

Unattached Operating Theatre Units 2009

NATIONAL REFERENCE PRICE LIST IN RESPECT OF UNATTACHED OPERATING THEATRE UNITS AND DAY CLINICS WITH A PRACTICE NUMBER COMMENCING WITH '76' WITH EFFECT FROM 1 JANUARY 2009

The following reference price list is not a set of tariffs that must be applied by medical schemes and/or providers. It is rather intended to serve as a baseline against which medical schemes can individually determine benefit levels and health service providers can individually determine fees charged to patients. Medical schemes may, for example, determine in their rules that their benefit in respect of a particular health service is equivalent to a specified percentage of the national health reference price list. It is especially intended to serve as a basis for negotiation between individual funders and individual health care providers with a view to facilitating agreements which will minimise balance billing against members of medical schemes. Should individual medical schemes wish to determine benefit structures, and individual providers determine fee structures, on some other basis without reference to this list, they may do so as well.

In calculating the prices in this schedule, the following rounding method is used: Values R10 and below rounded to the nearest cent, R10+ rounded to the nearest 10cent. Modifier values are rounded to the nearest cent. When new item prices are calculated, e.g. when applying a modifier, the same rounding scheme should be followed.

VAT EXCLUSIVE PRICES APPEAR IN BRACKETS.

GENERAL RULES

A	It is recommended that, when such benefits are granted, drugs, consumables and disposable items used during a procedure or issued to a patient on discharge will only be reimbursed by a medical scheme if the appropriate code is supplied on the account.	04.00
C	All accounts submitted by unattached operating theatre units/day clinics shall comply with all of the requirements in terms of the Medical Schemes Act, Act No. 131 of 1999. Where possible, such accounts shall also reflect the practice code numbers and names of the surgeon, the anaesthetist and of any assistant surgeon who may have been present during the course of an operation.	04.00
D	All accounts shall be accompanied by a copy of the relevant theatre accounts specifying all details of items charged, as well as all the procedures performed. Photocopies of all other documents pertaining to the patients account must be provided on request. Medical schemes shall have the right to inspect the original source documents at the rehabilitation hospital concerned.	04.00
E	All accounts containing items which are subject to a discount in terms of the recommended benefit shall indicate such items individually and shall show separately the gross amount of the discount.	04.00
F	Accommodation fees includes the services listed below: A. The minimum services that are required are items 3, 5 and 6. B. If managed care organisations or medical schemes request any of the other services included in this list, no additional charge may be levied by the hospital. 1 Pre-authorisation (up to the date of admission) of: · length of stay · level of care · theatre procedures 2 Provision of ICD-10 and CPT-4 codes when requesting pre-authorisation 3 Notification of admission 4 Immediate notification of changes to: · length of stay · level of care · theatre procedures 5 Reporting of length of stay and level of care · In standard format for purposes of creating a minimum dataset of information to be used in defining an alternative reimbursement system. 6 Discharge ICD-10 and CPT-4 coding · In standard format for purposes of creating a minimum dataset of information to be used in defining an alternative reimbursement system. · Including coding of complications and co-morbidity. To be done as accurately as practically possible by the hospital. 7 Case management by means of standard documentation and liaison between scheme and hospital appointed case managers · Liaison means communication and sharing of information between case managers, but does not include active case management by the hospital.	04.00

SCHEDULE

9 UNATTACHED OPERATING THEATRE UNITS AND DAY CLINICS WITH A PRACTICE NUMBER COMMENCING WITH '76'					
Code	Description	Ver	Add	Unattached operating theatres / Day clinics	
				RVU	Fee
005	Local anaesthetic theatre, Per minute	04.00		0.294	8.92 (7.82)
010	General anaesthetic theatre, Per minute	04.00		0.923	28.00 (24.60)
015	Dental anaesthetic theatre (Applicable to units registered for dental procedures only), Per minute	04.00		0.623	18.90 (16.60)
061	Excimer laser theatre fee, per minute	04.00		0.662	20.10 (17.60)

