

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1230	Physician's fee for interpreting an ECG: without effort								
1231	Physician's fee for interpreting an ECG: without and with effort								
1232	Electrocardiogram: without effort								
1233	Electrocardiogram: without and with effort								
1234	Effort electrocardiogram with the aid of a special bicycle ergometer, monitoring apparatus and availability of associated apparatus								
1235	Multi-stage treadmill test								
1236	Electrocardiogram: without effort: Under 4 years								
1237	24 hour ambulatory blood pressure: Hire fee								
1238	24 hour ambulatory ECG monitoring (holter): Hire fee								
1239	24 hour ambulatory ECG monitoring (holter): Interpretation								
1240	Signal averaged electrocardiogram								
1241	X-ray screening: Chest								
1242	X-ray screening: Prosthetic valves								
1243	2 week event triggered ambulatory ECG monitoring: Hire fee								
1244	2 week event triggered ambulatory ECG monitoring: Interpretation								
1268	Threshold testing: Own equipment								
1312	Evaluation of coronary angiogram by cardiothoracic surgeon								
1357	Response to reflex heating								
1359	Response to reflex cooling								
1361	Cold sensitivity test								
1363	Oscillometry test								
1365	Sweat test								
1367	Doppler blood tests								
5369	Doppler arterial pressures								
5371	Doppler arterial pressures with exercise								
5373	Doppler segmental pressures and wave forms								
5375	Venous doppler examination (both limbs)								
5377	Venous plethysmography								

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
5379	Supra-orbital doppler test								
5381	Carotid non-invasive complex tests								
1421	Compression sclerotherapy of varicose veins. Per injection to a maximum of nine injections per leg (excluding cost of material)								
1431	Phase II: Exercise rehabilitation: Per patient per 60 min session with a maximum of 5 patients per group								
1432	Phase III: Exercise rehabilitation: Per patient per 60 min session with a maximum of 10 patients per group								
8.	DIGESTIVE SYSTEM								
1469	Local excision of mucosal lesion of oral cavity								
1485	Local excision of benign lesion of lip								
1499	Lip reconstruction following an injury: Direct repair								
1507	Local excision of lesion of tongue								
1547	Oesophageal acid perfusion test								
1580	Oesophageal motility (6 channel + pneumograph + pH pull-through)								
1582	Oesophageal motility (4 or 6 channel + pneumograph - ECG + provocative tests for oesophageal spasm vs. myocardial ischaemia)								
1587	Upper gastro-intestinal fibre-optic endoscopy: own equipment								
1593	Augmented histamine test: Gastric intubation with x-ray screening								
1632	H2 breath test (intestines)								
1633	Complete test using lactose or lactulose								
1678	Fibre-optic sigmoidoscopy, plus polypectomy								
1681	Proctoscopy with removal of polyps: First time								
1683	Proctoscopy with removal of polyps: Subsequent times								
1719	Rubber band ligation of haemorrhoids: Per haemorrhoid								
1721	Sclerosing injection for haemorrhoids: Per injection								
1725	Drainage of external thrombosed pile								
1729	Excision of anal skin tags								
1748	Body composition measured by bio-electrical impedance								
1780	Gastric and duodenal intubation								
1797	Pneumo-peritoneum: First								

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1799	Pneumo-peritoneum: Repeat								
1801	Diagnostic paracentesis: Abdomen								
1803	Therapeutic paracentesis: Abdomen								
10.	URINARY SYSTEM								
1841	Renal biopsy (needle)								
1847	Haemodialysis: Per hour or part thereof								
1849	Haemodialysis: Maximum: Eight hours								
1851	Haemodialysis: Thereafter per week								
1875	Percutaneous aspiration cyst: Nephrostomy, pyelostomy								
1945	Instillation of radio-opaque material for cystography or urethrocytography								
1947	Instillation of anti-carcinogenic agent including retention time, but not cost of material or hydrodilatation of bladder								
1949	Cystoscopy								
1989	Cystometrogram								
1991	Fluorimetric bladder studies with videocystograph								
1992	Fluorimetric bladder studies without videocystograph								
1996	Bladder catheterisation: Male (not during operation)								
1997	Bladder catheterisation: Female (not during operation)								
11.	MALE GENITAL SYSTEM								
2154	Induction of artificial erection								
12.	FEMALE GENITAL SYSTEM								
2271	Removal of tag or polyp								
2272	Removal of small superficial benign lesions								
2312	Artificial insemination								
2314	Intra-uterine insemination								
2315	Simm's Hühner test plus wet smear								

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
2339	Colpotomy: diagnostic								
2389	Paracervical nerve block								
2392	Cryo- or electro- cauterisation, or Lletz of cervix (excluding cost of disposable loop electrode): In consulting rooms								
2399	Punch biopsy								
2400	Biopsy during pregnancy								
2415	Cervix encircage: Removal items 2409 and 2411 without anaesthetic								
2425	Removal of cervical polyps								
2429	Colpomicoscopy								
2434	Endometrial biopsy								
2435	Hysterosalpingogram								
2442	Insertion of IUCD								
2506	Transcervical gamete/embryo intrafallopian tube transfer (TET/TEST)								
2565	Implantation hormone pellets (excluding after-care)								
13.	OBSTETRIC PROCEDURES								
2603	External cephalic version								
2605	Amniocentesis								
2610	Tocardiography pre-natal and intrapartum: Including stress and non-stress test (own machine)								
2611	Chorion villus biopsy								
14.	NERVOUS SYSTEM								
2681	Visual evoked potentials (VEP): Unilateral								
2682	Visual evoked potentials (VEP): Bilateral								
2683	Electroretinography (Ganzfeld method): Unilateral								
2684	Electroretinography (Ganzfeld method): Bilateral								
2685	Electro-oculography: Unilateral								
2686	Electro-oculography: Bilateral								
2687	VEP stable condition (photic drive): Unilateral								

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
2689	VEP stable condition (photic drive): Bilateral								
2690	Total fee for full evaluation of visual tracts including bilateral electroretinography and V.E.P.								
2703	Somatosensory evoked potentials (SEP) single nerve examination to brachial - or Lumbosacral plexus, spinal cord and cortex.								
2705	Transcutaneous nerve stimulation in the treatment of post-operative and chronic intractable pain: Per treatment								
2707	Full fee for complete neurological evoked potential evaluation, including neurological AEP, bilateral VEP and bilateral median and/or posterior tibial stimulation.								
2708	Evaluation of cognitive evoked potential with visual or audiology stimulus								
2709	Full spinogram including bilateral median and posterior-tibial studies								
2710	Morphia saturation testing in rooms (consultation x2 plus item 0206: intravenous infusion) (excluding injection material)								
2711	Electro-encephalography: Taking of record								
2712	Electro-encephalography: Interpretation								
6001	Sleep electro-encephalography: infants that fit into a perambulator: taking of record								
6002	Sleep electro-encephalography: infants that fit into a perambulator: interpretation								
6003	Sleep electro-encephalography: adults and children over infant age: taking of record								
6004	Sleep electro-encephalography: adults and children over infant age: interpretation								
2717	Electromyography: First								
2718	Electromyography: Subsequent								
2725	Angiography carotids: Unilateral								
2726	Angiography carotids: Bilateral								
2727	Vertebral artery: Direct needling								
2729	Vertebral catheterisation								
2731	Air encephalography and posterior fossa tomography: injection of air (independent procedure)								
2735	Posterior fossa tomography attendance by clinician								
2737	Visual field charting on Bjerrum Screen								
2739	Ventricular needling without burring: Tapping only								
2741	Ventricular needling without burring: Plus introduction of air and/or contrast dye for ventriculography								
2743	Subdural tapping: First sitting								
2745	Subdural tapping: Subsequent								
2765	Nerve conduction studies (see item 0733 and 3285)								

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
6005	Botulinum toxin injections: For blepharospasm (+ item 0201 + item 0202)								
6006	Botulinum toxin injections: For hemifacial spasm (+ item 0201 + item 0202)								
6007	Botulinum toxin injections: For adductor disphonia (+ item 0201 + item 0202)								
6008	Botulinum toxin injections: In extra-ocular muscles (+ item 0201 + item 0202)								
6009	Botulinum toxin injections: For spasmodic torticollis and/or cranial dystonia (+ item 0201 + item 0202)								
2789	Trigeminal: Injection of alcohol								
2791	Trigeminal: Injection of cortisone								
2793	Trigeminal: Coagulation through high frequency								
2800	Procedures for pain relief: Plexus nerve block								
2802	Procedures for pain relief: Peripheral nerve block								
2803	Alcohol injection in peripheral nerves for pain: Unilateral								
2805	Alcohol injection in peripheral nerves for pain: Bilateral								
2815	Interdigital								
2849	Sympathetic block: Other levels: Unilateral								
2851	Sympathetic block: Other levels: Bilateral								
2853	Sympathetic block: Other levels: Diagnostic								
2957	Individual psychotherapy (specific type): Including play therapy for children: Per short session (20 minutes)								
2974	Individual psychotherapy (specific type): Including play therapy for children: Per intermediate session (40 minutes)								
2975	Individual psychotherapy (specific type): Including play therapy for children: Per extended session (60 minutes)								
2958	Psychoanalytic therapy: Per 60-minute session								
2962	Directive therapy to family, parent(s), spouse: Per 20 minute session								
2963	Pairs, marriage or sex therapy: Per 20 minute session								
2976	Intermediate treatment where either items 2962 or 2963 are used: Per 40 minute session								
2977	Extended treatment where either items 2962 or 2963 are used: Per 60 minute session								
2968	Group therapy								
2973	Psychometry (specify examination): Per session (Maximum of 3 sessions per examination)								
2970	Electro-convulsive treatment (ECT): Each time (See rule Va)								
2971	Intravenous anti-depressive medication through infusion: Per push in (Maximum 1 push in per 24 hours)								

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
2972	Narco-analysis (Maximum of 3 sessions per treatment): Per session								
15.	ENDOCRINE SYSTEM								
3001	Implantation of pellets (excluding cost of material)								
16.	EYE								
3002	Gonioscopy								
3003	Fundus contact lens or 90 D lens examination								
3004	Peripheral fundus examination with indirect ophthalmoscope								
3005	Endothelial cell count								
3006	Keratometry								
3007	Potential acuity measurement								
3008	Contrast sensitivity test								
3010	Orthoptic consultation								
3011	Orthoptic subsequent sessions								
3012	Pre-surgical retinal examination before retinal surgery								
3013	Ocular motility assessment: Comprehensive examination								
3014	Tonometry: Per test with maximum of 2 tests for provocative tonometry(one or both eyes)								
3015	Charting of visual field with manual perimeter								
3016	Retinal threshold test without storage facilities								
3017	Retinal threshold test inclusive of computer disc storage for Delta or Statpak programs								
3018	Retinal threshold trend evaluation (additional to item 3017)								
3019	Ocular muscle function with Hess screen or perimeter								
3021	Retinal function assessment including refraction after ocular surgery (within four months), maximum two examinations								
3022	Digital fluorescein video angiography								
3023	Digital indocyanine video angiography								
3025	Electronic tonography								
3027	Fundus photography								
3029	Anterior segment microphotography								

