



THE PROVINCE OF MPUMALANGA
DIE PROVINSIE MPUMALANGA

Provincial Gazette Provinsiale Koerant

EXTRAORDINARY • BUITENGEWOON

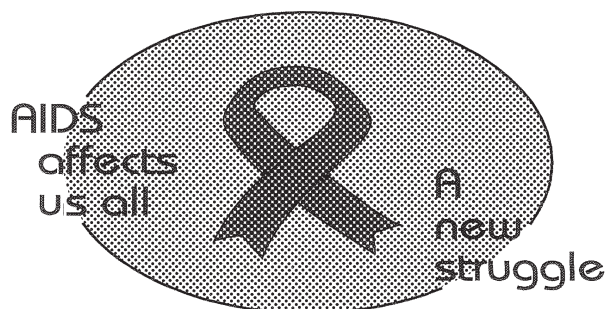
(Registered as a newspaper) • (As 'n nuusblad geregistreer)

Vol. 27

NELSPRUIT
27 NOVEMBER 2020
27 NOVEMBER 2020

No. 3215

We all have the power to prevent AIDS



Prevention is the cure

**AIDS
HELPLINE**

0800 012 322

DEPARTMENT OF HEALTH

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ISSN 1682-4518



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PROVINCIAL NOTICES • PROVINSIALE KENNISGEWINGS

PROVINCIAL NOTICE 126 OF 2020

**NOTICE IN TERMS OF SECTION 41 (1) (C) OF THE
NATIONAL HEALTH ACT, 2003 (ACT 61 OF 2003)**

**THE MPUMALANGA PROVINCE'S AMENDED
HOSPITAL FEES MANUAL IN SCHEDULE HERETO, IS
PUBLISHED FOR GENERAL INFORMATION IN
RESPECT OF PUBLIC HEALTH FACILITIES IN THE
PROVINCE.**

**THE AMENDMENT IS IN RESPECT OF THE HOSPITAL
FEES MANUAL PUBLISHED IN PROVINCIAL GAZETTE
EXTRAORDINARY NO. 3055 DATED 14 JUNE 2019.**

APPROVED UPFS TARIFFS FOR 2020/2021 FINANCIAL YEAR

CODE	DESCRIPTION	BASIS	Professional Fee	FULL UPFS TARIFFS						Professional Fee	H1						Professional Fee	H2						Professional Fee	H3																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
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0630	Inpatient Intensive care – Facility Fee	30Days/12 hours		4290	5129							150	150	180		1287	1287	1539
	Inpatient Intensive Care – General medical practitioner	30Days/12 hours	102								5	155	155	185	31	1318	1318	1569
0631	Inpatient Intensive Care– Specialist medical practitioner	30Days/12 hours	194								15	165	165	195	58	1345	1345	1597
0640	Inpatient Chronic care – Facility Fee	Day		494	494							35	35	35		148	148	148
	Inpatient Chronic care – General medical practitioner	Day	58								5	40	40	40	17	166	166	166
0642	Inpatient Chronic care – Specialist medical practitioner	Day	134								10	45	45	45	40	188	188	188
0643	Inpatient Chronic care – Nursing practitioner	Day	35								5	40	40	40	11	159	159	159
0650	Day patient – Facility Fee	Day		701	1297							50	60	90		210	266	389
	Day patient– General medical practitioner	Day	175								10	60	70	100	53	263	318	442
0652	Day patient– Specialist medical practitioner	Day	305								20	70	80	110	92	260	357	413
0653	Day patient– Nursing practitioner	Day	102								5	55	65	95	31	241	296	420
0660	Inpatient Boarder/Patient companion – Facility Fee	Day		402	402							30	30	30		121	121	121
	Inpatient Boarder/Patient Companion	Day	35								5	35	35	35	11	131	131	131
0670	Inpatient General ward – Facility Fee	30Days/12 hours		422	539	1013						15	20	35		127	162	304
	Inpatient General Ward – General medical practitioner	30Days/12 hours	87								5	20	25	40	26	153	188	330
0672	Inpatient General Ward – Specialist medical practitioner	30Days/12 hours	151								10	25	30	45	45	172	207	349
	Inpatient General Ward – Nursing medical practitioner (MOU)	30Days/12 hours	58								5	20	25	40	17	144	179	321
0680	Inpatient Chronic care – Facility Fee	30Days/12 hours		247	247							10	10	10		74	74	74
	Inpatient Chronic care – General medical practitioner	30Days/12 hours	26								5	15	15	15	8	82	82	82
0682	Inpatient Chronic care – Specialist medical practitioner	30Days/12 hours	63								5	15	15	15	19	93	93	93
	Inpatient Chronic care – Nursing practitioner	30Days/12 hours	21								5	15	15	15	6	80	80	80
0690	Inpatient Specialised Intensive care – Facility Fee	12 hours		6838	6838							480	480	480		2051	2051	2051
	Inpatient Specialised Intensive Care – General medical practitioner	12 hours	305								20	500	500	500	92	2143	2143	2143
0692	Inpatient Specialised Intensive Care– Specialists medical practitioner	12 hours	581								40	520	520	520	174	2225	2225	2225
06100	Inpatient Specialised Intensive Care Paediatric – Facility Fee	30Days/12 hours		6838	6838							480	480	480		2051	2051	2051
	Inpatient Specialised Intensive Care Paediatric – General medical practitioner	30Days/12 hours	305								20	500	500	500	92	2143	2143	2143
06101	Inpatient Specialised Intensive Care Paediatric – Specialist medical practitioner	30Days/12 hours	581								40	520	520	520	174	2225	2225	2225
06200	Neonatal – Facility Fee	30Days/12 hours		9116	9116							640	640	640		2735	2735	2735
	Neonatal – General medical practitioner	30Days/12 hours	408								30	670	670	670	122	2857	2857	2857
06202	Neonatal – Specialist medical practitioner	30Days/12 hours	775								55	695	695	695	233	2968	2968	2968

