

***THE PROVINCE OF
GAUTENG***

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GAUTENG***

**Provincial Gazette
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GENERAL NOTICES • ALGEMENE KENNISGEWINGS

NOTICE 198 OF 2020**DEPARTMENT OF HEALTH****HOSPITAL ORDINANCE NO. 14 OF 1958****REVISION OF UNIFORM PATIENT FEE SCHEDULE RELATING TO THE CLASSIFICATION
OF AND FEES PAYABLE BY PATIENTS AT PROVINCIAL HOSPITALS, 2020****INVITATION TO THE PUBLIC TO SUBMIT WRITTEN COMMENT OR REPRESENTATION**

The Member of the Executive Council responsible for health in the Province intends, in terms of section 38 read with section 76 of the Hospitals Ordinance No. 14 of 1958, to make the Regulations set out in the Schedule.

Members of the public are hereby, in accordance with section 195(1)(e) of the Constitution of the Republic of South Africa, 1996, and section 3 read with 4 of the Promotion of Administrative Justice Act, 2000 (Act No. 3 of 2000), within 30 days of publication of this notice, invited to make written submissions or representations in respect of the draft Regulations for consideration by the MEC.

Written submissions or representations may be delivered or sent to the person and contact details below:

Mr Joe Tsoka

45 Commissioner Street

Life Health Building

Marshalltown

JOHANNESBURG

2017

Email: Joe.Tsoka@gauteng.gov.za

GAUTENG DEPARTMENT OF HEALTH**HOSPITALS ORDINANCE NO. 14 OF 1958****DRAFT REVISION OF UNIFORM PATIENT FEE SCHEDULE RELATING TO CLASSIFICATION OF AND FEES PAYABLE BY PATIENTS AT PROVINCIAL HOSPITALS, 2020**

The Member of the Executive Council responsible for matters related to health in the Province intends, in terms of sections 9 and 76 of the Hospitals Ordinance No. 14 of 1958, to make the Regulations in the Schedule.

SCHEDULE**GENERAL EXPLANATORY NOTE:**

[] Words in bold type in square brackets indicate omissions from existing enactments.

_____ Words underlined indicate insertions in existing enactments.

Definition

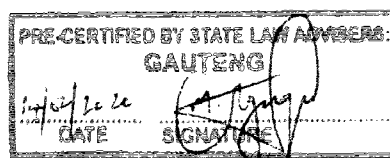
1. In these Regulations, unless the context otherwise indicates, "the Regulations" means the Classification of and Fees Payable by Patients at Provincial Hospitals Regulations, 1968.

Substitution of Annexure 1 of Schedule B to Regulations

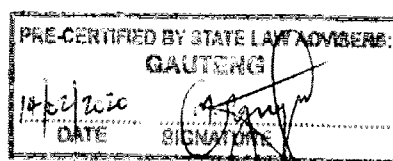
2. The following Annexure is hereby substituted for Annexure 1 of Schedule B to the Regulations:

"ANNEXURE 1 OF SCHEDULE B**UPFS [2019]2020 FEE SCHEDULE FOR H1 PATIENTS**

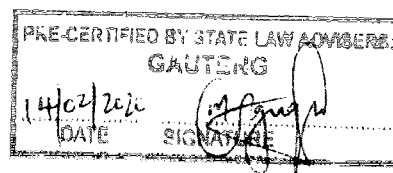
CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE	FACILITY FEE		
				TOTAL FEE IN BOLD		
			R	LEVEL 1	LEVEL 2	LEVEL 3
				R	R	R



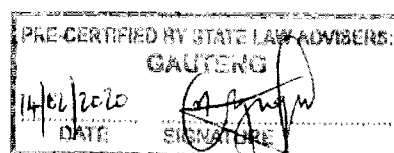
03	Dialysis					
0310	Haemo-Facility Fee	Per [visit]day		20.00	20.00	25.00
0311	Haemo-General medical practitioner	Per [visit]day	20.00	40.00	40.00	45.00
0312	Haemo-Specialist medical practitioner	Per [visit]day	50.00	70.00	70.00	75.00
0313	Haemo-dialysis-Nursing practitioner	Per [visit]day	15.00	35.00	35.00	40.00
0320	Peritoneal Dialysis- Facility Fee	Per session		20.00	20.00	25.00
0321	Peritoneal Dialysis-General medical practitioner	Per session	20.00	40.00	40.00	45.00
0322	Haemo Dialysis- Specialist medical practitioner	per session	15.00	35.00	35.00	40.00
	Plasmapheresis-Facility Fee	Per session		20.00	20.00	25.00
0331	Plasmapheresis-General medical practitioner	per session	20.00	40.00	40.00	45.00
0332	Plasmapheresis-Specialist medical practitioner	Per session	50.00	70.00	70.00	75.00
04	Medical Reports					
0410	Medical Report-Facility Fee	Report		[185.00]194.00	[185.00]194.00	[185.00]194.00
0411	Medical Report-General medical practitioner	Report	[435.00]456.00	[620.00]650.00	[620.00]650.00	[620.00]650.00
0412	Medical Report-Specialist medical practitioner	Report	[435.00]456.00	[620.00]650.00	[620.00]650.00	[620.00]650.00
0420	Copy of Medical Report-Facility Fee			[185.00]194.00	[185.00]194.00	[185.00]194.00
0421	Copies of Medical Report, Records, X ray, Completion of certificates/Form-General medical practitioner	Copies	[219.00]230.00	[404.00]424.00	[404.00]424.00	[404.00]424.00
0422	Copies of Medical Report, Records, X ray, Completion of certificates/Form-Specialist medical practitioner	Copies	[219.00]230.00	[404.00]424.00	[404.00]424.00	[404.00]424.00
0425	Copies of X ray, ultrasounds etc.	Copies	[219.00]230.00	[404.00]424.00	[404.00]424.00	[404.00]424.00
0430	Functional Assessment Report	Report		[302.00]317.00	[302.00]317.00	[369.00]387.00
0431	Functional Assessment Report-General medical practitioner	Report	[853.00]895.00	[1155.00]1212.00	[1155.00]1212.00	[1222.00]1282.00
0432	Functional Assessment Report-Special medical practitioner	Report	[1742.00]1827.00	[2044.00]2144.00	[2044.00]2144.00	[2111.00]2144.00
0434	Functional Assessment Report-Allied health practitioner	Report	[853.00]853.00	[1155.00]1212.00	[1155.00]1212.00	[1222.00]1282.00
0440	Copies of Specialised Radiology (MRI, CT & Nuclear)	Report		[1111.00]1165.00	[1111.00]1165.00	[1111.00]1165.00



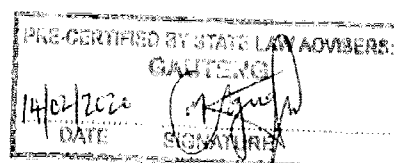
06	In-Patients					
0610	In-patient General ward-Facility Fee	Per 30 Days		60.00	[75.00]85.00	[140.00]165.00
0611	In-patient General Ward-General medical practitioner	Per 30 Days	10.00	70.00	[85.00]95.00	[150.00]175.00
0612	In-patient General Ward-Specialist medical practitioner	Per 30 Days	20.00	80.00	[95.00]105.00	[160.00]185.00
0620	In-patient High care-Facility Fee	Per 30 Days		60.00	[75.00]85.00	[140.00]165.00
0621	In-patient High Care-General medical practitioner	Per 30 Days	10.00	70.00	[85.00]95.00	[150.00]175.00
0622	In-patient High Care-Specialist medical practitioner	Per 30 Days	20.00	80.00	[95.00]105.00	[160.00]185.00
0630	In-patient Intensive care-Facility Fee	Per 30 Days		60.00	[75.00]85.00	[140.00]165.00
0631	In-patient Intensive Care-General medical practitioner	Per 30 Days	10.00	70.00	[85.00]95.00	[150.00]175.00
0632	In-patient Intensive Care-Specialist medical practitioner	Per 30 Days	20.00	80.00	[95.00]105.00	[160.00]185.00
0640	In-patient Chronic care-Facility Fee	Per 30 Days		[30.00]60.00	[30.00]85.00	[30.00]165.00
0641	In-patient Chronic care-General medical practitioner	Per 30 Days	[5.00]10.00	[40.00]70.00	[40.00]95.00	[40.00]175.00
0642	In-patient Chronic care-Specialist medical practitioner	Per 30 Days	[10.00]20.00	[45.00]80.00	[45.00]105.00	[45.00]185.00
0643	In-patient Chronic care-Nursing practitioner	Per 30 Days	5.00	[35.00]65.00	[35.00]65.00	[35.00]65.00
0650	Day patient-Facility Fee	Per 30 Days		[50.00]60.00	[65.00]85.00	[90.00]165.00
0651	Day patient-General medical practitioner	Per 30 Days	10.00	[60.00]70.00	[75.00]95.00	[100.00]175.00
0652	Day patient-Specialist medical practitioner	Per 30 Days	20.00	[70.00]80.00	[85.00]105.00	[110.00]185.00
0653	Day patient-Nursing practitioner	Per 30 Days	5.00	[55.00]65.00	[70.00]90.00	[95.00]170.00
0660	In-patient Boarder/Patient companion-Facility Fee	Per 30 Days		30.00	30.00	30.00



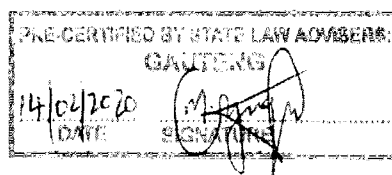
0663	In-patient Boarder/Patient Companion – Nursing Practitioner	Day	5.00	[30.00]35.00	[30.00]35.00	[30.00]35.00
06100	Inpatient Specialised Intensive Care Paediatric – Facility Fee	12 Hours		[55.00]60.00	[70.00]85.00	[135.00]165.00
06101	Inpatient Specialised Intensive Care Paediatric – General medical practitioner	12 Hours	10.00	[65.00]70.00	[80.00]95.00	[145.00]175.00
06102	Inpatient Specialised Intensive Care Paediatric– Specialist medical practitioner	12 Hours	20.00	[75.00]80.00	[90.00]105.00	[155.00]185.00
06200	Inpatient Specialised Intensive Care Neonatal – Facility Fee	12 Hours		[55.00]60.00	[70.00]85.00	[135.00]165.00
06201	Inpatient Specialised Intensive Care Neonatal – General medical practitioner	12 Hours	10.00	[65.00]70.00	[80.00]95.00	[145.00]175.00
06202	Inpatient Specialised Intensive Care Neonatal– Specialist medical practitioner	12 Hours	20.00	[75.00]80.00	[90.00]105.00	[155.00]185.00
07	Mortuary					
0710	Mortuary Facility Fee	Day		[205.00]215.00	[205.00]215.00	[232.00]243.00
0720	Cremation Certificate-Facility Fee	Certificate		[205.00]215.00	[205.00]215.00	[232.00]243.00
10	Consultations					
1010	Outpatient Consultation-Facility Fee	Visit		20.00	20.00	25.00
1011	Outpatient Consultation-General medical practitioner	Visit	20.00	40.00	40.00	45.00
1012	Outpatient Consultation-Specialist medical practitioner	Visit	50.00	70.00	70.00	75.00
1013	Outpatient Consultation-Nursing practitioner	Visit	10.00	35.00	35.00	35.00
1014	Outpatient Consultation-Allied health practitioner	Visit	10.00	30.00	30.00	35.00
1020	Emergency Consultation-Facility Fee	Visit		40.00	40.00	50.00
1021	Emergency Consultation-General medical practitioner	Visit	35.00	75.00	75.00	80.00
1022	Emergency Consultation-Specialist medical practitioner	Visit	75.00	115.00	115.00	125.00
1023	Emergency Consultation-Nursing practitioner	Visit	20.00	60.00	60.00	70.00
1024	Emergency Consultation-Allied health practitioner	Visit	20.00	60.00	60.00	70.00
1030	Follow-Up Outpatient Consultation-Facility Fee			20.00	20.00	25.00
1031	Follow-Up Outpatient Consultation-General medical Practitioner		20.00	40.00	40.00	45.00
1032	Follow-Up Outpatient Consultation-Specialist medical Practitioner		50.00	70.00	70.00	75.00
1033	Follow-Up Outpatient		10.00	30.00	30.00	35.00



	Consultation-Nursing Practitioner				
1034	Follow-Up Outpatient		10.00	30.00	30.00
	Consultation-Allied health practitioner				35.00
13	Treatments				
1310	Supplementary Health Treatment-Facility Fee	Contact		5.00	5.00
					[5.00]10.00
1313	Supplementary Health Treatment-Nursing practitioner	Contact	5.00	10.00	10.00
					[10.00]15.00
1314	Supplementary Health Treatment-Allied health practitioner	Contact	5.00	10.00	10.00
					[10.00]15.00
1320	Supplementary Health Group Treatment-Facility Fee	Contact		5.00	5.00
					5.00
1324	Supplementary Health Group Treatment Allied practitioner	Contact	5.00	10.00	10.00
					10.00
14	Emergency Medical Services				
1410	Patient transport service-Facility Fee	100km			
1420	Basic life support-Facility Fee	50km			
1430	Intermediate life support-Facility Fee	50km			
1440	Advanced life support-Facility Fee	50km			
1450	Emergency service standby-Facility Fee	Hour			
1451	Emergency service standby-General medical practitioner	Hour			
1452	Emergency service standby-Specialist medical practitioner	Hour			
1453	Emergency service standby-Nursing practitioner	Hour			
1454	Emergency service standby-Allied health practitioner	Hour			
			See Administrator's Notice No. 646 of 29 August 1958		
1460	Rescue- Facility Fee	Incident			
1461	Rescue-General medical practitioner	Incident			
1462	Rescue-Specialist medical practitioner	Incident			
1463	Rescue-Nursing practitioner	Incident			
1464	Rescue-Allied health practitioner	Incident			
15	Assistive Devices & Prosthesis				
1510	Assistive Devices-Item Fee	Item	10% of the cost of the relevant device or prosthesis. rounded to the nearest R5		
1530	Dental Device-Item fee				
1550	Optical Devices-Item Fee				
16	Cosmetic Surgery				
1610	Cosmetic Surgery Cat A - Facility Fee	Procedure	[3204.00]	[3361.00]	[3204.00]
					[3361.00]
					[3659.00]
					[3838.00]
1611	Cosmetic Surgery Cat A - General practitioner	Procedure	[1847.00]	[1938.00]	[5051.00]
					[5298.00]
					[5051.00]
					[5298.00]
					[5506.00]
					[5776.00]



1612	Cosmetic Surgery Cat A - Specialist practitioner	Procedure	[2766.00] <u>2902.00</u>	[5970.00] <u>6263.00</u>	[5970.00] <u>6263.00</u>	[6425.00] <u>6740.00</u>
1620	Cosmetic Surgery Cat B - Facility Fee	Procedure		[7203.00] <u>7556.00</u>	[7203.00] <u>7556.00</u>	[8233.00] <u>8636.00</u>
1621	Cosmetic Surgery Cat B - General practitioner	Procedure	[2188.00] <u>2295.00</u>	[9391.00] <u>9851.00</u>	[9391.00] <u>9851.00</u>	[10421.00] <u>10932.00</u>
1622	Cosmetic Surgery Cat B - Specialist practitioner	Procedure	[3283.00] <u>3444.00</u>	[10486.00] <u>11000.00</u>	[10486.00] <u>11000.00</u>	[11516.00] <u>12080.00</u>
1630	Cosmetic Surgery - Cat C - Facility Fee	Procedure		[11634.00] <u>12204.00</u>	[11634.00] <u>12204.00</u>	[13297.00] <u>13949.00</u>
1631	Cosmetic Surgery Cat C - General practitioner	Procedure	[3699.00] <u>3880.00</u>	[15333.00] <u>16084.00</u>	[15333.00] <u>16084.00</u>	[16996.00] <u>17829.00</u>
1632	Cosmetic Surgery Cat C - Specialist practitioner	Procedure	[5548.00] <u>5820.00</u>	[17182.00] <u>18024.00</u>	[17182.00] <u>18024.00</u>	[18845.00] <u>19768.00</u>
1640	Cosmetic Surgery Cat D - Facility Fee	Procedure		[19652.00] <u>20615.00</u>	[19652.00] <u>20615.00</u>	[22458.00] <u>23558.00</u>
1641	Cosmetic Surgery Cat D - General practitioner	Procedure	[4150.00] <u>4353.00</u>	[23802.00] <u>24968.00</u>	[23802.00] <u>24968.00</u>	[26608.00] <u>27912.00</u>
1642	Cosmetic Surgery Cat D - Specialist practitioner	Procedure	[6107.00] <u>6406.00</u>	[25759.00] <u>27021.00</u>	[25759.00] <u>27021.00</u>	[28565.00] <u>29965.00</u>
24	Autopsies					
2410	Autopsy- Facility Fee	Per Case		[100.00] <u>104.00</u>	[100.00] <u>104.00</u>	[120.00] <u>125.00</u>
2411	Autopsy-General medical practitioner	Per Case	[110.00] <u>115.00</u>	[210.00] <u>219.00</u>	[210.00] <u>219.00</u>	[230.00] <u>240.00</u>
2412	Autopsy-Specialist medical practitioner	Per Case	[255.00] <u>266.00</u>	[355.00] <u>370.00</u>	[355.00] <u>370.00</u>	[375.00] <u>391.00</u>
25	Port Health and Travel Clinics					
2510	Consultation-Facility Fee	Visit		[119.00] <u>125.00</u>	[119.00] <u>125.00</u>	[119.00] <u>125.00</u>
2511	Consultation-General practitioner	Visit	[110.00] <u>115.00</u>	[229.00] <u>240.00</u>	[229.00] <u>240.00</u>	[229.00] <u>240.00</u>
2513	Consultation-Nursing practitioner	Visit	[63.00] <u>66.00</u>	[182.00] <u>191.00</u>	[182.00] <u>191.00</u>	[182.00] <u>191.00</u>
2520	Emergency Consultation-Facility Fee	Visit		[240.00] <u>252.00</u>	[240.00] <u>252.00</u>	[240.00] <u>252.00</u>
2521	Emergency Consultation-General medical practitioner	Visit	[167.00] <u>175.00</u>	[407.00] <u>427.00</u>	[407.00] <u>427.00</u>	[407.00] <u>427.00</u>
2523	Emergency Consultation-Nursing practitioner	Visit	[97.00] <u>102.00</u>	[337.00] <u>354.00</u>	[337.00] <u>354.00</u>	[337.00] <u>354.00</u>
0810	Medication Fee-Facility Fee	Prescription		[36.00] <u>38.00</u>	[36.00] <u>38.00</u>	[44.00] <u>46.00</u>

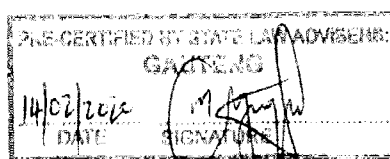


Substitution of Annexure 2 of Schedule B to Regulations

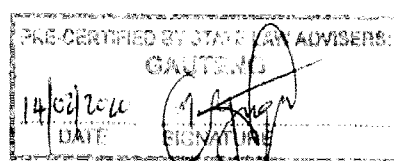
3. The following Annexure is hereby substituted for Annexure 2 of Schedule B to the Regulations:

