


HEALTHMAN GYNAECOLOGY COSTING GUIDE 2014


COMPARATIVE TARIFFS: Scheme Rates

Base Rates

Code	 Terminology	Average Duration	Base Rates									
			HealthMan Private Tariff (VAT Incl.)	HealthMan RCF	Discovery Tariffs (VAT incl.)	DH RCF	FedHealth (VAT Incl.)	FedHealth RCF	GEMS Tariffs (VAT Incl.)	GEMS RCF	Profmed	Profmed RCF
		<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>	<u>R</u>
Consultations:												
	See the Notes below for All Tariffs											
0107	Newborn Attendance -Visit in Ward	33.00	1,169.00	35.423	553.60	16.776	559.00	16.938	553.90	16.785	570.10	17.276
0109	Hospital follow-up visit	15.00	531.30	35.423	180.40	12.027	254.10	16.937	251.80	16.785	259.10	17.276
0113	Newborn Attendance - Emergency at all hours	45.00	1,594.00	35.423	754.90	16.776	762.20	16.937	755.30	16.785	777.40	17.276
0129	Prolonged first/follow-up consultation : 15 min	15.00	531.30	35.423	251.60	16.773	254.10	16.937	251.80	16.785	259.10	17.276
0132	Repeat Script	5.00	177.10	35.423	83.80	16.760	84.80	16.960	83.90	16.785	86.40	17.276
0145	Consultation : Away from doctor's room	6.00	212.50	35.423	100.80	16.800	101.80	16.960	100.70	16.785	103.70	17.276
0146	Unscheduled consultation: Emergency (cons.room)	8.00	283.40	35.423	134.20	16.775	135.70	16.960	134.30	16.785	138.20	17.276
0147	Unscheduled consultation:Emergency(not cons.room)	14.00	495.90	35.423	235.00	16.786	237.40	16.960	235.00	16.785	241.90	17.276
0148	Elective after-hours services(+50%)	-	-	-	-	-	-	-	-	-	-	-
0149	Emergency after-hours services(+25%)	-	-	-	-	-	-	-	-	-	-	-
0173	Hospital Consultation	15.00	531.30	35.423	302.20	20.147	304.80	20.319	302.10	20.140	449.10	29.941
0174	Hospital Consultation	30.00	1,062.70	35.423	302.20	10.073	304.80	10.159	302.10	10.070	449.10	14.971
0175	Hospital Consultation	45.00	1,594.00	35.423	302.20	6.716	304.80	6.773	302.10	6.713	449.10	9.980
0190	Consultation	15.00	531.30	35.423	321.30	21.420	304.80	20.319	302.10	20.140	449.10	29.941
0191	Consultation	30.00	1,062.70	35.423	321.30	10.710	303.90	10.130	302.10	10.070	449.10	14.971
0192	Consultation	45.00	1,594.00	35.423	321.30	7.140	304.90	6.775	302.10	6.713	449.10	9.980
0199	Chronic Medicine Forms	21.43	759.10	35.423	359.60	16.780	362.90	16.933	359.70	16.785	370.20	17.276
Procedures												
0008	Specialist surgeon assistant		-	-	-	-	-	-	-	-	-	-
0009	Assistant		-	-	-	-	-	-	-	-	-	-
0011	Emergency after-hours procedures		-	-	-	-	-	-	-	-	-	-
0018	Surgical modifier for persons with BMI of 35>		-	-	-	-	-	-	-	-	-	-
0084	Film costs		-	-	-	-	-	-	-	-	-	-
0201	Cost of Material in treatment		-	-	-	-	-	-	-	-	-	-
2343	Vaginal hysterectomy: Without repair	210.50	7,456.50	35.423	2,186.90	10.389	2,207.80	10.488	2,244.60	10.663	2,252.10	10.699
2345	Vaginal hysterectomy: With repair	231.70	8,207.50	35.423	2,407.10	10.389	2,430.10	10.488	2,470.70	10.663	2,478.90	10.699
2437	Hysteroscopy and D&C (excluding after-care)	58.00	2,054.50	35.423	602.60	10.389	608.20	10.487	618.50	10.663	620.50	10.699
2443	Dilatation and curettage (D&C) (excluding after-care)	35.00	1,239.80	35.423	363.60	10.389	367.00	10.486	373.20	10.663	374.50	10.699
2445	Evacuation of uterus: Incomplete abortion: Before 12 weeks gestation	50.00	1,771.20	35.423	519.50	10.389	524.40	10.489	533.20	10.663	534.90	10.699
2471	Total abdominal hysterectomy: With or without unilateral or bilateral salpingo-oophorectomy - uncomplicated	252.20	8,933.70	35.423	2,620.10	10.389	2,645.10	10.488	2,689.30	10.663	2,698.20	10.699
2473	Total abdominal hysterectomy plus vaginal cuff with or without unilateral or bilateral salpingo-oophorectomy.	355.00	12,575.20	35.423	3,688.10	10.389	3,723.30	10.488	3,785.50	10.663	3,798.00	10.699


