



 **FEDHEALTH**

Blue Door Plus

2017

Blue Door Plus

Fedhealth Blue Door Plus offers a value for money option for lower income, previously uncovered employees. This option is not suitable for people already on a medical aid or for those with high benefit requirements.

Major Medical Benefit

Costs for hospitalisation are covered unlimited from this benefit from the first day of hospitalisation in public or network private hospitals. Voluntary use of non-network or public hospitals will result in a co-payment of R10 000 of your hospital bill. Organ transplants and renal dialysis are covered as Prescribed Minimum Benefits at state facilities only. Oncology is covered unlimited as a Prescribed Minimum Benefit at Independent Clinical Oncology Network (ICON), the Scheme's Designated Service Provider.

Hospital admissions require a referral from the nominated contracted FP and must be pre-authorised by the Authorisation Centre on 0860 002 153.

Chronic Disease Benefit

On diagnosis of a listed chronic condition you, your doctor or pharmacist will need to apply for chronic medication via telephone or online via the Fedhealth website.

Telephonically: You can call Chronic Medicine Management (CMM) between 08h30 and 19h00, Monday to Thursday, and 09h00 – 19h00 on Friday, on **0860 002 153**. The call will be routed to a consultant who will assist you with your application.

Online: You may also apply for chronic medication 24 hours a day by logging onto the Fedhealth website (www.fedhealth.co.za). If you have not completed an online application before, you will be prompted to register as a first time user since a login username and password will be requested. Once you have registered and your profile is open, click on Managed Care and then select Authorisations. Click on the beneficiary code for who you would like to apply and then click on the New Chronic Application button.

Day-to-Day Benefit

Day-to-day benefits are provided through use of a **nominated** Blue Door Plus FP and visits to dentists, specialists and other service providers. Details of these service providers in your area are available from the Fedhealth Customer Contact Centre on 0860 002 153. Your nominated Blue Door Plus FP will also provide you with your required medication either directly or through a local pharmacy. Consultations with your **nominated** Blue Door Plus FP, as well as dentist visits, pathology, radiology, maternity, optometry and specialists are covered under this benefit. Please see the benefit table in this brochure for more detail.

Please note: We refer to general practitioners as family practitioners (FPs).

For FP visits

1. You will need to **nominate** an FP by contacting **the Fedhealth Customer Contact Centre on 0860 002 153** and naming an FP that you and your family intend to use. A different FP may be **nominated** for each beneficiary, for e.g., a spouse not living at the same residence as the main member. Nomination of an FP can only be changed once every six months. The Customer Contact Centre is available between 08h30 - 19h00 Monday to Thursday, and 09h00 - 19h00 on Fridays for a detailed list of Blue Door Plus contracted FPs to choose from.
2. Make an appointment with your nominated Blue Door Plus FP.
3. Have your Fedhealth Blue Door Plus membership number on hand and take your card with you to the appointment, as you may have to fill in your details.
4. Your FP consultations benefit is unlimited, but remember: after six consultations per beneficiary, you will need to obtain authorisation from the Customer Contact Centre for further consultations to be funded by Fedhealth.
5. **NB: Make sure that the nominated FP or Healthcare Professional you are seeing is contracted to Fedhealth Blue Door Plus or the medical aid may not pay!**

Do I need to pay after I've seen the doctor?

1. **No!** The doctor will claim directly from Fedhealth for the consultation.
2. You also have two non-contracted FP visits per year available. However, this benefit does not include any prescribed medication.

Medication

What happens with prescribed meds?

Acute medication:

1. This is a **once-off medication** for the treatment of a minor condition which the Blue Door Plus contracted FP can give to you if they are licensed to dispense medicine.
2. If the Blue Door Plus contracted **FP is licensed to dispense medicine, then they must give you your medicine** after your consultation. If your Blue Door Plus contracted FP who is licensed to dispense medicine gives you a script to take to a pharmacy, the scheme will not pay for this medicine. If the contracted FP is not licensed to dispense medicine, then you must go to any pharmacy to get your medicine. **All your medicine must be on Fedhealth's acute formulary; otherwise you will have to pay for it from your own pocket.** If your medicine is on Fedhealth's acute formulary, the scheme will pay for it in full.

Chronic medication:

1. If you have an ongoing condition like asthma or diabetes then you need chronic medication.
2. Your doctor will apply on your behalf to **Chronic Medicine Management on 0861 112 666.**
3. Your medication will be paid for in full if your application is approved according to the basic formulary. If your medication is not on the basic formulary, you will have to pay a **40% co-payment.**
4. You have to pay yourself if your application is denied. This could be because your condition is not on the list of Prescribed Minimum Benefits (list of chronic conditions for which the Scheme must provide cover).
5. Once the application has been approved you will need to go to a **Medi-Rite pharmacy** with the medicine access card that Fedhealth will send you or arrange to have it delivered either to your home or your place of work by Pharmacy Direct. Call 0860 027 800 to register with Pharmacy Direct, our courier pharmacy DSP.

6. HIV/AIDS is covered in full by the Scheme. If you or one of your dependants are diagnosed with HIV/AIDS, you must contact Aid for AIDS (AfA) to register with them. AfA is a comprehensive HIV management programme with access to anti-retrovirals and related medicines as well as post-exposure preventative medication. Ongoing patient and provider support as well as regular monitoring of disease progression and response to therapy is provided. To join AfA call them in confidence on 0860 100 646. Your doctor may also call AfA on your behalf.