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
3032	Eyelid and orbit photography								
3033	Interpretation of item 3031 referred by other clinician								
3034	Determination of lens implant power per eye								
3036	Corneal topography: For pathological corneas only on special motivation. For refractive surgery - may be charged once pre-operative and once post-operative per sitting (for one or both eyes)								
3060	Use of own surgical microscope for surgery or examination (not for slitlamp microscope) (for use by ophthalmologists only)								
3074	Adjustment of sutures if not done at the time of operation (additional fee for sterile tray - see item 0202)								
3089	Subconjunctival injection if not done at time of operation								
3091	Retrolbulbar injection if not done at time of operation								
3092	External laser treatment for superficial								
3111	Contact lenses: Assessment involving preliminary fittings and tolerance visits (costs of lenses borne by patient)								
3113	Fitting of contact lenses and instructions to patient: Includes eye examination, first fitting of the contact lenses and further post-fitting visits for 1 year								
3115	Fitting of only one contact lens and instructions to the patient: Eye examination, first fitting of the contact lens and further post-fitting visits for one year included								
3117	Cornea: Removal of foreign body: On the basis of fee per consultation								
3118	Curettage of cornea after removal of foreign body								
3119	Cornea: Tattooing								
3124	Removal of corneal sutures under microscope (maximum of 2 procedures) Additional fee for sterile tray (see item 0202)								
3127	Cauterization of cornea (by chemical, thermal or cryotherapy methods)								
3141	Sealing of punctum								
3143	Three-snip operation								
3163	Excision of superficial lid tumour								
3167	Diathermy to wart on lid margin								
3169	Electrolysis of any number of eyelashes								
3171	Excision of meibomian cyst								
3174	Botulinum toxin injection for blefarospasm								
3177	Entropion or ectropion by: Cautery								
3192	If a practitioner performs the procedure in his own facility an excimer laser theatre fee of R11.10 per minute may be charged								
3198	Excimer laser: Hire fee								
3201	Laser apparatus: Hire fee for one or both eyes done in one sitting								

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
3202	Phako emulsification apparatus: Hire fee								
3203	Vitrectomy apparatus: Hire fee								
17.	EAR								
3204	External ear canal: Removal of foreign body at rooms								
3206	Microscopic examination of tympanic membrane including microsuction								
3210	Microscope instrument fee used in consulting rooms								
3260	Computerized static posturography consists of standing a patient on a Piezo-electric platform which tests the vestibular and proprioceptive systems								
3223	Percutaneous stimulation of the facial nerve								
3224	Electroneurography (ENOG)								
2693	A.E.P. Audiological examination: unilateral at a minimum of 4 decibels: Unilateral								
2694	A.E.P. Audiological examination: unilateral at a minimum of 4 decibels: Bilateral								
2695	Audiology 40Hz response: unilateral								
2696	Audiology 40Hz response: Bilateral								
2697	Mid- and long latency auditory evoked potentials: unilateral								
2698	Mid- and long latency auditory evoked potentials: Bilateral								
3250	Otoacoustic emission (high risk patients only)								
3251	Minimal caloric test (excluding consultation fee)								
3252	Bithermal Halpike caloric test (excluding consultation fee)								
3253	Electro-nystagmography for spontaneous and positional nystagmus								
3254	Video nystagmography (monocular)								
3255	Caloric test done with electro-nystagmography								
3256	Video nystagmography (binocular)								
3273	Pure tone audiometry (air conduction)								
3274	Pure tone audiometry (bone conduction)								
3275	Impedance audiometry (tympanometry)								
3276	Impedance audiometry (stapedial reflex) - no charge for volume, compliance etc.								
3277	Speech audiometry: Inclusive fee (speech audiogram, speech reception threshold, discrimination score)								

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
3278	Recruitment tests: Inclusive fee (Bekesy, Fowler, etc.)								
2691	Short latency brainstem evoked potentials (A.E.P.) neurological examination, single decibel unilateral								
2692	Bilateral.								
18.	PHYSICAL TREATMENT								
3279	Domiciliary or nursing/home treatment (only applicable where a patient is physically incapable of attending rooms, and equipment has to be transported to patient)								
3280	Consultation units for specialists in physical medicine when treatment is given (per treatment)								
3281	Ultrasonic therapy								
3282	Shortwave diathermy								
3284	Sensory nerve conduction studies								
3285	Motor nerve conduction studies								
3287	Spinal joint and ligament injection								
3289	Multiple injections: First joint								
3290	Multiple injections: Each additional joint								
3291	Tendon or ligament injection								
3292	Aspiration of joint or inter-articular injection								
3293	Aspiration or injection of bursa or ganglion								
3294	Paracervical nerve block								
3295	Paravertebral root block: Unilateral								
3296	Paravertebral root block: Bilateral								
3297	Manipulation of spine performed by a specialist in Physical Medicine								
3298	Spinal traction								
3300	Manipulation of large joints without anaesthetic								
3301	Muscle fatigue studies								
3302	Strength duration curve per session								
3303	Electromyography								
3304	All other physical treatment: specify treatment								

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
19.	RADIOLOGY								
3610	Transrectal ultrasonographic prostate volume study for prostate brachytherapy (own equipment)								
3612	Ultrasonic bone densitometry								
3615	Ultrasonic investigations: Fetal maturity								
3617	Ultrasonic investigations: Fetal maturity follow up (same pregnancy)								
3619	Intravascular ultrasound imaging assesses the atherosclerotic process to guide therapeutic interventions. The composition and distribution of the plaque can be visualised by a cross-sectional "slice" of the artery (per vessel)								
3618	Ultrasonic investigations: Pelvic organs (vaginal or abdominal probe)								
3620	Ultrasonic investigations: Cardiac examination plus Doppler colour mapping								
3621	Ultrasonic investigations: Cardiac examination (M.Mode)								
3622	Ultrasonic investigations: Cardiac examination: 2 Dimensional								
3623	Ultrasonic investigations: Cardiac examination + effort								
3624	Ultrasonic investigations: Cardiac examinations + contrast								
3625	Ultrasonic investigations: Cardiac examinations + doppler								
3626	Ultrasonic investigations: Cardiac examination + phonocardiography								
3627	Ultrasonic investigations: Ultrasound examination must include whole abdomen (including liver, gall bladder, spleen, pancreas, abdominal vascular anatomy, para-aortic area, renal tract, pelvic organs)								
3628	Ultrasonic investigations: Renal tract								
3629	Ultrasonic investigations: High definition scan (small parts): Thyroid, breast lump, scrotum, etc.								
3631	Ultrasonic investigations: Ophthalmic examination								
3632	Ultrasonic investigations: Axial length measurement and calculation of intraocular lens power								
3634	Ultrasonic investigations: Peripheral vascular scan								
3635	Ultrasonic investigations: + Doppler								
3636	Ultrasonic investigations: Trans-oesophageal echocardiography including passing the device.								
3637	Ultrasonic investigations: + Colour Duplex (may be added onto any other regional exam, but not to be added to items 3605, 5110, 5111, 5112, 5113 or 5114)								

MEDICAL SCIENTIST

Medical Scientists 2009

NATIONAL REFERENCE PRICE LIST FOR MEDICAL SCIENTISTS 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				
01	Each practitioner must acquaint him-/herself with the provisions of the Medical Schemes Act, as amended, and the regulations promulgated under the Act and 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			05 03
	- The name and practice code number of the referring practitioner. - 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.			
ITEMS				
Code	Description	Ver	Add	Medical Scientist : Genetic Counselling
				RVU Fee
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		
200	Genetic counselling. Duration: 1-10min.	05.03		0.500 35.00 (30.70)
201	Genetic counselling. Duration: 11-20min.	05.03		1.500 105.10 (92.20)
202	Genetic counselling. Duration: 21-30min.	05.03		2.500 175.10 (153.60)
203	Genetic counselling. Duration: 31-40min.	05.03		3.500 245.10 (215.00)
204	Genetic counselling. Duration: 41-50min.	05.03		4.500 315.20 (276.50)
205	Genetic counselling. Duration: 51-60min.	05.03		5.500 385.20 (337.90)
206	Genetic counselling. Duration: 61-70min.	05.03		6.500 455.20 (399.30)
207	Genetic counselling. Duration: 71-80min.	05.03		7.500 525.30 (460.80)
208	Genetic counselling. Duration: 81-90min.	05.03		8.500 595.30 (522.20)
Sample extraction				
300	DNA extraction - Blood	06.02		- -
310	DNA extraction - Tissue (other than blood and including CVS and amniotic fluid)	06.02		- -
320	DNA extraction - Tissue (paraffin blocks)	06.02		- -
330	RNA extraction - Blood	06.02		- -
340	RNA extraction - Tissue (other than blood and including CVS and amniotic fluid)	06.02		- -
350	RNA extraction - Tissue (paraffin blocks)	06.02		- -
PCR				
400	PCR-basic (up to four PCR primer sets)	06.02		- -
410	PCR-multiplex (five or more primer sets)	06.02		- -
420	PCR-realtime	06.02		- -
430	PCR-reverse transcriptase	06.02		- -
Detection Methods				
500	Diagnostic electrophoresis (agarose and polyacrylamide gel electrophoresis and capillary electrophoresis)	06.02		- -
510	Restriction enzyme digestion (use multiples based on cost of enzyme)	06.02		- -
520	Probe hybridisation assays	06.02		- -
530	dHPLC	06.02		- -
540	MLPA	06.02		- -
Southern Blotting				
610	DNA probe labelling (including hybridisation and autoradiography)	06.02		- -
600	Southern blot (digest, gel and blotting)	06.02		- -

Code	Description	Ver	Add	Medical Scientist : Genetic Counselling	
				RVU	Fee
Other					
700	Protein truncation test	06.02		-	-
730	Interpretation and reporting	06.02		-	-
720	DNA sequencing	06.02		-	-
710	Maternal contamination test (prenatal testing)	06.02		-	-

Medical Technology

Medical Technology 2009

NATIONAL REFERENCE PRICE LIST FOR SERVICES BY MEDICAL LABORATORY TECHNOLOGISTS, 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.

Preamble

It is recommended that, when such benefits are granted, the following should be clearly specified in the scheme's rules.

- Services must only be on referral.

General Rules

001	Each practitioner must acquaint him-/herself with the provisions of the Medical Schemes Act, and the regulations promulgated under the Act and shall render a monthly account in respect of any service rendered. NB: Every account shall contain the following particulars : The account or statement contemplated in section 59(1) of the Act must contain the following - (a) The surname and initials of the member; (b) the surname, first name and other initials, if any, of the patient; (c) the name of the scheme concerned; (d) the membership number of the member; (e) the practice code number, group practice number and individual provider registration number issued by the registering authorities for providers, if applicable, of the supplier of service and, in the case of a group practice, the name of the practitioner who provided the service; (f) the relevant diagnostic and such other item code numbers that relates to such relevant health service; (g) the date on which each relevant health service was rendered; (h) the nature and cost of each relevant health service rendered, including the supply of medicine to the member concerned or to a dependant of that member; and the name, quantity and dosage of and net amount payable by the member in respect of, the medicine;	04.00
002	No "shopping list" must be distributed to doctors and no group tests will be carried out.	04.00
003	No charge to be raised in respect of services such as sample handling and after hours services.	04.00
004	Interaction with patient for collecting of specimens shall be limited to those specimens that are physiologically expelled, such as sputum and urine and taking of venous and peripheral blood.	05.02
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

