


HEALTHMAN GASTROENTEROLOGY COSTING GUIDE 2016

COMPARATIVE TARIFFS: Scheme Rates

		Base Rates												
		Average Duration Professional	HealthMan Private Tariff (VAT Incl)	HealthMan RCF	BankMed (VAT Incl)	BankMed RCF	Discovery Tariffs (VAT Incl)	DH RCF	FedHealth (VAT Incl)	FedHealth RCF	GEMS Tariffs (VAT Incl)	GEMS RCF	Profmed (Incl VAT)	Profmed RCF
		Units	R	R	R	R	R	R	R	R	R	R	R	R
Consultations:														
<i>See the Notes below for All Tariffs</i>														
0109	Hospital follow-up visit	15	609.50	40.632	288.40	19.227	200.80	13.387	284.10	18.940	287.40	19.160	292.50	19.503
0129	Prolonged first/follow-up consultation : 15 min	15	609.50	40.632	288.40	19.227	280.00	18.667	284.10	18.940	287.40	19.160	292.50	19.503
0130	Telephone consultation (all hours)	12	487.60	40.632	346.20	28.850	336.30	28.025	227.30	18.940	336.30	28.025	234.00	19.503
0132	Repeat Script	5	203.20	40.632	96.20	19.240	93.20	18.640	94.70	18.940	95.60	19.120	97.50	19.503
0133	Writing of special motivations	9	365.70	40.632	173.00	19.222	167.80	18.644	170.50	18.940	172.40	19.156	175.50	19.503
0145	Consultation : Away from doctor's room	6	243.80	40.632	115.40	19.233	112.10	18.683	113.60	18.940	115.00	19.167	117.00	19.503
0146	Unscheduled consultation: Emergency (cons.room)	8	325.10	40.632	153.60	19.200	149.40	18.675	151.50	18.940	153.40	19.175	156.00	19.503
0147	Unscheduled consultation:Emergency(not cons.room)	14	568.80	40.632	269.10	19.221	261.60	18.686	265.20	18.940	268.30	19.164	273.00	19.503
0173	Hospital Consultation	15	609.50	40.632	500.00	33.333	486.70	32.447	522.80	34.853	485.70	32.380	507.00	33.800
0174	Hospital Consultation	30	1 219.00	40.632	500.00	16.667	486.70	16.223	522.80	17.426	485.70	16.190	507.00	16.900
0175	Hospital Consultation	45	1 828.40	40.632	500.00	11.111	486.70	10.816	522.80	11.618	485.70	10.793	507.00	11.267
0190	Consultation	15	609.50	40.632	500.00	33.333	513.60	34.240	522.80	34.853	485.70	32.380	507.00	33.800
0191	Consultation	30	1 219.00	40.632	500.00	16.667	513.60	17.120	522.80	17.426	485.70	16.190	507.00	16.900
0192	Consultation	45	1 828.40	40.632	500.00	11.111	513.60	11.413	522.80	11.618	485.70	10.793	507.00	11.267
0199	Chronic Medicine Forms	21.43	870.70	40.632	412.20	19.235	400.30	18.679	405.90	18.940	361.50	16.869	417.90	19.503
CAS18	Casualty Evaluation Code <i>(Executive & Classic Plans) (Refer to Note 10)</i>	-	-	-	-	-	-	-	-	-	-	-	-	-
CAS18	Casualty Evaluation Code <i>(Excl. Executive & Classic Plans) (Refer to Note 10)</i>	-	-	-	-	-	-	-	-	-	-	-	-	-
HDM1	Hospital Discharge Management Code (instead of 0109) <i>(Executive & Classic Plans) (Refer to Note 10)</i>	-	-	-	-	-	-	-	-	-	-	-	-	-
HDM1	Hospital Discharge Management Code (instead of 0109) <i>(Excl. Executive & Classic Plans) (Refer to Note 10)</i>	-	-	-	-	-	-	-	-	-	-	-	-	-
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 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	100	4 063.20	40.632	1 190.80	11.908	1 156.30	11.563	1 171.00	11.710	1 186.90	11.869	1 207.80	12.078
1206	Intensive care: Category 3: Cases with multiple organ failure or Category 2 patients which may require multidisciplinary intervention: Subsequent days (per involved practitioner)	50	2 031.60	40.632	595.40	11.908	578.20	11.563	585.50	11.710	593.50	11.869	603.90	12.078
1210	Multi-stage treadmill test	60	712.10	11.869	681.10	11.351	693.80	11.563	702.60	11.710	712.10	11.869	724.70	12.078
1580	Oesophageal motility (6 Channel + pneumograph + pH pull-through)	110	4 469.50	40.632	1 309.90	11.908	1 271.90	11.563	1 288.10	11.710	1 305.60	11.869	1 328.60	12.078
1587	Upper gastro-intestinal endoscopy: Hospital equipment	48.75	1 980.80	40.632	580.50	11.908	563.70	11.563	570.90	11.710	578.60	11.869	588.80	12.078
1642	Gastrointestinal tract imaging, intraluminal (e.g. video capsule endoscopy): Hire fee (item 0201 applicable for video capsule - disposable single patient use) (Please note: All patients should have had a normal gastroscopy and colonoscopy)	150	6 094.80	40.632	1 786.20	11.908	1 734.50	11.563	1 756.50	11.710	1 780.40	11.869	1 811.70	12.078
1653	Total colonoscopy: With hospital equipment (including biopsy)	90	3 656.90	40.632	1 071.70	11.908	1 040.70	11.563	1 053.90	11.710	1 068.20	11.869	1 087.00	12.078
1654	Plus removal of polyps: ADD to colonoscopy (Item 1653)	30	1 219.00	40.632	357.20	11.908	346.90	11.563	351.30	11.710	356.10	11.869	362.30	12.078
1676	Flexible sigmoidoscopy (including rectum and anus): Hospital equipment.	48.75	1 980.80	40.632	580.50	11.908	563.70	11.563	570.90	11.710	578.60	11.869	588.80	12.078
1778	Endoscopic Retrograde Cholangiopancreatography (ERCP): Endoscopy + catheterisation of pancreas duct or choledochus	105.9	4 302.90	40.632	1 261.10	11.908	1 224.50	11.563	1 240.10	11.710	1 256.90	11.869	1 279.10	12.078
3622*	Cardiac examination: 2 Dimensional	50	565.60	11.312	567.60	11.351	551.20	11.023	559.00	11.180	565.60	11.312	575.70	11.513
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	678.70	11.312	681.10	11.351	661.40	11.023	670.80	11.180	678.70	11.312	690.80	11.513