Code	Description	Ver	Add	Unattached operating theatres / Day clinics	
				RVU	Fee
Ward fees (including recovery room)					
019	Out-patients facility fee for ambulatory admission - chargeable for patients NOT requiring general anaesthetic- No ward fees applicable. Definition: Item 019 may only be used in conjunction with item 071 which is for pre-booked patients and may not be used in conjunction with items 301, 302, 061 and 335.	04.00		10.850	329.10 (288.70)
025	Day rate.	04.00		12.442	377.40 (331.10)
Emergency units					
035	Theatre drugs The amount charged in respect of medicines and scheduled substances shall not exceed the limits prescribed in the Regulations Relating to a Transparent Pricing System for Medicines and Scheduled Substances, dated 30 April 2004, made in terms of the Medicines and Related Substances Act, 1965 (Act No 101 of 1965).	04.00		-	-
301	For all consultations including those requiring basic nursing input, e.g. BP measurement, urine testing, application of simple bandages, administration of injections.	04.00		-	-
302	For all consultations which require the use of a procedure room or nursing input, e.g. for application of plaster of Paris, stitching of wounds, insertion of IV Therapy. Includes the use of the procedure room. No per minute charge may be levied.	04.00		10.700	324.60 (284.70)
Non-chargeable items (1)					
040	Theatre items: Refer to Appendix B.	05.03		-	-
Non chargeable items (2)					
060	Wards: Refer to Appendix B.	05.03		-	-
THE CHARGE FOR A MONITOR HAS BEEN INCLUDED IN THE THEATRE FEE. NO EXTRA CHARGE IS PAYABLE					
STANDARD CHARGES FOR EQUIPEMENT AND MATERIALS					
227	Operating microscope - motorised. This is applicable to a binocular operating microscope with motorised focusing, positioning and zoom magnification changer. Spinal, intra-cranial and ophthalmic surgery only (all ENT and other surgery excluded): Per case	04.00		10.773	326.80 (286.70)
228	Operating microscope - manually operated. Applicable to a binocular operating microscope with manual focusing, positioning and multistep magnification changer. Microscopic surgery only: Per case	04.00		5.327	161.60 (141.80)
335	Excimer laser: Hire fee per eye	04.00		75.258	2283.00 (2002.70)
337	Microkeratome used with an excimer laser, per operation	04.00		13.823	419.30 (367.80)
GASES					
Oxygen and Nitrous Oxide					
	For both gases together, per minute				04.00
283	PWV area	04.00		0.112	3.40 (2.98)
701	Cape Town	04.00		0.154	4.67 (4.10)
702	Port Elizabeth	04.00		0.137	4.16 (3.65)
703	East London	04.00		0.151	4.58 (4.02)
704	Durban	04.00		0.140	4.25 (3.73)
705	Other areas	04.00		0.125	3.79 (3.33)
Oxygen, ward use					
	Fee for oxygen, per quarter hour or part thereof, outside the operating theatre complex				04.00
284	PWV area	04.00		0.164	4.98 (4.36)
710	Cape Town	04.00		0.273	8.28 (7.26)
711	Port Elizabeth	04.00		0.262	7.95 (6.97)
712	East London	04.00		0.252	7.64 (6.71)
713	Durban	04.00		0.213	6.46 (5.67)
714	Other areas	04.00		0.203	6.16 (5.40)
Oxygen, recovery room and emergency units					
	Flat rate for oxygen per case				04.00
720	PWV area	04.00		0.327	9.92 (8.70)
721	Cape Town	04.00		0.542	16.40 (14.40)
722	Port Elizabeth	04.00		0.519	15.70 (13.80)
723	East London	04.00		0.500	15.20 (13.30)
724	Durban	04.00		0.427	13.00 (11.40)
725	Other areas	04.00		0.404	12.30 (10.80)