Specialists

(eg. Ear, Nose and Throat, Cardiologist, Gynaecologist)

1. You need to be referred to a specialist by your nominated Blue Door Plus FP. Please call the call centre for an authorisation number.
2. If you use a Fedhealth Network Specialist your consultation will be covered in full and the bill will be settled by Fedhealth directly. If you do not make use of a Fedhealth Network Specialist, you will have to pay the specialist yourself from your own pocket and the Scheme will not refund you.
3. **IMPORTANT!** Only two consultations to a specialist per family per year are covered. Once this limit has been exceeded you will have to pay for any further specialist consultations from your own pocket.
4. If the specialist prescribes medicine it will be paid for in full if the medicine is on the acute formulary. If the medicine is not on the acute formulary, you will have to pay for it yourself.
5. If the specialist wants to admit you to hospital please see Hospital Admission.
6. If the specialist wants to perform a minor procedure on you while you are in the rooms, **this procedure will not be covered from this benefit.** You will have to pay for this from your own pocket and the Scheme will not refund you.

Dentistry & Optometry

Follow these easy steps to see the dentist:

1. Select a dentist from the list of contracted dentists in your area. Phone the **Customer Contact Centre on 0860 002 153** to obtain a list.
2. Phone and make an appointment with a dentist in your area for a consultation.
3. The dentist will claim directly for the consultation and treatment from Fedhealth.

IMPORTANT! Ask the dentist whether the procedure they are going to perform is on the list of procedures covered by the Scheme. See page 10 for list.

For optometry

1. Make an appointment with any optometrist listed on the network by calling the ISO Leso Call Centre on **011 340 9200**.
2. All claims will be paid directly to the optometrist.

IMPORTANT! Make sure you find out if your selected frame will be covered by the Scheme and remember we will only contribute R182 toward your frame.

Fedhealth covers 1 pair of single vision clear CR39 lenses or 1 pair of bifocal clear CR39 lenses per beneficiary every 2 years.

Radiology or Pathology

Radiology (x-rays) or pathology (blood tests)

1. If your **nominated** Blue Door Plus contracted FP wants you to have an x-ray or a blood test, your doctor will complete the radiology or pathology request form.
2. You don't pay if your test is on the list covered by the Scheme. The Radiologist/Pathologist will submit the claim directly to Fedhealth.
3. You pay if the required tests are not on our list of covered procedures.
4. **IMPORTANT!** The list of radiology and pathology procedures is on page 11. Please check on referral whether these tests will be covered or not!

Emergency

If you need an ambulance you need to do the following:

1. If an ambulance is required please contact **Europ Assistance on 0860 333 432** who will arrange an ambulance to collect you. They will need your Fedhealth Blue Door Plus membership number.
2. They will take you to the nearest, most appropriate hospital for your condition to be treated.
3. If you need to be rushed to hospital in an emergency, you must arrange for authorisation as soon as possible after admission, alternatively the hospital will phone on your behalf or you could get a family member to do it for you. **Call 0860 002 153 to obtain this authorisation.**
4. The ambulance service provider will submit the claims directly to the Scheme for payment.
5. If you need to go to a casualty ward for trauma treatment this will be paid in full by the Scheme if you are admitted directly to hospital. If you are not admitted you will pay the first R500 of the bill.



Hospital admission

1. If your doctor tells you that you need to be admitted to hospital, you must go to one of the hospitals on the Blue Door Plus Hospital Network. See list of hospitals on page 16. **If you do not use a hospital on the Blue Door Plus Hospital Network, there will be a R10 000 co-payment on your hospital bill that you will have to pay. (You must get authorisation or the medical aid will not pay for your hospital stay).**
2. However, treatment of an emergency medical condition can take place at any hospital. An emergency medical condition is the sudden, and at the time, unexpected onset of a health condition that requires immediate medical or surgical treatment, where failure to provide medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part, or would place the person's life in jeopardy. Once the condition has been stabilised and the person can be safely transferred to a Blue Door Plus network hospital, then co-payments for use of a non-network hospital will become applicable if the member is unwilling to be transferred to an in-network hospital.
3. **Before you go to hospital, you must contact the Scheme on 0860 002 153 to obtain an authorisation number.** You will need to provide Fedhealth with certain information in order to be provided with an authorisation number:
 - Your Fedhealth Blue Door Plus membership number.
 - The member or beneficiary's (who is going to be admitted to hospital) date of birth.
 - Reason for admission and applicable tariff codes and ICD10 codes for the proposed treatment.
 - Date of admission and the proposed date of operation.
 - The treating doctor's name, his/ her telephone and practice numbers, if available.
 - Name of the hospital with telephone and practice numbers, if available.
4. Once the Scheme has provided you with your authorisation number, you need to give this number to the hospital.
5. You do not have to pay if you got the required authorisation beforehand. The hospital will submit the claims directly to Fedhealth for payment.

IMPORTANT! Although there is no overall annual limit on this option, you need to ensure that you use a specialist in hospital that is part of the Fedhealth Specialist Network. Use of a non-Fedhealth Network Specialist will result in a co-payment that you will need to pay. There is a R2 000 per beneficiary per year limit for non-network specialists and non-network FPs in hospital. Phone the Fedhealth Customer Contact Centre on 0860 002 153 to enquire about Fedhealth Network Specialists in your area.



