

Private Hospitals 2009

NATIONAL REFERENCE PRICE LIST IN RESPECT OF PRIVATE HOSPITALS (PRACTICE NUMBERS "57" OR "58") AND UNATTACHED OPERATING THEATRE UNITS/DAY CLINICS (PRACTICE NUMBER "77") WITH EFFECT 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.

GENERAL RULES

SCHEDULE

B	The charges relating to each type of hospital/unattached operating theatre unit are indicated in the relevant column opposite the item codes.	09.05
C	The charges indicated in Section 5 hereof, are applicable to both categories of such hospitals and unattached operating theatre units.	04.00
D	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
E.1	Procedure for the classification of hospitals:	04.00
E.1.1	Inspections private hospitals or unattached operating theatre units/day clinics having practice code numbers commencing with the digits 057, 058 or 077 will be conducted by an independent agency on behalf of BHF. Applications to be addressed in writing to BHF.	09.05
E.3.2	The provisions referred to in E.1.1 shall apply mutatis mutandis to all approved specialised intensive care units, specialised theatres, catheterisation laboratories and trauma unit.	04.00
F.1	Procedures to consider applications by institutions to be classified as unattached operating theatre units having a practice code number commencing with the digits 77 and for the reclassification of unattached operating theatre units with 76 practice numbers.	09.05
F.1.1	Inspections of new unattached theatre operating units and units having practice code numbers commencing with the digit 76, to be reclassified as approved unattached operating theatre units having practice numbers commencing with the digits 77 will be conducted by an independent agency on behalf of BHF. Applications to be addressed in writing to BHF.	09.05
G	All accounts submitted by private and unattached operating theatre units/day clinics shall comply with all of the requirements in terms of the Medical Schemes Act, Act No. 131 of 1999. Where possible, such accounts shall also reflect the practice code numbers and names of the surgeon, the anaesthetist and of any assistant surgeon who may have been present during the course of an operation.	09.05
H	All accounts shall be accompanied by a copy of the relevant theatre accounts specifying all details of items charged, as well as all the procedures performed. Photocopies of all other documents pertaining to the patients account must be provided on request. Medical schemes shall have the right to inspect the original source documents at the hospital/unattached operating theatre unit concerned.	09.05
I	All accounts containing items which are subject to a discount in terms of the recommended benefit shall indicate such items individually and shall show separately the gross amount of the discount.	04.00

1 ACCOMMODATION

Ward fees

	<p>Hospitals and unattached operating theatre units shall indicate the exact time of admission and discharge on all accounts.</p> <p>In the case of hospitals, the day admission fee (code 007) shall be charged in respect of all patients admitted as day patients and discharged before 23h00 on the same date.</p> <p>The following will be applicable to items 001 to 005, 015, 020, 200, 201, 202 and 215 to 218:</p> <p>On the day of admission: If accommodation is less than 12 hours from time of admission : half the daily rate If accommodation is more than 12 hours from time of admission: full daily rate</p> <p>Two half day fees would be applicable when a patient is transferred internally between any ward and any specialised unit.</p> <p>On day of discharge: If accommodation is less than 12 hours: half the daily rate If accommodation is more than 12 hours: full daily rate</p>	09.05
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Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
	<p>1. The costs of special treatment of newly born infants, e.g. circumcision certified as necessary by the attending practitioner, which shall be dealt with in accordance with the National Reference Price List for private hospitals and the rules of the relevant scheme pertaining to such dependants.</p> <p>2. If an epidural anaesthetic is given for either a vaginal delivery or a caesarean section, an additional fee (item 011) may be charged. This comprises of an epidural pack, all consumables used, as well as nursing time.</p> <p>3. An uncomplicated stay in a nursery for routine observation is included in the maternity fee, as well as phototherapy and routine high care observation after delivery for the new born baby.</p> <p>4. A neonate requiring specialised treatment in a ward, high care or ICU shall be considered to be a patient in its own right and, for that reason, the National Reference Price List shall be applied to such neonate and an account may be rendered on a fee for service basis.</p> <p>In such cases, the fixed fee per day remains applicable until the mother is discharged, but the amount of item 015, per day must be deducted from the fixed fee (comprising the nursery fee component).</p> <p>5. If the mother is admitted into high care or ICU, the full account is rendered on a fee for service basis, as this is clearly not an uncomplicated delivery. The codes for the nursery fee (item 015) and the delivery room (item 016) must be used to cover these specific services.</p> <p>6. The first day fee includes the cost of admitting the mother, 'prepping' and 'staging' etc, admission into the delivery room, the delivery and post natal period up until midnight. This includes any cost incurred during the early stages of an uncomplicated delivery, even if prolonged labour occurs.</p> <p>The second day is calculated as starting from midnight following the birth of the neonate on the day of the delivery.</p> <p>If however, the mother needs admission for stabilisation or treatment of a medical condition such as diabetes, pre-eclampsia or urinary tract infection, such an admission falls outside the scope of the maternity fixed fee. An account will then be rendered on a fee for service basis, until such time that the baby is delivered. If delivery itself is uncomplicated, then the first day (fixed) fee will be chargeable on the date of delivery, and second and subsequent days until the mother is discharged.</p> <p>If however, the mother is admitted to ICU or high care the full account must be rendered on a fee for service basis. If the baby needs admission - see (4).</p> <p>7. Admission for suppression of premature labour is not an uncomplicated delivery, and an account must be rendered on a fee for service basis.</p> <p>8. The following list of surgicals (maternity basket) are included in the per diem fee.</p> <p>THEATRE SURGICALS FOR NORMAL VAGINAL DELIVERIES THEATRE CHARGES 1 X Amnihook 1 X Continue Flo 1 X Cord Clamp 3 X Gloves Surgical St 8 X Gloves Sterile 4 X I D Bands 0.5 X Jaques Catheter 1 X Jelco IV 1 X KY Jelly Sachet 20 X Maternity Pad 5 X Preptic Swabs 1 X Spiral Electrode 1 X Spinocan 1 X Suction Catheter St 1 X Swabbing Tray 1 X Tegaderm 1626</p>								

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
	1 X Vaginal Plug 2 X Water for irrigation 1 X Stockinette 2 X Silicone Tubing 1 X Add a Line SUTURES 0.25 X Suture W734 0.25 X Suture W758 0.25 X Suture W727 0.25 X Suture W734 0.25 X Suture W758 0.25 X Suture W770 0.25 X Suture W759 0.25 X Suture W441 SYRINGES 1 X Syringe 1ml 1 X Syringe 20ml 3 X Syringe 2ml 2 X Syringe 5ml DRESSINGS 2 X Cotton Wool Balls L/s THEATRE SURGICALS FOR CAESARS WITH GENERAL ANAESTHETIC THEATRE CHARGES 1 X Amnihook 1 X Airway 1 X Sterile Tray 2 X Continue Flo 1 X Cord Clamp 1 X Diathermy Plate Dispo 1 X ET Tube 3 X Electrodes Red Dot 1 X Foley catheter 8 X Gloves Surgical St 5 X Gloves Sterile 4 X I D Bands 1 X Jelco IV 2 X KY Jelly Sachet 20 X Maternity Pad 10 X Preptic Swabs 1 X Sheet _ 1 X Spiral Electrode 1 X Spinocan 1 X Suction Catheter St 1 X Swabbing Tray 1.2 X Tegaderm 1626 1 X Urine Drn Bag 1 X Vent Pump Set 1 X Yankuer Suction 6 X Water for irrigation								

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				RVU	Fee	RVU	Fee	RVU	Fee
	1 X Stockinette 2 X Silicone Tubing 2 X Opticlude 1 X Add a Line SUTURES 0.06 X Suture W441 0.30 X Suture 8623G 0.11 Suture W791 0.30 X Suture W9999 2.20 X Suture W493 0.17 X Suture W795 0.17 X Suture W797 0.30 X Suture W439 0.17 X Suture W434 0.17 X Suture W445 1 X Suture W728 1 X Suture V518G 1 X Suture V486G 0.20 X Suture V523G 0.30 X Suture V523G SYRINGES 1 X Syringe 1ml 1 X Syringe 20ml 1 X Syringe 10ml 8 X Syringe 2ml 2 X Syringe 5ml DRAIN 1 X Corrugated Drain DRESSINGS 15 X Abominal Swabs 3 X Cotton Wool Balls L/s 5 X Gauze Sterile Xray 1 X Telfa Dressing 1 X Steripad 1 X Tegaderm 1627 5 X Paint Balls								
2.1	Natural births								
009	First day (Day of confinement).	04.00		174.458	5375.70 (4715.60)	174.458	5375.70 (4715.60)	-	-
010	Subsequent day(s).Per day	04.00		60.096	1851.80 (1624.40)	60.096	1851.80 (1624.40)	-	-
017	Subsequent day(s) excluding nursery fee.	04.00		43.717	1347.10 (1181.70)	43.717	1347.10 (1181.70)	-	-
2.3	Caesarean								
012	First day (Day of confinement).	04.00		270.992	8350.30 (7324.90)	270.992	8350.30 (7324.90)	-	-
013	Subsequent day(s). Per day	04.00		59.583	1836.00 (1610.50)	59.583	1836.00 (1610.50)	-	-

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				RVU	Fee	RVU	Fee	RVU	Fee
	Note: The following fees (items 015 and 016) are included in the above per diem fees, and may only be charged on a fee for service account	04.00							
015	Nursery fee.	04.00		16.925	521.50 (457.50)	16.925	521.50 (457.50)	-	-
016	Delivery room. This item is not applicable for deliveries by registered midwives in private practice.	09.05		72.746	2241.60 (1966.30)	72.746	2241.60 (1966.30)	-	-
018	Subsequent day(s) excluding nursery fee	04.00		42.963	1323.90 (1161.30)	42.963	1323.90 (1161.30)	-	-
2.4.1	Epidural fee								
011	Use of epidural anaesthesia for MATERNITY CASES ONLY. (Note: This item includes all surgicals and nursing but no ethicals)	09.05		26.500	816.60 (716.30)	26.500	816.60 (716.30)	-	-
2.4.2	Birthing Unit								
	The birthing unit fee may only be charged by an approved maternity unit in a hospital. It includes preparation, labour room, recovery ward fee for mother and baby and the maternity basket. The only additional charge that may be levied is for pharmaceuticals. This fee may not be charged for together with the per diem fees for maternity and is not applicable to medical practitioners or other professions.								09.05
030	Global fee for a Birthing Unit (Accredited or Approved by BHF). This fee is chargeable when a nurse in private practice uses the labour ward in the hospital and the patient is discharged within 12 hours from birth.	09.05		109.004	3358.80 (2946.40)	109.004	3358.80 (2946.40)	-	-
031	Global fee for a Birthing Unit (Accredited or Approved by BHF) This fee is chargeable when a nurse in private practice uses the labour ward in the hospital and the patient stay exceed 12 hours and is discharged within 24 hours from birth.	09.05		169.100	5210.60 (4570.70)	169.100	5210.60 (4570.70)	-	-
032	Additional Birthing Unit fee chargeable for every additional 12 hours of patient stay beyond the 24 hours contemplated in code 031	09.05		30.026	925.20 (811.60)	30.026	925.20 (811.60)	-	-
1.2	Private Wards								
020	Private ward Hospitals shall obtain a certificate motivating for the necessity for accommodation in a private ward, including reversed barrier nursing, from the attendant practitioner, and such certificate shall be forwarded to the relevant scheme for pre-authorisation. General ward fees are applicable to isolation.	09.05		46.608	1436.20 (1259.80)	46.608	1436.20 (1259.80)	-	-
021	Private ward on member's request or for convenience of hospital will be funded at scale of benefits for general ward.	09.05		-	-	-	-	-	-
1.3	Special Care Units								
	Specialised units are defined as: Intensive Care Unit (ICU), Cardio-Thoracic Intensive Care Unit (CTICU), Neonatal Intensive Care Unit (NICU), High Care (HC), Neonatal High Care (NHC), A & B.								04.00
	Hospitals shall obtain a certificate stating the reason for accommodation in any specialised or other intensive care unit or in high care ward including neonatal intensive care and high care from the attending practitioner, and such certificate showing the date and time of admission and discharge from the unit shall be forwarded to the relevant medical scheme for pre-authorisation. No charge may be levied to medical schemes for special or private nursing. Note: Specialised intensive care units and specialised theatres are to be individually inspected and approved by BHF.								09.05
200	Specialised ICU (As approved by BHF according to General Rule E.1.1) Per day	04.00		195.088	6011.40 (5273.20)	195.088	6011.40 (5273.20)	-	-
	(Subject to a maximum of 1 day. Pre-authorisation required for every additional day thereafter. Item 201 will apply if no pre-authorisation is obtained. Use of this unit shall be limited to cardio-thoracic surgery, major vascular surgery and neuro-surgery cases involving surgery on the brain and spinal cord).	09.05							
201	Intensive Care Unit: Per day.	04.00		148.479	4575.20 (4013.40)	148.479	4575.20 (4013.40)	-	-