"ANNEXURE 2 OF SCHEDULE B**UPFS [2019]2020 FEE SCHEDULE FOR H2 PATIENTS**

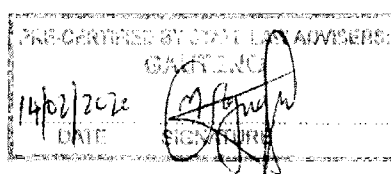
CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE R	FACILITY FEE TOTAL FEE IN BOLD		
				LEVEL 1 R	LEVEL 2 R	LEVEL 3 R
01	Anaesthetics					
0111	Anaesthetics Cat A – General medical practitioner	Procedure	50.00	50.00	50.00	50.00
0112	Anaesthetics Cat A – Specialist medical practitioner	Procedure	[70.00]75.00	[70.00]74.00	[70.00]74.00	[70.00]75.00
0121	Anaesthetics Cat B – General medical practitioner	Procedure	[80.00]85.00	[80.00]85.00	[80.00]85.00	[80.00]85.00
0122	Anaesthetics Cat B – Specialist medical practitioner	Procedure	[120.00]125.00	[120.00]125.00	[120.00]125.00	[120.00]125.00
0131	Anaesthetics Cat C – General medical practitioner	Procedure	[285.00]297.00	[285.00]297.00	[285.00]297.00	[285.00]297.00
0132	Anaesthetics Cat C – Specialist medical practitioner	Procedure	[425.00]445.00	[425.00]445.00	[425.00]445.00	[425.00]45.00
03	Dialysis					
0310	Haemo – Facility Fee	Weekly		[315.00]330.00	[315.00]330.00	[360.00]375.00
0311	Haemo Dialysis – General Medical Practitioner	Weekly	[60.00]62.00	[375.00]392.00	[375.00]392.00	[420.00]440.00
0312	Haemo Dialysis – Specialist Medical Practitioner	Weekly	[75.00]78.00	[390.00]407.00	[390.00]407.00	[435.00]455.00
0313	Haemo Dialysis – Nursing Practitioner	Weekly	50.00	[365.00]380.00	[360.00]380.00	[410.00]427.00
0320	Peritoneal Dialysis – Facility Fee	Weekly		50.00	50.00	[55.00]60.00
0321	Peritoneal Dialysis – General medical practitioner	Session	10.00	60.00	60.00	[65.00]70.00
0322	Peritoneal Dialysis – Specialist medical practitioner	Session	10.00	60.00	60.00	[65.00]70.00
0323	Peritoneal Dialysis – Nursing Practitioner	Session	10.00	60.00	60.00	[65.00]70.00?
0330	Plasmapheresis – Facility Fee	Session		[315.00]330.00	[315.00]330.00	[360.00]375.00
0331	Plasmapheresis – General Medical Practitioner	Session	60.00	[375.00]390.00	[375.00]390.00	[420.00]435.00
0332	Plasmapheresis – Specialist Medical Practitioner	Session	[75.00]80.00	[390.00]410.00	[390.00]410.00	[435.00]455.00
04	Medical Reports					
0410	Medical Report – Facility Fee	Report		[185.00]194.00	[185.00]194.00	[185.00]194.00
0411	Medical Report-General medical practitioner	Report	[435.00]456.00	[620.00]650.00	[620.00]650.00	[620.00]650.00
0412	Medical Report-Specialist medical practitioner	Report	[435.00]456.00	[620.00]650.00	[620.00]650.00	[587.00]620.00



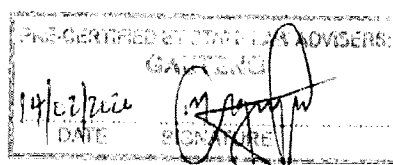
0420	Copy of Medical Report-Facility Fee			[185.00] 194.00	[185.00] 194.00	[185.00] 194.00
0421	Copies of Medical Report, Records, X-Rays, Completion of Certificates/Forms – General Medical Practitioner	Copy	[219.00] 230.00	[404.00] 424.00	[404.00] 424.00	[404.00] 424.00
0422	Copies of Medical Report, Records, X-Rays, Completion of Certificates/Forms – Specialist Medical Practitioner	Copy	[219.00] 230.00	[404.00] 424.00	[404.00] 424.00	[404.00] 424.00
0425	Copies of X-Ray Films, Ultrasounds etc.	Copy	[219.00] 230.00	[404.00] 424.00	[404.00] 424.00	[404.00] 424.00
0430	Functional Assessment Report-Facility Fee	Report		[302.00] 317.00	[302.00] 317.00	[369.00] 387.00
0431	Functional Assessment Report-General medical practitioner	Report	[853.00] 895.00	[1155.00] 1212.00	[1155.00] 1212.00	[1222.00] 1282.00
0432	Functional Assessment Report-Specialist medical practitioner	Report	[1742.00] 1827.00	[2044.00] 2144.00	[2044.00] 2144.00	[2111.00] 2214.00
0434	Functional Assessment Report-Allied health practitioner	Report	[853.00] 895.00	[1155.00] 1212.00	[1155.00] 1212.00	[1222.00] 1282.00
0440	Copies of Specialised Radiology (MRI, CT & Nuclear)	Report		[1111.00] 1165.00	[1111.00] 1165.00	[1111.00] 1165.00
05	Imaging					
0510	Radiology, Cat A – Facility Fee	Procedure		15.00	15.00	20.00
0511	Radiology, Cat A – General medical practitioner	Procedure	15.00	30.00	30.00	35.00
0512	Radiology, Cat A – Specialist medical practitioner	Procedure	30.00	45.00	45.00	50.00
0514	Radiology, Cat A – Allied health practitioner	Procedure	15.00	30.00	30.00	35.00
0520	Radiology, Cat B – Facility Fee	Procedure		45.00	45.00	50.00
0521	Radiology, Cat B – General medical practitioner	Procedure	45.00	[85.00] 90.00	[85.00] 90.00	95.00
0522	Radiology, Cat B – Specialist medical practitioner	Procedure	[80.00] 85.00	[125.00] 130.00	[125.00] 130.00	[130.00] 135.00
0524	Radiology, Cat B – Allied health practitioner	Procedure	40.00	85.00	85.00	90.00
0530	Radiology, Cat C – Facility Fee	Procedure		[100.00] 105.00	[100.00] 105.00	[115.00] 120.00
0531	Radiology, Cat C – General medical practitioner	Procedure	[65.00] 70.00	[165.00] 175.00	[165.00] 175.00	[180.00] 190.00
0532	Radiology, Cat C – Specialist medical practitioner	Procedure	[200.00] 210.00	[300.00] 315.00	[300.00] 315.00	[315.00] 330.00
0540	Radiology, Cat D – Facility Fee	Procedure		[200.00] 215.00	[200.00] 215.00	[230.00] 245.00
0541	Radiology, Cat D – General medical practitioner	Procedure	[130.00] 135.00	[330.00] 350.00	[330.00] 350.00	[360.00] 380.00
0542	Radiology, Cat D – Specialist medical practitioner	Procedure	[400.00] 420.00	[600.00] 635.00	[600.00] 635.00	[630.00] 665.00
0550	Radiology, Cat E – Facility Fee	Procedure		[515.00] 540.00	[515.00] 540.00	[590.00] 620.00



0551	Radiology, Cat E – General Medical Practitioner	Procedure	[480.00] <u>500.00</u>	[995.00] <u>1040.00</u>	[995.00] <u>1040.00</u>	[1070.00] <u>1120.00</u>
0552	Radiology, Cat E – Specialist Practitioner	Procedure	[1000.00] <u>1045.00</u>	[1515.00] <u>1585.00</u>	[1515.00] <u>1585.00</u>	[1590.00] <u>1665.00</u>
06	In-patients					
0610	In-patient General ward – Facility Fee	Day		60.00	85.00	165.00
0611	In-patient General Ward – General medical practitioner	Day	10.00	70.00	95.00	1175.00
0612	In-patient General Ward – Specialist medical practitioner	Day	20.00	80.00	105.00	185.00
0620	In-Spatient High care – Facility Fee	Day		90.00	110.00	165.00
0621	In-patient High Care – General medical practitioner	Day	5.00	95.00	115.00	170.00
0622	In-patient High Care – Specialist medical practitioner	Day	10.00	100.00	110.00	175.00
0630	In-patient Intensive care – Facility Fee	Day		285.00	285.00	345.00
0631	In-patient Intensive Care – General medical practitioner	Day	5.00	290.00	290.00	350.00
0632	In-patient Intensive Care– Specialist medical practitioner	Day	10.00	295.00	295.00	355.00
0640	In-patient Chronic care – Facility Fee	Day		30.00	30.00	30.00
0641	In-patient Chronic care – General medical practitioner	Day	5.00	35.00	35.00	35.00
0642	In-patient Chronic care – Specialist medical practitioner	Day	10.00	45.00	45.00	45.00
0643	In-patient Chronic care – Nursing practitioner	Day	5.00	35.00	35.00	35.00
0650	Day patient – Facility Fee	Day		50.00	50.00	85.00
0651	Day patient – General medical practitioner	Day	10.00	60.00	60.00	95.00
0652	Day patient – Specialist medical practitioner	Day	20.00	70.00	80.00	105.00
0653	Day patient – Nursing practitioner	Day	5.00	55.00	65.00	90.00
0660	In-patient Boarder/Patient companion – Facility Fee	Day		25.00	25.00	25.00
0663	In-patient Boarder/Patient Companion – Nursing Practitioner	Day	5.00	30.00	30.00	30.00
06100	Inpatient Specialised Intensive Care Paediatric – Facility Fee	12 Hours		455.00	455.00	455.00
06101	Inpatient Specialised Intensive Care Paediatric – General medical practitioner	12 Hours	20.00	475.00	475.00	475.00
06102	Inpatient Specialised Intensive Care Paediatric– Specialist medical practitioner	12 Hours	40.00	495.00	495.00	495.00
06200	Inpatient Specialised Intensive Care Neonatal – Facility Fee	12 Hours		610.00	610.00	610.00



06201	Inpatient Specialised Intensive Care Neonatal – General medical practitioner	12 Hours	25.00	635.00	635.00	635.00
06202	Inpatient Specialised Intensive Care Neonatal– Specialist medical practitioner	12 Hours	50.00	660.00	660.00	660.00
07	Mortuary					
0710	Mortuary Facility Fee	Day		[205.00]215.00	[205.00]215.00	[232.00]243.00
0720	Cremation Certificate Facility Fee	Certificate		[205.00]215.00	[205.00]215.00	[23200]243.00
08	Pharmaceutical	Procedure				
0810	Medication Fee-Facility Fee	Prescription		[7.00]8.00	[7.00]8.00	[11.00]12.00
09	Oral Health					
0910	Oral Care A-Facility Fee	Procedure		5.00	5.00	[5.00]10.00
0911	Oral care Cat A –General practitioner	Procedure	10.00	[20.00]15.00	[20.00]15.00	[20.00]20.00
0912	Oral Care Cat A- Specialist practitioner	Procedure	10.00	15.00	15.00	[15.00]20.00
0914	Oral Care Cat A – Allied health practitioner	Procedure	5.00	10.00	10.00	[10.00]15.00
0920	Oral Care Cat B – Facility Fee	Procedure		20.00	20.00	25.00
0921	Oral Care Cat B – General practitioner	Procedure	20.00	40.00	40.00	45.00
0922	Oral Health Cat B – Specialist practitioner	Procedure	35.00	55.00	55.00	60.00
0924	Oral Care Cat B – Allied health practitioner	Procedure	20.00	40.00	40.00	45.00
0930	Oral Care Cat C – Facility Fee	Procedure		[115.00]120.00	[115.00]120.00	[130.00]135.00
0931	Oral Care Cat C – General practitioner	Procedure	[125.00]130.00	[240.00]250.00	[245.00]250.00	[255.00]350.00
0932	Oral Care Cat C – Specialist Practitioner	Procedure	[215.00]225.00	[330.00]345.00	[330.00]345.00	[345.00]360.00
0940	Oral Care Cat D – Facility Fee	Procedure		[445.00]465.00	[445.00]465.00	[510.00]535.00
0941	Oral Care Cat D – General practitioner	Procedure	[385.00]400.00	[830.00]865.00	[830.00]865.00	[895.00]935.00
0942	Oral Care Cat D – Specialist practitioner	Procedure	[790.00]830.00	[1235.00]1295.00	[1235.00]1295.00	[1300.00]1365.00
0950	Oral Care Cat E – Facility Fee	Procedure		[1500.00]1570.00	[1500.00]1570.00	[1715.00]1800.00
0951	Oral Care Cat E – General practitioner	Procedure	[1290.00]1355.00	[2790.00]2925.00	[2790.00]2925.00	[3005.00]3155.00
0952	Oral Care Cat E – Specialist practitioner	Procedure	[2650.00]2780.00	[4150.00]4350.00	[4150.00]4350.00	[4365.00]4580.00
10	Consultations					
1010	Outpatient Consultation-Facility Fee	Visit		20.00	20.00	25.00



1011	Outpatient Consultation- General medical practitioner	Visit	20.00	40.00	40.00	45.00
1012	Outpatient Consultation- Specialist medical practitioner	Visit	50.00	70.00	70.00	75.00
1013	Outpatient Consultation- Nursing practitioner	Visit	15.00	35.00	35.00	40.00
1014	Outpatient Consultation-Allied health practitioner	Visit	15.00	35.00	35.00	40.00
1020	Emergency Consultation- Facility Fee	Visit		40.00	40.00	50.00
1021	Emergency Consultation- General medical practitioner	Visit	35.00	75.00	75.00	85.00
1022	Emergency Consultation- Specialist medical practitioner	Visit	[75.00] 80.00	[115.00] 120.00	[115.00] 120.00	[125.00] 130.00?
1023	Emergency Consultation- Nursing practitioner	Visit	20.00	60.00	60.00	70.00
1024	Emergency Consultation- Allied health practitioner	Visit	20.00	60.00	60.00	70.00
1030	Follow-Up Outpatient Consultation-Facility Fee			20.00	20.00	25.00
1031	Follow-Up Outpatient Consultation-General medical Practitioner		20.00	40.00	40.00	45.00
1032	Follow-Up Outpatient Consultation-Specialist medical Practitioner		50.00	70.00	70.00	75.00
1033	Follow-Up Outpatient Consultation-Nursing Practitioner		[10.00] 15.00	[30.00] 35.00	[30.00] 35.00	[35.00] 40.00
1034	Follow-Up Outpatient Consultation-Allied health practitioner		[10.00] 15.00	[30.00] 35.00	[30.00] 35.00	[35.00] 40.00
11	Minor Theatre Procedure					
1110	Minor Procedure Cat A – Facility Fee	Procedure		[95.00] 100.00	[95.00] 100.00	[110.00] 120.00
1111	Minor Procedure Cat A – General Medical Practitioner	Procedure	35.00	[30.00] 135.00	[130.00] 135.00	[145.00] 155.00
1112	Minor Procedure Cat A – Specialist Medical Practitioner	Procedure	65.00	[160.00] 165.00	[160.00] 165.00	[175.00] 185.00
1120	Minor Procedure Cat B – Facility Fee	Procedure		[95.00] 100.00	[95.00] 100.00	[115.00] 120.00
1121	Minor Procedure Cat B - General Medical Practitioner	Procedure	[65.00] 50.00	[160.00] 150.00	[160.00] 150.00	[180.00] 170.00
1122	Minor Procedure Cat B - Specialist Medical Practitioner	Procedure	[110.00] 115.00	[205.00] 215.00	[205.00] 215.00	[225.00] 235.00
1130	Minor Procedure Cat C – Facility Fee	Procedure		[95.00] 100.00	[95.00] 100.00	[115.00] 120.00
1131	Minor Procedure Cat C - General Medical Practitioner	Procedure	[75.00] 80.00	[170.00] 180.00	[170.00] 180.00	[190.00] 200.00
1132	Minor Procedure Cat C - Specialist Medical Practitioner	Procedure	[170.00] 180.00	[265.00] 280.00	[265.00] 280.00	[285.00] 300.00
1140	Minor Procedure Cat D – Facility Fee	Procedure		[95.00] 100.00	[95.00] 100.00	[115.00] 120.00

14/02/2020
DATE
SIGNATURE
M. F. J. J. J.

1141	Minor Procedure Cat D - General Medical Practitioner	Procedure	[200.00]210.00	[295.00]310.00	[295.00]310.00	[315.00]330.00
1142	Minor Procedure Cat D - Specialist Medical Practitioner	Procedure	[450.00]475.00	[540.00]575.00	[540.00]575.00	[565.00]595.00
12	Major Theatre Procedures					
1210	Theatre Procedure Cat A – Facility Fee	Procedure		[305.00]320.00	[445.00]470.00	[515.00]540.00
1211	Theatre Procedure Cat A – General medical practitioner	Procedure	35.00	[340.00]355.00	[480.00]505.00	[550.00]575.00
1212	Theatre Procedure Cat A – Specialist medical practitioner	Procedure	65.00	[370.00]385.00	[510.00]535.00	[580.00]605.00
1220	Theatre Procedure Cat B – Facility Fee	Procedure		[460.00]485.00	[675.00]710.00	[780.00]815.00
1221	Theatre Procedure Cat B – General medical practitioner	Procedure	50.00	[510.00]535.00	[725.00]760.00	[830.00]865.00
1222	Theatre Procedure Cat B – Specialist medical practitioner	Procedure	[110.00]115.00	[570.00]600.00	[785.00]875.00	[890.00]930.00
1230	Theatre Procedure Cat C – Facility Fee	Procedure		[790.00]830.00	[1160.00]1220.00	[1345.00]1405.00
1231	Theatre Procedure Cat C – General medical practitioner	Procedure	[75.00]80.00	[865.00]910.00	[1235.00]1300.00	[1420.00]1485.00
1232	Theatre Procedure Cat C – Specialist medical practitioner	Procedure	[170.00]180.00	[960.00]1090.00	[1330.00]1480.00	[1515.00]1585.00
1240	Theatre Procedure Cat D – Facility Fee	Procedure		[2030.00]2130.00	[2980.00]3125.00	[3430.00]3600.00
1241	Theatre Procedure Cat D – General medical practitioner	Procedure	[200.00]210.00	[2230.00]2340.00	[3180.00]3335.00	[3630.00]3810.00
1242	Theatre Procedure Cat D – Specialist medical practitioner	Procedure	[670.00]700.00	[2698.00]2830.00	[3646.00]3825.00	[4100.00]4300.00
1250	Theatre Procedure Cat E – Facility Fee	Procedure		[2840.00]2980.00	[4170.00]4370.00	[4805.00]5040.00
1251	Theatre Procedure Cat E – General medical practitioner	Procedure	[280.00]295.00	[3120.00]3275.00	[4450.00]4665.00	[5085.00]5335.00
1252	Theatre Procedure Cat E – Specialist medical practitioner	Procedure	[635.00]665.00	[3475.00]3645.00	[4805.00]5035.00	[5440.00]5705.00
13	Treatments					
1310	Supplementary Health Treatment – Facility Fee	Contact		10.00	10.00	15.00
1313	Supplementary Health Treatment – Nursing Practitioner	Contact	10.00	20.00	20.00	25.00
1314	Supplementary Health Treatment – Allied health practitioner	Contact	10.00	20.00	20.00	25.00
1320	Supplementary Health Group Treatment – Facility Fee	Contact		10.00	10.00	10.00
1324	Supplementary Health Group Treatment – Allied health practitioner		10.00	20.00	20.00	25.00

PREPARED BY: [Signature]
 DATE: 14/02/2020
 ADVISERS: [Signature]

14	Emergency Medical Services	100km			
1410	Patient transport service – Facility Fee	50km	} See Administrator's Notice No. 646 of 29 August 1958		
1420	Basic life support – Facility Fee	50km			
1430	Intermediate life support – Facility Fee	50km			
1440	Advanced life support – Facility Fee	Once Off			
1450	Emergency service standby – Facility Fee	Hour			
1451	Emergency service standby – General medical practitioner	Hour			
1452	Emergency service standby – Specialist medical practitioner	Hour			
1453	Emergency service standby – Nursing practitioner	Hour			
1454	Emergency service standby – Allied health practitioner	Once Off			
1460	Rescue – Facility Fee (15%)	Incident			
1461	Rescue – General medical practitioner	Incident			
1462	Rescue – Specialist medical practitioner	Incident	}		
1463	Rescue – Nursing practitioner	Incident			
1464	Rescue – Allied health practitioner	Incident			
15	Assistive Devices & Prosthesis				
1510	Assistive Devices & Prosthesis – Item Fee	Item	20% of the cost of the relevant device or prosthesis, rounded to the nearest		
1520	Prosthetic Devices – Item Fee	Item		R5	
1530	Dental Items – Item Fee	Item			
1540	Assistive Devices, Prosthesis, Dental and Optical-Repairs	Item			
1550	Optical Devices-Item Fee				
16	Cosmetic Surgery				
1610	Cosmetic Surgery Cat A – Facility Fee	Procedure	[3204.00]	[3361.00]	[3204.00] [3361.00] [3659.00] [3838.00]
1611	Cosmetic Surgery Cat A – General practitioner	Procedure	[1847.00]	[1938.00]	[5051.00] [5298.00] [5051.00] [5298.00] [5506.00] [5776.00]
1612	Cosmetic Surgery Cat A – Specialist practitioner	Procedure	[2766.00]	[2902.00]	[5970.00] [6263.00] [5970.00] [6263.00] [6425.00] [6740.00]
1620	Cosmetic Surgery Cat B – Facility Fee	Procedure	[7203.00]	[7556.00]	[7203.00] [7556.00] [8233.00] [8636.00]
1621	Cosmetic Surgery Cat B – General practitioner	Procedure	[2188.00]	[2295.00]	[9391.00] [9851.00] [9391.00] [9851.00] [10421.00] [10932.00]
1622	Cosmetic Surgery Cat B – Specialist practitioner	Procedure	[3283.00]	[3444.00]	[10486.00] [11000.00] [10486.00] [11000.00] [11516.00] [12080.00]
1630	Cosmetic Surgery – Cat C –	Procedure	[11634.00]	[12204.00]	[11634.00] [12204.00] [13297.00] [13949.00]