Haematology

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
3705	Alkali resistant haemoglobin	04.00		4.500	33.60 (29.50)
3709	Antiglobulin test (Coombs' or trypsinized red cells)	04.00		3.650	27.30 (23.90)
3710	Antibody titration	04.00		7.200	53.80 (47.20)
3712	Antibody identification	04.00		8.450	63.10 (55.30)
3713	Bleeding time (does not include the cost of the simplate device)	04.00		6.940	51.80 (45.50)
3714	Blood volume, dye method	04.00		7.200	53.80 (47.20)
3715	Buffy layer examination	04.00		19.900	148.60 (130.30)
3717	Bone marrow cytological examination only	04.00		19.900	148.60 (130.30)
3722	Capillary fragility: Hess	04.00		2.020	15.10 (13.20)
3723	Circulating anticoagulants	04.00		5.850	43.70 (38.30)
3724	Coagulation factor inhibitor assay	04.00		57.560	429.80 (377.00)
3726	Activated protein C resistance	04.00		26.000	194.10 (170.30)
3727	Coagulation time	04.00		3.160	23.60 (20.70)
3729	Cold agglutinins	04.00		3.600	26.90 (23.60)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
3730	Protein S: Functional	04.00		37.500	280.00 (245.60)
3731	Compatibility for blood transfusion	04.00		3.600	26.90 (23.60)
3732	Cryoglobulin	04.00		3.600	26.90 (23.60)
3734	Protein C (chromogenic)	04.00		30.290	226.20 (198.40)
3735	Anti-thrombin III (chromogenic)	04.00		22.000	164.30 (144.10)
3736	Plasminogen (chromogenic)	04.00		61.650	460.30 (403.80)
3737	Lupus Russel Viper method	04.00		17.000	126.90 (111.40)
3738	Lupus Kaolin Exner method	04.00		25.000	186.70 (163.80)
3739	Erythrocyte count	04.00		2.250	16.80 (14.70)
3740	Factors V and VII: Qualitative	04.00		7.200	53.80 (47.20)
3741	Coagulation factor assay: Functional	04.00		9.450	70.60 (61.90)
3743	Erythrocyte sedimentation rate	04.00		3.000	22.40 (19.70)
3744	Fibrin stabilizing factor (urea test)	04.00		4.500	33.60 (29.50)
3746	Fibrin monomers	04.00		2.700	20.20 (17.70)
3753	Osmotic fragility (before and after incubation)	04.00		18.000	134.40 (117.90)
3755	Full blood count (including items 3739, 3762, 3783, 3785, 3791)	04.00		10.500	78.40 (68.80)
3756	Full cross match	04.00		7.200	53.80 (47.20)
3757	Coagulation factors: Quantitative	04.00		32.200	240.40 (210.90)
3758	Factor VIII related antigen	04.00		60.460	451.50 (396.00)
3759	Coagulation factor correction study	04.00		11.720	87.50 (76.80)
3762	Haemoglobin estimation	04.00		1.800	13.40 (11.80)
3763	Contact activated product assay	04.00		16.200	121.00 (106.10)
3764	Grouping: A B and O antigens	04.00		3.600	26.90 (23.60)
3765	Grouping: Rh antigen	04.00		3.600	26.90 (23.60)
3767	Euglobulin Lysis time	04.00		25.580	191.00 (167.50)
3768	Haemoglobin A2 (column chromatography)	04.00		15.000	112.00 (98.30)
3769	Haemoglobin electrophoresis	04.00		26.820	200.30 (175.70)
3770	Haemoglobin-S (solubility test)	04.00		3.600	26.90 (23.60)
3772	Haptoglobin: Quantitative	04.00		9.450	70.60 (61.90)
3773	Ham's acidified serum test	04.00		8.000	59.70 (52.40)
3775	Heinz bodies	04.00		2.250	16.80 (14.70)
3776	Haemosiderin in urinary sediment	04.00		2.250	16.80 (14.70)
3783	Leucocyte differential count	04.00		6.200	46.30 (40.60)
3785	Leucocytes: Total count	04.00		1.800	13.40 (11.80)
3786	QBC malaria concentration and fluorescent staining	04.00		25.000	186.70 (163.80)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
3787	LE-cells	04.00		8.300	62.00 (54.40)
3789	Neutrophil alkaline phosphatase	04.00		28.000	209.10 (183.40)
3791	Packed cell volume: Haematocrit	04.00		1.800	13.40 (11.80)
3792	Plasmodium falciparum: Monoclonal immunological identification	04.00		9.000	67.20 (59.00)
3793	Plasma haemoglobin	04.00		6.750	50.40 (44.20)
3795	Platelet aggregation per aggregant	04.00		12.140	90.60 (79.50)
3797	Platelet count	04.00		2.250	16.80 (14.70)
3799	Platelet adhesiveness	04.00		4.500	33.60 (29.50)
3801	Prothrombin consumption	04.00		5.850	43.70 (38.30)
3803	Prothrombin determination (two stages)	04.00		5.850	43.70 (38.30)
3805	Prothrombin index	04.00		6.000	44.80 (39.30)
3806	Therapeutic drug level: Dosage	04.00		4.500	33.60 (29.50)
3809	Reticulocyte count	04.00		3.000	22.40 (19.70)
3810	Schumm's test	04.00		3.600	26.90 (23.60)
3811	Sickling test	04.00		2.250	16.80 (14.70)
3814	Sucrose lysis test for PNH	04.00		3.600	26.90 (23.60)
3816	T and B-cells EAC markers (limited to ONE marker only for CD4/8 counts)	04.00		21.100	157.60 (138.20)
3820	Thrombo - Elastogram	04.00		26.000	194.10 (170.30)
3825	Fibrinogen titre	04.00		3.600	26.90 (23.60)
3829	Glucose 6-phosphate-dehydrogenase: Qualitative	04.00		8.000	59.70 (52.40)
3830	Glucose 6-phosphate-dehydrogenase: Quantitative	04.00		16.000	119.50 (104.80)
3832	Red cell pyruvate kinase: Quantitative	04.00		16.000	119.50 (104.80)
3834	Red cell Rhesus phenotype	04.00		9.900	73.90 (64.80)
3835	Haemoglobin F in blood smear	04.00		5.850	43.70 (38.30)
3837	Partial thromboplastin time	04.00		5.850	43.70 (38.30)
3841	Thrombin time (screen)	04.00		7.160	53.50 (46.90)
3843	Thrombin time (serial)	04.00		7.650	57.10 (50.10)
3847	Haemoglobin H	04.00		2.250	16.80 (14.70)
3851	Fibrin degeneration products (diffusion plate)	04.00		10.350	77.30 (67.80)
3853	Fibrin degeneration products (latex slide)	04.00		4.500	33.60 (29.50)
3854	XDP (Dimer test or equivalent latex slide test)	04.00		8.500	63.50 (55.70)
3855	Haemagglutination inhibition	04.00		9.900	73.90 (64.80)
Microscopic and miscellaneous tests					
3863	Autogenous vaccine	04.00		12.600	94.10 (82.50)
3864	Entomological examination	04.00		20.700	154.60 (135.60)
3865	Parasites in blood smear	04.00		5.600	41.80 (36.70)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
3867	Miscellaneous (body fluids, urine, exudate, fungi, puss, scrapings, etc.)	04.00		4.900	36.60 (32.10)
3868	Fungus identification	04.00		8.300	62.00 (54.40)
3869	Faeces (including parasites)	04.00		4.900	36.60 (32.10)
3875	Inclusion bodies	04.00		4.500	33.60 (29.50)
3878	Crystal identification polarized light microscopy	04.00		4.500	33.60 (29.50)
3879	Campylobacter in stool: Fastidious culture	04.00		9.900	73.90 (64.80)
3880	Antigen detection with polyclonal antibodies	04.00		4.500	33.60 (29.50)
3881	Mycobacteria	04.00		3.000	22.40 (19.70)
3882	Antigen detection with monoclonal antibodies	04.00		10.800	80.60 (70.70)
3883	Concentration techniques for parasites	04.00		3.000	22.40 (19.70)
3884	Dark field, phase or interference contrast microscopy, Nomarski or Fontana	04.00		6.300	47.00 (41.30)
3885	Cytochemical stain	04.00		5.450	40.70 (35.70)
Bacteriology					
3887	Antibiotic susceptibility test: Per organism	04.00		8.000	59.70 (52.40)
3888	Adhesive tape preparation	04.00		2.700	20.20 (17.70)
3889	Clostridium difficile toxin: Monoclonal immunological	04.00		12.400	92.60 (81.20)
3890	Antibiotic assay of tissues and fluids	04.00		13.900	103.80 (91.00)
3891	Blood culture: Aerobic	04.00		5.850	43.70 (38.30)
3892	Blood culture: Anaerobic	04.00		5.850	43.70 (38.30)
3893	Bacteriological culture: Miscellaneous	04.00		6.300	47.00 (41.30)
3894	Radiometric blood culture	04.00		10.800	80.60 (70.70)
3895	Bacteriological culture: Fastidious organisms	04.00		9.900	73.90 (64.80)
3896	In vivo culture: Bacteria	04.00		16.000	119.50 (104.80)
3897	In vivo culture: Virus	04.00		16.000	119.50 (104.80)
3899	Bacterial exotoxin production (in vivo assay)	04.00		20.700	154.60 (135.60)
3901	Fungal culture	04.00		4.500	33.60 (29.50)
3902	Clostridium difficile (cytotoxicity neutralisation)	04.00		30.000	224.00 (196.50)
3903	Antibiotic level: Biological fluids	04.00		11.700	87.40 (76.60)
3904	Rotavirus latex slide test	04.00		5.620	42.00 (36.80)
3905	Identification of virus or rickettsia	04.00		20.700	154.60 (135.60)
3906	Identification: Chlamydia	04.00		16.000	119.50 (104.80)
3907	Culture for staphylococcus aureus	04.00		2.250	16.80 (14.70)
3908	Anaerobe culture: Comprehensive	04.00		9.900	73.90 (64.80)
3909	Anaerobe culture: Limited procedure	04.00		4.500	33.60 (29.50)
3911	Beta-lactamase assay	04.00		4.500	33.60 (29.50)
3914	Sterility control test: Biological method	04.00		4.500	33.60 (29.50)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
3915	Mycobacterium culture	04.00		4.500	33.60 (29.50)
3916	Radiometric tuberculosis culture	04.00		10.800	80.60 (70.70)
3918	Mycoplasma culture: Comprehensive	04.00		9.900	73.90 (64.80)
3919	Identification of mycobacterium	04.00		9.900	73.90 (64.80)
3920	Mycobacterium: Antibiotic sensitivity	04.00		9.900	73.90 (64.80)
3921	Antibiotic synergistic study	04.00		20.700	154.60 (135.60)
3922	Viable cell count	04.00		1.350	10.10 (8.84)
3923	Biochemical identification of bacterium: Abridged	04.00		3.150	23.50 (20.60)
3924	Biochemical identification of bacterium: Extended	04.00		12.500	93.30 (81.90)
3925	Serological identification of bacterium: Abridged	04.00		3.150	23.50 (20.60)
3926	Serological identification of bacterium: Extended	04.00		10.200	76.20 (66.80)
3927	Grouping for streptococci	04.00		7.300	54.50 (47.80)
3928	Antimicrobial substances	04.00		3.800	28.40 (24.90)
3929	Radiometric mycobacterium identification	04.00		14.000	104.50 (91.70)
3930	Radiometric mycobacterium antibiotic sensitivity	04.00		25.000	186.70 (163.80)
3931	Helicobacter: Monoclonal immunological	04.00		12.400	92.60 (81.20)
4650	Antibiotic MIC per organism per antibiotic	04.00		8.000	59.70 (52.40)
4651	Non-radiometric automated blood cultures	04.00		13.900	103.80 (91.00)
4652	Rapid automated bacterial identification per organism	04.00		15.000	112.00 (98.30)
4653	Rapid automated antibiotic susceptibility per organism	04.00		17.000	126.90 (111.40)
4654	Rapid automated MIC per organism per antibiotic	04.00		17.000	126.90 (111.40)
Serology					
3959	Rose Waaler agglutination test	04.00		4.500	33.60 (29.50)
3960	Gonococcal, listeria or echinococcus agglutination	04.00		9.500	70.90 (62.20)
3961	Slide agglutination test	04.00		2.630	19.60 (17.20)
3963	Serum complement level: Each component	04.00		3.150	23.50 (20.60)
3967	Auto-antibody: Sensitized erythrocytes	04.00		4.500	33.60 (29.50)
3968	Herpes virus typing: Monoclonal immunological	04.00		20.690	154.50 (135.50)
3969	Western blot technique	04.00		74.000	552.60 (484.70)
3970	Epstein-Barr virus antibody titer	04.00		6.750	50.40 (44.20)
3932	Antibodies to human immunodeficiency virus (HIV): ELISA	04.00		14.100	105.30 (92.40)
3933	IgE: Total: EMIT or ELISA	04.00		11.700	87.40 (76.60)
3934	Auto antibodies by labelled antibodies	04.00		16.000	119.50 (104.80)
3935	Sperm antibodies	04.00		16.000	119.50 (104.80)
3936	Virus neutralisation test: First antibody	04.00		75.000	560.00 (491.30)
3937	Virus neutralisation test: Each additional antibody	04.00		15.000	112.00 (98.30)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
3938	Precipitation test per antigen	04.00		4.500	33.60 (29.50)
3939	Agglutination test per antigen	04.00		5.500	41.10 (36.00)
3940	Haemagglutination test: Per antigen	04.00		9.900	73.90 (64.80)
3941	Modified Coombs' test for brucellosis	04.00		4.500	33.60 (29.50)
3943	Antibody titer to bacterial exotoxin	04.00		3.600	26.90 (23.60)
3944	IgE: Specific antibody titer: ELISA/EMIT: Per Ag	04.00		12.400	92.60 (81.20)
3945	Complement fixation test	04.00		5.850	43.70 (38.30)
3946	IgM: Specific antibody titer: ELISA/EMIT: Per Ag	04.00		14.050	104.90 (92.00)
3947	C-reactive protein	04.00		10.840	80.90 (71.00)
3948	IgG: Specific antibody titer: ELISA/EMIT: Per Ag	04.00		12.950	96.70 (84.80)
3949	Qualitative Kahn, VDRL or other flocculation	04.00		2.250	16.80 (14.70)
3950	Neutrophil phagocytosis	04.00		25.200	188.20 (165.10)
3951	Quantitative Kahn, VDRL or other flocculation	04.00		3.600	26.90 (23.60)
3952	Neutrophil chemotaxis	04.00		67.950	507.40 (445.10)
3953	Tube agglutination test	04.00		4.150	31.00 (27.20)
3955	Paul Bunnell: Presumptive	04.00		2.250	16.80 (14.70)
3956	Infectious mononucleosis latex slide test (Monospot or equivalent)	04.00		8.500	63.50 (55.70)
3971	Immuno-diffusion test: Per antigen	04.00		3.150	23.50 (20.60)
3972	Respiratory syncytial virus (ELISA technique)	04.00		35.000	261.30 (229.30)
3973	Immuno electrophoresis: Per immune serum	04.00		9.450	70.60 (61.90)
3974	Polymerase chain reaction	04.00		75.000	560.00 (491.30)
3975	Indirect immuno-fluorescence test (bacterial, viral, parasitic)	04.00		12.000	89.60 (78.60)
3978	Lymphocyte transformation	04.00		51.700	386.00 (338.60)
4601	Panel typing: Antibody detection: Class I	04.00		36.000	268.80 (235.80)
4602	Panel typing: Antibody detection: Class II	04.00		44.000	328.50 (288.20)
4603	HLA test for specific locus/antigen - serology	04.00		27.000	201.60 (176.90)
4604	HLA typing: Class I - serology	04.00		52.000	388.30 (340.60)
4605	HLA typing: Class II - serology	04.00		52.000	388.30 (340.60)
4606	HLA typing: Class I & II - serology	04.00		90.000	672.00 (589.50)
4607	Cross matching T-cells (per tray)	04.00		18.000	134.40 (117.90)
4608	Cross matching B-cells	04.00		38.000	283.70 (248.90)
4609	Cross matching T- & B-cells	04.00		48.000	358.40 (314.40)
Biochemical tests: Blood					
3991	Abnormal pigments: Qualitative	04.00		4.500	33.60 (29.50)
3993	Abnormal pigments: Quantitative	04.00		9.000	67.20 (59.00)
3995	Acid phosphate	04.00		5.180	38.70 (33.90)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
3998	Amino acids Quantitative (Post derivatisation HPLC)	04.00		78.120	583.30 (511.70)
3999	Albumin	04.00		4.800	35.80 (31.40)
4000	Alcohol	04.00		12.400	92.60 (81.20)
4001	Alkaline phosphatase	04.00		5.180	38.70 (33.90)
4002	Alkaline phosphatase-iso-enzymes	04.00		11.700	87.40 (76.60)
4003	Ammonia: Enzymatic	04.00		7.710	57.60 (50.50)
4004	Ammonia: Monitor	04.00		4.500	33.60 (29.50)
4005	Alpha-1-antitrypsin: Total	04.00		7.200	53.80 (47.20)
4006	Amylase	04.00		5.180	38.70 (33.90)
4007	Arsenic in blood, hair or nails	04.00		36.250	270.70 (237.40)
4009	Bilirubin: Total	04.00		4.770	35.60 (31.20)
4010	Bilirubin: Conjugated	04.00		3.620	27.00 (23.70)
4014	Cadmium: Atomic absorption	04.00		18.120	135.30 (118.70)
4016	Calcium: Ionized	04.00		6.750	50.40 (44.20)
4017	Calcium: Spectrophotometric	04.00		3.620	27.00 (23.70)
4018	Calcium: Atomic absorption	04.00		7.250	54.10 (47.50)
4019	Carotene	04.00		2.250	16.80 (14.70)
4020	Carnitine (Total or free) in biological fluid: Each	04.00		11.690	87.30 (76.60)
4021	Carnitine (Total or free) in muscle: Each	04.00		23.380	174.60 (153.10)
4022	Acyl Carnitine	04.00		23.380	174.60 (153.10)
4023	Chloride	04.00		2.590	19.30 (17.00)
4026	LDL cholesterol (chemical determination)	04.00		6.900	51.50 (45.20)
4027	Cholesterol total	04.00		5.340	39.90 (35.00)
4028	HDL cholesterol	04.00		6.900	51.50 (45.20)
4029	Cholinesterase: Serum or erythrocyte: Each	04.00		7.480	55.90 (49.00)
4030	Cholinesterase phenotype (Dibucaine or fluoride each)	04.00		9.000	67.20 (59.00)
4031	Total CO2	04.00		5.180	38.70 (33.90)
4032	Creatinine	04.00		3.620	27.00 (23.70)
4040	Homocysteine (random)	04.00		15.300	114.20 (100.20)
4041	Homocysteine (after Methionine load)	04.00		18.100	135.20 (118.60)
4042	D-Xylose absorption test: Two hours	04.00		13.150	98.20 (86.10)
4045	Fibrinogen: Quantitative	04.00		3.600	26.90 (23.60)
4049	Glucose tolerance test (2 specimens)	04.00		8.970	67.00 (58.80)
4050	Glucose strip-test with photometric reading	04.00		1.800	13.40 (11.80)
4051	Galactose	04.00		11.250	84.00 (73.70)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
4052	Glucose tolerance test (3 specimens)	04.00		13.170	98.30 (86.30)
4053	Glucose tolerance test (4 specimens)	04.00		17.370	129.70 (113.80)