Code	Description	Ver	Add	Unattached operating theatres / Day clinics	
				RVU	Fee
Oxygen in Theatre					
	Fee for oxygen per minute in the operating theatre when no other gas administered.				04.00
730	PWV area	04.00		0.010	0.30 (0.26)
731	Cape Town	04.00		0.018	0.55 (0.48)
732	Port Elizabeth	04.00		0.017	0.52 (0.45)
733	East London	04.00		0.017	0.52 (0.45)
734	Durban	04.00		0.014	0.42 (0.37)
735	Other areas	04.00		0.013	0.39 (0.34)
Carbon Dioxide					
291	Per minute	04.00		0.020	0.61 (0.53)
Laser					
292	Per minute	04.00		0.392	11.90 (10.40)
Entonox					
293	Per 30 minutes	04.00		3.731	113.20 (99.30)
Inhalation anaesthetics					
	All prices will be expressed per millilitre and will be based on the Single Exit Price (SEP)				08.00
285	Halothane (Halothane): per ml	08.00		-	-
752	Ethrane (Enflurane): per ml	08.00		-	-
753	Forane (Isoflurane): per ml	08.00		-	-
754	Isofor (Isoflurane); per ml	08.00		-	-
755	Ultane (Sevoflurane): per ml	08.00		-	-
756	Suprane (Desflurane); per ml	08.00		-	-
757	Aerrane (Isoflurane): per ml	08.00		-	-
758	Alyrane (enflurane): per ml	08.00		-	-
759	Fluothane (Halothane): per ml	08.00		-	-
ANNEXURES					
	APPENDIX A				05.03
	LAPAROSCOPIC AND THORACOSCOPIC CPT CODES AND CATEGORIES				
	CATEGORY 1 (CPT4 2000 code numbers included where possible)				
	Diagnostic laparoscopy (49320)				
	Laparoscopy, surgical; with fulgeration of oviducts (with/without transection) (58670)				
	Laparoscopy, surgical; with occlusion of oviducts (e.g.band, clip, Falope ring) (58771)				
	Hysteroscopy diagnostic (58555)				
	Hysteroscopy, with sampling of endometrium and/or polypectomy, with/without D&C (58558)				
	THORACOSCOPY, DIAGNOSTIC				
	THORACOSCOPY, DIAGNOSTIC with biopsy				
	THORACOSCOPY, DIAGNOSTIC lungs and pleural space, with biopsy				
	THORACOSCOPY, DIAGNOSTIC pericardial sac, without biopsy				
	THORACOSCOPY, DIAGNOSTIC pericardial sac with biopsy				
	THORACOSCOPY, DIAGNOSTIC mediastinal space without biopsy				
	THORACOSCOPY, DIAGNOSTIC mediastinal space with biopsy				
	CATEGORY 2				
	Laparoscopy, surgical; with salpingostomy (salpingoneostomy) (58673)				
	Laparoscopy, surgical; with fimbrioplasty (58672)				
	Laparoscopy, surgical; with fulgeration or excision of the ovary, pelvic viscera or peritoneal surface, any method (58662)				
	Laparoscopy, surgical; with lysis of adhesions (changed 1998 to salpigolysis, ovariolysis) (58660)				
	Laparoscopy, surgical; with removal leiomyomata (58551)				
	Laparoscopy surgical; withenterolysis (freeing intestinal adhesion) (44200)				
	Laparoscopy, surgical; with retroperitoneal node sampling (biopsy) (38570)				
	Laparoscopy,surgical, abdomen, peritoneum, omentum; with drainage lymphocele to peritoneal cavity (49323)				
	Laparoscopy, surgical; appendectomy (44970)				
	Laparoscopy, surgical, abdomen, peritoneum and omentum; with biopsy (49321)				
	Laparoscopy, surgical, abdominal, peritoneum and omentum; with aspiration of cavity or cyst (e.g. ovarian cyst) single or multiple (49322)				
	Laparoscopy, surgical; with removal of adnexal structures (partial or total oophorectomy and/or salpingectomy) (58661)				
	Laparoscopy, surgical; orchiopexy for intra-abdominal testis (54692)				
	Laparoscopy, surgical; ligation spermatic veins for varicocele (55550)				
	Laparoscopy, surgical; ablation of renal cysts (50541)				
	Laparoscopy, surgical; urethral suspension for stress incontinence (51990)				
	Laparoscopy, surgical; sling operation for stress incontinence (51992)				
	Hysteroscopy with lysis intra-uterine adhesions (58559)				