07 Mortuary 100%									
0710 Mortuary – Facility Fee				Day	215	215	243		
0720 Cremation Certificate – Facility Fee				Certificate	215	215	243		
08 Pharmaceutical									
				Prescription	38	38	46		
0810	Medication Fee – Facility Fee			Item	Varies				
0815	Pharmaceutical - IP			Item	Varies				
0816	Pharmaceutical -TTO			Item	Varies				
0817	Pharmaceutical - Chronic OPD			Item	Varies				
0818	Pharmaceutical - Oncology IP			Item	Varies				
0819	Pharmaceutical - Immune suppressant drugs IP			Item	Varies				
0820	Pharmaceutical Flat Fee - Chronic 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 P			Item	Varies				
0836	Pharmaceutical – Repeat scripts			Item	Varies				
0837	Pharmaceutical Flat Fee - Travel Medicines			Item	Varies				
09 Oral Health (Hospitals)									
0910	Oral Care Cat A – Facility Fee			Procedure	31	31	36		
0911	Oral Care Cat A – General medical practitioner			Procedure	46				
0912	Oral Care Cat A – Specialist medical practitioner			Procedure	56				
0914	Oral Care Cat A – Allied health practitioner			Procedure	41				
0920	Oral Care Cat B – Facility Fee			Procedure	95	95	113		
0921	Oral Care Cat B – General medical practitioner			Procedure	108				
0922	Oral Health Cat B – Specialist medical practitioner			Procedure	172				
0924	Oral Care Cat B – Allied health practitioner			Procedure	87				
0930	Oral Care Cat C – Facility Fee			Procedure	593	593	680		
0931	Oral Care Cat C – General medical practitioner			Procedure	656				
0932	Oral Care Cat C – Specialist medical practitioner			Procedure	1128				
0940	Oral Care Cat D – Facility Fee			Procedure	2334	2334	2672		
0941	Oral Care Cat D – General medical practitioner			Procedure	2015				
0942	Oral Care Cat D – Specialist medical practitioner			Procedure	4134				
0950	Oral Care Cat E – Facility Fee			Procedure	7864	7864	8986		
0951	Oral Care Cat E – General medical practitioner			Procedure	6777				
0952	Oral Care Cat E – Specialist medical practitioner			Procedure	13907				

07 Mortuary 100%									
0710 Mortuary – Facility Fee				Day	215	215	243		
0720 Cremation Certificate – Facility Fee				Certificate	215	215	243		
08 Pharmaceutical									
				Prescription	38	38	46		
0810	Medication Fee – Facility Fee			Item	Varies				
0815	Pharmaceutical - IP			Item	Varies				
0816	Pharmaceutical -TTO			Item	Varies				
0817	Pharmaceutical - Chronic OPD			Item	Varies				
0818	Pharmaceutical - Oncology IP			Item	Varies				
0819	Pharmaceutical - Immune suppressant drugs IP			Item	Varies				
0820	Pharmaceutical Flat Fee - Chronic 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 P			Item	Varies				
0836	Pharmaceutical – Repeat scripts			Item	Varies				
0837	Pharmaceutical Flat Fee - Travel Medicines			Item	Varies				
09 Oral Health (Hospitals)									
0910	Oral Care Cat A – Facility Fee			Procedure	31	31	36		
0911	Oral Care Cat A – General medical practitioner			Procedure	46				
0912	Oral Care Cat A – Specialist medical practitioner			Procedure	56				
0914	Oral Care Cat A – Allied health practitioner			Procedure	41				
0920	Oral Care Cat B – Facility Fee			Procedure	95	95	113		
0921	Oral Care Cat B – General medical practitioner			Procedure	108				
0922	Oral Health Cat B – Specialist medical practitioner			Procedure	172				
0924	Oral Care Cat B – Allied health practitioner			Procedure	87				
0930	Oral Care Cat C – Facility Fee			Procedure	593	593	680		
0931	Oral Care Cat C – General medical practitioner			Procedure	656				
0932	Oral Care Cat C – Specialist medical practitioner			Procedure	1128				
0940	Oral Care Cat D – Facility Fee			Procedure	2334	2334	2672		
0941	Oral Care Cat D – General medical practitioner			Procedure	2015				
0942	Oral Care Cat D – Specialist medical practitioner			Procedure	4134				
0950	Oral Care Cat E – Facility Fee			Procedure	7864	7864	8986		
0951	Oral Care Cat E – General medical practitioner			Procedure	6777				
0952	Oral Care Cat E – Specialist medical practitioner			Procedure	13907				

