



Dialysis Treatment Session Payment Conflict in Johor Bahru District

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Abstract

The sharp increase in the number of dialysis centres, especially in urban areas, proves the urgent need for institutions that carry out dialysis treatment operations effectively for patients. Furthermore, the sophistication of the new modern equipment used increases the confidence of patients to receive treatment at certain dialysis centres. However, payment conflicts arise throughout the operation of dialysis centres that invite the risk of default if not controlled. This study will identify payment conflicts that exist throughout the operation of the dialysis centre and make judgments according to Islamic law. Therefore, qualitative research is applied through the results of interviews with the parties involved and library studies on survey studies employed by scholars. The results of the study found that payment conflicts throughout dialysis treatment operations in the Johor Bahru district of Johor can be divided into two categories: false payment claims and increased cost of treatment session payments. Therefore, this study suggests that monitoring from the authorities should be carried out regularly according to a periodic schedule and increased awareness of the parties responsible for the operation of dialysis treatment to ensure that any violations in the payment aspect can be best controlled.

Keywords: Dialysis treatment, cost of payment, Muamalat Islam and Islamic law.

1.0 Introduction

Dialysis, also known as hemodialysis, is an initiative to treat patients with kidney failure. This treatment is a necessity for the entire patient after being diagnosed by a kidney specialist that certain patients as chronic kidney disease and need dialysis treatment. The treatment, which is carried out three times a week on a routine basis, requires the commitment of various parties, namely patients, family members, kidney specialists and staff at the dialysis center. In addition, three forms of dialysis treatment differ in implementation and cost of payment but have the same goal of ensuring that the patient is in a stable and comfortable condition. Such treatments are hemodialysis, peritoneal dialysis and continuous ambulatory peritoneal dialysis. The study focused on dialysis, which involves a blood purification procedure to filter excess fluid from the patient's body using the first line. In addition, bringing out the contents of the sewage that is not needed but can not be successfully eliminated through the sewage system, normally by each patient. Then, as a result of the procedure, the filtered blood is returned to the patient's body using a second channel access specially made for the patient to receive treatment effectively.

2.0 Treatment Fee Requirements And Dialysis Center Development

Dialysis centers are built to be a field for patients to get dialysis treatment after being diagnosed with symptoms of kidney failure due to various health factors. The Centre not only houses dialysis machines, but there are also various facilities that provide patients with comfort before, during and after undergoing four hours of treatment per session. Among the facilities provided are air conditioning, chairs for patients receiving treatment, weighing scales, toilets, surau and a place for family members or caregivers to wait. The facilities available at the dialysis center meet the needs of dialysis patients so that they are in good condition and organized. Therefore, there is a form of payment that must be implemented so that dialysis operations and treatment procedures can run smoothly without any side effects to the health of each patient. In this regard, this section will explore the history of the establishment of dialysis centers and forms of treatment fees as follows:

2.1 History Of The Dialysis Center



Various agencies and associations develop dialysis centers in Malaysia, whether from the government or the private sector, to provide convenience to patients undergoing dialysis treatment comfortably and safely. The empowered goal is to improve the quality of services and the well-being of the local community for the better. Dialysis centers in public hospitals are pioneering dialysis treatment facilities with a limited number of patient treatments. However, the increase in the number of patients provides an opportunity for the private sector to set up dialysis centers by financing the cost of treatment by the patients themselves or receiving financial assistance from each state, such as zakat, Waqf and ancillary grants (Mohd Rizal, 2017). As of 6 January 2023, the total number of private dialysis centres licensed under the Private Healthcare Facilities and Services Act 1998 (Act 586) as at 31 December 20202 in Malaysia reached 840. The distribution of the number of private dialysis centers can be seen in Figure 1 below:

