

HEALTHMAN GASTROENTEROLOGY COSTING GUIDE 2011

COMPARATIVE TARIFFS



Code	Terminology	Average Duration	2011 HMan Tariffs	HMan RCF	2011 GEMS Tariffs	GEMS RCF	2011 Discovery Tariffs	DH RCF	DH Prem A In Hos	DH Prem A Out Hos	DH Prem B	DH Exec Plan	DH Classic Rate	
		Professional	(VAT incl.)		(VAT Incl.)		(VAT incl.)			136%	161%	146%	300%	216%
		Units	R	R	R	R	R	R	R	R	R	R	R	R
Consultations:														
	See the Notes below for All Tariffs													
0109	Hospital follow-up visit	15	451.60	30.107	216.50	14.436	152.90	10.193	207.90	246.20	223.20	458.70	330.30	
0129	Prolonged first/follow-up consultation : 15 min	15	451.60	30.107	216.50	14.436	213.30	14.220	290.10	343.40	311.40	639.90	460.70	
0130	Telephone consultation (all hours)	12	361.30	30.107	259.90	21.655	256.10	21.342	348.30	412.30	373.90	768.30	553.20	
0132	Repeat Script	5	150.50	30.107	72.20	14.436	71.10	14.220	96.70	114.50	103.80	213.30	153.60	
0133	Writing of special motivations	9	271.00	30.107	129.90	14.436	127.90	14.211	173.90	205.90	186.70	383.70	276.30	
0145	Consultation : Away from doctor's room	6	180.60	30.107	86.60	14.436	85.40	14.233	116.10	137.50	124.70	256.20	184.50	
0146	Unscheduled consultation: Emergency (cons.room)	8	240.90	30.107	115.50	14.436	113.70	14.213	154.60	183.10	166.00	341.10	245.60	
0147	Unscheduled consultation:Emergency(not cons.room)	14	421.50	30.107	202.10	14.436	199.10	14.221	270.80	320.60	290.70	597.30	430.10	
0173	Hospital Consultation	15	451.60	30.107	375.30	25.022	370.60	24.707	504.00	-	541.10	1,111.80	800.50	
0174	Hospital Consultation	30	903.20	30.107	375.30	13.323	370.60	12.353	504.00	-	541.10	1,111.80	800.50	
0175	Hospital Consultation	45	1,354.80	30.107	375.30	8.882	370.60	8.236	504.00	-	541.10	1,111.80	800.50	
0190	Consultation	15	451.60	30.107	375.30	25.022	389.30	25.953	-	626.80	568.40	1,167.90	-	
0191	Consultation	30	903.20	30.107	375.30	13.323	389.30	12.977	-	626.80	568.40	1,167.90	-	
0192	Consultation	45	1,354.80	30.107	375.30	8.882	389.30	8.651	-	626.80	568.40	1,167.90	-	
0199	Chronic Medicine Forms	21.43	645.20	30.107	309.40	14.436	304.70	14.218	414.40	490.60	444.90	914.10	658.20	
Procedures														
1205	Intensive care: Category 2: Cases requiring active system support (where active specialised intervention is required in cases such as acute myocardial infarction, diabetic coma, head injury, severe asthma, acute pancreatitis, eclampsia, flail chest, etc. Ventilation may or may not be part of the active system support): First day	100	3,010.70	30.107	894.10	8.941	880.60	8.806	1,197.60	1,417.80	1,285.70	2,641.80	1,902.10	
1206	Intensive care: Category 2: Cases requiring active system support (where active specialised intervention is required in cases such as acute myocardial infarction, diabetic coma, head injury, severe asthma, acute pancreatitis, eclampsia, flail chest, etc. Ventilation may or may not be part of the active system support): Subsequent days, per day	50	1,505.40	30.107	447.00	8.941	440.30	8.806	598.80	708.90	642.80	1,320.90	951.00	
1210	Intensive care: Category 3: Cases with multiple organ failure or Category 2 patients which may require multidisciplinary intervention: Subsequent days (per involved practitioner)	50	1,505.40	30.107	447.00	8.941	440.30	8.806	598.80	708.90	642.80	1,320.90	951.00	
1235*	Oesophageal motility (6 Channel + pneumograph + pH pull-through)	60	536.40	8.941	536.40	8.941	528.40	8.806	718.60	850.70	771.40	1,585.10	1,141.30	
1580	Upper gastro-intestinal endoscopy: Using hospital equipment	110	3,311.80	30.107	983.50	8.941	968.70	8.806	1,317.40	1,559.50	1,414.20	2,906.00	2,092.30	
1587	Gastrointestinal tract imaging, intraluminal (e.g. video capsule endoscopy): Hire fee (item 0201 applicable for video capsule - disposable single use) - (Please note: All patients should have had a normal gastroscopy and colonoscopy)	48.75	1,467.70	30.107	435.90	8.941	429.30	8.806	583.80	691.20	626.80	1,287.90	927.30	
1642	Total colonoscopy: With hospital equipment (including biopsy)	150	4,516.10	30.107	1,341.10	8.941	1,320.90	8.806	1,796.40	2,126.60	1,928.50	3,962.70	2,853.10	
1653	Plus removal of polyps: ADD to colonoscopy (item 1653)	90	2,709.70	30.107	804.70	8.941	792.50	8.806	1,077.90	1,276.00	1,157.10	2,377.60	1,711.90	
1654	Flexible sigmoidoscopy (including rectum and anus): Using hospital equipment	30	903.20	30.107	268.20	8.941	264.20	8.806	359.30	425.30	385.70	792.50	570.60	
1676	Endoscopic Retrograde Cholangiopancreatography (ERCP): Endoscopy + catheterisation of pancreas duct or choledochus	48.75	1,467.70	30.107	435.90	8.941	429.30	8.806	583.80	691.20	626.80	1,287.90	927.30	

1778	Multi-stage treadmill test	97	2,920.40	30.107	946.90	9.762	932.00	9.608	1,267.50	1,500.50	1,360.70	2,795.90	2,013.10
3622*	Cardiac examination: 2 Dimensional	50	426.10	8.522	426.10	8.522	419.70	8.394	570.80	675.70	612.80	1,259.10	906.60
3627*	Ultrasound examination includes whole abdomen and pelvic organs, where pelvic organs are clinically indicated (including liver, gall bladder, spleen, pancreas, abdominal vascular anatomy, para-aortic area, renal tract, pelvic organs)	60	511.30	8.522	511.30	8.522	503.60	8.394	685.00	810.90	735.30	1,510.90	1,087.90

Notes:

1. The Healthman tariff for codes that relate to equipment have been retained at GEMS rate*
2. Tariffs may differ due to rounding
3. Above codes are the most frequently used codes and is not all inclusive of all the codes
4. Increases from 2010 is as follow:
 - a. GEMS = 2010 Scheme Tariff +6.5%
 - b. HealthMan Tariff = 2010 Tariff +6.5%
 - c. Discovery Health = 2010 Tariff +4.9% (Note that this increase is for the DH Rate only)
5. Discovery Premier A Procedure Rates have NOT been split between In-Hospital & Out-Hospital. Use as appropriate.

Disclaimer:

The above schedule is based on information available to HealthMan and HealthMan will NOT be held responsible for any losses incurred by practitioners resulting from this schedule.