4057	Glucose: Quantitative	04.00		3.620	27.00 (23.70)
4061	Glucose tolerance test (5 specimens)	04.00		21.560	161.00 (141.20)
4062	Galactose-1-phosphate uridyl transferase	04.00		16.000	119.50 (104.80)
4063	Fructosamine	04.00		7.200	53.80 (47.20)
4064	HbA1C	06.04		14.250	106.40 (93.30)
4066	Immunofixation: Total protein, IgG, IgA, IgM, Kappa, Lambda	04.00		46.880	350.10 (307.10)
4067	Lithium: Flame ionisation	04.00		5.180	38.70 (33.90)
4068	Lithium: Atomic absorption	04.00		7.480	55.90 (49.00)
4071	Iron	04.00		6.750	50.40 (44.20)
4073	Iron-binding capacity	04.00		7.650	57.10 (50.10)
4078	Oximetry analysis: Methb, COHb, O2Hb, RHb, SulfHb	04.11		6.750	50.40 (44.20)
4079	Ketones in plasma: Qualitative	04.00		2.250	16.80 (14.70)
4081	Drug level-biological fluid: Quantitative	04.00		10.800	80.60 (70.70)
4083	Lysosomal enzyme assay	04.00		36.560	273.00 (239.50)
4085	Lipase	04.00		5.180	38.70 (33.90)
4091	Lipoprotein electrophoresis	04.00		9.000	67.20 (59.00)
4093	Osmolality: Serum or urine	04.00		6.750	50.40 (44.20)
4094	Magnesium: Spectrophotometric	04.00		3.620	27.00 (23.70)
4095	Magnesium: Atomic absorption	04.00		7.250	54.10 (47.50)
4096	Mercury: Atomic absorption	04.00		18.120	135.30 (118.70)
4098	Copper: Atomic absorption	04.00		18.120	135.30 (118.70)
4105	Protein electrophoresis	04.00		9.000	67.20 (59.00)
4106	IgG sub-class 1, 2, 3 or 4: Per sub-class	04.00		20.000	149.30 (131.00)
4109	Phosphate	04.00		3.620	27.00 (23.70)
4113	Potassium	04.00		3.620	27.00 (23.70)
4114	Sodium	04.00		3.620	27.00 (23.70)
4117	Protein: Total	04.00		3.110	23.20 (20.40)
4121	pH, pCO2 or pO2: Each	04.00		6.750	50.40 (44.20)
4123	Pyruvic acid	04.00		4.500	33.60 (29.50)
4125	Salicylates	04.00		4.500	33.60 (29.50)
4127	Caeruloplasmin	04.00		4.500	33.60 (29.50)
4128	Phenylalanine: Quantitative	04.00		11.250	84.00 (73.70)
4130	Aspartate aminotransferase (AST)	04.00		5.400	40.30 (35.40)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
4131	Alanine aminotransferase (ALT)	04.00		5.400	40.30 (35.40)
4132	Creatine kinase (CK)	04.00		5.400	40.30 (35.40)
4133	Lactate dehydrogenase (LD)	04.00		5.400	40.30 (35.40)
4134	Gamma glutamyl transferase (GGT)	04.00		5.400	40.30 (35.40)
4135	Aldolase	04.00		5.400	40.30 (35.40)
4136	Angiotensin converting enzyme (ACE)	04.00		9.000	67.20 (59.00)
4137	Lactate dehydrogenase isoenzyme	04.00		10.800	80.60 (70.70)
4138	CK-MB: Immunoinhibition/precipitation	04.11		10.800	80.60 (70.70)
4139	Adenosine deaminase	04.00		5.400	40.30 (35.40)
4143	Serum/plasma enzymes	04.00		5.400	40.30 (35.40)
4144	Transferrin	04.00		11.700	87.40 (76.60)
4146	Lead: Atomic absorption	04.00		15.000	112.00 (98.30)
4147	Triglyceride	04.00		7.930	59.20 (51.90)
4149	Red cell magnesium	04.00		11.700	87.40 (76.60)
4151	Urea	04.00		3.620	27.00 (23.70)
4152	CK-MB: Mass determination: Quantitative (Automated)	04.00		12.400	92.60 (81.20)
4153	CK-MB: Mass determination: Quantitative (Not automated)	04.00		17.470	130.40 (114.40)
4154	Myoglobin quantitative: Monoclonal immunological	04.00		12.400	92.60 (81.20)
4155	Uric acid	04.00		3.780	28.20 (24.80)
4157	Vitamin A-saturation test	04.00		15.300	114.20 (100.20)
4158	Vitamin E (tocopherol)	04.00		3.600	26.90 (23.60)
4159	Vitamin A	04.00		6.300	47.00 (41.30)
4161	Troponin isoforms: Each	04.00		20.000	149.30 (131.00)
4163	Apoprotein AI: Turbidometric method	04.00		8.280	61.80 (54.20)
4165	Apoprotein AII: Turbidometric method	04.00		8.280	61.80 (54.20)
4167	Apoprotein B: Turbidometric method	04.00		8.280	61.80 (54.20)
4170	Lipoprotein (a)(Lp(a)) assay	04.00		12.420	92.70 (81.40)
4171	Sodium + potassium + chloride + CO ₂ + urea	04.00		15.840	118.30 (103.80)
4172	ELISA/EMIT technique	04.00		12.420	92.70 (81.40)
4181	Quantitative protein estimation: Mancini method	04.00		7.760	57.90 (50.80)
4182	Quantitative protein estimation: Nephelometer or Turbidometric method	04.00		8.280	61.80 (54.20)
4183	Quantitative protein estimation: Labelled antibody	04.00		12.420	92.70 (81.40)
4185	Lactose	04.00		10.800	80.60 (70.70)
4187	Zinc: Atomic absorption	04.00		18.120	135.30 (118.70)
Biochemical tests: Urine					
4188	Urine dipstick, per stick (irrespective of the number of tests on stick)	04.00		1.500	11.20 (9.83)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
4189	Abnormal pigments	04.00		4.500	33.60 (29.50)
4193	Alkapton test: Homogentisic acid	04.00		4.500	33.60 (29.50)
4194	Amino acids: Quantitative (Post derivatisation HPLC)	04.00		78.120	583.30 (511.70)
4195	Amino laevulinic acid	04.00		18.000	134.40 (117.90)
4197	Amylase	04.00		5.180	38.70 (33.90)
4198	Arsenic	04.00		18.120	135.30 (118.70)
4199	Ascorbic acid	04.00		2.250	16.80 (14.70)
4201	Bence-Jones protein	04.00		2.700	20.20 (17.70)
4204	Calcium: Atomic absorption	04.00		7.250	54.10 (47.50)
4205	Calcium: Spectrophotometric	04.00		3.620	27.00 (23.70)
4209	Lead: Atomic absorption	04.00		15.000	112.00 (98.30)
4211	Bile pigments: Qualitative	04.00		2.250	16.80 (14.70)
4213	Protein: Quantitative	04.00		2.250	16.80 (14.70)
4216	Mucopolysaccharides: Qualitative	04.00		3.600	26.90 (23.60)
4217	Oxalate	04.00		9.380	70.00 (61.40)
4218	Glucose: Quantitative	04.00		2.250	16.80 (14.70)
4219	Steroids: Chromatography (each)	04.00		7.200	53.80 (47.20)
4221	Creatinine	04.00		3.620	27.00 (23.70)
4223	Creatinine clearance	04.00		7.650	57.10 (50.10)
4227	Electrophoresis: Qualitative	04.00		4.500	33.60 (29.50)
4237	5-Hydroxy-indole-acetic acid: Screen test	04.00		2.700	20.20 (17.70)
4247	Ketones: Excluding dip-stick method	04.00		2.250	16.80 (14.70)
4248	Reducing substances	04.00		1.800	13.40 (11.80)
4251	Metanephrines: Column chromatography	04.00		22.050	164.60 (144.40)
4253	Aromatic amines (gas chromatography/mass spectrophotometry)	04.00		27.000	201.60 (176.90)
4254	Nitrosonaphtol test for tyrosine	04.00		2.250	16.80 (14.70)
4263	pH: Excluding dip-stick method	04.00		0.900	6.72 (5.90)
4265	Thin layer chromatography: One way	04.00		6.750	50.40 (44.20)
4266	Thin layer chromatography: Two way	04.00		11.250	84.00 (73.70)
4268	Organic acids: Quantitative: GCMS	04.00		109.380	816.70 (716.40)
4269	Phenylpyruvic acid: Ferric chloride	04.00		2.250	16.80 (14.70)
4271	Phosphate excretion index	04.00		22.050	164.60 (144.40)
4272	Porphobilinogen qualitative screen: Urine	04.00		5.000	37.30 (32.80)
4273	Porphobilinogen/ALA: Quantitative each	04.00		15.000	112.00 (98.30)
4283	Magnesium: Spectrophotometric	04.00		3.620	27.00 (23.70)
4284	Magnesium: Atomic absorption	04.00		7.250	54.10 (47.50)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
4285	Identification of carbohydrate	04.00		7.650	57.10 (50.10)
4287	Identification of drug: Qualitative	04.00		4.500	33.60 (29.50)
4288	Identification of drug: Quantitative	04.00		10.800	80.60 (70.70)
4293	Urea clearance	04.00		5.400	40.30 (35.40)
4297	Copper: Spectrophotometric	04.00		3.620	27.00 (23.70)
4298	Copper: Atomic absorption	04.00		18.120	135.30 (118.70)
4301	Chloride	04.00		2.590	19.30 (17.00)
4309	Urobilinogen: Quantitative	04.00		6.750	50.40 (44.20)
4313	Phosphates	04.00		3.620	27.00 (23.70)
4315	Potassium	04.00		3.620	27.00 (23.70)
4316	Sodium	04.00		3.620	27.00 (23.70)
4319	Urea	04.00		3.620	27.00 (23.70)
4321	Uric acid	04.00		3.620	27.00 (23.70)
4323	Total protein and protein electrophoresis	04.00		11.250	84.00 (73.70)
4325	VMA: Quantitative	04.00		11.250	84.00 (73.70)
4326	Catecholamines (HPLC)	04.00		78.120	583.30 (511.70)
4327	Immunofixation: Total protein, IgG, IgA, IgM, Kappa, Lambda	04.11		46.880	350.10 (307.10)
4335	Cystine: Quantitative	04.00		12.600	94.10 (82.50)
4336	Dinitrophenol hydrazine test: Ketoacids	04.00		2.250	16.80 (14.70)
Biochemical tests: Faeces					
4339	Chloride	04.00		2.590	19.30 (17.00)
4343	Fat: Qualitative	04.00		3.150	23.50 (20.60)
4345	Fat: Quantitative	04.00		22.050	164.60 (144.40)
4347	Ph	04.00		0.900	6.72 (5.90)
4351	Occult blood: Chemical test	04.00		2.250	16.80 (14.70)
4352	Occult blood: Monoclonal antibodies	04.00		10.000	74.70 (65.50)
4357	Potassium	04.00		3.620	27.00 (23.70)
4358	Sodium	04.00		3.620	27.00 (23.70)
4362	Elastase quantitative ELISA	04.00		47.000	350.90 (307.90)
4363	Stercobilinogen: Quantitative	04.00		6.750	50.40 (44.20)
Biochemical tests: Miscellaneous					
4366	Porphyryn screen qualitative: Urine, stool, red blood cells: Each	04.00		5.000	37.30 (32.80)
4367	Porphyryn qualitative analysis by TLC: Urine, stool, red blood cells: Each	04.00		20.000	149.30 (131.00)
4368	Porphyryn: Total quantisation: Urine, stool, red blood cells: Each	04.00		20.000	149.30 (131.00)
4369	Porphyryn quantitative analysis by TLC/HPLC: Urine, stool, red blood cells: Each	04.00		30.000	224.00 (196.50)
4370	Drug level in biological fluid: Monoclonal immunological	04.00		12.400	92.60 (81.20)
4371	Amylase in exudate	04.00		5.180	38.70 (33.90)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
4372	Fluoride in biological fluids and water	04.00		15.620	116.60 (102.30)
4374	Trace metals in biological fluid: Atomic absorption	04.00		18.130	135.40 (118.80)
4375	Calcium in fluid: Spectrophotometric	04.00		3.620	27.00 (23.70)
4376	Calcium in fluid: Atomic absorption	04.00		7.250	54.10 (47.50)
4377	Gallstone analysis: (Bilirubin, Ca, P, Oxalate, Cholesterol)	04.11		21.880	163.40 (143.30)
4380	Lecithin in amniotic fluid: L/S ratio	04.00		27.000	201.60 (176.90)
4390	Foam test: Amniotic fluid	04.00		3.150	23.50 (20.60)
4391	Renal calculus: Chemistry	04.00		5.400	40.30 (35.40)
4392	Renal calculus: Crystallography	04.00		16.250	121.30 (106.40)
4395	Sweat: Sodium	04.00		3.620	27.00 (23.70)
4396	Sweat: Potassium	04.00		3.620	27.00 (23.70)
4397	Sweat: Chloride	04.00		2.590	19.30 (17.00)
4399	Sweat collection by iontophoresis (excluding collection material)	04.00		4.500	33.60 (29.50)
4400	Tryptophane loading test	04.00		22.050	164.60 (144.40)
Cerebrospinal fluid					
4401	Cell count	04.00		3.450	25.80 (22.60)
4407	Cell count, protein, glucose and chloride	04.00		7.650	57.10 (50.10)
4409	Chloride	04.00		2.590	19.30 (17.00)
4416	Sodium	04.00		3.620	27.00 (23.70)
4417	Protein: Qualitative	04.00		0.900	6.72 (5.90)
4419	Protein: Quantitative	04.00		3.110	23.20 (20.40)
4421	Glucose	04.00		3.620	27.00 (23.70)
4423	Urea	04.00		3.620	27.00 (23.70)
4425	Protein electrophoresis	04.00		12.600	94.10 (82.50)
RNA/DNA based tests and andrology					
RNA/DNA based tests and andrology: RNA/DNA based tests					
4430	Recombinant DNA technique	04.00		25.000	186.70 (163.80)
4431	Ribosomal RNA targeting for bacteriological identification	04.00		35.000	261.30 (229.30)
4432	Ribosomal RNA amplification for bacteriological identification	04.00		75.000	560.00 (491.30)
4433	Bacteriological DNA identification (LCR)	04.00		25.000	186.70 (163.80)
4434	Bacteriological DNA identification (PCR)	04.00		75.000	560.00 (491.30)
RNA/DNA based tests and andrology: Andrology					
4435	Mixed antiglobulin reaction: Semen	04.00		6.600	49.30 (43.20)
4436	Friberg test: Semen	04.00		14.500	108.30 (95.00)
4437	Kremer test: Semen	04.00		3.600	26.90 (23.60)
4440	Semen analysis: Cell count	04.00		7.650	57.10 (50.10)
4441	Semen analysis: Cytology	04.00		7.200	53.80 (47.20)
4442	Semen analysis: Viability + motility - 6 hours	04.00		6.000	44.80 (39.30)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
4443	Semen analysis: Supravital stain	04.00		5.440	40.60 (35.60)
4445	Seminal fluid: Alpha glucosidase	04.00		20.000	149.30 (131.00)
4446	Seminal fluid fructose	04.00		3.150	23.50 (20.60)
4447	Seminal fluid: Acid phosphatase	04.00		5.180	38.70 (33.90)
Immunology					
4448	HCG: Latex agglutination: Qualitative (side room)	04.00		4.000	29.90 (26.20)
4449	HCG: Latex agglutination: Semi-quantitative (side room)	04.00		9.310	69.50 (61.00)
4450	HCG: Monoclonal immunological: Qualitative	04.00		10.000	74.70 (65.50)
4451	HCG: Monoclonal immunological: Quantitative	04.00		12.400	92.60 (81.20)
4455	Anti IgE receptor antibody test (10 samples and dilution)	04.00		161.560	1206.40 (1058.20)
4456	Eosinophil cationic protein	04.00		27.810	207.70 (182.20)
4457	Mast cell tryptase	04.00		96.870	723.30 (634.50)
4458	Micro-albuminuria: Radio-isotope method	04.00		12.420	92.70 (81.40)
4459	Acetyl choline receptor antibody	04.00		158.120	1180.70 (1035.70)
4460	CA-199 tumour marker	04.00		20.000	149.30 (131.00)
4462	CA-125 tumour marker	04.00		20.000	149.30 (131.00)
4463	C6 complement functional essay	04.00		45.000	336.00 (294.80)
4466	Beta-2-microglobulin	04.00		12.420	92.70 (81.40)
4468	CA-549	04.00		20.000	149.30 (131.00)
4469	Tumour markers: Monoclonal immunological (each)	04.00		20.000	149.30 (131.00)
4470	CA-195 tumour marker	04.00		20.000	149.30 (131.00)
4471	Carcino-embryonic antigen	04.00		20.000	149.30 (131.00)
4477	Neuron specific enolase	04.00		20.000	149.30 (131.00)
4479	Vitamin B12-absorption: Shilling test	04.00		11.700	87.40 (76.60)
4480	Serotonin	04.00		18.750	140.00 (122.80)
4482	Free thyroxine (FT4)	04.00		17.480	130.50 (114.50)
4485	Insulin	04.00		12.420	92.70 (81.40)
4490	Releasing hormone response	04.00		50.000	373.40 (327.50)
4491	Vitamin B12	04.00		12.420	92.70 (81.40)
4492	Vitamin D3: Calcitriol (RIA)	04.00		75.000	560.00 (491.30)
4493	Drug concentration: Quantitative	04.00		12.420	92.70 (81.40)
4494	Free hormone assay	04.00		17.480	130.50 (114.50)
4495	Growth hormone	04.00		12.420	92.70 (81.40)
4496	Hormone concentration: Quantitative	04.00		12.420	92.70 (81.40)
4497	Carbohydrate deficient transferrin	04.00		29.060	217.00 (190.30)
4499	Cortisol	04.00		12.420	92.70 (81.40)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
4500	DHEA sulphate	04.00		12.420	92.70 (81.40)
4501	Testosterone	04.00		12.420	92.70 (81.40)
4502	Free testosterone	04.00		17.480	130.50 (114.50)
4503	Oestradiol	04.00		12.420	92.70 (81.40)
4505	Oestriol	04.00		10.800	80.60 (70.70)
4506	Multiple antigen specific IgE screening test for Atopy	04.00		37.260	278.20 (244.10)
4507	Thyrotropin (TSH)	04.00		19.600	146.40 (128.40)
4508	Combined antigen specific IgE	04.00		24.480	182.80 (160.30)
4509	Free tri-iodothyronine (FT3)	04.00		17.480	130.50 (114.50)
4512	Parathormone	04.00		17.080	127.50 (111.90)
4513	IgE: Total	04.00		12.420	92.70 (81.40)
4514	Antigen specific IgE	04.00		12.420	92.70 (81.40)
4515	Aldosterone	04.00		12.420	92.70 (81.40)
4516	Follitropin (FSH)	04.00		12.420	92.70 (81.40)
4517	Lutropin (LH)	04.00		12.420	92.70 (81.40)
4519	Prostate specific antigen	04.00		14.490	108.20 (94.90)
4520	17 Hydroxy progesterone	04.00		12.420	92.70 (81.40)
4521	Progesterone	04.00		12.420	92.70 (81.40)
4522	Alpha-feto protein	04.00		12.420	92.70 (81.40)
4523	ACTH	04.00		21.740	162.30 (142.40)
4526	Sex hormone binding globulin	04.00		12.420	92.70 (81.40)
4527	Gastrin	04.00		12.420	92.70 (81.40)
4528	Ferritin	04.00		12.420	92.70 (81.40)
4529	Anti-DNA antibodies	04.00		12.420	92.70 (81.40)
4530	Antiplatelet antibodies	04.00		15.300	114.20 (100.20)
4531	Hepatitis: Per antigen or antibody	04.00		14.490	108.20 (94.90)
4532	Transcobalamine	04.00		12.420	92.70 (81.40)
4533	Folic acid	04.00		12.420	92.70 (81.40)
4534	Prostatic acid phosphatase	04.00		12.420	92.70 (81.40)
4536	Erythrocyte folate	04.00		17.480	130.50 (114.50)
4537	Prolactin	04.00		12.420	92.70 (81.40)
4540	HCG: Quantitative as used for Down's screen	04.00		15.000	112.00 (98.30)
Clinical pathology: Miscellaneous					
4544	Attendance in theatre	04.00		27.000	201.60 (176.90)
Exfoliative cytology					
4561	Sputum, all body fluids and tumour aspirates: First unit	04.00		13.400	115.40 (101.20)