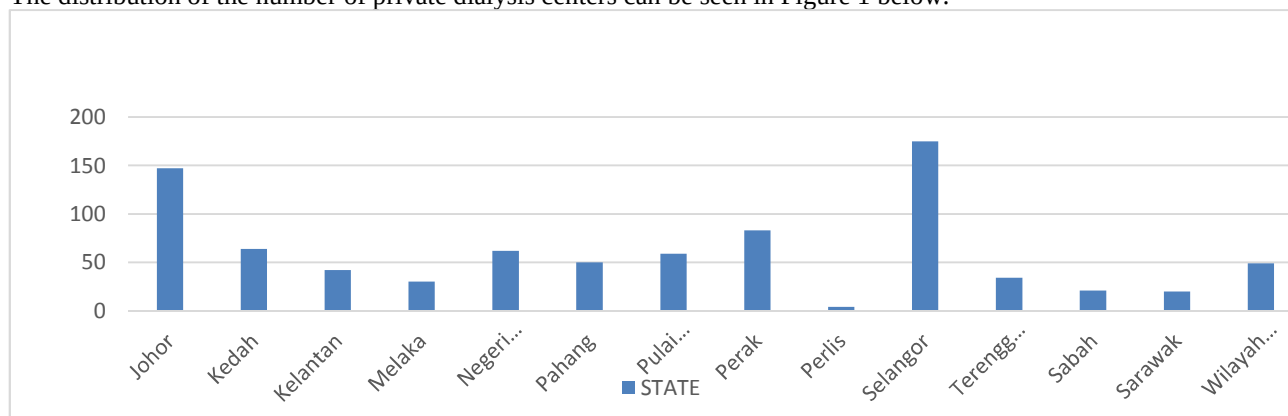


Figure 1: Number of licensed private dialysis centres in Malaysia

Based on Figure 1, the inconsistency in the number of dialysis centers established in each state stems from various factors. Among them are local geographical factors, the progress of a state and the influx of residents, whether local or foreign citizens. The growth and influx of population is translated into a high influx of individuals to a state such as Selangor and Johor due to the breadth of employment opportunities, conducive placement and acceptance of the local community to form a consumerist lifestyle. As a result, some of them do not care about their health. However, the increase in the number of dialysis centers helps the stability of dialysis patients over time (Bele, 2012). Apart from dialysis treatment in public hospitals and private dialysis centers, there are also other community development centers that take on the role of offering dialysis treatment to patients. Among them are dialysis centers owned by the Social Security Organization (Socso), the Malaysian Kidney Foundation (NKF) and the Waqf An-Nur Dialysis Center (Roskhairah, 2023). The excellent performance displayed by each of them resulted in the goal of establishing a dialysis center being achieved and lasting for a long period.

2.2 Dialysis Patient Treatment Fee

Dialysis payment is an important element in ensuring that treatment for patients can be carried out according to the schedule and recommendations of medical practitioners. The staff at the dialysis center will manage patient registration as soon as the patient or family member agrees to undergo dialysis treatment after performing minor surgery to make access to dialysis treatment (Bavanandan, 2016). The type of dialysis treatment payment is divided into two sectors, namely the government and private sectors. According to the official portal of the Ministry of Health (MOH), the cost of each dialysis session is as low as RM10.00 to RM200.00 per session, depending on the type of treatment class. Meanwhile, the usual cost of private dialysis treatment costs RM200.00 to RM250.00 per session, three times a week. The cost of the fee includes the use of a dialysis machine, a disposable dialyzer that acts as a fake kidney to the patient, and the cost of dialysis treatment operations. The cost of dialysis treatment fees in the government sector can be seen in Table 1 below:

Bil.	Types Of Treatment	First Class	Second Class	Third Class
1.	Hemodialysis (one-time use of dialyzer equipment)	RM190.00	RM50.00	RM25.00
2.	Hemodialysis (repeated use of dialyzer equipment)	RM75.00	RM20.00	RM10.00
3	Intermittent peritoneal dialysis (per treatment)	RM275.00	RM100.00	RM50.00
4	CAPD (per month)	RM750.00	RM200.00	RM100.00

Table 1: Cost of dialysis treatment at Government sector dialysis centres.

Based on Table 1 above, the cost of dialysis treatment varies according to the type of treatment performed and according to certain classes, depending on the selection of patients per treatment session. The payment must be paid by the patient in the first week of each month after the completion of the treatment session. There is a comparison



between the cost of dialysis treatment sessions per year. It is caused by the cost of replacing more sophisticated dialysis machines, according to the quality of current technology. For example, the cost of treatment was only in the range of RM100.00 to RM150.00 only in 2002 to 2012. However, the patient or family member is not given a choice and must agree to a comparison of the cost of treatment to ensure a stable level of Health. For foreigners residing in Malaysia, the cost is RM300.00 per treatment session.

2.3 Dialysis Treatment Financing Assistance

Since the cost of dialysis treatment is high in the range of RM200.00 – RM250.00 per treatment session, there are various types of relief to the patient or family members to finance it. Malaysian Civil Service officers obtain financing facilities of a maximum of RM200.00 per dialysis treatment session, whether in public or private hospitals. The funding is based on certain conditions that allow the funding to be given, such as no financial assistance for medication or medical tests that can be obtained at public hospitals. Patients must first obtain confirmation of the need for treatment by a kidney physician or nephrologist (Ayodele, 2010). In addition, patients have the opportunity to obtain financing assistance for dialysis treatment from the zakat Fund of the state Islamic Religious Council (MAIN) of each state, with a certain maximum amount according to the current chronic disease assistance regulations. Among them are the Selangor Zakat Board (LZS) in the state of Selangor, the Zakat Assistance Scheme (SBZ) in Melaka and the Zakat collection center (PPZ) in the Federal Territory of Kuala Lumpur. The state of Johor is not exempt from assisting in financing the cost of dialysis treatment through the Zakat distribution division, Johor state Islamic Religious Council (MAINJ), in several categories, namely the poor and needy. The cost of liability provided by MAINJ for dialysis treatment costs around the state of Johor is a maximum rate of RM2890.00 per month, equivalent to 12 treatment sessions. More than this amount must be paid by the patient or family member.

