

Rules for payment of renal care accounts in terms of COIDA

1. In terms of Sec 73 (1) of COIDA, the Compensation Fund shall pay reasonable medical costs incurred by or on behalf of an employee in respect of medical aid necessitated by such accident or disease.
2. The renal condition must be directly related to the nature of injury sustained or complications thereof.
3. Dialysis is always performed in accordance to a dialysis prescription
4. Dialysis prescriptions can be provided by a nephrologist or a medical practitioner with appropriate training in nephrology
5. Haemodialysis provided in a dialysis unit, applies to both outpatients and stabilized in-hospital patients
6. The global fee for haemodialysis (item 1851) requires regular routine visits to the patient during dialysis and covers:
 - (a) Dialysis prescription
 - (b) Assessment of dialysis adequacy
 - (c) Revision of chronic medication
 - (d) Counseling
 - (e) Consultations for chronic and acute conditions
 - (f) Acute medication and prescriptions
7. After a series of treatments prescribed by the nephrologist or a medical practitioner the renal dialysis practitioner should refer the employee back to the treating medical practitioner.
8. If further treatment is still indicated the treating medical practitioner should submit a medical report with clinical indications for further treatment.
9. A monthly medical report should be submitted and should the condition become chronic a medical report explaining such condition must be submitted to the Fund.
10. Codes:
 - (a) 75148
 - Chronic haemodialysis for inpatients and outpatients in dialysis unit.
 - Charged once daily
 - (b) 75176
 - Continuous ambulatory peritoneal dialysis for inpatients and outpatients in dialysis unit.
 - Charged daily.
 - (c) 75177
 - Automated peritoneal dialysis
 - Charged daily.
 - (d) 75150
 - Acute haemodialysis inpatient
 - Charged daily.
 - Applies to all acute dialysis including haemodiafiltration, intermittent and continuous modalities.

(e) 75151

(f) 75152

(g) 75156

Codes, **75151**, **75152** and **75156** for CRRT in hospital patient, to be charged in ICU general ward or high care only.

COMPENSATION FUND GUIDE TO FEES FOR RENAL CARE 2019

CODE	SERVICE DESCRIPTION	2019 TARIFFS
75148	Chronic Haemodialysis (Bicarbonate Dialysate)	2698.37
75176	Global Fee for Continous Ambulatory Peritoneal (CAPD) per 30 day	958.10
75177	Global Fee for Automated Peritoneal Dialysis (APD), per 30 day period	1330.08
75150	Acute Haemodialysis	5363.14
75151	Treatment procedures for CRRT for up to 6 hours or part thereof	388.17
75152	Treatment procedures for CRRT for up to 12 hours or part thereof	778.01
75154	Treatment procedures for CRRT for up to 12 hours or part thereof	1166.37
75156	Treatment procedures for CRRT for up to 12 hours or part thereof	1554.55