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COMPARATIVE TARIFFS: Scheme Rates

Code	Terminology	Base Rates												
		Average Duration Professional	HealthMan Private Tariff (VAT Incl)	HealthMan RCF	BankMed (VAT Incl)	BankMed RCF	Discovery Tariffs (VAT Incl)	DH RCF	FedHealth (VAT Incl)	FedHealth RCF	GEMS Tariffs (VAT Incl)	GEMS RCF	Profmed (Incl VAT)	Profmed RCF
		Units	R	R	R	R	R	R	R	R	R	R	R	R

Note:

1. Codes, Descriptors and Unit Values have been extracted from the SAMA Electronic Medical Doctors Coding Manual (eMDCM) previously known as the SAMA Doctors Billing Manual (DBM).
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 2015 are as follow:
 - a. HealthMan = 2015 Tariff + 7.2%
 - b. Bankmed = New to Schedule
 - c. Discovery Health = 2015 Tariff +5%
 - d. Fedhealth = 2015 Tariff +5.5%
 - e. GEMS = 2015 Tariff +5%
 - f. Profmed = 2015 Tariff +6%
6. Payment Arrangement Rates have NOT been split between In-Hospital & Out-Hospital. Use as appropriate.
7. The Healthman tariff for codes that relate to equipment have been retained at GEMS rate*
8. All Tariffs are inclusive of VAT
9. Please note that GEMS published no Consultation Codes at Scheme Rate and that the GEMS Non-Contracted rates were used
10. Codes CAS18 & HDM1 only applies to FCPSA members participating in the Physician Quality Network (Contact FCPSA for more information)

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 the use of this schedule.

