

***THE PROVINCE OF
GAUTENG***

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GENERAL NOTICES

NOTICE 2789 OF 2009

GAUTENG PROVINCE

GENERAL EXPLANATORY NOTE:

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

 Words underlined with a solid line indicate insertions in existing regulations.

DEPARTMENT OF HEALTH

HOSPITALS ORDINANCE NO.14 OF 1958

AMENDMENT REGULATIONS AND TARIFFS RELATING TO AMBULANCES, 2009

In terms of the provisions of section 76 of the Hospitals Ordinance, 1958 (Ordinance No. 14 of 1958), the member of the Executive Council for Health hereby makes the following regulations.

Definition

1. In these regulations, unless the context otherwise indicates, "the Regulations" means the Regulations and tariffs relating to ambulances, promulgated by Administrator's Notice No. 646 of 29 August 1958, as amended by:

Administrator's Notice No. 907 of 15 December 1959;
Administrator's Notice No. 855 of 21 August 1968;
Administrator's Notice No. 790 of 14 May 1975;
Proclamation No. 113 of 30 May 1984;
Administrator's Notice No. 906 of 1 May 1985;
Administrator's Notice No. 515 of 12 July 1989;
Administrator's Notice No. 169 of 27 March 1991;
Administrator's Notice No. 69 of 6 May 1992;
Administrator's Notice No. 252 of 16 June 1993;
Notice No. 2584 of 20 September 2002;
Notice No. 2982 of 18 October 2002;
Notice No. 657 of 5 March 2003;
Notice No. 461 of 7 February 2005;
Notice No. 4859 of 6 December 2005; **[and]**
Notice No 3008 of 16 July 2007; and
Notice No 3022 of 22 August 2008.

Amendment of regulation 8 of the regulations.

2. Regulation 8 of the regulations is hereby amended —

(1) by the sub-sitution for sub-regulation (1) of the following sub-regulation:

“(1) Patient transport vehicle

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

Classification category	Facility fee	UPFS code
HG	Exempted	—
HW	R194,00	1410
H0	Free	—
H1	R10,00	1410
H2	R30,00	1410
PG	Exempted	—
P and PH	R241,00	1410”

(2) by the substitution for sub-regulation (2) of the following sub-regulation:

“(2) Ambulance transport

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

Classification category and service	Facility fee	UPFS code
HG	Exempted	—
HW : Basic life support	R530,00	1420
Intermediate life support	R716,00	1430
Advanced life support	R1 189,00	1440
H0	Free	—
H1 : Basic life support	R25,00	1420
Intermediate life support	R35,00	1430
Advanced life support	R60,00	1440
H2 : Basic life support	R80,00	1420
Intermediate life support	R105,00	1430
Advanced life support	R180,00	1440
PG	Exempted	—

(3) by the substitution for sub-regulation (4) of the following sub-regulation:

“(4) Emergency standby service

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

Service	Facility fee	Professional fee	UPFS code
P and PH: Basic life support	R659.00		1420
Intermediate life support	R890.00		1430
Advanced life support	R1479.00		1440
Emergency standby.....	R254.00		1450
Additional charge for service provided by —			
General medical practitioner		R278.00	1451
Specialist medical practitioner		R521.00	1452
Nursing practitioner		R187.00	1453
Basic life support practitioner		R99.00	1455
Intermediate life support practitioner.....		R121.00	1456
Advanced life support practitioner.....		R257.00	1457”

(4) by the substitution for sub-regulation (5) of the following sub-regulation:

“(5) Medical rescue service

Per incident.

