

**Provinsiale  
Koerant**



**Provincial  
Gazette**

**Provinsie Vrystaat**

**Free State Province**

Uitgegee op Gesag

Published by Authority

No. 70

FRIDAY, 28 September 2001

**DEPARTMENT OF HEALTH**

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The Afrikaans version of the above-mentioned Regulations will be published at a later stage.

## PROVINCIAL NOTICE

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[No. 167 of 2001]

### REGULATIONS ON FEES FOR HEALTH SERVICES IN THE FREE STATE

Under section 16 of the Free State Hospitals Act, 1996 (Act No. 13 of 1996), I, Anna Tsopo, Member of the Executive Council of the Province responsible for Health, hereby make the regulations as set out in the Schedule.

### SCHEDULE

#### Definitions

1. In these Regulations, unless the context otherwise indicates –

“**annual income**” means a person’s annual gross income as determined in terms of the Income Tax Act, 1962 (Act No. 58 of 1962);

“**Benefit Scale Tariffs**” means the latest Recommended Scales of Benefits of the Board of Healthcare Funders of Southern Africa;

“**boarder**” means a person who, with the consent of the chief executive officer, is admitted to a hospital because his or her presence is, in the opinion of a medical practitioner, essential for the recuperation of a patient in such hospital;

“**casualty**” means any injury or acute medical condition that will probably bring about death, retardation, a serious or permanent scar or illness if not treated immediately;

“**casualty patient**” means a patient who receives emergency treatment –

- (a) in a casualty division on an emergency basis; or
- (b) in an outpatient division outside normal working hours;
- (c) in a referral room at the tertiary hospital.

“**casualty treatment**” means the emergency treatment a casualty patient receives;

“**chief executive officer**” means the person referred to in section 2(3) of the Act, or someone who has been authorised by him or her to act on his or her behalf;

“**dependant**” means a person who is entirely dependent on someone else for his or her maintenance;

**“district hospital”** means –

- (a) the hospitals at Bothaville, Botshabelo, Clocolan, Ficksburg, Frankfort, Harrismith, Heilbron, Hoopstad, Jagersfontein, Ladybrand, Odendaalsrus, Parys, Reitz, Sasolburg, Senekal, Smithfield, Virginia, Vrede, Winburg and Zastron;
- (b) the Elizabeth Ross Hospital at Namahali;
- (c) the Moroka Hospital at Thaba Nchu;
- (d) the National Hospital at Bloemfontein; and
- (e) the Phekolong Hospital at Bethlehem;

**“donor”** means a person admitted to a hospital specifically for the donation of an organ for transplant purposes, or a person who dies in a hospital and who obtained donor-status by the permission given by his or her relatives for the donation of one or more of his or her organs : Provided that the expression “organ” shall also include blood, mother’s milk or tissue;

**“external company”** means an external company as defined in section 1 of the Income Tax Act, 1962;

**“family unit”** means –

- (a) a married couple (irrespective of whether they are married in or out of community of property) with or without a dependant; or
- (b) a single parent or a person with a dependant;

**“foreign patient”** means a patient who is ordinarily resident outside the borders of the Republic, including a foreign tourist or an employee of an external company visiting the Republic, but excluding the following:

- (a) foreigners who have been legally residing in the Republic for longer than 6 months;
- (b) persons who have illegally entered the Republic from neighbouring states; and
- (c) pregnant women and children under 6 years, who are ordinarily resident outside the borders of the Republic, but develop a health problem while in the Republic;

**“government department”** means a department referred to in section 1(1) of the Public Service Act, 1994;

**“health worker”** means an individual providing health services who is registered with an appropriate board or council;

**“high-risk complex”** means a specially equipped complex in a hospital where specially trained nurses are on duty on a full-time basis, and are supported by medical personnel on standby;

**“hospital”** means a tertiary, regional or a district hospital which is a provincial hospital referred to in section 1 of the Act;

**“hospital patient”** means a patient referred to in regulation 2(3);

**“inpatient”** means a patient who has been admitted to a hospital for treatment and occupies a bed;

“**inpatient treatment**” means the medical treatment received by an inpatient in a hospital;

“**intensive care complex**” means a specially equipped complex in a hospital established for the intensive care of seriously ill patients, and where specially trained medical and nursing staff are on duty on a full-time basis;

“**local authority**” means a municipality referred to in section 155(6) of the Constitution of the Republic of South Africa Act, 1996 (Act No. 108 of 1996);

“**minister**” means the Minister of Health;

“**net assets**” means the total value of a person’s fixed, movable and financial assets, excluding domestic articles and his or her total liabilities;

“**normal working hours**” means the hours from 07:00 to 17:00 on a Monday to Friday, excluding a public holiday;

“**official medical practitioner**” means a medical practitioner who is in the full-time or part-time employ of the Department of Health;

“**oral health services**” means the provision of treatment to patients suffering from oral diseases by part-time or full-time oral health personnel;

“**other appliance**” means any appliance other than an orthopaedic appliance and crutches, which is required by a handicapped person to facilitate physical movement;

“**outpatient**” means a patient who is treated in the outpatient division of a hospital;

“**outpatient treatment**” means the medical treatment received by an outpatient;

“**patient**” means a hospital patient or private patient, as the case may be;

“**private medical practitioner**” means a medical practitioner who is not in the full-time or part-time employ of the Department of Health : Provided that a medical practitioner performing remunerative work outside the public sector, when he or she acts in that capacity, shall be regarded as a private medical practitioner;

“**private patient**” means a patient referred to in regulation 2(4);

“**procedure room**” means a room in a tertiary or regional hospital, where surgery and procedural treatments take place in conditions that do not meet the strict aseptic requirements applicable to a theatre;

“**prosthesis**” means a fabricated artificial substitute for a part of the body that is diseased or missing, surgically implanted, and shall include all constituent parts like pins, rods, screws, plates or similar items which are an integral and essential part of the implantation, and shall be charged as a single unit;

“**public holiday**” means a public holiday referred to in section 2 of the Public Holidays Act, 1994 (Act No. 36 of 1994);

“**purchase cost**” means the latest known purchase price of an article obtained by a hospital, and which includes value-added tax, as determined by the Value-Added Tax Act, 1991 (Act No. 89 of 1991);

“**referral letter**” means an official document issued by a health worker giving a patient access to the appropriate level of care and which can be on an H301 form or appropriate letter indicating the health worker’s registered or practice number;

“**regional hospital**” means –

- (a) the Boitumelo Hospital at Kroonstad;
- (b) the Goldfields Regional Hospital at Welkom;
- (c) the Pelonomi Hospital at Bloemfontein;
- (d) the Regional Hospital at Bethlehem;
- (e) the Manapo Hospital at Phuthaditjaba; and
- (f) the Free State Psychiatric Complex at Bloemfontein;

“**relative**” means a family member of a patient who, with the authorisation of the chief executive officer or delegated officials, is admitted to a hospital for an examination to assist in diagnosing such a patient;

“**Republic**” means the Republic of South Africa referred to in section 1 of the Constitution of the Republic of South Africa, 1996 (Act No. 108 of 1996);

“**resident baby**” means a newborn baby who does not need medical treatment as nursery care but whose mother is still a maternity patient;

“**resident child**” means an infant who receives no medical or nursing care, and who is nursed and cared for by his or her mother, who is a patient;

“**simple treatment**” means the routine treatment received by a patient over a period of 30 days (for example the follow-up of blood pressure readings, replacement of bandages and so forth);

“**tertiary hospital**” means the Universitas Hospital including the National Hospital where level III and level IV services are rendered;

“**tertiary services**” means the services rendered at Universitas Hospital, including level III and level IV services rendered at divisions of the following hospitals:

- (a) the Spinal-, Burns-, P4-and Trauma units at the Pelonomi Hospital at Bloemfontein;
- (b) the Ophthalmology-, Oncotherapy-, Dermatology- and Orthopaedic Departments at the National Hospital at Bloemfontein;

“**the Act**” means the Free State Hospitals Act, 1996 (Act No. 13 of 1996);

“**theatre**” means a room in a hospital where surgery and procedural treatments take place in a sterile environment;

“**therapeutic treatment**” means the treatment, instruction and counseling sessions given to a patient to improve his or her illness or other problems;

“**uniform patient fee schedule**” means the schedule published from time to time by the Minister in the Government Gazette in terms of the Regulations Governing the Establishment and Maintenance of a Uniform Patient Fee Schedule,

and any other word or expression to which a meaning has been assigned in the Act, shall have the meaning thus assigned to it.

### Classification of patients

2. (1) Upon admission to a hospital, a patient shall be classified by the chief executive officer or delegated officials as a foreign patient, hospital patient or private patient.
- (2) A patient shall furnish such information and submit such proof as the chief executive officer or delegated officials may require of him or her, in order to be able to make a classification in terms of subregulation (1).
- (3) (a) A hospital patient is a patient who –
  - (i) is classified as an H1, H2, H3 or H4 hospital patient in terms of paragraph (b); and
  - (ii) subject to the proviso to subregulation (4), is treated in a hospital by an official medical practitioner.
- (b) A patient shall be classified –
  - (i) as an H0-hospital patient if he/she has no income or if he/she complies with the specification as set out in Regulation 8;
  - (ii) as an H1-hospital patient if –
    - (aa) he or she as a single person without a dependant –
      - (aaa) has an annual income of R1 to R17 000; or
      - (bbb) is the owner of net assets with a value of less than R68 000; or
    - (bb) he or she is a member of a family unit which –
      - (aaa) has an annual income of R1 to R30 000; or

- (bbb) is the owner of net assets with a value of less than R113 000; or
  - (cc) he or she submits proof that he or she receives a social pension or allowance and is not treated by a private medical practitioner;
- (ii) as an H2 hospital patient if –
  - (aa) he or she as a single person without a dependant –
    - (aaa) has an annual income of R17 001 to R25 000; or
    - (bbb) is the owner of net assets with a value of R68 001 to R87 000; or
  - (bb) he or she is a member of a family unit which –
    - (aaa) has an annual income of R30 001 to R43 000; or
    - (bbb) is the owner of net assets with a value of R113 001 to R159 000;
- (iii) as an H3 hospital patient if –
  - (aa) he or she as a single person without a dependant –
    - (aaa) has an annual income of R25 001 to R34 000; or
    - (bbb) is the owner of net assets with a value of R87 001 to R126 000; or
  - (bb) he or she is a member of a family unit which –
    - (aaa) has an annual income of R43 001 to R55 000; or
    - (bbb) is the owner of net assets with a value of R159 001 to R212 000; or
  - (cc) he or she is not a member of a medical fund, but is entitled to the benefits of a hospital plan : Provided that the patient has not been classified as a private or an H4-hospital patient;
- (iv) as an H4 hospital patient if –
  - (aa) (i) he or she as a single person without a dependant –
    - (aaa) has an annual income of more than R34 000; or

- (bbb) is the owner of net assets with a value of more than R126 000; or
- (ii) he or she is a member of a family unit which –
  - (aaa) has an annual income of more than R55 000; or
  - (bbb) is the owner of net assets with a value of more than R212 000; and
- (iii) the chief executive officer or delegated officials has granted permission that he or she be treated as an H4 hospital patient; or
- (bb) he or she is treated in a hospital on the account of a government department, a local authority or a foreign government; or
- (cc) he or she is a member of a medical aid or provident scheme registered in terms of the law : Provided that such a patient's membership of a medical aid or provident scheme shall not be taken into account for classification purposes in a case where –
  - (i) he or she is, at the time of his admission to the hospital, not yet entitled to benefits in terms of the medical aid or provident scheme;
  - (ii) he or she will not receive benefits in terms of the medical aid or provident scheme in respect of the treatment of the illness or procedure for which he or she is admitted to the hospital; or
  - (iii) his or her benefits in terms of the medical aid or provident scheme were exhausted at the time of his or her admission to the hospital.
- (4) A private patient is a patient who is treated by a private medical practitioner in a hospital, or who chooses his/her own doctor, irrespective of his or her annual income or the value of his or her net assets: Provided that where it appears that a private patient, who is being treated by a medical practitioner performing remunerative work outside the public sector, is not capable of bearing the cost of the medical treatment, such patient may be reclassified as a hospital patient by the chief executive officer or delegated officials.

