

## Anaesthetic fee structure

The fee for the services of an anaesthesiologist is separate from the accounts sent by the surgeon and the hospital.

The coding on the anaesthetic accounts is derived from the Fee Guidelines of the South African Society of Anaesthesiologists.

The account is made up of the fee for the pre operative anaesthetic assessment plus modifiers.

Each patient will be seen prior to surgery and be questioned and examined to ascertain the safest method of anaesthesia. This process may take a few minutes in healthy people with no relevant medical history, or over an hour in patients who have a complex medical history. It may include review of blood tests or discussion with other doctors familiar with the patient. The anaesthesiologist will also explain the process to the patient and liaise with family members if required. There is one fee for the pre-operative assessment, irrespective of the complexity of patient or the proposed anaesthesia.

The modifiers include:

- a) a code for the type of operation and depend on the complexity of the surgery eg a hernia has less units than a heart operation.
- b) a code for the time spent under the care of the anaesthesiologist.
- c) a code for other modifiers such as whether case is pre-booked or emergency, patient age or medical status, body mass index over 35, manipulations during anaesthesia such as blood pressure control or invasive monitoring. A more complete list of modifiers can be made available on request.

The Competition Commission of South Africa has ruled that there can be no collusion in setting of fees by groups such as anaesthesiologists. This means that no 2 anaesthesiologists will have the same fee structure and not even the South African Society of Anaesthesiologists may recommend fees.

Many anaesthesiologists use the "Ethical Rate" as a guideline for their charges. This was a rate determined by the Health Professions Council of South Africa in around 2006. It was intended by the HPCSA that doctors who charged above that rate would be considered by the HPCSA to be overcharging. That rate was set by the HPCSA at 300% of the standard medical aid rate and it will not be uncommon to see a similar rate charged by anaesthesiologists today. There is no recommended "Ethical Rate" any more as this is not allowed by the Competition Commission.

The Health Profession Council of South Africa has stated that in cases where the anaesthesiologist is charging more than the rate paid by the patient's medical aid, the anaesthesiologist must inform the patient of the charges and the shortfall. As there are approximately 100 medical aids in South Africa each with several plans and payment rates, it will be impossible for the anaesthesiologist to provide the amount that your medical aid will pay, but he/she should be able to give an indication of their anaesthesia bill, noting that if the procedure takes longer than expected or more complex anaesthesia is required, there will be extra expense.

Each associate of Molteno Anaesthetics Group has independently decided on his/her own rate of billing. Some may offer discounts for prompt payment. It is incumbent upon the patient to enquire whether there will be a shortfall between the amount charged and the amount reimbursed by the medical aid. We would like to provide quotes prior to admission to hospital for surgery. Quotes may be obtained from the offices of Molteno Group on 021 447 2999.

It is important to provide information concerning Prescribed Minimum Benefits. PMBs are a list of medical conditions for which the medical aid is by law obliged to pay for the costs of treatment in full, without co-payment from the patient. There are however certain requirements for this to happen. These are: a) if the medical aid does not have a Designated Service Provider, b) if the DSP could not render services without a reasonable delay, c) the service was not available from the DSP, d) immediate care/treatment was required, e) if the DSP is not within reasonable proximity.

It should be understood that while Molteno Group anaesthesiologists will generally submit their accounts to the medical aid involved, it remains the obligation of the patient to ensure that the account is received by their medical aid and paid in full. We have no binding arrangements with any organisation or medical aid and the contract is between the anaesthesiologist and the patient/patient's guardian.