THE DESIGNATED CLINICAL ADVISERS:
 DATE 14/02/2020
 SIGNATURE [Signature]

	Facility Fee					
1631	Cosmetic Surgery Cat C – General practitioner	Procedure	[3699.00]3880.00	[15333.00]16084.00	[15333.00]16084.00	[16996.00]17829.00
1632	Cosmetic Surgery Cat C – Specialist practitioner	Procedure	[5548.00]5820.00	[17182.00]18024.00	[17182.00]18024.00	[18845.00]19768.00
1640	Cosmetic Surgery Cat D – Facility Fee	Procedure		[19652.00]20615.00	[19652.00]20615.00	[22458.00]23558.00
1641	Cosmetic Surgery Cat D – General practitioner	Procedure	[4150.00]4353.00	[23802.00]24968.00	[23802.00]24968.00	[26608.00]27912.00
1642	Cosmetic Surgery Cat D – Specialist practitioner	Procedure	[6107.00]6406.00	[25759.00]27021.00	[25759.00]27021.00	[28565.00]29965.00
18	Radiation Oncology					
1800	Radiation Oncology (NHRPL less VAT)	Items				
19	Nuclear Medicine					
1900	Itemisation of isotopes					
1910	Nuclear Medicine Cat A – Facility Fee			[145.00]150.00	[145.00]150.00	[145.00]150.00
1912	Nuclear Medicine Cat A – Specialist medical practitioner	Procedure	[70.00]75.00	[215.00]225.00	[215.00]225.00	[215.00]225.00
1920	Nuclear Medicine Cat B – Facility Fee	Procedure		[145.00]150.00	[145.00]150.00	[145.00]150.00
1922	Nuclear Medicine Cat B – Specialist medical practitioner	Procedure	[215.00]225.00	[360.00]375.00	[360.00]375.00	[360.00]375.00
1930	Nuclear Medicine Cat C – Facility Fee	Procedure		[145.00]150.00	[145.00]150.00	[145.00]150.00
1932	Nuclear Medicine Cat C – Specialist medical practitioner	Procedure	[430.00]450.00	[575.00]600.00	[575.00]600.00	[575.00]600.00
1940	Nuclear Medicine Cat D – Facility Fee	Procedure		[145.00]150.00	[145.00]150.00	[145.00]150.00
1942	Nuclear Medicine Cat D – Specialist medical practitioner	Procedure	[645.00]675.00	[790.00]825.00	[790.00]825.00	[790.00]825.00
1950	Positron Emission Tomography (PET) Cat E – Facility Fee	Procedure		[1535.00]1610.00	[1535.00]1610.00	[1535.00]1610.00
1952	Positron Emission Tomography (PET) Cat E – Specialist medical practitioner	Procedure	[840.00]880.00	[2375.00]2490.00	[2375.00]2490.00	[2375.00]2490.00
20	Ambulatory Procedures					
2010	Ambulatory Procedure Cat A – Facility Fee	Procedure		30.00	30.00	40.00
2011	Ambulatory Procedure Cat A – General medical practitioner	Procedure	10.00	40.00	40.00	50.00
2012	Ambulatory Procedure Cat A – Specialist medical practitioner	Procedure	20.00	50.00	50.00	60.00
2013	Ambulatory Procedure Cat A – Nursing practitioner	Procedure	10.00	40.00	40.00	50.00
2014	Ambulatory Procedure Cat A – Allied Health Worker	Procedure	10.00	40.00	40.00	50.00
2020	Ambulatory Procedure Cat B – Facility Fee	Procedure		30.00	30.00	40.00

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2021	Ambulatory Procedure Cat B – General medical practitioner	Procedure	15.00	45.00	45.00	55.00
2022	Ambulatory Procedure Cat B – Specialist Medical Practitioner	Procedure	25.00	55.00	55.00	65.00
2023	Ambulatory Procedure Cat B – Nursing Practitioner		10.00	40.00	40.00	50.00
2024	Ambulatory Procedure Cat B – Allied Health Worker	Procedure	10.00	40.00	40.00	50.00
21	Blood and Blood Products (SANBS)					
2100	Blood and Blood Product	Varies				
22	Hyperbaric Oxygen Therapy					
2200	Hyperbaric Oxygen Therapy-Facility Fee (Flat Fee)	Session		[105.00]110.00	[105.00]110.00	[105.00]110.00
2210	Hyperbaric Oxygen Therapy-Facility Fee	Session		[315.00]330.00	[315.00]330.00	[315.00]330.00
2211	Hyperbaric Oxygen Therapy-General medical practitioner	Session	[135.00]140.00	[450.00]470.00	[450.00]470.00	[450.00]470.00
2212	Hyperbaric Oxygen Therapy-Specialist medical practitioner	Session	[135.00]140.00	[450.00]470.00	[450.00]470.00	[450.00]470.00
2220	Emergency Hyperbaric Oxygen Therapy-Facility Fee	Session	[135.00]140.00	[450.00]470.00	[450.00]470.00	[450.00]470.00
2221	Emergency Hyperbaric Oxygen Therapy-General medical practitioner	Session		[320.00]335.00	[320.00]335.00	[320.00]335.00
2222	Emergency Hyperbaric Oxygen Therapy-Specialist medical practitioner	Session	[195.00]205.00	[515.00]540.00	[515.00]540.00	[515.00]540.00
		Session	[195.00]205.00	[515.00]540.00	[515.00]540.00	[515.00]540.00
23	Consumables (Not included in the Facility Fee) Buy-Outs					
2300	Consumables not included in the Facility Fee	Item	Varies			
24	Autopsies					
2410	Autopsy-Facility Fee	Per Case		[100.00]104.00	[100.00]104.00	[100.00]125.00
2411	Autopsy-General medical practitioner	Per Case	[110.00]115.00	[210.00]219.00	[210.00]219.00	[230.00]240.00
2412	Autopsy-Specialist medical practitioner	Per Case	[255.00]266.00	[355.00]370.00	[355.00]370.00	[375.00]391.00
25	Port Health and Travel Clinics					
2510	Consultation-Facility Fee	Visit		[119.00]125.00	[119.00]125.00	[119.00]125.00
2511	Consultation-General practitioner	Visit	[110.00]115.00	[229.00]240.00	[229.00]240.00	[229.00]240.00
2513	Consultation-Nursing practitioner	Visit	[63.00]66.00	[182.00]191.00	[182.00]191.00	[182.00]191.00
2520	Emergency Consultation-Facility Fee	Visit		[240.00]252.00	[240.00]252.00	[240.00]252.00
2521	Emergency Consultation-General medical practitioner	Visit	[167.00]175.00	[407.00]427.00	[407.00]427.00	[407.00]427.00
2523	Emergency Consultation-Nursing practitioner	Visit	[97.00]102.00	[337.00]354.00	[337.00]354.00	[337.00]354.00
0810	Medication Fee-Facility Fee	Visit		[36.00]38.00	[36.00]38.00	[44.00]46.00

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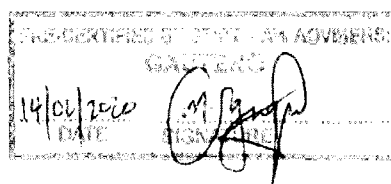
14/02/2020

Substitution of Annexure 2A of Schedule B to Regulations

4. The following Annexure is hereby substituted for Annexure 2A of Schedule B to the Regulations:

"ANNEXURE 2A OF SCHEDULE B**UPFS [2019]2020 FEE SCHEDULE FOR H3 (SELF FUNDED PATIENTS)**

CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE R	FACILITY TOTAL FEE IN BOLD		
				LEVEL 1 R	LEVEL 2 R	LEVEL 3 R
01	Anesthetics					
0111	Anaesthetics Cat A – General medical practitioner	Procedure	[71.00]74.00	[71.00]74.00	[71.00]74.00	[71.00]74.00
0112	Anaesthetics Cat A – Specialist medical practitioner	Procedure	[106.00]112.00	[106.00]112.00	[106.00]112.00	[106.00]112.00
0121	Anaesthetics Cat B – General medical practitioner	Procedure	[121.00]127.00	[121.00]127.00	[121.00]127.00	[121.00]127.00
0122	Anaesthetics Cat B – Specialist medical practitioner	Procedure	[182.00]191.00	[182.00]191.00	[182.00]191.00	[182.00]191.00
0131	Anaesthetics Cat C – General medical practitioner	Procedure	[425.00]445.00	[425.00]445.00	[425.00]445.00	[425.00]445.00
0132	Anaesthetics Cat C – Specialist medical practitioner	Procedure	[637.00]668.00	[637.00]668.00	[637.00]668.00	[637.00]668.00
03	Dialysis					
0310	Haemo – Facility Fee	Day		[470.00]493.00	[470.00]493.00	[538.00]565.00
0311	Haemo-dialysis – General medical practitioner	Day	[89.00]93.00	[559.00]586.00	[559.00]586.00	[627.00]658.00
0312	Haemo-dialysis – Specialist medical practitioner	Day	[112.00]117.00	[582.00]610.00	[582.00]610.00	[650.00]682.00
0313	Haemo-dialysis Nursing Practitioner	Day	[72.00]76.00	[542.00]568.00	[542.00]568.00	[610.00]640.00
0320	Peritoneal Dialysis – Facility Fee	Session		[73.00]76.00	[73.00]76.00	[82.00]87.00
0321	Peritoneal Dialysis – General medical practitioner	Session	15.00	[88.00]92.00	[88.00]92.00	[97.00]102.00
0322	Peritoneal dialysis-Specialist Medical practitioner	Session	[17.00]18.00	[90.00]94.00	[90.00]94.00	[99.00]105.00
0323	Peritoneal dialysis-Nursing Practitioner	Session	10.00	[83.00]87.00	[83.00]87.00	[92.00]97.00
0330	Plasmapheresis-Facility Fee	Session		[470.00]493.00	[470.00]493.00	[538.00]565.00
0331	Plasmapheresis-General medical practitioner	Session	[89.00]93.00	[559.00]586.00	[559.00]586.00	[627.00]658.00
0332	Plasmapheresis-Specialist Medical Practitioner	Session	[112.00]117.00	[582.00]610.00	[582.00]610.00	[650.00]682.00
04	Medical Reports					
0410	Medical Report-Facility Fee	Report		[185.00]194.00	[185.00]194.00	[185.00]194.00
0411	Medical Report-General medical practitioner	Report	[435.00]456.00	[620.00]650.00	[620.00]650.00	[620.00] 650.00



0412	Medical Report – Specialist medical practitioner	Report	[435.00]456.00	[620.00]650.00	[620.00]650.00	[620.00]650.00
0420	Copy of Medical Report- Facility Fee			[185.00]194.00	[185.00]194.00	[185.00]194.00
0421	Copies of Medical Report, Records, X ray, Completion of certificates/Form-Specialist medical practitioner	Copies	[219.00]230.00	[404.00]424.00	[404.00]424.00	[404.00]424.00
0422	Copies of Medical Report, Records, X ray, Completion of certificates/Form-Specialist medical practitioner	Copies	[219.00]230.00	[404.00]424.00	[404.00]424.00	[404.00]424.00
0425	Copies of X ray, ultrasounds etc.	Copies	[219.00]230.00	[404.00]424.00	[404.00]424.00	[404.00]424.00
0430	Functional Assessment Report	Reports		[302.00]317.00	[302.00]317.00	[369.00]387.00
0431	Functional Assessment Report-General medical practitioner	Reports	[853.00]895.00	[1155.00]1212.00	[1155.00]1212.00	[1222.00]1282.00
0432	Functional Assessment Report-Specialist medical practitioner	Reports	[1742.00]1827.00	[2044.00]2144.00	[2044.00]2144.00	[2111.00]2214.00
0434	Functional assessment Report- Allied health practitioner	Reports	[853.00]895.00	[1155.00]1212.00	[1155.00]1212.00	[1222.00]1282.00
0440	Copies of Specialised Radiology (MRI, CT & Nuclear)	Copy		[1111.00]1165.00	[1111.00]1165.00	[1111.00]1165.00
05	Imaging					
0510	Radiology, Cat A – Facility Fee	Procedure		[24.00]25.00	[24.00]25.00	[27.00]28.00
0511	Radiology, Cat A – General medical practitioner	Procedure	[23.00]25.00	[47.00]50.00	[47.00]50.00	[50.00]53.00
0512	Radiology, Cat A – Specialist medical practitioner	Procedure	[44.00]46.00	[68.00]71.00	[68.00]71.00	[71.00]74.00
0514	Radiology, Cat A – Allied health practitioner	Procedure	[23.00]24.00	[47.00]49.00	[47.00]49.00	[50.00]52.00
0520	Radiology, Cat B – Facility Fee	Procedure		[66.00]69.00	[66.00]69.00	[75.00]79.00
0521	Radiology, Cat B – General medical practitioner	Procedure	[63.00]66.00	[129.00]135.00	[129.00]135.00	[138.00]145.00
0522	Radiology, Cat B – Specialist medical practitioner	Procedure	[123.00]129.00	[189.00]198.00	[189.00]198.00	[198.00]207.00
0524	Radiology, Cat B – Allied health practitioner	Procedure	[61.00]65.00	[127.00]133.00	[127.00]133.00	[136.00]143.00
0530	Radiology, Cat C – Facility Fee	Procedure		[152.00]160.00	[152.00]160.00	[174.00]182.00
0531	Radiology, Cat C – General medical practitioner	Procedure	[98.00]103.00	[250.00]262.00	[250.00]262.00	[272.00]285.00
0532	Radiology, Cat C – Specialist medical practitioner	Procedure	[300.00]315.00	[452.00]474.00	[452.00]474.00	[474.00]497.00
0540	Radiology, Cat D – Facility Fee	Procedure		[304.00]319.00	[304.00]319.00	[347.00]362.00
0541	Radiology, Cat D – General medical practitioner	Procedure	[195.00]204.00	[499.00]523.00	[499.00]523.00	[542.00]568.00
0542	Radiology, Cat D – Specialist Practitioner	Procedure	[599.00]628.00	[903.00]947.00	[903.00]947.00	[946.00]992.00

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0550	Radiology, Cat E – Facility Fee	Procedure		[775.00]813.00	[775.00]813.00	[886.00]929.00
0551	Radiology, Cat E – General medical practitioner	Procedure	[717.00]752.00	[1492.00]1565.00	[1492.00]1565.00	[1603.00]1681.00
0552	Radiology, Cat E – Specialist Practitioner	Procedure	[1496.00]1569.00	[2271.00]2381.00	[2271.00]2381.00	[2382.00]2498.00
06	In-patients					
0610	In-patient General ward – Facility Fee	Day		[241.00]253.00	[307.00]322.00	[580.00]609.00
0611	In-patient General Ward – General medical practitioner	Day	[50.00]53.00	[291.00]306.00	[357.00]374.00	[630.00]661.00
0612	In-patient General Ward – Specialist medical practitioner	Day	[87.00]92.00	[328.00]345.00	[394.00]414.00	[667.00]701.00
0620	In-patient High care – Facility Fee	12 hours		[374.00]392.00	[467.00]490.00	[669.00]701.00
0621	In-patient High Care – General medical practitioner	12 hours	[26.00]27.00	[400.00]419.00	[493.00]517.00	[695.00]729.00
0622	In-patient High Care – Specialist medical practitioner	12 hours	[50.00]52.00	[424.00]444.00	[517.00]542.00	[719.00]754.00
0630	In-patient Intensive care – Facility Fee	12 hours		[615.00]644.00	[615.00]644.00	[733.00]770.00
0631	In-patient Intensive Care – General medical practitioner	12 hours	[15.00]16.00	[630.00]660.00	[630.00]660.00	[7748.00]786.00
0632	In-patient Intensive Care – Specialist medical practitioner	12 hours	[28.00]29.00	[643.00]673.00	[643.00]673.00	[761.00]799.00
0640	In-patient Chronic care – Facility Fee	Day		[141.00]148.00	[141.00]148.00	[141.00]148.00
0641	In-patient Chronic care – General medical practitioner	Day	[16.00]17.00	[157.00]166.00	[157.00]166.00	[157.00]166.00
0642	In-patient Chronic care – Specialist medical practitioner	Day	[38.00]40.00	[179.00]189.00	[179.00]189.00	[179.00]189.00
0643	In-patient Chronic care – Nursing practitioner	Day	10.00	[151.00]159.00	[151.00]159.00	[151.00]159.00
0650	Day patient – Facility Fee	Day		[201.00]210.00	[253.00]266.00	[371.00]389.00
0651	Day patient – General medical practitioner	Day	[50.00]53.00	[251.00]263.00	[303.00]318.00	[421.00]442.00
0652	Day patient – Specialist medical practitioner	Day	[87.00]92.00	[288.00]302.00	[340.00]357.00	[458.00]481.00
0653	Day patient – Nursing practitioner	Day	[29.00]31.00	[230.00]241.00	[282.00]296.00	[400.00]419.00
0660	In-patient Boarder/Patient companion – Facility Fee	Day		[115.00]121.00	[115.00]121.00	[115.00]121.00
0663	In-patient Boarder/Patient Companion – Nursing Practitioner	Day	10.00	[125.00]131.00	[125.00]131.00	[125.00]131.00
06100	Inpatient Specialised Intensive Care Paediatric – Facility Fee	12 Hours		[1956.00]2052.00	[1956.00]2052.00	[1956.00]2052.00
06101	Inpatient Specialised Intensive Care Paediatric – General medical practitioner	12 Hours	[87.00]92.00	[2043.00]2143.00	[2043.00]2143.00	[2043.00]2143.00
06102	Inpatient Specialised Intensive Care Paediatric – Specialist medical practitioner	12 Hours	[166.00]174.00	[2122.00]2226.00	[2122.00]2226.00	[2122.00]2226.00