#### Fees for inpatient treatment

3. A patient who receives inpatient treatment, shall be liable for the payment of the following fees:

|     |  | In a district<br>hospital | In a regional<br>hospital | In a tertiary<br>hospital |
|-----|--|---------------------------|---------------------------|---------------------------|
| (a) | <b>Hospital patient</b>  |                           |                           |                           |
|     | (aa) <b>An admission fee:</b>  |                           |                           |                           |
|     | (i) An H1 hospital patient   | R 45,00                   | R 50,00                   | R 55,00;                  |
|     | (ii) An H2 hospital patient  | R225,00                   | R250,00                   | R280,00;                  |
|     | (iii) An H3 hospital patient   | R335,00                   | R375,00                   | R420,00;                  |
|     | (bb) <b>and thereafter per 30 days or part of a period of 30 days:</b> |                           |                           |                           |
|     | (i) An H1 hospital patient   | R 45,00                   | R 50,00                   | R 55,00;                  |
|     | (ii) An H2 hospital patient  | R225,00                   | R250,00                   | R280,00;                  |
|     | (iii) An H3 hospital patient   | R335,00                   | R375,00                   | R420,00.                  |

**Fees for outpatient and casualty treatment**

4. (1) (a) Subject to the provisions of subregulation (2) a patient who receives outpatient or casualty treatment, shall be liable for the payment of the following fees in respect of every visit:

|       |                        | In a district<br>hospital | In a regional<br>hospital | In a tertiary<br>hospital |
|-------|------------------------|---------------------------|---------------------------|---------------------------|
| (i)   | An H1 hospital patient | R 18,00                   | R 30,00                   | R 35,00;                  |
| (ii)  | An H2 hospital patient | R 35,00                   | R 55,00                   | R 65,00;                  |
| (iii) | An H3 hospital patient | R 50,00                   | R 75,00                   | R 95,00:                  |

Provided that a patient who visits the outpatient division of a tertiary or regional hospital (excluding a casualty patient) without an official referral letter, shall be liable to pay an additional amount of R250-00 in cash.

- (b) An H1, H2 or H3 hospital patient visiting various clinics on the same day shall only be liable for the fees of one visit.
- (2) The following patients, however, shall not be liable for the payment of the fees referred to in subregulation (1):
- (a) a patient who, immediately after treatment in an outpatient or casualty division of a hospital, is admitted as an inpatient;
- (b) a patient who visits an outpatient division of a hospital to be informed of the results of tests which were performed on him or her during previous examinations;
- (c) a patient who is referred by a private medical practitioner to the outpatient division of a hospital (excluding a tertiary hospital) with the sole purpose of receiving a service referred to in regulation 7.

#### Fees for H4- and private patients

5. Fees in respect of H4 - and private patients shall be levied at the uniform patient fee schedule tariffs prescribed in Annexure A hereto.

#### Fees for therapeutic treatment

6. (a) A patient who visits the outpatient division of a hospital to receive therapeutic treatment, shall be liable for the payment of the following fees in respect of each visit:

|                              | In a district hospital | In a regional hospital | In a tertiary hospital |
|------------------------------|------------------------|------------------------|------------------------|
| (i) An H1 hospital patient   | R18,00                 | R30,00                 | R 35,00;               |
| (ii) An H2 hospital patient  | R35,00                 | R55,00                 | R 65,00;               |
| (iii) An H3 hospital patient | R50,00                 | R75,00                 | R 95,00.               |

- (b) A patient who visits an outpatient division of a hospital for the sole purpose of undergoing group therapy or a course of therapeutic treatments, excluding PUVA treatment for dermatologic conditions shall notwithstanding the provisions of paragraph (a) pay the following fees:

- (i) An H1 hospital patient R70,00;
- (ii) An H2 hospital patient R130,00;
- (iii) An H3 hospital patient R190,00:

Provided that irrespective of the number of treatments or visits paid in a period of 30 days, the fees shall be charged every 30 days as if the patient received only one treatment or paid only one visit in that period of 30 days.

- (c) With the approval of the Chief Executive Officer, patients who within the space of a period of 30 days, must repeatedly visit an institution for the control of simple treatment, may pay the same fees as set out in paragraph (b).

**Fees for every type of diagnostic, laboratory, computerised tomography, magnetic resonance, eye field examinations and laser therapy**

- 7. (1) No fees shall be payable by an H1, H2 or H3 hospital patient for diagnostic, laboratory, computerised tomography, magnetic resonance, eye field examinations or laser therapy and all imaging procedures according to the uniform patient fee schedule.
- (2) The cost of laboratory examinations provided by the South African Institute for Medical Research or a private pathologist to a private patient or an H4 hospital patient, shall be paid directly to the aforementioned organisation or pathologist by the patient concerned.
- (3) Tariffs for laboratory examinations at a tertiary hospital shall be levied in accordance with the Benefit Scale Tariffs: Provided that if such an examination is carried out by a private medical practitioner and he or she uses hospital apparatus, a tariff of 33 1/3% of the relevant medical benefit scale tariff rounded off to the next Rand, must be levied.

**Free medical treatment and provision of free lodging**

- 8. (1) Notwithstanding any provisions to the contrary contained in these regulations, medical treatment shall be provided free of charge by an official medical practitioner in a hospital to the following patients, excluding foreign patients:
  - (a) a resident baby, but only if the mother has been classified as an H1, H2 or H3 hospital patient;
  - (b) a relative;
  - (c) a donor;
  - (d) a person who is specifically admitted for tertiary examination purposes for the continuous evaluation of students in practical and clinical work;

- (e) school children who can be classified as H1 hospital patients, and who are referred by school nursing services or oral health services with a school authorisation certificate, for all treatment arising from such authorisation certificate;
- (f) a person who, as a suspected or confirmed case, is admitted to a hospital for one or more of the following diseases:
  - (i) venereal diseases, which include the following : syphilis, gonorrhoea, chancroid, lymphogranuloma venereum, urethritis (non-specific), venereal warts, granuloma inguinale, ulcus molle and herpes genitalis;
  - (ii) tuberculosis;
  - (iii) leprosy;
  - (iv) cholera;
  - (v) diphtheria;
  - (vi) plague;
  - (vii) typhoid and paratyphoid fever;
  - (viii) haemorrhagic fever diseases; and
  - (ix) meningococcus meningitis;

Provided that if it is discovered during the treatment of a patient who has been admitted to the hospital for another disease, that he or she suffers from one of the aforementioned diseases, the patient shall remain liable, in so far as the treatment of the disease for which he or she was originally admitted is concerned, for payment of the hospital fees applicable to him or her: Provided further that, in the case of a disease mentioned in subparagraph (i), only the treatment applied in the outpatient division, shall be free of charge;

- (g) any officer or employee in the service of the Department of Health who -
  - (i) in the performance of his or her official duties, handled or came into contact with any drug, poison, gas, radio-active substance, radio-therapeutic or diagnostic equipment or other electronic equipment, and is for this reason compelled to undergo a medical examination and to receive treatment;
  - (ii) is injured on duty; or
  - (iii) as a condition of service, is entitled to free medical treatment during his or her period of service;

- (h) any person treated for family planning purposes as part of a family planning programme -
  - (i) as an outpatient at a family planning clinic (including cervical smears for H1, H2 or H3 hospital patients);
  - (ii) to undergo a sterilisation operation;
  - (iii) to receive maternity treatment after the patient, despite a sterilization operation under the family planning programme, became pregnant again;
  - (iv) after giving birth, to undergo a post-partum sterilisation operation as part of the family planning programme;
  - (v) for complications resulting from a sterilisation operation which such patient underwent under the family planning programme; or
  - (vi) to undergo a scheduled sperm count after a vasectomy was performed on such patient (excluding tertiary services);
- (i) a person who is referred as an outpatient for an examination in terms of the provisions of section 37 of the Criminal Procedure Act, 1977 (Act No. 51 of 1977);
- (j) a mentally ill person who needs pre-admission examination before admission to a psychiatric institution;
- (k) an H1, H2 or H3 hospital patient excluding tertiary patients to whom a home visit is paid by medical, paramedical or nursing staff who are in the employ of the Department of Health;
- (l) a person to whom general health counselling services and screening examinations (including oral health but excluding special examinations and laboratory examinations) are provided;
- (m) a person who reports at a hospital for immunisation and other measures to combat notifiable diseases within primary health care facilities;
- (n) certain selected retired physicians, known as honorary medical consultants, who do not belong to a medical aid or provident scheme;
- (o) pregnant women and children under the age of 6 years, including foreign patients, who are not members of a medical aid or provident scheme: Provided that if these patients are treated by a private medical practitioner, only the hospitalisation shall be free of charge;
- (p) a person who undergoes an abortion;

- (q) children who, in terms of section 15 of the Child Care Act, 1983 (Act No. 74 of 1983), are committed to the care of a children's home, school of industries, place of safety or foster parents;
  - (r) in the case of the following examinations which are requested by a responsible government institution:
    - (i) the examination of the alleged victim of an assault, rape or sexual molesting and the taking and analysing of samples;
    - (ii) the examination of prisoners and detainees for medico legal purposes with a view to their referral for observation in terms of the Mental Health Act, 1973 (Act No. 18 of 1973);
    - (iii) the carrying out of autopsies and the attendance of exhumations; and
  - (s) any officer or employee in the Public Service who is referred as an outpatient to be evaluated by a Medical Board (excluding special examinations, laboratory examinations and prescriptions).
- (2) Notwithstanding the provisions of these regulations –
- (a) a member of the resident hospital staff who suffers from a minor ailment, may be admitted to a hospital as an inpatient free of charge for a period of not longer than three days:

Provided that the chief executive officer or delegated officials certifies in every case that the person concerned is treated in the hospital instead of the hostel, for reasons of convenience and not for medical reasons: Provided further that the staff member concerned shall pay full board and lodging in the home;
  - (b) outpatient treatment may be rendered free of charge to hospital staff in the following cases:
    - (i) compulsory routine examinations;
    - (ii) immunisation measures for the prevention of contagious diseases;
    - (iii) examinations for monitoring sick leave;
    - (iv) examinations and blood tests where it is suspected that a staff member is on duty under the influence of intoxicating liquor or other drugs; and
    - (v) minor ailments for which uncomplicated treatment and medication are required for a period of not longer than 24 hours;

- (c) free lodging can be provided in a hospital to –
  - (i) a boarder, but only if the patient in whose interest he or she has been admitted, has been classified as an H1, H2 or H3 hospital patient;
  - (ii) a resident child, but only if the mother has been classified as an H1, H2 or H3 hospital patient.