Code	Description	Ver	Add	Medical Technology	
				RVU	Fee
4563	Sputum, all body fluids and tumour aspirates: Each additional unit	04.00		7.800	67.20 (58.90)
4564	Performance of fine-needle aspiration for cytology	04.00		15.000	129.20 (113.30)
4565	Examination of fine needle aspiration in theatre	04.00		90.000	775.00 (679.80)
4566	Vaginal or cervical smears, each	04.00		11.000	94.70 (83.10)
Human Genetics					
Cytogenetic					
4750	Cell culture: Lymphocytes, cord blood	04.00		15.000	114.70 (100.60)
4751	Cell culture: Amniotic fluid, fibroblasts, leukaemia bloods, bone marrow, other specialised cultures	04.00		45.000	344.10 (301.80)
4752	Cell culture: Chorionic villi	04.00		60.000	458.80 (402.40)
4754	Cytogenetic analysis: Lymphocytes: Idiograms, karyotyping, one staining technique	04.00		135.000	1032.20 (905.40)
4755	Cytogenetic analysis: Amniotic fluid, fibroblasts, chorionic villi, products of conception, bone marrow, leukaemia bloods: Idiograms, karyotyping, one staining technique	04.00		270.000	2064.40 (1810.90)
4757	Specified additional analysis e.g. mosaicism, Fanconi anaemia, Fra X, additional staining techniques	04.00		70.000	535.20 (469.50)
4760	FISH procedure, including cell culture	04.00		115.000	879.30 (771.30)
4761	FISH analysis per probe system	04.00		35.000	267.60 (234.70)
DNA-testing					
4763	Blood: DNA extraction	04.00		45.000	344.10 (301.80)
4764	Blood: Genotype per person: Southern blotting	04.00		89.000	680.50 (596.90)
4765	Blood: Genotype per person: PCR	04.00		60.000	458.80 (402.40)
4767	Prenatal diagnosis: Amniotic fluid or chorionic tissue: DNA extraction	04.00		90.000	688.10 (603.60)
4768	Prenatal diagnosis: Amniotic fluid or chorionic tissue: Genotype per person: Southern blotting	04.00		188.000	1437.40 (1260.90)
4769	Prenatal diagnosis: Amniotic fluid or chorionic tissue: Genotype per person: PCR	04.00		120.000	917.50 (804.80)