07 Mortuary 100%									
0710 Mortuary – Facility Fee				Day	215	215	243		
0720 Cremation Certificate – Facility Fee				Certificate	215	215	243		
08 Pharmaceutical									
				Prescription	38	38	46		
0810	Medication Fee – Facility Fee			Item	Varies				
0815	Pharmaceutical - IP			Item	Varies				
0816	Pharmaceutical -TTO			Item	Varies				
0817	Pharmaceutical - Chronic OPD			Item	Varies				
0818	Pharmaceutical - Oncology IP			Item	Varies				
0819	Pharmaceutical - Immune suppressant drugs IP			Item	Varies				
0820	Pharmaceutical Flat Fee - Chronic 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 P			Item	Varies				
0836	Pharmaceutical – Repeat scripts			Item	Varies				
0837	Pharmaceutical Flat Fee - Travel Medicines			Item	Varies				
09 Oral Health (Hospitals)									
0910	Oral Care Cat A – Facility Fee			Procedure	31	31	36		
0911	Oral Care Cat A – General medical practitioner			Procedure	46				
0912	Oral Care Cat A – Specialist medical practitioner			Procedure	56				
0914	Oral Care Cat A – Allied health practitioner			Procedure	41				
0920	Oral Care Cat B – Facility Fee			Procedure	95	95	113		
0921	Oral Care Cat B – General medical practitioner			Procedure	108				
0922	Oral Health Cat B – Specialist medical practitioner			Procedure	172				
0924	Oral Care Cat B – Allied health practitioner			Procedure	87				
0930	Oral Care Cat C – Facility Fee			Procedure	593	593	680		
0931	Oral Care Cat C – General medical practitioner			Procedure	656				
0932	Oral Care Cat C – Specialist medical practitioner			Procedure	1128				
0940	Oral Care Cat D – Facility Fee			Procedure	2334	2334	2672		
0941	Oral Care Cat D – General medical practitioner			Procedure	2015				
0942	Oral Care Cat D – Specialist medical practitioner			Procedure	4134				
0950	Oral Care Cat E – Facility Fee			Procedure	7864	7864	8986		
0951	Oral Care Cat E – General medical practitioner			Procedure	6777				
0952	Oral Care Cat E – Specialist medical practitioner			Procedure	13907				

07 Mortuary 100%									
0710 Mortuary – Facility Fee				Day	215	215	243		
0720 Cremation Certificate – Facility Fee				Certificate	215	215	243		
08 Pharmaceutical									
				Prescription	38	38	46		
0810	Medication Fee – Facility Fee			Item	Varies				
0815	Pharmaceutical - IP			Item	Varies				
0816	Pharmaceutical -TTO			Item	Varies				
0817	Pharmaceutical - Chronic OPD			Item	Varies				
0818	Pharmaceutical - Oncology IP			Item	Varies				
0819	Pharmaceutical - Immune suppressant drugs IP			Item	Varies				
0820	Pharmaceutical Flat Fee - Chronic 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 P			Item	Varies				
0836	Pharmaceutical – Repeat scripts			Item	Varies				
0837	Pharmaceutical Flat Fee - Travel Medicines			Item	Varies				
09 Oral Health (Hospitals)									
0910	Oral Care Cat A – Facility Fee			Procedure	31	31	36		
0911	Oral Care Cat A – General medical practitioner			Procedure	46				
0912	Oral Care Cat A – Specialist medical practitioner			Procedure	56				
0914	Oral Care Cat A – Allied health practitioner			Procedure	41				
0920	Oral Care Cat B – Facility Fee			Procedure	95	95	113		
0921	Oral Care Cat B – General medical practitioner			Procedure	108				
0922	Oral Health Cat B – Specialist medical practitioner			Procedure	172				
0924	Oral Care Cat B – Allied health practitioner			Procedure	87				
0930	Oral Care Cat C – Facility Fee			Procedure	593	593	680		
0931	Oral Care Cat C – General medical practitioner			Procedure	656				
0932	Oral Care Cat C – Specialist medical practitioner			Procedure	1128				
0940	Oral Care Cat D – Facility Fee			Procedure	2334	2334	2672		
0941	Oral Care Cat D – General medical practitioner			Procedure	2015				
0942	Oral Care Cat D – Specialist medical practitioner			Procedure	4134				
0950	Oral Care Cat E – Facility Fee			Procedure	7864	7864	8986		
0951	Oral Care Cat E – General medical practitioner			Procedure	6777				
0952	Oral Care Cat E – Specialist medical practitioner			Procedure	13907				

07 Mortuary 100%									
0710 Mortuary – Facility Fee				Day	215	215	243		
0720 Cremation Certificate – Facility Fee				Certificate	215	215	243		
08 Pharmaceutical									
				Prescription	38	38	46		
0810	Medication Fee – Facility Fee			Item	Varies				
0815	Pharmaceutical - IP			Item	Varies				
0816	Pharmaceutical -TTO			Item	Varies				
0817	Pharmaceutical - Chronic OPD			Item	Varies				
0818	Pharmaceutical - Oncology IP			Item	Varies				
0819	Pharmaceutical - Immune suppressant drugs IP			Item	Varies				
0820	Pharmaceutical Flat Fee - Chronic 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 P			Item	Varies				
0836	Pharmaceutical – Repeat scripts			Item	Varies				
0837	Pharmaceutical Flat Fee - Travel Medicines			Item	Varies				
09 Oral Health (Hospitals)									
0910	Oral Care Cat A – Facility Fee			Procedure	31	31	36		
0911	Oral Care Cat A – General medical practitioner			Procedure	46				
0912	Oral Care Cat A – Specialist medical practitioner			Procedure	56				
0914	Oral Care Cat A – Allied health practitioner			Procedure	41				
0920	Oral Care Cat B – Facility Fee			Procedure	95	95	113		
0921	Oral Care Cat B – General medical practitioner			Procedure	108				
0922	Oral Health Cat B – Specialist medical practitioner			Procedure	172				
0924	Oral Care Cat B – Allied health practitioner			Procedure	87				
0930	Oral Care Cat C – Facility Fee			Procedure	593	593	680		
0931	Oral Care Cat C – General medical practitioner			Procedure	656				
0932	Oral Care Cat C – Specialist medical practitioner			Procedure	1128				
0940	Oral Care Cat D – Facility Fee			Procedure	2334	2334	2672		
0941	Oral Care Cat D – General medical practitioner			Procedure	2015				
0942	Oral Care Cat D – Specialist medical practitioner			Procedure	4134				
0950	Oral Care Cat E – Facility Fee			Procedure	7864	7864	8986		
0951	Oral Care Cat E – General medical practitioner			Procedure	6777				
0952	Oral Care Cat E – Specialist medical practitioner			Procedure	13907				