#### Fees in respect of foreign patients

9. (1) A foreign patient who –
- (a) is on a temporary visit to the Republic and requires emergency medical treatment, shall be regarded as a private patient;
  - (b) specially and on his or her own responsibility visits the Republic exclusively for medical treatment (including pregnant women and children under 6 years), as well as tourists who wish that they be given elective medical treatment at a hospital, shall be liable for payment of such treatment at double the tariff applicable to a private patient.

#### Fees for medicine

10. (1) Medicine to be taken out of a hospital free of charge, may be supplied to –
- (a) an H1, H2 or H3 hospital patient;
  - (b) a private patient or an H4 hospital patient, but only in a case where –
    - (i) the medicine which he or she receives, is required for home consumption after discharge from a casualty division, and the quantity of medicine thus issued is for use for a period not exceeding 24 hours; or
    - (ii) he or she suffers from a disease referred to in regulation 8(1)(f) and the medicine he or she receives, is directly related to the disease concerned.
- (2) (a) Medicine on the official code list may be supplied on payment to a private patient or an H4 hospital patient to be taken out of a hospital, if –
- (i) such medicine is of the oncotherapy, peritoneal or haemo dialysis substances or other substances determined by the Head : Department of Health from time to time;
  - (ii) such medicine is needed by a transplant patient;

- (iii) the chief executive officer or delegated officials of the hospital approves that the medicine, which must be prescribed by an official medical practitioner, be supplied to such patient on account of his or her financial and other personal circumstances; or
  - (iv) the chief executive officer or delegated officials of the hospital has satisfied himself or herself that the patient cannot reasonably obtain the medicine concerned, which is urgently required for the treatment of his or her condition, locally from another source.
- (b) A patient to whom medicine is issued in terms of the provisions of paragraph (a), shall remunerate the hospital for the purchase cost of such medicine, plus 50%.
- (3) (a) (i) No fees shall be levied against an H1, H2 or H3 hospital patient in respect of medicine administered to him or her during inpatient or casualty treatment.
- (ii) The following fees is payable by an H1, H2 or H3 hospital patient in respect of a prescription issued to him or her during outpatient or casualty treatment:
- |      |                        |         |
|------|------------------------|---------|
| (aa) | In a district hospital | R 3,00; |
| (bb) | In a regional hospital | R 9,00; |
| (cc) | In a tertiary hospital | R15,00. |

#### Fees for blood and blood products

11. (1) No fees shall be payable for blood and blood products supplied to an H1, H2 or H3 hospital patient.
- (2) The cost of blood and blood products, which are supplied by the South African Blood Transfusion Service and are administered to a private patient or an H4 hospital patient during treatment in a hospital, shall be paid by the patient concerned, directly to the aforementioned Blood Transfusion Service: Provided that where such blood and blood products were supplied by another blood transfusion service, the patient shall remunerate the purchase cost thereof to the hospital concerned.
- (3) Notwithstanding the provisions of subregulation (2), a private patient or an H4 hospital patient who receives factor VIII, factor IX and proplex or an equivalent as an in- or outpatient to be taken out of the hospital, shall be liable for the fee of R400.00:

Provided that these substances will only be made available to foreign patients with the consent of the chief executive officer or delegated officials of the hospital concerned.

**Fees for X-rays for the diagnosis of pneumoconiosis**

12. (1) X-rays in connection with pneumoconiosis examinations may be taken of persons at the request of the Bureau for Occupational Diseases, magistrates, medical officers and officers of a government department, at the prescribed tariffs of the uniform patient fee schedule: Provided that no fees shall be charged for the visit to the outpatient division.
- (2) The Bureau for Occupational Diseases shall be liable for the payment of the tariff mentioned in subregulation (1).

**Fees for orthopaedic appliances, prosthesis, other appliances and crutches**

13. (1) (a) An H1-, H2- or H3-hospital patient to whom an orthopaedic appliance, prosthesis, other appliances or crutches are provided by a hospital, shall be liable for the payment of the fees as set out opposite the item concerned in Annexure B. H4- and private patients are liable for the fees as set out in the uniform patient fee schedule.
- (b) Notwithstanding the provisions of paragraph (a), if an official medical practitioner certifies that the issuing of a pair of crutches –
- (i) will obviate the admission of a person as an H1 hospital patient to a hospital for inpatient treatment; or
- (ii) will shorten such a patient's stay in hospital as an inpatient, a pair of crutches may be issued to such a person free of charge.
- (c) Steps must be taken to recover crutches issued in terms of the provisions of paragraph (a) or (b).
- (2) If an orthopaedic appliance or other appliance is prescribed for an H4 hospital patient by an official medical practitioner, or by a private medical practitioner to a private patient in a case where such appliance is not obtainable or manufactured in the private sector, and it is manufactured or repaired in a hospital, the following fees shall be levied against the patient concerned:
- (a) labour costs calculated at R37,00 per hour; plus
- (b) the purchase cost of the material used; plus
- (c) a levy of 15% on the total of the amounts, calculated according to paragraphs (a) and (b).

**Fees for implantations**

14. (1) Temporary and permanent implantations shall be supplied on a contribution of cost basis as stipulated hereunder:

- |     |                         |                            |
|-----|-------------------------|----------------------------|
| (a) | H0 hospital patient:    | 0 % contribution of cost;  |
| (b) | H1 hospital patient:    | 10 % contribution of cost; |
| (c) | H2 hospital patient:    | 25 % contribution of cost; |
| (d) | H3 hospital patient:    | 50 % contribution of cost; |
| (e) | H4- and private patient | 100% contribution of cost. |
- (2) The cost for the borrowing of a set of instruments which is required to perform the operation referred to in subregulation (1), must be paid by a private patient or an H4 hospital patient to the hospital concerned.

#### Fees in respect of mortuaries

15. The fees payable for the storage of a corpse in a mortuary at a hospital shall be as follows:

- (a) In a case where the deceased died in the hospital or on the hospital grounds as an inpatient, outpatient or casualty patient, or was brought to the hospital as an emergency case and was certified dead on arrival at the hospital -
- (i) no fees shall be payable if the deceased was an H1, H2 or H3 hospital patient.
- (b) If a corpse is preserved for training purposes, no fees shall be payable.

#### Fees for shrouds

16. No fees shall be payable when a shroud is supplied for any person who died in a hospital or on the hospital grounds as an inpatient, outpatient or casualty patient.

#### Fees for post-mortems

17. The fees payable in respect of a post-mortem shall be the following:

- (a) If the deceased died in the hospital or on the hospital grounds as an inpatient, outpatient or casualty patient, no fees shall be charged for a post-mortem carried out at the hospital: Provided that this provision shall not apply in the case of unnatural deaths;
- (b) If the deceased died in circumstances other than those mentioned in paragraph (a), R100,00 shall be charged per post-mortem and, if the body stays in the mortuary for longer than 24 hours, R100,00 shall be charged for every subsequent 24 hours or part thereof, and all fees determined in this paragraph, shall be payable by the institution that requested the post-mortem;
- (c) If a post-mortem is carried out for training purposes, no fees shall be payable.

**Fees payable for medical reports and other records**

18. (1) No fees shall be payable if –
- (a) a medical report or certificate is issued in respect of –
    - (i) an application for employment in the public service;
    - (ii) medico-legal services in connection with –
      - (aa) assault;
      - (bb) rape;
      - (cc) driving a vehicle under the influence of intoxicating liquor or drugs;
      - (dd) a mentally ill person, with a view to referral for observation in terms of the Mental Health Act, 1973;
      - (ee) a certification or confirmation of death; and
      - (ff) a post-mortem.
    - (iii) an application for an original sick-leave certificate;
  - (b) a medical report is issued by a medical practitioner in respect of –
    - (i) a private inpatient or outpatient; or
    - (ii) a case in terms of the Compensation for Occupational Injuries and Diseases Act, 1993 (Act No 130 of 1993), who was treated by an official medical practitioner.
- (2) If a report or certificate other than those mentioned in subregulation (1), is requested by an authorised person or organisation, such report or certificate may be made available on payment of an amount according to the uniform patient fee schedule tariffs.
- (3) If only copies are made of hospital records, a report or a certificate, the person or organisation who requested such copies, shall pay an amount of R100.00, before those copies will be made available.

**Fees payable for a visit to a primary health care centre or a community health centre**

19. A patient who receives treatment, excluding level III and level IV oral health services in a primary health care centre or a community health centre of a hospital, shall be liable for the payment of the following fees in respect of every visit:

- (a) In a community health centre where full-time medical treatment by a medical practitioner is available:
- (i) As an outpatient:  
An H1, H2, H3 or H4 hospital patient      Free of charge;
- (ii) As an inpatient:  
An H1, H2, H3 or H4 hospital patient      Free of charge.
- (b) In a primary health care centre where medical treatment by a medical practitioner is not available on a full-time basis, but services are rendered full-time by professional nurses:
- (i) As an outpatient:  
An H1, H2, H3 or H4 hospital patient      Free of charge;
- (ii) As an inpatient:  
An H1, H2, H3 or H4 hospital patient      Free of charge.
- (c) In a case where a home visit is paid:  
An H1, H2, H3 or H4 hospital patient      Free of charge.
- (d) In a case where a mobile clinic or an occasional visiting point of a hospital which is not served on a full-time basis, is visited:  
An H1, H2, H3 or H4 hospital patient      Free of charge.
- (e) In a case where a mobile radiological unit of a hospital is visited:  
An H1, H2, H3 or H4 hospital patient      Free of charge.