MENTAL HEALTH INSTITUTIONS

Mental Health Institutions 2009

NATIONAL REFERENCE PRICE LIST IN RESPECT OF MENTAL HEALTH CARE FACILITIES 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

A	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
C	All accounts submitted by mental health institutions 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.	04.00
D	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 rehabilitation hospital concerned.	04.00
E	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
E.3.3	Mental Institutions refers to all institutions registered with the Department of Health in terms of the Mental Health Care Act 17 of 2002 having practice code numbers commencing with the digits 55.	06.04
F	Accommodation fees includes the services listed below:	04.00
A.	The minimum services that are required are items 3, 5 and 6.	
B.	If managed care organisations or medical schemes request any of the other services included in this list, no additional charge may be levied by the hospital.	
1	Pre-authorisation (up to the date of admission) of:	
	· length of stay	
	· level of care	
	· theatre procedures	
2	Provision of ICD-10 and CPT-4 codes when requesting pre-authorisation	
3	Notification of admission	
4	Immediate notification of changes to:	
	· length of stay	
	· level of care	
	· theatre procedures	
5	Reporting of length of stay and level of care	
	· In standard format for purposes of creating a minimum dataset of information to be used in defining an alternative reimbursement system.	
6	Discharge ICD-10 and CPT-4 coding	
	· In standard format for purposes of creating a minimum dataset of information to be used in defining an alternative reimbursement system.	
	· Including coding of complications and co-morbidity. To be done as accurately as practically possible by the hospital.	
7	Case management by means of standard documentation and liaison between scheme and hospital appointed case managers	
	· Liaison means communication and sharing of information between case managers, but does not include active case management by the hospital.	

SCHEDULE**8 INSTITUTIONS REGISTERED IN TERMS OF THE MENTAL HEALTH ACT 1973 WITH A PRACTICE NUMBER COMMENCING WITH "55"**

Code	Description	Ver	Add	Mental Health Institutions	
				RVU	Fee
004	General ward fee: with overnight stay	04.00		10.000	928.40 (814.40)
005	General ward fee: without overnight stay	04.00		7.355	682.80 (599.00)
006	General ward fee: under 5 hours stay	04.00		3.808	353.50 (310.10)

Code	Description	Ver	Add	Mental Health Institutions	
				RVU	Fee
045	Ward and dispensary drugs. The amount charged in respect of dispensed medicines and scheduled substances shall not exceed the limits prescribed in the Regulations Relating to a Transparent Pricing System for Medicines and Scheduled Substances, dated 30 April 2004, made in terms of the Medicines and Related Substances Act, 1965 (Act No 101 of 1965). In relation to other ward stock (materials and/or medicines), the amount charged shall not exceed the net acquisition price (inclusive of VAT) or the exit price as determined in terms of Act No 101 of 1965.	05.03		-	-
055	Electroconvulsive therapy (ECT) (No theatre fee chargeable)	04.00		4.997	463.90 (406.90)
231	Monitors	06.04		1.463	135.80 (119.10)
273	To take out. Dispensed items including ampoules, over the counter and proprietary items issued to patients. All items must be shown on accounts. Dispensed items including ampoules, over the counter and proprietary items issued to patients. The same principles as in code 045 apply.	04.00		-	-

NATUROPATHY

Naturopaths 2009

NATIONAL REFERENCE PRICE LIST FOR SERVICES BY NATUROPATHS 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.

RULES

01	All accounts must be presented with the following information clearly stated: - name of naturopath - qualifications of the naturopath - BHF practice number - Postal address and telephone number - Date on which the service(s) were provided - Applicable item codes - The nature of the treatment - The surname and initials of the member - The first name of the patient - The name of the medical scheme - The membership number of the patient - The name and practice number of the referring practitioner	09.00
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ITEMS**1. Consultations**

Code	Description	Ver	Add	Naturopathy	
				RVU	Fee
10010	Consultation (initial or follow up). Duration 5 - 15 mins	09.00		10.000	-
10020	Consultation (initial or follow up). Duration 16 - 30 mins	09.00		22.500	-
10090	Consultation, each additional full 15 mins, to a maximum of 60 mins	09.00		15.000	-

2. Diagnostic Procedures

20010	Vega testing	09.00		15.000	-
20020	Life blood testing	09.00		15.000	-

3. Treatment Procedures

30010	Hydrotherapy	09.00		30.000	-
30011	Hydrotherapy, each additional full 15 mins, after initial 30 mins, to a maximum of 60 mins	09.00		15.000	-
30020	Electrotherapy	09.00		15.000	-
30021	Electrotherapy, each additional full 15 min, after initial 15 min, to a maximum of 60 mins	09.00		15.000	-
30030	Vibration therapy	09.00		15.000	-
30031	Vibration therapy, each additional full 15 min, after initial 15 min, to a maximum of 60 mins	09.00		15.000	-
30040	Light therapy	09.00		15.000	-
30041	Light therapy, each additional full 15 min, after initial 15 min, to a maximum of 60 mins	09.00		15.000	-
30050	Thermal therapy	09.00		15.000	-
30051	Thermal therapy, each additional full 15 min, after initial 15 min, to a maximum of 60 mins	09.00		15.000	-
30060	Massage therapy	09.00		30.000	-
30061	Massage therapy, each additional full 15 min, after initial 30 mins, to a maximum of 60 mins	09.00		15.000	-
30070	Exercise therapy	09.00		15.000	-
30071	Exercise therapy, each additional full 15 min, after initial 15 min, to a maximum of 60 mins	09.00		15.000	-
30080	Reflex therapy	09.00		15.000	-
30081	Reflex therapy, each additional full 15 min, after initial 15 min, to a maximum of 60 mins	09.00		15.000	-

4. Medicines and Materials

40100	Proprietary Naturopathic medicine, appropriate NAPPI codes to be charged	09.00		-	-
40200	Non-proprietary Naturopathic medicine	09.00		-	-
40300	Naturopathic ointments / creams	09.00		-	-
40400	Naturopathic syrups and tonics	09.00		-	-

OCCUPATIONAL AND ARTS THERAPY

Occupational and Art Therapy 2009

NATIONAL REFERENCE PRICE LIST FOR SERVICES BY OCCUPATIONAL AND ART THERAPISTS, 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.