We're always a
phonecall away on
0860 002 153
between 08h30 & 19h00
Monday - Thursday
& 09h00 - 19h00 on Friday

Major medical benefit

All costs for hospitalisation are covered from this benefit from the first day of hospitalisation in a public or network private hospital and must be pre-authorized

Benefit	Cover	Limit per family per year
Overall annual limit (OAL)	Unlimited at network hospitals only. R10 000 co-payment on voluntary use of a non-network hospital	
Healthcare Professional tariff (HPT)		
- Fedhealth Network FPs and Specialists	Covered at cost	Unlimited
- Non-Fedhealth Network FPs and Specialists	Up to 100% of FR	Limited to R2 000 per beneficiary
- Other Healthcare Professionals	Up to 100% of FR	Unlimited
Prescribed Minimum Benefits (PMBs)	Unlimited in state hospitals	
Hospitalisation costs		
Accommodation, use of operating theatres and hospital equipment, medicine, pharmaceuticals and surgical items	Negotiated tariff	Unlimited at network hospitals only. R10 000 co-payment on voluntary use of a non-network hospital
Alternatives to hospitalisation		
Acute facilities and rehabilitation facilities (Does not include Hospice)	Negotiated tariff	Unlimited at PMB level of care
Ambulance services	Negotiated tariff	Unlimited with Europ Assistance
Appliances, external accessories and orthotics	100% of cost	Unlimited at PMB level of care
Blood, blood equivalents and blood products	100% of cost	Unlimited
Physical Therapy Physiotherapy and biokinetics	Up to 100% of FR	Unlimited at PMB level of care
Emergency treatment in casualty	Up to 100% of FR	Co-payment of R500 per visit for non-PMBs
Immune deficiency related to HIV infection		
- Hospitalisation	Up to 100% of FR	Unlimited at PMB level of care
- Anti-retroviral and related medication		
- Related pathology		
Maternity	Up to 100% of FR	R32 900 per maternity event with a limit of R48 700 per family, per year. Elective Caesarean Sections subject to a R10 000 co-payment
Oncology	Up to 100% of FR	PMBs only at ICON
Organ, tissue and haemopoietic stem cell transplant including immunosuppression medication	PMBs only in state facilities	
Pathology and medical technology	Up to 100% of FR	Unlimited
Prostheses		
- Internal	PMBs only in state facilities	
- External	PMBs only in state facilities	
Psychiatric services	See Healthcare Professional tariff	R8 010
Radiology		
- General	Up to 100% of FR	Unlimited
- Specialised	Up to 100% of FR	R12 100 per beneficiary, subject to an overall limit of R24 400 per family per year
Renal dialysis (chronic)		
Haemodialysis and peritoneal dialysis	PMBs only in state facilities	
Take out medicines	7 days medication per hospital event at MPL	

Day-to-day benefit

Day-to-day benefits provided through the contracted Blue Door Plus FP Network

Benefit	Cover	Limit per family per year
Family Practitioners (FP) - Contracted - Not contracted	Agreed tariff Limited to tariff for contracted FPs	Unlimited at contracted nominated FP subject to protocols & utilisation monitoring after 6 visits per beneficiary. Limited to 2 psychiatric consultations per family Limited to two consultations
Specialists - Fedhealth Network Specialists - Non-Fedhealth Network Specialists	At cost No benefit	Two specialist consultations. Must be referred by contracted FP No benefit
Dentistry (Basic) Removal of teeth and roots and suturing of traumatic wounds. Oral medical procedures: diagnosis and treatment of oral and associated conditions, plastic dentures and dental technicians fees for all such dentistry	Agreed tariff	Subject to a contracted list of dentists and limited to a list of approved procedures, dental tariff codes and protocols. Plastic dentures limited to one set per beneficiary every two years
Mental health	No benefit	See FP benefit
Optometry	Agreed tariff	Subject to ISO Leso network optometrists. Frame to the value of R182 or R182 off any other frame 1 pair of single vision clear CR39 lenses or 1 pair of bifocal clear CR39 lenses 1 comprehensive consultation This benefit is available in a 2 year benefit cycle
Over-the-counter medication	No benefit	
Maternity	Up to 100% of FR	2 x 2D scans per beneficiary per maternity event
Pathology	Up to 100% of FR	Unlimited subject to basic protocols and limited list of tests & procedures. Must be referred by contracted Medical Practitioner
Prescribed Medication - Dispensing FP - Non-Dispensing Medical Practitioner (eg. Fedhealth Network Specialists, FPs and dentists)	Unlimited Up to 100% of MPL	Unlimited at FP Network Unlimited subject to acute formulary for all Medical Practitioners
Physiotherapy	No benefit	
Radiology - General - Specialised	Up to 100% of FR No benefit	Unlimited subject to basic protocols and a limited list of tests and procedures. Must be referred by contracted Medical Practitioner

Agreed tariff - the service fee as agreed to by the Scheme with the healthcare professional

ISO Leso - 011 340 9200

MPL - Medicine Price List

FR - Fedhealth Rate

Contribution Table

Household income per month	Member	Adult Dependant	Child Dependant
< - 5 200	776	644	369
5 201 - 8 500	984	813	475
8 501 - 10 500	1 380	1 145	522
10 501 - 12 000	1 754	1 375	677
12 001 - >	2 378	2 061	895

Chronic disease benefit

Medication for approved chronic diseases is covered from this benefit

Limit	Unlimited
Conditions Covered	25 Chronic Conditions below
Formulary	Basic formulary
Designated Service Provider (DSP)	Medi-Rite pharmacy and Pharmacy Direct
HIV/AIDS medicine benefit including treatment for mother-to-child-transmission, rape & post-exposure prophylaxis	
Limit	Unlimited
Non-compliance with DSP and/ or formulary requirements will attract a co-payment of 40%. All medicine claims are subject to the Medicine Price List (MPL), a generic reference price, and the maximum negotiated dispensing fee. Where the dispensing fee has not been negotiated, a maximum dispensing fee of 26% / R26 will apply.	
25 Chronic Conditions	
Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy, COPD/ Emphysema/ Chronic Bronchitis, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus type 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis	

Unique benefits

Our benefits are practical and tangible, ensuring that Blue Door Plus members get absolute value for money.