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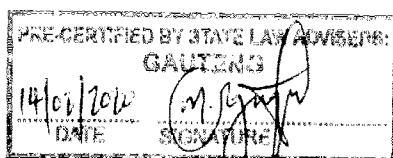
0930	Oral Care Cat C – Facility Fee	Procedure		[169.00]178.00	[169.00]178.00	[195.00]204.00
0931	Oral Care Cat C – General practitioner	Procedure	[188.00]197.00	[357.00]374.00	[357.00]374.00	[383.00]401.00
0932	Oral Care Cat C – Specialist practitioner	Procedure	[323.00]338.00	[492.00]516.00	[492.00]516.00	[518.00]542.00
0940	Oral Care Cat D – Facility Fee	Procedure		[667.00]700.00	[667.00]700.00	[764.00]802.00
0941	Oral Care Cat D – General practitioner	Procedure	[576.00]605.00	[1243.00]1305.00	[1243.00]1305.00	[1340.00]1406.00
0942	Oral Care Cat D – Specialist practitioner	Procedure	[1182.00]1240.00	[1849.00]1940.00	[1849.00]1940.00	[1946.00]2042.00
0950	Oral Care Cat E – Facility Fee	Procedure		[2249.00]2359.00	[2249.00]2359.00	[2570.00]2696.00
0951	Oral Care Cat E – General practitioner	Procedure	[1938.00]2033.00	[4187.00]4392.00	[4187.00]4392.00	[4508.00]4729.00
0952	Oral Care Cat E – Specialist practitioner	Procedure	[3977.00]4172.00	[6226.00]6531.00	[6226.00]6531.00	[6547.00]6868.00
10	Consultations					
1010	Outpatient Consultation – Facility Fee	Visit		[30.00]31.00	[30.00]31.00	[36.00]37.00
1011	Outpatient Consultation – General medical practitioner	Visit	[33.00]35.00	[63.00]66.00	[63.00]66.00	[69.00]72.00
1012	Outpatient Consultation – Specialist medical practitioner	Visit	[76.00]80.00	[106.00]111.00	[106.00]111.00	[112.00]117.00
1013	Outpatient Consultation – Nursing practitioner	Visit	[19.00]20.00	[49.00]51.00	[49.00]51.00	[55.00]57.00
1014	Outpatient Consultation – Allied health practitioner	Visit	[20.00]20.00	[50.00]52.00	[50.00]52.00	[56.00]58.00
1020	Emergency Consultation – Facility Fee	Visit		[60.00]63.00	[60.00]63.00	[72.00]76.00
1021	Emergency Consultation – General medical practitioner	Visit	[50.00]53.00	[110.00]115.00	[110.00]115.00	[122.00]128.00
1022	Emergency Consultation – Specialist medical practitioner	Visit	[114.00]120.00	[174.00]183.00	[174.00]183.00	[186.00]195.00
1023	Emergency Consultation – Nursing practitioner	Visit	[29.00]31.00	[89.00]93.00	[89.00]93.00	[101.00]106.00
1024	Emergency Consultation – Allied health practitioner	Visit	[30.00]31.00	[90.00]94.00	[90.00]94.00	[102.00]107.00
1030	Follow up Outpatient Consultation-Facility Fee	Visit		[30.00]31.00	[30.00]31.00	[36.00]37.00
1031	Follow up Outpatient Consultation-General medical practitioner	Visit	[33.00]35.00	[63.00]66.00	[63.00]66.00	[69.00]72.00
1032	Follow up Outpatient Consultation-Specialist medical practitioner	Visit	[76.00]80.00	[106.00]111.00	[106.00]111.00	[112.00]117.00
1033	Follow up Outpatient Consultation-Nursing practitioner	Visit	[19.00]20.00	[49.00]51.00	[49.00]51.00	[55.00]57.00
1034	Follow up Outpatient Consultation-Allied health practitioner	Visit	[20.00]20.00	[50.00]52.00	[50.00]52.00	[56.00]58.00
11	Minor Theatre Procedures					

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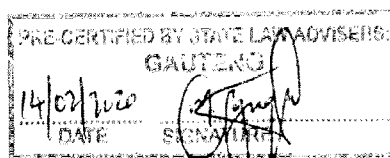
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1110	Minor Procedure Cat A – Facility Fee	Procedure		[141.00] 148.00	[141.00] 148.00	[169.00] 177.00
1111	Minor Procedure Cat A – General medical practitioner	Procedure	[49.00] 52.00	[190.00] 200.00	[190.00] 200.00	[218.00] 229.00
1112	Minor Procedure Cat A – Specialist medical practitioner	Procedure	[94.00] 99.00	[235.00] 247.00	[235.00] 247.00	[263.00] 276.00
1120	Minor Procedure Cat B – Facility Fee	Procedure		[141.00] 148.00	[141.00] 148.00	[169.00] 177.00
1121	Minor Procedure Cat B – General medical practitioner	Procedure	[94.00] 76.00	[235.00] 224.00	[235.00] 224.00	[263.00] 253.00
1122	Minor Procedure Cat B – Specialist medical practitioner	Procedure	[164.00] 172.00	[305.00] 320.00	[305.00] 320.00	[333.00] 349.00
1130	Minor Procedure Cat C – Facility Fee	Procedure		[141.00] 148.00	[141.00] 148.00	[169.00] 177.00
1131	Minor Procedure Cat C – General medical practitioner	Procedure	[114.00] 120.00	[255.00] 268.00	[255.00] 268.00	[283.00] 297.00
1132	Minor Procedure Cat C – Specialist medical practitioner	Procedure	[256.00] 268.00	[397.00] 417.00	[397.00] 417.00	[425.00] 446.00
1140	Minor Procedure Cat D – Facility Fee	Procedure		[141.00] 148.00	[141.00] 148.00	[169.00] 177.00
1141	Minor Procedure Cat D – General medical practitioner	Procedure	[301.00] 316.00	[442.00] 464.00	[442.00] 464.00	[470.00] 493.00
1142	Minor Procedure Cat D – Specialist medical practitioner	Procedure	[679.00] 712.00	[820.00] 860.00	[820.00] 860.00	[848.00] 889.00
12	Major Theatre Procedures					
1210	Theatre Procedure Cat A – Facility Fee	Procedure		[457.00] 479.00	[669.00] 701.00	[772.00] 809.00
1211	Theatre Procedure Cat A – General medical practitioner	Procedure	[49.00] 52.00	[506.00] 531.00	[718.00] 753.00	[821.00] 861.00
1212	Theatre Procedure Cat A – Specialist medical practitioner	Procedure	[94.00] 99.00	[551.00] 578.00	[763.00] 800.00	[866.00] 908.00
1220	Theatre Procedure Cat B – Facility Fee	Procedure		[691.00] 725.00	[1014.00] 1064.00	[1168.00] 1225.00
1221	Theatre Procedure Cat B – General medical practitioner	Procedure	[73.00] 76.00	[764.00] 801.00	[1087.00] 1140.00	[1241.00] 1301.00
1222	Theatre Procedure Cat B – Specialist medical practitioner	Procedure	[164.00] 172.00	[855.00] 897.00	[1178.00] 1236.00	[1332.00] 1397.00
1230	Theatre Procedure Cat C – Facility Fee	Procedure		[1188.00] 1246.00	[1743.00] 1828.00	[2011.00] 2109.00
1231	Theatre Procedure Cat C – General medical practitioner	Procedure	[114.00] 120.00	[1302.00] 1365.00	[1857.00] 1948.00	[2125.00] 2229.00
1232	Theatre Procedure Cat C – Specialist medical practitioner	Procedure	[256.00] 268.00	[1444.00] 1514.00	[1999.00] 2097.00	[2267.00] 2378.00
1240	Theatre Procedure Cat D – Facility Fee	Procedure		[3045.00] 3195.00	[4467.00] 4686.00	[5147.00] 5400.00
1241	Theatre Procedure Cat D – General medical practitioner	Procedure	[301.00] 316.00	[3346.00] 3510.00	[4768.00] 5002.00	[5448.00] 5715.00
1242	Theatre Procedure Cat D – Specialist medical practitioner	Procedure	[1002.00] 1052.00	[4047.00] 4246.00	[5469.00] 5738.00	[6149.00] 6451.00

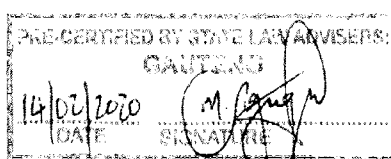


1250	Theatre Procedure Cat E – Facility Fee	Procedure		[4264.00]4473.00	[6254.00]6560.00	[7206.00]7559.00
1251	Theatre Procedure Cat E – General medical practitioner	Procedure	[421.00]442.00	[4685.00]4914.00	[6675.00]7002.00	[7628.00]8001.00
1252	Theatre Procedure Cat E – Specialist medical practitioner	Procedure	[950.00]997.00	[5214.00]5469.00	[7204.00]7557.00	[8156.00]8556.00
13 Treatments						
1310	Supplementary Health Treatment – Facility Fee	Contact		[19.00]20.00	[19.00]20.00	[23.00]24.00
1313	Supplementary health treatment-Nursing Practitioner	Contact	[17.00]18.00	[36.00]37.00	[36.00]37.00	[40.00]42.00
1314	Supplementary Health Treatment – Allied health practitioner	Contact	[17.00]18.00	[36.00]37.00	[36.00]37.00	[40.00]42.00
1320	Supplementary Health Group Treatment – Facility Fee	Contact		[15.00]16.00	[15.00]16.00	17.00
1324	Supplementary Health Group Treatment – Allied health practitioner	Contact	12.00	[27.00]28.00	[27.00]28.00	[28.00]29.00
14 Emergency Medical Services						
1410	Patient transport service – Facility Fee	100km	}			
1420	Basic life support – Facility Fee	50km				
1430	Intermediate life support – Facility Fee	50km				
1440	Advanced life support – Facility Fee	50km				
1450	Emergency service standby – Facility Fee	Hour	}			
1451	Emergency service standby – General medical practitioner	Hour				
1452	Emergency service standby – Specialist medical practitioner	Hour				
1453	Emergency service standby – Nursing practitioner	Hour				
1455	Emergency service standby – Basic life support practitioner	Hour				
1456	Emergency services standby-Intermediate life support practitioner	hour				
1457	Emergency services standby-Advanced life support practitioner	hour				
1460	Rescue – Facility Fee	hour				
1461	Rescue – General medical practitioner	hour				
1462	Rescue – Specialist medical practitioner	Hour				
1463	Rescue – Nursing practitioner	hour				
1465	Rescue- Basic life support practitioner	Incident				
1466	Rescue – Intermediate life	Hour				

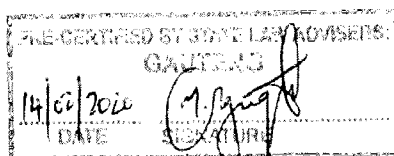
See Administrator's Notice No. 646 of 29 August 1958



	support practitioner				
1467	Rescue- Advanced life support practitioner	hour			
1470	Emergency transport air services fixed wing	Flying hour			
1480	Emergency transport air services helicopter	Flying hour			
1490	Emergency services standby-Facility Fee	Additional 50km			
15	Assistive Devices & Prosthesis				
1510	Assistive Devices-Item Fee	Item			
1520	Prosthetic Devices-Item Fee	Item	30% of the cost of the relevant device or prosthesis, rounded to the nearest R5		
1530	Dental Items -Item Fee	Item			
1540	Assistive Devices, Prosthesis, Dental and Optical Repairs	Item			
1550	Optical Devices-Item fee	Item			
16	Cosmetic Surgery				
1610	Cosmetic Surgery Cat A – Facility Fee	Procedure	[3204.00]	3361.00	[3204.00]3361.00 [3659.00]3838.00
1611	Cosmetic Surgery Cat A – General practitioner	Procedure	[1847.00]	1938.00	[5051.00]5298.00 [5051.00]5298.00 [5506.00]5776.00
1612	Cosmetic Surgery Cat A – Specialist practitioner	Procedure	[2766.00]	2902.00	[5970.00]6263.00 [5970.00]6263.00 [6425.00]6740.00
1620	Cosmetic Surgery Cat B – Facility Fee	Procedure		[7203.00]	7556.00 [7203.00]7556.00 [8233.00]8636.00
1621	Cosmetic Surgery Cat B – General practitioner	Procedure	[2188.00]	2295.00	[9391.00]9851.00 [9391.00]9851.00 [10421.00]10932.00
1622	Cosmetic Surgery Cat B – Specialist practitioner	Procedure	[3283.00]	3444.00	[10486.00]11000.00 [10486.00]11000.00 [11516.00]12080.00
1630	Cosmetic Surgery – Cat C – Facility Fee	Procedure		[11634.00]	12204.00 [11634.00]12204.00 [13297.00]13949.00
1631	Cosmetic Surgery Cat C – General practitioner	Procedure	[3699.00]	3880.00	[15333.00]16084.00 [15333.00]16084.00 [16996.00]17829.00
1632	Cosmetic Surgery Cat C – Specialist practitioner	Procedure	[5548.00]	5820.00	[17182.00]18024.00 [17182.00]18024.00 [18845.00]19768.00
1640	Cosmetic Surgery Cat D – Facility Fee	Procedure		[19652.00]	20615.00 [19652.00]20615.00 [22458.00]23558.00
1641	Cosmetic Surgery Cat D – General practitioner	Procedure	[4150.00]	4353.00	[23802.00]24968.00 [23802.00]24968.00 [26608.00]27912.00
1642	Cosmetic Surgery Cat D – Specialist practitioner	Procedure	[6107.00]	6406.00	[25759.00]27021.00 [25759.00]27021.00 [28565.00]29965.00
17	Laboratory Services				
1700	Drawing of Blood	Contact		12.00	12.00 12.00
1710	Laboratory Test	Varies			
18	Radiation Oncology				
1800	Radiation Oncology (NHRPL)	Item	Varies		



	less VAT)					
19	Nuclear Medicines					
1900	Itemisation of Isotopes	Item	Varies			
1910	Nuclear Medicines Cat A-Facility Fee	Procedure		[216.00]227.00	[216.00]227.00	[216.00]227.00
1912	Nuclear medicine Cat A-Specialist Practitioner	Procedure	[107.00]112.00	[323.00]339.00	[323.00]339.00	[323.00]339.00
1920	Nuclear Medicines Cat B-Facility Fee	Procedure		[216.00]227.00	[216.00]227.00	[216.00]227.00
1922	Nuclear medicine Cat B-Specialist Practitioner	Procedure	[323.00]339.00	[539.00]565.00	[539.00]565.00	[539.00]565.00
1930	Nuclear Medicines Cat C-Facility Fee	Procedure		[216.00]227.00	[216.00]227.00	[216.00]227.00
1932	Nuclear medicine Cat C-Specialist Practitioner	Procedure	[645.00]677.00	[861.00]904.00	[861.00]904.00	[861.00]904.00
1940	Nuclear Medicines Cat D-Facility Fee	Procedure		[216.00]227.00	[216.00]227.00	[216.00]227.00
1942	Nuclear medicine Cat D-Specialist Practitioner	Procedure	[968.00]1016.00	[1184.00]1242.00	[1184.00]1242.00	[1184.00]1242.00
1950	Positron Emission Tomography(PET) Cat E-Facility Fee			[2303.00]2416.00	[2303.00]2416.00	[2303.00]2416.00
1952	Positron Emission Tomography(PET) Cat E-Specialist Practitioner		[1257.00]1319.00	[3560.00]3735.00	[3560.00]3735.00	[3560.00]3735.00
20	Ambulatory Procedures					
2010	Ambulatory Procedures Cat A-Facility Fee	Procedure		[45.00]48.00	[45.00]48.00	[55.00]58.00
2011	Ambulatory Procedure Cat A-General Medical Practitioner	Procedure	[16.00]17.00	[61.00]65.00	[61.00]65.00	[71.00]76.00
2012	Ambulatory Procedure Cat A-Specialist Medical Practitioner	Procedure	[33.00]34.00	[78.00]82.00	[78.00]82.00	[88.00]93.00
2013	Ambulatory Procedure Cat A-Nursing Practitioner	Procedure	10.00	[55.00]58.00	[55.00]58.00	[65.00]69.00
2014	Ambulatory Procedure Cat A-Allied Health Worker	Procedure	10.00	[55.00]58.00	[55.00]58.00	[65.00]69.00
2020	Ambulatory Procedures Cat B-Facility Fee	Procedure		[45.00]48.00	[45.00]48.00	[55.00]58.00
2021	Ambulatory Procedure Cat B-General Medical Practitioner	Procedure	[23.00]25.00	[68.00]72.00	[68.00]72.00	[78.00]83.00
2022	Ambulatory Procedure Cat B-Specialist Medical Practitioner	Procedure	[36.00]37.00	[81.00]85.00	[81.00]85.00	[91.00]96.00
2023	Ambulatory Procedure Cat B-Nursing Practitioner	Procedure	[13.00]14.00	[58.00]61.00	[58.00]61.00	[68.00]72.00
2024	Ambulatory Procedure Cat B-Allied Health Worker	Procedure	[13.00]14.00	[58.00]61.00	[58.00]61.00	[68.00]72.00
21	Blood and Blood Products					
2100	Blood and Blood Products	Varies				
22	Hyperbaric Oxygen Therapy					
2200	Hyperbaric Oxygen Therapy-Facility Fee (Flat Fee)			[157.00]165.00	[157.00]165.00	[157.00]165.00
2210	Hyperbaric Oxygen Therapy-Facility Fee	Session		[474.00]497.00	[474.00]497.00	[474.00]497.00
2211	Hyperbaric Oxygen Therapy-General Medical Practitioner	Session	[200.00]210.00	[674.00]707.00	[674.00]707.00	[674.00]707.00
2212	Hyperbaric Oxygen Therapy-Specialist Medical practitioner	Session	[200.00]210.00	[674.00]707.00	[674.00]707.00	[674.00]707.00
2220	Emergency Hyperbaric Oxygen Therapy-Facility Fee	Session		[477.00]500.00	[477.00]500.00	[477.00]500.00
2221	Emergency Hyperbaric Oxygen	Session	[292.00]306.00	[769.00]807.00	[769.00]807.00	[769.00]807.00



	Therapy-General Medical Practitioner					
2222	Emergency Hyperbaric Oxygen Session		[292.00]306.00	[769.00]807.00	[769.00]807.00	[769.00]807.00
	Therapy-Specialist Medical Practitioner					
23	Consumables (Not included in Facility Fee)					
2300	Consumables (Not included in Facility Fee)	Item	Varies			
24	Autopsies					
2410	Autopsy-Facility Fee	Per Case		[99.00]104.00	[99.00]104.00	[119.00]125.00
2411	Autopsy-General Practitioner	Per Case	[110.00]115.00	[209.00]219.00	[209.00]219.00	[229.00]240.00
2412	Autopsy-Specialist Practitioner	Per Case	[254.00]266.00	[353.00]370.00	[353.00]370.00	[373.00]391.00
25	Port Health and Travel Clinics					
2510	Consultation-Facility Fee	Visit		[119.00]125.00	[119.00]125.00	[119.00]125.00
2511	Consultation-General medical practitioner	Visit	[110.00]115.00	[229.00]240.00	[229.00]240.00	[229.00]240.00
2513	Consultation-Specialised medical practitioner	Visit	[63.00]66.00	[182.00]191.00	[182.00]191.00	[183.00]191.00
2520	Emergency Consultation-Facility Fee	Visit		[240.00]252.00	[240.00]252.00	[240.00]252.00
2521	Emergency Consultation-General practitioner	Visit	[167.00]175.00	[407.00]427.00	[407.00]427.00	[407.00]427.00
2523	Emergency Consultation-Nursing practitioner	Visit	[97.00]102.00	[504.00]354.00	[504.00]354.00	[504.00]354.00
0810	Medication Fee-Facility Fee	Prescription		[34.00]38.00	[34.00]38.00	[42.00]46.00

Substitution of Annexure 3 of Schedule B to Regulations

5. The following Annexure is hereby substituted for Annexure 3 of Schedule B to the Regulations:

"ANNEXURE 3 OF SCHEDULE B

UPFS [2019]2020 FEE SCHEDULE FOR FULL-PAYING PATIENTS

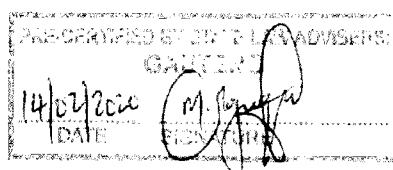
(PRIVATE PATIENTS)

CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE	FACILITY		
				TOTAL FEE IN BOLD		
				LEVEL 1	LEVEL 2	LEVEL 3
			R	R	R	R
01	Anesthetics					
0111	Anaesthetics Cat A – General Medical Practitioner	Procedure	[235.00]247.00	[235.00]247.00	[235.00]247.00	[235.00]247.00
0112	Anaesthetics Cat A – Specialist Medical Practitioner	Procedure	[355.00]372.00	[355.00]372.00	[355.00]372.00	[355.00]372.00
0121	Anaesthetics Cat B – General Medical Practitioner	Procedure	[402.00]422.00	[402.00]422.00	[402.00]422.00	[402.00]422.00
0122	Anaesthetics Cat B – Specialist Medical Practitioner	Procedure	[605.00]635.00	[605.00]635.00	[605.00]635.00	[605.00]635.00
0131	Anaesthetics Cat C – General	Procedure	[1415.00]1485.00	[1415.00]1485.00	[1415.00]1485.00	[1415.00]1485.00