#### Fees payable for after-care service operated from a hospital

20. The fees payable for an after-care service operated from a hospital, excluding tertiary hospitals, are as follows:  
An H1, H2, H3 or H4 hospital patient      Free of charge.

#### Other tariffs

21. (a) **Oxygen:**  
If oxygen is in exceptional cases with the consent of the chief executive officer or delegated officials, dispensed from a hospital to a private patient or an H4 hospital patient, the patient shall pay the following amount per cylinder plus 30 % handling fees:

In all hospitals R150,00:

Provided that the cylinder shall remain the property of the supplier.

**Fees payable for non-pharmaceutical substances or medical consumables.**

22. If non-pharmaceutical substances or medical consumables are in exceptional cases with the consent of the Chief Executive Officer or delegated officials, dispensed from the hospital to a private patient or an H4 hospital patient, for example stoma and renal patients, the patient shall pay the purchase cost thereof plus 30 %.

**Fees for oral health**

23. (a) An H1-, H2- and H3 hospital patient who receives oral health services, shall be liable for the payment of the fees as set out opposite the item concerned in Annexure C.
- (b) A private or H4 hospital patient who receives oral health services, shall be liable for the payment of the fees as set out in the uniform patient fee schedule.

**Repeal**

24. The Regulations on Hospital Fees in the Free State, 1998, promulgated by Provincial Notice No. 50 of 14 April 2000, are hereby repealed.

**Short title and commencement**

25. These Regulations shall be called the Regulations on Fees for Health Services in the Free State, 2001, and shall come into operation on 1 October 2001.

## ANNEXURE A

## UPFS 2001 Fee Schedule

| CODE      | DESCRIPTION   | BASIS     | Professional Fee | FACILITY FEE |         |         |
|-----------|---|-----------|------------------|--------------|---------|---------|
|           |   |           |                  | LEVEL 1      | LEVEL 2 | LEVEL 3 |
| <b>01</b> | <b>Anaesthetics</b>                                   |           |                  |              |         |         |
| 0111      | Anaesthetics Cat A - General medical practitioner     | Procedure | R 91             |              |         |         |
| 0112      | Anaesthetics Cat A - Specialist medical practitioner  | Procedure | R 136            |              |         |         |
| 0121      | Anaesthetics Cat B - General medical practitioner     | Procedure | R 153            |              |         |         |
| 0122      | Anaesthetics Cat B - Specialist medical practitioner  | Procedure | R 230            |              |         |         |
| 0131      | Anaesthetics Cat C - General medical practitioner     | Procedure | R 541            |              |         |         |
| 0132      | Anaesthetics Cat C - Specialist medical practitioner  | Procedure | R 812            |              |         |         |
| <b>02</b> | <b>Confinement</b>                                    |           |                  |              |         |         |
| 0210      | Confinement - Facility Fee                            | Incident  |                  | R 1 572      | R 1 572 | R 1 925 |
| 0211      | Confinement - General medical practitioner            | Incident  | R 939            |              |         |         |
| 0212      | Confinement - Specialist medical practitioner         | Incident  | R 1 202          |              |         |         |
| 0213      | Confinement - Nursing practitioner                    | Incident  | R 950            |              |         |         |
| <b>03</b> | <b>Dialysis</b>                                       |           |                  |              |         |         |
| 0310      | Haemo - Facility Fee                                  | Session   |                  | R 480        | R 480   | R 900   |
| 0311      | Haemo-dialysis - General medical practitioner         | Session   | R 100            |              |         |         |
| 0312      | Haemo-dialysis - Specialist medical practitioner      | Session   | R 120            |              |         |         |
| 0320      | Peritoneal Dialysis - Facility Fee                    | Session   |                  | R 121        | R 121   | R 145   |
| 0321      | Peritoneal Dialysis - General medical practitioner    | Session   | R 145            |              |         |         |
| 0322      | Peritoneal Dialysis - Specialist medical practitioner | Session   | R 145            |              |         |         |
| <b>04</b> | <b>Medical Reports</b>                                |           |                  |              |         |         |
| 0410      | Medical Report - Facility Fee                         | Report    |                  | R 57         | R 57    | R 69    |
| 0411      | Medical Report - General medical practitioner         | Report    | R 109            |              |         |         |
| 0412      | Medical Report - Specialist medical practitioner      | Report    | R 163            |              |         |         |

| CODE                 | DESCRIPTION  | BASIS     | Professional Fee | FACILITY FEE      |         |         |
|----------------------|--|-----------|------------------|-------------------|---------|---------|
|                      |  |           |                  | LEVEL 1           | LEVEL 2 | LEVEL 3 |
|                      |  |           |                  | <b>05 Imaging</b> |         |         |
| 0510                 | Radiology, Cat A - Facility Fee                            | Procedure |                  | R 28              | R 28    | R 33    |
| 0511                 | Radiology, Cat A - General medical practitioner            | Procedure | R 29             |                   |         |         |
| 0512                 | Radiology, Cat A - Specialist medical practitioner         | Procedure | R 55             |                   |         |         |
| 0514                 | Radiology, Cat A - Allied health practitioner              | Procedure | R 28             |                   |         |         |
| 0520                 | Radiology, Cat B - Facility Fee                            | Procedure |                  | R 79              | R 79    | R 94    |
| 0521                 | Radiology, Cat B - General medical practitioner            | Procedure | R 84             |                   |         |         |
| 0522                 | Radiology, Cat B - Specialist medical practitioner         | Procedure | R 157            |                   |         |         |
| 0524                 | Radiology, Cat B - Allied health practitioner              | Procedure | R 79             |                   |         |         |
| 0530                 | Radiology, Cat C - Facility Fee                            | Procedure |                  | R 373             | R 373   | R 447   |
| 0531                 | Radiology, Cat C - General medical practitioner            | Procedure | R 277            |                   |         |         |
| 0532                 | Radiology, Cat C - Specialist medical practitioner         | Procedure | R 761            |                   |         |         |
| 0540                 | Radiology, Cat D - Facility Fee                            | Procedure |                  | R 950             | R 950   | R 1 140 |
| 0541                 | Radiology, Cat D - General medical practitioner            | Procedure | R 921            |                   |         |         |
| 0542                 | Radiology, Cat D - Specialist                              | Procedure | R 1 908          |                   |         |         |
| <b>06 Inpatients</b> |  |           |                  |                   |         |         |
| 0610                 | Inpatient General ward - Facility Fee                      | Day       |                  | R 573             | R 573   | R 688   |
| 0611                 | Inpatient General ward - General medical practitioner      | Day       | R 66             |                   |         |         |
| 0612                 | Inpatient General ward - Specialist medical practitioner   | Day       | R 85             |                   |         |         |
| 0620                 | Inpatient High care - Facility Fee                         | 12h       |                  | R 689             | R 689   | R 827   |
| 0621                 | Inpatient High care - General medical practitioner         | 12h       | R 33             |                   |         |         |
| 0622                 | Inpatient High care - Specialist medical practitioner      | 12h       | R 42             |                   |         |         |
| 0630                 | Inpatient Intensive care - Facility Fee                    | 12h       |                  | R 1 295           | R 1 295 | R 1 554 |
| 0631                 | Inpatient Intensive care - General medical practitioner    | 12h       | R 33             |                   |         |         |
| 0632                 | Inpatient Intensive care - Specialist medical practitioner | 12h       | R 42             |                   |         |         |
| 0640                 | Inpatient Chronic care - Facility Fee                      | Day       |                  | R 464             | R 464   | R 464   |

| CODE      | DESCRIPTION  | BASIS        | Professional Fee | FACILITY FEE |         |          |
|-----------|--|--------------|------------------|--------------|---------|----------|
|           |  |              |                  | LEVEL 1      | LEVEL 2 | LEVEL 3  |
|           |  |              |                  |              |         |          |
| 0641      | Inpatient Chronic care - General medical practitioner    | Day          | R 66             |              |         |          |
| 0642      | Inpatient Chronic care - Specialist medical practitioner | Day          | R 85             |              |         |          |
| 0643      | Inpatient Chronic care - Nursing practitioner            | Day          | R 44             |              |         |          |
| 0650      | Day patient - Facility Fee                               | Day          |                  | R 278        | R 278   | R 334.00 |
| 0651      | Day patient - General medical practitioner               | Day          | R 66             |              |         |          |
| 0652      | Day patient - Specialist medical practitioner            | Day          | R 85             |              |         |          |
| 0653      | Day patient - Nursing practitioner                       | Day          | R 44             |              |         |          |
| 0660      | Inpatient Boarder - Facility Fee                         | Day          |                  | R 299        | R 299   | R 359    |
| 0663      | Inpatient Boarder - Nursing practitioner                 | Day          | R 44             |              |         |          |
| <b>07</b> | <b>Mortuary</b>  |              |                  |              |         |          |
| 0710      | Mortuary - Facility Fee                                  | Day          |                  | R 75         | R 75    | R 89     |
| 0720      | Cremation certificate - Facility Fee                     | Certificate  |                  | R 75         | R 75    | R 89     |
| <b>08</b> | <b>Pharmaceutical</b>                                    |              |                  |              |         |          |
| 0810      | Medication fee - Facility Fee                            | Prescription |                  | R16          | R16     | R19      |
| 0815      | Item Fee   | Item         |                  |              |         |          |
| <b>09</b> | <b>Oral Health</b>                                       |              |                  |              |         |          |
| 0910      | Oral Care Cat A - Facility Fee                           | Procedure    |                  | R 10         | R 10    | R 12     |
| 0911      | Oral Care Cat A - General practitioner                   | Procedure    | R 19             |              |         |          |
| 0912      | Oral Care Cat A - Specialist practitioner                | Procedure    | R 18             |              |         |          |
| 0914      | Oral Care Cat A - Allied health practitioner             | Procedure    | R 15             |              |         |          |
| 0920      | Oral Care Cat B - Facility Fee                           | Procedure    |                  | R 35         | R 35    | R 42     |
| 0921      | Oral Care Cat B - General practitioner                   | Procedure    | R 38             |              |         |          |
| 0922      | Oral Care Cat B - Specialist practitioner                | Procedure    | R 67             |              |         |          |
| 0924      | Oral Care Cat B - Allied health practitioner             | Procedure    | R 30             |              |         |          |
| 0930      | Oral Care Cat C - Facility Fee                           | Procedure    |                  | R 194        | R 194   | R 233    |
| 0931      | Oral Care Cat C - General practitioner                   | Procedure    | R 224            |              |         |          |
| 0932      | Oral Care Cat C - Specialist practitioner                | Procedure    | R 368            |              |         |          |