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		Average Duration Professional	Base Rates									
			HealthMan Private Tariff (VAT Incl.)	HealthMan RCF	Discovery Tariffs (VAT incl.)	DH RCF	FedHealth (VAT Incl.)	FedHealth RCF	GEMS Tariffs (VAT Incl.)	GEMS RCF	Profmed	Profmed RCF
Code	Terminology	Units	R	R	R	R	R	R	R	R	R	R
2478	Non-surgical endometrial destruction, Any method, not utilising hysteroscopic instrumentation or assistance	200.00	7,084.60	35.423	2,077.80	10.389	2,097.60	10.488	2,132.60	10.663	2,139.70	10.699
2492	Salpingectomy: Uni - or bilateral or sterilisation for accepted medical reasons	94.00	3,329.80	35.423	976.60	10.389	985.90	10.488	1,002.30	10.663	1,005.70	10.699
2493	Diagnostic laparoscopy (excluding after-care)	94.40	3,343.90	35.423	980.70	10.389	990.00	10.487	1,006.60	10.663	1,009.90	10.699
2497	Laparoscopy: Plus sterilisation	40.00	1,416.90	35.423	415.60	10.389	419.50	10.488	426.50	10.663	427.90	10.699
2500	Laparoscopy: Plus ablation of endometriosis by laser, harmonic scalpel or cautery	51.00	1,806.60	35.423	529.80	10.389	534.90	10.489	543.80	10.663	545.60	10.699
2527	Removal of ovarian tumour or cyst	187.00	6,624.10	35.423	1,942.70	10.389	1,961.30	10.488	1,994.00	10.663	2,000.60	10.699
2548	Operation for stress incontinence: Use of tape	229.40	8,126.00	35.423	2,383.20	10.389	2,406.00	10.488	2,446.10	10.663	2,454.30	10.699
2610	Tocardiography - pre-natal and intrapartum (including stress and non-stress test: Own machine) (Excluding after-care)	16.00	566.80	35.423	166.20	10.389	167.80	10.488	170.60	10.663	171.20	10.699
2614	Global obstetric care: All inclusive fee that includes all modes of vaginal delivery (excluding Caesarean section) and obstetric care from the commencement of labour until after the post-partum visit (6 weeks visit)	282.00	9,989.30	35.423	2,929.70	10.389	2,957.70	10.488	3,500.00	12.411	3,017.00	10.699
2615	Global obstetric care: All inclusive fee for caesarean section and obstetric care from the commencement of labour until after the post-partum visit (6 weeks visit). See modifier 0011 for emergency caesarean section (all hours)	267.00	9,457.90	35.423	2,773.90	10.389	2,800.50	10.489	3,500.00	13.109	2,856.50	10.699
3604*	Bone densitometry (to be charged once only for one or more levels done at the same session)	77.00	1,163.00	15.104	1,133.20	14.717	1,143.90	14.856	1,163.00	15.104	1,167.00	15.156
3615*	Routine obstetric ultrasound at 10 to 20 weeks gestational age preferable at 10 to 14 weeks gestational age to include nuchal translucency assessment	50.00	508.20	10.164	495.20	9.904	499.90	9.997	508.20	10.164	509.90	10.198
3617*	Routine obstetric ultrasound at 20 to 24 weeks to include detailed anatomical assessment	50.00	508.20	10.164	495.20	9.904	499.90	9.997	508.20	10.164	509.90	10.198
3618*	Pelvic organs ultrasound transabdominal probe (this is a gynaecological ultrasound examination and may not be used in pregnancy)	40.00	406.60	10.164	396.20	9.904	399.90	9.997	406.60	10.164	407.90	10.198
3637*	+Colour Doppler (may be added onto any other regional exam, but not to be added to items 3605, 5110, 5111, 5112, 5113 or 5114)	78.00	792.80	10.164	772.50	9.904	779.70	9.996	792.80	10.164	795.50	10.198
4188*	Urine dipstick, per stick (irrespective of the number of tests on stick)	1.00	12.30	12.321	12.00	12.010	12.20	12.178	12.30	12.321	12.40	12.368
5100*	Pelvic organs ultrasound: Transvaginal or trans rectal probe	50.00	508.20	10.164	495.20	9.904	499.90	9.997	508.20	10.164	509.90	10.198

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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>