Taking care of our younger family members:

- **Child rates for financially dependent children up to 27 years** of age

Where we pay more from Risk than other schemes:

- **Unlimited hospitalisation** at Blue Door Plus Network Hospitals
- **7 days of take-home medication**
- **Specialised radiology** up to R24 400 per family in hospital only
- **Contraceptive benefit** on acute formulary
- **Trauma treatment at a casualty ward** R500 co payment per visit for non-PMBs.

How we add value:

- **Emergency medical transport** anywhere in SA through Europ Assistance
- The **Fedhealth Blue Door Plus Baby Programme** that offers incredible giveaways
- **24-Hour Fedhealth Nurseline**
- **FREE trauma counselling** for practical and emotional support
- **Comprehensive HIV/AIDS and other disease management programmes**
- **Flu vaccination** one per beneficiary every year
- **HIV test** by contracted wellness network provider
- **Health Risk Assessments** by contracted wellness network provider

Blue Door Plus procedure codes

All Fedhealth members on the Blue Door Plus option must use healthcare professionals that are part of the Blue Door Plus network and any additional treatment required must be referred by a Blue Door Plus network doctor. The following treatments/ procedures are covered in full on the Blue Door Plus option and the healthcare professional must ensure that the correct tariff code is used on all claims in order to be reimbursed.

List of procedures included in standard fixed fee consultation rate

TARIFF CODE	DESCRIPTION
0201	Cost of material in treatment
0316-0317	Fine needle aspiration/ Aspiration of cyst or tumour
1136	Nebulisation (in rooms)
1186-1192	Flow volume test
3304	All other physical treatments

Fixed FP codes payable

TARIFF CODE	DESCRIPTION
0190-0192	FP visit (dispensing)
0190-0192	FP visit (non-dispensing)
0300	Stitching of wound (additional code for setting sterile tray)
0307 / 0308	Excision and repair
0255	Drainage of abscess and avulsion of nail
0259	Removal of foreign body
0887	Limb cast
0202	Setting of sterile tray
0210	Collecting blood specimen
0206-0207	Intravenous treatment
0222-0223	Intralesional injection into areas of pathology
0233-0237	Biopsy
0241-0243	Treatment of benign skin lesion by chemo-cryotherapy
0244	Repair of nail bed
0245-0246	Removal of benign lesion by curretting
1037	Diathermy to nose or pharynx
1228-1234	ECG/ Multi-stage treadmill test
2129-2131	Electrodesiccation
2271-2272	Removal of tag or polyp or benign lesions
2316-2318	Destruction of condylomata
2399-2404	Biopsy/ Wedge biopsy
3171	Excision of Meibomian cyst
3287	Spinal joint and ligament injection

Dental codes payable (Dentists and Dental Therapists)

CODE	CODE DESCRIPTION	LIMITATIONS
8101	Consultation	2 per beneficiary per year
8104	Examination for a specific problem not requiring full mouth examination	Per beneficiary
8107/8112	Intra oral radiographs, per film	Maximum of two per beneficiary per year
8159	Scaling and polishing	2 per beneficiary per year
8161	Topical application of fluoride	Between the ages of 3-12 years. 2 per beneficiary per year
8163	Fissure sealant, per tooth	Patients younger than 14; maximum of 8 per year; 2 per quadrant
8341	Amalgam one surface	
8342	Amalgam two surfaces	Any four amalgam fillings per beneficiary per year
8343	Amalgam three surfaces	
8344	Amalgam four and more surfaces	
8351	Resin restoration, one surface anterior	
8352	Resin restoration, two surface anterior	Any four resin fillings per beneficiary per year (anterior)
8353	Resin restoration, three surface anterior	
8354	Resin restoration, four and more surfaces	
8367	Resin restoration, one surface posterior	
8368	Resin restoration, two surface posterior	Any four resin fillings per beneficiary per year (posterior)
8369	Resin restoration, three surface posterior	
8370	Resin restoration, four and more surfaces	
8307	Amputation of pulp (pulpotomy)	Only on primary teeth
8132	Root canal therapy - gross pulpal debridement	Per beneficiary
8201	Extraction, single tooth. Code 8201 is charged for the first extraction in a quadrant	
8202	Extraction, each add tooth. Code 8202 is charged for each additional extraction in the same quadrant	
8937	Surgical removal of tooth	Quantity limit of 4, restricted to posterior permanent teeth
8935	Treatment of septic socket	Per beneficiary
8109	Infection control / barrier techniques. Codes 8109 includes the provision by the dentist of new rubber gloves, masks, etc for each patient	4 per year, 2 per visit
8110	Sterilized instrumentation	2 per year, 1 per visit
8145	Local anaesthetic	2 per year, 1 per visit

