation, from 1 November 2025 patients diagnosed with IBD who are symptomatic will be able to access a Medicare benefit for a faecal test to support the management of their condition.

## Who was consulted on the changes?

MSAC consultation input to the application was from received from the following:

- Therapeutic Goods Administration
- The Royal College of Pathologists of Australasia (RCPA)
- Australian Pathology
- Gastroenterological Nurses College of Australia
- Crohn's and Colitis Australia
- Public Pathology Australia (PPA)
- National Pathology Accreditation Advisory Council (NPAAC)
- Gastroenterological Society of Australia
- The Royal Australian College of General Practitioners
- DiaSorin Australia
- Crohn's Colitis Cure

## How will the changes be monitored and reviewed?

Providers are responsible for ensuring Medicare services claimed using their provider number meet all legislative requirements. All Medicare claiming is subject to compliance checks and providers may be required to submit evidence about the services they bill. More information about the Department of Health, Disability and Ageing (the department's) compliance program can be found on its website at [Medicare compliance](#).

## Where can I find more information?

The full item descriptor(s) and information on other changes to the MBS can be found on the [MBS Online website](#). You can also subscribe to future MBS updates by visiting '[Subscribe to the MBS](#)' on the MBS Online website.

Providers seeking advice on interpretation of MBS items, explanatory notes and associated legislation can use the department's email advice service by emailing [askMBS@health.gov.au](mailto:askMBS@health.gov.au).

Private health insurance information on the product tier arrangements is available at [www.privatehealth.gov.au](http://www.privatehealth.gov.au). Detailed information on the MBS item listing within clinical categories is available on the [department's website](#). Private health insurance minimum accommodation benefits information, including MBS item accommodation classification, is available in the latest version of the *Private Health Insurance (Benefit Requirements)*

*Rules 2011* found on the [Federal Register of Legislation](#). If you have a query in relation to private health insurance, you should email [PHI@health.gov.au](mailto:PHI@health.gov.au).

Subscribe to '[News for Health Professionals](#)' on the Services Australia website to receive regular news highlights.

If you are seeking advice in relation to Medicare billing, claiming, payments, or obtaining a provider number, please go to the Health Professionals page on the Services Australia website or contact Services Australia on the Provider Enquiry Line – 13 21 50.

The data file for software vendors when available can be accessed via the [Downloads](#) page.

## New item descriptor (to take effect 1 November 2025)

### Category 6 – Pathology Services

#### Group P2 - Chemical

66525

Faecal Calprotectin test for the management of a symptomatic patient with diagnosed inflammatory bowel disease, requested by, or on behalf of, a specialist or consultant physician.

Fee: \$75.00 Benefit: 75% = \$56.25 85% = \$63.75

- Private Health Insurance Classification:
- Clinical category: Support list (pathology)
- Procedure type: Type C

Please note that the information provided is a general guide only. It is ultimately the responsibility of treating practitioners to use their professional judgment to determine the most clinically appropriate services to provide, and then to ensure that any services billed to Medicare fully meet the eligibility requirements outlined in the legislation.

This factsheet is current as of the Last updated date shown above and does not account for MBS changes since that date.