3.0 Study Methodology

This study uses a qualitative approach covering interviews and a literature review. The interview session was conducted from March 12 to July 28, 2025, to obtain information to meet the objectives of the study. A total of 16 respondents from five dialysis centers were selected and agreed to be interviewed, covering patients and staff at dialysis centers around the Johor Bahru district, Johor. In addition, the patient is responsible for the cost of dialysis treatment. Meanwhile, the role of the library study is to review the views and research results of local and foreign scholars in relation to the types of payments and challenges found in dialysis treatment sessions. Among those surveyed were books, theses, journals, and supporting attachments that helped the study to be carried out well. This study also makes the set of fiqh and fatwa-related books a backup research study from the perspective of Islamic law. Sources of Islamic law, such as the Quran and Hadith, are also referred to to understand the views on the implementation of dialysis treatment financing. Therefore, this study uses a descriptive method to analyze the findings in order to achieve the objectives of the study. Through this approach, this study can guide patients, staff, and researchers in forming a dialysis treatment payment ecosystem that is transparent, Shariah-compliant and meets the demands of the patient's well-being without leaving side effects to those involved.

4.0 Results Of The Study On Treatment Session Payment Conflict In Johor Bahru District

The cost of dialysis treatment not only includes the services of staff at the dialysis center, but also aims to finance the use of equipment such as dialysis machines, dialyzers that act as fake kidneys and facilities that provide comfort to patients during treatment. Therefore, this study successfully examined the conflict over dialysis treatment fees during its operation in Johor Bahru district, Johor, from 2020 to 2024 only. The study was conducted from the perspective of Sharia law. As a result of the research, this study detects that there are three payment conflicts as presented below:

4.1 Fraudulent Payment Claims

The amount of Payment Per dialysis treatment session has been set by the dialysis center following the requirements determined by the Ministry of Health Malaysia. The cost can be seen in Table 1 above. Patients and family members are aware of the cost of the payment immediately after registration, before the dialysis treatment session begins. Since the cost of treatment is high, the zakat center of the state Islamic Religious Council (MAIN) has a role to help ease these expenses by financing almost the entire cost of treatment based on certain conditions. Based on surveys, there are several false payment claims made by dialysis centers when dialysis patients are absent from undergoing dialysis treatment sessions. This problem has become a habit for some dialysis centers in order to make a profit on the violation of the terms of claims for the cost of dialysis treatment sessions. The results of the interview with the respondent (R1) are presented as follows:

“We are aware that there are false claims of payment of dialysis treatment sessions to patients when the monthly report submitted by the dialysis centre is empty on a certain day. They know what to expect each month.”

Similarly, the results of the second respondent (R2) about this problem:



“This has happened from time to time. At first, we had to wait, but then we had to wait until we had to check each patient’s attendance report according to a certain month.”

The problem can be seen in Table 2 below:

Rate allocated dialysis treatment session (1 session)	If there is no treatment session (on a certain day)	Problems in claims by dialysis centers
RM200.00 – RM250.00	The financing fee rate should be deducted	Making false claims about the patient's absenteeism

Table 2: Problems of false claims in dialysis centers

According to the terms of funding, the maximum payment rate will be allocated to the patient's treatment sessions every month. However, if the patient is not present or undergoing treatment at the dialysis center on a certain day, then the claim needs to be rejected. Among the factors that patients undergo treatment at an external dialysis center such as getting treatment at the hospital due to impaired health, following a vacation to a destination or there are logistical constraints, the conditions and regulations have been mutually agreed between the dialysis center and the party managing the financing of the treatment costs. Falsification of the claim can be categorized as fraud when it violates the terms of the claim that has been agreed upon between the two parties. It is a gharar on a developed business agreement and can affect the violation of the terms of the contract. The word of Allah (SWT) means:

Translation: “O you who believe! Do not betray Allah and His Messenger, nor betray your trusts while you know”.

Surah Al-Anfāl 8: 27

The Prohibition of committing treason refers to the proposition above describes a common mistake that can affect either yourself or others. The consequences of such betrayal should be avoided in all aspects of life because it can eliminate trust in contracting. Therefore, the ban can be relied upon as a warning to dialysis centers not to falsify claims for dialysis treatment session payments in the future. The prohibition against falsification of claims for financing dialysis treatment sessions in contracts has violated the main conditions according to the principles of al-ijarah. The principle emphasizes that the rate and purpose of payment must be accurately identified and fulfilled as soon as the contract is established. 9The prosecution must be carried out properly to ensure that the side effects that can occur if it fails to be fully addressed Al-Dusūqī, 2007).

