

Occupational Therapy 2004

NATIONAL REFERENCE PRICE LIST FOR SERVICES BY OCCUPATIONAL THERAPISTS, EFFECTIVE FROM 1 JANUARY 2004

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.

Preamble

The following rates are a guide for schemes who wish to determine the level of benefits in respect of services rendered by occupational therapists.

It is recommended that, when such benefits are granted, the following should be clearly specified in the scheme's rules:

1. Services rendered must be in consultation with a medical or dental practitioner.
2. For which illness or conditions such benefits will be granted.
3. The annual limitation, if any, for such benefits.

GENERAL RULES

002	In exceptional cases where the fee is disproportionately low in relation to the actual services rendered by the practitioner, such higher fee as may be agreed upon between the practitioner and the scheme may be charged.
003	Services rendered must be in consultation with a medical or dental practitioner.
004	Medical schemes are not obliged to provide benefits for occupational therapy services, nor are they obliged to pay practitioners direct. Enquiries should be made by the member regarding the benefits which are provided by the medical scheme.
005	<p>A basic unit is defined as an effective treatment of a single dysfunction performed by a basically qualified occupational therapist familiar with the basic treatment procedure. Such a treatment procedure should be effected in a time period of 15 minutes</p> <p>It is recommended that after a series of 80 units in respect of one patient for the same condition, the member of the medical scheme concerned shall report to the scheme as soon as possible if further treatment is necessary. Payment for treatment in excess of the stipulated number may be granted by the medical scheme on receipt of a letter from the medical practitioner or occupational therapist to re-evaluate and reconsider the therapeutic procedures</p>
006	<p>"Emergency treatment" shall mean a bona-fide, justifiable emergency occupational therapy procedure performed at any hour, which requires the practitioner to travel to the patient or place of treatment.</p> <p>The fee for all visits under this rule shall be the total fee plus 50% and must be motivated. Modifier 0006 must be quoted after the appropriate code numbers to indicate that this rule is applicable.</p>
007	Practitioners are reminded that a lower fee than that appearing in the guide to fees shall be charged if the customary fee in the area is less than that charge. Reduced fees shall also be charged where the practitioner would have reduced the fee in private practice in particular cases. Prolonged treatment or exceptional cases should also receive special consideration in accordance with usual medical practice.
008	The provision of assistive devices shall be charged at cost. Modifier 0008 must be quoted after the appropriate code numbers to show that this rule is applicable.
009	Materials used in the construction of orthoses or pressure garments will be charged at net acquisition cost. Modifier 0009 must be quoted after the appropriate code numbers to show that this rule is applicable.
010	Materials used in treatment shall be charged at net acquisition cost. Modifier 0010 must be quoted after the appropriate code numbers to show that this rule is applicable.
011	<p>Where the occupational therapist performs treatments away from the treatment rooms, travelling costs to be charged according to AA rates e.g. for domiciliary treatments or treatments in nursing homes. Modifier 0011 must be quoted after the appropriate code numbers to show that this rule is applicable.</p> <p>Please note that although only some medical schemes accept responsibility for the payment of transport expenses, others do so in exceptional cases only.</p>