Legend:

DH = Discovery Health
 DPA = Direct Payment Arrangement
 Prem = Premier
 R = Rand
 RCF = Rand Conversion Factor (Rand Value per Unit)
 VAT = Value Added Tax


HEALTHMAN GASTROENTEROLOGY COSTING GUIDE 2016

COMPARATIVE TARIFFS: Scheme Rates

		Payment Arrangments															
		Average Duration Professional	HealthMan Private Tariff (VAT Incl)	HealthMan RCF	BankMed Entry Plan Network	BankMed Traditional & Comprehensive Network (IH)	BankMed Traditional & Comprehensive Network (OH)	BankMed Plus Network (IH)	BankMed Plus Network (OH)	DH Prem A (IH)	DH Prem A (OH)	DH Prem B	DH Classic Rate	DH Exec Rate	FedHealth DPA	FedHealth DPA	FedHealth DPA
		Units	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
Consultations:																	
<i>See the Notes below for All Tariffs</i>																	
0109	Hospital follow-up visit	15	609.50	40.632	317.20	389.30	432.60	576.80	620.10	275.10	325.30	295.20	435.70	602.40	468.80	596.60	852.30
0129	Prolonged first/follow-up consultation : 15 min	15	609.50	40.632	317.20	389.30	432.60	576.80	620.10	383.60	453.60	411.60	607.60	840.00	468.80	596.60	852.30
0130	Telephone consultation (all hours)	12	487.60	40.632	380.80	467.40	519.30	692.40	744.30	460.70	544.80	494.40	729.80	1 008.90	375.00	477.30	681.90
0132	Repeat Script	5	203.20	40.632	105.80	129.90	144.30	192.40	206.80	127.70	151.00	137.00	202.20	279.60	156.30	198.90	284.10
0133	Writing of special motivations	9	365.70	40.632	190.30	233.60	259.50	346.00	372.00	229.90	271.80	246.70	364.10	503.40	281.30	358.10	511.50
0145	Consultation : Away from doctor's room	6	243.80	40.632	126.90	155.80	173.10	230.80	248.10	153.60	181.60	164.80	243.30	336.30	187.40	238.60	340.80
0146	Unscheduled consultation: Emergency (cons.room)	8	325.10	40.632	169.00	207.40	230.40	307.20	330.20	204.70	242.00	219.60	324.20	448.20	250.00	318.20	454.50
0147	Unscheduled consultation:Emergency(not cons.room)	14	568.80	40.632	296.00	363.30	403.70	538.20	578.60	358.40	423.80	384.60	567.70	784.80	437.60	556.90	795.60
0173	Hospital Consultation	15	609.50	40.632	550.00	675.00	750.00	1 000.00	1 075.00	666.80	788.50	715.40	1 056.10	1 460.10	862.60	1 097.90	1 568.40
0174	Hospital Consultation	30	1 219.00	40.632	550.00	675.00	750.00	1 000.00	1 075.00	666.80	788.50	715.40	1 056.10	1 460.10	862.60	1 097.90	1 568.40
0175	Hospital Consultation	45	1 828.40	40.632	550.00	675.00	750.00	1 000.00	1 075.00	666.80	788.50	715.40	1 056.10	1 460.10	862.60	1 097.90	1 568.40
0190	Consultation	15	609.50	40.632	550.00	675.00	750.00	1 000.00	1 075.00	-	832.00	755.00	1 114.50	1 540.80	862.60	1 097.90	1 568.40
0191	Consultation	30	1 219.00	40.632	550.00	675.00	750.00	1 000.00	1 075.00	-	832.00	755.00	1 114.50	1 540.80	862.60	1 097.90	1 568.40
0192	Consultation	45	1 828.40	40.632	550.00	675.00	750.00	1 000.00	1 075.00	-	832.00	755.00	1 114.50	1 540.80	862.60	1 097.90	1 568.40
0199	Chronic Medicine Forms	21.43	870.70	40.632	453.40	556.50	618.30	824.40	886.20	400.30	400.30	400.30	400.30	400.30	669.70	852.40	1 217.70
CAS18	Casualty Evaluation Code (Executive & Classic Plans) (Refer to Note 10)	-	-	-	-	-	-	-	-	1 423.40	n/a	1 527.30	2 254.60	-	-	-	-
CAS18	Casualty Evaluation Code (Excl. Executive & Classic Plans) (Refer to Note 10)	-	-	-	-	-	-	-	-	1 423.40	n/a	1 527.30	1 039.00	-	-	-	-
HDM1	Hospital Discharge Management Code (instead of 0109) (Executive & Classic Plans) (Refer to Note 10)	-	-	-	-	-	-	-	-	550.20	n/a	590.30	871.50	-	-	-	-
