



HEALTHMAN OPHTHALMOLOGY COSTING GUIDE 2012

COMPARATIVE TARIFFS

Code		Average Duration Professional	2012 HealthMan Practice Cost Tariff (VAT Incl.)	HealthMan RCF	FH In Hosp.	FH Out Hosp.	DH Prem A In Hosp.	DH Prem A Out Hosp.	DH Prem B	DH Classic Rate	DH Exec Rate
					150%	165%	137%	162%	147%	217%	300%
		<u>Units</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>
Consultations:											
See the Notes below for All Tariffs											
0109	Hospital follow-up visit	15.00	551.20	36.749	341.10	375.20	221.00	261.00	237.10	350.00	483.90
0129	Prolonged first/follow-up consultation : 15 min	15.00	551.20	36.749	341.10	375.20	308.30	365.00	330.80	488.30	675.00
0132	Repeat Script	5.00	183.70	36.749	113.90	125.20	102.80	122.00	110.30	162.80	225.00
0145	Consultation : Away from doctor's room	6.00	220.50	36.749	-	-	123.40	146.00	132.40	195.50	270.30
0146	Unscheduled consultation: Emergency (cons.room)	8.00	294.00	36.749	-	-	-	194.00	176.40	260.40	360.00
0147	Unscheduled consultation:Emergency(not cons.room)	14.00	514.50	36.749	-	-	287.80	340.00	308.80	455.90	630.30
0148	Elective after-hours services(+50%)	-	-	-	-	-	-	-	-	-	-
0149	Emergency after-hours services(+25%)	-	-	-	-	-	-	-	-	-	-
0173	Hospital Consultation	15.00	551.20	36.749	386.60	-	349.90	-	375.40	554.20	766.20
0174	Hospital Consultation	30.00	1,102.50	36.749	386.60	-	349.90	-	375.40	554.20	766.20
0175	Hospital Consultation	45.00	1,653.70	36.749	386.60	-	349.90	-	375.40	554.20	766.20
0190	Consultation	15.00	551.20	36.749	-	425.20	-	463.00	420.30	620.40	857.70
0191	Consultation	30.00	1,102.50	36.749	-	425.20	-	463.00	420.30	620.40	857.70
0192	Consultation	45.00	1,653.70	36.749	-	425.20	-	463.00	420.30	620.40	857.70
0199	Chronic Medicine Forms	21.43	787.50	36.749	487.20	535.90	440.50	521.00	472.60	697.70	964.50
Procedures											
3003	Fundus contact lens or 90 D lens examination	7.00	257.20	36.749	98.60	108.40	89.10	105.00	95.60	141.10	195.10
3004	Peripheral fundus examination with indirect Ophthalmoscope	7.00	257.20	36.749	98.60	108.40	89.10	105.00	95.60	141.10	195.10
3006	Keratometry	7.00	257.20	36.749	98.60	108.40	89.10	105.00	95.60	141.10	195.10
3009*	Basic capital equipment used in own rooms by ophthalmologists.	11.68	111.40	9.535	164.60	181.00	148.70	176.00	159.50	235.50	325.50
3013	Ocular motility assessment: Comprehensive examination	12.00	416.00	34.669	169.10	186.00	152.70	181.00	163.90	241.90	334.40
3014	Tonometry per test with maximum of 2 tests for provocative tonometry	7.00	242.70	34.669	98.60	108.40	89.10	105.00	95.60	141.10	195.10
3017*	Retinal threshold test inclusive of computer disc storage for Delta of Statpa	74.00	705.60	9.535	1,042.10	1,146.30	941.80	1,114.00	1,010.60	1,491.80	2,062.40
3018	Retinal threshold trend evaluation	16.00	554.70	34.669	225.30	247.80	203.60	241.00	218.50	322.50	445.90
3020*	Special eye investigations:Pachymetry:Only when own instrument is used, per eye. Only in addition to corneal surgery.	46.00	438.60	9.535	647.90	712.60	585.50	692.00	628.20	927.30	1,282.00
3021	Special eye investigations:Retinal funtion assessment including refraction after ocular surgery.Within four months,max 2 exams.	9.00	312.00	34.669	126.60	139.30	114.50	135.00	122.90	181.40	250.80
3022*	Digital fluorescein video angiography	68.00	648.40	9.535	957.50	1,053.20	865.50	1,023.00	928.60	1,370.80	1,895.20
3027*	Fundus photography	21.00	200.20	9.535	295.80	325.40	267.30	316.00	286.80	423.30	585.30
3028*	Optical Coherent Tomography (OCT) of Optic nerve or macula:Per eye	40.00	381.40	9.535	563.30	619.60	509.10	602.00	546.30	806.40	1,114.80
3036	Corneal topography:For pathological corneas only on special motivation. For refractive surgery.	36.00	1,248.10	34.669	506.90	557.50	458.20	542.00	491.60	725.70	1,003.30
3037	Surgical treatment of retinal detachment including vitreous replacement but excluding vitrectomy	306.90	10,640.00	34.669	4,321.70	4,753.80	3,906.00	4,619.00	4,191.10	6,186.90	8,553.30
3039	Prophylaxis and treatment of retina and choroid by cryotherapy and/or diathermy and/or photocoagulation and/or laser per eye.	105.00	3,640.30	34.669	1,478.60	1,626.40	1,336.40	1,580.00	1,433.90	2,116.70	2,926.40