Code	Description	Ver	Add	Unattached operating theatres / Day clinics	
				RVU	Fee
	Hysteroscopy with removal impacted foreign body (58562)				
	Hysteroscopy with removal leiomyomata \ (58561)				
	Hysteroscopy with endometrial ablation \ (58563)				
	Laparoscopic treatment of ectopic pregnancy, without salpingectomy and/or oophorectomy (59150)				
	Laparoscopic treatment of ectopic pregnancy; with salpingectomy and/or oophorectomy (59151)				
	Laparoscopy, surgical; with vaginal hysterectomy. (Lap assisted vag. Hyst) (58550)				
	Laparoscopy, surgical; with bilat. Total pelvic lymphadenectomy (38571)				
	Laparoscopy, surgical; with bilat. Total pelvic lymphadenectomy and peri-aortic lymph node sampling (biopsy) (38572)				
	Laparoscopy with adrenalectomy (60650)				
	Laparoscopy, surgical; pyeloplasty (50544)				
	Laparoscopy, surgical; nephrectomy (50540)				
	Laparoscopy, surgical; donor nephrectomy (50547)				
	Laparoscopically assisted nephroureterectomy (50548)				
	Laparoscopy, surgical, ureterolithotomy 50945)				
	Laparoscopy, surgical; transection of Vagus nerve, truncal (43651)				
	Laparoscopy, surgical; transection of Vagus nerves, selective or highly selective (43652)				
	Laparoscopy, surgical; with guided transhepatic cholangiography, without biopsy (47560)				
	Laparoscopy, surgical; with guided transhepatic cholangiography, with biopsy (47561)				
	Laparoscopy, surgical; cholecystoenterostomy (47570)				
	Laparoscopy, surgical; cholecystectomy with cholangiography (47563)				
	Laparoscopy, surgical; cholecystectomy with explor, common bile duct (47564)				
	Laparoscopy, surgical; splenectomy (38120)				
	Laparoscopy, surgical; gastrostomy, without construction of gastric tube (e.g. Stamm procedure) (43653)				
	Laparoscopy, surgical; jejunostomy (44201)				
	Laparoscopy, surgical; intestinal resection, with anastomosis (44202)				
	Laparoscopy, surgical; oesophagogastric fundoplasty eg Nissen, Toupet procedures) (43280)				
	Unlisted laparoscopic procedure, uterus (58578)				
	Unlisted hysteroscopy procedure, uterus (58579)				
	Unlisted laparoscopic procedure, oviduct, ovary (58679)				
	Unlisted laparoscopic spleen procedure (38129)				
	Unlisted laparoscopic lymphatic procedure (38589)				
	Unlisted laparoscopic oesophagus procedure (43289)				
	Unlisted laparoscopic stomach procedure (43659)				
	Unlisted laparoscopic intestinal procedure (except rectum) (44209)				
	Unlisted laparoscopic appendix procedure (44979)				
	Unlisted laparoscopic biliary tract procedure (47579)				
	Unlisted laparoscopy procedure, abdomen, peritoneum & omentum (49329)				
	Unlisted laparoscopic hernia procedure (49659)				
	Unlisted laparoscopic renal procedure (50549)				
	Unlisted laparoscopic procedure, testis (54699)				
	Unlisted laparoscopic procedure, spermatic cord (55559)				
	Unlisted laparoscopic procedure, maternity care and delivery (59898)				
	Unlisted laparoscopic endocrine procedure (60659)				
	THORACOSCOPY, SURGICAL				
	THORACOSCOPY, SURGICAL pleurodesis				
	THORACOSCOPY, SURGICAL partial pulmonary decortication				
	THORACOSCOPY, SURGICAL total pulm. Decortication				
	THORACOSCOPY, SURGICAL removal interpleural foreign body				
	THORACOSCOPY, SURGICAL control traum. Haemorrhage				
	THORACOSCOPY, SURGICAL exc./plication bullae				
	THORACOSCOPY, SURGICAL parietal pleurectomy				
	THORACOSCOPY, SURGICAL wedge resection				
	THORACOSCOPY, SURGICAL removal clot/foreign body from pericardial space				
	THORACOSCOPY, SURGICAL creation pericardial window				
	THORACOSCOPY, SURGICAL total pericardectomy				
	THORACOSCOPY, SURGICAL exc pericard. Cyst, tumor, mass				
	THORACOSCOPY, SURGICAL exc mediastinal cyst, tumor, mass				
	THORACOSCOPY, SURGICAL lobectomy, total or segmental				
	THORACOSCOPY, SURGICAL with sympathectomy				
	THORACOSCOPY, SURGICAL with esophagomyotomy				
	New codes for Category 2				
	CPT42000 CPT4 2001				
	Laparoscopy, surgical; radical nephrectomy 50545				
	Laparoscopy, surgical; nephrectomy including partial ureterectomy 50546				
	Laparoscopy, surgical; nephrectomy with total ureterectomy 50548				
	Laparoscopy, surgical; ureteroneocystostomy with cystoscopy and ureteral stent placement 50948				
	Laparoscopy, surgical; ureteroneocystostomy without cystoscopy and ureteral stent placement 50948				
	Unlisted laparoscopic procedure, ureter 50949				
	APPENDIX B			05.03	
	PRINCIPLES				
	The following principles are applicable:				

