



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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National Health Reference Price List (NHRPL):

BILLING GUIDELINES: CHEMOTHERAPY CODES IN MEDICAL PRACTITIONER SCHEDULE

1. Various funders have expressed concern over the financial impact of the new chemotherapy codes introduced into the medical practitioner schedule of the NHRPL in 2005 – although we are not yet in a position to definitively determine impact of these codes.
2. To the extent that problems that may exist might relate to inconsistency in billing on these codes, the South African Society of Clinical and Radiation Oncology (SASCRO) and the South African Society of Medical Oncology (SASMO) have a set of billing guidelines which describes how these codes should be used – to which providers should be adhering.
3. Below please find a copy of these guidelines for 2005 (Annexure A), as well as a revised set for 2006 (Annexure B), when the new infusional pharmacotherapy code (5783) comes into effect.
4. If you have comments or suggestions on these guidelines, or other issues relating to application or structure of these codes, please provide details of this so that we can address them with SAMA, SASMO and SASCRO.

Sincerely

Stephen Harrison

Chairperson: Prof. Nicky Padayachee Vice-Chairperson: Ms Gando Matyumza Chief Executive & Registrar: Patrick Masobe

A STATUTORY BODY ESTABLISHED IN TERMS OF THE MEDICAL SCHEMES ACT, 1998 (ACT 131 OF 1998)

**SENIOR SPECIALIST: POLICY AND SPECIAL
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CODE DESCRIPTIONS, INTERPRETATION AND GUIDELINES.

NON INFUSIONAL CHEMOTHERAPY

1. **Non Infusional Chemotherapy Fee - Code 5790** - Global Fee for the management of and for related services delivered in the treatment of cancer with oral chemotherapy, intramuscular (IMI) or subcutaneous (SC), intrathecal or bolus chemotherapy or oncology specific drug administration - for exclusive use by doctors with appropriate oncology training (consultations to be charged separately) (not applicable to oral hormonal therapy).
 - a. This code should be used to charge where oncological medications, necessary for the treatment of cancer are used and where cancer patients are managed by doctors who are suitably qualified and experienced in:
 - i. Oral chemotherapy - per cycle (every three to four weeks)
 - ii. Intramuscular hormonal or chemo therapy - per cycle (every three to four weeks, irrespective of number of administrations)
 - iii. Subcutaneous - per cycle every three to four weeks, irrespective of number of administrations
 - iv. Intrathecal - per day of administration

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- v. Bolus IVI chemotherapy and ancillary, supportive IVI therapy - per day of administration
- b. Oral steroids, as part of the chemotherapy treatment as well as antiemetics (oral and intravenous) are given together with intravenous or oral chemo, therefore the charge is only once and for the main therapy given.
- c. In the situation of rehydration or the use of IVI antiemetics and/or steroids for intractable nausea and vomiting, this code is not applicable. In that circumstance, the consultation, as well as the materials and medicines used are chargeable.
- d. Code 5790 can be charged with any one of codes 5791 or 5792.
- e. If the drugs are obtained and procured through a third party, code 5791 (and 5790), should be charged. (See below interpretation of code 5791).
- f. If the drugs are bought by the practice and sold to the patients, code 5792 (and 5790) should be charged (see below interpretation of code 5792).

2. Non Infusional Chemotherapy Facility Fee - Code 5791 - A facility where oncology medicines are procured or scripted for oral chemotherapy, intramuscular (IMI), subcutaneous, intrathecal or bolus chemotherapy or oncology specific drug administration per treatment day. This fee is chargeable by doctors with appropriate oncology training who own or rents the facility, and by others e.g. hospitals or clinics that provide the services as per the appropriate billing structure. Said facilities are to be accredited under the auspices of SASMO and/or SASCRO - to be used in conjunction with item 5790 - only one of the parties is to charge this fee. (Not applicable to oral hormonal therapy)

- a. This code can be used by one of the doctor or the hospital where they have procured (not bought) the oncological drugs from a third party and supplies or administers the treatment drugs.

- b. Can be charged with code 5790.
- c. Same charging rules apply as per 1(a)(i) through 1(a)(v)
- d. It does apply to oral chemotherapy but not oral hormonal therapy.
- e. NB: Non infusional (Code 5790-2) is the term used for the administration of oral, intrathecal, subcutaneous and intramuscular oncology and oncology specific medications. It also applies to bolus and push intravenous therapies which do not require a long intravenous technique, (usually described as more than 30 minutes).