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				RVU	Fee	RVU	Fee	RVU	Fee
202	Neonatal Intensive Care Unit: Per day.	04.00		184.863	5696.40 (4996.80)	184.863	5696.40 (4996.80)	-	-
	(The charges referred to under items 200, 201 and 202 include the use of all equipment except: Bennett MA, Servo and Bear ventilators or equivalent apparatus plus the cost of oxygen)	09.05							
215	High Care Ward, Per day.	04.00		95.108	2930.70 (2570.80)	95.108	2930.70 (2570.80)	-	-
216	Neonatal High Care Ward `A' (Intensive nursing and monitoring)	04.00		103.308	3183.30 (2792.40)	103.308	3183.30 (2792.40)	-	-
217	Neonatal High Care Ward `B' (Standard nursing and monitoring)	04.00		67.538	2081.10 (1825.50)	67.538	2081.10 (1825.50)	-	-
218	Neonatal ward fee (Pre-discharge - This fee may not be charged for routine post-natal nursery care).	04.00		44.513	1371.60 (1203.20)	44.513	1371.60 (1203.20)	-	-
	Note: Once the baby has been stabilised and no longer requires ICU care but is not ready to be returned to the general nursery, no additional equipment charges, eg phototherapy may be charged. All admissions to units/wards referred to under 201 to 202 shall be confirmed with the relevant scheme for each 72 hours and 215 to 218 shall be confirmed weekly with the relevant scheme.	09.05							
2	EMERGENCY UNIT								
2.1	Emergency Unit Fee								
105	Resuscitation fee charged only if patient has been resuscitated and intubated in a trauma unit which has been approved by BHF	04.00		45.858	1413.10 (1239.50)	45.858	1413.10 (1239.50)	-	-
301	For all consultations including those requiring basic nursing input, e.g. BP measurement, urine testing, application of simple bandages, administration of injections.	09.05		-	-	-	-	-	-
302	For all consultations which require the use of a procedure room or nursing input, e.g. for application of plaster of Paris, stitching of wounds, insertion of IV Therapy. Includes the use of the procedure room. No per minute charge may be levied.	09.05		10.533	324.60 (284.70)	10.533	324.60 (284.70)	10.533	324.60 (284.70)
	Note: The procedure room fee (071) cannot be charged in addition to 302	09.05							
2.2	Theatre Fees								
061	Excimer Laser Theatre fee, per minute	04.00		0.650	20.00 (17.60)	0.650	20.00 (17.60)	0.650	20.00 (17.60)
	The items listed as non-recoverable in Annexure B shall be deemed to be included in theatre fees, and no charge in respect thereof may be levied.	09.05							
3.2.1	Minor Theatre, regardless of type of theatre available, the incident is procedure driven and not facility driven								
	A facility where simple procedures which require limited instrumentation and drapery, minimum nursing input and short or no general anaesthetic, are carried out. No Sophisticated monitoring is required but resuscitation equipment (trolley) must be available in the procedure room. Conscious sedation by arrangement with scheme.								09.05
3.2.2	Time in minor theatre								
071	Charge per minute (which includes 0.16c per minute for those items in the surgical basket).	09.05		0.500	15.40 (13.50)	0.500	15.40 (13.50)	0.429	13.20 (11.60)
	The exact time of admission to and discharge from the minor theatre shall be stated, upon which the minor theatre charge shall be calculated as follows	09.05							
2.3	Major theatre								
	In addition to the theatre charge calculated as above, a surcharge (modifier 0002 and/or 0003) shall be allowed in cases where specialised theatres referred to in General Rule E.1.1 are utilised for the performance of any of the undermentioned procedures, whether carried out individually or in combination with each other, this surcharge shall be deemed to cover the equipment in the criteria. Note: Specialised intensive care units and specialised theatres are to be individually inspected and approved by BHF								09.05

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				RVU	Fee	RVU	Fee	RVU	Fee
0002	Modifier 0002: Orthopaedic, Neurosurgical and Vascular: · Joint replacements (only hip, knee, shoulder ankle or elbow) · Femoral popliteal bypasses · Carotid endarterectomies · Aortic Aneurysm repair and arterial grafts · Neurosurgery (Surgery on the brain and spinal cord only, excludes neurolysis)	09.05		48.309	1488.59 (1305.78)	48.309	1488.59 (1305.78)	-	-
0003	Modifier 0003: Cardiac surgery Cardio-thoracic and Cardio-vascular surgery · All open heart surgery, with or without the insertion of a prosthesis, coronary artery bypass grafts and heart transplants. Includes all equipment (except item 513), no additional fees may be charged NOTE: The above surcharge will also be applicable to approved provincial hospitals	09.05		110.688	3410.74 (2991.88)	110.688	3410.74 (2991.88)	-	-
Time in Theatre									
081	Charge per minute (which includes 0.16c per minute for those items in the surgical basket).	09.05		1.554	47.90 (42.00)	1.554	47.90 (42.00)	1.329	41.00 (35.90)
	The exact time of admission to and discharge from theatre shall be stated, upon which the theatre charge shall be calculated as follows	04.00							
3.2.4 Specialised Theatre Modifiers									
3 Procedural Fees									
	The fees quoted for items 052, 053 and 055 shall be all-inclusive and no additional charges of whatsoever nature may be raised, except for items 515, 529, 533, 535 and any items chargeable in terms of Section 4 and 5 hereof. NOTE: Ward fees may however be chargeable together with items 053 and 055.								09.05
3.1 Procedures									
052	Procedures carried out in X-ray department using hospital owned equipment under general anaesthetic.	09.05		14.342	441.90 (387.70)	14.342	441.90 (387.70)	14.342	441.90 (387.70)
053	Angiograms.	09.05		14.342	441.90 (387.70)	14.342	441.90 (387.70)	-	-
055	Electroconvulsive therapy (ECT)	04.00		14.342	441.90 (387.70)	14.342	441.90 (387.70)	14.342	441.90 (387.70)
3.2 Catheterisation laboratory procedures									
	Note: A certificate indicating the level of the catheterisation laboratory used, should be signed by the relevant doctor, indicating the information if required by the medical scheme.								09.05
	The fees quoted for items 054, 056, 070 and 073 shall be all-inclusive and no additional charges of whatsoever nature may be raised, except for items 515, 529, 533 and 535 and any items chargeable in terms of Section 4 and 5 hereof. NOTE: ward fees may however be chargeable together with items 054, 055, 056, 070 and 073.								09.05
054	Cardiac angiography and catheterisation, and other intravascular procedures, (angioplasty, placement of pacemakers, stents and embolisation or embolectomy when carried out in a facility equipped with a recognised analogue monoplane unit, and in a hospital equipped to perform the relevant surgery, as approved by the committee established in terms of General Rule E.1.1 NB: For EPS studies, the Bard Apparatus (item 529) must be charged additionally.	09.05		51.446	1585.30 (1390.60)	51.446	1585.30 (1390.60)	-	-

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				RVU	Fee	RVU	Fee	RVU	Fee
056	Cardiac angiography and catheterisation, and other intravascular procedures, (angioplasty, placement of pacemakers, stents and embolisation or embolectomy when carried out in a facility equipped with a recognised analogue bi-plane unit, and in a hospital equipped to perform the relevant surgery, as approved by the committee established in terms of General Rule E.1.1	09.05		96.929	2986.80 (2620.00)	96.929	2986.80 (2620.00)	-	-
070	Cardiac angiography and catheterisation, and other intravascular procedures, (angioplasty, placement of pacemakers, stents and embolisation or embolectomy when carried out in a facility equipped with a recognised digital bi-plane unit, and in a hospital equipped to perform the relevant surgery, as approved by the committee established in terms of General Rule E.1.1. NB: EPS for cardiac ablations - items 529 must be charged additionally.	09.05		251.804	7759.10 (6806.20)	251.804	7759.10 (6806.20)	-	-
073	Cardiac angiography and catheterisation, and other intravascular procedures, (angioplasty, placement of pacemakers, stents and embolisation or embolectomy when carried out in a facility equipped with a recognised digital monoplane unit, and in a hospital equipped to perform the relevant surgery, as approved by the committee established in terms of General Rule E.1.1	09.05		186.233	5738.60 (5033.80)	186.233	5738.60 (5033.80)	-	-
075	Catheterisation laboratory film price (once per procedure)	09.05		5.546	170.90 (149.90)	5.546	170.90 (149.90)	-	-
3.3	Radiation Oncology								
4.3.1	Simulation - Fixed custom made								
902	Simple - Simulation of a single area with either a single port or parallel opposed ports. Simple or no blocking or use of custom/home made simulation	04.00		15.263	470.30 (412.60)	15.263	470.30 (412.60)	-	-
903	Intermediate - Simulation of three or more converging ports, two separate treatment areas or multiple blocks.	04.00		23.283	717.40 (629.30)	23.283	717.40 (629.30)	-	-
904	Complex - Simulation of tangential portals, three or more treatment areas, rotation or arc therapy, complex blocks, custom shielding blocks, brachytherapy source verification, hyperthermia probe verification, any use of contrast	04.00		30.525	940.60 (825.10)	30.525	940.60 (825.10)	-	-
905	Computerised Tomographic.	04.00		30.525	940.60 (825.10)	30.525	940.60 (825.10)	-	-
4.3.2	Treatment Planning								
906	Manual.	04.00		-	-	-	-	-	-
907	Simple - Planning requiring single treatment area of interest in a single port or simple parallel opposed ports with simple or no blocking	04.00		14.383	443.20 (388.80)	14.383	443.20 (388.80)	-	-
908	Computerised (intermediate) - Planning requiring three or more ports, two separate treatment areas, multiple blocks or special time dose constraints	04.00		21.942	676.10 (593.10)	21.942	676.10 (593.10)	-	-
909	Computerised (complex) - Planning requiring highly complex blocking, custom shielding blocks, tangential ports, special wedges or compensators, three or more separate treatment areas, rotational or special beam considerations or a combination of therapeutic modalities	04.00		28.742	885.70 (776.90)	28.742	885.70 (776.90)	-	-
4.3.3	Technical Aids								
910	Control films (As per radiology film price list).	04.00		-	-	-	-	-	-
911	Dosimetric procedures.	04.00		0.838	25.80 (22.70)	0.838	25.80 (22.70)	-	-
912	Artefacts: Simple - design and construction (simple block or bolus)	09.05		2.096	64.60 (56.70)	2.096	64.60 (56.70)	-	-
913	Artefacts: intermediate - design and construction (multiple blocks, stents, bite blocks, special bolus).	09.05		5.704	175.80 (154.20)	5.704	175.80 (154.20)	-	-
914	Artefacts: complex (specify) - design and construction (irregular blocks, special shields, compensators, wedges, molds or casts)	09.05		11.404	351.40 (308.20)	11.404	351.40 (308.20)	-	-

