



## SORSA REPORT

### **UPDATE: Challenges of Private Practice Radiographers with Compensation Fund Claims**

- Workman compensation accounts have not been paid since March 2015. Many radiographers did not submit claims pending the proposed 2016 publication of the radiographer discipline-specific codes.
- SORSA met with the Compensation Fund on 01 September 2015 where a request was submitted for radiographers to continue using radiology codes in the interim.
- A response dated 12 November 2015, from the Compensation Fund and received by SORSA on 27 Jan 2016, stated:

***“The services rendered by radiographers are not payable out of the Compensation Fund as the Fund relies on the services of the radiologists as well as the medical reports submitted by the radiologists.....it is regretted the radiographers cannot be compensated by the Compensation Fund.”***

#### **Pre-2016 Compensation Fund Claims**

Radiographer-discipline accounts were submitted to COIDA using radiology codes since 1994. COIDA claims by radiographers have always been “.... The current problem arose at the implementation of the Umhleko system in March 2015.

#### **The new COIDA criterion for 2016: Radiology report to accompany operating theatre radiography claims.**

If a radiological report is the new requirement for payment of theatre radiography accounts, this might then entail:

- a) Unauthorised reporting, not referred by the surgeon to the radiologist (surgeons do not require or request radiologist involvement in their interventional procedures).
- b) Duplication of report and report cost, because post-operative X-rays are requested, and are performed in a radiology department the following day, and billed by a radiology practice.

c) Duplication of information: The report submitted to COIDA by the surgeon as WCL5 progress report includes the intra-operative report.

- All outpatient COIDA claims are reported on. WCA patients seldom attend radiography practices, as they are generally attended to at trauma centres which have radiology services available.

## **The way forward**

SORSA submitted a request to the Minister of Labour (cc: Compensation Fund) dated 01 March 2016:

***“.....SORSA would like to state emphatically that private practice radiographers offer a valuable medical imaging service in the private sector especially where there are no radiologists e.g. in remote areas where there are no radiologists, fluoroscopic imaging with urologists, cardiologists or orthopaedic surgeons. Radiographers also render general x-ray imaging services where reporting is outsourced to radiologists. Excluding radiographers from rendering services to COIDA patients would be counter-productive. Many patients would have to travel far distances to radiology practices for imaging services.***

***SORSA requests the following:***

- 1. Private practice radiographers receive outstanding compensation for services rendered during the past few years.***
- 2. Private practice radiographers remain included in the compensation from the Compensation Fund for medical imaging services rendered.....”***

**Ferial Isaacs  
Chair: SORSA Private Practice Advisory Group  
28 March 2015**