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 2013 are as follow:
 - a. GEMS = 2013 Scheme Tariff +3.34% for consultations and +6% for procedures
 - b. Discovery Health = 2013 Tariff +6%
 - c. Profmed = 2013 Tariff +6%
 - d. Fedhealth = 2013 Tariff +5.4%
 - e. The HealthMan Private Tariff has been fixed at a maximum RCF of R35.423. This RCF is based on updated costing studies for Paediatricians in 2011/12. Also note this RCF is 13.65% higher than the Discovery Executive rate for procedures.
6. Discovery Premier A Procedure 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. Please note that GEMS increased its' tariffs for codes 2614 and 2615 to R3500 in order to compensate for the increase in Malpractice Insurance
9. All Tariffs are inclusive of VAT


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

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Payment Arrangments											
Code	 ADDING BUSINESS ACUMEN TO YOUR PROFESSIONAL EXPERTISE Terminology	Average Duration Professional	HealthMan Private Tariff (VAT Incl.)	HealthMan RCF	DH Prem A In Hosp.	DH Prem A Out Hosp.	DH Prem B	DH Classic Rate	DH Exec Rate	FedHealth DPA	FedHealth DPA
		Units	R	R	R	R	R	R	R	R	R
Consultations:											
See the Notes below for All Tariffs											
0107	Newborn Attendance -Visit in Ward	33.00	1,169.00	35.423	758.40	896.80	813.80	1,201.30	1,660.80	922.40	1,173.90
0109	Hospital follow-up visit	15.00	531.30	35.423	247.10	292.20	265.20	391.50	541.20	419.30	533.60
0113	Newborn Attendance - Emergency at all hours	45.00	1,594.00	35.423	1,034.20	1,222.90	1,109.70	1,638.10	2,264.70	1,257.60	1,600.60
0129	Prolonged first/follow-up consultation : 15 min	15.00	531.30	35.423	344.70	407.60	369.90	546.00	754.80	419.30	533.60
0132	Repeat Script	5.00	177.10	35.423	114.80	135.80	123.20	181.80	251.40	139.90	178.10
0145	Consultation : Away from doctor's room	6.00	212.50	35.423	138.10	163.30	148.20	218.70	302.40	168.00	213.80
0146	Unscheduled consultation: Emergency (cons.room)	8.00	283.40	35.423	-	217.40	197.30	291.20	402.60	223.90	285.00
0147	Unscheduled consultation:Emergency(not cons.room)	14.00	495.90	35.423	322.00	380.70	345.50	510.00	705.00	391.70	498.50
0148	Elective after-hours services(+50%)	-	-	-	-	-	-	-	-	-	-
0149	Emergency after-hours services(+25%)	-	-	-	-	-	-	-	-	-	-
0173	Hospital Consultation	15.00	531.30	35.423	414.00	-	444.20	655.80	906.60	502.90	640.10
0174	Hospital Consultation	30.00	1,062.70	35.423	414.00	-	444.20	655.80	906.60	502.90	640.10
0175	Hospital Consultation	45.00	1,594.00	35.423	414.00	-	444.20	655.80	906.60	502.90	640.10
0190	Consultation	15.00	531.30	35.423	-	520.50	472.30	697.20	963.90	502.90	640.10
0191	Consultation	30.00	1,062.70	35.423	-	520.50	472.30	697.20	963.90	501.40	638.20
0192	Consultation	45.00	1,594.00	35.423	-	520.50	472.30	697.20	963.90	503.10	640.30
0199	Chronic Medicine Forms	21.43	759.10	35.423	492.70	582.60	528.60	780.30	1,078.80	598.80	762.10
Procedures											
0008	Specialist surgeon assistant		-	-	-	-	-	-	-	-	-
0009	Assistant		-	-	-	-	-	-	-	-	-
0011	Emergency after-hours procedures		-	-	-	-	-	-	-	-	-
0018	Surgical modifier for persons with BMI of 35>		-	-	-	-	-	-	-	-	-
0084	Film costs		-	-	-	-	-	-	-	-	-
0201	Cost of Material in treatment		-	-	-	-	-	-	-	-	-
2343	Vaginal hysterectomy: Without repair	210.50	7,456.50	35.423	2,996.00	3,542.80	3,214.70	4,745.50	6,560.70	3,642.90	4,636.40
2345	Vaginal hysterectomy: With repair	231.70	8,207.50	35.423	3,297.80	3,899.60	3,538.50	5,223.50	7,221.40	4,009.70	5,103.20
2437	Hysteroscopy and D&C (excluding after-care)	58.00	2,054.50	35.423	825.50	976.20	885.80	1,307.60	1,807.70	1,003.50	1,277.20
2443	Dilatation and curettage (D&C) (excluding after-care)	35.00	1,239.80	35.423	498.20	589.10	534.50	789.00	1,090.80	605.60	770.70
2445	Evacuation of uterus: Incomplete abortion: Before 12 weeks gestation	50.00	1,771.20	35.423	711.60	841.50	763.60	1,127.20	1,558.40	865.30	1,101.20
2471	Total abdominal hysterectomy: With or without unilateral or bilateral salpingo-oophorectomy - uncomplicated	252.20	8,933.70	35.423	3,589.50	4,244.60	3,851.60	5,685.60	7,860.30	4,364.40	5,554.70
2473	Total abdominal hysterectomy plus vaginal cuff with or without unilateral or bilateral salpingo-oophorectomy.	355.00	12,575.20	35.423	5,052.70	5,974.70	5,421.50	8,003.20	11,064.30	6,143.40	7,818.90