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		<i>Units</i>	<i>R</i>	<i>R</i>	<i>R</i>	<i>R</i>	<i>R</i>	<i>R</i>	<i>R</i>	<i>R</i>	<i>R</i>
3041	Pan retinal photocoagulation (per eye): Done in one sitting	150.00	5,200.40	34.669	2,112.30	2,323.50	1,909.10	2,257.00	2,048.40	3,023.90	4,180.50
3047	Cataract: Extra-capsular (including capsulotomy)	210.00	7,280.60	34.669	2,957.30	3,253.00	2,672.70	3,160.00	2,867.80	4,233.50	5,852.70
3049	Insertion of lenticulus in addition to item 3045 or item 3047 cost on lens excluded	57.00	1,976.20	34.669	802.70	882.90	725.50	858.00	778.40	1,149.10	1,588.60
3052	Laser capsulotomy	105.00	3,640.30	34.669	1,478.60	1,626.40	1,336.40	1,580.00	1,433.90	2,116.70	2,926.40
3059	Insertion of lenticulus when item 3045 or item 3047 was not executed	210.00	7,280.60	34.669	2,957.30	3,253.00	2,672.70	3,160.00	2,867.80	4,233.50	5,852.70
3061	Drainage operation	247.60	8,584.10	34.669	3,486.60	3,835.30	3,151.30	3,726.00	3,381.30	4,991.40	6,900.60
3075	Strabismus (whether operation performed on 1 eye or both. Operation on 1 or 2 muscles	175.60	6,087.90	34.669	2,472.60	2,719.90	2,234.90	2,643.00	2,398.00	3,540.00	4,894.00
3097	Anterior vitrectomy	280.00	9,707.40	34.669	3,942.80	4,337.00	3,563.60	4,214.00	3,823.80	5,644.60	7,803.60
3098	Removal of silicon from globe	280.00	9,707.40	34.669	3,942.80	4,337.00	3,563.60	4,214.00	3,823.80	5,644.60	7,803.60
3099	Posterior vitrectomy including anterior vitrectomy, encircling of globe and vitreous replacement	419.00	14,526.50	34.669	5,900.10	6,490.10	5,332.70	6,306.00	5,722.00	8,446.70	11,677.50
3120	Excimer laser (per eye) for refractive keratectomy or Holmium laser thermo keratoplasty (LTK) (For machine hire fee for LTK - Use item 3201	150.00	5,200.40	34.669	2,112.30	2,323.50	1,909.10	2,257.00	2,048.40	3,023.90	4,180.50
3121	Corneal graft (lamellar or full thickness)	289.00	10,019.50	34.669	4,069.50	4,476.50	3,678.20	4,349.00	3,946.70	5,826.00	8,054.40
3125	Keratectomy	127.00	4,403.00	34.669	1,788.60	1,967.50	1,616.40	1,911.00	1,734.40	2,560.20	3,539.50
3130	Pterygium or conjunctival cyst or conjunctival tumour.No conjunctival flap or graft used	96.90	3,359.50	34.669	1,364.60	1,501.00	1,233.30	1,458.00	1,323.30	1,953.40	2,700.60
3131	Cornea: Paracentesis	53.00	1,837.50	34.669	746.30	820.90	674.50	798.00	723.80	1,068.40	1,477.10
3132	Lamellar keratectomy for refractive surgery (LK,ALK,MLK)	150.00	5,200.40	34.669	2,112.30	2,323.50	1,909.10	2,257.00	2,048.40	3,023.90	4,180.50