4.2 Increase In Payment Costs

Like the falsification of claims carried out by dialysis centers, the act of increasing the cost of dialysis treatment payments refers to the decision of the dialysis center without discussion with the patient and the financing management of the maximum rate of treatment costs has a significant impact for a long time (Sharifah & Norhazana, 2023). Patients and management are indirectly need to think deeply about the additional cost of treatment because of the high rate of payment. The increase in the cost of treatment fees occurs due to the dialysis center making the conversion by purchasing a more sophisticated dialysis machine, and certainly has a higher cost of payment. To cover the cost of the purchase, dialysis centers have no option but to set the cost of treatment suddenly without a thorough discussion (Norzihan, 2010). Comparison of current dialysis machine purchase rates can be seen in Table 3 below:

Dialysis machine brands	Price in the market	Price comparison
Advanced Double Pump Hemodialysis Machine	RM71, 774.00	RM42,220.00
Veterinary Hemodialysis Machine	RM113, 994.00	

Table 3: Types and comparison of dialysis machines used by dialysis centers.

Based on Table 3, the comparison of the purchase rate of advanced dialysis machines shows a large gap compared to ready-to-use dialysis machines. There have been various reactions to the decision to convert an existing dialysis machine to a new machine. It can be seen as the results of the interview session below with respondents among patients, family members and management of the financing of dialysis treatment costs in Johor Bahru district, Johor.

Respondent 1:

“Dialysis centres are suddenly increasing the cost of dialysis treatment without any prior notice or notification. Should be informed in advance for proper preparation or consideration.”

Respondent 2:

“It’s a bit expensive, but I don’t know if the cost of treatment is too high. This needs to be added again. Please feel sorry for us, we are not among the moneylenders.”

Respondent 3:



“We are trying to find a justification for the conversion of dialysis machines, but the increase in the payment rate needs to be announced and discussed early because it costs a lot of money and needs to be thought about for a long time. In addition, each treatment should be carried out three times a week.”

Based on the results of interviews with respondents, the study found that the additional cost of dialysis treatment should be discussed at various levels in a structured manner and made early before any decision is made. The increase in the cost of this urgent treatment has a big impact on all parties involved. Understanding the purpose of a dialysis centre, making a conversion with the purchase of a new dialysis machine, serves to ensure that treatment can be carried out in a more structured manner using new, more sophisticated technology. It can be traced through the results of interviews with respondents at the dialysis center as below:

Respondent 4:

“We have plans for the development of a dialysis centre to be competitive with other dialysis centres. So, we had to change all dialysis machines in stages to get the attention of patients, especially new patients.”

Respondent 5:

“This decision was made after looking at the use of advanced dialysis machines in other dialysis centers. Each has converted to a new machine despite its high purchase rate.”

Therefore, the addition to the dialysis treatment payment rates submitted above is pledged to al-Mudarat (Amir Fazlim, 2017) to patients and the management of dialysis treatment funding. Al-Mudarat's role in describing the problems caused by the decision to increase the cost of dialysis treatment without a thorough discussion and informed early from the dialysis center to the parties involved. So, they experience difficulties and constraints in meeting those demands in a short time (Masliza, 2007). Based on the discussion, the Dialysis Centre should take a more structured approach by informing early on the conversion and purchase of new machines with the latest technological advancements. This is because the decision involves payment and financing rates that are taken into account by patients and family members, and the management of dialysis treatment financing.

5.0 Conclusion

The problems found in the survey refer to two payment complications involving false payment claims and the increase in the cost of dialysis treatment due to the decision to change dialysis machines using more sophisticated technology. Both of these problems led to a breach of the agreement that had been made between the owner of the dialysis center and the patient, as well as the management of financing the cost of dialysis treatment. The failure could leave a risk impact on the trust and care of the dialysis center in providing good services to dialysis patients for a long time. As such, dialysis centre owners should be concerned with offering treatment services to patients transparently without containing violations or uncertainties. Islam is a religion that is very concerned with the observance of the Covenant and any act that is far from any transgression and betrayal. If it fails to be contained, it has the potential to cause harm on an ongoing basis. Islam is a religion that oppresses and oppresses one another. Among those that can be proposed is that the owner of the dialysis center should review the agreement or payment structure that has been determined so that any conflicts and problems can be overcome. In addition, dialysis center owners need to make announcements or discussions in advance with the parties involved so that welfare and concerns can be addressed. Patients and their families, and the management of the cost of dialysis financing, will be better prepared for any changes if they are discussed and announced in advance.

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