07 Mortuary 100%									
0710 Mortuary – Facility Fee				Day	215	215	243		
0720 Cremation Certificate – Facility Fee				Certificate	215	215	243		
08 Pharmaceutical									
				Prescription	38	38	46		
0810	Medication Fee – Facility Fee			Item	Varies				
0815	Pharmaceutical - IP			Item	Varies				
0816	Pharmaceutical -TTO			Item	Varies				
0817	Pharmaceutical - Chronic OPD			Item	Varies				
0818	Pharmaceutical - Oncology IP			Item	Varies				
0819	Pharmaceutical - Immune suppressant drugs IP			Item	Varies				
0820	Pharmaceutical Flat Fee - Chronic 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 P			Item	Varies				
0836	Pharmaceutical – Repeat scripts			Item	Varies				
0837	Pharmaceutical Flat Fee - Travel Medicines			Item	Varies				
09 Oral Health (Hospitals)									
0910	Oral Care Cat A – Facility Fee			Procedure	31	31	36		
0911	Oral Care Cat A – General medical practitioner			Procedure	46				
0912	Oral Care Cat A – Specialist medical practitioner			Procedure	56				
0914	Oral Care Cat A – Allied health practitioner			Procedure	41				
0920	Oral Care Cat B – Facility Fee			Procedure	95	95	113		
0921	Oral Care Cat B – General medical practitioner			Procedure	108				
0922	Oral Health Cat B – Specialist medical practitioner			Procedure	172				
0924	Oral Care Cat B – Allied health practitioner			Procedure	87				
0930	Oral Care Cat C – Facility Fee			Procedure	593	593	680		
0931	Oral Care Cat C – General medical practitioner			Procedure	656				
0932	Oral Care Cat C – Specialist medical practitioner			Procedure	1128				
0940	Oral Care Cat D – Facility Fee			Procedure	2334	2334	2672		
0941	Oral Care Cat D – General medical practitioner			Procedure	2015				
0942	Oral Care Cat D – Specialist medical practitioner			Procedure	4134				
0950	Oral Care Cat E – Facility Fee			Procedure	7864	7864	8986		
0951	Oral Care Cat E – General medical practitioner			Procedure	6777				
0952	Oral Care Cat E – Specialist medical practitioner			Procedure	13907				

07 Mortuary 100%									
0710 Mortuary – Facility Fee				Day	215	215	243		
0720 Cremation Certificate – Facility Fee				Certificate	215	215	243		
08 Pharmaceutical									
				Prescription	38	38	46		
0810	Medication Fee –								

Included in Consultation

10 Consultations		20% of full paying				20%				20%				30%			
		Visit		104	104	125		20	20	25		20	20	25		31	31
1010	Outpatient Consultation – Facility Fee	Visit				125											
1011	Outpatient Consultation – General medical practitioner	Visit	115					25	45	50		25	45	50	35	66	72
1012	Outpatient Consultation – Specialist medical practitioner	Visit	266					55	75	80		55	75	80	80	111	117
1013	Outpatient Consultation – Nursing practitioner	Visit	66					15	35	40		15	35	40	20	51	57
1014	Outpatient Consultation – Allied Health practitioner	Visit	68					15	35	40		15	35	40	20	52	58
1020	Emergency Consultation – Facility Fee	Visit		210	210	252											
1021	Emergency Consultation – General medical practitioner	Visit	175					20	40	45		35	75	85	53	116	128
1022	Emergency Consultation – Specialist medical practitioner	Visit	400					50	70	75		80	120	130	120	183	196
1023	Emergency Consultation – Nursing practitioner	Visit	102					15	35	40		20	60	70	31	94	106
1024	Emergency Consultation – Allied Health practitioner	Visit	104					15	35	40		20	60	70	31	94	107
1030	Follow-Up Outpatient Consultation – Facility Fee	Visit		104	104	125											
1031	Follow-Up Outpatient Consultation – General medical practitioner	Visit	115					20	40	45		25	45	50	35	66	72
1032	Follow-Up Outpatient Consultation – Specialist medical practitioner	Visit	266					50	70	75		55	75	80	80	111	117
1033	Follow-Up Outpatient Consultation – Nursing practitioner	Visit	66					15	35	40		15	35	40	20	51	57
1034	Follow-Up Outpatient Consultation – Allied health practitioner	Visit	68					15	35	40		15	35	40	20	52	58
1040	Telephonic Consultation – Facility Fee	Telephonic		104	104	125											
1041	Telephonic Consultation – General medical practitioner	Telephonic	115					20	40	45		25	45	50	35	66	72
1042	Telephonic Consultation – Specialist medical practitioner	Telephonic	266					50	70	75		55	75	80	80	111	117
1043	Telephonic Consultation – Nursing practitioner	Telephonic	66					15	35	40		15	35	40	20	51	57
1044	Telephonic Consultation – Allied Health practitioner	Telephonic	68					15	35	40		15	35	40	20	52	58
11 Minor Theatre Procedures																	
1110	Minor Procedure Cat A – Facility Fee	Procedure		494	494	592											
1111	Minor Procedure Cat A – General medical practitioner	Procedure	172					35	135	155		35	135	155	52	200	229
1112	Minor Procedure Cat A – Specialist medical practitioner	Procedure	329					65	165	185		65	165	185	99	247	276
1120	Minor Procedure Cat B – Facility Fee	Procedure		494	494	592											
1121	Minor Procedure Cat B – General medical practitioner	Procedure	254					50	150	170		50	150	170	76	224	254
1122	Minor Procedure Cat B – Specialist medical practitioner	Procedure	573					115	215	235		115	215	235	172	320	350
1130	Minor Procedure Cat C – Facility Fee	Procedure		494	494	592											
1131	Minor Procedure Cat C – General medical practitioner	Procedure	399					80	180	200		80	180	200	120	268	297
1132	Minor Procedure Cat C – Specialist medical practitioner	Procedure	895					180	280	300		180	280	300	269	417	446
1140	Minor Procedure Cat D – Facility Fee	Procedure		494	494	592											
1141	Minor Procedure Cat D – General medical practitioner	Procedure	1052					210	310	330		210	310	330	316	464	493
1142	Minor Procedure Cat D – Specialist medical practitioner	Procedure	2373					475	575	595		475	575	595	712	860	890