REGULATIONS DEFINING THE SCOPE OF THE PROFESSION OF OCCUPATIONAL THERAPY (R2145 - 31 July 1992)**GENERAL RULES**

006	Where emergency treatment is provided: a. during working hours, and the provision of such treatment requires the practitioner to leave her or his practice to attend to the patient in hospital; or b. after working hours the fee for such visits shall be the total fee plus 50%. For purposes of this rule: a. "emergency treatment" means a bona fide, justifiable emergency occupational therapy procedure, where failure to provide the procedure immediately would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part, or would place the person's life in serious jeopardy; and b. "working hours" means 8h00 to 17h00, Monday to Friday. Modifier 0006 must be quoted after the appropriate code number(s) to indicate that this rule is applicable. Rule 006 does not apply to art therapy.	05.02
008	The provision of assistive devices shall be charged (exclusive of VAT) at net acquisition price plus – - 26% of the net acquisition price where the net acquisition price of that appliance is less than one hundred rands; - a maximum of twenty six rands where the net acquisition price of that appliance is greater than or equal to one hundred rands. Modifier 0008 must be quoted after the appropriate code numbers to show that this rule is applicable.	04.00
009	Materials used in the construction of orthoses or pressure garments shall be charged (exclusive of VAT) at net acquisition price plus – - 26% of the net acquisition price where the net acquisition price of that material is less than one hundred rands; - a maximum of twenty six rands where the net acquisition price of that material is greater than or equal to one hundred rands. Modifier 0009 must be quoted after the appropriate code numbers to show that this rule is applicable. Rule 009 does not apply to art therapy.	04.00
010	Materials used in treatment shall be charged (exclusive of VAT) at net acquisition price plus – - 26% of the net acquisition price where the net acquisition price of that material is less than one hundred rands; - a maximum of twenty six rands where the net acquisition price of that material is greater than or equal to one hundred rands. Modifier 0010 must be quoted after the appropriate code numbers to show that this rule is applicable.	04.00
011	Where the therapist performs treatments away from the treatment rooms; travelling costs to be charged according to AA rates e.g. for domiciliary treatments or treatments in nursing homes. Modifier 0011 must be quoted after the appropriate code numbers to show that this rule is applicable. Please note that although only some medical schemes accept responsibility for the payment of transport expenses, others do so in exceptional cases only.	04.00
012	Every 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: i The name and practice number of the consulting occupational or art therapist. ii The name of the member. iii The name of the patient. iv The name of the medical scheme. v The membership number of the patient. vi The nature of the treatment. vii The date on which the service was rendered. viii The relevant diagnostic codes and NHRPL item code numbers relating to the health service rendered.	05.02

Code	Description	Ver	Add	Occupational Therapy		Arts Therapy	
				RVU	Fee	RVU	Fee
013	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. Please note: In the case of occupational therapy, a code will only be required when a standard proprietary (off the shelf) product is used. When a splint or support is made by the occupational therapist using or modifying one or more components, a code cannot accurately identify this non-standard product. Please refer to annexure itemising the most commonly made non-standard products used in occupational therapy and bill accordingly. The Occupational Therapy Association of S A has made available a generic list of non-proprietary splints and pressure garments commonly made by practitioners. The type of materials used to manufacture these products is at the discretion of the practitioner concerned. Price of splints and pressure garments may vary. See Annexures A & B.					04.00	
Modifiers							
0006	Add 50% of the total fee for the procedure. Modifier 0006 does not apply to art therapy.					04.00	
0008	Assistive devices to be charged (exclusive of VAT) at net acquisition price plus – - 26% of the net acquisition price where the net acquisition price of that appliance is less than one hundred rands; - a maximum of twenty six rands where the net acquisition price of that appliance is greater than or equal to one hundred rands.					04.00	
0009	Materials used for orthoses or pressure garments to be charged (exclusive of VAT) at net acquisition price plus – - 26% of the net acquisition price where the net acquisition price of that material is less than one hundred rands; - a maximum of twenty six rands where the net acquisition price of that material is greater than or equal to one hundred rands. See Annexures A & B for non-standard products. Modifier 0009 does not apply to art therapy.					05.02	
0010	Materials used in treatment to be charged (exclusive of VAT) at net acquisition price plus – - 26% of the net acquisition price where the net acquisition price of that material is less than one hundred rands; - a maximum of twenty six rands where the net acquisition price of that material is greater than or equal to one hundred rands.					04.00	
0011	Travelling costs according to AA rates. Please note that although only some medical schemes accept responsibility for the payment of transport expenses, others do so in exceptional cases only.					04.00	
0021	Services rendered to hospital inpatients: Quote modifier 0021 on all accounts for services performed on hospital inpatients.					04.00	
ITEMS							
1 PROCEDURES OF INTERVIEWING, GUIDANCE AND CONSULTANCY							
Code	Description	Ver	Add	Occupational Therapy		Arts Therapy	
				RVU	Fee	RVU	Fee
108	Interview, guidance or consultation: 30 minute duration.	06.02		21.250	131.70 (115.50)	21.250	72.10 (63.20)
109	Interview, guidance or consultation. Each additional 15 mins. A maximum of four instances of this code may be charged per session.	06.02	+	10.630	65.90 (57.80)	10.625	36.00 (31.60)
	Time based items in this section exclude time spent on procedures charged in addition to the consultation	05.02					
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					
110	Reports. To be used to motivate for therapy and/or give a progress report and/or a pre-authorisation report, where such a report is specifically required by the medical scheme.	05.02		16.500	102.20 (89.70)	22.140	75.10 (65.90)
501	Treatment in nursing home or other health care facilities. Relevant fee plus (once per day)	09.00	+	10.000	62.00 (54.40)	10.000	33.90 (29.80)
503	Domiciliary treatments: Relevant fee plus	09.00	+	20.000	123.90 (108.70)	20.000	67.80 (59.50)
2 PROCEDURES OF INITIAL EVALUATION TO DETERMINE THE TREATMENT.							
201	Observation and screening.	04.00		7.500	46.50 (40.80)	10.000	33.90 (29.80)
203	Specific evaluation for a single aspect of dysfunction (Specify which aspect).	04.00		7.500	46.50 (40.80)	10.000	33.90 (29.80)
205	Specific evaluation of dysfunction involving one part of the body for a specific functional problem (Specify part and aspects evaluated)	04.00		22.500	139.40 (122.30)	30.000	101.80 (89.30)
207	Specific evaluation for dysfunction involving the whole body (Specify condition and which aspects evaluated).	04.00		45.000	278.80 (244.60)	60.000	203.50 (178.50)
209	Specific in depth evaluation of certain functions affecting the total person (Specify the aspects assessed).	04.00		75.000	464.70 (407.60)	100.000	339.20 (297.50)

Code	Description	Ver	Add	Occupational Therapy		Arts Therapy	
				RVU	Fee	RVU	Fee
211	Comprehensive in depth evaluation of the total person (Specify aspects assessed)	04.00		105.000	650.60 (570.70)	140.000	474.90 (416.60)
Measurement for designing.							
213	Measurement for designing a static or dynamic orthosis	09.00		7.500	46.50 (40.80)		
217	A pressure garment for one limb.	04.00		7.500	46.50 (40.80)		
219	A pressure garment for one hand.	04.00		7.500	46.50 (40.80)		
221	A pressure garment for the trunk.	04.00		7.500	46.50 (40.80)		
223	A pressure garment for the face (chin strap only).	04.00		7.500	46.50 (40.80)		
225	A pressure garment for the face (full face mask).	04.00		7.500	46.50 (40.80)		
	The whole body or part thereof will be the sum total of the parts	04.00					
227	Specific built-in musical aids	05.03				10.000	33.90 (29.80)
3 PROCEDURES OF THERAPY.							
301	Group treatment in a task-centered activity, per patient (Treatment time 60 minutes or more).	04.00		10.000	62.00 (54.40)	8.840	48.20 (42.30)
303	Placement of a patient in an appropriate treatment situation requiring structuring the environment, adapting equipment and positioning the patient. This does not require individual attention for the whole treatment session, per patient)	04.00		15.000	92.90 (81.50)	10.000	33.90 (29.80)
305	Groups directed to achieve common aims, per patient) (Treatment time 60 minutes or more).	04.00		20.000	123.90 (108.70)	16.500	90.00 (79.00)
307	Simultaneous treatment with two to four patients, each with specific problems, utilising individual activities, per patient (Treatment time 60 minutes or more)	04.00		20.000	123.90 (108.70)	20.000	67.80 (59.50)
308	Simultaneous treatment with two to four neuro-behavioural and stress related conditions or severe head injury patients, each with specific problems, utilising individual activities, per patient (Treatment time 90 minutes or more)	04.00		30.000	185.90 (163.10)	30.000	101.80 (89.30)
	Individual and undivided attention during treatment sessions utilising specific activity and/or techniques in an integrated treatment session	04.00					
309	On level one (15 minutes).	04.00		10.000	62.00 (54.40)	10.000	54.60 (47.90)
311	On level two (30 minutes).	04.00		20.000	123.90 (108.70)	20.000	109.10 (95.70)
313	On level three (45 minutes).	04.00		30.000	185.90 (163.10)	30.000	163.70 (143.60)
315	On level four (60 minutes).	04.00		40.000	247.80 (217.40)	40.000	218.20 (191.40)
317	On level five (90 minutes).	04.00		50.000	309.80 (271.80)	50.000	272.80 (239.30)
319	On level six (120 minutes).	04.00		60.000	371.80 (326.10)	60.000	327.40 (287.20)
4 PROCEDURES REQUIRED TO PROMOTE TREATMENT.							
401	Recommendations as regards to assistive devices, environmental adaptations, alternative/compensatory methods, handling the patient	04.00		15.000	92.90 (81.50)	10.000	54.60 (47.90)
	Designing and constructing a custom-made adaptation, assistive device, splint or simple pressure garment for treatment in a task-centered activity (specify the adaptation, assistive device, splint or simple pressure garment)	04.00					
403	On level one.	04.00		10.000	62.00 (54.40)	10.000	54.60 (47.90)
405	On level two.	04.00		20.000	123.90 (108.70)	20.000	109.10 (95.70)
407	On level three.	04.00		30.000	185.90 (163.10)	30.000	163.70 (143.60)
409	On level four.	04.00		40.000	247.80 (217.40)	40.000	218.20 (191.40)
411	On level five.	04.00		50.000	309.80 (271.80)	50.000	272.80 (239.30)
413	On level six.	04.00		60.000	371.80 (326.10)	60.000	327.40 (287.20)
415	Designing and constructing a static orthosis.	04.00		60.000	371.80 (326.10)		
417	Designing and constructing a dynamic orthosis.	04.00		120.000	743.50 (652.20)		
	Designing and constructing pressure garment for:	04.00					