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4.3.4	Linear accelerator treatment								
915	Photon treatment, single field.	04.00		22.288	686.80 (602.40)	22.288	686.80 (602.40)	-	-
916	Photon treatment, multiple fields	04.00		32.100	989.10 (867.70)	32.100	989.10 (867.70)	-	-
917	Electron treatment.	04.00		22.288	686.80 (602.40)	22.288	686.80 (602.40)	-	-
919	Brachytherapy - global fee per patient.	04.00		169.388	5219.50 (4578.50)	169.388	5219.50 (4578.50)	-	-
3.4	Stereotactic radiosurgery								
	Included in item 430 Stereotactic frames and attachments Linear Accelerator Specialised graphic planning, hardware and software Simulator and dark rooms 10 dental films Stereotactic masks All disposables 4 to 20 Graphic transparencies (including 1 week of planning) 2 trained radiographers Fixation and immobilisation Nuclear Specialist Medical Physicist Duration 1 - 4 hours 2 treatment radiographers Excluded from fee Other medical practitioners CT & MRI								04.00
399	Linear Accelerator radiosurgery - Global Fee	04.00		3682.96 3	113486.80 (99549.80)	3682.96 3	113486.80 (99549.80)	-	-
	Item 399 is an all- inclusive single global radiosurgery fee, payable to a hospital. This item includes item 430, all imaging and all clinical fees. The hospital is responsible for reimbursement of all fees to all the professional providers of service involved in the treatment rendered under this item.	04.00							
430	Global fee for stereotactic radiosurgery	04.00		2520.60 0	77669.80 (68131.40)	2520.60 0	77669.80 (68131.40)	-	-
4	Standard Charges for Equipment								
220	Ballistic Lithotripsy/Lithoclast: First lithotripsy treatment for one or more stones in same kidney which are eliminated in one treatment	09.05		18.700	576.20 (505.50)	18.700	576.20 (505.50)	18.700	576.20 (505.50)
221	Ballistic Lithotripsy/Lithoclast: Second lithotripsy treatment on same kidney (Hospitals shall provide a certificate by the attending surgeon certifying that a second treatment was medically necessary)	09.05		12.454	383.80 (336.60)	12.454	383.80 (336.60)	12.454	383.80 (336.60)
222	Laser Lithotripsy: First lithotripsy treatment for one or more stones in same kidney which are eliminated in one treatment	09.05		124.638	3840.60 (3368.90)	124.638	3840.60 (3368.90)	124.638	3840.60 (3368.90)
223	Laser Lithotripsy: Second lithotripsy treatment on same kidney (Hospitals shall provide a certificate by the attending surgeon certifying that a second treatment was medically necessary)	09.05		83.021	2558.20 (2244.00)	83.021	2558.20 (2244.00)	83.021	2558.20 (2244.00)
224	Stone basket (reusable) for the removal of kidney-, bladder- or gallstones: Per case	09.01		50.263	1548.80 (1358.60)	50.263	1548.80 (1358.60)	50.263	1548.80 (1358.60)

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				RVU	Fee	RVU	Fee	RVU	Fee
225	Stereotactic equipment for use in neuro-surgical procedures, when used in conjunction with x-rays, MRI scans or CAT scans: Per case	09.05		48.033	1480.10 (1298.30)	48.033	1480.10 (1298.30)	-	-
226	Continuous Passive Exerciser: Per day.	09.01		3.808	117.30 (102.90)	3.808	117.30 (102.90)	3.808	117.30 (102.90)
227	Operating microscope - motorised. This is applicable to a binocular operating microscope with motorised focusing, positioning and zoom magnification changer. Spinal, intra-cranial and ophthalmic surgery only (all ENT and other surgery excluded): Per case	09.01		10.604	326.80 (286.60)	10.604	326.80 (286.60)	10.604	326.80 (286.60)
228	Operating microscope - manually operated. Applicable to a binocular operating microscope with manual focusing, positioning and multistep magnification changer. Microscopic surgery only: Per case	09.01		5.242	161.50 (141.70)	5.242	161.50 (141.70)	5.242	161.50 (141.70)
230	Patient-controlled analgesia pump, being a programmable reusable analgesia infusion system, providing patient control and/or continuous analgesia modes with mechanisms to limit self administration per time period and with lockout interval. Applicable only to administration of analgesics: Per day	09.01		4.021	123.90 (108.70)	4.021	123.90 (108.70)	4.021	123.90 (108.70)
	Not applicable in Specialised units, ICU and High Care units. 1 per patient for maximum of 48 hours in ward Chargeable in the following instances: - Major joint replacement - Open, upper abdominal surgery - Severe burns - Paediatrics in special cases on motivation - Thoracotomies (motivation by practitioner) - Intractable pain associated with malignancy	09.05							
231	Cardiac monitors - in private, general and high care wards only - not to be charged for routine ECG's: Per day or part thereof	09.05		4.371	134.70 (118.10)	4.371	134.70 (118.10)	-	-
232	Bird or equivalent free standing nebuliser (excluding oxygen): Per day	04.00		3.129	96.40 (84.60)	3.129	96.40 (84.60)	3.129	96.40 (84.60)
233	Croupettes (excluding oxygen): Per day or part thereof	04.00		0.896	27.60 (24.20)	0.896	27.60 (24.20)	-	-
234	Incubators (excluding oxygen) (not chargeable together with items 215 to 218: Per day or part thereof	04.00		1.675	51.60 (45.30)	1.675	51.60 (45.30)	-	-
235	Oxygen tents (excluding oxygen): Per day or part thereof	04.00		1.458	44.90 (39.40)	1.458	44.90 (39.40)	-	-
236	Mechanical ventilator or equivalent (only in ICU and high care ward where no ICU is available) (excluding oxygen): Per day or part thereof	09.05		13.963	430.30 (377.40)	13.963	430.30 (377.40)	-	-
237	CUSA (plus CUSA pack as per section 5).	09.05		67.804	2089.30 (1832.70)	67.804	2089.30 (1832.70)	-	-
238	Lasers - Argon or Holium (ophthalmic).	04.00		21.004	647.20 (567.70)	21.004	647.20 (567.70)	21.004	647.20 (567.70)
239	Lasers - CO2 (surgical).	04.00		27.138	836.20 (733.50)	27.138	836.20 (733.50)	27.138	836.20 (733.50)
241	Lasers - Candella (Rates by arrangement with the scheme concerned)	09.05		-	-	-	-	-	-
242	Occutomes.	04.00		8.933	275.30 (241.50)	8.933	275.30 (241.50)	8.933	275.30 (241.50)
243	Lasers - YAG (ophthalmic).	04.00		23.683	729.80 (640.10)	23.683	729.80 (640.10)	23.683	729.80 (640.10)
244	Lasers - YAG (surgical).	04.00		29.492	908.80 (797.20)	29.492	908.80 (797.20)	29.492	908.80 (797.20)
245	First Extra Corporeal Shock Wave Lithotripsy (ESWL) treatment for one or more stones in same kidney which are eliminated in one treatment.	04.00		272.863	8408.00 (7375.40)	272.863	8408.00 (7375.40)	272.863	8408.00 (7375.40)
246	Second Extra Corporeal Shock Wave Lithotripsy (ESWL) treatment on same kidney (Hospitals shall provide a certificate by the attending surgeon certifying that a second treatment was medically necessary)	04.00		181.733	5599.90 (4912.20)	181.733	5599.90 (4912.20)	181.733	5599.90 (4912.20)

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				RVU	Fee	RVU	Fee	RVU	Fee
	Note: The fees in respect of items 220 to 223, 245 to 246 and 339 to 341 are inclusive of all equipment and components but exclusive of theatre fees and items chargeable under Section 5. The C-arm (item 249) and screening table (item 251) are not chargeable with these equipment fees.	09.05							
249	C Arm (not chargeable when Modifiers 0002, 0003 or item 251 applies).	09.05		8.817	271.70 (238.30)	8.817	271.70 (238.30)	8.817	271.70 (238.30)
250	Ultrasonic imaging equipment.	04.00		14.738	454.10 (398.40)	14.738	454.10 (398.40)	14.738	454.10 (398.40)
	(Limited to real-time imaging equipment for transrectal applications with needle-biopsy capability or Doppler ultrasound for vascular anatomy and haemo-dynamics) Note: This can be used for infertility treatment	09.05							
251	Screening table - fixed base urology table (including all radiographic equipment) (See item 249) Note: May not be used in conjunction with items 220 to 223, 245 to 246 and 339 to 341.	04.00		19.883	612.70 (537.40)	19.883	612.70 (537.40)	19.883	612.70 (537.40)
252	Gastroscope (fibre optic/flexible only).	04.00		11.617	358.00 (314.00)	11.617	358.00 (314.00)	11.617	358.00 (314.00)
253	Colonoscope (fibre optic/flexible only)	04.00		12.992	400.30 (351.20)	12.992	400.30 (351.20)	12.992	400.30 (351.20)
254	Duodenoscope (fibre optic/flexible only).	04.00		12.308	379.30 (332.70)	12.308	379.30 (332.70)	12.308	379.30 (332.70)
255	Sigmoidoscope (fibre optic).	04.00		9.979	307.50 (269.70)	9.979	307.50 (269.70)	9.979	307.50 (269.70)
256	Bronchoscope (flexible/fibre optic, adults).	04.00		8.200	252.70 (221.60)	8.200	252.70 (221.60)	8.200	252.70 (221.60)
257	Laryngoscope (fibre optic/flexible excluding intubation)	09.05		4.788	147.50 (129.40)	4.788	147.50 (129.40)	4.788	147.50 (129.40)
258	Sinoscope (rigid only)	04.00		5.463	168.30 (147.70)	5.463	168.30 (147.70)	5.463	168.30 (147.70)
259	Oesophagoscope (rigid only)	04.00		2.725	84.00 (73.70)	2.725	84.00 (73.70)	2.725	84.00 (73.70)
261	Hysteroscope	04.00		3.429	105.70 (92.70)	3.429	105.70 (92.70)	3.429	105.70 (92.70)
262	Colposcope (Not chargeable when item 239 applies)	04.00		4.788	147.50 (129.40)	4.788	147.50 (129.40)	4.788	147.50 (129.40)
263	Cysto Urethroscope	09.05		4.108	126.60 (111.00)	4.108	126.60 (111.00)	4.108	126.60 (111.00)
264	Arthroscope (including basic reusable instruments and equipment)	04.00		11.200	345.10 (302.70)	11.200	345.10 (302.70)	11.200	345.10 (302.70)