| CODE      | DESCRIPTION  | BASIS     | Professional Fee | FACILITY FEE |         |         |
|-----------|--|-----------|------------------|--------------|---------|---------|
|           |  |           |                  | LEVEL 1      | LEVEL 2 | LEVEL 3 |
| 0940      | Oral Care Cat D - Facility Fee                               | Procedure |                  | R 823        | R 823   | R 987   |
| 0941      | Oral Care Cat D - General practitioner                       | Procedure | R 745            |              |         |         |
| 0942      | Oral Care Cat D - Specialist practitioner                    | Procedure | R 1 528          |              |         |         |
| 0950      | Oral Care Cat E - Facility Fee                               | Procedure |                  | R 2 730      | R 2 730 | R 3 276 |
| 0951      | Oral Care Cat E - General practitioner                       | Procedure | R 2 470          |              |         |         |
| 0952      | Oral Care Cat E - Specialist practitioner                    | Procedure | R 5 071          |              |         |         |
| <b>10</b> | <b>Consultations</b>   |           |                  |              |         |         |
| 1010      | Outpatient Consultation - Facility Fee                       | Visit     |                  | R 29         | R 29    | R 35    |
| 1011      | Outpatient Consultation - General medical practitioner       | Visit     | R 66             |              |         |         |
| 1012      | Outpatient Consultation - Specialist medical practitioner    | Visit     | R 85             |              |         |         |
| 1013      | Outpatient Consultation - Nursing practitioner               | Visit     | R 44             |              |         |         |
| 1014      | Outpatient Consultation - Allied health practitioner         | Visit     | R 66             |              |         |         |
| 1020      | Emergency Consultation - Facility Fee                        | Visit     |                  | R 61         | R 61    | R 73    |
| 1021      | Emergency Consultation - General medical practitioner        | Visit     | R 117            |              |         |         |
| 1022      | Emergency Consultation - Specialist medical practitioner     | Visit     | R 176            |              |         |         |
| 1023      | Emergency Consultation - Nursing practitioner                | Visit     | R 87             |              |         |         |
| 1024      | Emergency Consultation - Allied health practitioner          | Visit     | R 133            |              |         |         |
| <b>11</b> | <b>Ambulatory Procedures</b>                                 |           |                  |              |         |         |
| 1110      | Ambulatory Procedure Cat A - Facility Fee                    | Procedure |                  | R 176        | R 176   | R 211   |
| 1111      | Ambulatory Procedure Cat A - General medical practitioner    | Procedure | R 115            |              |         |         |
| 1112      | Ambulatory Procedure Cat A - Specialist medical practitioner | Procedure | R 115            |              |         |         |
| 1113      | Ambulatory Procedure Cat A - Nursing practitioner            | Procedure | R 42             |              |         |         |
| 1120      | Ambulatory Procedure Cat B - Facility Fee                    | Procedure |                  | R 176        | R 176   | R 211   |
| 1121      | Ambulatory Procedure Cat B - General medical practitioner    | Procedure | R 296            |              |         |         |
| 1122      | Ambulatory Procedure Cat B - Specialist medical practitioner | Procedure | R 402            |              |         |         |

| CODE      | DESCRIPTION  | BASIS     | Professional Fee | FACILITY FEE |         |         |
|-----------|--|-----------|------------------|--------------|---------|---------|
|           |  |           |                  | LEVEL 1      | LEVEL 2 | LEVEL 3 |
| 1130      | Ambulatory Procedure Cat C - Facility Fee                    | Procedure |                  | R 176        | R 176   | R 211   |
| 1131      | Ambulatory Procedure Cat C - General medical practitioner    | Procedure | R 562            |              |         |         |
| 1132      | Ambulatory Procedure Cat C - Specialist medical practitioner | Procedure | R 843            |              |         |         |
| 1140      | Ambulatory Procedure Cat D - Facility Fee                    | Procedure |                  | R 176        | R 176   | R 211   |
| 1141      | Ambulatory Procedure Cat D - General medical practitioner    | Procedure | R 1 334          |              |         |         |
| 1142      | Ambulatory Procedure Cat D - Specialist medical practitioner | Procedure | R 1 994          |              |         |         |
| <b>12</b> | <b>Theatre Procedures</b>                                    |           |                  |              |         |         |
| 1210      | Theatre Procedure Cat A - Facility Fee                       | Procedure |                  | R 808        | R 808   | R 969   |
| 1211      | Theatre Procedure Cat A - General medical practitioner       | Procedure | R 115            |              |         |         |
| 1212      | Theatre Procedure Cat A - Specialist medical practitioner    | Procedure | R 115            |              |         |         |
| 1220      | Theatre Procedure Cat B - Facility Fee                       | Procedure |                  | R 1 221      | R 1 221 | R 1 465 |
| 1221      | Theatre Procedure Cat B - General medical practitioner       | Procedure | R 296            |              |         |         |
| 1222      | Theatre Procedure Cat B - Specialist medical practitioner    | Procedure | R 402            |              |         |         |
| 1230      | Theatre Procedure Cat C - Facility Fee                       | Procedure |                  | R 2 148      | R 2 148 | R 2 578 |
| 1231      | Theatre Procedure Cat C - General medical practitioner       | Procedure | R 562            |              |         |         |
| 1232      | Theatre Procedure Cat C - Specialist medical practitioner    | Procedure | R 843            |              |         |         |
| 1240      | Theatre Procedure Cat D - Facility Fee                       | Procedure |                  | R 5 341      | R 5 341 | R 6 409 |
| 1241      | Theatre Procedure Cat D - General medical practitioner       | Procedure | R 1 334          |              |         |         |
| 1242      | Theatre Procedure Cat D - Specialist medical practitioner    | Procedure | R 1 994          |              |         |         |
| <b>13</b> | <b>Treatments</b>  |           |                  |              |         |         |
| 1310      | Supplementary Health Treatment - Facility Fee                | Contact   |                  | R 23         | R 23    | R 28    |
| 1314      | Supplementary Health Treatment - Allied health practitioner  | Contact   | R 43             |              |         |         |
| <b>14</b> | <b>Emergency Medical Services</b>                            |           |                  |              |         |         |
| 1410      | Patient transport service - Facility Fee                     | 100km     |                  | R 159        | R 159   | R 159   |
| 1420      | Basic life support - Facility Fee                            | 50km      |                  | R 257        | R 257   | R 257   |

| CODE      | DESCRIPTION   | BASIS     | Professional Fee | FACILITY FEE |         |         |
|-----------|---|-----------|------------------|--------------|---------|---------|
|           |   |           |                  | LEVEL 1      | LEVEL 2 | LEVEL 3 |
|           |   |           |                  |              |         |         |
| 1430      | Intermediate life support - Facility Fee                    | 50km      |                  | R 318        | R 318   | R 318   |
| 1440      | Advanced life support - Facility Fee                        | 50km      |                  | R 408        | R 408   | R 408   |
| 1450      | Emergency service standby - Facility Fee                    | Hour      |                  | R 46         | R 46    | R 46    |
| 1451      | Emergency service standby - General medical practitioner    | Hour      |                  | R 186        | R 186   | R 186   |
| 1452      | Emergency service standby - Specialist medical practitioner | Hour      |                  | R 279        | R 279   | R 279   |
| 1453      | Emergency service standby - Nursing practitioner            | Hour      |                  | R 124        | R 124   | R 124   |
| 1454      | Emergency service standby - Allied health practitioner      | Hour      |                  | R 124        | R 124   | R 124   |
| 1460      | Rescue - Facility Fee                                       | Incident  |                  | R 465        | R 465   | R 465   |
| 1461      | Rescue - General medical practitioner                       | Incident  |                  | R 697        | R 697   | R 697   |
| 1462      | Rescue - Specialist medical practitioner                    | Incident  |                  | R 1 046      | R 1 046 | R 1 046 |
| 1463      | Rescue - Nursing practitioner                               | Incident  |                  | R 465        | R 465   | R 465   |
| 1464      | Rescue - Allied health practitioner                         | Incident  |                  | R 465        | R 465   | R 465   |
| <b>15</b> | <b>Assistive Devices &amp; Prosthesis</b>                   |           |                  |              |         |         |
| 1510      | Item Fee  | Item      | Varies           |              |         |         |
| <b>16</b> | <b>Cosmetic Surgery</b>                                     |           |                  |              |         |         |
| 1610      | Cosmetic Surgery Cat A - Facility Fee                       | Procedure |                  | R 1 224      | R 1 224 | R 1 469 |
| 1611      | Cosmetic Surgery Cat A - General Practitioner               | Procedure | R 878            |              |         |         |
| 1612      | Cosmetic Surgery Cat A - Specialist Practitioner            | Procedure | R 1 317          |              |         |         |
| 1620      | Cosmetic Surgery Cat B - Facility Fee                       | Procedure |                  | R 2 753      | R 2 753 | R 3 304 |
| 1621      | Cosmetic Surgery Cat B - General Practitioner               | Procedure | R 740            |              |         |         |
| 1622      | Cosmetic Surgery Cat B - Specialist Practitioner            | Procedure | R 1 111          |              |         |         |
| 1630      | Cosmetic Surgery Cat C - Facility Fee                       | Procedure |                  | R 4 446      | R 4 446 | R 5 335 |
| 1631      | Cosmetic Surgery Cat C - General Practitioner               | Procedure | R 1 484          |              |         |         |
| 1632      | Cosmetic Surgery Cat C - Specialist Practitioner            | Procedure | R 2 227          |              |         |         |
| 1640      | Cosmetic Surgery Cat D - Facility Fee                       | Procedure |                  | R 7 510      | R 7 510 | R 9 012 |
| 1641      | Cosmetic Surgery Cat D - General Practitioner               | Procedure | R 1 666          |              |         |         |
| 1642      | Cosmetic Surgery Cat D - Specialist Practitioner            | Procedure | R 2 499          |              |         |         |

**ANNEXURE B (REGULATION 13)**

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**Orthopedic Prosthesis, and Other Appliances and Crutches**