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		Payment Arrangments									
Code	 Terminology	Average Duration Professional	HealthMan Private Tariff (VAT Incl.)	HealthMan RCF	DH Prem A In Hosp.	DH Prem A Out Hosp.	DH Prem B	DH Classic Rate	DH Exec Rate	FedHealth DPA	FedHealth DPA
		Units	R	R	R	R	R	R	R	R	R
					137%	162%	147%	217%	300%	165%	210%
2478	Non-surgical endometrial destruction, Any method, not utilising hysteroscopic instrumentation or assistance	200.00	7,084.60	35.423	2,846.60	3,366.00	3,054.40	4,508.80	6,233.40	3,461.00	4,405.00
2492	Salpingectomy: Uni - or bilateral or sterilisation for accepted medical reasons	94.00	3,329.80	35.423	1,337.90	1,582.00	1,435.60	2,119.10	2,929.70	1,626.70	2,070.40
2493	Diagnostic laparoscopy (excluding after-care)	94.40	3,343.90	35.423	1,343.60	1,588.80	1,441.70	2,128.20	2,942.20	1,633.50	2,079.00
2497	Laparoscopy: Plus sterilisation	40.00	1,416.90	35.423	569.30	673.20	610.90	901.80	1,246.70	692.20	881.00
2500	Laparoscopy: Plus ablation of endometriosis by laser, harmonic scalpel or cautery	51.00	1,806.60	35.423	725.90	858.30	778.90	1,149.80	1,589.50	882.60	1,123.30
2527	Removal of ovarian tumour or cyst	187.00	6,624.10	35.423	2,661.60	3,147.20	2,855.80	4,215.80	5,828.20	3,236.10	4,118.70
2548	Operation for stress incontinence: Use of tape	229.40	8,126.00	35.423	3,265.00	3,860.80	3,503.40	5,171.60	7,149.70	3,969.90	5,052.60
2610	Tococardiography - pre-natal and intrapartum (including stress and non-stress test: Own machine) (Excluding after-care)	16.00	566.80	35.423	227.70	269.30	244.30	360.70	498.70	276.90	352.40
2614	Global obstetric care: All inclusive fee that includes all modes of vaginal delivery (excluding Caesarean section) and obstetric care from the commencement of labour until after the post-partum visit (6 weeks visit)	282.00	9,989.30	35.423	4,013.70	4,746.10	4,306.70	6,357.40	8,789.10	4,880.20	6,211.20
2615	Global obstetric care: All inclusive fee for caesarean section and obstetric care from the commencement of labour until after the post-partum visit (6 weeks visit). See modifier 0011 for emergency caesarean section (all hours)	267.00	9,457.90	35.423	3,800.20	4,493.70	4,077.60	6,019.30	8,321.60	4,620.80	5,881.10
3604*	Bone densitometry (to be charged once only for one or more levels done at the same session)	77.00	1,163.00	15.104	1,552.50	1,835.80	1,665.80	2,459.10	3,399.60	1,887.40	2,402.20
3615*	Routine obstetric ultrasound at 10 to 20 weeks gestational age preferable at 10 to 14 weeks gestational age to include nuchal translucency assessment	50.00	508.20	10.164	678.40	802.20	727.90	1,074.60	1,485.60	824.80	1,049.80
3617*	Routine obstetric ultrasound at 20 to 24 weeks to include detailed anatomical assessment	50.00	508.20	10.164	678.40	802.20	727.90	1,074.60	1,485.60	824.80	1,049.80
3618*	Pelvic organs ultrasound transabdominal probe (this is a gynaecological ultrasound examination and may not be used in pregnancy)	40.00	406.60	10.164	542.70	641.80	582.40	859.70	1,188.50	659.80	839.80
3637*	+Colour Doppler (may be added onto any other regional exam, but not to be added to items 3605, 5110, 5111, 5112, 5113 or 5114)	78.00	792.80	10.164	1,058.30	1,251.50	1,135.60	1,676.40	2,317.50	1,286.50	1,637.40
4188*	Urine dipstick, per stick (irrespective of the number of tests on stick)	1.00	12.30	12.321	16.50	19.50	17.70	26.10	36.00	20.10	25.60
5100*	Pelvic organs ultrasound: Transvaginal or trans rectal probe	50.00	508.20	10.164	678.40	802.20	727.90	1,074.60	1,485.60	824.80	1,049.80