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	Note: The basic reusable instruments and equipment (which would always include the equivalent to the items named) are included in the fee of item 264 (see list below) : - Telescope, light source, cable - Monitor - Electrosurgical instrument - High frequency cord - Obturator - Camera - Focussing camera coupler - Control console, footswitch - Probe, scissors, (hooked, parrot beak), grasper, forceps (punch basket, duckbill), camelback handle, powered arthroplasty system, handpiece.	04.00							
294	Transcranial Doppler	04.00		24.417	752.40 (660.00)	24.417	752.40 (660.00)	-	-
295	Ultrasonic Cutting and Coagulating Devices (See section 5.3.3)	09.05		6.721	207.10 (181.70)	6.721	207.10 (181.70)	6.721	207.10 (181.70)
335	Excimer laser: Hire fee per eye	04.00		74.092	2283.10 (2002.70)	74.092	2283.10 (2002.70)	74.092	2283.10 (2002.70)
337	Microkeratome used with an excimer laser, per operation.	04.00		13.608	419.30 (367.80)	13.608	419.30 (367.80)	13.608	419.30 (367.80)
339	Ballistic lithotripsy magnetic: First lithotripsy treatment for one or more stones in same kidney which are eliminated in one treatment	09.05		8.279	255.10 (223.80)	8.279	255.10 (223.80)	8.279	255.10 (223.80)
341	Ballistic lithotripsy magnetic: Second lithotripsy treatment on same kidney (Hospitals shall provide a certificate by the attending surgeon certifying that a second treatment was medically necessary)	09.05		5.525	170.20 (149.30)	5.525	170.20 (149.30)	5.525	170.20 (149.30)
343	Sigmoidoscope (rigid, adults)	04.00		2.050	63.20 (55.40)	2.050	63.20 (55.40)	2.050	63.20 (55.40)
345	Sigmoidoscope (rigid, paediatrics)	04.00		1.658	51.10 (44.80)	1.658	51.10 (44.80)	1.658	51.10 (44.80)
347	Bronchoscope (flexible/fibre optic, paediatrics)	04.00		8.200	252.70 (221.60)	8.200	252.70 (221.60)	8.200	252.70 (221.60)
	Note: For codes 252-256 and 343-347, reusable biopsy and polyp forceps are included in the fee.	04.00							
348	Bronchoscope (rigid, adults)	04.00		3.283	101.20 (88.70)	3.283	101.20 (88.70)	3.283	101.20 (88.70)
349	Bronchoscope (rigid, paediatrics)	04.00		4.788	147.50 (129.40)	4.788	147.50 (129.40)	4.788	147.50 (129.40)
360	Category 1 - Laparoscopy and thoracoscopy, per case. See Annexure A	09.05		26.825	826.60 (725.10)	26.825	826.60 (725.10)	26.825	826.60 (725.10)
364	Category 2 - Interventional Laparoscopic and Thorascopic procedures, per case. See Annexure A	09.05		31.867	981.90 (861.40)	31.867	981.90 (861.40)	31.867	981.90 (861.40)
507	Argon Beamer (See section 5.3.2)	09.05		2.721	83.80 (73.50)	2.721	83.80 (73.50)	2.721	83.80 (73.50)
	Note: The Argon Beamer will not apply where a standard electosurgery unit is used. It can only be used with surgery on internal organs and in neurosurgery.	04.00							
509	Endometrial Resection (Radio frequency)	04.00		16.425	506.10 (444.00)	16.425	506.10 (444.00)	16.425	506.10 (444.00)
511	Colour Doppler (external)	04.00		49.167	1515.00 (1329.00)	49.167	1515.00 (1329.00)	49.167	1515.00 (1329.00)

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				RVU	Fee	RVU	Fee	RVU	Fee
513	Transoesophageal Colour Doppler. (May be charged together with Modifier 0003)	04.00		59.325	1828.00 (1603.50)	59.325	1828.00 (1603.50)	59.325	1828.00 (1603.50)
515	Cardiorhythm Ablater. (May be charged in addition to the catheterisation Laboratory).	04.00		32.313	995.70 (873.40)	32.313	995.70 (873.40)	32.313	995.70 (873.40)
517	Phaco emulsifier	04.00		17.400	536.20 (470.30)	17.400	536.20 (470.30)	17.400	536.20 (470.30)
519	Uretho Reno Fibroscope, per case	04.00		14.663	451.80 (396.30)	14.663	451.80 (396.30)	14.663	451.80 (396.30)
521	OAS Frameless Stereotaxy	04.00		172.908	5328.00 (4673.70)	172.908	5328.00 (4673.70)	-	-
523	OPD Tacography (Includes paper)	04.00		2.800	86.30 (75.70)	2.800	86.30 (75.70)	-	-
525	RFG3C Lesion Generator (Rhizotomy)	09.05		55.979	1724.90 (1513.10)	55.979	1724.90 (1513.10)	-	-
527	Swift Lase Kit (Tonsillectomy)	04.00		10.908	336.10 (294.80)	10.908	336.10 (294.80)	-	-
529	Bard Apparatus 1. For EPS studies the analogue monoplane unit (item 054) must be charged additionally. 2. EPS studies for cardiac ablations - the digital bi-plane unit (item 070) must be charged additionally.	09.05		41.879	1290.50 (1132.00)	41.879	1290.50 (1132.00)	-	-
531	Densitometer	04.00		25.817	795.50 (697.80)	25.817	795.50 (697.80)	-	-
533	Civus (Cardiac Intra-vascular Ultrasound) (This may be charged in addition to the catheterisation laboratory).	04.00		70.117	2160.60 (1895.30)	70.117	2160.60 (1895.30)	-	-
535	Ivus (Intra-vascular Ultrasound) (This may be charged in addition to the catheterisation laboratory).	04.00		154.017	4745.90 (4163.10)	154.017	4745.90 (4163.10)	-	-
537	Reusable patient return electrode/grounding pad using a capacitive coupling technique for use in electrosurgery. Disposable cover is non-chargeable. This item may not be charged together with any disposable monitoring style gel pads or when techniques other than electrosurgery are used. (e.g. not to be charged with the ultrasonic cutting and coagulating device or equivalent).	04.00		0.646	19.90 (17.50)	0.646	19.90 (17.50)	-	-
	Equipment fees for automated, stereotactic, digital imaged surgical breast biopsy (UNDER REVIEW)								04.00
	Note: For the purpose of a 6 month trial cost analysis, the manufacturer of the ABBI equipment recommends that the total breast biopsy procedure, inclusive of all fees, disposables and professional charges should not exceed the current conventional open excisional procedures. The recommendation is to cap the amount at R12634.50 per procedure unless otherwise motivated for. Core needle and vacuum assisted core needle would therefore be capped at R 5053.80 and fine needle at R 3790.40. The disposables for the ABBI are included in the equipment fee.								05.03
540	Stereotactic guided digital imaged breast biopsy procedure	09.05		282.729	8712.00 (7642.10)	282.729	8712.00 (7642.10)	-	-
541	Stereotactic guided digital imaged cover needle biopsy	09.05		166.321	5125.00 (4495.60)	166.321	5125.00 (4495.60)	-	-
542	Stereotactic guided digital imaged vacuum assisted core needle biopsy.	09.05		166.321	5125.00 (4495.60)	166.321	5125.00 (4495.60)	-	-
543	Stereotactic guided digital imaged fine needle aspiration	09.05		116.471	3588.90 (3148.20)	116.471	3588.90 (3148.20)	-	-
544	Mammotome Stereotactic Driver - vacuum assisted core needle biopsy. (UNDER REVIEW)	04.00		-	-	-	-	-	-
545	Mammotome Hand Held ultrasound vacuum assisted vacuum core needle biopsy. (UNDER REVIEW)	04.00		-	-	-	-	-	-

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				RVU	Fee	RVU	Fee	RVU	Fee
550	Equipment fee for dynamic (non-frame based - StealthStation) stereotactic image guided referencing surgery and treatment planning used in conjunction with CT or MRI imaging in pre-authorised cranial, spinal cord and ENT procedures, per procedure	09.05		180.775	5570.40 (4886.30)	180.775	5570.40 (4886.30)	-	-
560	Low pressure hyperbaric oxygen treatment protocol. (By arrangement) Only for Prescribed Minimum Benefits Code 277S: Anaerobic infections - life threatening (when no state facility is available)	09.05		-	-	-	-	-	-
562	Standard pressure hyperbaric oxygen treatment protocol. (By arrangement).	09.05		-	-	-	-	-	-
564	US Navy TT5 treatment protocol. (By arrangement)	09.05		-	-	-	-	-	-
566	US Navy TT6 treatment protocol. (By arrangement)	09.05		-	-	-	-	-	-
568	US Navy TT6 extended treatment protocol. (By arrangement).	09.05		-	-	-	-	-	-
570	Comes 30 treatment protocol. (By arrangement).	09.05		-	-	-	-	-	-
572	US Navy Table 6A treatment protocol. (By arrangement)	09.05		-	-	-	-	-	-
574	Pressure relieving mattress hire fee, per day	04.00		-	-	-	-	-	-
576	Infrared Coagulator: per use	04.00		-	-	-	-	-	-
578	Prostatic hyperthermia and thermotherapy: per case	04.00		256.325	7898.40 (6928.40)	256.325	7898.40 (6928.40)	-	-
580	Sequential compression device, per case	04.00		-	-	-	-	-	-
582	Selector ultrasonic aspirator	04.00		-	-	-	-	-	-
584	Cryosurgery acuprobe	04.00		-	-	-	-	-	-
594	Motility machine	09.05		-	-	-	-	-	-
596	Ph recorder	09.05		-	-	-	-	-	-
606	Epilepsy monitoring system	09.05		-	-	-	-	-	-
608	Lynx ultrasound scanner	04.00		-	-	-	-	-	-
610	Intra-operative multi-frequency probe	04.00		-	-	-	-	-	-
612	Flexible laparoscopic probe	04.00		-	-	-	-	-	-
5	STANDARD DRUG, MATERIAL, CONSUMABLE AND DISPOSABLE CHARGES								
	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.								09.05
5.1	STANDARD DRUG CHARGES								
	(Only substances controlled by the Medicines and Related Substances Control Act, Act 101 of 1965, as amended/Medicine Control Council)								09.05
5.1.1	Inpatients and day patients: Dispensed items including ampoules, over the counter and proprietary items issued to inpatients, day patients and TTO's								
	Not to be charged for consumable, disposable and surgical items								04.00
	The amount charged for any item shall not exceed the net acquisition price (inclusive of VAT) (unless the facility is not a registered VAT vendor). All items which patients take home as TTO's must be shown on accounts.								04.00
272	Pharmacy	04.00							
273	To take out	09.05							
278	Ward stock	04.00		-	-	-	-	-	-
282	Theatre	04.00		-	-	-	-	-	-
5.1.2	Emergency Room: Dispensed items including ampoules, over the counter and proprietary items and TTO's issued to patients treated in the emergency room (Items 301 and 302) when not admitted to a ward.								
	The amount charged for any item shall not exceed the net acquisition price (inclusive of VAT) (unless the facility is not a registered VAT vendor). All items which patients take home as TTO's must be shown on accounts.								09.05

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				RVU	Fee	RVU	Fee	RVU	Fee
	Not to be charged for consumable, disposable and surgical items								04.00
407	Pharmacy	04.00		-	-	-	-	-	-
411	Theatre	04.00		-	-	-	-	-	-
413	To take out	09.05		-	-	-	-	-	-
5.2	Consumable, disposable, and surgical items used in ward, theatre or emergency room								
	When used in ward or theatre								09.05
	Net acquisition price inclusive of VAT (unless the facility is not a registered VAT vendor). Items to be fully specified								
	See consumable and disposable list.								04.00
266	Large disposable sterile trays - per tray (excluding theatre)	09.05							
267	Sterile disposable swabbing and ENT trays - per tray (excluding theatre)	09.05							
269	Soluble bags for barrier nursing only, limited to 2 per patient, per day	09.05							
415	Emergency room	04.00		-	-	-	-	-	-
417	Pharmacy	04.00		-	-	-	-	-	-
419	Ward stock	04.00		-	-	-	-	-	-
421	Theatre	04.00		-	-	-	-	-	-
5.3	Fractional Charges								
	Net acquisition price (inclusive of VAT) (unless the facility is not a registered VAT vendor) to be charged per case at the fractional rates indicated below.								04.00
	Note: Fractional charges can only apply to reusable and limited life reusable/responsible products.								04.00
5.3.1	Drills, burrs, cutters, blades								
280	Neuro/Craniotomy	04.00		-	33.33%	-	33.33%	-	33.33%
432	Arthroscopy	04.00		-	20.00%	-	20.00%	-	20.00%
433	Orthopaedic	04.00		-	33.33%	-	33.33%	-	33.33%
437	Mastoidectomy and major ear surgery	04.00		-	33.33%	-	33.33%	-	33.33%
439	Maxillo- Facial drills and burrs (not applicable to oral surgery, eg wisdom teeth)	04.00		-	33.33%	-	33.33%	-	33.33%
5.3.2	Surgical laser fibre optic leads, hand pieces and probes, scalpels, argon beamer instruments (Limited life re-usable components)								
	Hospitals/unattached operating theatre units shall show the name and reference number of each item together with the manufacturer's name, and schemes shall have the right to call for such invoices from the institution concerned								04.00
281	Vascular surgery	04.00		-	100%	-	100%	-	100%
443	General surgery	04.00		-	12.5%	-	12.5%	-	12.5%
445	Gynaecology	04.00		-	12.5%	-	12.5%	-	12.5%
447	Ophthalmic	04.00		-	12.5%	-	12.5%	-	12.5%
449	Urology	04.00		-	12.5%	-	12.5%	-	12.5%
451	ENT	04.00		-	12.5%	-	12.5%	-	12.5%
453	Orthopaedic	04.00		-	12.5%	-	12.5%	-	12.5%
5.3.3	Ultrasonic Cutting and Coagulating Devices (Limited life re-usable)								
	General surgery, Gynaecology, Cardio-Vascular and Urology								
455	Handpiece and Cable Assembly (one unit)	04.00		-	1%	-	1%	-	1%
456	Coagulating Shear (Laparoscopic/open)	04.00		-	33.33%	-	33.33%	-	33.33%
458	Coagulating Shear - Single use (Laparoscopic/open) Refer to Section 5.2	04.00		-	-	-	-	-	-
457	Blades (sharp hook, dissecting hook, ball)	04.00		-	12.5%	-	12.5%	-	12.5%