Code	Description	Ver	Add	Unattached operating theatres / Day clinics																											
				RVU	Fee																										
	<p>1. At all times best clinical practice must be adhered too.</p> <p>2. Items listed in the Recommended Guide to Reimbursement for Consumable and Disposable Items Charged by Private Hospitals and Same Day Surgery Facilities are described generically according to product classification and function. Trade names may be included, by means of example, for clarification purposes only. Photocopies of all documents pertaining to the patients account must be provided on request. Medical schemes shall have the right to inspect the original source documentation at the hospital/sameday surgical facilities concerned. The Recommended Guide to Reimbursement for Consumable and Disposable Items Charged by Sub-Acute Facilities, Private Hospitals and Sameday Surgery Facilities will be reviewed half-yearly.</p> <p>3. The cost of consumable and disposable items used on a patient in a hospital must be recovered by means of a charge mechanism as follows:</p> <p>¢ Items included in the per minute theatre fee.</p> <p>¢ Items included in the per day ward or unit fee.</p> <p>¢ Items are charged to the patient's account where reimbursement is not granted by a medical scheme.</p> <p>4. Any agreed difference on the basic interpretation of the Recommended Guide to Reimbursement for Consumable and Disposable Items Charged by Private Hospitals and Same Day Surgery Facilities list will be made in accordance with the approval of the duly appointed representatives of the individual contractor, medical aid, MCO and representatives of private hospitals. Such approval shall be ratified in writing and circulated to all parties concerned. Where the hospital uses an excessively priced product, a review process should be conducted, and appropriate price adjustment made.</p> <p>5. Disposable items are single use only and must never be reused.</p> <p>¢ Single use items will be charged at 100%.</p> <p>¢ Hospitals will sign an ethical undertaking that single use items will only be used once. If a hospital does not conform it may be reported to the group head office. If an acceptable explanation is not supplied within 14 days, payment on that account may be withheld.</p> <p>6. Limited life re-usable products are products intended for multiple use and endorsed as such by the manufacturers. Such products will be charged according to the "Fractional" charges as detailed and are under continual review. The item will be considered life re-usable (limited multiple use) if it can re re-used less than 100 times (endorsed as such by the manufacturer).</p> <p>7. Where a hospital uses an excessively priced product, a review process with the parties as listed under 3 above should be conducted, and appropriate price adjustment made.</p> <p>8. TTO's will be issued and charged according to the rules of the scheme.</p> <p>9. All prescribed items will be recoverable according to the rules of the scheme.</p> <p>Key Indicators</p> <p>The different key indicators in the Recommended Guide to Reimbursement for Consumable and Disposable Items charged by Private Hospitals and Same Day Surgery Facilities List are as follows:</p> <p>All prescribed items dispensed in wards or theatre are fully recoverable according to scheme's rules.</p> <table border="0"> <thead> <tr> <th>Key</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>THR</td> <td>Theatre consumable and disposable items</td> </tr> <tr> <td>WRD</td> <td>Ward consumable and disposable items</td> </tr> <tr> <td>NR</td> <td>Item is non-recoverable</td> </tr> <tr> <td>C</td> <td>Item is chargeable under certain circumstance</td> </tr> <tr> <td>R</td> <td>Item is recoverable</td> </tr> <tr> <td>P</td> <td>Item is recoverable from patient</td> </tr> <tr> <td>F</td> <td>Fractional (re-usable) and is charged out on a pro-rata basis (as per 5.5.1-5.5.4).</td> </tr> <tr> <td>N/A</td> <td>Not used/not applicable</td> </tr> <tr> <td>Disposable</td> <td>Means the manufacturer states one time use only. S/U(Single use) Item =Payable 100%</td> </tr> <tr> <td>Medical Prescribed Meals</td> <td>See List</td> </tr> <tr> <td>Practice Code</td> <td>References to the NRPL-HS includes 57/58, 76 and 77</td> </tr> </tbody> </table>					Key	Description	THR	Theatre consumable and disposable items	WRD	Ward consumable and disposable items	NR	Item is non-recoverable	C	Item is chargeable under certain circumstance	R	Item is recoverable	P	Item is recoverable from patient	F	Fractional (re-usable) and is charged out on a pro-rata basis (as per 5.5.1-5.5.4).	N/A	Not used/not applicable	Disposable	Means the manufacturer states one time use only. S/U(Single use) Item =Payable 100%	Medical Prescribed Meals	See List	Practice Code	References to the NRPL-HS includes 57/58, 76 and 77		
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	APPENDIX C				05.03																										
	Infectious Diseases																														

Code	Description	Ver	Add	Unattached operating theatres / Day clinics		
				RVU	Fee	
Fibre, Peptisorb MODULAR	Pulmonary Insufficiency	Nutren Diabetes Pulmocare				
	Renal Failure HIV/Aids	Supportan Suplena Advera				
	Cancer Patients	Survimed OPD Supportan Supportan drink (Milk Coffee), Stresson Multi				
	Protein	Promod				
	MCT Oil	Protifar MCT Oil				
	Glutamine	Fresubin 750MCT(HP Energy) Glutapack-10 Dipeptiven 50ml & 100ml				
	Food thickener	Thick & Easy				
	Carbohydrate	Fantomalt Polycose				
	Note: Or generic equivalents. All tubes feeds subject to Case Management					