

Guidelines for the Healix Health Services Fee Schedule

Introduction

The Healix Health Services fee schedule is based on the common set of codes and principles agreed by the Clinical Classification and Schedule Development (CCSD) group to describe today's medical practice (see <https://www.ccsd.org.uk/home/>). Our fees are set individually and are regularly reviewed and updated using information from CCSD, our providers and other schedules published in the UK. These fees are based on factors including complexity, duration, level of skill required, and comparison of one procedure to another. We also check to see if a procedure has significantly changed over time and whether the existing complexity rating is too high or too low.

This regular review does mean that our fees may change at any time. This fee schedule is live and therefore is always up to date. We would recommend that you check the schedule regularly to take into account any fee changes.

The inclusion of a code in our fee schedule does not necessarily mean that it is eligible for cover for all of our customers. We therefore strongly advise that our providers remind their customers to contact Healix in advance of undertaking any treatment.

Billing principles

We expect professional fees for surgeons and anaesthetists to include:

- ↵ All pre, intra and post-operative care.
- ↵ Daily ward care, including intensive care where it is expected.
- ↵ Management of commonly occurring minor complications perioperatively e.g. bleeding, intravenous fluids, suction, catheterisation, surgical assistance fees, management of post operative analgesia, follow-up outpatient consultations within 7 days of the surgical procedure.

Healix will pay for professional fees that do not exceed our reasonable and customary rates for procedures that have been authorised by us in advance of treatment taking place. We may pay additional fees where a procedure is unusually complex or requires the assistance of a second operator when authorised in advance, providers must contact us to discuss fees in advance of the procedure.

The component parts of a single procedure must not be itemised out and billed separately. Providers must abide by the CCSD unbundling guidelines and must not bill for unacceptable combinations.

Where more than one procedure is planned in the same operating session we will normally pay 100% of the most complex code, with 50% of the second code and up to 25% of the third code. We will only cover more than 2 codes in exceptional circumstances and where a treatment plan has been submitted in advance for consideration.

Bilateral procedures are generally covered by specific bilateral codes for which we will pay up to the maximum for that code only. Multiple rules apply where there is no bilateral code.

Consultation charges for out-patient consultations must be face to face or remote where clinically appropriate and only by prior agreement. Only a single consultation may be claimed on any one day.

Standby fees will only be paid if it is clinically necessary and the clinician is physically present for the duration of the procedure and agreed in advance.

Regional anaesthesia/IV sedation administered by the operator. There are some procedures which may require sedation or regional anaesthesia. Where this is considered necessary we will cover an additional fee using the codes:

X3510 IV sedation administered by operator

25040 IV regional anaesthesia (e.g. Bier's Block) administered by operator

X3800 Ophthalmic local anaesthetic injection administered by operator (this does not include the use of topic anaesthesia for which no extra charge should be made).

Healix Health Services no longer reimburses for procedure code AC100. The codes above should be used where appropriate.

Fraud and misrepresentation

Healix Health Services monitors claims regularly and has a zero tolerance policy of fraud and misrepresentation. We consider the following to be fraudulent practice:

- ↵ Exaggeration of the complexity of the procedure
- ↵ Unbundling
- ↵ Omission of the material facts
- ↵ Misrepresentation of the medical history or the procedure performed.

Helplines

Please contact the Provider Helpline on 020 3376 3905 to discuss any provider queries.

Please contact Healix Health Services Helpline on 020 3376 3907 for any general invoicing queries.