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012	<p>Every practitioner shall render a monthly account in respect of any service rendered during the month, irrespective of whether or not the treatment has been completed. NB. Every account shall contain the following particulars:</p> <p>i The name and practice number of the consulting medical practitioner or dentist.</p> <p>ii The name of the member.</p> <p>iii The name of the patient.</p> <p>iv The name of the medical scheme.</p> <p>v The membership number of the patient.</p> <p>vi The nature of the treatment.</p> <p>vii The date on which the service was rendered.</p> <p>viii The code number of the procedure used in the National Reference Price List.</p>	
013	<p>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.</p> <p>Please note: In the case of occupational therapy, a code will only be required when a standard proprietary (off the shelf) product is used. When a splint or support is made by the occupational therapist using or modifying one or more components, a code cannot accurately identify this non-standard product. Please refer to annexure itemising the most commonly made non-standard products used in occupational therapy and bill accordingly.</p> <p>The Occupational Therapy Association of S A has made available a generic list of non-proprietary splints and pressure garments commonly made by practitioners. The type of materials used to manufacture these products is at the discretion of the practitioner concerned. Price of splints and pressure garments may vary. See Annexures A & B.</p>	
	Modifiers	
0006	Add 50% of the total fee for the procedure.	
0008	Assistive devices to be charged at cost.	
0009	Material used for orthoses or pressure garments to be charged at net acquisition cost. See Annexures A & B for non-standard products.	
0010	Materials used in treatment to be charged at net acquisition cost.	
0011	<p>Travelling costs according to AA rates.</p> <p>Please note that although only some medical schemes accept responsibility for the payment of transport expenses, others do so in exceptional cases only.</p>	
0021	Services rendered to hospital inpatients: Quote modifier 0021 on all accounts for services performed on hospital inpatients.	
	OCCUPATIONAL THERAPY RECOMMENDED REIMBURSEMENT RATES	
1	PROCEDURES OF INTERVIEWING, GUIDANCE AND CONSULTANCY	
Code	Description	66
101	Interview.	49.80 (43.70)
103	Guidance.	49.80 (43.70)
105	Consultation - irrespective of duration.	99.60 (87.40)
107	Appointment not kept (schemes will not necessarily grant benefits in respect of this item, it will fall into the "By arrangement with the scheme" or "Patient own account" category).	- (-)
2	PROCEDURES OF INITIAL EVALUATION TO DETERMINE THE TREATMENT.	
201	Observation and screening.	23.90 (21.00)
203	Specific evaluation for a single aspect of dysfunction (Specify which aspect).	23.90 (21.00)
205	Specific evaluation of dysfunction involving one part of the body for a specific functional problem (Specify part and aspects evaluated)	74.70 (65.50)
207	Specific evaluation for dysfunction involving the whole body (Specify condition and which aspects evaluated).	149.40 (131.10)
209	Specific in depth evaluation of certain functions affecting the total person (Specify the aspects assessed).	249.00 (218.40)
211	Comprehensive in depth evaluation of the total person (Specify aspects assessed)	348.60 (305.80)
	Measurement for designing.	

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213	A static orthosis.	24.90 (21.80)
215	A dynamic orthosis.	24.90 (21.80)
217	A pressure garment for one limb.	24.90 (21.80)
219	A pressure garment for one hand.	24.90 (21.80)
221	A pressure garment for the trunk.	24.90 (21.80)
223	A pressure garment for the face (chin strap only).	24.90 (21.80)
225	A pressure garment for the face (full face mask).	24.90 (21.80)
	The whole body or part thereof will be the sum total of the parts	
3	PROCEDURES OF THERAPY.	
301	Group treatment in a task-centered activity, per patient (Treatment time 60 minutes or more).	28.60 (25.10)
303	Placement of a patient in an appropriate treatment situation requiring structuring the environment, adapting equipment and positioning the patient. This does not require individual attention for the whole treatment session, per patient)	37.30 (32.70)
305	Groups directed to achieve common aims, per patient) (Treatment time 60 minutes or more).	57.80 (50.70)
307	Simultaneous treatment with two to four patients, each with specific problems, utilising individual activities, per patient (Treatment time 60 minutes or more)	84.20 (73.90)
308	Simultaneous treatment with two to four neuro-behavioural and stress related conditions or severe head injury patients, each with specific problems, utilising individual activities, per patient (Treatment time 90 minutes or more)	118.80 (104.20)
	Individual and undivided attention during treatment sessions utilising specific activity and/or techniques in an integrated treatment session	
309	On level one (15 minutes).	41.30 (36.20)
311	On level two (30 minutes).	84.20 (73.90)
313	On level three (45 minutes).	124.00 (108.80)
315	On level four (60 minutes).	165.30 (145.00)
317	On level five (90 minutes).	206.20 (180.90)
319	On level six (120 minutes).	247.00 (216.70)
4	PROCEDURES REQUIRED TO PROMOTE TREATMENT.	
	As schemes will not necessarily grant benefits in respect of some items in this section, they fall into the "By arrangement with the scheme" category. (This does not apply to items 415 to 427 and 431)	
401	Recommendations as regards to assistive devices, environmental adaptations, alternative/compensatory methods, handling the patient	36.10 (31.70)
	Designing and constructing a custom-made adaptation, assistive device, splint or simple pressure garment for treatment in a task-centered activity (specify the adaptation, assistive device, splint or simple pressure garment)	
403	On level one.	35.90 (31.50)
405	On level two.	71.70 (62.90)
407	On level three.	107.60 (94.40)
409	On level four.	143.40 (125.80)
411	On level five.	179.30 (157.30)
413	On level six.	215.10 (188.70)