Code	Description	Ver	Add	Occupational Therapy		Arts Therapy	
				RVU	Fee	RVU	Fee
419	Limb.	04.00		60.000	371.80 (326.10)		
421	Face (chin strap only).	04.00		45.000	278.80 (244.60)		
423	Face (full face mask).	04.00		60.000	371.80 (326.10)		
425	Trunk.	04.00		90.000	557.60 (489.20)		
427	Hand.	04.00		90.000	557.60 (489.20)		
	The whole body or part thereof will be the sum total of the parts for the first garment and 75% of the fee for any additional garments made on the same pattern	04.00					
431	Planning and preparing in depth home programme on a monthly basis.	04.00		90.000	557.60 (489.20)	120.000	407.00 (357.10)
434	Hiring equipment: 1% of the current replacement value of the equipment per day. Total charge not to exceed 50% of replacement value. Description of equipment to be supplied.	05.03					
	Payment of this item is at the discretion of medical scheme concerned, and should be considered in instances where cost savings can be achieved. By prior arrangement with the medical scheme.	05.03					
List of splints and pressure garments exempted from NAPPI codes							
Annexure A							
	Numbers and names of splints to be used with modifier 0009						04.00
701	Static finger extension/flexion splint	04.11		-	-		
702	Dynamic finger extension/flexion	04.11		-	-		
703	Buddy strap	04.00		-	-		
704	DIP/PIP flexion strap	04.00		-	-		
705	MP, PIP, DIP flexion strap	04.00		-	-		
706	Hand based static finger extension/flexion	04.00		-	-		
707	Hand based static thumb extension/flexion/opposition/ abduction	04.00		-	-		
708	Hand based dynamic finger flexion/extension	04.00		-	-		
709	Hand based dynamic thumb flexion/extension/opposition/abduction	04.00		-	-		
710	Static wrist extension/flexion	04.00		-	-		
711	Dynamic wrist extension/flexion	04.00		-	-		
712	Flexion glove	04.00		-	-		
713	Forearm based dynamic finger flexion/extension	04.00		-	-		
714	Forearm based dorsal protection	04.00		-	-		
715	Forearm based volar resting	04.00		-	-		
716	Static elbow extension/flexion	04.00		-	-		
717	Dynamic elbow flexion/extension splint	04.00		-	-		
718	Shoulder abduction splint	04.00		-	-		
719	Static rigid neck splint	04.00		-	-		
720	Static soft neck splint/brace	04.00		-	-		
721	Static knee extension	04.00		-	-		
722	Static foot dorsiflexion	04.00		-	-		
Annexure B							
	Numbers and names of pressure garments to be used with modifier 0009						04.00
801	Glove to wrist	04.00		-	-		
802	Glove to elbow	04.00		-	-		
803	Gauntlet (Glove with palm and thumb only)	04.00		-	-		
804	Sleeve: Upper/forearm	04.00		-	-		
805	Sleeve: full	04.00		-	-		
806	Vest + sleeves	04.00		-	-		
807	Sleeveless vest	04.00		-	-		
808	Upper leg	04.00		-	-		
809	Lower leg	04.00		-	-		
810	Full leg	04.00		-	-		
811	Pants (trunk and full legs)	04.00		-	-		
812	Briefs	04.00		-	-		
813	Anklet	04.00		-	-		
814	Knee length stocking	04.00		-	-		
815	Chin strap	04.00		-	-		
816	Full face mask	04.00		-	-		
817	Neck only	04.00		-	-		
818	Finger sock	04.00		-	-		

Code	Description	Ver	Add	Occupational Therapy		Arts Therapy	
				RVU	Fee	RVU	Fee
Annexure C							
	List of materials used in treatment under modifier 0010						04.00
901	Therapeutic putty	04.00		-	-		
902	Wood, leather, sisal	04.00		-	-		
903	Sponge	04.00		-	-		
904	Elastonet	04.00		-	-		
905	Silicon gel sheeting	04.00		-	-		
Annexure D							
	Assistive devices made by the therapist her/himself to be used with modifier 0008						04.00
1001	Hip abduction cushion	04.00		-	-		
1002	Sponge on a stick	04.00		-	-		
1003	Hand grips (for utensils)	04.00		-	-		
1004	Bath bench	04.00		-	-		
1005	Bath seat	04.00		-	-		
1006	Transfer board	04.00		-	-		
1007	Plate surround	04.00		-	-		
1008	Wheelchair strap	04.00		-	-		

OPTOMETRY

Optometrists 2009

NATIONAL REFERENCE PRICE LIST FOR SERVICES BY OPTOMETRISTS EFFECTIVE FROM 1 JANUARY 2009				
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RULES				
MODIFIERS				
ITEMS				
Consultations:				
Code	Description	Ver	Add	Optometry
				RVU Fee
11001	Optometric Examination (incl Tonometry)	06.02		30.000 216.90 (190.30)
11081	Optometric Examination & Visual Fields	06.02		35.000 253.10 (222.00)
11021	Optometric-Re-examination	06.02		20.000 144.60 (126.80)
11041	Consultation :15 min. without performing Optometric Exam.	06.02		15.000 108.50 (95.10)
Diagnostic Procedures:				
11303	Cycloplegic Refraction	06.02		15.000 108.50 (95.10)
11323	Preferential Looking (Infants < Two Years)	06.02		15.000 108.50 (95.10)
11346	Corneal Topography	06.02		20.000 144.60 (126.80)
11356	Gonioscopy	06.02		10.000 72.30 (63.40)
11366	Dilated Fundus Examination / BIO	06.02		10.000 72.30 (63.40)
11423	Visual Field	06.02		15.000 108.50 (95.10)
11443	Threshold Visual Fields	06.02		25.000 180.80 (158.60)
11246	Revaluation of Colour Vision	06.02		15.000 108.50 (95.10)
11265	Evaluation of Contrast Sensitivity	06.02		10.000 72.30 (63.40)
11283	Evaluation of Lacrimal System	06.02		10.000 72.30 (63.40)
11604	Photography of Anterior Segment	06.02		10.000 72.30 (63.40)
11624	Photography of Fundus	06.02		10.000 72.30 (63.40)
11644	Photographic Materials	06.02		- -
Procedures done in isolation				
11141	Evaluation of Refractive Status	06.02		20.000 144.60 (126.80)
11161	Screening for Pathology	06.02		15.000 108.50 (95.10)
11183	Keratometry	06.02		10.000 72.30 (63.40)
11202	Tonometry (Non-contact)	06.02		10.000 72.30 (63.40)
11212	Tonometry (Aplanation)	06.02		10.000 72.30 (63.40)
11221	Screening of Colour Vision	06.02		5.000 36.20 (31.70)
11402	Screening of Visual Fields	06.02		10.000 72.30 (63.40)
12503	Assessment of CL Related Problems - Monocular	06.02		10.000 72.30 (63.40)
12523	Assessment of CL Related Problems - Binocular	06.02		15.000 108.50 (95.10)

Code	Description	Ver	Add	Optometry	
				RVU	Fee
12533	CL Instruction	06.02		15.000	108.50 (95.10)
Dispensing Fees					
11501	Dispensing Fee - Single Vision	06.02		5.000	36.20 (31.70)
11521	Dispensing Fee - Bifocals	06.02		10.000	72.30 (63.40)
11541	Dispensing Fee - Varifocals	06.02		10.000	72.30 (63.40)
11707	Night/Weekend/Public Holiday Visit	06.02		15.000	108.50 (95.10)
11729	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).	06.02		-	-
11809	Screening School (per hour)	06.02		60.000	433.80 (380.50)
11829	Screening Industrial (per hour)	06.02		60.000	433.80 (380.50)
Contact Lens Procedures					
12012	Basic - per visit	06.02		30.000	216.90 (190.30)
12032	Complex - per visit	06.02		30.000	216.90 (190.30)
12052	Advanced - per visit	06.02		30.000	216.90 (190.30)
12072	CL Dispensing and/or Assessment	06.02		15.000	108.50 (95.10)
Binocular Vision/Orthoptics					
13003	Evaluation of Binocular Instability Simple Case	06.02		30.000	216.90 (190.30)
13023	Evaluation of Binocular Instability Complex Case	06.02		60.000	433.80 (380.50)
Visually Related Disorders					
13105	Evaluation of Visually Related Learning Disorders	06.02		90.000	650.70 (570.80)
13125	Evaluation of Eye Movements (e.g. Visigraph)	06.02		30.000	216.90 (190.30)
Colorimetry Codes					
13509	Screening - Rate of Reading Test	06.02		15.000	108.50 (95.10)
13529	Evaluation - Ortho-Didactical Reading Skills	06.02		45.000	325.40 (285.40)
13549	Evaluation - Intuitive Colorimetry	06.02		60.000	433.80 (380.50)
Visual Therapy/Orthoptics Training					
13403	Training Home Therapy Instruction	06.02		10.000	72.30 (63.40)
13423	Training Individual (per 15 minutes)	06.02		15.000	108.50 (95.10)
13445	Training Individual (per 30minutes)	06.02		30.000	216.90 (190.30)
13463	Training Group per Patient (per 15 minutes)	06.02		3.750	27.10 (23.80)
13489	Training Away from Practice	06.02		30.000	216.90 (190.30)
Low Vision Assessment & Training (per Half hour)					
16013	Simple LV Assessment	06.02		30.000	216.90 (190.30)
16033	Complex LV Assessment	06.02		30.000	216.90 (190.30)
16053	Advanced LV Assessment	06.02		30.000	216.90 (190.30)
16073	Simple LV Training	06.02		30.000	216.90 (190.30)
16093	Complex LV Training	06.02		30.000	216.90 (190.30)
16113	Advanced LV Training	06.02		30.000	216.90 (190.30)
Sports Vision - in Office Procedures					
14008	Screening Sports Vision Individual	06.02		20.000	144.60 (126.80)

Code	Description	Ver	Add	Optometry	
				RVU	Fee
14218	Evaluation Sports Vision Individual	06.02		45.000	325.40 (285.40)
14238	Training Sports Vision Individual (per 15 minutes)	06.02		15.000	108.50 (95.10)
	Group fees are per individual member of the group	06.02			
14268	Screening Sports Vision Group	06.02		3.750	27.10 (23.80)
14278	Evaluation Sports Vision Group	06.02		8.750	63.30 (55.50)
14288	Training Sports Vision Group (per 15 minutes)	06.02		3.750	27.10 (23.80)
Sports Vision - Procedures done in the Field					
14309	Screening Sports Vision Individual	06.02		30.000	216.90 (190.30)
14319	Evaluation Sports Vision Individual	06.02		60.000	433.80 (380.50)
14329	Training Sports Vision Individual (per 15 minutes)	06.02		15.000	108.50 (95.10)
	Group fees are per individual member of the group	06.02			
14369	Screening Sports Vision Group	06.02		6.250	45.20 (39.60)
14379	Evaluation Sports Vision Group	06.02		12.500	90.40 (79.30)
14389	Training Sports Vision Group (per 15 minutes)	06.02		3.750	27.10 (23.80)
Reports etc					
19001	Report at request of Medical Aid	06.02		15.000	108.50 (95.10)
19021	Report at Patient's request	06.02		25.000	180.80 (158.60)
19081	Confirming Med. Aid Benefit by tel. or fax (per 10 minutes)	06.02		5.000	36.20 (31.70)
Generic Lenses					
40501	Frames	06.02		-	-
70011	Single Vision lens (up to 6.00Sph)	06.02		2.374	195.80 (171.80)
70021	Special Vision High Powers	06.02		5.786	477.30 (418.70)
70712	Bifocal-Round/flat/top Seg 68*28 Seg	06.02		7.567	624.20 (547.60)
75012	Varifocal Distance to near	06.02		11.869	979.10 (858.90)
80011	Single Vision lens	06.02		2.374	195.80 (171.80)
80021	Special Vision High Powers	06.02		5.104	421.10 (369.30)
80812	Bifocal-Round/flat/top Seg 74*28 Seg	06.02		5.727	472.40 (414.40)
85012	Varifocal Distance to near	06.02		11.128	918.00 (805.30)
84000	Varifocal Intermediate to Near	06.05		11.128	918.00 (805.30)
99999	All other codes	06.02		-	-