CODE	CODE DESCRIPTION	LIMITATIONS
8231	Complete dentures - maxillary and mandibular	1 (one) set of dentures allowed per beneficiary per 24 months ONLY members and beneficiaries over the age of 21 years No metal base to complete or partial dentures allowed
8232	Complete dentures - maxillary or mandibular	
8233	Partial Denture (resin base) - One tooth	
8234	Partial Denture (resin base) - Two teeth	
8235	Partial Denture (resin base) - Three teeth	
8236	Partial Denture (resin base) - Four teeth	
8237	Partial Denture (resin base) - Five teeth	
8238	Partial Denture (resin base) - Six teeth	
8239	Partial Denture (resin base) - Seven teeth	
8240	Partial Denture (resin base) - Eight teeth	
8241	Partial Denture (resin base) - Nine teeth and more	
8259	Rebase complete or partial dentures (Lab)	
8269	Repair Denture	
8263	Reline complete or partial dentures (chair side)	
8271	Add tooth to existing partial dentures	
8273	Impression to repair / addition	
8140	Fee for treatment at a venue	Per beneficiary

Radiology codes payable

TARIFF CODE	DESCRIPTION
Skull and Brain	
10100	X-ray of the skull
Facial bones and nasal bones	
11100	X-ray of the facial bones
11120	X-ray of the nasal bones
Orbits, lachrymal glands and tear ducts	
12100	X-ray orbits
Paranasal sinuses	
13100	X-ray of the paranasal sinuses, single view
13110	X-ray of the paranasal sinuses, two or more views
Mandible, teeth and maxilla	
14100	X-ray of the mandible
14130	X-ray of the teeth single quadrant
14140	X-ray of the teeth more than one quadrant
14150	X-ray of the teeth full mouth
15100	X-ray temporo-mandibular joint, left
15110	X-ray temporo-mandibular joint, right
16100	X-ray of the mastoids, unilateral
16110	X-ray of the mastoids, bilateral
Thorax	
30100	X-ray of the chest, single view
30110	X-ray of the chest two views, PA and lateral
Abdomen and Pelvis	
40100	X-ray of the abdomen
40105	X-ray of the abdomen supine and erect, or decubitus
40110	X-ray of the abdomen multiple views including chest Skeleton: Spinal column - Per region, e.g. cervical, sacral, lumbar coccygeal, one region thoracic
50100	X-ray of the spine scoliosis view AP only
Cervical	
51110	X-ray of the cervical spine, one or two views
Thoracic	
52100	X-ray of the thoracic spine, one or two views

TARIFF CODE	DESCRIPTION
Lumbar	
53110	X-ray of the lumbar spine, one or two views
54100	X-ray of the sacrum and coccyx
54110	X-ray of the sacro-iliac joints
Pelvis	
55100	X-ray of the pelvis
56120	X-ray pelvis and hips
Hips	
56100	X-ray of the left hip
56110	X-ray of the right hip
Shoulder	
61100	X-ray of the left clavicle
61105	X-ray of the right clavicle
61110	X-ray of the left scapula
61115	X-ray of the right scapula
61120	X-ray of the left acromio-clavicular joint
61125	X-ray of the right acromio-clavicular joint
61130	X-ray of the left shoulder
61135	X-ray of the right shoulder
Humerus	
62100	X-ray of the left humerus
62105	X-ray of the right humerus
Elbow	
63100	X-ray of the left elbow
63105	X-ray of the right elbow
Forearm	
64100	X-ray of the left forearm
64105	X-ray of the right forearm
Hand and Wrist	
65100	X-ray of the left hand
65105	X-ray of the right hand
65120	X-ray of a finger
65130	X-ray of the left wrist
65135	X-ray of the right wrist
65140	X-ray of the left scaphoid
65145	X-ray of the right scaphoid
Lower Leg	
73100	X-ray of the left lower leg
73105	X-ray of the right lower leg
Ankle and Foot	
74100	X-ray of the left ankle
74105	X-ray of the right ankle
74120	X-ray of the left foot
74125	X-ray of the right foot
74130	X-ray of the left calcaneus
74135	X-ray of the right calcaneus
74140	X-ray of both feet - standing - single view
74145	X-ray of a toe
Femur	
71100	X-ray of the left femur
71105	X-ray of the right femur
72100	X-ray of the left knee one or two views
72105	X-ray of the right knee one or two views
72120	X-ray of the left knee including patella
72125	X-ray of the right knee including patella
72140	X-ray of left patella
72145	X-ray of right patella
72150	X-ray both knees standing - single view
74150	X-ray of the sesamoid bones one or both sides

TARIFF CODE	DESCRIPTION
Ultrasound Abdomen and Pelvis	
41200	Ultrasound study of the upper abdomen
40210	Ultrasound study of the whole abdomen including the pelvis
43200	Ultrasound study of the pelvis trans abdominal
43250	Ultrasound study of the pregnant uterus, first trimester
43270	Ultrasound study of the pregnant uterus, third trimester, first visit
43273	Ultrasound study of the pregnant uterus, third trimester, follow-up visit
43277	Ultrasound study of the pregnant uterus, multiple gestation, second or third trimester, first visit
43260	Routine obstetric ultrasound at 20 to 24 weeks to include detailed anatomical assessment