Included in Consultation

12 Major Theatre Procedures										Included in Consultation			20%			30%						
Theatre Procedure Cat A – Facility				Procedure	1598	2338	2698		320				470	540		479	701	809				
1210 Fee	Theatre Procedure Cat A – General medical practitioner			Procedure	172			35	355				505	575	52	531	753	861				
Theatre Procedure Cat A – Specialist medical practitioner				Procedure	329			65	385				535	605	99	578	800	908				
1220 Fee	Theatre Procedure Cat B – Facility			Procedure		2417	3547	4083														
Theatre Procedure Cat B – General medical practitioner				Procedure	254			50	535				760	865	76	801	1140	1301				
Theatre Procedure Cat B – Specialist medical practitioner				Procedure	573			115	600				825	930	172	897	1236	1397				
1230 Fee	Theatre Procedure Cat C – Facility			Procedure		4153	6094	7031					830	1220	1405							
Theatre Procedure Cat C – General medical practitioner				Procedure	399			80	910				1300	1485	120	1366	1948	2229				
Theatre Procedure Cat C – Specialist medical practitioner				Procedure	895			180	1010				1400	1585	269	1514	2097	2378				
1240 Fee	Theatre Procedure Cat D – Facility			Procedure		10648	15620	17999					2130	3125	3600		3194	4686	5400			
Theatre Procedure Cat D – General medical practitioner				Procedure	1052			210	2340				3335	3810	316	3510	5002	5715				
Theatre Procedure Cat D – Specialist medical practitioner				Procedure	2373			475	2605				3600	4075	712	3906	5398	6112				
1250 Fee	Theatre Procedure Cat E – Facility			Procedure		14908	21866	25198					2980	4375	5040		4472	6560	7559			
Theatre Procedure Cat E – General medical practitioner				Procedure	1473			295	3275				4670	5335	442	4914	7002	8001				
Theatre Procedure Cat E – Specialist medical practitioner				Procedure	3322			665	3645				5040	5705	997	5469	7556	8556				
13 Treatments													10%			20%			30%			
Supplementary Health Treatment – Facility Fee				Contact	66	66	81		5				5	15	15		20	20	24			
Supplementary Health Treatment – Nursing practitioner				Contact	59			5	10				10	15	25	18	38	38	42			
Supplementary Health Treatment – Allied health practitioner				Contact	59			5	10				10	15	25	18	38	38	42			
Supplementary Health Group Treatment – Facility Fee				Contact	52	52	58		5				5	5	10	10	16	16	17			
Supplementary Health Group Treatment – Allied health practitioner				Contact	41			5	10				10	10	20	12	28	28	30			
14 Emergency Medical Services													5%			10%			15%			
Patient transport service – Facility				100km	443	443	443		20				20	20	45	45	66	66	66			
Basic life support – Facility Fee				50km	1208	1208	1208		60				60	60	120	120	181	181	181			
Intermediate life support – Facility				50km	1634	1634	1634		80				80	80	165	165	245	245	245			
Advanced life support – Facility Fee				50km	2717	2717	2717		135				135	135	270	270	408	408	408			
Emergency service standby – Facility				Once-off fee	586	586	586	100%									100%					
Emergency service standby – General medical practitioner				Hour	787																	
Emergency service standby – Specialist medical practitioner				Hour	1057																	
Emergency service standby – Nursing practitioner				Hour	447																	
Emergency service standby – Emergency care practitioner				Hour	N/A																	
Emergency service standby – Basic life support practitioner				Hour	184																	
Emergency service standby – Intermediate life support practitioner				Hour	282																	
Advanced life support practitioner				Hour	494																	