3134	Pterygium or conjunctival cyst or conjunctival tumour.Conjunctival flap or graft used - stand alone procedure	116.30	4,032.10	34.669	1,637.70	1,801.50	1,480.20	1,750.00	1,588.20	2,344.50	3,241.30
3163	Excision of superficial lid tumour	47.00	1,629.50	34.669	662.00	728.10	598.20	707.00	641.80	947.50	1,309.90
3171	Excision of Meibomian cyst.Additional fee for sterile tray	20.40	707.30	34.669	287.30	316.00	259.60	307.00	278.60	411.20	568.50
3181	Entropion or ectropion by Open operation	111.50	3,865.60	34.669	1,570.20	1,727.20	1,419.10	1,678.00	1,522.70	2,247.80	3,107.50
3196*	Diamond Knife: Use of own diamond knife during intraocular surgery	12.00	114.40	9.535	169.10	186.00	152.70	181.00	163.90	241.90	334.40
3198*	Excimer laser: Hire fee (per eye)	284.13	2,709.20	9.535	4,001.00	4,401.00	3,616.20	4,276.00	3,880.20	5,727.90	7,918.70
3201*	Laser apparatus (ophthalmic): Hire fee for one or both eyes done in one sitting (Not to be used with IOL Master.	109.00	1,039.30	9.535	1,534.80	1,688.30	1,387.30	1,640.00	1,488.50	2,197.40	3,037.80
3202*	Phako emulsification apparatus: Hire fee	109.00	1,039.30	9.535	1,534.80	1,688.30	1,387.30	1,640.00	1,488.50	2,197.40	3,037.80
3203*	Vitrectomy apparatus: Hire fee	120.00	1,144.20	9.535	1,689.80	1,858.70	1,527.30	1,806.00	1,638.80	2,419.10	3,344.40
3631*	Ophthalmic examination	50.00	454.40	9.089	671.10	738.20	606.60	717.00	650.90	960.90	1,328.40
3632*	Axial length measurement and calculation of intra ocular lens power.Per eye. Not to be used with item 3034	50.00	454.40	9.089	671.10	738.20	606.60	717.00	650.90	960.90	1,328.40
New Procedures for 2011											
4980	Corneal transplant: Endothelial	274.80	9,527.20	34.669							
4981	Preparation of corneal endothelial allograft prior to transplantation (backbench)		-	34.669							
4983	Lamellar corneal surgery keratome and equipment		-	9.535							
4985	Corneal cross linking	150.00	5,200.40	34.669							

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		Units	R	R	R	R	R	R	R	R	R
		54.00	514.90	9.535	150%	165%	137%	162%	147%	217%	300%
4986	Cross linking equipment hire										
4988	Endothelial specular microscope for donor corneas		-	9.535							
4989	Endothelial specular microscope for clinical use		-	9.535							

Note:

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 2011 is as follow:
 - a. GEMS = 2011 Scheme Tariff +6.65%
 - b. HealthMan Tariff = 2011 Tariff +6%
 - c. Discovery Health = 2011 Tariff +5.5% (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.
6. Please take note that the HealthMan Practice Cost Tariff is based on our 2008 Cost Studies adjusted with inflation

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.