



COUNCIL FOR MEDICAL SCHEMES

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To:

All medical schemes, administrators, health care
provider organizations and other interested
parties

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Date: 30 May 2006

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NATIONAL HEALTH REFERENCE PRICE LIST 2006: VERSION 2006.07 RADIOLOGY

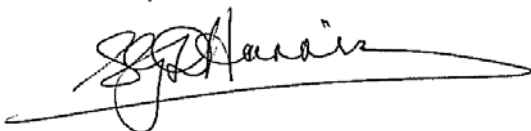
1. It is our intention to shortly publish Version 2006.07 of the National Health Reference Price List (NHRPL) to take effect on 1 July 2006. We are however releasing the proposed changes to the radiology schedule in advance of the version release, for stakeholders to plan for the implementation thereof – and to provide urgent feedback if major problems with the proposed structure are identified. The Excel version of the schedule may be accessed via the following link:
<http://www.medicalschemes.com/publications/publications.aspx?catid=25&selectId=70>
2. The specific changes to the radiology schedule entail the splitting of interventional radiology codes into technical component (TC) and professional component (PC) codes, as advised in Circulars 70 of 2005 and 15 of 2006, with the use of the PC codes opened for use by vascular surgeons (PCNS practice type 042 004). This is an INTERIM measure for the remainder of 2006.
3. Feedback on application of split TC/PC codes will be evaluated with possible extended application in the NHRPL in future – or removal in 2007, depending on feedback. Clearly the values of these codes as well as the TC/PC ratio will be subject to more intensive scrutiny in the 2007 NHRPL review process too.
4. Currently, we understand that vascular surgeons are using some of the items from the current radiology structure, although not with use of own equipment. To develop a model for rationalising this, the units of these items were split into a professional and a technical component.

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5. The current radiology item number (5-digit code) was used and a "1" was added to the end of that item number (making it 6 digits) to indicate the professional component and for the technical component a "2" was added to the end of that 5-digit code.
6. Therefore, for example, the units allocated to radiology code 10500 (Arteriography of intracranial vessels: 1-2 vessels) was split into a professional component code namely 105001 and a technical component code namely 105002.
7. When the vascular surgeon charges for the professional component only he/she will use code 105001 to indicate that the professional component was performed by the vascular surgeon. In this case the radiologist will use code 105002 to indicate that he/she only used the technical component for this specific service.
8. Should the radiologist perform both the professional and the technical component he/she will charge both code 105001 (professional component) and code 105002 (technical component). The 5-digit code 10500 which currently contain units for both the professional and the technical component as one value, is deleted from the radiology structure in the proposed version 2006.07 deleted and is replaced by the two codes namely 105001 and 105002.
9. Vascular surgeons using these new 6-digit codes, may only use these new codes for the specific procedures. They may not use the current codes from the medical practitioner structure. They may also not use combinations of the old and the new codes where new codes for endovascular procedures are published in the NHRPL for Radiology, applicable from 1 July 2006. However, the 6-digit codes do not include the after-care, and consultations/visits may be charged for.
10. If there are major problems with the proposed structure which will significantly affect the potential to practically implement with effect from 1 July 2006, please email these comments to s.harrison@medicalschemes.com by Tuesday 6 June 2006. In considering these comments, however, note will be taken of the fact that notice of these intended changes was provided in December 2005, by way of Circular 70 of 2005 and in March 2006, by way of Circular 15 of 2006.

Sincerely



Stephen Harrison
SENIOR SPECIALIST: POLICY AND SPECIAL PROJECTS

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