

3. MEDICAL PRACTITIONER'S PROFESSIONAL FEE

By: Dr Lim Joo Kiong
MMA Sarawak Branch

Introduction

The Medical Practitioner provides a service to his patient. Like all services, this will attract a fee payable by the patient to the doctor. This position paper is meant to outline the principles to be used in determining the quantum of fees to be charged.

The Professional Fee

In Malaysia, patients are accustomed to paying to see a doctor in private practice. However, in many instances, the patient believes that he is paying for the medication he receives. This stems from the de-facto scenario, where the doctor is both the prescriber and dispenser.

It is envisaged that sometime in the future, these two roles may separate, and the Pharmacist be given the sole right to dispense and the doctor restricted to prescribing, with some exceptions.

It is both good medical practice, and sound practice management, to educate our patients about the doctor's professional fee. This is easily initiated by itemised billing, with a separate column for the doctors' consultation fee. Itemised billing has been the MMA's recommendation for many years now. This professional fee is over and above the charges for the cost of, and dispensing of, medications.

Types of Professional Fees

There are three types of professional fee that are chargeable.

Consultation Fee:

This fee is for the service of the doctor in taking a history, doing a physical examination, using his knowledge and experience to come to a diagnosis, initiating treatment, and providing advice and counselling for the patient.

Procedure Fee:

If a separate procedure is required for diagnosis and/or treatment of the patient, this will attract a separate fee.

Report Fee:

This will include insurance, employment, and fitness reports. The fee incurred is for both the secretarial works involved in tracing medical records and writing or filling up a report, and the medico-legal implications of such reports.

These three fees are of course not always individually charged. For example, insurance examination fee will include both consultation and report fees. Ultrasound fees will include both the procedure and report fees.

Finally, it should also be mentioned here that a fee is also chargeable for offering expert opinions both in and out of court.

The Quantum of the Fees

In deciding the respective fees chargeable, the following considerations will be taken into account:

1. The training required of a doctor.
2. The skills required, in particular for the procedure fee.
3. The difficulty level and complexity of a particular procedure, and the average time required for the procedure.
4. The market value for the service rendered. This will depend to a certain extent on market forces, and may be variable with time, prevailing economic condition, place of practice, type of practice and so on.

As a basis for comparison, the prevailing fees of other countries may be used, particularly neighbouring countries, and countries with a similar health care delivery system.

The Malaysian Medical Association has a Schedule of Fees. It is formulated by applying the above principles, in consultation with the members, and the respective specialist bodies.

Use of the Recommended Schedule of Fees

The schedule lists out the MINIMUM fee as recommended by the Association. It is what would be considered a reasonable fee for the service provided. The actual fee charged may be less or more.

As health care is a service with strong social implications, doctors have frequently discounted or waive their fees for deserving patients. Fees charged as such will be considered as charity practise.

On the other hand, if a fee more than the recommended minimum schedule is to be charged, this should be explained to the patient to avoid misunderstanding. The quantum of fees charged is a contract between two parties. If both parties are agreeable, then there is no conflict.

Ultimately, market forces will determine the fees charged in a free practice environment like Malaysia. However, in an attempt to control escalating health care costs, some countries legislated controls on doctors' fees. This should be resisted. Our strongest defence will be to demonstrate that doctors can exert self-regulation and control.