Classification category and service	Facility fee	Professional fee	UPFS code
HG: all services.....	Exempted	Exempted	-
HW: Rescue services.....	R567,00		1460
Additional charge for services by-			
General medical practitioner		R850,00	1461
Specialist medical practitioner		R1 275,00	1462
Nursing practitioner		R567,00	1463
Allied health practitioner		R567,00	1464
H0: All services	Free	Free	-
H1: Rescue services.....	R30.00		1460
Additional charge for services by-			
General medical practitioner		R40,00	1461
Specialist medical practitioner		R65,00	1462
Nursing practitioner		R30,00	1463
Allied health practitioner		R30,00	1464
H2: Rescue services.....	R85.00		
Additional charge for services by-			
General medical practitioner		R125,00	1461
Specialist medical practitioner		R190,00	1462
Nursing practitioner		R85,00	1463
Allied health practitioner		R85,00	1464
PG: All services	Exempted	Exempted	
P and PH: Rescue services.....	R705.00		1460
Additional charge for services by-			
General medical practitioner		R1057.00	1461
Specialist medical practitioner		R1585.00	1462
Nursing practitioner		R705.00	1463
Basic life support practitioner		R99.00	1465
Intermediate life support practitioner.....		R121.00	1466
Advanced life support practitioner.....		R257.00	1467
Emergency transport air services fixed wing...	R6484.00		1470
Emergency transport air services helicopter....	R7121.00		1480
Emergency service standby-Facility Fee.....	R150.00		1490"

Short title and commencement

3. These regulations shall be called the amendment regulations and tariffs relating to ambulances, and shall be deemed to have come into operation on 1 July 2009.

NOTICE 2790 OF 2009

GAUTENG PROVINCE

GENERAL EXPLANATORY NOTE:

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

_____ Words underlined with a solid line indicate insertions in existing regulations.

DEPARTMENT OF HEALTH

HOSPITALS ORDINANCE NO.14 OF 1958

HOSPITAL MORTUARY AMENDMENT REGULATIONS, 2009

In terms of the provisions of sections 9 and 76 of the Hospitals Ordinance, 1958 (Ordinance No. 14 of 1958), the Member of the Executive Council for Health hereby makes the following regulations.

Definition

1. In these regulations, unless the context otherwise indicates, "the Regulations" means the Hospital Mortuary Regulations promulgated by Administrator's Notice No. 372 of 3 April 1968, as amended by:

Administrator's Notice No. 343 of 1 August 1990;
 Administrator's Notice No. 42 of 23 January 1991;
 Administrator's Notice No. 170 of 27 March 1991;
 Administrator's Notice No. 70 of 6 May 1992;
 Administrator's Notice No. 251 of 16 June 1993;
 Notice No. 2585 of 20 September 2002;
 Notice No. 2981 of 18 October 2002;
 Notice No. 658 of March 2003;
 Notice No.4859 of 6 December 2005; **[and]**
 Notice No 3009 of 16 July 2007; and
Notice No 3023 of 22 August 2008.

Amendment of regulation 3 of the Regulations

2. Regulation 3 of the Regulations is hereby amended —

(1) by the substitution for paragraph (a) and (b) of sub-regulation (1) of the following paragraphs:

- a) Level 1 and level 2 hospital R117.00 (UPFS code 0710); and
- b) Level 3 hospital R 133.00 (UPFS code 0710)."

(2) by the substitution for paragraph (a) of sub-regulation (3) of the following paragraph:

"(a) for each 24 hours on part thereof that the corpse is accommodated in the Mortuary of a —

- i. Level 1 and level 2 hospital: R117.00 (UPFS code 0710); and
- ii. Level 3 hospital: R133.00 (UPFS code 0710)."

Amendment of regulation 4 of the Regulations

3. Regulation 4 of the Regulations is hereby amended —

(1) by the substitution for paragraphs (a) and (b) of sub-regulation (1) of the following paragraphs:

- "a) Level 1 and level 2 hospital: R117.00 (UPFS code 0720); and
- b) Level 3 hospital: R133.00 (UPFS code 0720)."

Short title and commencement

4. These regulations shall be called the Hospital Mortuary Amendment Regulations, and shall be deemed to have come into operation on 1 July 2009.

