Hearing Aid Acousticians 2009

NATIONAL REFERENCE PRICE LIST FOR SERVICES BY HEARING AID ACOUSTICIANS EFFECTIVE FROM 1 JANUARY 2009

The following reference price list is not a set of tariffs that must be applied by medical schemes and/or providers. It is rather intended to serve as a baseline against which medical schemes can individually determine benefit levels and health service providers can individually determine fees charged to patients. Medical schemes may, for example, determine in their rules that their benefit in respect of a particular health service is equivalent to a specified percentage of the national health reference price list. It is especially intended to serve as a basis for negotiation between individual funders and individual health care providers with a view to facilitating agreements which will minimise balance billing against members of medical schemes. Should individual medical schemes wish to determine benefit structures, and individual providers determine fee structures, on some other basis without reference to this list, they may do so as well.

In calculating the prices in this schedule, the following rounding method is used: Values R10 and below rounded to the nearest cent, R10+rounded to the nearest 10cent. Modifier values are rounded to the nearest cent. When new item prices are calculated, e.g. when applying a modifier, the same rounding scheme should be followed.

VAT EXCLUSIVE PRICES APPEAR IN BRACKETS.

GENE	RAL RULES				
003	The fee in respect of more than one evaluation shall be the full fee for the first evaluation plus half the fee in respect of each additional evaluation, but under no circumstances may fees be charged for more than three evaluations carried out.				
004	Each practitioner shall render a monthly account in respect of any service rendered during the month, irrespective of whether or not the treatment has been completed. NB. Every account shall contain the following particulars:	04.00			
	 The practice code number of the supplier of service The name of the collaborating medical practitioner or audiologist. The name of the member. The name of the patient. The name of the medical scheme. The membership number of the member. The nature of the treatment. The date on which the service was rendered. The relevant diagnostic codes and NHRPL item code numbers relating to the health service rendered. 				
005	It is recommended that, when such benefits are granted, drugs, consumables and disposable items used during a procedure or issued to a patient on discharge will only be reimbursed by a medical scheme if the appropriate code is supplied on the account.	04.00			

ITEMS	ITEMS							
Code	Description	Ver	Add	Hearing Aid Acousticians				
				RVU	Fee			
001	First consultation (comprehensive)	04.00		15.700	82.90 (72.70)			
003	Consultation (screening interview)	04.00		10.000	52.80 (46.30)			
021	Test - air conduction	04.00		10.000	52.80 (46.30)			
023	Test - bone conduction	04.00		10.000	52.80 (46.30)			
025	Test - speech hearing tests	04.00		14.000	73.90 (64.80)			
027	Test - free field	04.00		12.800	67.60 (59.30)			
029	Test - insertion gain (per ear)	04.00		10.900	57.60 (50.50)			
031	Test - binaural loudness balance test, per ear	04.00		12.800	67.60 (59.30)			
051	Global charge for supply and fitting of hearing aid and follow-up (By arrangement with scheme)	04.00		-	-			
053	Hearing Aid Evaluation, per ear (refer to General Rule 003)	04.00		12.800	67.60 (59.30)			
055	Technical adjustment or replacement of earmolds	04.00		21.100	111.40 (97.70)			
057	Repairs/service per instrument (3 X services/4 year cycle)	04.00		-	-			
059	Tympanogram	04.00		10.000	52.80 (46.30)			
061	Reflex test (stapedial reflex)	04.00		10.000	52.80 (46.30)			
107	Appointment not kept (schemes will not necessarily grant benefits in respect of this item, it will fall into the "By arrangement with the scheme" or "Patient own account" category).	04.00		-	-			