1460	Rescue – Facility Fee	Incident		1293	1293	1293	65	65	65	130	130	130	194	194	194
1461	Rescue – General medical practitioner	Incident	1941				95	160	160	195	325	325	291	485	485
1462	Rescue – Specialist medical practitioner	Incident	2908				145	210	210	290	420	420	436	630	630
1463	Rescue – Nursing practitioner	Incident	1293				65	130	130	130	260	260	194	388	388
1464	Rescue – Emergency care practitioner	Incident	N/A												
1465	Rescue – Basic life support practitioner	Incident	198				10	75	75	20	150	150	30	224	224
1466	Rescue – Intermediate life support practitioner	Incident	237				10	75	75	25	155	155	36	230	230
1467	Rescue – Advanced life support practitioner	Incident	539				25	90	90	55	185	185	81	275	275
1470	Emergency transport air services fixed wing	Flying hour		11907	11907			595	595		1191	1191		1786	1786
1480	Emergency transport air services helicopter	Flying hour		13078	13078			655	655		1310	1310		1962	1962
1490	Emergency service standby – Facility Additional 50km	Item		271	271	271		15	15	15	25	25		41	41
15 Assistive Devices & Prosthesis															
1510	Assistive Devices	Item	Varies												
1520	Prosthetic Devices	Item	Varies												
1530	Dental Laboratory	Item	Varies												
1540	Assistive Devices: Prosthesis, Dental	Item	Varies												
1550	Optical Devices	Item	Varies												
16 Cosmetic Surgery - 100%															
1610	Cosmetic Surgery Cat A – Facility Fee	Procedure		3361	3361	3361		3361	3361		3361	3361		3361	3361
1611	Cosmetic Surgery Cat A – General medical practitioner	Procedure	1938				1938				1938				
1612	Cosmetic Surgery Cat A – Specialist practitioner	Procedure	2902				2902				2902				
1620	Cosmetic Surgery Cat B – Facility Fee	Procedure		7556	7556	7556		7556	7556		7556	7556		7556	7556
1621	Cosmetic Surgery Cat B – General medical practitioner	Procedure	2295				2295				2295				
1622	Cosmetic Surgery Cat B – Specialist medical practitioner	Procedure	3444				3444				3444				
1630	Cosmetic Surgery – Cat C – Facility Fee	Procedure		12204	12204	12204		12204	12204		12204	12204		12204	12204
1631	Cosmetic Surgery Cat C – General medical practitioner	Procedure	3880				3880				3880				
1632	Cosmetic Surgery Cat C – Specialist medical practitioner	Procedure	5820				5820				5820				
1640	Cosmetic Surgery Cat D – Facility Fee	Procedure		20615	20615	20615		20615	20615		20615	20615		20615	20615
1641	Cosmetic Surgery Cat D – General medical practitioner	Procedure	4353				4353				4353				
1642	Cosmetic Surgery Cat D – Specialist medical practitioner	Procedure	6406				6406				6406				
17 Laboratory Services															
1700	Drawing of Blood	Per Contact		41	41	41	Included in consultation				10	10	10	12	12
1710	Laboratory Tests	Varies													
18 Radiation Oncology															
1800	Radiation Oncology (NHRPL) less VAT	Item	Varies												

19 Nuclear Medicines		10%		20%		30%	
1900	Itemisation of Isotopes						
1910	Nuclear Medicine Cat A - Facility Fee	Procedure			150	150	227
	Nuclear Medicine Cat A - Specialist						
1912	medical practitioner	Procedure	374		225	225	339
1920	Nuclear Medicine Cat B - Facility Fee	Procedure			150	150	227
	Nuclear Medicine Cat B - Specialist						
1922	medical practitioner	Procedure	1129		375	375	565
1930	Nuclear Medicine Cat C - Facility Fee	Procedure			150	150	227
	Nuclear Medicine Cat C - Specialist						
1932	medical practitioner	Procedure	2256		600	600	903
1940	Nuclear Medicine Cat D - Facility Fee	Procedure			150	150	227
	Nuclear Medicine Cat D - Specialist						
1942	medical practitioner	Procedure	3385		825	825	1242
1950	Positron Emission Tomography (PET)	Procedure			1610	1610	2416
	Positron Emission Tomography (PET)						
1952	Cat E - Specialist medical practitioner	Procedure	4396		2490	2490	3734
20 Ambulatory Procedures							
2010	Ambulatory Procedure Cat A - Facility Fee	Procedure			30	30	47
	Ambulatory Procedure Cat A - General						
2011	Medical Practitioner	Procedure	58		40	40	56
2012	Ambulatory Procedure Cat A - Specialist Medical Practitioner	Procedure	114		55	55	70
2013	Ambulatory Procedure Cat A - Nursing Practitioner	Procedure	35		35	35	50
2014	Ambulatory Procedure Cat A - Allied Health Worker	Procedure	35		35	35	50
2020	Ambulatory Procedure Cat B - Facility Fee	Procedure			30	30	47
	Ambulatory Procedure Cat B - General						
2021	medical practitioner	Procedure	82		45	45	72
2022	Ambulatory Procedure Cat B - Specialist Medical Practitioner	Procedure	125		55	55	85
2023	Ambulatory Procedure Cat B - Nursing Practitioner	Procedure	46		40	40	61
2024	Ambulatory Procedure Cat B - Allied Health Worker	Procedure	46		40	40	61
21 Blood and Blood Products							
2100	Blood and Blood Products	Itemisation	Varies				
22 Hyperbaric oxygen Therapy							
2200	Hyperbaric Oxygen Therapy - Facility Fee (Flat Fee)	Session			110	110	165
2210	Hyperbaric Oxygen Therapy - Facility Fee	Session			330	330	497
	Hyperbaric Oxygen Therapy - General medical practitioner	Session	700		470	470	707
2211	Hyperbaric Oxygen Therapy - Specialist medical practitioner	Session	700		470	470	707
2220	Emergency Hyperbaric Oxygen Therapy - Facility Fee	Session			335	335	500
	Emergency Hyperbaric Oxygen Therapy - General medical practitioner	Session	1021		540	540	807
2221	Emergency Hyperbaric Oxygen Therapy - Specialist medical practitioner	Session	1021		540	540	807