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
459	Blades - Single use (sharp hook, dissecting hook, ball) Refer to 5.2	04.00		-	-	-	-	-	-
5.3.4	Warm air blankets								
429	Warm air blanket may be charged in the following cases and limited to 1 per stay - Infants - Elderly patients over 65, - Patients exposed for a long period of time in theatre longer than 2 hours - Post traumatic hypothermia - one per stay - Cardio-thoracic hypothermic patients in recovery and ICU - one per stay	09.05		-	100%	-	100%	-	100%
5.3.5	Diathermy pencils, laryngeal masks and fluoroshield gloves								
431	Diathermy pencils	04.00		-	33.33%	-	33.33%	-	33.33%
435	Laryngeal masks	04.00		-	2.5%	-	2.5%	-	2.5%
441	Fluoroshield gloves (1 pair per procedure)	04.00		-	33.33%	-	33.33%	-	33.33%
5.7	Gases								
	Price increases: Should a change occur in the manufacturer's price of any item listed hereunder, the new price shall be as notified								04.00
6.4.1	Oxygen and Nitrous Oxide								
	For both gases together, per minute								04.00
283	PWV area	09.05		0.110	3.39 (2.97)	0.110	3.39 (2.97)	0.110	3.39 (2.97)
701	Cape Town	04.00		0.151	4.65 (4.08)	0.151	4.65 (4.08)	0.151	4.65 (4.08)
702	Port Elizabeth	04.00		0.134	4.13 (3.62)	0.134	4.13 (3.62)	0.134	4.13 (3.62)
703	East London	04.00		0.149	4.59 (4.03)	0.149	4.59 (4.03)	0.149	4.59 (4.03)
704	Durban	04.00		0.138	4.25 (3.73)	0.138	4.25 (3.73)	0.138	4.25 (3.73)
705	Other areas	04.00		0.123	3.79 (3.32)	0.123	3.79 (3.32)	0.123	3.79 (3.32)
6.4.2	Oxygen, ward use								
	Fee for oxygen, per quarter hour or part thereof, outside the operating theatre complex								04.00
284	PWV area	09.05		0.162	4.99 (4.38)	0.162	4.99 (4.38)	0.162	4.99 (4.38)
710	Cape Town	04.00		0.268	8.26 (7.24)	0.268	8.26 (7.24)	0.268	8.26 (7.24)
711	Port Elizabeth	04.00		0.258	7.95 (6.97)	0.258	7.95 (6.97)	0.258	7.95 (6.97)
712	East London	04.00		0.248	7.64 (6.70)	0.248	7.64 (6.70)	0.248	7.64 (6.70)
713	Durban	04.00		0.210	6.47 (5.68)	0.210	6.47 (5.68)	0.210	6.47 (5.68)
714	Other areas	04.00		0.200	6.16 (5.41)	0.200	6.16 (5.41)	0.200	6.16 (5.41)
6.4.3	Oxygen, recovery room or emergency room								
	Flat rate for oxygen per case								04.00
720	PWV area	09.05		0.322	9.92 (8.70)	0.322	9.92 (8.70)	0.322	9.92 (8.70)
721	Cape Town	04.00		0.533	16.40 (14.40)	0.533	16.40 (14.40)	0.533	16.40 (14.40)
722	Port Elizabeth	04.00		0.513	15.80 (13.90)	0.513	15.80 (13.90)	0.513	15.80 (13.90)
723	East London	04.00		0.492	15.20 (13.30)	0.492	15.20 (13.30)	0.492	15.20 (13.30)
724	Durban	04.00		0.421	13.00 (11.40)	0.421	13.00 (11.40)	0.421	13.00 (11.40)
725	Other areas	04.00		0.398	12.30 (10.80)	0.398	12.30 (10.80)	0.398	12.30 (10.80)
6.4.4	Oxygen in Theatre								
	Fee for oxygen per minute in the operating theatre when no other gas administered								04.00

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
730	PWV area	09.05		0.010	0.31 (0.27)	0.010	0.31 (0.27)	0.010	0.31 (0.27)
731	Cape Town	04.00		0.018	0.55 (0.49)	0.018	0.55 (0.49)	0.018	0.55 (0.49)
732	Port Elizabeth	04.00		0.017	0.52 (0.46)	0.017	0.52 (0.46)	0.017	0.52 (0.46)
733	East London	04.00		0.017	0.52 (0.46)	0.017	0.52 (0.46)	0.017	0.52 (0.46)
734	Durban	04.00		0.013	0.40 (0.35)	0.013	0.40 (0.35)	0.013	0.40 (0.35)
735	Other areas	04.00		0.013	0.40 (0.35)	0.013	0.40 (0.35)	0.013	0.40 (0.35)
6.4.5	Carbon Dioxide								
291	Per minute	04.00		0.020	0.62 (0.54)	0.020	0.62 (0.54)	0.020	0.62 (0.54)
6.4.6	Laser Mix								
292	Per minute	04.00		0.387	11.90 (10.50)	0.387	11.90 (10.50)	0.387	11.90 (10.50)
6.4.7	Entonox								
293	Per 30 minutes	04.00		3.675	113.20 (99.30)	3.675	113.20 (99.30)	3.675	113.20 (99.30)
5.8	Inhalation anaesthetics								
	All prices will be expressed per millilitre and will be based on the Single Exit Price (SEP)								08.00
285	Halothane (Halothane): per ml	08.00		-	-	-	-	-	-
752	Ethrane (Enflurane): per ml	08.00		-	-	-	-	-	-
753	Forane (Isoflurane): per ml	08.00		-	-	-	-	-	-
754	Isofor (Isoflurane): per ml	08.00		-	-	-	-	-	-
755	Ultane (Sevoflurane): per ml	08.00		-	-	-	-	-	-
756	Suprane (Desflurane), per ml	08.00		-	-	-	-	-	-
757	Aerrane (Isoflurane): per ml	08.00		-	-	-	-	-	-
758	Alyrane (Enflurane): per ml	08.00		-	-	-	-	-	-
759	Fluothane (Halothane), per ml	08.00		-	-	-	-	-	-
5.9	Prostheses (Surgically implanted)								
286	A prosthesis shall mean a fabricated or artificial substitute for a diseased or missing part of the body, surgically implanted, and shall be deemed to include all components such as pins, rods, screws, plates or similar items, forming an integral and necessary part of the device so implanted, and shall be charged as a single unit. Pins, rods, screws, plates or similar items, when used independently of a prosthesis and for the purpose of furthering any healing process, shall be chargeable. Hospitals/unattached operating theatre units shall show the name and reference number of each item. The manufacturer's name, and suppliers invoices should be attached to the account and the components should be specified on the account. Net acquisition price on suppliers invoice, inclusive of VAT (unless the facility is not a registered VAT vendor), by prior arrangement with scheme.	09.05		-	-	-	-	-	-
5.10	Medical artificial items (non-prostheses)								
287	According to agreement with schemes concerned. (Examples of items included hereunder shall be wheelchairs, crutches and excretion bags). Copies of invoices shall be supplied to schemes.	04.00		-	-	-	-	-	-

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
5.14	Blood charges								
288	Emergency non-crossmatched blood ex hospital (i.e. on stand-by) - Number of units and nature of emergency to be specified and copy of invoice included. This item is only chargeable when a private hospital supplies O-negative whole blood to a patient in an emergency situation. A motivation stating the reason for administering the O-negative blood must accompany the account and no mark-up is permitted on this item.	04.00		-	-	-	-	-	-
289	Routine blood charges, when incurred in respect of blood or related products procured from a recognised blood bank for transfusion purposes, may be charged at R 14.70 per collection, plus R 3.09 per kilometre travelled. This fee is applicable to all modes for collecting blood including hospital ambulances	05.03		-	-	-	-	-	-
297	Emergency blood collection. Claims for this item code must be supported by documentary evidence of the patient's condition	06.00		19.388	597.40 (524.10)	19.388	597.40 (524.10)	-	-
5.15	Incise drapes								
298	Incise drapes (See Annexure B)	04.00		-	-	-	-	-	-
299	Ophthalmic drapes. (See Annexure B)	04.00		-	-	-	-	-	-
300	Non-incise drapes (isolation, fluid-collection and combination) Chargeable in the following procedures: Hip, knee, shoulder and elbow joint replacements Open heart and cardiac bypass surgery Vascular surgery (excluding catheterisation laboratory procedures) Neuro-surgery (Brain and spinal cord) Arthroscopy of hip, shoulder, knee or elbow joints Spinal surgery	04.00		-	-	-	-	-	-
	Note: The name, item number and cost must be shown.								04.00
5.16	Disposable Patient Controlled Analgesia Pump								
	Not applicable in Specialised units, ICU and High Care units. 1 per patient for maximum of 48 hours in ward Chargeable in the following instances: - Major joint replacement - Open, upper abdominal surgery - Severe burns - Paediatrics in special cases on motivation - Thoracotomies (motivation by practitioner) - Intractable pain associated with malignancy								04.00
6	Non Standard Items/Services								
	Such items are not covered by the National Reference Price List and schemes reserve the right to decide individually how these items/services will be dealt with								04.00
290	Items/services e.g. telephone calls/hire, television hire, boarding, extra meals, dry cleaning of clothing, extra nursing in ward etc. The nature of each service shall be specified	04.00		-	-	-	-	-	-
	Procedures : Open heart, cardiac by-pass surgery and all organ transplants								
121	Benefits to be pre-authorised with the scheme concerned	04.00		-	-	-	-	-	-

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics			
				RVU	Fee	RVU	Fee	RVU	Fee		
ANNEXURES											
	ENDOSCOPIC (laparoscopic & thoracoscopic) GENERIC LIST								09.05		
	Category 1 Procedures Laparoscopy and Thoracoscopy, per case			Category 2 Procedures Interventional laparoscopy, Thoracic and Urological procedures, per case							
	Standard Charges			Standard Charges:							
	<ul style="list-style-type: none"> 360 Laparoscopic Equipment Fee, per case <ul style="list-style-type: none"> - Telescope - Light Guide Cable - Camera - Monitor - Hi –frequency Cord Includes laparoscopic instrumentation, per case. All equivalents included <ul style="list-style-type: none"> - Scissors - Graspers (clamp, clinch, babcock) - Dissectors - Electro surgical Instrument - Suction irrigation shafts 			<ul style="list-style-type: none"> 364 Laparoscopic Equipment Fee, per case <ul style="list-style-type: none"> - Telescope - Light Guide Cable - Camera - Monitor - Hi –frequency Cord INCLUDES Laparoscopic Instrumentation, per case. All equivalents included <ul style="list-style-type: none"> - Endoscopic needle holder and knot pusher - Scissors - Graspers (clamp, clinch, babcock) - Dissectors - Retractors - Suction irrigation shaft - Electro surgical Instrument 							
	Recoverable Disposable Products “single-use” allowed			Recoverable Disposable Products “single –use” allowed							
	<ul style="list-style-type: none"> Insufflation Needle Trocars 			<ul style="list-style-type: none"> Insufflation Needle Trocars Ligating Clip Appliers Ultrasonic or electro surgical cutting and coagulation accessories (instrumentation and accessories) Endoscopic Staplers/Cutters 							
	NOTE:										
	<ul style="list-style-type: none"> Category 1 procedures are predominantly diagnostic and the listed re-usable instruments are considered relevant and appropriate for category 1 procedures 			<ul style="list-style-type: none"> Should a diagnostic procedure move to a 'therapeutic intervention', then the procedure would become a category 2 procedure 							
	Part Chargeable Products:										
	<ul style="list-style-type: none"> Ultrasonic Handpiece and Cable = 1% 										
	Notes: Refer to detailed Endoscopic Disposable Product list. Procedure to be applied per CPT code – list attached.										

