Retinal Photography with a Non-Mydriatic Retinal Camera

On November 1, 2016, the Australian government introduced two Medicare Benefits Schedule (MBS) item numbers - 12325 and 12326 - enabling general practitioners and specialists managing patients’ diabetic care to claim a rebate for obtaining retinal photographs to detect diabetic retinopathy.

**Background**

- This service is separated into two items, MBS item 12325 and MBS item 12326, in line with the National Health and Medical Research Council (NHMRC) guidelines for the recommended frequency of repeat testing in persons of Aboriginal and Torres Strait Islander descent and the general population.
- This item is intended for the provision of retinal photography with a non-mydriatic (no pupil dilation) retinal camera; mydriasis (pupil dilation) is permitted if adequate photographs cannot be obtained through an undilated pupil.

**Item 12325**

Assessment of visual acuity and bilateral retinal photography with a non-mydriatic retinal camera, including analysis and reporting of the images for initial or repeat assessment for presence or absence of diabetic retinopathy, in a patient with medically diagnosed diabetes, if:

a) the patient is of Aboriginal and Torres Strait Islander descent; and

b) the assessment is performed by the medical practitioner (other than an optometrist or ophthalmologist) providing the primary glycaemic management of the patient’s diabetes;

c) this item and item 12326 have not applied to the patient in the preceding 12 months; and

d) the patient does not have:

i. an existing diagnosis of diabetic retinopathy; or

ii. visual acuity of less than 6/12 in either eye; or

iii. a difference of more than 2 lines of vision between the 2 eyes at the time of presentation.

**Item 12326**

Assessment of visual acuity and bilateral retinal photography with a non-mydriatic retinal camera, including analysis and reporting of the images for initial or repeat assessment for presence or absence of diabetic retinopathy, in a patient with medically diagnosed diabetes, if:

a) the assessment is performed by the medical practitioner (other than an optometrist or ophthalmologist) providing the primary glycaemic management of the patient’s diabetes;

b) this item and item 12325 have not applied to the patient in the preceding 24 months; and

c) the patient does not have:

i. an existing diagnosis of diabetic retinopathy; or

ii. visual acuity of less than 6/12 in either eye; or

iii. a difference of more than 2 lines of vision between the 2 eyes at the time of presentation.

Presenting distance vision means unaided distance vision or the vision obtained with the current spectacles or contact lenses, if normally worn for distance vision.

Detection of any diabetic retinopathy should be followed by referral to an optometrist or ophthalmologist in accordance with the NHMRC guidelines.

Where the images are of inadequate quality for the detection of diabetic retinopathy, referral to an optometrist or ophthalmologist for further assessment is indicated.