23 Consumables (Not included in Facility Fee) Buy-outs									
Consumables not included in the	Item	Varies				Included in consultation			
						100%			
24 Autopsies 100%									
2410 Autopsy - Facility Fee	Per case		104	104	125		104	104	125
2411 Autopsy - General Medical Practitioner	Per case	115				115			115
2412 Autopsy - Specialist Medical Practitioner	Per case	266				266			266
25 Port Health and Travel Clinics									
2510 Outpatient Consultation - Facility Fee	Visit		125	125	125		125	125	125
2511 Outpatient Consultation - General medical practitioner	Visit	115				115			115
2512 Outpatient Consultation - Nursing practitioner	Visit	66				66			66
2520 Emergency Consultation - Facility Fee	Visit		252	252	252		252	252	252
2521 Emergency Consultation - General medical practitioner	Visit	175				175			175
2522 Emergency Consultation - Nursing practitioner	Visit	102				102			102
0810 Medication Fee - Facility Fee	Prescription		38	38	46		38	38	46
0837 Pharmaceutical - Travel Medicine	Item	Varies				Varies			Varies

UNIFORM PATIENT FEE SCHEDULE 2020									
RADIATION ONCOLOGY AUTHORISATION FORM FOR FULL PAYING USERS									
Hospital Name: _____									
Hospital Practice No: _____ Hospital Tel: _____									
Attending Dr: _____									
Attending Dr Practice No: _____									
Enquiries: _____ Tel: _____									
E-mail address: _____									
<u>AUTHORIZATION REQUESTED FOR RADIOTHERAPY</u>									
Name of patient: _____ Auth No: _____									
Date of Birth: _____ Stage: _____									
Diagnosis: _____									
ICD 10 code/s: _____									
Treatment Plan δ Gy δ Frac (#) δ									
Radical/Curative δ Palliative improved survival δ Palliative Improved symptoms δ Adjuvant δ									
DATE TO START: _____									
CHEMOTHERAPY									
	Facility Fee Code	Facility Fee	Prof Code	Prof Fee					
In-Patient per day	0610	R 2 012	0612	R 305					
Outpatient	1010	R 125	1012	R 266					
Non Infusion Chemotherapy	5791	R 290	5790	R 510					
Infusion Chemotherapy	5794	R 939	5793	R 1 898					

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RADIOTHERAPY	Date	Qty	Facil code	Facil Fee	Prof Code	Hosp. Prof Fee	Private. Prof Fee	TOTAL
Radiation Oncology – Radio pharmacology drugs			0810	R 46	0818	Varies		
Planning								
Manual Planning:								
-Single volume			5601	R 1 435	5801	R 604	R	R
-Multiple volumes			5602	R 1 891	5802	R 810	R	R
-Special Technique			5603	R 2 584	5803	R 1 107	R	R
Conventional(Sim only):								
-Single volume			5608	R 5 738	5808	R 2 458	R	R
-Multiple volume			5609	R 8 035	5809	R 3 394	R	R
-Special Technique			5610	R 10 045	5810	R 4 303	R	R
3D Planning (with CT):								
-Single volume			5620	R 14 116	5820	R 3 470	R	R
-Multiple volumes			5621	R 19 765	5821	R 5 891	R	R
-Special Technique (+MLC)			5622	R 24 706	5822	R 8 008	R	R
IMRT Planning procedure:								
-Radical course (excl CT+MRI)			5623	R 27 695	5823	R 9 114	R	R
-Booster (excl CT + MRI)			5625	R 13 848	5825	R 3 355	R	R
-CT Scan with MRI or similar imaging fusion			5626	R 31 415	5826	R 10 884	R	R
-CT scan planning			0540	R 1 213	0542	R 2 095	R	R
		Qty	Facil code	Facil Fee	Prof Code	Hosp. Prof Fee	Private. Prof Fee	TOTAL
Kilovoltage Treatment:								
Weekly/part thereof			5634	R 1 654	5834	R 708	R	R

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-Intermediate Complexity (>1guide tube or >8dwell points, or <8 points but general anesthetics)			5683	R 7 724	5883	R 3 862	R	R
-High Complexity (Inclusive for implant under local or general anesthetics)			5685	R 10 297	5885	R 5 150	R	R
Brachytherapy Treatment:								
Global fee: Manual after loading			5690	R 6 019	5890	R 3 009	R	R
Global fee: Remote afterloading			5893	R 14 334	5892	R 6 113	R	R
Brachytherapy Imaging (add to any code other than 5883 or 5885)			5695	R 1 539	5895	R 769	R	R
Stereotactic Radiation:								
Single/ up to 4#: Prof Fee			5660	R 125 391	5860	R 53 738	R	R
5/more #:			5661	R 144 203	5861	R 61 800	R	R
EXPECTED TOTAL: R								
GRAND TOTAL: R								

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Implants:									
-Low Complexity(Single guide tube, <8 dwell points)			5682	R 425	5882	R 210	R	R	R
-Intermediate Complexity (>1guide tube or >8dwell points, or <8 points but general anesthetics)			5683	R 1 545	5883	R 770	R	R	R
-High Complexity (Inclusive for implant under local or general anesthetics)			5685	R 2 060	5885	R 1 030	R	R	R
Brachytherapy Treatment:									
Global fee: Manual after loading			5690	R 1 205	5890	R 600	R	R	R
Global fee: Remote afterloading			5893	R 2 865	5892	R 1 225	R	R	R
Brachytherapy Imaging (add to any code other than 5883 or 5885)			5695	R 310	5895	R 155	R	R	R
Stereotactic Radiation:									
Single/ up to 4#: Prof Fee			5660	R 25 080	5860	R 10 750	R	R	R
5/more #:			5661	R 28 840	5861	R 12 360	R	R	R
EXPECTED GRAND TOTAL: R									