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415	Designing and constructing a static orthosis.	141.40 (124.00)
417	Designing and constructing a dynamic orthosis.	282.90 (248.20)
	Designing and constructing pressure garment for:	
419	Limb.	141.40 (124.00)
421	Face (chin strap only).	106.80 (93.70)
423	Face (full face mask).	141.40 (124.00)
425	Trunk.	213.60 (187.40)
427	Hand.	213.60 (187.40)
	The whole body or part thereof will be the sum total of the parts for the first garment and 75% of the fee for any additional garments made on the same pattern	
429	Designing and planning an environmental adaptation.	92.60 (81.20)
431	Planning and preparing in depth home programme on a monthly basis.	277.90 (243.80)
433	Designing and planning an environmental control unit.	555.80 (487.50)
	List of splints and pressure garments exempted from NAPPI codes	
	Annexure A	
	Numbers and names of splints to be used with modifier 0009	
701	Static finger extension/flexion splint	- (-)
702	Dynamic finger extension/flexion	- (-)
703	Buddy strap	- (-)
704	DIP/PIP flexion strap	- (-)
705	MP, PIP, DIP flexion strap	- (-)
706	Hand based static finger extension/flexion	- (-)
707	Hand based static thumb extension/flexion/opposition/ abduction	- (-)
708	Hand based dynamic finger flexion/extension	- (-)
709	Hand based dynamic thumb flexion/extension/opposition/abduction	- (-)
710	Static wrist extension/flexion	- (-)
711	Dynamic wrist extension/flexion	- (-)
712	Flexion glove	- (-)
713	Forearm based dynamic finger flexion/extension	- (-)
714	Forearm based dorsal protection	- (-)
715	Forearm based volar resting	- (-)
716	Static elbow extension/flexion	- (-)
717	Dynamic elbow flexion/extension splint	- (-)
718	Shoulder abduction splint	- (-)
719	Static rigid neck splint	- (-)
720	Static soft neck splint/brace	- (-)
721	Static knee extension	- (-)
722	Static foot dorsiflexion	- (-)
	Annexure B	
	Numbers and names of pressure garments to be used with modifier 0009	
801	Glove to wrist	- (-)
802	Glove to elbow	- (-)
803	Gauntlet (Glove with palm and thumb only)	- (-)

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804	Sleeve: Upper/forearm	- (-)
805	Sleeve: full	- (-)
806	Vest + sleeves	- (-)
807	Sleeveless vest	- (-)
808	Upper leg	- (-)
809	Lower leg	- (-)
810	Full leg	- (-)
811	Pants (trunk and full legs)	- (-)
812	Briefs	- (-)
813	Anklet	- (-)
814	Knee length stocking	- (-)
815	Chin strap	- (-)
816	Full face mask	- (-)
817	Neck only	- (-)
818	Finger sock	- (-)
Annexure C		
	List of materials used in treatment under modifier 0010	
901	Therapeutic putty	- (-)
902	Wood, leather, sisal	- (-)
903	Sponge	- (-)
904	Elastonet	- (-)
905	Silicon gel sheeting	- (-)
Annexure D		
	Assistive devices made by the therapist her/himself to be used with modifier 0008	
1001	Hip abduction cushion	- (-)
1002	Sponge on a stick	- (-)
1003	Hand grips (for utensils)	- (-)
1004	Bath bench	- (-)
1005	Bath seat	- (-)
1006	Transfer board	- (-)
1007	Plate surround	- (-)
1008	Wheelchair strap	- (-)