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0132	Medical Practitioner Anaesthetics Cat C – Specialist Medical Practitioner	Procedure	00 [2124.00]2228. 00	[2124.00]2228.00	[2124.00]2228. 00	[2124.00]2228.00
02	Confinement					
0210	Natural Birth- Facility Fee	Incident		[4368.00]4582.00	[4368.00]4582. 00	[5085.00]5334.00
0211	Natural Birth – General Medical Practitioner	Incident	[2244.00]2486. 00	[6738.00]7068.00	[6738.00]7068. 00	[7455.00]7820.00
0212	Natural Birth – Specialist Medical Practitioner	Incident	[6058.00]3208 00	[7426.00]7790.00	[7426.00]7790. 00	[8143.00]8542.00
0213	Natural Birth – Nursing Practitioner	Incident	[2866.00]3006. 00	[7234.00]7588.00	[7234.00]7374. 00	[7951.00]8341.00
0220	Caesarean Section – Facility Fee	Incident		[6877.00]7214.00	[6877.00]7214. 00	[8003.00]8411.00
0221	Caesarean Section – General Medical Practitioner	Incident	[2370.00]2486. 00	[9247.00]9700.00	[9247.00]9700. 00	[10373.00]10897.00
0222	Caesarean Section – Specialist Medical Practitioner	Incident	[3085.00]3236. 00	[9962.00]10450.00	[9962.00]10450. 00	[11088.00]11647.00
03	Dialysis					
0310	Haemo – Facility Fee	Day		[1566.00]1643.00	[1566.00]1643. 00	[1794.00]1882.00
0311	Haemo-dialysis – General Medical Practitioner	Day	[297.00]312.00	[1863.00]1954.00	[1863.00]1954. 00	[2091.00]2193.00
0312	Haemo-dialysis – Specialist Medical Practitioner	Day	[373.00]391.00	[1939.00]2034.00	[1939.00]2034. 00	[2167.00]2273.00
0313	Haemo-dialysis Nursing Practitioner	Day	[240.00]252.00	[1863.00]1894.00	[1863.00]1894. 00	[2091.00]2134.00
0320	Peritoneal Dialysis – Facility Fee	Session		[242.00]254.00	[242.00]254.00	[275.00]288.00
0321	Peritoneal Dialysis – General Medical Practitioner	Session	[49.00]51.00	[291.00]305.00	[291.00]305.00	[324.00]340.00
		Session	[58.00]61.00	[300.00]315.00	[300.00]315.00	[333.00]349.00
0323	Peritoneal dialysis-Nursing Practitioner	Session	[33.00]35.00	[275.00]288.00	[275.00]288.00	[308.00]323.00
0330	Plasmapheresis-Facility Fee	Session		[1566.00]1643.00	[1566.00]1643. 00	[1794.00]1882.00
0331	Plasmapheresis- General Medical Practitioner	Session	[297.00]312.00	[1863.00]1954.00	[1863.00]1954. 00	[2091.00]2193.00
0332	Plasmapheresis-Specialist Medical Practitioner	Session	[373.00]391.00	[1939.00]2034.00	[1939.00]2034. 00	[2167.00]2273.00
04	Medical Reports					
0410	Medical Report – Facility Fee	Report		[185.00]194.00	[185.00]194.00	[185.00]194.00
0411	Medical Report – General Medical Practitioner	Report	[435.00]456.00	[620.00]650.00	[620.00]650.00	[444.00]620.00
0412	Medical Report – Specialist Medical Practitioner	Report	[435.00]456.00	[620.00]650.00	[620.00]650.00	[620.00]650.00
0420	Copy of Medical Report – Facility Fee			[185.00]194.00	[185.00]194.00	[185.00]194.00
0421	Copies of Medical Report, Records, X ray, Completion of certificates/Form-General Medical Practitioner	Copies	[219.00]230.00	[404.00]424.00	[404.00]424.00	[404.00]424.00



0422	Copies of Medical Report, Records, X ray, Completion of certificates/Form-Specialist Medical Practitioner	Copies	[219.00]230.00	[404.00]424.00	[404.00]424.00	[404.00]424.00
0425	Copies of X ray, ultrasounds etc.	Copies	[219.00]230.00	[404.00]424.00	[404.00]424.00	[404.00]424.00
0430	Functional Assessment Report-Facility Fee	Report		[302.00]317.00	[302.00]317.00	[369.00]387.00
0431	Functional Assessment Report-General medical	Report	[853.00]895.00	[1155.00]1212.00	[1155.00]1212.00	[1222.00]1282.00
0432	Functional Assessment Report-Specialist Medical Practitioner	Report	[1742.00]1827.00	[2045.00]2144.00	[2045.00]2144.00	[1222.00]2214.00
0434	Functional Assessment Report-Allied health Practitioner	Report	[853.00]895.00	[1155.00]1212.00	[1155.00]1121.20	[1222.00]1282.00
0440	Copies of Specialized Radiology (MRI, CT & Nuclear)	Copies		[1111.00]1165.00	[1111.00]1165.00	[1111.00]1165.00
05	Imaging					
0510	Radiology, Cat A – Facility Fee	Procedure		[80.00]84.00	[80.00]84.00	[89.00]93.00
0511	Radiology, Cat A – General Medical Practitioner	Procedure	[78.00]82.00	[158.00]166.00	[158.00]166.00	[167.00]175.00
0512	Radiology, Cat A – Specialist Medical Practitioner	Procedure	[146.00]153.00	[226.00]237.00	[226.00]237.00	[235.00]247.00
0514	Radiology, Cat A – Allied Health Practitioner	Procedure	[77.00]81.00	[157.00]165.00	[157.00]165.00	[166.00]174.00
0520	Radiology, Cat B – Facility Fee	Procedure		[219.00]230.00	[219.00]230.00	[250.00]262.00
0521	Radiology, Cat B – General Medical Practitioner	Procedure	[210.00]220.00	[429.00]450.00	[429.00]450.00	[460.00]483.00
0522	Radiology, Cat B – Specialist Medical Practitioner	Procedure	[409.00]429.00	[628.00]659.00	[628.00]659.00	[659.00]691.00
0524	Radiology, Cat B – Allied Health Practitioner	Procedure	[205.00]215.00	[424.00]445.00	[424.00]445.00	[455.00]477.00
0530	Radiology, Cat C – Facility Fee	Procedure		[507.00]532.00	[507.00]532.00	[579.00]607.00
0531	Radiology, Cat C – General Medical Practitioner	Procedure	[326.00]342.00	[833.00]874.00	[833.00]874.00	[905.00]949.00
0532	Radiology, Cat C – Specialist Medical Practitioner	Procedure	[1000.00]1049.00	[1507.00]1581.00	[1507.00]1581.00	[1579.00]1656.00
0540	Radiology, Cat D – Facility Fee	Procedure		[1013.00]1063.00	[1013.00]1063.00	[1156.00]1213.00
0541	Radiology, Cat D – General Medical Practitioner	Procedure	[649.00]680.00	[1662.00]1743.00	[1662.00]1743.00	[1805.00]1893.00
0542	Radiology, Cat D – Specialist Practitioner	Procedure	[1997.00]2095.00	[3010.00]3158.00	[3010.00]3158.00	[3153.00]3307.00
0550	Radiology, Cat E – Facility Fee	Procedure		[2582.00]2709.00	[2582.00]2709.00	[2940.00]3097.00

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0551	Radiology, Cat E – General Medical Practitioner	Procedure	[2391.00]2508.00	[4973.00]5217.00	[4973.00]5217.00	[5331.00]5605.00
0552	Radiology, Cat E – Specialist Practitioner	Procedure	[4985.00]5229.00	[7567.00]7938.00	[7567.00]7938.00	[7925.00]8326.00
06	In-patients					
0610	In-patient General ward – Facility Fee	Day		[804.00]843.00	[1023.00]1073.00	[1935.00]2030.00
0611	In-patient General Ward – General Medical Practitioner	Day	[167.00]175.00	[971.00]1019.00	[1190.00]1248.00	[2102.00]2205.00
0612	In-patient General Ward – Specialist Medical Practitioner	Day	[291.00]305.00	[1095.00]1149.00	[1314.00]1378.00	[2226.00]2335.00
0620	In-patient High care – Facility Fee	12 hours		[1245.00]1306.00	[1557.00]1633.00	[2229.00]2338.00
0621	In-patient High Care – General Medical Practitioner	12 hours	[86.00]90.00	[1331.00]1396.00	[1643.00]1724.00	[2315.00]2428.00
0622	In-patient High Care – Specialist Medical Practitioner	12 hours	[166.00]174.00	[1411.00]1480.00	[1723.00]1807.00	[2395.00]2512.00
0630	In-patient Intensive care – Facility Fee	12 hours		[4090.00]4290.00	[4090.00]4290.00	[4889.00]5129.00
0631	In-patient Intensive Care – General Medical Practitioner	12 hours	[97.00]102.00	[4187.00]4392.00	[4187.00]4392.00	[4986.00]5230.00
0632	In-patient Intensive Care – Specialist Medical Practitioner	12 hours	[185.00]194.00	[4275.00]4484.00	[4275.00]4484.00	[5074.00]5323.00
0640	In-patient Chronic care – Facility Fee	Day		[471.00]494.00	[471.00]494.00	[471.00]494.00
0641	In-patient Chronic care – General Medical Practitioner	Day	[55.00]58.00	[526.00]552.00	[526.00]552.00	[526.00]552.00
0642	In-patient Chronic care – Specialist Medical Practitioner	Day	[128.00]134.00	[599.00]628.00	[599.00]628.00	[599.00]628.00
0643	In-patient Chronic care – Nursing Practitioner	Day	[33.00]35.00	[504.00]529.00	[504.00]529.00	[504.00]529.00
0650	Day patient – Facility Fee	Day		[668.00]701.00	[845.00]886.00	[1236.00]1297.00
0651	Day patient – General Medical Practitioner	Day	[167.00]175.00	[835.00]876.00	[1012.00]1062.00	[1403.00]1472.00
0652	Day patient – Specialist Medical Practitioner	Day	[291.00]305.00	[959.00]1006.00	[1136.00]1192.00	[1527.00]1602.00
0653	Day patient – Nursing Practitioner	Day	[97.00]102.00	[765.00]802.00	[942.00]988.00	[1333.00]1398.00
0660	In-patient Boarder/Patient companion – Facility Fee	Day		[383.00]402.00	[383.00]402.00	[383.00]402.00
0663	In-patient Boarder/Patient Companion – Nursing Practitioner	Day	[33.00]35.00	[416.00]436.00	[416.00]436.00	[416.00]436.00
06100	Inpatient Specialised Intensive Care Paediatric – Facility Fee	12 Hours		[6519.00]6833.00	[6519.00]6833.00	[6519.00]6833.00
06101	Inpatient Specialised Intensive Care Paediatric – General medical practitioner	12 Hours	[291.00]305.00	[6710.00]7144.00	[6710.00]7144.00	[6710.00]7144.00

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06102	Inpatient Specialised Intensive Care Paediatric- Specialist medical practitioner	12 Hours	[554.00]581.00	[7073.00]7420.00	[7073.00]7420.00	[7073.00]7420.00	
					0		
06200	Inpatient Specialised Intensive Care Neonatal – Facility Fee	12 Hours		[8690.00]9116.00	[8690.00]9116.00	[8690.00]9116.00	
					0		
06201	Inpatient Specialised Intensive Care Neonatal – General medical practitioner	12 Hours	[389.00]408.00	[9079.00]9524.00	[9079.00]9524.00	[9079.00]9524.00	
					0		
06202	Inpatient Specialised Intensive Care Neonatal – Specialist medical practitioner	12 Hours	[739.00]775.00	[9818.00]9891.00	[9818.00]9891.00	[9818.00]9891.00	
					0		
0710	Mortuary – Facility Fee	Day		[205.00]215.00	[205.00]215.00	[232.00]243.00	
0720	Cremation Certificate – Facility Fee	Certificate		[205.00]215.00	[205.00]215.00	[232.00]243.00	
08	Pharmaceutical						
0810	Medication Fee – Facility Fee	Prescription		[36.00]38.00	[36.00]38.00	[44.00]46.00	
0815	Item Fee	Item	Varies				
0816	Pharmaceutical-TTO	Item	Varies				
0817	Pharmaceutical- Chronic	Item	Varies				
0818	Pharmaceutical- Oncology	Item	Varies				
0819	Pharmaceutical- Immune Suppressant Drugs	Item	Varies				
0820	Pharmaceutical Flat Fee-OPD	Item	Varies				
0825	Pharmaceutical Flat Fee-IP	Item	Varies				
0827	Pharmaceutical –Acute OPD	Item	Varies				
0828	Pharmaceutical-Oncology OPD	Item	Varies				
0829	Pharmaceutical-Immune Suppressant Drugs OPD	Item	Varies				
0830	Pharmaceutical Flat Fee Acute OPD	Item	Varies				
0835	Pharmaceutical-Chronic IP	Item	Varies				
0836	Pharmaceutical-Reapeat scripts	Item	Varies				
0837	Pharmaceutical-Travel	Item	Varies				
9	Oral Health						
0910	Oral Care Cat A – Facility Fee	Procedure		[30.00]31.00	[30.00]31.00	[34.00]36.00	
0911	Oral Care Cat A – General Practitioner	Procedure	[44.00]46.00	[74.00]78.00	[74.00]78.00	[78.00]82.00	
0912	Oral Care Cat A – Specialist Practitioner	Procedure	[53.00]56.00	[83.00]87.00	[83.00]87.00	[87.00]91.00	

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0914	Oral Care Cat A – Allied Health Practitioner	Procedure	[39.00]41.00	[69.00]72.00	[69.00]72.00	[73.00]77.00
0920	Oral Care Cat B – Facility Fee	Procedure		[91.00]95.00	[91.00]95.00	[108.00]113.00
0921	Oral Care Cat B – General Practitioner	Procedure	[103.00]108.00	[194.00]294.00	[194.00]204.00	[2011.00]221.00
0922	Oral Health Cat B – Specialist Practitioner	Procedure	[164.00]172.00	[255.00]267.00	[255.00]267.00	[272.00]285.00
0924	Oral Care Cat B – Allied Health practitioner	Procedure	[83.00]87.00	[174.00]183.00	[174.00]183.00	[191.00]200.00
0930	Oral Care Cat C – Facility Fee	Procedure		[565.00]593.00	[565.00]593.00	[648.00]648.00
0931	Oral Care Cat C – General Practitioner	Procedure	[625.00]656.00	[1190.00]1248.00	[1190.00]1148.00	[1273.00]1335.00
0932	Oral Care Cat C – Specialist Practitioner	Procedure	[1075.00]1128.00	[1640.00]1720.00	[1640.00]1720.00	[1723.00]1807.00
0940	Oral Care Cat D – Facility Fee	Procedure		[2225.00]2334.00	[2225.00]2334.00	[2547.00]2672.00
0941	Oral Care Cat D – General Practitioner	Procedure	[1921.00]2015.00	[4146.00]4,349.00	[4146.00]4349.00	[4468.00]4687.00
0942	Oral Care Cat D – Specialist Practitioner	Procedure	[3941.00]4134.00	[6166.00]6468.00	[6166.00]6468.00	[6488.00]6806.00
0950	Oral Care Cat E – Facility Fee	Procedure		[7497.00]7864.00	[7497.00]7864.00	[8566.00]8986.00
0951	Oral Care Cat E – General Practitioner	Procedure	[6460.00]6777.00	[13957.00]14641.00	[13957.00]14641.00	[15026.00]15762
0952	Oral Care Cat E – Specialist Practitioner	Procedure	[13257.00]13907.00	[20754.00]21771.00	[20754.00]21771.00	[21823.00]22892
10	Consultations					
1010	Outpatient Consultation – Facility Fee	Visit		[99.00]104.00	[99.00]104.00	[119.00]119.00
1011	Outpatient Consultation – General Medical Practitioner	Visit	[110.00]115.00	[209.00]219.00	[209.00]219.00	[229.00]240.00
1012	Outpatient Consultation – Specialist Medical Practitioner	Visit	[254.00]266.00	[353.00]370.00	[353.00]370.00	[373.00]391.00
1013	Outpatient Consultation – Nursing Practitioner	Visit	[63.00]66.00	[162.00]170.00	[162.00]170.00	[182.00]191.00
1014	Outpatient Consultation – Allied Health Practitioner	Visit	[65.00]68.00	[164.00]172.00	[164.00]172.00	[184.00]193.00
1020	Emergency Consultation – Facility Fee	Visit		[200.00]210.00	[200.00]210.00	[240.00]252.00
1021	Emergency Consultation – General Medical Practitioner	Visit	[167.00]175.00	[367.00]385.00	[367.00]385.00	[407.00]427.00
1022	Emergency Consultation – Specialist Medical Practitioner	Visit	[381.00]400.00	[581.00]610.00	[581.00]610.00	[621.00]651.00
1023	Emergency Consultation – Nursing Practitioner	Visit	[97.00]102.00	[297.00]312.00	[297.00]312.00	[337.00]354.00
1024	Emergency Consultation – Allied Health Practitioner	Visit	[99.00]104.00	[299.00]314.00	[299.00]314.00	[339.00]356.00
1030	Follow-Up Outpatient Consultation-Facility Fee			[99.00]104.00	[99.00]104.00	[119.00]125.00

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1031	Follow-Up Outpatient Consultation-General Medical practitioner		[110.00]115.00	[209.00]219.00	[209.00]219.00	[229.00]240.00
1032	Follow-Up Outpatient Consultation-Specialist Medical Practitioner		[254.00]266.00	[353.00]370.00	[353.00]370.00	[373.00]391.00
1033	Follow-Up Outpatient Consultation-Nursing Practitioner		[63.00]66.00	[162.00]170.00	[162.00]170.00	[182.00]191.00
1034	Follow-Up Outpatient Consultation-Allied Health practitioner		[65.00]68.00	[164.00]172.00	[164.00]172.00	[184.00]193.00
11	Minor Theatre Procedures					
1110	Minor Procedure Cat A – Facility Fee	Procedure		[471.00]494.00	[471.00]494.00	[564.00]592.00
1111	Minor Procedure Cat A – General Medical Practitioner	Procedure	[164.00]172.00	[635.00]666.00	[635.00]666.00	[728.00]764.00
1112	Minor Procedure Cat A – Specialist Medical Practitioner	Procedure	[314.00]329.00	[785.00]823.00	[785.00]823.00	[878.00]892.00
1120	Minor Procedure Cat B – Facility Fee	Procedure		[471.00]494.00	[471.00]494.00	[564.00]591.00
1121	Minor Procedure Cat B – General Medical Practitioner	Procedure	[314.00]254.00	[785.00]748.00	[785.00]748.00	[878.00]845.00
1122	Minor Procedure Cat B – Specialist Medical Practitioner	Procedure	[546.00]573.00	[1017.00]1067.00	[1017.00]1067.00	[1110.00]1164.00
1130	Minor Procedure Cat C – Facility Fee	Procedure		[471.00]494.00	[471.00]494.00	[564.00]592.00
1131	Minor Procedure Cat C – General Medical Practitioner	Procedure	[380.00]399.00	[851.00]893.00	[851.00]893.00	[944.00]990.00
1132	Minor Procedure Cat C – Specialist Medical Practitioner	Procedure	[853.00]895.00	[1324.00]1389.00	[1324.00]1389.00	[1417.00]1486.00
1140	Minor Procedure Cat D – Facility Fee	Procedure		[471.00]494.00	[471.00]494.00	[564.00]592.00
1141	Minor Procedure Cat D – General Medical Practitioner	Procedure	[1003.00]1052.00	[1474.00]1546.00	[1474.00]1546.00	[1567.00]1644.00
1142	Minor Procedure Cat D – Specialist Medical Practitioner	Procedure	[2262.00]2373.00	[2733.00]2867.00	[2733.00]2867.00	[2826.00]2964.00
12	Major Theatre Procedures					
1210	Theatre Procedure Cat A – Facility Fee	Procedure		[1523.00]1598.00	[2229.00]2338.00	[2572.00]2698.00
1211	Theatre Procedure Cat A – General Medical Practitioner	Procedure	[164.00]172.00	[1687.00]1770.00	[2393.00]2510.00	[2736.00]2870.00
1212	Theatre Procedure Cat A – Specialist Medical Practitioner	Procedure	[314.00]329.00	[1837.00]1927.00	[2543.00]2668.00	[2886.00]3027.00
1220	Theatre Procedure Cat B – Facility Fee	Procedure		[2304.00]2417.00	[3381.00]3547.00	[3892.00]4083.00
1221	Theatre Procedure Cat B – General Medical Practitioner	Procedure	[242.00]254.00	[2546.00]2671.00	[3623.00]3801.00	[4134.00]4337.00
1222	Theatre Procedure Cat B –	Procedure	[546.00]573.00	[2850.00]2990.00	[3927.00]4119.00	[4483.00]4655.00