3. Non Infusional Chemotherapy Facility Fee - Code 5792 - A facility where oncology medicines are purchased, stored and dispensed during oral chemotherapy (per cycle), intramuscular (IMI), subcutaneous, intrathecal or bolus chemotherapy or oncology specific drug administration per treatment day. This fee is chargeable by doctors with appropriate oncology training who own or rent the facility, and by others e.g. hospitals or clinics that provide the services as per the appropriate billing structure. Said facilities are to be accredited under the auspices of SASMO and/or SASCRO (to be used in conjunction with item 5790) - only one of the parties is to charge this fee. (Not applicable to oral hormonal therapy).

- a. Can be charged by one of the doctor or the hospital who buy the drugs and sell them to the patient.
- b. Can be charged with code 5790.
- c. Same charging rules apply as per 1(a)(i) through 1(a)(v)
- d. It does apply to oral chemotherapy but not oral hormonal therapy.
- e. NB: Non infusional (Code 5790-2) is the term used for the administration of oral, intrathecal, subcutaneous and intramuscular

oncology and oncology specific medications. It also applies to bolus and push intravenous therapies which do not require a long intravenous technique, (usually described as more than 30 minutes).

INFUSIONAL CHEMOTHERAPY

- 4. Infusional Chemotherapy - Code 5793** - Global fee for the management of and for services delivered during infusional chemotherapy per treatment day - for exclusive use by doctors with appropriate oncology training using recognised chemotherapy facilities (consultations to be charged separately).
- a. Fee for management of intravenous infusional administration (chemotherapy, targeted therapies, biological response modifiers, etc) irrespective of the duration of the infusion but not applicable for intravenous bolus administrations. (see also 3(e))
 - b. Can be charged with any one of codes 5794 or 5795.
 - c. If the drugs are obtained and procured through a third party, code 5794 (and 5793), should be charged (see below interpretation of code 5794).
 - d. If the drugs are bought by the practice and sold to the patients, code 5795 (and 5793) should be charged (see below interpretation of code 5795).
 - e. It applies to all intravenous chemotherapy under the doctor's supervision, be it at the oncologist's rooms or in the Hospital ward while a patient is receiving chemotherapy treatment.
 - f. It is applicable per treatment day and per cycle of therapy (e.g. weekly, bi-weekly, q 21 days, etc.)
 - g. It is not applicable to blood or blood products transfusions, rehydration, treatment of nausea and vomiting post chemotherapy/radiotherapy. In that

circumstance, the consultation, as well as the materials and medicines used are chargeable

- h. It is also not applicable for flushes of A-ports, Hickmann or central venous lines, vitamin injections, iron infusions, etc. In that circumstance, the consultation, as well as the materials and medicines used are chargeable.

5. Infusional Chemotherapy Facility Fee - Code 5794 - A facility where oncology medicines are procured, stored, admixed and administered, and in which appropriately trained medical, nursing and support staff are in attendance. This fee is chargeable by doctors with appropriate oncology training who own or rent the facility, and by others e.g. hospitals or clinics that provide the services as per the appropriate billing structure. Said facilities are to be accredited under the auspices of SASMO and/or SASCRO. This fee is to be used in conjunction with item 5793 - only one of the parties is to charge this fee.

- a. The doctor or the hospital can charge this code if the oncological drugs have been procured from a third party.
- b. The drugs are then stored, admixed, and intravenously administered to the patient in an appropriate oncology facility recognized by special accreditation through SASMO/SASCRO.
- c. Can be charged with code 5793.

6. Infusional Chemotherapy Facility Fee - Code 5795 - A facility where oncology medicines are purchased, stored, dispensed, admixed and administered and in which appropriately-trained medical, nursing and support staff are in attendance. This fee is chargeable by doctors with appropriate oncology training who own or rent the facility, and by others e.g. hospitals or clinics that provide the services as per the appropriate billing structure. Said facilities are to be accredited under the auspices of SASMO and/or SASCRO. This fee is to be used in conjunction with item 5793 - only one of the parties is to charge this fee.

- a. In this circumstance the drugs are bought and sold to the patient.
- b. This code applies exclusively for those drugs requiring pharmacy storage, admixing and intravenous administration to the patient in an appropriate oncology facility recognized by a special accreditation through SASMO/SASCRO.
- c. Can be charged with code 5793.

GENERAL POINTS

7. The reference to “Oncology specific drugs” under the non infusional codes (5790-5792) relates to ancillary supportive therapy such as biological growth factors, bisphosphonates, cytoprotectors, erythropoietins, etc. It doesn’t apply to vitamins, minerals, blood products, rehydration products, steroids (as single agents and not when given as part of a chemotherapy regimen).
8. Oral hormonal therapy is not reimbursed under any specific code.
9. Chemotherapy administration refers only when the drug/s are used as anti-neoplastic therapy and the patient's diagnosis is cancer.
10. If chemotherapy is administered by push or bolus administration, intramuscular or subcutaneously (codes 5790 together with 5791 or 2) **together** with intravenous infusion on the same day, **only** the IV chemotherapy infusion codes apply (code 5793 together with 5794 or 5).
11. If chemotherapy is administered by IV infusion and IV hydration and/or IV or oral antiemetics are given concomitantly, only the IV chemotherapy infusion codes apply (code 5793 together with 5794 or 5).
12. Flushing of a vascular access port or line, prior to the administration of chemotherapy is considered an integral part of the service and is not billable separately.