Pathology codes payable

TARIFF CODE	DESCRIPTION
CHEMISTRY	
Cardia/ Muscle	
4152	CK-MB: Mass determination: Quantitative (Automated)
4161	Troponin isoforms: Each
Diabetes	
4057	Glucose: Quantitative
4064	HbA1C
Inflammation/ Immune	
3947	C-reactive protein
Lipids	
4027	Cholesterol total
4026	LDL cholesterol
4028	HDL cholesterol
4147	Triglyceride
4132	Creatinine Kinase (CK)
Liver/ Pancreas	
3999	Albumin
4001	Alkaline phosphatase
4006	Amylase
4009	Bilirubin: Total
4010	Bilirubin: Conjugated
4117	Protein: Total
4130	Aspartate aminotransferase (AST)
4131	Alanine aminotransferase (ALT)
4133	Lactate dehydrogenase (LD)
4134	Gamma glutamyl transferase (GGT)
Renal/ Electrolytes / Bone	
4017	Calcium: Spectrophotometric
4032	Creatinine
4086	Lactate
4094	Magnesium: Spectrophotometric
4109	Phosphate
4113	Potassium
4114	Sodium
4155	Uric acid
4151	Urea
HAEMATOLOGY	
3709	Antiglobulin test (Coombs' or trypsinized red cells)
3716	Mean cell volume

TARIFF CODE	DESCRIPTION
3743	Erythrocyte sedimentation rate
3755	Full blood count (including items 3739, 3762, 3783, 3785, 3791)
3762	Haemoglobin estimation
3764	Grouping: A B and O antigens
3765	Grouping: Rh antigen
3797	Platelet count
3805	Prothrombin index
3809	Reticulocyte count
3865	Parasites in blood smear
4071	Iron
4144	Transferrin
4491	Vitamin B12
4528	Ferritin
4533	Folic acid
ENDOCRINE - REPRODUCTIVE	
4450	HCG: Monoclonal immunological: Qualitative
4537	Prolactin
Endocrine - Thyroid	
4482	Free thyroxin (FT4)
4507	Thyrotropin (TSH)
Other Endocrine	
4519	Prostate specific antigen
SEROLOGY	
Auto immune	
3934	Auto antibodies by labelled antibodies: FOR ANF ONLY
3939	Agglutination test per antigen
4155	Uric acid
4182	Quantitative protein estimation: Nephelometer or Turbidometric method: FOR RHEUMATOID FACTOR ONLY
Hepatitis tests	
4531	Hepatitis: Per antigen or antibody
4531	Acute hepatitis A (IgM)
4531	Chronic Hepatitis A (IgG)
4531	Acute Hepatitis B (BsAG)
4531	Hepatitis B: carrier/ immunity (BsAB)
HIV tests	
3816	T and B-cells EAC markers (limited to ONE marker only for CD4/8 counts)
3932	Antibodies to human immunodeficiency virus (HIV): ELISA
3974	Qualitative PCR (only for children < age 6 months)
4429	Quantitative PCR (DNA/RNA)
Infectious Diseases and Others	
3946	IgM: Specific antibody titer: ELISA/EMIT: RUBELLA
3948	IgG: Specific antibody titer: ELISA/EMIT: RUBELLA
3951	Quantitative Kahn, VDRL or other flocculation
CYTOLOGY	
4566	Vaginal or cervical smears, each
HISTOLOGY	
4567	Histology per sample
G.MISCELLANEOUS	
4352	Faecal occult blood test (FOB)

TARIFF CODE	DESCRIPTION
MICROBIOLOGY	
MCS	
3909	Anaerobe culture: Limited procedure
3901	Fungal culture
3918	Mycoplasma culture: Comprehensive
4401	Cell count
4188	Urine dipstick, per stick (irrespective of the number of tests on stick)
3928	Antimicrobial substances
3893	Bacteriological culture: Miscellaneous
3867	Miscellaneous (body fluids, urine, exudate, fungi, puss, scrapings, etc.)
3922	Viable cell count
3879	Campylobacter in stool: Fastidious culture
3895	Bacteriological culture: Fastidious organisms
3928	Antimicrobial substances
3887	Antibiotic susceptibility test: Per organism
3924	Biochemical identification of bacterium: Extended
3869	Faeces (including parasites)
3868	Fungus identification
3881	Mycobacteria
3901	Fungal culture
3868	Fungus identification
AFB fluorochrome auramine (ZN) only	
3885	Cytochemical stain
3881	Antigen detection with monoclonal antibodies
TB culture	
3881	Antigen detection with monoclonal antibodies
4433	Bacteriological DNA identification (LCR)
3916	Radiometric tuberculosis culture
3867	Miscellaneous (body fluids, urine, exudate, fungi, puss, scrapings, etc.)
3895	Bacteriological culture: Fastidious organisms
TB sensitivity	
3887	Antibiotic susceptibility test: Per organism
3974	Polymerase chain reaction
Parasites	
3869	Faeces (including parasites)
3883	Concentration techniques for parasites
3865	Parasites in blood smear
Bilharzia micro	
3980	Bilharzia Ag Serum/Urine
3867	Miscellaneous (body fluids, urine, exudate, fungi, puss, scrapings, etc.)
3946	IgM: Specific antibody titer: ELISA/EMIT: Per Ag
3883	Concentration techniques for parasites
Optometry	
Use the ISO LESO network	
Frame to the value of R182 or R182 off any other frame. 1 pair of single vision clear CR39 lenses or 1 pair of bifocal clear CR39 lenses. 1 comprehensive consultation. This benefit is available in a 2 year benefit cycle.	

Network Hospitals

Please note that this list may change/expand during the year. Please contact the **Fedhealth Customer Contact Centre on 0860 002 153** or refer to the website for the latest Blue Door Plus Network Hospital list.