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| Nature of Appliance                                  | Per treatment | Hospital Patient |         |      |
|--|---------------|------------------|---------|------|
|  |               | H3               | H2      | H1   |
| 1. Artificial Arms<br>Upper extremity<br>prosthesis) |               |                  |         |      |
| 1.1 Through shoulder                                 |               |                  |         |      |
| (a) functional                                       | Each          | R2 925           | R 1 950 | R390 |
| (b) non- functional                                  | Each          | R2 925           | R 1 950 | R390 |
| 1.2 Through elbow                                    |               |                  |         |      |
| (a) functional                                       | Each          | R2 925           | R1 950  | R390 |
| (b) non-functional                                   | Each          | R2 587           | R1 725  | R345 |
| 1.3 Through wrist                                    | Each          | R2 587           | R1 725  | R345 |
| 1.4 Above elbow                                      |               |                  |         |      |
| (a) functional                                       | Each          | R2 587           | R1 725  | R345 |
| (b) non-functional                                   | Each          | R2 587           | R1 725  | R345 |
| 1.5 Under elbow                                      |               |                  |         |      |
| (a) functional                                       | Each          | R2 587           | R1 725  | R345 |
| (b) non- functional                                  | Each          | R2 338           | R1 559  | R311 |

| Nature of Appliance   | Per treatment | Hospital Patient  |   |   |
|---|---------------|---|---|---|
|   |               | H3  | H2  | H1  |
| 1.6 Congenital/Cos-metic (Quote: Labour @ R37,00 per hour plus material plus 30 % overhead charges) |               | R70/75 % of Quote or R2 587 whichever is lower – minimum charge R70 | R50/50 % of Quote or R1 725 whichever is lower – minimum charge R50 | R15/10 % of Quote or R390 whichever is lower – minimum charge R15 |
| 2. Artificial Legs Lower extremity prosthesis   |               |   |   |   |
| 2.1 Symes Choparts (excluding boots)  | Each          | R1 758  | R1 172  | R234  |
| 2.2 Below knee (excluding boots)  |               |   |   |   |
| (a) P.T.B.  | Each          | R1 874  | R1 249  | R250  |
| (b) conventional  | Each          | R2 975  | R1 983  | R397  |
| (c) P.T.S. modular  | Each          | R2 950  | R1 967  | R393  |
| (d) pylon   | Each          | R1 532  | R1 022  | R204  |
| 2.3 Through knee (excluding boots)  |               |   |   |   |
| (a) conventional  | Each          | R2 925  | R1 950  | R309  |
| (b) modular   | Each          | R2 925  | R1 950  | R390  |
| 2.4 Above knee (excluding boots)  |               |   |   |   |
| (a) conventional (and simplex)  | Each          | R2 925  | R1 950  | R390  |

| Nature of Appliance   | Per treatment | Hospital Patient  |  |  |
|---|---------------|---|--|--|
|   |               | H3  | H2   | H1   |
| (b) modular   | Each          | R2 925  | R1 950   | R390   |
| (c) pylon   | Each          | R2 295  | R1 530   | R306   |
| 2.5 Tilting Table/<br>Hip Disarticulation<br>(excluding boots)  | Each          | R2 925  | R1 950   | R390   |
| 2.6 Stump socks   | Each          | R70   | R50  | R15  |
| 2.7 Sheaths   | Each          | R70   | R50  | R15  |
| 2.8 Congenital/Cosmetic<br>(Quote: Labour @ R37<br>per hour plus material<br>plus 30 % overhead<br>charges) |               | R70/75 %<br>of Quote or<br>R2 925<br>whichever<br>is lower –<br>minimum<br>charge R70 | R50/50 %<br>of Quote<br>or R1 950<br>whichever<br>is lower –<br>minimum<br>charge<br>R50 | R15/10 %<br>of Quote<br>or R390<br>whichever<br>is lower –<br>minimum<br>charge<br>R15 |
| 3. Spinal Orthosis  |               |   |  |  |
| 3.1 Collars   |               |   |  |  |
| (a) Soft  | Each          | *N/c  | N/c  | N/c  |
| (b) Plastic   | Each          | N/c   | N/c  | N/c  |
| (c) S.O.M.I.  | Each          | N/c   | N/c  | N/c  |
| (d) Cervical wire   | Each          | N/c   | N/c  | N/c  |
| (e) ABCO  | Each          | N/c   | N/c  | N/c  |
| (f) HALO  | Each          | N/c   | N/c  | N/c  |
| (g) Philadelphia S.A.G.A./<br>Admas   | Each          | N/c   | N/c  | N/c  |
| (h) Moulded   | Each          | N/c   | N/c  | N/c  |
| 3.2 Corsets   |               |   |  |  |
| (a) Lumborsacral (for males)  | Each          | N/c   | N/c  | N/c  |

| Nature of Appliance                          | Per treatment | Hospital Patient |     |     |
|--|---------------|------------------|-----|-----|
|  |               | H3               | H2  | H1  |
| (b) Lumbosacral (for women)                  | Each          | N/c              | N/c | N/c |
| (c) Lumbodorsal (for men)                    | Each          | N/c              | N/c | N/c |
| (d) Lumbodorsal (for women)                  | Each          | N/c              | N/c | N/c |
| (e) Abdominal (for men)                      | Each          | N/c              | N/c | N/c |
| (f) Abdominal (for females)                  | Each          | N/c              | N/c | N/c |
| (g) Abdominal binder                         | Each          | N/c              | N/c | N/c |
| 4. Braces                                    |               |                  |     |     |
| 4.1 Milwaukee                                | Each          | N/c              | N/c | N/c |
| 4.2 Boston                                   | Each          | N/c              | N/c | N/c |
| 4.3 T.L.S.O.                                 | Each          | N/c              | N/c | N/c |
| 4.4 Bennet's (metal)                         | Each          | N/c              | N/c | N/c |
| 4.5 Bennet's (plastic)                       | Each          | N/c              | N/c | N/c |
| 4.6 Fichers/Jordan                           | Each          | N/c              | N/c | N/c |
| 4.7 Bakers/Jewett                            | Each          | N/c              | N/c | N/c |
| 4.8 Lumbosacral brace and Taylor's extension | Each          | N/c              | N/c | N/c |
| 4.9  |               |                  |     |     |
| (a) Bivalved TLSO                            | Each          | N/c              | N/c | N/c |
| (b) Bivalved TLSO with S.O.L.M.I extension   | Each          | N/c              | N/c | N/c |
| 4.10 Robert Jones and Taylor's               | Each          | N/c              | N/c | N/c |

| Nature of Appliance |                        | Per treatment | Hospital Patient |      |      |
|---------------------|------------------------|---------------|------------------|------|------|
|                     |                        |               | H3               | H2   | H1   |
| 4.11                | C.A.S.H. brace         | Each          | N/c              | N/c  | N/c  |
| 4.12                | C.A.S.H. brace (local) | Each          | N/c              | N/c  | N/c  |
| 5.                  | Footwear               |               |                  |      |      |
| 5.1                 | Boots                  |               |                  |      |      |
| (a)                 | Infants                | Pair          | R152             | R102 | R20  |
| (b)                 | Children               | Pair          | R157             | R105 | R21  |
| (c)                 | Youth maids            | Pair          | R158             | R106 | R21  |
| (d)                 | Men                    | Pair          | R170             | R113 | R23  |
| 5.2                 | Shoes                  |               |                  |      |      |
| (a)                 | Children               | Pair          | R157             | R105 | R21  |
| (b)                 | Nurses                 | Pair          | R170             | R113 | R23  |
| 5.3                 | Tarsopronator          |               |                  |      |      |
| (a)                 | 000 - 3                | Pair          | R337             | R225 | R45  |
| (b)                 | 4 - 6                  | Pair          | R356             | R238 | R48  |
| (c)                 | 7 - 9                  | Pair          | R356             | R237 | R47  |
| (d)                 | 10 - 12                | Pair          | R461             | R308 | R62  |
| (e)                 | 13 - 3 Youths          | Pair          | R461             | R308 | R62  |
| (f)                 | 4 - 5 Adults           | Pair          | R461             | R308 | R62  |
| 5.4                 | Tarso Supinator        |               |                  |      |      |
| (a)                 | 3½ - 6½ Infants        | Pair          | R356             | R238 | R48  |
| (b)                 | 7 - 1½ Children        | Pair          | R404             | R270 | R54  |
| (c)                 | 2 - 9 Youth            | Pair          | R461             | R308 | R62  |
| 5.5                 | Surgical               |               |                  |      |      |
| (a)                 | Boots                  | Pair          | R772             | R515 | R103 |
| (b)                 | Boots                  | Single        | R386             | R257 | R51  |
| (c)                 | Shoes                  | Pair          | R642             | R428 | R86  |

| Nature of Appliance                             | Per treatment | Hospital Patient |      |     |
|---|---------------|------------------|------|-----|
|   |               | H3               | H2   | H1  |
| (d) Shoes                                       | Single        | R321             | R214 | R43 |
| (e) "Forest Town" boots                         | Pair          | R578             | R386 | R77 |
| (f) Sandals (plastic)                           | Pair          | R640             | R427 | R85 |
| (g) O'Connor extension                          | Single        | R587             | R391 | R78 |
| (h) Reverse side boots                          | Pair          | R347             | R231 | R46 |
| (i) Sandals (plaster)                           | Single        | R173             | R115 | R23 |
| (j) Choparts extension                          | Single        | R530             | R354 | R71 |
| 5.6 Footwear alteration                         |               |                  |      |     |
| The following items or any combination thereof: |               |                  |      |     |
| (a) Crooked and elongated heel                  |               | R56              | R37  | R15 |
| (b) Thomas heel                                 |               | R56              | R37  | R15 |
| (c) Flares heel or sole                         |               | R59              | R39  | R15 |
| (d) Wedge heel and sole                         |               | R71              | R48  | R15 |
| (e) Wedge heel and sole                         |               | R59              | R39  | R15 |
| (f) Metatarsal bars                             | Each          | R69              | R46  | R15 |
| (g) Rocker soles                                | Each          | R66              | R44  | R15 |
| (h) Toecaps                                     | Each          | R59              | R39  | R15 |

| Nature of Appliance                            | Per treatment | Hospital Patient |      |     |
|--|---------------|------------------|------|-----|
|  |               | H3               | H2   | H1  |
| (i) Long and metatarsal insoles                | Each          | R66              | R44  | R15 |
| (j) Long insoles                               | Each          | R59              | R39  | R15 |
| (k) Metatarsal insoles                         | Each          | R59              | R39  | R17 |
| (l) Moulded insoles                            | Each          | R101             | R68  | R15 |
| (m) Cork raises                                | Each          | R181             | R121 | R24 |
| (n) Heel and sole raise leather (feather foam) | Each          | R119             | R79  | R15 |
| (o) Pattern raises (excluding                  |               |                  |      |     |

|     |  |      |      |      |     |
|-----|--|------|------|------|-----|
|     | boots)   | Each | R185 | R124 | R25 |
| (p) | Toe filier   | Each | R75  | R50  | R15 |
| (q) | Socket with back of front<br>stop fixed (excluding<br>boots) | Each | R97  | R65  | R15 |
| (r) | T straps   | Each | R35  | R24  | R15 |
| (s) | Heel raise   | Each | R41  | R27  | R15 |
| (t) | Torque heel  | Each | R122 | R81  | R16 |
| (u) | Buttress boot  | Each | R201 | R134 | R27 |
| (v) | Heel pads  | Each | R74  | R50  | R15 |
| (w) | Excavated heel   | Each | R69  | R46  | R15 |
| (x) | Inside heel lift   | Each | R69  | R46  | R15 |