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
	<p>Comments</p> <p>1. Optical, blunt, Hasson cannula, trocar – may substitute the primary port trocar and eliminate the use of verres needles.</p> <p>2. Harmonic scalpel shears and blades – not to be charged together with disposable electrosurgical probes, argon beam coagulator, clip appliers, bipolar forceps and Tripolar forceps.</p> <p>3. Harmonic scalpel shears and blades – not to be used for laparoscopic cholecystectomy and sterilisation</p> <p>4. Tripolar forceps – not to be used together with electrosurgical probes, harmonic scalpel, clip appliers</p> <p>5. Autosuture Endostitch – to be motivated and 1 suture assistant per procedure allowed.</p> <p>6. Specimen retrieval bags – to motivate use (used when specimen needs to be captured and removed to avoid site contamination); procedure related – histology report required.</p>								
	<p>APPENDIX A</p> <p>LAPAROSCOPIC AND THORACOSCOPIC CPT CODES AND CATEGORIES</p> <p>CATEGORY 1 (CPT4 2000 code numbers included where possible)</p> <p>Diagnostic laparoscopy (49320) Laparoscopy, surgical; with fulgeration of oviducts (with/without transection) (58670) Laparoscopy, surgical; with occlusion of oviducts (e.g.band, clip, Falope ring) (58771) Hysteroscopy diagnostic (58555) Hysteroscopy, with sampling of endometrium and/or polypectomy, with/without D&C (58558)</p> <p>THORACOSCOPY, DIAGNOSTIC THORACOSCOPY, DIAGNOSTIC with biopsy THORACOSCOPY, DIAGNOSTIC lungs and pleural space, with biopsy THORACOSCOPY, DIAGNOSTIC pericardial sac, without biopsy THORACOSCOPY, DIAGNOSTIC pericardial sac with biopsy THORACOSCOPY, DIAGNOSTIC mediastinal space without biopsy THORACOSCOPY, DIAGNOSTIC mediastinal space with biopsy</p> <p>CATEGORY 2</p> <p>Laparoscopy, surgical; with salpingostomy (salpingoneostomy) (58673) Laparoscopy, surgical; with fimbrioplasty (58672) Laparoscopy, surgical; with fulgeration or excision of the ovary, pelvic viscera or peritoneal surface, any method (58662) Laparoscopy, surgical; with lysis of adhesions (changed 1998 to salpigolysis, ovariolysis) (58660) Laparoscopy, surgical; with removal leiomyomata (58551) Laparoscopy surgical; withenterolysis (freeing intestinal adhesion) (44200) Laparoscopy, surgical; with retroperitoneal node sampling (biopsy) (38570) Laparoscopy,surgical, abdomen, peritoneum, omentum; with drainage lymphocele to peritoneal cavity (49323) Laparoscopy, surgical; appendectomy (44970) Laparoscopy, surgical, abdomen, peritoneum and omentum; with biopsy (49321) Laparoscopy, surgical, abdominal, peritoneum and omentum; with aspiration of cavity or cyst (e.g. ovarian cyst) single or multiple (49322) Laparoscopy, surgical; with removal of adnexal structures (partial or total oophorectomy and/or salpingectomy) (58661) Laparoscopy, surgical; orchiopexy for intra-abdominal testis (54692) Laparoscopy, surgical; ligation spermatic veins for varicocele (55550) Laparoscopy, surgical; ablation of renal cysts (50541) Laparoscopy, surgical; urethral suspension for stress incontinence (51990) Laparoscopy, surgical; sling operation for stress incontinence (51992) Hysteroscopy with lysis intra-uterine adhesions (58559) Hysteroscopy with removal impacted foreign body (58562) Hysteroscopy with removal leiomyomata \ (58561)</p>								09.05

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
	Hysteroscopy with endometrial ablation \ (58563)								
	Laparoscopic treatment of ectopic pregnancy, without salpingectomy and/or oophorectomy (59150)								
	Laparoscopic treatment of ectopic pregnancy; with salpingectomy and/or oophorectomy (59151)								
	Laparoscopy, surgical; with vaginal hysterectomy. (Lap assisted vag. Hyst) (58550)								
	Laparoscopy, surgical; with bilat. Total pelvic lymphadenectomy (38571)								
	Laparoscopy, surgical; with bilat. Total pelvic lymphadenectomy and peri-aortic lymph node sampling (biopsy) (38572)								
	Laparoscopy with adrenalectomy (60650)								
	Laparoscopy, surgical; pyeloplasty (50544)								
	Laparoscopy, surgical; nephrectomy (50540)								
	Laparoscopy, surgical; donor nephrectomy (50547)								
	Laparoscopically assisted nephroureterectomy (50548)								
	Laparoscopy, surgical, ureterolithotomy 50945)								
	Laparoscopy, surgical; transection of Vagus nerve, truncal (43651)								
	Laparoscopy, surgical; transection of Vagus nerves, selective or highly selective (43652)								
	Laparoscopy, surgical; with guided transhepatic cholangiography, without biopsy (47560)								
	Laparoscopy, surgical; with guided transhepatic cholangiography, with biopsy (47561)								
	Laparoscopy, surgical; cholecystoenterostomy (47570)								
	Laparoscopy, surgical; cholecystectomy with cholangiography (47563)								
	Laparoscopy, surgical; cholecystectomy with explor. common bile duct (47564)								
	Laparoscopy, surgical; splenectomy (38120)								
	Laparoscopy, surgical; gastrostomy, without construction of gastric tube (e.g. Stamm procedure) (43653)								
	Laparoscopy, surgical; jejunostomy (44201)								
	Laparoscopy, surgical; intestinal resection, with anastomosis (44202)								
	Laparoscopy, surgical; oesophagogastric fundoplasty eg Nissen, Toupet procedures) (43280)								
	Unlisted laparoscopic procedure, uterus (58578)								
	Unlisted hysteroscopy procedure, uterus (58579)								
	Unlisted laparoscopic procedure, oviduct, ovary (58679)								
	Unlisted laparoscopic spleen procedure (38129)								
	Unlisted laparoscopic lymphatic procedure (38589)								
	Unlisted laparoscopic oesophagus procedure (43289)								
	Unlisted laparoscopic stomach procedure (43659)								
	Unlisted laparoscopic intestinal procedure (except rectum) (44209)								
	Unlisted laparoscopic appendix procedure (44979)								
	Unlisted laparoscopic biliary tract procedure (47579)								
	Unlisted laparoscopy procedure, abdomen, peritoneum & omentum (49329)								
	Unlisted laparoscopic hernia procedure (49659)								
	Unlisted laparoscopic renal procedure (50549)								
	Unlisted laparoscopic procedure, testis (54699)								
	Unlisted laparoscopic procedure, spermatic cord (55559)								
	Unlisted laparoscopic procedure, maternity care and delivery (59898)								
	Unlisted laparoscopic endocrine procedure (60659)								
	THORACOSCOPY, SURGICAL								
	THORACOSCOPY, SURGICAL pleurodesis								
	THORACOSCOPY, SURGICAL partial pulmonary decortication								
	THORACOSCOPY, SURGICAL total pulm. Decortication								
	THORACOSCOPY, SURGICAL removal interpleural foreign body								
	THORACOSCOPY, SURGICAL control traum. Haemorrhage								
	THORACOSCOPY, SURGICAL exc./plication bullae								
	THORACOSCOPY, SURGICAL parietal pleurectomy								

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee

7. Where a hospital uses an excessively priced product, a review process with the parties as listed under 3 above should be conducted, and appropriate price adjustment made.
8. TTO's will be issued and charged according to the rules of the scheme.
9. All prescribed items will be recoverable according to the rules of the scheme.

Key Indicators

The different key indicators in the Recommended Guide to Reimbursement for Consumable and Disposable Items charged by Private Hospitals and Same Day Surgery Facilities List are as follows:

All prescribed items dispensed in wards or theatre are fully recoverable according to scheme's rules.

Key	Description
THR	Theatre consumable and disposable items
WRD	Ward consumable and disposable items
NR	Item is non-recoverable
C	Item is chargeable under certain circumstance
R	Item is recoverable
P	Item is recoverable from patient
F	Fractional (re-usable) and is charged out on a pro-rata basis (as per 5.5.1-5.5.4).
N/A	Not used/not applicable
Disposable	Means the manufacturer states one time use only.
S/U(Single use) Item Payable	100%
Medical Prescribed Meals	See List

Practice Code References to the NRPL-HS includes 57/58, 76 and 77

	PRODUCT	THR	WRD	COMMENT
1.	Accessories for AV impulse, Flowtron DVT and similar (Impads, sequential stockings, calf garments, sleeves, cuffs and equivalents);	C	C	Subject to scheme rules and authorisation criteria;
2.	Adapters disposable	C	C	
3.	Adapters re-usable	NR	NR	
4.	Adhesive/non-adhesive bandages and rolls (Elastoplast, Micropore, Transpore and similar);	C	C	Fractional use is non-chargeable; Full rolls are chargeable when procedure related; Non-chargeable if used for restraining or strapping;
5.	Aerochamber	NR	NR	Chargeable as TTO
6.	Alcohol Swabs (Preptic, Webcol and similar)	NR	NR	Chargeable as TTO on prescription;
7.	Alcohol/Spirits	NR	NR	
8.	Amalgam Caplets and all dental composites	NR	N/A	
9.	Anaesthetic accessories (circuits, masks, trays);	NR	N/A	Blue and Green gauze chargeable separately
10.	Antipeol Ointment	NR	C	When prescribed by a doctor as a full unit or part of mixture.
11.	Antiseptic solutions (Hibiscrub, Betadine and similar);	NR	C	Chargeable for use in Burns and Haemorrhoidectomy. On prescriptions for therapeutic reasons only. Non-chargeable when used by staff or for prepping of skin.