HDM1	Hospital Discharge Management Code (instead of 0109) (Excl. Executive & Classic Plans) (Refer to Note 10)	-	-	-	-	-	-	-	-	550.20	n/a	590.30	401.50	-	-	-	-
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	4 063.20	40.632	1 309.90	1 607.60	1 786.20	2 381.60	2 560.20	1 584.10	1 873.20	1 699.80	2 509.20	3 468.90	1 932.20	2 459.10	3 513.00
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	2 031.60	40.632	654.90	803.80	893.10	1 190.80	1 280.10	792.10	936.60	849.90	1 254.60	1 734.50	966.10	1 229.60	1 756.50
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	2 031.60	40.632	654.90	803.80	893.10	1 190.80	1 280.10	792.10	936.60	849.90	1 254.60	1 734.50	966.10	1 229.60	1 756.50
1235*	Multi-stage treadmill test	60	712.10	11.869	749.20	919.40	1 021.60	1 362.10	1 464.30	950.50	1 123.90	1 019.90	1 505.50	2 081.30	1 159.30	1 475.50	2 107.80
1580	Oesophageal motility (6 Channel + pneumograph + pH pull-through)	110	4 469.50	40.632	1 440.90	1 768.30	1 964.80	2 619.80	2 816.20	1 742.50	2 060.50	1 869.70	2 760.10	3 815.80	2 125.40	2 705.00	3 864.30
1587	Upper gastro-intestinal endoscopy: Hospital equipment	48.75	1 980.80	40.632	638.60	783.70	870.80	1 161.00	1 248.10	772.30	913.20	828.60	1 223.20	1 691.10	942.00	1 198.90	1 712.70
1642	Gastrointestinal tract imaging, intraluminal (e.g. video capsule endoscopy): Hire fee (item 0201 applicable for video capsule - disposable single patient use) (Please note: All patients should have had a normal gastroscopy and colonoscopy)	150	6 094.80	40.632	1 964.80	2 411.40	2 679.30	3 572.40	3 840.30	2 376.20	2 809.80	2 549.60	3 763.80	5 203.40	2 898.20	3 688.70	5 269.50
1653	Total colonoscopy: With hospital equipment (including biopsy)	90	3 656.90	40.632	1 178.90	1 446.80	1 607.60	2 143.40	2 304.20	1 425.70	1 685.90	1 529.80	2 258.30	3 122.00	1 738.90	2 213.20	3 161.70
1654	Plus removal of polyps: ADD to colonoscopy (Item 1653)	30	1 219.00	40.632	393.00	482.30	535.90	714.50	768.10	475.20	562.00	509.90	752.80	1 040.70	579.60	737.70	1 053.90
1676	Flexible sigmoidoscopy (including rectum and anus): Hospital equipment.	48.75	1 980.80	40.632	638.60	783.70	870.80	1 161.00	1 248.10	772.30	913.20	828.60	1 223.20	1 691.10	942.00	1 198.90	1 712.70
1778	Endoscopic Retrograde Cholangiopancreatography (ERCP): Endoscopy + catheterisation of pancreas duct or choledochus	105.9	4 302.90	40.632	1 387.20	1 702.40	1 891.60	2 522.10	2 711.30	1 677.60	1 983.70	1 800.00	2 657.20	3 673.60	2 046.20	2 604.20	3 720.30
3622*	Cardiac examination: 2 Dimensional	50	565.60	11.312	624.30	766.20	851.30	1 135.10	1 220.20	755.10	892.90	810.20	1 196.00	1 653.50	922.40	1 173.90	1 677.00
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	678.70	11.312	749.20	919.40	1 021.60	1 362.10	1 464.30	906.10	1 071.40	972.20	1 435.20	1 984.10	1 106.80	1 408.70	2 012.40

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Code	Terminology				110%	135%	150%	200%	215%	137%	162%	147%	217%	300%	165%	210%	300%
		Units	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R

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Disclaimer:

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Legend:

- DH = Discovery Health
- DPA = Direct Payment Arrangement
- Prem = Premier
- R = Rand
- RCF = Rand Conversion Factor (Rand Value per Unit)
- VAT = Value Added Tax