| Nature of Appliance  | Per treatment | Hospital Patient |     |     |
|--|---------------|------------------|-----|-----|
|  |               | H3               | H2  | H1  |
| (y) Sach heel  | Each          | R53              | R35 | R15 |
| (z) Struck-in arch support   | Each          | R74              | R50 | R15 |
| (aa) UCBL  | Each          | R80              | R54 | R15 |
| (bb) SMO   | Each          | R137             | R91 | R18 |
| 6. Below Knee Orthoses   |               |                  |     |     |
| 6.1 Ankle guard  | Each          | N/c              | N/c | N/c |
| 6.2 Air cast ankle brace   | Each          | N/c              | N/c | N/c |
| 6.3 Night splints  | Each          | N/c              | N/c | N/c |
| 6.4 Below knee irons single (for children)(including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only)        | Each          | N/c              | N/c | N/c |
| 6.5 Below knee irons single (adults)(including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only)              | Each          | N/c              | N/c | N/c |
| 6.6 Below knee irons double (for children) (including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only)       | Each          | N/c              | N/c | N/c |
| 6.7 Below knee irons double (adults) (including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only)             | Each          | N/c              | N/c | N/c |
| 6.8 Below knee irons bilateral single (children) (including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only) | Each          | N/c              | N/c | N/c |

| Nature of Appliance   | Per treatment | Hospital Patient |     |     |
|---|---------------|------------------|-----|-----|
|   |               | H3               | H2  | H1  |
| 6.9 Below knee irons bilateral single (adults) (including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only)        | Each          | N/c              | N/c | N/c |
| 6.10 Below knee irons bilateral double (for children) (including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only) | Each          | N/c              | N/c | N/c |
| 6.11 Below knee irons bilateral single (adults) (including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only)       | Each          | N/c              | N/c | N/c |
| 6.12 O'Gormans uni-lateral (including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only)                            | Each          | N/c              | N/c | N/c |
| 6.13 O'Gormans bilateral (including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only)                              | Each          | N/c              | N/c | N/c |
| 6.14 Toe elevating irons double for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only)  | Each          | N/c              | N/c | N/c |
| 6.15 Toe elevating bilateral double   | Each          | N/c              | N/c | N/c |
| 6.16 Ankle-foot orthosis  | Each          | N/c              | N/c | N/c |

| Nature of Appliance   | Per treatment | Hospital Patient |      |     |
|---|---------------|------------------|------|-----|
|   |               | H3               | H2   | H1  |
| 6.17 Hinged ankle-foot orthosis   | Each          | N/c              | N/c  | N/c |
| 6.18 Legging gaiter – leather   | Each          | N/c              | N/c  | N/c |
| 6.19 Legging gaiter – plastic   | Each          | N/c              | N/c  | N/c |
| 7. Knee Orthosis  |               |                  |      |     |
| 7.1 Knee guard  | Each          | R24              | R16  | R15 |
| 7.2 Knee hinged supports (short)  | Each          | R83              | R55  | R15 |
| 7.3 Knee hinged supports (long)   | Each          | R256             | R171 | R34 |
| 7.4 Moulded with joints   | Each          | R651             | R434 | R87 |
| 7.5 Moulded no joints   | Each          | R305             | R204 | R41 |
| 7.6 Night splints   | Each          | R261             | R174 | R35 |
| 7.7 Crawling pads   | Each          | R188             | R125 | R25 |
| 7.8 Canvas gaiters  | Each          | R176             | R118 | R24 |
| 7.9 Swedish knee cage   | Each          | R191             | R127 | R25 |
| 8. Above Knee Orthosis  |               |                  |      |     |
| 8.1 Straight leg caliper unilateral – (adults) (including boots for H <sub>1</sub> , H <sub>2</sub> en H <sub>3</sub> only) | Each          | N/c              | N/c  | N/c |
| (children) (including boots for H <sub>1</sub> , H <sub>2</sub> en H <sub>3</sub> only)                                     | Each          | N/c              | N/c  | N/c |

| Nature of Appliance   | Per treatment | Hospital Patient |     |     |
|---|---------------|------------------|-----|-----|
|   |               | H3               | H2  | H1  |
| 8.2 Straight leg caliper bilateral – (adults)(including boots for H <sub>1</sub> , H <sub>2</sub> en H <sub>3</sub> only) (children) (including boots for H <sub>1</sub> , H <sub>2</sub> en H <sub>3</sub> only) | Each          | N/c              | N/c | N/c |
|   | Each          | N/c              | N/c | N/c |
| 8.3 with pelvic band unilateral – (adults) (including boots for H <sub>1</sub> , H <sub>2</sub> en H <sub>3</sub> only) (children) (including boots for H <sub>1</sub> , H <sub>2</sub> en H <sub>3</sub> only)   | Each          | N/c              | N/c | N/c |
|   | Each          | N/c              | N/c | N/c |
| 8.4 with pelvic band bilateral – (adults) (including boots for H <sub>1</sub> , H <sub>2</sub> en H <sub>3</sub> only) (children) (including boots for H <sub>1</sub> , H <sub>2</sub> en H <sub>3</sub> only)    | Each          | N/c              | N/c | N/c |
|   | Each          | N/c              | N/c | N/c |
| 8.5 Knee jointed caliper unilateral (including boots for H <sub>1</sub> , H <sub>2</sub> en H <sub>3</sub> only)  | Each          | N/c              | N/c | N/c |

| Nature of Appliance  | Per treatment | Hospital Patient |      |     |
|--|---------------|------------------|------|-----|
|  |               | H3               | H2   | H1  |
| 8.6 Knee jointed caliper bilateral (including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only) | Each          | N/c              | N/c  | N/c |
| 8.7 With hip joints unilateral (including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only)     | Each          | N/c              | N/c  | N/c |
| 8.8 With hip joints bilateral (including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only)      | Each          | N/c              | N/c  | N/c |
| 8.9 Plastic K.A.F.L. unilateral  | Each          | N/c              | N/c  | N/c |
| 8.10 Plastic K.A.F.L. bilateral  | Each          | N/c              | N/c  | N/c |
| 8.11 Perthes caliper (children) (including boots for H <sub>1</sub> , H <sub>2</sub> and H <sub>3</sub> only)    | Each          | N/c              | N/c  | N/c |
| 8.12 Conradie leg brace pair   | Pair          | N/c              | N/c  | N/c |
| 9. Hip Orthosis  |               |                  |      |     |
| 9.1 Congenital dislocation hip (Pavlik van Rossen Barlow)  | Pair          | R150             | R100 | R20 |
| 9.2 Hip spika  | Each          | R600             | R400 | R80 |
| 9.3 Hip spika and hip joint  | Each          | R632             | R421 | R84 |

| Nature of Appliance             | Per treatment | Hospital Patient |      |     |
|---------------------------------|---------------|------------------|------|-----|
|                                 |               | H3               | H2   | H1  |
| 9.4 Mauritian splint            | Each          | R404             | R270 | R54 |
| 9.5 Abduction flexion cushion   | Each          | R207             | R138 | R28 |
| 10. Upper Extremity Orthosis    |               |                  |      |     |
| 10.1 Finger Splints             |               |                  |      |     |
| (a) Static                      | Each          | N/c              | N/c  | N/c |
| (b) Dynamic                     | Each          | N/c              | N/c  | N/c |
| 10.2 Hand Wrist                 |               |                  |      |     |
| (a) Elastic (issue)             | Each          | N/c              | N/c  | N/c |
| (b) Static                      | Each          | N/c              | N/c  | N/c |
| (c) Dynamic                     | Each          | N/c              | N/c  | N/c |
| 10.3 Elbow                      |               |                  |      |     |
| (a) Static                      | Each          | N/c              | N/c  | N/c |
| (b) Dynamic                     | Each          | N/c              | N/c  | N/c |
| 10.4 Shoulder                   |               |                  |      |     |
| (a) Static                      | Each          | N/c              | N/c  | N/c |
| (b) Dynamic                     | Each          | N/c              | N/c  | N/c |
| (c) Flail arm splint (imported) | Each          | N/c              | N/c  | N/c |
| (d) Arm immobiliser sling       | Each          | N/c              | N/c  | N/c |
| 10.5 Flexor Hinge Modular       |               |                  |      |     |
| (a) Imported                    | Each          | N/c              | N/c  | N/c |
| (b) /Flexor hinge modular       | Each          | N/c              | N/c  | N/c |

| Nature of Appliance            | Per treatment | Hospital Patient |        |      |
|--------------------------------|---------------|------------------|--------|------|
|                                |               | H3               | H2     | H1   |
| 10.6 Motorised Hand splints    | Each          | R2 925           | R1 950 | R390 |
| 10.7 Mobile Arm Splints        | Each          | R2 925           | R1 950 | R390 |
| 10.8 Triceps Pronator Splint   | Each          | R1 967           | R1 311 | R262 |
| 11. Miscellaneous              |               |                  |        |      |
| 11.1 Elastic stockings         |               |                  |        |      |
| (a) Below knee                 | Pair          | R32              | R21    | R15  |
| (b) Above knee                 | Pair          | R35              | R24    | R15  |
| (c) Panty House                | Pair          | R52              | R35    | R15  |
| (d) Anti embolism / below knee | Each          | R63              | R42    | R15  |
| Full length                    | Each          | R105             | R70    | R15  |
| Full length and belt           | Each          | R111             | R74    | R15  |
| 11.2 Trusses                   |               |                  |        |      |
| (a) Inguinal single            | Each          | N/c              | N/c    | N/c  |
| Inguinal double                | Each          | N/c              | N/c    | N/c  |
| (b) Scrotal single             | Each          | N/c              | N/c    | N/c  |
| Scrotal double                 | Each          | N/c              | N/c    | N/c  |
| (c) Suspension briefs          | Each          | N/c              | N/c    | N/c  |
| 11.3 Crutches                  |               |                  |        |      |
| (a) Wooden, axilla             | Pair          | R71              | R48    | R15  |
| (b) Wooden ring top            | Pair          | R201             | R101   | R20  |