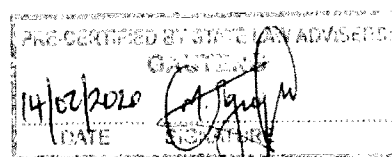
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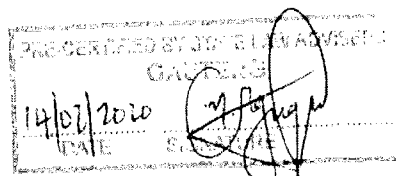
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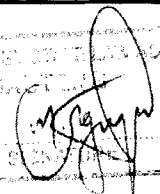
	Specialist Medical Practitioner				
1230	Theatre Procedure Cat C – Facility Fee	Procedure		[3959.00]4153.00	[5809.00]6094.00 [6703.00]7031.00
1231	Theatre Procedure Cat C – General Medical Practitioner	Procedure	[380.00]399.00	[4339.00]4552.00	[6189.00]6492.00 [7083.00]7430.00
1232	Theatre Procedure Cat C – Specialist Medical Practitioner	Procedure	[853.00]895.00	[4812.00]5048.00	[6662.00]6988.00 [7556.00]7926.00
1240	Theatre Procedure Cat D – Facility Fee	Procedure		[10151.00]10648.00	[14890.00]15620.00 [17158.00]17999
1241	Theatre Procedure Cat D – General Medical Practitioner	Procedure	[1003.00]1052.00	[11154.00]11701.00	[15893.00]16672.00 [11816.00]19051
1242	Theatre Procedure Cat D – Specialist Medical Practitioner	Procedure	[2262.00]3506.00	[3277.00]14154.00	[17152.00]19125.00 [19420.00]21505
1250	Theatre Procedure Cat E – Facility Fee	Procedure		[14212.00]14908.00	[20845.00]21866.00 [24021.00]25198
1251	Theatre Procedure Cat E – General medical practitioner	Procedure	[1404.00]1473.00	[15616.00]16381.00	[15616.00]23339.00 [15616.00]26671
1252	Theatre Procedure Cat E – Specialist medical practitioner	Procedure	[3167.00]3322.00	[17379.00]18231.00	[17379.00]25189.00 [17379.00]28520
13	Treatments				
1310	Supplementary Health Treatment – Facility Fee	Contact		[63.00]66.00	[63.00]78.00 [77.00]81.00
1313	Supplementary Health Treatment-Nursing Practitioner	Contact	[56.00]59.00	[119.00]125.00	[119.00]125.00 [133.00]140.00
1314	Supplementary Health Treatment – Allied Health Practitioner	Contact	[56.00]59.00	[119.00]125.00	[119.00]125.00 [133.00]140.00
1320	Supplementary Health Group Treatment – Facility Fee	Contact		[50.00]52.00	[50.00]52.00 [55.00]58.00
1324	Supplementary Health Group Treatment – Allied Health Practitioner	Contact	[39.00]41.00	[89.00]92.00	[89.00]92.00 [94.00]97.00
14	Emergency Medical Services				
1410	Patient transport service – Facility Fee	100km			
1420	Basic life support – Facility Fee	50km			
1430	Intermediate life support – Facility Fee	50km			
1440	Advanced life support – Facility Fee	50km			
1450	Emergency service standby – Facility Fee	Once off			
1451	Emergency service standby – General medical practitioner	Hour			
1452	Emergency service standby – Specialist medical practitioner	Hour			



1453	Emergency service standby – Nursing practitioner	Hour	
1455	Emergency service standby – Basic life support practitioner	Hour	
1456	Emergency services standby- Intermediate life support practitioner	Hour	See Administrator's Notice No. 646 of 29 August 1958
1457	Emergency services standby- Advanced life support practitioner	Hour	
1460	Rescue – Facility Fee	Hour	
1461	Rescue – General medical practitioner	Hour	
1462	Rescue – Specialist medical practitioner	Hour	
1463	Rescue – Nursing practitioner	Hour	
1465	Rescue- Basic life support practitioner	Hour	
1466	Rescue – Intermediate life support practitioner	Hour	
1467	Rescue- Advanced life support practitioner	Hour	
1470	Emergency transport air services fixed wing	Flying hour	
1480	Emergency transport air services helicopter	Flying hour	
1490	Emergency services standby-Facility Fee	Additional 50km	
15	Assistive Devices & Prosthesis		
1510	Assistive Devices-Item Fee	Item	Varies
1520	Prosthetic Devices-Item Fee	Item	Varies
1530	Dental Items -Item Fee	Item	Varies
1540	Assistive Devices, Prosthesis, Dental and Optometry-Repairs	Item	Varies
1550	Optometry Devices	Items	Varies
16	Cosmetic Surgery		
1610	Cosmetic Surgery Cat A – Facility Fee	Procedure	[3204.00]3361.00 [33204.00]3361.00 [3659.00]3838.00
1611	Cosmetic Surgery Cat A – General Practitioner	Procedure	[1847.00]1938.00 [5051.00]5298.00 [5051.00]5298.00 [5506.00]5776.00
1612	Cosmetic Surgery Cat A – Specialist Practitioner	Procedure	[2766.00]2902.00 [5970.00]6263.00 [5970.00]6263.00 [6425.00]6740.00
1620	Cosmetic Surgery Cat B – Facility Fee	Procedure	[7203.00]7556.00 [7203.00]7556.00 [8233.00]8636.00
1621	Cosmetic Surgery Cat B – General Practitioner	Procedure	[2188.00]2295.00 [9391.00]9851.00 [9391.00]9851.00 [10421.00]10932.00
1622	Cosmetic Surgery Cat B – Specialist Practitioner	Procedure	[3283.00]3444.00 [10486.00]11000.00 [10486.00]11000.00 [11516.00]12080.00
1630	Cosmetic Surgery – Cat C – Facility Fee	Procedure	[11634.00]12204.00 [11634.00]12204.00 [13297.00]13949.00



1631	Cosmetic Surgery Cat C – General Practitioner	Procedure	[3699.00]3880.00	[15333.00]16084.00	[15333.00]16084.00	[16996.00]17829.00
1632	Cosmetic Surgery Cat C – Specialist Practitioner	Procedure	[5548.00]5820.00	[17182.00]18024.00	[17182.00]18024.00	[18845.00]19768.00
1640	Cosmetic Surgery Cat D – Facility Fee	Procedure		[19652.00]20615.00	[19652.00]20615.00	[22458.00]23558.00
1641	Cosmetic Surgery Cat D – General Practitioner	Procedure	[4150.00]4353.00	[23802.00]24968.00	[23802.00]24968.00	[26608.00]27912.00
1642	Cosmetic Surgery Cat D – Specialist Practitioner	Procedure	[6107.00]6406.00	[2579.00]27021.00	[25759.00]27021.00	[28565.00]29965.00
17	Laboratory Services					
1700	Drawing of Blood	Contact		[39.00]41.00	[39.00]41.00	[39.00]41.00
1710	Laboratory Test	Varies				
18	Radiation Oncology					
1800	Radiation Oncology (NHRPL less VAT)	Item	Varies			
19	Nuclear Medicines					
1900	Itemisation of Isotopes	Item	Varies			
1910	Nuclear Medicines Cat A-Facility Fee	Procedure		[720.00]755.00	[720.00]75.00	[720.00]755.00
1912	Nuclear medicine Cat A-Specialist Practitioner	Procedure	[357.00]374.00	[1077.00]1130.00	[1077.00]1130.00	[1077.00]1130.00
1920	Nuclear Medicines Cat B-Facility Fee	Procedure		[720.00]755.00	[720.00]755.00	[720.00]755.00
1922	Nuclear medicine Cat B-Specialist Practitioner	Procedure	[1076.00]1129.00	[1796.00]1884.00	[1796.00]1884.00	[1796.00]1884.00
1930	Nuclear Medicines Cat C-Facility Fee	Procedure		[720.00]755.00	[720.00]755.00	[720.00]755.00
1932	Nuclear medicine Cat C-Specialist Practitioner	Procedure	[2151.00]2256.00	[2871.00]3012.00	[2871.00]3012.00	[2871.00]3012.00
1940	Nuclear Medicines Cat D-Facility Fee	Procedure		[720.00]755.00	[720.00]755.00	[720.00]755.00
1942	Nuclear medicine Cat D-Specialist Practitioner	Procedure	[3227.00]3385.00	[3947.00]4140.00	[3947.00]4140.00	[3947.00]4140.00
1950	Positron Emission Tomography(PET) Cat E-Facility Fee	Procedure		[1396.00]8052.00	[1396.00]8052.00	[1396.00]8052.00
1952	Positron Emission Tomography(PET) Cat E-Specialist Practitioner	Procedure	[4191.00]4396.00	[5587.00]12448.00	[5587.00]12448.00	[5587.00]12448.00
20	Ambulatory Procedures					
2010	Ambulatory Procedures Cat A-Facility Fee	Procedure		[151.00]158.00	[151.00]158.00	[185.00]194.00
2011	Ambulatory Procedure Cat A-General Medical Practitioner	Procedure	[55.00]58.00	[206.00]216.00	[206.00]216.00	[240.00]252.00
2012	Ambulatory Procedure Cat A-Specialist Medical Practitioner	Procedure	[109.00]114.00	[260.00]273.00	[260.00]273.00	[294.00]308.00
2013	Ambulatory Procedure Cat A-Nursing Practitioner	Procedure	[33.00]35.00	[184.00]193.00	[184.00]193.00	[218.00]229.00
2014	Ambulatory Procedure Cat A-Allied Health Worker	Procedure	[33.00]35.00	[184.00]193.00	[184.00]193.00	[218.00]229.00
2020	Ambulatory Procedures Cat B-Facility Fee	Procedure		[151.00]158.00	[151.00]158.00	[185.00]194.00
2021	Ambulatory Procedure Cat B-General Medical Practitioner	Procedure	[78.00]82.00	[229.00]240.00	[229.00]240.00	[263.00]276.00
2022	Ambulatory Procedure Cat B-Specialist Medical Practitioner	Procedure	[119.00]125.00	[270.00]28.00	[270.00]283.00	[304.00]319.00
2023	Ambulatory Procedure Cat B-	Procedure	[44.00]46.00	[195.00]205.00	[195.00]205.00	[229.00]240.00

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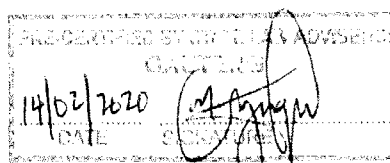
2024	Nursing Practitioner Ambulatory Procedure Cat B- Allied Health Worker	Procedure	[44.00]46.00	[195.00]205.00	[195.00]205.00	[229.00]240.00
21	Blood and Blood Products					
2100	Blood and Blood Products	Varies				
22	Hyperbaric Oxygen Therapy					
2200	Hyperbaric Oxygen Therapy- Facility Fee (Flat Fee)	Session		[523.00]549.00	[523.00]549.00	[523.00]549.00
2210	Hyperbaric Oxygen Therapy- Facility Fee	Session		[1580.00]1657.00	[158.00]1657.00	[1580.00]1657.00
2211	Hyperbaric Oxygen Therapy- General Medical Practitioner	Session	[667.00]700.00	[2247.00]2357.00	[2247.00]2357.00	[2247.00]235.00
2212	Hyperbaric Oxygen Therapy- Specialist Medical Practitioner	Session	[667.00]700.00	[2247.00]2357.00	[2247.00]2357.00	[2247.00]2357.00
2220	Emergency Hyperbaric Oxygen Therapy-Facility Fee	Session		[1590.00]1668.00	[1590.00]1668.00	[1590.00]1668.00
2221	Emergency Hyperbaric Oxygen Therapy-General Medical Practitioner	Session	[973.00]1021.00	[2563.00]2689.00	[2563.00]2689.00	[2563.00]2689.00
2222	Emergency Hyperbaric Oxygen Therapy-Specialist Medical Practitioner	Session	[973.00]1021.00	[2563.00]2689.00	[2563.00]2689.00	[2563.00]2689.00
23	Consumables (Not included in Facility Fee)					
2300	Consumables (Not included in Facility Fee)	Item				
24	Autopsies					
2410	Autopsy-Facility Fee	Per Case		[99.00]104.00	[99.00]104.00	[119.00]125.00
2411	Autopsy-General Practitioner	Per Case	[110.00]115.00	[209.00]219.00	[209.00]219.00	[229.00]240.00
2412	Autopsy-Specialist Practitioner	Per Case	[254.00]266.00	[353.00]370.00	[353.00]370.00	[373.00]370.00
25	Port Health and Travel Clinics					
2510	Consultation-Facility Fee	Visit		[119.00]125.00	[119.00]12.00	[119.00]125.00
2511	Consultation-General medical Practitioner	Visit	[110.00]115.00	[229.00]240.00	[229.00]240.00	[229.00]240.00
2513	Consultation –Nursing practitioner	Visit	[63.00]66.00	[182.00]191.00	[182.00]191.00	[182.00]191.00
2520	Emergency Consultation – Facility Fee	Visit		[240.00]252.00	[240.00]252.00	[240.00]252.00
2521	Emergency Consultation- General medical practitioner	Visit	[167.00]175.00	[407.00]175.00	[407.00]175.00	[407.00]175.00
2523	Emergency Consultation – Nursing practitioner	Visit	[97.00]102.00	[337.00]354.00	337.00]354.00	[337.00]354.00
0810	Medication Fee-Facility Fee	Visit		[36.00]38.00	[36.00]38.00	[44.00]46.00

Substitution of Annexure 4 of Schedule B to Regulations

6. The following Annexure is hereby substituted for Annexure 4 of Schedule B to the Regulations:

"ANNEXURE 4 OF SCHEDULE B

OUPFS [2019]2020 FEE SCHEDULE FOR FULL-PAYING PATIENTS



(FOLATENG WARDS)

CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE R	FACILITY		
				TOTAL FEE IN BOLD		
				LEVEL 1 R	LEVEL 2 R	LEVEL 3 R
01	Anaesthetics					
DA0111	Anaesthetics Cat A – General medical practitioner	Procedure	[235.00]247.00			
DA0112	Anaesthetics Cat A – Specialist medical practitioner	Procedure	[355.00]372.00			
DA0121	Anaesthetics Cat B – General medical practitioner	Procedure	[402.00]422.00			
DA0122	Anaesthetics Cat B – Specialist medical practitioner	Procedure	[605.00]635.00			
DA0131	Anaesthetics Cat C – General medical practitioner	Procedure	[1415.00]1485.00			
DA0132	Anaesthetics Cat C – Specialist medical practitioner	Procedure	[2124.00]2228.00			
02	Confinement					
DA0210	Natural Birth- Facility Fee	Incident		[5589.00]5863.00	[5589.00]5863.00	[5589.00]5863.00
DA0211	Natural Birth – General Medical Practitioner	Incident	[2370.00]2486.00	[7959.00]8349.00	[7959.00]8349.00	[7959.00]8349.00
DA0212	Natural Birth – Specialist Medical Practitioner	Incident	[3058.00]3208.00	[8647.00]9071.00	[8647.00]9071.00	[8647.00]9071.00
DA0213	Natural Birth – Nursing Practitioner	Incident	[2866.00]3006.00	[8455.00]8869.00	[8455.00]8869.00	[8455.00]8869.00
DA0220	Caesarean Section – Facility Fee	Incident		[8804.00]9235.00	[8804.00]9235.00	[8804.00]9235.00
DA0221	Caesarean Section – General Medical Practitioner	Incident	[2370.00]2486.00	[11174.00]11722.00	[11174.00]11722.00	[11174.00]11722.00
DA0222	Caesarean Section – Specialist Medical Practitioner	Incident	[3058.00]3236.00	[11862.00]12472.00	[11862.00]12472.00	[11862.00]12472.00
03	Dialysis					
DA0310	Haemo – Facility Fee	Day		[1726.00]1811.00	[1726.00]1811.00	[1975.00]2072.00
DA0311	Haemo-dialysis – General medical practitioner	Day	[297.00]312.00	[2023.00]2122.00	[2023.00]2122.00	[2272.00]2383.00
DA0312	Haemo-dialysis – Specialist medical practitioner	Day	[373.00]391.00	[2099.00]2202.00	[2099.00]2202.00	[2384.00]2463.00
DA0313	Haemo-dialysis Nursing Practitioner	Day	[240.00]252.00	[1966.00]2062.00	[1966.00]2062.00	[2215.00]2324.00
DA0320	Peritoneal Dialysis – Facility Fee	Session		[265.00]278.00	[265.00]278.00	[304.00]319.00
DA0321	Peritoneal Dialysis – General medical practitioner	Session	[49.00]51.00	[314.00]329.00	[314.00]329.00	[353.00]370.00
DA0322	Peritoneal dialysis-Specialist Medical practitioner	Session	[58.00]61.00	[323.00]339.00	[323.00]339.00	[362.00]380.00
DA0323	Peritoneal dialysis-Nursing Practitioner	Session	[33.00]35.00	[298.00]313.00	[298.00]313.00	[337.00]354.00

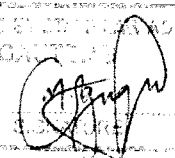
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DA0330	Plasmapheresis-Facility Fee	Session		[1726.00]1811.00	[1726.00]1811.00	[1975.00]2072.00
DA0331	Plasmapheresis- General medical practitioner	Session	[297.00]312.00	[2023.00]2122.00	[2023.00]2122.00	[2272.00]2383.00
DA0332	Plasmapheresis-Specialist Medical Practitioner	Session	[373.00]391.00	[2099.00]2202.00	[2099.00]2202.00	[2348.00]2463.00
04	Medical Reports					
DA0410	Medical Report – Facility Fee	Report		[185.00]194.00	[185.00]194.00	[185.00]194.00
DA0411	Medical Report – General medical practitioner	Report	[435.00]456.00	[620.00]650.00	[620.00]650.00	[620.00]650.00
DA0412	Medical Report – Specialist medical practitioner	Report	[435.00]456.00	[620.00]650.00	[620.00]650.00	[620.00]650.00
DA0420	Copies of Medical Report-Facility Fee	Copy		[185.00]194.00	[185.00]194.00	[185.00]194.00
DA0421	Copies of Medical Report, Records, X ray, Completion of certificates/Form-General medical practitioner	Copies	[219.00]230.00	[404.00]424.00	[404.00]424.00	[404.00]424.00
DA0422	Copies of Medical Report, Records, X ray, Completion of certificates/Form-Specialist medical practitioner	Copies	[219.00]230.00	[404.00]424.00	[404.00]424.00	[404.00]424.00
DA0425	Copies of X ray, ultrasounds ect.	Copies	[219.00]230.00	[404.00]424.00	[404.00]424.00	[404.00]424.00
DA0430	Functional Assessment Report-Facility Fee	Report		[333.00]349.00	[333.00]349.00	[406.00]426.00
DA0431	Functional Assessment Report-General medical practitioner	Report	[853.00]895.00	[1186.00]1244.00	[1186.00]1244.00	[1259.00]1321.00
DA0432	Functional Assessment Report-Specialist medical practitioner	Report	[1742.00]1827.00	[2075.00]2177.00	[2075.00]2177.00	[2148.00]2353.00
DA0434	Functional Assessment Report-Allied health practitioner	Report	[853.00]895.00	[1186.00]1244.00	[1186.00]1244.00	[1259.00]1321.00
DA440	Copies of Specialised Radiology (MRI, CT & Nuclear)	Copy		[1222.00]1282.00	[1222.00]1282.00	[1222.00]1282.00
05	Imaging					
DA0510	Radiology, Cat A – Facility Fee	Procedure		[86.00]90.00	[86.00]90.00	[99.00]104.00
DA0511	Radiology, Cat A – General medical practitioner	Procedure	[78.00]82.00	[164.00]172.00	[164.00]172.00	[177.00]186.00
DA0512	Radiology, Cat A – Specialist medical practitioner	Procedure	[146.00]153.00	[232.00]243.00	[232.00]243.00	[245.00]257.00
DA0514	Radiology, Cat A – Allied health practitioner	Procedure	[77.00]81.00	[163.00]171.00	[163.00]171.00	[176.00]185.00
DA0520	Radiology, Cat B – Facility Fee	Procedure		[240.00]252.00	[240.00]252.00	[275.00]288.00
DA0521	Radiology, Cat B – General medical practitioner	Procedure	[210.00]220.00	[450.00]472.00	[450.00]472.00	[485.00]509.00
DA0522	Radiology, Cat B – Specialist medical practitioner	Procedure	[409.00]429.00	[649.00]681.00	[649.00]681.00	[684.00]718.00
DA0524	Radiology, Cat B – Allied health practitioner	Procedure	[205.00]215.00	[445.00]467.00	[445.00]467.00	[480.00]504.00