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13. if a special visit is made for the purpose of the flushing, the consultation fee as well as the materials used is chargeable but no other specific code.



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CODE DESCRIPTIONS, INTERPRETATION AND GUIDELINES.

NON INFUSIONAL CHEMOTHERAPY

14. Non Infusional Chemotherapy Fee - Code 5790 - Global Fee for the management of and for related services delivered in the treatment of cancer with oral chemotherapy, intramuscular (IMI) or subcutaneous (SC), intrathecal or bolus chemotherapy - for exclusive use by doctors with appropriate oncology training (consultations to be charged separately) (not applicable to oral hormonal therapy).

- a. This code should be used to charge where oncological medications, necessary for the treatment of cancer are used and where cancer patients are managed by doctors who are suitably qualified and experienced in:
 - i. Oral chemotherapy - per cycle (every three to four weeks)
 - ii. Intramuscular hormonal or chemo therapy - per cycle (every three to four weeks, irrespective of number of administrations)
 - iii. Subcutaneous - per cycle every three to four weeks, irrespective of number of administrations
 - iv. Intrathecal - per day of administration
 - v. Bolus IVI chemotherapy - per day of administration

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- b. Oral steroids, as part of the chemotherapy treatment as well as anti-emetics (oral and intravenous) are given together with intravenous or oral chemo, therefore the charge is only once and for the main therapy given.
- c. Code 5790 can be charged with any one of codes 5791 or 5792.
- d. If the drugs are obtained and procured through a third party, code 5791 (and 5790), should be charged. (See below interpretation of code 5791).
- e. If the drugs are bought by the practice and sold to the patients, code 5792 (and 5790) should be charged (see below interpretation of code 5792).
- f. It is not applicable to the treatment of nausea and vomiting post chemotherapy/radiotherapy or oncology specific drugs. In that circumstance the consultation, as well as the infusional pharmacotherapy code only is chargeable, without any facility fees.
- g. It is also not applicable for blood or blood products transfusions, rehydration, flushes of A-ports, Hickmann or central venous lines, vitamin injections, iron infusions, etc. In that circumstance, the consultation, as well as the materials and medicines used are chargeable.
- h. The use of this code precludes the use of code 5793; 5794; 5795 or the infusional pharmacotherapy code on the same day.

15. Non Infusional Chemotherapy Facility Fee - Code 5791 - A facility where oncology medicines are procured or scripted for oral chemotherapy, intramuscular (IMI), subcutaneous, intrathecal or bolus chemotherapy. This fee is chargeable by doctors with appropriate oncology training who own or rents the facility, and by others e.g. hospitals or clinics that provide the services as per the appropriate billing structure. Said facilities are to be accredited under the auspices of SASMO and/or SASCRO - to be used in conjunction with item 5790 - only one of the parties is to charge this fee. (Not applicable to oral hormonal therapy)

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- a. This code can be used by one of the doctor or the hospital where they have procured (not bought) the oncological drugs from a third party and supplies or administers the treatment drugs.
- b. Can be charged with code 5790.
- c. Same charging rules apply as per 1(a)(i) through 1(a)(v)
- d. It does apply to oral chemotherapy but not oral hormonal therapy.
- e. NB: Non infusional (Code 5790-2) is the term used for the administration of oral, intrathecal, subcutaneous and intramuscular oncology medications. It also applies to bolus and push intravenous therapies which do not require a long intravenous technique, (usually described as more than 30 minutes).

16. Non Infusional Chemotherapy Facility Fee - Code 5792 - A facility where oncology medicines are purchased, stored and dispensed during oral chemotherapy (per cycle), intramuscular (IMI), subcutaneous, intrathecal or bolus chemotherapy. This fee is chargeable by doctors with appropriate oncology training who own or rent the facility, and by others e.g. hospitals or clinics that provide the services as per the appropriate billing structure. Said facilities are to be accredited under the auspices of SASMO and/or SASCRO (to be used in conjunction with item 5790) - only one of the parties is to charge this fee. (Not applicable to oral hormonal therapy).

- a. Can be charged by one of the doctor or the hospital who buy the drugs and sell them to the patient.
- b. Can be charged with code 5790.
- c. Same charging rules apply as per 1(a)(i) through 1(a)(v)
- d. It does apply to oral chemotherapy but not oral hormonal therapy.