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
29.	Blades (arthroscopic)-Disposable	R	N/A	Guideline maximum of 3 blades/burrs for an appropriate shoulder procedure or 2 for an appropriate knee procedure. The use of more to be motivated.					
30.	Blades (arthroscopic)-Limited life reusable	F	N/A	Part chargeable as per section 5.3.1;					
31.	Blades (ENT)-Disposable	R	N/A	Maximum 2 per procedure;					
32.	Blades (surgical knives, scalpel) – Disposable	R	R						
33.	Blades Saw – Limited life reusable	F	NA	As per section 5.3.1;					
34.	Blades Saw -Disposable	R	N/A						
35.	Blades-Limited life reusable	F	N/A	Part chargeable as per section 5.3.1;					
36.	Blankets: Warm Air, disposable	C	C	Chargeable 100% when complying to the criteria as per section 5.3.4 1 per stay					
37.	Blood pressure cuffs-Disposable (Cuffable cuffs, Disposo-Cuff and similar);	C	C	Neonates only; One per stay;					
38.	Blood pressure machine (Baumanometer, Dinamapp and similar)	NR	NR						
39.	Breast Pads	N/A	NR						
40.	Breast Pump	N/A	NR						
41.	Breathing/ventilator circuits and disposable accessories (tubing, catheter mounts, connectors and similar)- Reusable	NR	NR						
42.	Breathing/ventilator circuits and disposable accessories (tubing, catheter mounts, connectors and similar)-Disposable	NR	NR						
43.	Bulb Syringes - disposable	R	C	One per patient per stay. Bladder irrigation only in wards.					
44.	Bulb Syringes - glass	NR	NR						
45.	Burrs – Disposable	R	N/A						
46.	Burrs - Limited life reusable	F	N/A	Fractional as per BHF Schedule 5.3.1;					
47.	Burrs (Dental surgery)-reusable and disposable	NR	NR	Included in the Dental Practitioners Fee					
48.	Burrs (ENT surgery)-disposable	R	N/A						
49.	Capnograph Set – disposable	NR	NR						
50.	Cardiac Monitors	NR	C	Equipment fee chargeable in High Care and Wards when a patient is monitored. Item 231. Non-Chargeable in ICU.					
51.	Cardiotocography paper	NR	NR						
52.	Catheters (Jacques, Nelaton and similar)- Reusable	NR	NR						
53.	Cetavlon	NR	NR						
54.	Chlorhexidine Solution	NR	NR						
55.	Chlorine Antiseptics (Biocide and similar)	NR	NR						
56.	Chloromycetin Applicaps	R	C	Two per day in ICU for unconscious or sedated ventilated patients on prescription.					
57.	Cidex	NR	NR						
58.	Clip Removers	NR	NR	Included in Practitioners fee for post-operative care for four weeks					

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
59.	Collection Charges - Pathology	NR	NR						
60.	Connectors - disposable	C	C	To be specified if not a part of pack. (e.g. Bentley or Cobe)					
61.	Connectors - re-usable	NR	NR						
62.	Cosmetic products (body lotions, powders, creams, oils and shampoos);	N/A	NR						
63.	Cutters – Disposable	R	N/A	<i>Single Use</i>					
64.	Cutters (bone)-Limited life re useable	F	N/A	Fractional chargeable as per BHF Schedule 5.3.1;					
65.	Cytology Brushes – Disposable	C	N/A	Fully recoverable if supplied by hospital.					
66.	Daylee Towels	NR	NR						
67.	Depilatory Creams	NR	NR						
68.	Dettol	NR	NR						
69.	Diagnostic Strips – Blood	N/A	C	Diabetic patients -account to state Diabetic. Chargeable in Pancreatitis not Substance abuse related Patients receiving hyperalimentation Patients in ICU/HC /NICU/ NHC units					
70.	Diagnostic Strips – Blood & Urine (Routine Testing)	NR	NR						
71.	Diathermy Equipment	NR	NR						
72.	Diathermy electrosurgical instruments (pencil, handles)- disposable	R	N/A						
73.	Diathermy electrosurgical instruments (pencils, handles)-Limited life reusable	F	N/A	Part charge as per section 5.3.5;					
74.	Diathermy Plates – disposable	R	N/A	Chargeable to a maximum of R79.50 each;					
75.	Disinfectants	NR	NR						
76.	Disposable cables and cords	NR	NR						
77.	Disposable Humidifiers (Aquapak, Respiflo, Sterimist or equivalent);	N/A	C	One per 24 hours or part thereof with administration of oxygen.					
78.	Douch Bottles - Disposable	NR	C	Gynaecology Non chargeable for prepping					
79.	Douche Cans – Reusable	NR	NR						
80.	Drills – Disposable	R	N/A						
81.	Drills (Dental Surgery)-Disposable	NR	NR	Included in the Dental Practitioner fee					
82.	Drills –Limited life reusable	F	N/A	Part chargeable as per section 5.3.1;					
83.	Drops (Eye/Ear/Nose)- fractional use	C	NR	Fractional use is non-chargeable; Only Eye drops are chargeable in theatre;					
84.	EABS	NR	NR						
85.	ECG – Electrodes	R	R						
86.	ECG – Equipment	NR	NR						
87.	ECG – Paper	NR	R						
88.	Electrode Tip Cleaner (Scrape Eeze, Friction Pads and similar)- Disposable	NR	NR						
89.	Endoscopic – disposables	C	N/A	See Endoscopic Procedure List – attached.					

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
90.	Endotracheal Introducers	NR	NR						
91.	Epidural Fee	C	C						Only applicable for Maternity
92.	Epidural Kit/Set	C	N/A						Epidural Kit chargeable in all cases except Maternity. Not to be charged when fee is charged.
93.	Ether	NR	NR						
94.	Eusol	NR	C						For septic wound dressing
95.	External Fixators	R	N/A						Pre-Authorised by scheme. Benefit to be confirmed by scheme.
96.	Eye patches (opticlud and similar) in theatre	NR							Eye pads are included in theatre basket;
97.	Face Masks	NR	C						For reverse barrier nursing only (Head covers and overshoes non-chargeable);
98.	Films, Video Prints, Compact Discs – disposables (Endoscopic Procedures)	NR	NR						
99.	Films, Video Prints, Compact Discs, Thermal Paper	C	NR						Refer section 3.3 - item 075 one fee per procedure
100.	Fluoroshield Gloves	F	N/A						As per section 5.3.5 item 441
101.	Foley's Temp Catheter	C	N/A						On motivation Maximum of R500 Cardiac only
102.	Formalin in Saline	NR	NR						
103.	Fosenema / Len-o-lax	N/A	R						When prescribed.
104.	Glass Syringes	NR	NR						
105.	Gloves - Sterile (Examination)	N/A	C						For minor sterile procedures in the ward e.g. suction, catheterisation. Non-chargeable with tray
106.	Gloves – Non-Sterile	NR	C						Chargeable only for reverse barrier nursing, motivation required.
107.	Gloves – Sterile (Surgical)	R	C						Chargeable for incisional procedures, e.g. CVP lines and major wound dressing (burns). Not chargeable with tray
108.	Glucometer	N/A	N/A						TTO only if authorised by scheme. Otherwise for patient's private account.
109.	Gowns in theatre (barrier SABS approved with breathable and fluid impermeable polymer membrane)-Limited life reusable	C	N/A						Chargeable for specific procedures only Hip, knee, shoulder and elbow joint replacements Open heart and cardiac bypass surgery Vascular Surgery Neuro-Surgery (Brain and spinal cord) Arthroscopy of hip, shoulder, knee or elbow joints Spinal surgery Recommended price R80.00 per gown For surgical team only (max 4).

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
110.	Gowns in theatre (barrier SABS approved)-Disposable	C	N/A						
				Chargeable for specific procedures only Hip, knee, shoulder and elbow joint replacements Open heart and cardiac bypass surgery Vascular Surgery Neuro-Surgery (Brain and spinal cord) Arthroscopy of hip, shoulder, knee or elbow joints Spinal surgery For surgical team only (max 4). Maximum price R135.00 per gown (To be revised with price changes.)					
111.	Gowns in theatre with hoods and shields (Charnley and similar having breathable and fluid impermeable polymer membrane for single use according to recommendations by the supplier, as approved by SABS)- Disposable	R	N/A						
				Chargeable with modifiers 0002 and 0003 up to R520 per set to a maximum of 3 sets;					
112.	Gowns in theatre with hoods and shields (Charnley and similar Reusable Barrier Gowns having breathable and fluid impermeable polymer membrane for multiple use according to recommendations by the supplier, as approved by SABS)- Limited life reusable	R	N/A						
				Chargeable with modifiers 0002 and 0003 up to R135 per set to a maximum of 3 sets;					
113.	Gowns in ward (barrier SABS approved)- Disposable	N/A	C						
				Chargeable for reverse barrier nursing and severe burns – motivation to accompany account.					
114.	Harmonic Scalpel, or equivalent - disposable components	R	N/A						
				Refer to endoscopic list;					
115.	Harmonic Scalpel, or equivalent components – reusable.	F	N/A						
				Chargeable as per section 5.3.3;					
116.	Head covers (bonnets, caps and similar)	NR	NR						
117.	Head Strap for CPAP	N/A	C						
				Chargeable when diagnosis- related, e.g. Burns/infectious diseases.					
118.	Heart/Lung Machine	NR	NR						
119.	Heath reflective pads (Crittter covers, Neospot and similar);	N/A	C						
				One daily in Neonatal Specialised Units;					
120.	Heel Hugger-infant	NR	NR						
				As per scheme arrangement;					
121.	Hibitane Obstetric Cream	N/A	R						
				Registered ethical product.					
122.	Hibitane Solution - sachets	NR	NR						
123.	Humidifying Chamber (Fisher&Paykel and similar)-Disposable	N/A	C						
				Adults and neonates – one per LOS in specialised units;					
124.	Hydrogen Peroxide	NR	NR						
125.	I.V. Support	C	C						
				Neonates and Paediatrics < 6 years only - One per LOS per limb and when disorientated in Theatre More to be motivated					
126.	Ice Pack/Cold Pack - disposable	N/A	C						
				Appropriate procedures only. Payable according to scheme rules;					
127.	Incontinence Products - Draw Sheet	NR	NR						

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
128.	Incontinence Products - Linen Savers	NR	C						
129.	Incontinence Products - Pads (e.g. sanitary)	C	C						
130.	Incontinence Products - Diapers/ Nappies	NR	C						
131.	Incontinence Products – Pads e.g. Besure/Molicare	N/A	P						
132.	Jellies and Creams (Terracortril, KY and similar)- fractional use	NR	NR						
133.	K Y Jelly – Sachets	R	R						
134.	Lancets, Autolets, Softclix	NR	C						
135.	Laryngeal Masks	F	N/A						
136.	Laser Components - disposable	R	N/A						
137.	Laser Components - re-usable	F	N/A						
138.	Laundry Bags - Soluble	NR	C						
139.	Ligasure Electrode – Disposable	NR	N/A						
140.	Limb Holder (restrainer) – Disposable	N/A	C						
141.	Loan Set Fee	NR	NR						
142.	Marking Pen – sterile (Codman Marker and similar)	C	NR						
143.	Maternity Per Diem Fee	C	N/A						
144.	Meal Supplements	NR	NR						
145.	Meals, Baby Foods, Milk Substitutes	NR	NR						
146.	Medically prescribed meals	N/A	C						
147.	Medicine Glasses, Spoons and Syringes	NR	C						
148.	Mentor Cable - disposable	NR	NR						
149.	Mentor Cable - re-usable	NR	NR						
150.	Mercurochrome & Methiolate	NR	NR						
151.	Micro Retractor	NR	NR						
152.	Milk Substitutes	NR	NR						
153.	Milton	NR	NR						