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DA0530	Radiology, Cat C – Facility Fee	Procedure		[559.00] <u>586.00</u>	[559.00] <u>586.00</u>	[638.00] <u>669.00</u>
DA0531	Radiology, Cat C – General medical practitioner	Procedure	[326.00] <u>342.00</u>	[885.00] <u>928.00</u>	[885.00] <u>928.00</u>	[964.00] <u>1011.00</u>
DA0532	Radiology, Cat C – Specialist medical practitioner	Procedure	[1000.00] <u>1049.00</u>	[1559.00] <u>1635.00</u>	[1559.00] <u>1635.00</u>	[1638.00] <u>1718.00</u>
DA0540	Radiology, Cat D – Facility Fee	Procedure		[1117.00] <u>1172.00</u>	[1117.00] <u>1172.00</u>	[1275.00] <u>1337.00</u>
DA0541	Radiology, Cat D – General medical practitioner	Procedure	[649.00] <u>680.00</u>	[1766.00] <u>1852.00</u>	[1766.00] <u>1852.00</u>	[1924.00] <u>2018.00</u>
DA0542	Radiology, Cat D – Specialist Practitioner	Procedure	[1997.00] <u>2095.00</u>	[3114.00] <u>3267.00</u>	[3114.00] <u>3267.00</u>	[3272.00] <u>3432.00</u>
DA0550	Radiology, Cat E – Facility Fee	Procedure		[2843.00] <u>2982.00</u>	[2692.00] <u>2982.00</u>	[3246.00] <u>3405.00</u>
DA0551	Radiology, Cat E – General Medical Practitioner	Procedure	[2391.00] <u>2508.00</u>	[5234.00] <u>5490.00</u>	[5234.00] <u>5490.00</u>	[5637.00] <u>5913.00</u>
DA0552	Radiology, Cat E – Specialist Practitioner	Procedure	[4985.00] <u>4985.00</u>	[7828.00] <u>8212.00</u>	[7828.00] <u>8212.00</u>	[8231.00] <u>8634.00</u>
06	In-patients					
DA0610	In-patient General ward – Facility Fee	Day		[1935.00] <u>2030.00</u>	[1935.00] <u>2030.00</u>	[1935.00] <u>2030.00</u>
DA0611	In-patient General Ward – General medical practitioner	Day	[167.00] <u>175.00</u>	[2102.00] <u>2205.00</u>	[2102.00] <u>2205.00</u>	[2102.00] <u>2205.00</u>
DA0612	In-patient General Ward – Specialist medical practitioner	Day	[291.00] <u>305.00</u>	[2226.00] <u>2335.00</u>	[2226.00] <u>2335.00</u>	[2226.00] <u>2335.00</u>
DA0620	In-patient High care – Facility Fee	12 hours		[2229.00] <u>2338.00</u>	[2229.00] <u>2338.00</u>	[2229.00] <u>2338.00</u>
DA0621	In-patient High Care – General medical practitioner	12 hours	[86.00] <u>90.00</u>	[2315.00] <u>2428.00</u>	[2315.00] <u>2428.00</u>	[2315.00] <u>2428.00</u>
DA0622	In-patient High Care – Specialist medical practitioner	12 hours	[166.00] <u>174.00</u>	[2395.00] <u>2512.00</u>	[2395.00] <u>2512.00</u>	[2359.00] <u>2512.00</u>
DA0630	In-patient Intensive care – Facility Fee	12 hours		[4889.00] <u>5129.00</u>	[4889.00] <u>5129.00</u>	[4889.00] <u>5129.00</u>
DA0631	In-patient Intensive Care – General medical practitioner	12 hours	[97.00] <u>102.00</u>	[4986.00] <u>5230.00</u>	[4986.00] <u>5230.00</u>	[4986.00] <u>5230.00</u>
DA0632	In-patient Intensive Care – Specialist medical practitioner	12 hours	[185.00] <u>194.00</u>	[5074.00] <u>5323.00</u>	[5074.00] <u>5323.00</u>	[5074.00] <u>5323.00</u>
DA0640	In-patient Chronic care – Facility Fee	Day		[471.00] <u>494.00</u>	[471.00] <u>494.00</u>	[471.00] <u>494.00</u>
DA0641	In-patient Chronic care – General medical practitioner	Day	[55.00] <u>58.00</u>	[526.00] <u>552.00</u>	[526.00] <u>552.00</u>	[526.00] <u>552.00</u>
DA0642	In-patient Chronic care – Specialist medical practitioner	Day	[128.00] <u>134.00</u>	[599.00] <u>628.00</u>	[599.00] <u>628.00</u>	[599.00] <u>628.00</u>
DA0643	In-patient Chronic care – Nursing practitioner	Day	[33.00] <u>35.00</u>	[504.00] <u>529.00</u>	[504.00] <u>529.00</u>	[504.00] <u>529.00</u>
DA0650	Day patient – Facility Fee	Day		[1236.00] <u>1297.00</u>	[1236.00] <u>1297.00</u>	[1236.00] <u>1297.00</u>
DA0651	Day patient – General medical practitioner	Day	[167.00] <u>175.00</u>	[1403.00] <u>1472.00</u>	[1403.00] <u>1472.00</u>	[1403.00] <u>1472.00</u>
DA0652	Day patient – Specialist medical practitioner	Day	[291.00] <u>305.00</u>	[1527.00] <u>1602.00</u>	[1527.00] <u>1602.00</u>	[1527.00] <u>1602.00</u>
DA0653	Day patient – Nursing	Day	[97.00] <u>102.00</u>	[1333.00] <u>1398.00</u>	[1333.00] <u>1398.00</u>	[1333.00] <u>1398.00</u>

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	practitioner				
DA0660	In-patient Boarder/Patient companion – Facility Fee	Day		[383.00]402.00	[383.00]402.00
DA0663	In-patient Boarder/Patient Companion – Nursing Practitioner	Day	[33.00]35.00	[416.00]436.00	[416.00]436.00
DA06100	Inpatient Specialised Intensive Care Paediatric – Facility Fee	12 Hours		[6519.00]6838.00	[6519.00]6838.00
DA06101	Inpatient Specialised Intensive Care Paediatric – General medical practitioner	12 Hours	[291.00]308.00	[6710.00]7144.00	[6710.00]7144.00
DA06102	Inpatient Specialised Intensive Care Paediatric– Specialist medical practitioner	12 Hours	[554.00]581.00	[7073.00]7420.00	[7073.00]7420.00
DA06200	Inpatient Specialised Intensive Care Neonatal – Facility Fee	12 Hours		[8690.00]9116.00	[8690.00]9116.00
DA06201	Inpatient Specialised Intensive Care Neonatal – General medical practitioner	12 Hours	[389.00]408.00	[9079.00]9524.00	[9079.00]9524.00
DA06202	Inpatient Specialised Intensive Care Neonatal– Specialist medical practitioner	12 Hours	[739.00]775.00	[9818.00]9891.00	[9818.00]9891.00
07	Mortuary				
DA0710	Mortuary-Facility Fee			[205.00]215.00	[205.00]215.00
DA0720	Cremation Certificate-Facility Fee			[205.00]215.00	[205.00]215.00
08	Pharmaceutical				
DA0810	Medication Fee – Facility Fee	Prescription		[39.00]41.00	[39.00]41.00
DA0815	Item Fee	Item	Varies		
DA0816	Pharmaceutical-TTO	Item	Varies		
DA0817	Pharmaceutical- Chronic	Item	Varies		
DA0818	Pharmaceutical- Oncology	Item	Varies		
DA0819	Pharmaceutical- Immune Suppressant Drugs	Item	Varies		
DA0820	Pharmaceutical Flat Fee-OPD	Item	Varies		
DA0825	Pharmaceutical Flat Fee-IP	Item	Varies		
09	Oral Health				
DA0910	Oral Care Cat A – Facility Fee	Procedure		[34.00]36.00	[34.00]36.00
DA0911	Oral Care Cat A – General practitioner	Procedure	[44.00]46.00	[78.00]82.00	[78.00]82.00
DA0912	Oral Care Cat A – Specialist practitioner	Procedure	[53.00]56.00	[87.00]91.00	[87.00]91.00

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DA0914	Oral Care Cat A – Allied health practitioner	Procedure	[39.00]41.00	[73.00]77.00	[73.00]77.00	[78.00]82.00
DA0920	Oral Care Cat B – Facility Fee	Procedure		[103.00]108.00	[103.00]108.00	[116.00]122.00
DA0921	Oral Care Cat B – General practitioner	Procedure	[103.00]108.00	[206.00]216.00	[206.00]216.00	[219.00]230.00
DA0922	Oral Health Cat B – Specialist practitioner]	Procedure	[164.00]172.00	[267.00]280.00	[267.00]280.00	[280.00]294.00
DA0924	Oral Care Cat B – Allied health practitioner	Procedure	[83.00]87.00	[186.00]195.00	[186.00]195.00	[199.00]209.00
DA0930	Oral Care Cat C – Facility Fee	Procedure		[622.00]652.00	[622.00]652.00	[714.00]749.00
DA0931	Oral Care Cat C – General practitioner	Procedure	[625.00]656.00	[1247.00]1308.00	[1247.00]1308.00	[1339.00]1405.00
DA0932	Oral Care Cat C – Specialist practitioner	Procedure	[1075.00]1128.00	[1697.00]1780.00	[1697.00]1780.00	[1789.00]1877.00
DA0940	Oral Care Cat D – Facility Fee	Procedure		[2454.00]2574.00	[2454.00]2574.00	[2802.00]2939.00
DA0941	Oral Care Cat D – General practitioner	Procedure	[1921.00]2015.00	[4375.00]4589.00	[4375.00]4589.00	[4723.00]4954.00
DA0942	Oral Care Cat D – Specialist practitioner	Procedure	[3941.00]4134.00	[6395.00]6708.00	[6395.00]6708.00	[6743.00]7073.00
DA0950	Oral Care Cat E – Facility Fee	Procedure		[8247.00]8651.00	[8247.00]8651.00	[9426.00]9888.00
DA0951	Oral Care Cat E – General practitioner	Procedure	[6460.00]6777.00	[14707.00]15428.00	[14707.00]15428.00	[15886.00]16664.00
DA0952	Oral Care Cat E – Specialist practitioner	Procedure	[13257.00]13907.00	[21504.00]22558.00	[21504.00]22558.00	[22683.00]23794.00
10	Consultations					
DA1010	Outpatient Consultation – Facility Fee	Visit		[109.00]114.00	[109.00]114.00	[133.00]140.00
DA1011	Outpatient Consultation – General medical practitioner	Visit	[110.00]115.00	[219.00]230.00	[219.00]230.00	[243.00]255.00
DA1012	Outpatient Consultation – Specialist medical practitioner	Visit	[254.00]266.00	[363.00]381.00	[363.00]381.00	[387.00]406.00
DA1013	Outpatient Consultation – Nursing practitioner	Visit	[64.00]66.00	[173.00]180.00	[173.00]180.00	[197.00]206.00
DA1014	Outpatient Consultation – Allied health practitioner	Visit	[66.00]68.00	[175.00]183.00	[175.00]183.00	[199.00]208.00
DA1020	Emergency Consultation – Facility Fee	Visit		[223.00]234.00	[223.00]234.00	[264.00]277.00
DA1021	Emergency Consultation – General medical practitioner	Visit	[167.00]175.00	[390.00]409.00	[390.00]409.00	[431.00]452.00
DA1022	Emergency Consultation – Specialist medical practitioner	Visit	[381.00]400.00	[604.00]634.00	[604.00]634.00	[645.00]677.00
DA1023	Emergency Consultation – Nursing practitioner	Visit	[97.00]102.00	[320.00]336.00	[320.00]336.00	[361.00]379.00
DA1024	Emergency Consultation – Allied health practitioner	Visit	[99.00]104.00	[322.00]338.00	[322.00]338.00	[363.00]381.00
DA1030	Follow Up Outpatient Consultation – Facility Fee	Visit		114.00	114.00	140.00

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DA1031	Follow Up Outpatient Consultation – General medical practitioner	Visit	<u>115.00</u>	<u>230.00</u>	<u>230.00</u>	<u>255.00</u>
DA1032	Follow Up Outpatient Consultation – Specialist medical practitioner	Visit	<u>266.00</u>	<u>381.00</u>	<u>381.00</u>	<u>406.00</u>
DA1033	Follow Up Outpatient Consultation – Nursing practitioner	Visit	<u>66.00</u>	<u>180.00</u>	<u>180.00</u>	<u>206.00</u>
DA1034	Follow Up Outpatient Consultation – Allied health practitioner	Visit	<u>68.00</u>	<u>183.00</u>	<u>183.00</u>	<u>208.00</u>
11 Minor Theatre Procedures						
DA1110	Minor Procedure Cat A – Facility Fee	Procedure		[518.00] <u>543.00</u>	[518.00] <u>543.00</u>	[621.00] <u>651.00</u>
DA1111	Minor Procedure Cat A – General medical practitioner	Procedure	[164.00] <u>172.00</u>	[682.00] <u>715.00</u>	[682.00] <u>715.00</u>	[785.00] <u>823.00</u>
DA1112	Minor Procedure Cat A – Specialist medical practitioner	Procedure	[314.00] <u>329.00</u>	[832.00] <u>873.00</u>	[832.00] <u>873.00</u>	[935.00] <u>981.00</u>
DA1120	Minor Procedure Cat B – Facility Fee	Procedure		[518.00] <u>543.00</u>	[518.00] <u>543.00</u>	[621.00] <u>651.00</u>
DA1121	Minor Procedure Cat B – General medical practitioner	Procedure	[242.00] <u>254.00</u>	[760.00] <u>797.00</u>	[760.00] <u>797.00</u>	[863.00] <u>905.00</u>
DA1122	Minor Procedure Cat B – Specialist medical practitioner	Procedure	[546.00] <u>573.00</u>	[1064.00] <u>1116.00</u>	[1064.00] <u>1116.00</u>	[1167.00] <u>1224.00</u>
DA1130	Minor Procedure Cat C – Facility Fee	Procedure		[518.00] <u>543.00</u>	[518.00] <u>543.00</u>	[621.00] <u>651.00</u>
DA1131	Minor Procedure Cat C – General medical practitioner	Procedure	[380.00] <u>399.00</u>	[898.00] <u>943.00</u>	[898.00] <u>943.00</u>	[1001.00] <u>1050.00</u>
DA1132	Minor Procedure Cat C – Specialist medical practitioner	Procedure	[853.00] <u>895.00</u>	[1371.00] <u>1438.00</u>	[1371.00] <u>1438.00</u>	[1474.00] <u>1546.00</u>
DA1140	Minor Procedure Cat D – Facility Fee	Procedure		[518.00] <u>543.00</u>	[518.00] <u>543.00</u>	[621.00] <u>651.00</u>
DA1141	Minor Procedure Cat D – General medical practitioner	Procedure	[1003.00] <u>1052.00</u>	[1521.00] <u>1596.00</u>	[1521.00] <u>1596.00</u>	[1624.00] <u>1704.00</u>
DA1142	Minor Procedure Cat D – Specialist medical practitioner	Procedure	[2262.00] <u>2373.00</u>	[2780.00] <u>2916.00</u>	[2780.00] <u>2916.00</u>	[2883.00] <u>3024.00</u>
12 Major Theatre Procedures						
DA1210	Theatre Procedure Cat A – Facility Fee	Procedure		[1673.00] <u>1755.00</u>	[2453.00] <u>2573.00</u>	[2828.00] <u>2967.00</u>
DA1211	Theatre Procedure Cat A – General medical practitioner	Procedure	[164.00] <u>172.00</u>	[1837.00] <u>1927.00</u>	[2617.00] <u>2745.00</u>	[2992.00] <u>3139.00</u>
DA1212	Theatre Procedure Cat A – Specialist medical practitioner	Procedure	[318.00] <u>329.00</u>	[1991.00] <u>2084.00</u>	[2771.00] <u>2903.00</u>	[3146.00] <u>3296.00</u>
DA1220	Theatre Procedure Cat B – Facility Fee	Procedure		[2537.00] <u>2661.00</u>	[3718.00] <u>3900.00</u>	[4525.00] <u>4743.00</u>
DA1221	Theatre Procedure Cat B – General medical practitioner	Procedure	[242.00] <u>254.00</u>	[2779.00] <u>2915.00</u>	[3960.00] <u>4154.00</u>	[4767.00] <u>4996.00</u>
DA1222	Theatre Procedure Cat B – Specialist medical practitioner	Procedure	[546.00] <u>573.00</u>	[3083.00] <u>3234.00</u>	[4264.00] <u>4473.00</u>	[5071.00] <u>5315.00</u>
DA1230	Theatre Procedure Cat C –	Procedure		[4351.00] <u>4564.00</u>	[6390.00] <u>6703.00</u>	[7374.00] <u>7735.00</u>

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Facility Fee				
DA1231	Theatre Procedure Cat C – General medical practitioner	Procedure	[380.00]399.00	[4731.00]4963.00
DA1232	Theatre Procedure Cat C – Specialist medical practitioner	Procedure	[853.00]895.00	[5204.00]5459.00
DA1240	Theatre Procedure Cat D – Facility Fee	Procedure		[11165.00]11712.00
DA1241	Theatre Procedure Cat D – General medical practitioner	Procedure	[1003.00]1052.00	[12168.00]12764.00
DA1242	Theatre Procedure Cat D – Specialist medical practitioner	Procedure	[2262.00]3506.00	[13427.00]15218.00
DA1250	Theatre Procedure Cat E – Facility Fee	Procedure		[14212.00]14908.00
DA1251	Theatre Procedure Cat E – General medical practitioner	Procedure	[1404.00]1473.00	[15616.00]16381.00
DA1252	Theatre Procedure Cat E – Specialist medical practitioner	Procedure	[3167.00]3322.00	[17379.00]18231.00
13 Treatments				
DA1310	Supplementary Health Treatment – Facility Fee	Contact		[74.00]78.00
DA1313	Supplementary health treatment-Nursing Practitioner	Contact	[56.00]59.00	[130.00]136.00
DA1314	Supplementary Health Treatment – Allied health practitioner	Contact	[56.00]59.00	[130.00]136.00
DA1320	Supplementary Health Group Treatment – Facility Fee	Contact		[55.00]58.00
DA1324	Supplementary Health Group Treatment – Allied practitioner	Contact	[39.00]41.00	[94.00]97.00
15 Assistive Devices & Prosthesis				
DA1510	Assistive Devices-Item Fee	Item	Varies	
DA1520	Prosthetic Devices-Item Fee	Item	Varies	
DA1530	Dental Items -Item Fee	Item	Varies	
DA1540	Repairs of devices items	Item	Varies	
16 Cosmetic Surgery				
DA1610	Cosmetic Surgery Cat A – Facility Fee	Procedure		[3522.00]3695.00
DA1611	Cosmetic Surgery Cat A – General practitioner	Procedure	[1847.00]1938.00	[5369.00]5632.00
DA1612	Cosmetic Surgery Cat A – Specialist practitioner	Procedure	[2766.00]2902.00	[6141.00]6596.00
DA1620	Cosmetic Surgery Cat B – Facility Fee	Procedure		[7925.00]8313.00
DA1621	Cosmetic Surgery Cat B – General practitioner	Procedure	[2188.00]2295.00	[10113.00]10609.00
DA1622	Cosmetic Surgery Cat B – Specialist practitioner	Procedure	[3283.00]3444.00	[11208.00]11757.00
DA1630	Cosmetic Surgery – Cat C –	Procedure		[12800.00]13427.00