| Nature of Appliance               | Per treatment | Hospital Patient |            |            |
|-----------------------------------|---------------|------------------|------------|------------|
|                                   |               | H3               | H2         | H1         |
| (c) Alluminium, ring top          | Pair          | R233             | R155       | R31        |
| (d) Elbow (issue) manufactured    | Pair          | R69              | R46        | R15        |
| (e) Gutter                        | Pair          | R114             | R76        | R15        |
| 11.4 Walking stick and aids       |               |                  |            |            |
| (a) Wooden                        | Each          | R36              | R24        | R15        |
| (b) Alluminium adjustable         | Each          | R34              | R23        | R15        |
| (c) Quadripod                     | Each          | R69              | R46        | R15        |
| (d) Pulpit                        | Each          | R109             | R73        | R15        |
| (e) Rolator<br>Children<br>Adults | Each<br>Each  | R143<br>R143     | R95<br>R95 | R19<br>R19 |
| 11.5 Helmets                      |               |                  |            |            |
| (a) Helmets issue                 | Each          | R222             | R148       | R30        |
| (b) Moulded helmets               | Each          | R248             | R165       | R33        |
| 11.6 Seats                        |               |                  |            |            |
| (a) Alluminium box                | Each          | R381             | R254       | R51        |
| (b) Moulded                       | Each          | R593             | R396       | R79        |
| (c) Standing frame                | Each          | R412             | R275       | R55        |
| (d) Wheelchair trunk support      | Each          | R444             | R296       | R59        |
| (e) Para-care cushion             | Each          | R146             | R97        | R19        |

| Nature of Appliance                | Per treatment | Hospital Patient                                     |   |   |
|------------------------------------|---------------|--|---|---|
|                                    |               | H3   | H2  | H1  |
| 12. Breast Prothesis (manufacture) | Each          | R122   | R82   | R16   |
| 13. External (purchase)            | Each          | R608   | R405  | R81   |
| 14. Items not Listed               | Each          | 75 % of quote or R70 whichever is the greater        | 50 % of quote or R50 whichever is the greater | 10 % of quote or R15 whichever is the greater |
| 15. Items especially ordered       |               |  |   |   |
| (a) Glasses                        | Each          | 75 % of cost of item or R70 whichever is the greater | 75 % of cost or R50 whichever is the greater  | 10 % of cost or R15 whichever is the greater  |
| (b) Hearing aids                   | Each          | 75 % of cost of item or R70 whichever is the greater | 50 % of cost or R50 whichever is the greater  | 10 % of cost or R15 whichever is the greater  |
| (c) Hearing aid moulds             | Each          | 75 % of cost of item or R70 whichever is the greater | 50 % of cost or R50 whichever is the greater  | 10 % of cost or R15 whichever is the greater  |

| Nature of Appliance              | Per treatment | Hospital Patient                                     |   |   |
|----------------------------------|---------------|--|---|---|
|                                  |               | H3   | H2  | H1  |
| (d) Wheelchairs (adult or child) | Each          | 75 % of cost of item or R70 whichever is the greater | 59 % of cost or R50 whichever is the greater  | 10 % of cost or R15 whichever is the greater          |
| 16. Repairs to appliance         | Each          | 75 % of quote or R45 whichever is greater            | 50 % of quote or R30 whichever is the greater | 10 % of quote of item or R15 whichever is the greater |

**ANNEXURE C (REGULATION 23)****Oral Health**

| Nature of Appliance                        | Per treatment | Hospital Patient |        |      |
|--|---------------|------------------|--------|------|
|  |               | H3               | H2     | H1   |
| 1. Oral Health<br>Prosthetics              |               |                  |        |      |
| (a) Full upper and<br>lower denture        | Each          | R445             | R296   | R148 |
| (b) Full upper and<br>lower denture        | Each          | R275             | R183   | R92  |
| (c) Partial denture                        | Each          | R190             | R126   | R63  |
| (d) Rebase denture                         |               | R143             | R95    | R48  |
| (e) Reline                                 |               | R65              | R44    | R22  |
| (f) Tissue<br>Conditioning                 |               | R55              | R37    | R20  |
| (g) Soft base                              |               | R221             | R147   | R74  |
| (h) Repair of denture                      |               | R62              | R46    | R22  |
| (i) Root canal<br>treatment<br>(anterior)  |               | R298             | R198   | R99  |
| (j) Root canal<br>treatment<br>(posterior) |               | R380             | R254   | R126 |
| (k) Orthodontic                            |               | R2 762           | R1 841 | R356 |
| (l) 4-Surface fillings                     |               | R111             | R74    | R37  |

## PROVINCIAL NOTICE

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[No. 168 of 2001]

### REGULATIONS ON AMBULANCE FEES IN THE FREE STATE

Under section 16(2) of the Health Act, 1977 (Act No. 63 of 1977), I, Anna Tsopo, Member of the Executive Council of the Province responsible for Health, hereby make the regulations as set out in the Schedule.

### SCHEDULE

#### Definitions

1. In these Regulations, unless the context indicates otherwise –

“**ambulance**” means a motor vehicle specially constructed or adapted for the conveyance of sick or injured persons to or from a place for medical treatment and which is registered as an ambulance;

“**H1 hospital patient**” means a patient classified in terms of regulation 2(3)(b)(i) of the Regulations as an H1 hospital patient;

“**H2 hospital patient**” means a patient classified in terms of regulation 2(3)(b)(ii) of the Regulations as an H2 hospital patient;

“**H3 hospital patient**” means a patient classified in terms of regulation 2(3)(b)(iii) of the Regulations as an H3 hospital patient;

“**H4 hospital patient**” means a patient classified in terms of regulation 2(3)(b)(iv) of the Regulations as an H4 hospital patient;

“**minister**” means the Minister of Health;

“**motor vehicle**” means any self-propelled vehicle;

“**normal working hours**” means the hours from 07:00 to 17:00 on a Monday to Friday, excluding a public holiday;

“**patient**” means a hospital patient or a private patient, as the case may be;

“**private patient**” means a patient classified in terms of regulation 2(4) of the Regulations as a private patient;

“public holiday” means a public holiday referred to in section 2 of the Public Holidays Act, 1994 (Act No. 36 of 1994);

“Regulations” means the Regulations on Hospital Fees in the Free State, 2001;

“uniform patient fee schedule” means the schedule published from time to time by the Minister in the Government Gazette in term of the Regulations Governing the Establishment and Maintenance of a Uniform Patient Fee schedule;

“vehicle” means a vehicle as defined in the Road Traffic Act, 1989 (Act No. 29 of 1989).

#### Fees for use of ambulance

2. (1) A patient conveyed per ambulance shall be liable for the payment of the following fees in respect of every 50 (fifty) kilometres or part thereof, traveled:
- |     |  |          |
|-----|--|----------|
| (a) | An H1 hospital patient   | R 30,00; |
| (b) | An H2 hospital patient   | R 55,00; |
| (c) | An H3 hospital patient   | R 75,00; |
| (d) | Fees in respect of a private patient and an H4 hospital patient shall be levied at the uniform patient fee schedule prescribed in Annexure A hereto: |          |
- Provided that ambulance transport between hospitals shall be free of charge for all H1, H2 and H3 hospital patients.
- (2) Where an ambulance is deployed on a standby basis on request, an amount of R200,00 per hour or part thereof, shall be payable.

#### Repeal

3. The Regulations on Ambulance Fees in the Free State, 2000, promulgated by Provincial Notice No. 51 of April 2000, are hereby repealed.

#### Short title and commencement

4. These Regulations shall be called the Regulations on Ambulance Fees in the Free State, 2001, and shall come into operation on 1 October 2001.

## PROVINSIALE KOERANT

(Verskyn elke Vrydag)

Alle korrespondensie, advertensies, ens. moet aan die Beampste Belas met die Provinsiale Koerant, Posbus 517, Bloemfontein, geadresseer word. Gratis eksemplare van die Provinsiale Koerant of uitknipsels van advertensies word NIE verskaf nie. Indien eksemplare van die Provinsiale Koerant verlang word, moet R4,70 vir elke eksemplaar gestuur word.

### Intekengeld (vooruitbetaalbaar)

Die intekengeld vir die Provinsiale Koerant (insluitend alle Buitengewone Provinsiale Koerante) is soos volg:

|                                       |          |
|---------------------------------------|----------|
| Halfjaarliks (posvry) .....           | R122,50  |
| Jaarliks (posvry) .....               | R 245,00 |
| Prys per los eksemplaar (posvry)..... | R 4,70   |

Seëls word nie aanvaar nie.

### Sluitingstyd vir die Aanneame van Kopie

Alle advertensies moet die Beampste Belas met die Provinsiale Koerant bereik nie later **nie as 12:00 sewe werksdae** voordat die Koerant uitgegee word. Advertensies wat na daardie tyd ontvang word, word oorgehou vir publikasie in die uitgawe van die volgende week, of as die adverteerder dit verlang, sal dit in die Koerant wat op die pers is as 'n "Laat Advertensie" geplaas word. In sulke gevalle moet die advertensie aan die Beampste oorhandig word **nie later nie as 10:30 op die Donderdag** van die week voordat die Koerant gepubliseer word en dubbeltarief sal vir dié advertensie gevra word.

'n "Laat Advertensie" sal nie sonder definitiewe instruksies van die Adverteerder as sodanige geplaas word nie.

### Advertensietariewe

Kennisgewings wat volgens Wet in die Provinsiale Koerant geplaas moet word: R2,00 per sentimeter of deel daarvan, enkelkolom.

Advertensiegelde is vooruitbetaalbaar aan die Beampste belas met die Provinsiale Koerant, Posbus 517, Bloemfontein 9300.

*Gedruk en uitgegee deur die Vrystaatse Provinsiale Administrasie*

## PROVINCIAL GAZETTE

(Published every Friday)

All correspondence, advertisements, etc. must be addressed to the Officer in charge of the Provincial Gazette, P.O. Box 517, Bloemfontein. Free Voucher copies of the Provincial Gazette or cuttings of advertisements are NOT supplied. If copies of the Provincial Gazette are required, R4,70 must be sent for each copy.

### Subscription Rates (payable in advance)

The subscription fee for the Provincial Gazette (including all Extraordinary Provincial Gazettes) are as follows:

|   |          |
|---|----------|
| Half-yearly (post free) .....           | R 122,50 |
| Yearly (post free) .....                | R 245,00 |
| Price per single copy (post free) ..... | R 4,70   |

Stamps are not accepted

### Closing time for acceptance of copy

All advertisements must reach the Officer in Charge of the Provincial Gazette **not later than 12:00, seven workings days** prior to the publication of the Gazette. Advertisements received after that time will be held over for publication in the issue of the following week, or if desired by the advertiser, will be inserted in the current issue as a "Late Advertisement". In such case the advertisement must be delivered to the Officer in Charge **not later than 10:30 on the Thursday** of the week preceding the publication of the Gazette and double rate will be charged for that advertisement.

A "Late Advertisement" will not be inserted as such without definite instructions from the advertiser.

### Advertisement Rates

Notices required by Law to be inserted in the Provincial Gazette: R2,00 per centimeter or portion thereof, single column.

Advertisement fees are payable in advance to the Officer in charge of the Provincial Gazette, P.O. Box 517, Bloemfontein, 9300.

*Printed and published by the Free State Provincial Administration*