HOSPITAL NAME	PROVINCE	TOWN
Life Beacon Bay Hospital	Eastern Cape	East London
Life St James Hospital	Eastern Cape	East London
Cuyler Hospital	Eastern Cape	Uitenhage
Greenacres Hospital	Eastern Cape	Greenacres
Settlers Hospital	Eastern Cape	Grahamstown
Mthatha Sub-acute Hospital	Eastern Cape	Mthatha
Matatiele Private Hospital	Eastern Cape	Matatiele
Kroon Hospital	Free State	Kroonstad
Pelonomi Private Hospital	Free State	Bloemfontein
Universitas Private Hospital	Free State	Bloemfontein
Vaalpark Hospital	Free State	Sasolburg
Cairnhall Hospital	Free State	Bloemfontein
Riemland Clinic	Free State	Frankfort
St Helena Hospital (Africa Healthcare)	Free State	Welkom
Clinix Botshelong - Empilweni Private Hospital	Gauteng	Vosloorus
Clinix Dr SK Matseke Memorial Hospital	Gauteng	Diepkloof
Clinix Naledi - Nkanyezi Private Hospital	Gauteng	Sebokeng
Clinix Solomon Stix Morewa Memorial Hospital	Gauteng	Johannesburg
Clinix Tshepo - Themba Private Hospital	Gauteng	Dobsonville
Akasia Hospital	Gauteng	Akasia
Bougainville Hospital	Gauteng	Daspoort
Clinton Hospital	Gauteng	Alberton
Garden City Hospital	Gauteng	Johannesburg
Jakaranda Hospital	Gauteng	Muckleneuk
Krugersdorp Hospital	Gauteng	Krugersdorp
Linksfeld Hospital	Gauteng	Linksfeld West
Linkwood Hospital	Gauteng	Linksfeld West
Linmed Hospital	Gauteng	Benoni
Milpark Hospital	Gauteng	Parktown West
Montana Hospital	Gauteng	Montana Park
Moot Algemene Hospital	Gauteng	Rietfontein
Mulbarton Hospital	Gauteng	Mulbarton
N17 Hospital	Gauteng	Springs
Olivedale Hospital	Gauteng	Olivedale
Park Lane Hospital	Gauteng	Parktown
Pinehaven Hospital	Gauteng	Krugersdorp
Pretoria East Hospital	Gauteng	Moreleta Park
Rosebank Hospital	Gauteng	Rosebank
Sunward Park Hospital	Gauteng	Boksburg
Unitas Hospital	Gauteng	Centurion
Waterfall City Hospital	Gauteng	Midrand

HOSPITAL NAME	PROVINCE	TOWN
Arwyp Medical Centre	Gauteng	Kempton Park
Botshilu Private Hospital	Gauteng	Soshanguve
Cormed Clinic	Gauteng	Vanderbijlpark
Lakeview Hospital	Gauteng	Benoni
Lenmed Health Ahmed Kathrada Private Hospital	Gauteng	Lenasia
Lenmed Health Daxina Private Hospital	Gauteng	Lenasia South
Lenmed Health Randfontein Private Hospital	Gauteng	Randfontein
Lenmed Health Zamokuhle Private Hospital	Gauteng	Tembisa
Louis Pasteur Private Hospital	Gauteng	Pretoria
Midvaal Private Hospital	Gauteng	Vereeniging
Zuid-Afrikaans Hospital	Gauteng	Pretoria
Union Hospital	Gauteng	Alberton
Alberlito Hospital	KwaZulu-Natal	Ballito
Kingsway Hospital	KwaZulu-Natal	Amanzimtoti
Kokstad Private Hospital	KwaZulu-Natal	Kokstad
Margate Hospital	KwaZulu-Natal	Margate
Parklands Hospital	KwaZulu-Natal	Overport
St Anne's Hospital	KwaZulu-Natal	Pietermaritzburg
Netcare St Augustine's Hospital	KwaZulu-Natal	Durban
The Bay Hospital	KwaZulu-Natal	Richards Bay
Ethekwini Hospital And Heart Centre	KwaZulu-Natal	Durban
Hibiscus Private Hospital	KwaZulu-Natal	Port Shepstone
Hillcrest Private Hospital	KwaZulu-Natal	Hillcrest
Lenmed Health La Verna Private Hospital	KwaZulu-Natal	Ladysmith
Lenmed Health Shifa Private Hospital	KwaZulu-Natal	Sydenham
Clinix Phalaborwa Private Hospital	Limpopo	Phalaborwa
Mediclinic Lephalale	Limpopo	Onverwacht
Pholoso Hospital	Limpopo	Polokwane
Quality Care Private Hospital	Limpopo	Louis Trichardt
St Vincent Hospital	Limpopo	Bela-Bela
Zoutpansberg Private Hospital	Limpopo	Louis Trichardt
Emalaheni Private Hospital	Mpumalanga	Witbank
Kiaat Private Hospital	Mpumalanga	Nelspruit
Lowveld Hospital	Mpumalanga	Nelspruit
Nelspruit Surgiclinic Private Hospital	Mpumalanga	Nelspruit
Clinix Victoria Private Hospital	North West	Mafikeng
Ferncrest Hospital	North West	Rustenburg
Fochville Hospital	North West	Fochville
Leslie Williams Hospital	North West	Carletonville
Mooimed Private Hospital	North West	Potchefstroom
Sunningdale Hospital	North West	Klerksdorp
Vryburg Private Hospital	North West	Vryburg
Wilmed Park Private Hospital	North West	Klerksdorp
Mediclinic Kimberley	Northern cape	Kimberley
Jane Keyser Clinic	Northern Cape	Hartswater