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Facility Fee						
DA1631	Cosmetic Surgery Cat C – General practitioner	Procedure	[3699.00]3880.00	[16499.00]17307.00	[16499.00]17307.00	[18327.00]19225.00
DA1632	Cosmetic Surgery Cat C – Specialist practitioner	Procedure	[5548.00]5820.00	[18348.00]19247.00	[18348.00]19247.00	[20176.00]21165.00
DA1640	Cosmetic Surgery Cat D – Facility Fee	Procedure		[21617.00]22676.00	[21617.00]22676.00	[24705.00]25916.00
DA1641	Cosmetic Surgery Cat D – General practitioner	Procedure	[4150.00]4353.00	[25767.00]27030.00	[25767.00]27030.00	[30812.00]30269.00
DA1642	Cosmetic Surgery Cat D – Specialist practitioner	Procedure	[6107.00]6406.00	[27727.00]29082.00	[27727.00]29082.00	[30812.00]32322.00
17	Laboratory Services					
DA1700	Drawing of Blood	Contact		[44.00]46.00	[44.00]46.00	[44.00]46.00
DA1710	Laboratory Test	Varies				
18	Radiation Oncology					
DA1800	Radiation Oncology (NHRPL less VAT)	Item				
19	Nuclear Medicines					
DA1900	Itemisation of Isotopes	Item				
DA1910	Nuclear Medicines Cat A – Facility Fee	Procedure		[790.00]829.00	[790.00]829.00	[790.00]829.00
DA1912	Nuclear medicine Cat A – Specialist Practitioner	Procedure	[357.00]374.00	[1147.00]1203.00	[1147.00]1203.00	[1147.00]1203.00
DA1920	Nuclear Medicines Cat B – Facility Fee	Procedure		[790.00]829.00	[790.00]829.00	[790.00]829.00
DA1922	Nuclear medicine Cat B – Specialist Practitioner	Procedure	[1076.00]1129.00	[1866.00]1957.00	[1866.00]1957.00	[1866.00]1957.00
DA1930	Nuclear Medicines Cat C – Facility Fee	Procedure		[790.00]829.00	[790.00]829.00	[790.00]829.00
DA1932	Nuclear medicine Cat C – Specialist Practitioner	Procedure	[2151.00]2256.00	[2941.00]3085.00	[2941.00]3085.00	[2941.00]3085.00
DA1940	Nuclear Medicines Cat D – Facility Fee	Procedure		[790.00]829.00	[790.00]829.00	[790.00]829.00
DA1942	Nuclear medicine Cat D – Specialist Practitioner	Procedure	[3227.00]3385.00	[4017.00]4212.00	[4017.00]4214.00	[4017.00]4214.00
DA1950	Positron Emission Tomography(PET) Cat E – Facility Fee	Procedure		[7676.00]8052.00	[7676.00]8052.00	[7676.00]8052.00
DA1952	Positron Emission Tomography(PET) Cat E – Specialist Practitioner	Procedure	[4191.00]4396.00	[11867.00]12448.00	[11867.00]12448.00	[11867.00]12448.00
20	Ambulatory Procedures					
DA2010	Ambulatory Procedures Cat A – Facility Fee	Procedure		[167.00]175.00	[167.00]175.00	[202.00]212.00
DA2011	Ambulatory Procedure Cat A – General Medical Practitioner	Procedure	[55.00]58.00	[222.00]233.00	[222.00]233.00	[257.00]270.00
DA2012	Ambulatory Procedure Cat A – Specialist Medical Practitioner	Procedure	[109.00]114.00	[276.00]290.00	[276.00]290.00	[311.00]326.00
DA2013	Ambulatory Procedure Cat A – Nursing Practitioner	Procedure	[33.00]35.00	[200.00]210.00	[200.00]210.00	[235.00]247.00
DA2014	Ambulatory Procedure Cat A – Allied Health Worker	Procedure	[33.00]35.00	[200.00]210.00	[200.00]210.00	[235.00]247.00
DA2020	Ambulatory Procedures Cat B – Facility Fee	Procedure		[167.00]175.00	[167.00]175.00	[202.00]212.00
DA2021	Ambulatory Procedure Cat B – General Medical Practitioner	Procedure	[78.00]82.00	[245.00]257.00	[245.00]257.00	[280.00]294.00
DA2022	Ambulatory Procedure Cat B – Specialist Medical Practitioner	Procedure	[119.00]125.00	[286.00]300.00	[286.00]300.00	[321.00]337.00
DA2023	Ambulatory Procedure Cat B –	Procedure	[44.00]46.00	[211.00]221.00	[211.00]221.00	[246.00]258.00

14/02/2020

[Signature]

DA2024	Nursing Practitioner Ambulatory Procedure Cat B- Allied Health Worker	Procedure	[44.00]46.00	[211.00]221.00	[211.00]221.00	[246.00]258.00
21	Blood and Blood Products					
DA2100	Blood and Blood Products	Varies				
22	Hyperbaric Oxygen Therapy					
DA2200	Hyperbaric Oxygen Therapy- Fee (Flat Fee)			[523.00]549.00	[523.00]549.00	[523.00]549.00
DA2210	Hyperbaric Oxygen Therapy- Facility Fee	Session		[1735.00]1820.00	[1735.00]1820.00	[1735.00]1820.00
DA2211	Hyperbaric Oxygen Therapy- General Medical Practitioner	Session	[667.00]700.00	[2403.00]2520.00	[2403.00]2520.00	[2403.00]2520.00
DA2212	Hyperbaric Oxygen Therapy- Specialist Medical practitioner	Session	[667.00]700.00	[2403.00]2520.00	[2403.00]2520.00	[2403.00]2520.00
DA2220	Emergency Hyperbaric Oxygen Therapy-Facility Fee	Session		[1725.00]1838.00	[1725.00]1838.00	[1725.00]1838.00
DA2221	Emergency Hyperbaric Oxygen Therapy-General Medical Practitioner	Session	[973.00]1021.00	[2725.00]2859.00	[2725.00]2859.00	[2725.00]2859.00
DA2222	Emergency Hyperbaric Oxygen Therapy-Specialist Medical Practitioner	Session	[973.00]1021.00	[2725.00]2859.00	[2725.00]2859.00	[2725.00]2859.00
23	Consumables (Not included in Facility Fee)					
DA2300	Consumables (Not included in Facility Fee)	Item	Varies			
24	Autopsies					
DA2410	Autopsy-Facility Fee	Per Case		[109.00]114.00	[109.00]114.00	[133.00]140.00
DA2411	Autopsy-General Practitioner	Per Case	[110.00]115.00	[219.00]230.00	[219.00]230.00	[243.00]255.00
DA2412	Autopsy-Specialist Practitioner	Per Case	[254.00]266.00	[363.00]381.00	[363.00]381.00	[387.00]406.00
25	Port Health and Travel Clinics					
DA2510	Consultation-Facility Fee	Visit		125.00	125.00	125.00
DA2511	Consultation-General medical Practitioner	Visit	115.00	240.00	24.00	240.00
DA2513	Consultation –Nursing practitioner	Visit	66.00	191.00	191.00	191.00

Application of Regulations

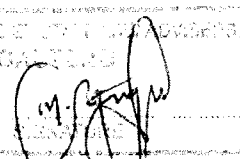
7. The provisions of these Regulations do not apply to a person—

- (a) who is an in-patient on the day that precedes the implementation of the revised tariffs; or
- (b) whose admission and classification as an in-patient had been approved before the implementation of the revised tariffs.

Short title and commencement

8. These Regulations are called the Revision of Uniform Patient Fee Schedule relating to the Classification of and Fees Payable by Patients at Provincial Hospitals, 2020, and comes in operation on 1 April 2020.

14/02/2020



NOTICE 197 OF 2020**DEPARTMENT OF HEALTH****HOSPITALS ORDINANCE NO. 14 OF 1958****REVISION OF UNIFORM PATIENT FEE SCHEDULE RELATING TO
AMBULANCES, 2020****INVITATION TO THE PUBLIC TO SUBMIT WRITTEN COMMENTS OR
REPRESENTATION**

The Member of the Executive Council responsible for health in the Province intends, in terms of sections 9 and 76 of the Hospitals Ordinance No. 14 of 1958, to make the Regulations in the Schedule.

Members of the public are hereby, in accordance with section 195(1)(e) of the Constitution of the Republic of South Africa, 1996, and section 3 read with 4 of the Promotion of Administrative Justice Act, 2000 (Act No. 3 of 2000), within 30 days of publication of this notice, invited to make written submissions or representations in respect of the draft Regulations for consideration by the MEC.

Written submissions or representations may be delivered or sent to the person and contact details below:

Mr Joe Tsoka

45 Commissioner Street

Life Health Building

Marshalltown

JOHANNESBURG

2017

Email: Joe.Tsoka@gauteng.gov.za

GAUTENG DEPARTMENT OF HEALTH**HOSPITALS ORDINANCE NO. 14 OF 1958****DRAFT REVISION OF UNIFORM PATIENT FEE SCHEDULE RELATING TO
AMBULANCES, 2020**

The Member of the Executive Council responsible for matters related to health in the Province of Gauteng has, in terms of sections 9 and 76 of the Hospitals Ordinance No. 14 of 1958, made the Regulations set out in the Schedule.

SCHEDULE**GENERAL EXPLANATORY NOTE:**

[] Words in bold type in square brackets indicate omissions from existing enactments.

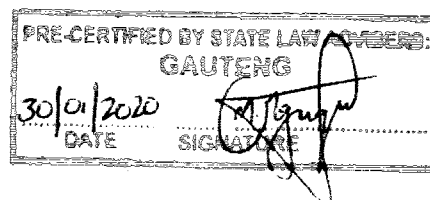
_____ Words underlined indicate insertions in existing enactments.

Definition

1. In these Regulations, unless the context otherwise indicates, "the Regulations" means the Ambulances Regulations and Tariffs, 1958.

Amendment of regulation 8 of Regulations

2. Regulation 8 of the Regulations is hereby amended—



- (a) by the substitution for subregulations (1) and (2) of the following subregulations, respectively:

"(1) Patient transport vehicle:

Per 100km or part thereof, per patient, calculated from the point where the patient is collected to the destination.

<i>Classification category</i>	<i>Facility fee</i>	<i>UPFS code</i>
HG	Exempted	—
H0	Free	—
H1	[R21.00]R22.00	1410
H2	[R42.00]R44.00	1410
PG	Exempted	—
H3	[R63.00]R66.00	1410
P and PH	[R422.00]R443.00	1410

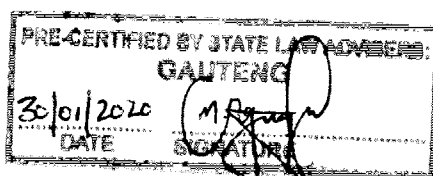
(2) Ambulance transport:

Per 50km or part thereof, per patient, calculated from the point where the patient is collected to the destination.

<i>Classification category and service</i>	<i>Facility fee</i>	<i>UPFS code</i>
HG	Exempted	—
H0	Free	—
H1: Basic life support	[R58.00]R61.00	1420
Intermediate life support	[R78.00]R82.00	1430
Advanced life support	[R130.00]R136.00	1440
H2: Basic life support	[R116.00]R121.00	1420
Intermediate life support	[R156.00]R163.00	1430
Advanced life support	[R260.00]R272.00	1440
PG	Exempted	—
H3: Basic life support	[R174.00]R182.00	1420
Intermediate life support	[R234.00]R245.00	1430
Advanced life support	[R389.00]R408.00	1440
P and PH: Basic life support	[R1158.00]R1214.00	1420
Intermediate life support	[R1558.00]R1634.00	1430
Advanced life support	[R2590.00]R2717.00	1440"; and

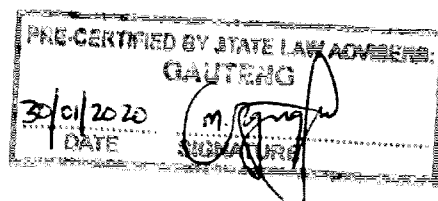
- (b) by the substitution for subregulations (4) and (5) of the following subregulations, respectively:

"(4) Emergency standby service:



Per hour or part thereof, calculated from the time of arrival at to the time of departure from the point of standby service.

<i>Service</i>	<i>Facility fee</i>	<i>Professional fee</i>	<i>UPFS code</i>
H1: Emergency standby.....	[R28.00] <u>R30.00</u>		1450
Additional charge for service provided by—			
General medical practitioner		[R37.00] <u>R39.00</u>	1451
Specialist medical practitioner		[R50.00] <u>R53.00</u>	1452
Nursing practitioner		[R21.00] <u>R22.00</u>	1453
Basic life support practitioner			1455
Intermediate life support practitioner.....			1456
Advanced life support practitioner.....			1457
H2: Emergency standby.....	[R56.00] <u>R59.00</u>		1450
Additional charge for service provided by—			
General medical practitioner		[R75.00] <u>R79.00</u>	1451
Specialist medical practitioner		[R101.00] <u>R106.00</u>	1452
Nursing practitioner		[R43.00] <u>R44.00</u>	1453
Basic life support practitioner			1455
Intermediate life support practitioner.....			1456
Advanced life support practitioner.....			1457
H3: Emergency standby.....	[R84.00] <u>R88.00</u>		1450
Additional charge for service provided by—			
General medical practitioner		[R112.00] <u>R118.00</u>	1451
Specialist medical practitioner		[R151.00] <u>R159.00</u>	1452
Nursing practitioner		[R64.00] <u>R67.00</u>	1453
Basic life support practitioner			1455
Intermediate life support practitioner.....			1456
Advanced life support practitioner.....			1457
P and PH: Emergency standby.....	[R559.00] <u>R586.00</u>		1450
Additional charge for service provided by—			
General medical practitioner		[R750.00] <u>R787.00</u>	1451
Specialist medical practitioner		[R1008.00] <u>R1057.00</u>	1452
Nursing practitioner		[R426.00] <u>R444.00</u>	1453
Basic life support practitioner	[R175.00] <u>R184.00</u>		1455
Intermediate life support practitioner.....	[R270.00] <u>R283.00</u>		1456
Advanced life support practitioner.....	[R471.00] <u>R494.00</u>		1457

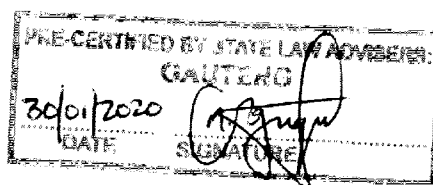


(5) Medical rescue service:
Per incident.

<i>Classification category and service</i>	<i>Facility fee</i>	<i>Professional fee</i>	<i>UPFS code</i>
HG: all services.....	Exempted	Exempted	—
H0: All services	Free	Free	—
H1: Rescue services.....	[R62.00]R65.00		1460
Additional charge for services by—			
General medical practitioner		[R93.00]R97.00	1461
Specialist medical practitioner		[R139.00]R145.00	1462
Nursing practitioner		[R62.00]R65.00	1463
Allied health practitioner		—	1464
H2: Rescue services.....	[R123.00]R129.00		1460
Additional charge for services by—			
General medical practitioner		[R185.00]R194.00	1461
Specialist medical practitioner		[R277.00]R291.00	1462
Nursing practitioner		[R123.00]R129.00	1463
Allied health practitioner		—	1464
PG: All services	Exempted	Exempted	
H3: Rescue services.....	[R185.00] R194.00		1460
Additional charge for services by—			
General medical practitioner		[R278.00]R291.00	1461
Specialist medical practitioner		[R416.00]R436.00	1462
Nursing practitioner		[R185.00]R194.00	1463
Basic life support practitioner		[R28.00]R30.00	1465
Intermediate life support practitioner.....		[R34.00]R36.00	1466
Advanced life support practitioner.....		[R77.00]R81.00	1467
Emergency transport air services fixed wing...	[R1703.00]R1786.00		1470
Emergency transport air services helicopter....	[R1870.00]R1962.00		1480
Emergency service standby-Facility Fee.....	[R39.00]R41.00		1490
P and PH: Rescue services.....	[R1233.00]R1293.00		1460
Additional charge for services by—			
General medical practitioner		[R1850.00]R1941.00	1461
Specialist medical practitioner		[R2772.00]R2908.00	1462
Nursing practitioner		[R1233.00]R1293.00	1463
Basic life support practitioner		[R189.00]R198.00	1465
Intermediate life support practitioner.....		[R226.00]R237.00	1466
Advanced life support practitioner.....		[R514.00]R539.00	1467
Emergency transport air services fixed wing...	[R11351.00]R11907.00		1470
Emergency transport air services helicopter....	[R12467.00]R13078.00		1480
Emergency service standby-Facility Fee.....	[R258.00]R271.00		1490".

Short title and commencement

3. These Regulations are called the Revision of Uniform Patient Fee Schedule Relating to Ambulances, 2020, and come into operation on 1 April 2020.



NOTICE 199 OF 2020**DEPARTMENT OF HEALTH****HOSPITALS ORDINANCE NO. 14 OF 1958****REVISION OF UNIFORM PATIENT FEE SCHEDULE RELATING TO
HOSPITAL MORTUARY, 2020****INVITATION TO THE PUBLIC TO SUBMIT WRITTEN COMMENT OR
REPRESENTATION**

The Member of the Executive Council responsible for health in the Province intends, in terms of sections 9 and 76 of the Hospitals Ordinance No. of 1958, to make the Regulations in the Schedule.

Members of the public are hereby, in accordance with section 195(1)(e) of the Constitution of the Republic of South Africa, 1996, and section 3 read with 4 of the Promotion of Administrative Justice Act, 2000 (Act No. 3 of 2000), within 30 days of publication of this notice, invited to make written submissions or representations in respect of the draft Regulations for consideration by the MEC.

Written submissions or representations may be delivered or sent to the person and contact details below:

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GAUTENG DEPARTMENT OF HEALTH**HOSPITALS ORDINANCE NO. 14 OF 1958****DRAFT REVISION OF UNIFORM PATIENT FEE SCHEDULE RELATING TO
HOSPITAL MORTUARY, 2020**

The Member of the Executive Council responsible for matters related to health in the Province of Gauteng intends, in terms of sections 9 and 76 of the Hospitals Ordinance No. of 1958, to make the Regulations set out in the Schedule.

SCHEDULE**GENERAL EXPLANATORY NOTE:**

[] **Words in bold type in square brackets indicate omissions from existing enactments.**

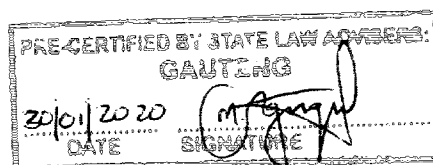
_____ **Words underlined indicate insertions in existing enactments.**

Definition

1. In these Regulations, unless the context otherwise indicates, "the Regulations" means the Hospital Mortuary Regulations, 1968.

Amendment of regulation 3 of Regulations

2. Regulation 3 of the Regulations is hereby amended—



(a) by the substitution in subregulation (1) for paragraphs (a) and (b) of the following paragraphs, respectively:

"(a) Level 1 and level 2 hospital: **[R205.00]R215.00** (UPFS code 0710); and

(b) Level 3 hospital: **[R232.00]R243.00** (UPFS code 0710)."; and

(b) by the substitution in subregulation (3)(a) for subparagraphs (i) and (ii) of the following subparagraphs, respectively:

"(i) Level 1 and level 2 hospitals: **[R205.00]R215.00** (UPFS code 0710); and

(ii) Level 3 hospital: **[R232.00]R243.00** (UPFS code 0710).".

Amendment of regulation 4 of Regulations

3. Regulation 4 of the Regulations is hereby amended by the substitution in subregulation (1) for paragraphs (a) and (b) of the following paragraphs, respectively:

"(a) Level 1 and level 2 hospital: **[R205.00]R215.00** (UPFS code 0720); and

(b) Level 3 hospital: **[R232.00]R243.00** (UPFS code 0720).".

Short title and commencement

4. These Regulations are called the Revision of Uniform Patient Fee Schedule Relating to Hospital Mortuary, 2020, and come into operation on 1 April 2020.