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
154.	Mixing Systems for Cement	C	N/A	Chargeable as part of Prosthesis, to be included in prosthesis invoice, which accompanies account. Note: Cement containing Antibiotic to be charged separately					
155.	Mother & Baby Pack	NR	NR						
156.	Nasal Cannula – disposable	N/A	C	One per stay if oxygen is administered.					
157.	Nebulising Mask - disposable	N/A	C	One per stay if patient is nebulised.					
158.	Nebulising Mask - Trachea	N/A	C	One per stay if patient is nebulised.					
159.	Neuro Sucker – disposable	C	N/A	Neuro cases only					
160.	Nursing Services	NR	NR						
161.	Operating Instruments - reusable	NR	NR						
162.	Overshoes	NR	NR						
163.	Oximeter	NR	NR						
164.	Oxisensor – disposable	NR	C	One per stay for neonates in specialised units; Not paying if equipment not suitable/ compatible. Not to be charged with Oxitip;					
165.	Oxitip	NR	C	One per stay for neonates in specialised units; Not to be charged with Oxisensor;					
166.	Oxygen Analysers, Hoods, Attachments – disposable	C	C						
167.	Oxygen Analysers, Hoods, Attachments – re-usable	NR	NR						
168.	Oxygen Mask + tubing– disposable	C	C	In recovery if oxygen is administered post operatively. One per patient per stay;					
169.	Pacing Wire and Cables – disposable	C	N/A	Must be procedure related. Maximum 1 cable and 2 wires, excess to be motivated. Subject to medical scheme rules.					
170.	Packing Fee	NR	NR						
171.	PCA Pump – reusable	NR	C	As per item 230 One per patient per day, maximum 48 hours. Not applicable in Specialised units, ICU and High Care units. 1 per patient for maximum of 48 hours in ward Chargeable in the following instances: Major joint replacement Open, upper abdominal surgery Severe burns Paediatrics in special cases on motivation Thoracotomies (motivation by practitioner) Intractable pain associated with malignancy					

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics		
				RVU	Fee	RVU	Fee	RVU	Fee	
172.	PCA Pumps – disposable	C	C							
				As per section 5.16 One per patient per 48 hours. Chargeable in theatre if patient goes directly into ward. Not to be charged in Specialised units, ICU and High Care units Chargeable in the following instances: Major joint replacement Open, upper abdominal surgery Severe burns Paediatrics in special cases on motivation Thoracotomies (motivation by practitioner) Intractable pain associated with malignancy						
173.	Peak Flow Meter	NR	NR							
174.	Peak Flow Meter – disposable Mouth Piece	N/A	R							
175.	Peep Valve and/or CPAP mask – disposable	N/A	C							
				Max of one CPAP mask per patient per stay Max of two valves per patient per stay More to be motivated						
176.	Plastic Bags	NR	NR							
177.	Pour Bottle – Saline	C	C							
				Chargeable when procedure related, e.g. for wound irrigation. Excessive usage to be motivated. Not to be charged with pour bottle water						
178.	Pour Bottle – Water	C	C							
				Not to be charged with pour bottle saline Only chargeable for patient related conditions: flushing of wounds, under water drains and bladder irrigation in theatre and wards <i>Ventilated Patients 1 litre per 24 hours</i>						
179.	Preparation Items (Shaving Trays, Razor, Scrub Brush)	NR	NR							
180.	Pressure Monitoring Kit - disposable	R	R							
181.	Pressure relieving mattress (Nimbus and similar)	NR	NR							
182.	Pressure relieving products (Novogel, Reston foam and similar)	N/A	C							
				Subject to scheme rules;						
183.	Probe Covers	N/A	C							
				One daily in Neonatal Specialised Units						
184.	Prosthesis	C	N/A							
				Pre-authorized and benefit to be confirmed by scheme. Supplier's invoice to accompany account. Refer section 5.9 (change)						
185.	Razors	NR	NR							
186.	Re-breathing bags (ambubag and equivalents)	NR	NR							
187.	Receptal Liners & Shut Off Valves	NR	C							
				Chargeable in ICU, Specialized units and High Care for patients with severe respiratory complications						
188.	Recovery Room	NR	NR							
189.	Safety Pins	NR	NR							
190.	Sampling Lines (Datex and similar)	NR	NR							
191.	Savlon & Savlodil	NR	NR							

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
192.	Servo Ventilator (equipment)	N/A	C	Chargeable only in ICU and High Care where applicable.					
193.	Sheepskin	NR	NR						
194.	Skin Prep Solutions	NR	NR						
195.	Space blanket	R	R	Not to be charged with a warm air blanket					
196.	Spatulas, Tongue Depressors	NR	NR						
197.	Specimen Containers	NR	NR						
198.	Spigots	NR	NR						
199.	Spirometer (Incentive and similar)-Disposable	NR	NR	Chargeable as TTO					
200.	Spray Top Bottles	NR	NR						
201.	Sprays (Opsite, Disidine)- fractional use	NR	NR						
202.	Sputum Cups	NR	NR						
203.	Sterilising of Instruments or Materials	NR	NR						
204.	Sterilising Solutions, Gases and Tablets	NR	NR						
205.	Steri Peel & Equivalents	NR	NR						
206.	Sternal support products (Heart Hugger and similar)	NR	NR	As per scheme arrangement;					
207.	Stethoscopes	NR	NR						
208.	Stitch Cutter	NR	NR						
209.	Stone Baskets – Disposable	R	N/A	1 basket only to a max of R2496 May not be used together item 224 in tariff schedule					
210.	Stone Baskets – re-useable	NR		Re-usable chargeable as per item 224 in tariff schedule					
211.	Suction Nozzle – disposable	R	R						
212.	Swivel Connector – disposable	NR	NR	Part of Ventilator Circuit					
213.	Swivel Connector – re-usable	NR	NR						
214.	Tantol Cleanser / Lotion	N/A	P						
215.	Taps & Reamers	NR	N/A						
216.	Temperature Probe Covers	C	C	One daily in Neonatal Specialised units Not to be charged together with disposable probe.					
217.	Theatre Drapes - Incise	R	N/A	As per section 5.15					
218.	Theatre Drapes - Ophthalmic	R	N/A	As per section 5.15					
219.	Theatre Drapes- Equipment (Microscope, camera, drill sleeve, Mayo and similar)	NR	N/A	Included in the Tariff					
220.	Theatre Drapes– Patient Isolation (Non-woven, paper, plastic, polyethylene based)-Disposable	C	N/A	Chargeable when used in the following Procedures: Hip, knee, shoulder and elbow joint replacements. Open heart and cardiac bypass surgery. Vascular Surgery (Excluding Catheterisation Laboratory procedures) Neuro-Surgery (Brain and Spinal cord) Arthroscopy of hip, shoulder, knee or elbow joints Spinal surgery					
221.	Theatre Drapes-Instrument holders (1018 and similar)	C	N/A	Cranial Procedures only;					
222.	Thermometer- Reusable	NR	NR						

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
				RVU	Fee	RVU	Fee	RVU	Fee
223.	Thermometers/Temperature Probes (Oesophageal or Rectal)-Disposable	C	C	Chargeable in Cardio-Thoracic cases (one rectal and one oesophageal) or theatre cases longer than 3 hours at anaesthetist's discretion One per patient per every 3 weeks in Neonatal Specialised Units Probe Covers one per day					
224.	Thoraguide Kit (for underwater drainage)	R	C	Chargeable in I.C.U and Emergency Room					
225.	Toiletries (face cloths, toothbrush, soaps and similar)	NR	NR						
226.	Topical Anaesthetics (Remicaine and similar)	C	C	When full tube used per patient. Procedure related (Male catheterisation in ward, Haemorrhoidectomy, TUR)					
227.	Topical anaesthetics (Remicaine, Xylocaine , Anethaine and similar)-fractional use	NR	NR						
228.	Transducers – disposable	R	R						
229.	Trays – sterile	NR	C	Tray and contents not to be charged together If price exceeds max. then contents must be charged Disposable contents only chargeable Ready made packs – list of contents and price to be supplied. Small trays, swabbing, ENT – R9.00 Large trays – dressing, cath, multipack – R15.60					
230.	Tubing – reusable	NR	NR						
231.	Tubing –disposable	C	C	Maximum R31 payable on tubing per stay unless patient returns to Theatre then an additional R31 may be charged per additional visit					
232.	Ung Emulsificans	NR	C	When used in treatment on prescription.					
233.	Vascular sealing devices (Angioseal, Vasoseal, Perclose, The Closer, and similar);	NR	NR						
234.	Vaseline	NR	NR						
235.	Ventilators (Servo, Bennett) - equipment	N/A	C	Chargeable only in ICU and High Care where applicable.					
236.	Water Bottle – Pour			Refer Pour Bottles					
237.	Wipes (unisolve, baby and similar)	NR	NR						
238.	X ray swabs in the ward (abdominal swabs and similar);	R	C	Chargeable in the ward for: Severe septic cases (laparotomy, burns and similar); Unsutured chests in Cardio- thoracic ICU. Subject to case management.					
239.	Xylocaine Spray	NR	NR						
240.	Yankauer Suction – Plain Yankauer Suction with Control	C	C	Disposable max. 2 per case. (One of each) In ward for resuscitation and trauma only					
241.	Zinc & Castor Oil Cream	N/A	N/A						

Code	Description	Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics															
				RVU	Fee	RVU	Fee	RVU	Fee														
	APPENDIX C Infectious Diseases CONDITION Acute Flaccid Paralysis Anthrax Chicken Pox Diphtheria Haemophyllis Influenza Haemorrhagic fevers of Africa: ¢ Crimean-Congo Ebola ¢ Lassa ¢ Marburg ¢ Rift Valley ¢ Dengue Herpes Zoster HIV/AIDS Legionnaires Disease Measles: ¢ Rubeola ¢ Rubella Meningococcal infections Multi-drug Resistant Bacteria: ¢ MRSA ¢ VRE ¢ MRSE Poliomyelitis Pyrexia unknown origin Rabies Small Pox Tuberculosis Pulmonary Typhus Fever Viral Hepatitis Whooping Cough (Pertussis) Note: The above is a general list and the clinical appropriate use of items for specific conditions is subject to Case Management.								09.05														
	APPENDIX D Medically Prescribed Meals: <table border="1" data-bbox="197 1238 1218 1431"> <tr> <td>ORAL SUPPLEMENTS</td> <td>Standard</td> <td>Ensure</td> </tr> <tr> <td>(oral and tube feeds)</td> <td></td> <td>Fortisip</td> </tr> <tr> <td></td> <td></td> <td>Fortimel</td> </tr> <tr> <td></td> <td></td> <td>Fresubin Original drink (Vanilla)</td> </tr> <tr> <td></td> <td></td> <td>Nutren And Nutren Jnr (Gluten -free)</td> </tr> </table>	ORAL SUPPLEMENTS	Standard	Ensure	(oral and tube feeds)		Fortisip			Fortimel			Fresubin Original drink (Vanilla)			Nutren And Nutren Jnr (Gluten -free)							09.05
ORAL SUPPLEMENTS	Standard	Ensure																					
(oral and tube feeds)		Fortisip																					
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Code	Description		Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
					RVU	Fee	RVU	Fee	RVU	Fee
		Standard & Fibre								
		Isotonic								
		Isotonic &Fibre								
		Low Residue								
		High Energy, High Protein & Fibre								
		High Energy & High Protein								
	TUBE FEEDS	Semi-Elemental								
		Standard								
		High Energy & High Protein								
		Semi-Elemental High Protein & High Fibre								
	DISEASE SPECIFIC	Maximum Glucose Tolerance								
		Pulmonary Insufficiency								
		Renal Failure								

Code	Description			Ver	Add	Private Hospitals ('A' - Status)		Private Hospitals ('B' - Status)		Approved U O T U / Day clinics	
						RVU	Fee	RVU	Fee	RVU	Fee
		HIV/Aids	Advera								
			Survimed OPD								
			Supportan								
		Cancer Patients	Supportan drink (Milk Coffee), Stresson Multi Fibre,								
			Peptisorb								
	MODULAR	Protein	Promod								
			Protifar								
		MCT Oil	MCT Oil								
			Fresubin 750MCT(HP Energy)								
		Glutamine	Glutapack-10								
			Dipeptiven 50ml & 100ml								
		Food thickener	Thick & Easy								
		Carbohydrate	Fantomalt								
			Polycose								
Note: Or generic equivalents. All tubes feeds subject to Case Management											