HOSPITAL NAME	PROVINCE	TOWN
Lenmed Health Kathu Private Hospital	Northern cape	Kathu
Life Bay View Private Hospital	Western Cape	Mossel Bay
Life West Coast Private Hospital	Western Cape	Vredenburg
Blaauwberg Hospital	Western Cape	Sunningdale
Ceres Hospital	Western Cape	Ceres
Christiaan Barnard Memorial Hospital	Western Cape	Cape Town
Kuils River Hospital	Western Cape	Kuils River
N1 City Hospital	Western Cape	Goodwood
Belville Medical Centre	Western Cape	Bellville
Gatesville Medical Centre	Western Cape	Gatesville
Mitchells Plain Medical Centre	Western Cape	Mitchells Plain
Busamed Paardevlei Private Hospital	Western Cape	Somerset West
Rondebosch Medical Centre	Western Cape	Rondebosch
Tokai Medical Centre	Western Cape	Tokai



Network Day Clinics

Please note that this list may change/expand during the year. Please contact the **Fedhealth Customer Contact Centre on 0860 002 153** or refer to the website for the latest Blue Door Plus Network Hospital list.

HOSPITAL NAME	PROVINCE	TOWN
Bethlehem Medical Centre Day Theatre	Free State	Bethlehem
Citymed Day Theatre	Free State	Bloemfontein
Cure Day Clinics - Bloemfontein	Free State	Bloemfontein
Welkom Medical Centre	Free State	Welkom
Boksburg Medical and Dental Centre	Gauteng	Boksburg
Constantia Clinic	Gauteng	Florida
Constantia Park Medical and Dental Centre	Gauteng	Garsfontein
Germiston Medical and Dental Centre	Gauteng	Germiston
Protea Clinic	Gauteng	Krugersdorp
Silverton Medical and Dental Centre	Gauteng	Pretoria
The Berg Day Theatre	Gauteng	Bergbron
Advanced Groenkloof Day Hospital	Gauteng	Groenkloof
Birchmed Surgical Centre	Gauteng	Kempton Park
Centre For Gynaecological Endoscopy	Gauteng	Morningside
Centre Of Advanced Medicine	Gauteng	Waverly
Cure Day Clinics - Erasmuskloof	Gauteng	Erasmuskloof
Cure Day Clinics - Fourways	Gauteng	Fourways
Cure Day Clinics - Midstream	Gauteng	Midrand
Edenvale Day Clinic	Gauteng	Edenvale
Ekurhuleni Surgiklin Day Clinic	Gauteng	Kempton Park
Fordsburg Day Clinic	Gauteng	Fordsburg
Intercare Day Hospital - Hazeldean	Gauteng	Silverlakes
Intercare Day Hospital - Irene	Gauteng	Irene
Kilnerpark Narcokliniek	Gauteng	Pretoria
Mayo Clinic	Gauteng	Roodepoort
Medgate Day Clinic	Gauteng	Roodepoort
Medkin Kliniek	Gauteng	Pretoria
Sandton Day Clinic	Gauteng	Sandton
Bluff Medical and Dental Centre	KwaZulu-Natal	Bluff
Malvern Medical and Dental Centre	KwaZulu-Natal	Malvern
Pinetown Medical and Dental Centre	KwaZulu-Natal	Pinetown
Howick Day Clinic	KwaZulu-Natal	Howick
KZN Day Clinic	KwaZulu-Natal	Umhlanga
Lorne Street Anaesthetic Clinic	KwaZulu-Natal	Durban
Shelly Beach Day Clinic	KwaZulu-Natal	Shelly Beach
Westridge Surgical	KwaZulu-Natal	West Ridge
Emalahleni Day Hospital	Mpumalanga	Witbank
Potchefstroom Medical and Dental Centre	North West	Potchefstroom
Medi-Harts Day Clinic	Northern Cape	Hartswater
Kraaifontein Medical and Dental Centre	Western Cape	Kraaifontein

HOSPITAL NAME	PROVINCE	TOWN
Monte Vista Clinic	Western Cape	Monte Vista
Parow Medical and Dental Centre	Western Cape	Parow
Tokai Medical and Dental Centre	Western Cape	Tokai
Advanced Durbanville Surgical Centre	Western Cape	Durbanville
Advanced Knysna Surgical Centre	Western Cape	Knysna
Advanced Panorama Surgical Centre	Western Cape	Panorama
Advanced Vergelegen Medical Centre	Western Cape	Somerset West
Advanced Worcester Surgical Clinic	Western Cape	Worcester
Cape Dental Theatres	Western Cape	Wynberg
Cure Day Clinics - Somerset West	Western Cape	Somerset West
Cure Day Clinics - Bellville	Western Cape	Parow
Cure Day Clinics - St Stephens Paarl	Western Cape	Paarl
Driftwood Clinic	Western Cape	Constantia
Intercare Day Hospital - Century City	Western Cape	Century City
Kango Clinic (Kannaland Medical Centre)	Western Cape	Oudtshoorn
The Surgical Institute	Western Cape	Durbanville
Thembani Theatres	Western Cape	Khayelitsha
Vidamed Day Hospital	Western Cape	Mossel Bay
Wesfleur Private Clinic	Western Cape	Atlantis



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Family takes care of family

Please note: All Fedhealth benefits are subject to registered Scheme Rules, and as such, this document only aims to provide a summary of such benefits. For the full Scheme Rules, please visit fedhealth.co.za or contact the Fedhealth Customer Contact Centre on 0860 002 153 to obtain a copy.