- e. NB: Non infusional (Code 5790-2) is the term used for the administration of oral, intrathecal, subcutaneous and intramuscular oncology medications. It also applies to bolus and push intravenous therapies which do not require a long intravenous technique, (usually described as more than 30 minutes).

INFUSIONAL CHEMOTHERAPY

17. Infusional Chemotherapy - Code 5793 - Global fee for the management of and for services delivered during infusional chemotherapy per treatment day - for exclusive use by doctors with appropriate oncology training using recognised chemotherapy facilities (consultations to be charged separately).

- a. Fee for management of intravenous infusional administration (chemotherapy, targeted therapies, biological response modifiers, etc) irrespective of the duration of the infusion but not applicable for intravenous bolus administrations. (see also 3(e))
- b. Can be charged with any one of codes 5794 or 5795.
- c. If the drugs are obtained and procured through a third party, code 5794 (and 5793), should be charged (see below interpretation of code 5794).
- d. If the drugs are bought by the practice and sold to the patients, code 5795 (and 5793) should be charged (see below interpretation of code 5795).
- e. It applies to all intravenous chemotherapy under the doctor's supervision, be it at the oncologist's rooms or in the Hospital ward while a patient is receiving chemotherapy treatment.
- f. It is applicable per treatment day and per cycle of therapy (e.g. weekly, bi-weekly, q 21 days, etc.)

- g. It is not applicable to the treatment of nausea and vomiting post chemotherapy/radiotherapy or oncology specific drugs. In that circumstance the consultation, as well as the infusional pharmacotherapy code only is chargeable, without any facility fees.
- h. It is also not applicable for blood or blood products transfusions, rehydration, flushes of A-ports, Hickmann or central venous lines, vitamin injections, iron infusions, etc. In that circumstance, the consultation, as well as the materials and medicines used are chargeable.
- i. The use of this code precludes the use of code 5790; 5791; 5792 or the infusional pharmacotherapy code on the same day.

18. Infusional Chemotherapy Facility Fee - Code 5794 - A facility where oncology medicines are procured, stored, admixed and administered, and in which appropriately trained medical, nursing and support staff are in attendance. This fee is chargeable by doctors with appropriate oncology training who own or rent the facility, and by others e.g. hospitals or clinics that provide the services as per the appropriate billing structure. Said facilities are to be accredited under the auspices of SASMO and/or SASCRO. This fee is to be used in conjunction with item 5793 - only one of the parties is to charge this fee.

- a. The doctor or the hospital can charge this code if the oncological drugs have been procured from a third party.
- b. The drugs are then stored, admixed, and intravenously administered to the patient in an appropriate oncology facility recognized by special accreditation through SASMO/SASCRO.
- c. Can be charged with code 5793.

19. Infusional Chemotherapy Facility Fee - Code 5795 - A facility where oncology medicines are purchased, stored, dispensed, admixed and administered and in which appropriately-trained medical, nursing and support staff are in attendance.

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This fee is chargeable by doctors with appropriate oncology training who own or rent the facility, and by others e.g. hospitals or clinics that provide the services as per the appropriate billing structure. Said facilities are to be accredited under the auspices of SASMO and/or SASCRO. This fee is to be used in conjunction with item 5793 - only one of the parties is to charge this fee.

- a. In this circumstance the drugs are bought and sold to the patient.
- b. This code applies exclusively for those drugs requiring pharmacy storage, admixing and intravenous administration to the patient in an appropriate oncology facility recognized by a special accreditation through SASMO/SASCRO.
- c. Can be charged with code 5793.

GENERAL POINTS

- 20.** The reference to “Oncology specific drugs” under the non infusional codes (5790-5792) relates to ancillary supportive therapy such as biological growth factors, bisphosphonates, cytoprotectors, erythropoietins, etc. It doesn’t apply to vitamins, minerals, blood products, rehydration products, steroids (as single agents and not when given as part of a chemotherapy regimen).
- 21.** Oral hormonal therapy is not reimbursed under any specific code.
- 22.** Chemotherapy administration refers only when the drug/s are used as anti-neoplastic therapy and the patient's diagnosis is cancer.
- 23.** If chemotherapy is administered by push or bolus administration, intramuscular or subcutaneously (codes 5790 together with 5791 or 2) **together** with intravenous infusion on the same day, **only** the IV chemotherapy infusion codes apply (code 5793 together with 5794 or 5).

- 24.** If chemotherapy is administered by IV infusion and IV hydration and/or IV or oral antiemetics are given concomitantly, only the IV chemotherapy infusion codes apply (code 5793 together with 5794 or 5).
- 25.** Flushing of a vascular access port or line, prior to the administration of chemotherapy is considered an integral part of the service and is not billable separately.
- 26.** if a special visit is made for the purpose of the flushing, the consultation fee as well as the materials used is chargeable but no other specific code.