UNIFORM PATIENT FEE SCHEDULE 2020																													
RADIATION ONCOLOGY AUTHORISATION FORM FOR EXTERNALLY FUNDED PATIENT																													
Hospital Name: _____																													
Hospital Practice No: _____ Hospital Tel: _____																													
Attending Dr: _____																													
Attending Dr Practice No: _____																													
Enquiries: _____ Tel: _____																													
E-mail address: _____																													
<u>AUTHORIZATION REQUESTED FOR RADIOTHERAPY</u>																													
Name of patient: _____ Auth No: _____																													
Medical Aid: _____ No: _____ (OPTION)																													
Date of Birth: _____																													
Diagnosis: _____ Stage: _____																													
ICD 10 code/s: _____																													
Treatment Plan ☐ Gy ☐ Frac (#) ☐																													
Radical/Curative ☐ Palliative improved survival ☐ Palliative Improved symptoms ☐ Adjuvant ☐																													
DATE TO START: _____																													
CHEMOTHERAPY																													
<table border="1"> <thead> <tr> <th></th> <th>Facility Fee Code</th> <th>Facility Fee R</th> <th>Prof Fee Code</th> <th>Prof Fee</th> </tr> </thead> <tbody> <tr> <td>In-Patient per day</td> <td>0610</td> <td>R 604</td> <td>0612</td> <td>R 92</td> </tr> <tr> <td>Outpatient</td> <td>1010</td> <td>R 38</td> <td>1012</td> <td>R 80</td> </tr> <tr> <td>Non Infusion Chemotherapy</td> <td>5791</td> <td>R 87</td> <td>5790</td> <td>R 153</td> </tr> </tbody> </table>											Facility Fee Code	Facility Fee R	Prof Fee Code	Prof Fee	In-Patient per day	0610	R 604	0612	R 92	Outpatient	1010	R 38	1012	R 80	Non Infusion Chemotherapy	5791	R 87	5790	R 153
	Facility Fee Code	Facility Fee R	Prof Fee Code	Prof Fee																									
In-Patient per day	0610	R 604	0612	R 92																									
Outpatient	1010	R 38	1012	R 80																									
Non Infusion Chemotherapy	5791	R 87	5790	R 153																									

Annexure L5

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RADIOTHERAPY	Date	Qty	Facil code	Facil Fee	Prof Code	Hosp. Prof Fee	Private. Prof Fee	TOTAL
Radiation Oncology – Radio pharmacology drugs			0810	R 14	0818	Varies		
Planning								
Manual Planning:								
-Single volume			5601	R 431	5801	R 181	R	R
-Multiple volumes			5602	R 567	5802	R 243	R	R
-Special Technique			5603	R 775	5803	R 332	R	R
Conventional (Sim only):								
-Single volume			5608	R 1 721	5808	R 737	R	R
-Multiple volume			5609	R 2 411	5809	R 1 018	R	R
-Special Technique			5610	R 3 014	5810	R 1 291	R	R
3D Planning (with CT):								
-Single volume			5620	R 4 235	5820	R 1 041	R	R
-Multiple volumes			5621	R 5 930	5821	R 1 767	R	R
-Special Technique (+MLC)			5622	R 7 412	5822	R 2 402	R	R
IMRT Planning procedure:								
-Radical course (excl CT+MRI)			5623	R 8 309	5823	R 2 734	R	R
-Booster (excl CT + MRI)			5625	R 4 154	5825	R 1 007	R	R
-CT Scan with MRI or similar imaging fusion			5626	R 9 425	5826	R 3 265	R	R
-CT scan planning			0540	R 364	0542	R 629	R	R

	Qty	Facil code	Facil Fee	Prof Code	Hosp. Prof Fee	Private. Prof Fee	TOTAL
Kilovoltage Treatment:							
Weekly/part thereof		5634	R 496	5834	R 212	R	R
Megavoltage Radiation:							
Short course (3# or less) :							
Single Volume		5635	R 1 070	5835	R 428	R	R
Multiple Volumes		5636	R 1 497	5836	R 642	R	R
Special Technique		5637	R 1 925	5837	R 825	R	R
Conventional Radiation Weekly (4# or more):							
Single Volume		5639	R 1 709	5839	R 732	R	R
Multiple Volume		5640	R 2 496	5840	R 1 070	R	R
Special Technique		5641	R 2 796	5841	R 1 200	R	R
Advanced Techniques Weekly:							
MLC Single Volume		5649	R 2 389	5849	R 1 023	R	R
MLC Multiple Volumes		5650	R 3 345	5850	R 1 434	R	R
MLC Special Technique		5651	R 4 301	5851	R 1 843	R	R
IMRT		5654	R 3 528	5854	R 1 512	R	R
Total Body/similar		5655	R 8 362	5855	R 3 584	R	R
Brachytherapy							
	Qty	Facil code	Facil Fee	Prof Code	Hosp. Prof Fee	Private. Prof Fee	TOTAL
Isotope/Applicator:							
-Low Complexity		5670	R 320	5870	R 160	R	R
-Intermediate Complexity		5672	R 638	5872	R 320	R	R
-High Complexity		5673	R 1 770	5873	R 885	R	R

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Printed by and obtainable from the Government Printer, Bosman Street, Private Bag X85, Pretoria, 0001.
Contact Centre Tel: 012-748 6200. eMail: info.egazette@gpw.gov.za
Publications: Tel: (012) 748 6053, 748 6061, 748 6065

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