NOTICE 2791 OF 2009

GAUTENG PROVINCE

GENERAL EXPLANATORY NOTE:

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

_____ **Words underlined with a solid line indicate insertions in existing regulations.**

DEPARTMENT OF HEALTH

HOSPITALS ORDINANCE NO.14 OF 1958

AMENDMENT REGULATIONS RELATING TO THE CLASSIFICATION OF AND FEES PAYABLE BY PATIENTS AT PROVINCIAL HOSPITALS, 2009

In terms of the provisions of sections 9, 29, 36, 38 and 76 of the Hospitals Ordinance, 1958 (Ordinance No. 14 of 1958), the Member of the Executive Council for Health hereby makes the following regulations.

Definition

1. In these regulations, unless the context otherwise indicates, "the Regulations" means the Regulations relating to the classification of and fees payable by patients at provincial hospitals, promulgated by Administrator's Notice No. 616 of 12 June 1968, as amended by:

Administrator's Notice No. 1008 of 25 September 1968;
 Administrator's Notice No. 853 of 6 August 1969;
 Administrator's Notice No. 929 of 26 June 1973;
 Administrator's Notice No. 341 of 17 March 1976;
 Administrator's Notice No. 725 of 18 June 1980;
 Administrator's Notice No. 767 of 1 July 1981;
 Administrator's Notice No. 342 of 17 March 1982;
 Administrator's Notice No. 490 of 21 March 1984;
 Administrator's Notice No. 936 of 13 June 1984;
 Administrator's Notice No. 1009 of 27 June 1984;
 Administrator's Notice No. 1147 of 11 July 1984;
 Administrator's Notice No. 454 of 27 February 1985;
 Administrator's Notice No. 653 of 27 March 1985;
 Administrator's Notice No. 415 of 26 February 1986;
 Administrator's Notice No. 996 of 1 July 1987;
 Administrator's Notice No. 1979 of 30 December 1987;
 Administrator's Notice No. 646 of 1 June 1988;
 Administrator's Notice No. 502 of 28 June 1989;
 Administrator's Notice No. 44 of 31 January 1990;
 Administrator's Notice No. 344 of 1 August 1990;
 Administrator's Notice No. 171 of 27 March 1991;
 Administrator's Notice No. 71 of 6 May 1992;
 Administrator's Notice No. 250 of 16 June 1993;
 Administrator's Notice No. 551 of 22 December 1993;
 Notice No. 233 of 10 September 1996;
 Notice No. 2586 of 20 September 2002;
 Notice No. 2980 of 18 October 2002;
 Notice No. 659 of 5 March 2003.;
 Notice No. 463 of 7 February 2005; and
 Notice No 3010 of 16 July 2007; and
Notice No 3024 of 22 August 2008.

Amendment of Schedule B to the Regulations

2. Schedule B to the Regulations is hereby amended by the substitution thereof of the following schedule:

"SCHEDULE B**TARIFF OF FEES**

CLASSIFI CATION CATEGO RY	ATTENDING HEALTHCA RE PROFESSIO NAL	IN-PATIENTS				OUTPATIENTS								OTHER SERVICES
		BED TYPE	Level 1 hospital	Level 2 hospital	Level 3 hospital	ROUTINE CONSULTATIONS				EMERGENCY CONSULTATIONS				
						Level 1 hospital	Level 2 hospital	Level 3 hospital	State health care facilities	Level 1 hospital	Level 2 hospital	Level 3 hospital	State health care facilities	
P & PH	As per Annexure 3	As per Annexure 3				As per Annexure 3				As per Annexure 3				As per Annexure 3

**5. Annexure 3 to Schedule B is hereby inserted after Annexure 2 to Schedule B
“ANNEXURE 3 TO SCHEDULE B**

UPFS 2009 FEE SCHEDULE FOR FULL PAYING PATIENTS (FOLATENG WARDS)

CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE R	FACILITY		
				TOTAL FEE IN BOLD		
				LEVEL 1 R	LEVEL 2 R	LEVEL 3 R
01	Anesthetics					
0111	Anaesthetics Cat A – General medical practitioner	Procedure	135.00			
0112	Anaesthetics Cat A – Specialist medical practitioner	Procedure	203.00			
0121	Anaesthetics Cat B – General medical practitioner	Procedure	230.00			
0122	Anaesthetics Cat B – Specialist medical practitioner	Procedure	346.00			
0131	Anaesthetics Cat C – General medical practitioner	Procedure	808.00			
0132	Anaesthetics Cat C – Specialist medical practitioner	Procedure	1213.00			
02	Confinement					
0210	Natural Birth- Facility Fee	Incident		3194.00	3194.00	3194.00
0211	Natural Birth – General Medical Practitioner	Incident	1353.00			
0212	Natural Birth – Specialist Medical Practitioner	Incident	1747.00			
0213	Natural Birth – Nursing Practitioner	Incident	1636.00			
0220	Caesarean Section – Facility Fee	Incident		5028.00	5028.00	5028.00
0221	Caesarean Section – General Medical Practitioner	Incident	1353.00			
0222	Caesarean Section – Specialist Medical Practitioner	Incident	1747.00			
03	Dialysis					
0310	Haemo – Facility Fee	Day		986.00	986.00	1128.00
0311	Haemo-dialysis – General medical practitioner	Day	170.00			
0312	Haemo-dialysis – Specialist medical practitioner	Day	213.00			
0313	Haemo-dialysis Nursing Practitioner	Day	136.00			
0320	Peritoneal Dialysis – Facility Fee	Session		151.00	151.00	173.00
0321	Peritoneal Dialysis – General medical practitioner	Session	27.00			
0322	Peritoneal dialysis-Specialist Medical practitioner	Session	33.00			
0323	Peritoneal dialysis-Nursing Practitioner	Session	19.00			
0330	Plasmapheresis-Facility Fee	Session		986.00	986.00	1128.00
0331	Plasmapheresis- General medical practitioner	Session	170.00			

CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE R	FACILITY		
				TOTAL FEE IN BOLD		
				LEVEL 1	LEVEL 2	LEVEL 3
				R	R	R
0332	Plasmapheresis-Specialist Medical Practitioner	Session	213.00			
04	Medical Reports					
0410	Medical Report – Facility Fee	Report		95.00	95.00	116.00
0411	Medical Report – General medical practitioner	Report	162.00			
0412	Medical Report – Specialist medical practitioner	Report	249.00			
0421	Copies of Medical Report, Records, X ray, Completion of certificates/Form-Specialist medical practitioner	Copies	81.00			
0422	Copies of Medical Report, Records, X ray, Completion of certificates/Form-Specialist medical practitioner	Copies	124.00			
0425	Copies of X ray, ultrasounds ect.	Copies	81.00			
05	Imaging					
0510	Radiology, Cat A – Facility Fee	Procedure		50.00	50.00	56.00
0511	Radiology, Cat A – General medical practitioner	Procedure	44.00			
0512	Radiology, Cat A – Specialist medical practitioner	Procedure	84.00			
0514	Radiology, Cat A – Allied health practitioner	Procedure	43.00			
0520	Radiology, Cat B – Facility Fee	Procedure		136.00	136.00	157.00
0521	Radiology, Cat B – General medical practitioner	Procedure	120.00			
0522	Radiology, Cat B – Specialist medical practitioner	Procedure	234.00			
0524	Radiology, Cat B – Allied health practitioner	Procedure	117.00			
0530	Radiology, Cat C – Facility Fee	Procedure		637.00	637.00	727.00
0531	Radiology, Cat C – General medical practitioner	Procedure	371.00			
0532	Radiology, Cat C – Specialist medical practitioner	Procedure	1141.00			
0540	Radiology, Cat D – Facility Fee	Procedure		1623.00	1623.00	1854.00
0541	Radiology, Cat D – General medical practitioner	Procedure	1365.00			
0542	Radiology, Cat D – Specialist Practitioner	Procedure	2849.00			
06	In-patients					
0610	In-patient General ward – Facility Fee	Day		1105.00	1105.00	1105.00
0611	In-patient General Ward – General medical practitioner	Day	95.00			
0612	In-patient General Ward – Specialist medical practitioner	Day	166.00			

CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE R	FACILITY		
				TOTAL FEE IN BOLD		
				LEVEL 1 R	LEVEL 2 R	LEVEL 3 R
0620	In-patient High care – Facility Fee	12 hours		1274.00	1274.00	1274.00
0621	In-patient High Care – General medical practitioner	12 hours	50.00			
0622	In-patient High Care – Specialist medical practitioner	12 hours	94.00			
0630	In-patient Intensive care – Facility Fee	12 hours		2793.00	2793.00	2793.00
0631	In-patient Intensive Care – General medical practitioner	12 hours	55.00			
0632	In-patient Intensive Care– Specialist medical practitioner	12 hours	105.00			
0640	In-patient Chronic care – Facility Fee	Day		269.00	269.00	269.00
0641	In-patient Chronic care – General medical practitioner	Day	31.00			
0642	In-patient Chronic care – Specialist medical practitioner	Day	72.00			
0643	I In-patient Chronic care – Nursing practitioner	Day	19.00			
0650	Day patient – Facility Fee	Day		706.00	706.00	706.00
0651	Day patient – General medical practitioner	Day	95.00			
0652	Day patient – Specialist medical practitioner	Day	166.00			
0653	Day patient – Nursing practitioner	Day	55.00			
0660	In-patient Boarder/Patient companion – Facility Fee	Day		220.00	220.00	220.00
0663	In-patient Boarder/Patient Companion – Nursing practitioner	Day	19.00			
07	Mortuary					
0710	Mortuary – Facility Fee			See administrator's Notice no.372 of 3 April 1968		
0720	Cremation Certificate – Facility Fee					
08	Pharmaceutical					
0810	Medication Fee – Facility Fee	Prescription		23.00	23.00	26.00
0815	Item Fee	Item	Varies			
0816	Pharmaceutical-TTO	Item	Varies			
0817	Pharmaceutical- Chronic	Item	Varies			
0818	Pharmaceutical- Oncology	Item	Varies			
0819	Pharmaceutical- Immune Suppressant Drugs	Item	Varies			
0820	Pharmaceutical Flat Fee-OPD	Item	Varies			
0825	Pharmaceutical Flat Fee-IP	Item	Varies			
09	Oral Health					
0910	Oral Care Cat A – Facility Fee	Procedure		20.00	20.00	22.00
0911	Oral Care Cat A – General practitioner	Procedure	30.00			

CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE R	FACILITY		
				TOTAL FEE IN BOLD		
				LEVEL 1 R	LEVEL 2 R	LEVEL 3 R
0912	Oral Care Cat A – Specialist practitioner	Procedure	24.00			
0914	Oral Care Cat A – Allied health practitioner	Procedure	23.00			
0920	Oral Care Cat B – Facility Fee	Procedure		58.00	58.00	67.00
0921	Oral Care Cat B – General practitioner	Procedure	58.00			
0922	Oral Health Cat B – Specialist practitioner	Procedure	93.00			
0924	Oral Care Cat B – Allied health practitioner	Procedure	48.00			
0930	Oral Care Cat C – Facility Fee	Procedure		355.00	355.00	407.00
0931	Oral Care Cat C – General practitioner	Procedure	358.00			
0932	Oral Care Cat C – Specialist practitioner	Procedure	614.00			
0940	Oral Care Cat D – Facility Fee	Procedure		1399.00	1399.00	1601.00
0941	Oral Care Cat D – General practitioner	Procedure	1097.00			
0942	Oral Care Cat D – Specialist practitioner	Procedure	2252.00			
0950	Oral Care Cat E – Facility Fee	Procedure		4710.00	4710.00	5383.00
0951	Oral Care Cat E – General practitioner	Procedure	3690.00			
0952	Oral Care Cat E – Specialist practitioner	Procedure	7572.00			
10	Consultations					
1010	Outpatient Consultation – Facility Fee	Visit		62.00	62.00	76.00
1011	Outpatient Consultation – General medical practitioner	Visit	63.00			
1012	Outpatient Consultation – Specialist medical practitioner	Visit	146.00			
1013	Outpatient Consultation – Nursing practitioner	Visit	37.00			
1014	Outpatient Consultation – Allied health practitioner	Visit	39.00			
1020	Emergency Consultation – Facility Fee	Visit		127.00	127.00	150.00
1021	Emergency Consultation – General medical practitioner	Visit	95.00			
1022	Emergency Consultation – Specialist medical practitioner	Visit	218.00			
1023	Emergency Consultation – Nursing practitioner	Visit	55.00			
1024	Emergency Consultation – Allied health practitioner	Visit	56.00			
11	Minor Theatre Procedures					

CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE R	FACILITY		
				TOTAL FEE IN BOLD		
				LEVEL 1 R	LEVEL 2 R	LEVEL 3 R
1110	Minor Procedure Cat A – Facility Fee	Procedure		296.00	296.00	354.00
1111	Minor Procedure Cat A – General medical practitioner	Procedure	93.00			
1112	Minor Procedure Cat A – Specialist medical practitioner	Procedure	179.00			
1120	Minor Procedure Cat B – Facility Fee	Procedure		296.00	296.00	354.00
1121	Minor Procedure Cat B – General medical practitioner	Procedure	137.00			
1122	Minor Procedure Cat B – Specialist medical practitioner	Procedure	312.00			
1130	Minor Procedure Cat C – Facility Fee	Procedure		296.00	296.00	354.00
1131	Minor Procedure Cat C – General medical practitioner	Procedure	217.00			
1132	Minor Procedure Cat C – Specialist medical practitioner	Procedure	487.00			
1140	Minor Procedure Cat D – Facility Fee	Procedure		296.00	296.00	354.00
1141	Minor Procedure Cat D – General medical practitioner	Procedure	573.00			
1142	Minor Procedure Cat D – Specialist medical practitioner	Procedure	1291.00			
12	Major Theatre Procedures					
1210	Theatre Procedure Cat A – Facility Fee	Procedure		956.00	1401.00	1617.00
1211	Theatre Procedure Cat A – General medical practitioner	Procedure	93.00			
1212	Theatre Procedure Cat A – Specialist medical practitioner	Procedure	179.00			
1220	Theatre Procedure Cat B – Facility Fee	Procedure		1448.00	2124.00	2446.00
1221	Theatre Procedure Cat B – General medical practitioner	Procedure	137.00			
1222	Theatre Procedure Cat B – Specialist medical practitioner	Procedure	312.00			
1230	Theatre Procedure Cat C – Facility Fee	Procedure		2486.00	3650.00	4212.00
1231	Theatre Procedure Cat C – General medical practitioner	Procedure	217.00			
1232	Theatre Procedure Cat C – Specialist medical practitioner	Procedure	487.00			
1240	Theatre Procedure Cat D – Facility Fee	Procedure		6378.00	9356.00	10782.00
1241	Theatre Procedure Cat D – General medical practitioner	Procedure	573.00			
1242	Theatre Procedure Cat D – Specialist medical practitioner	Procedure	1291.00			
13	Treatments					

CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE R	FACILITY		
				TOTAL FEE IN BOLD		
				LEVEL 1 R	LEVEL 2 R	LEVEL 3 R
1310	Supplementary Health Treatment – Facility Fee	Contact		41.00	41.00	47.00
1313	Supplementary health treatment- Nursing Practitioner	Contact	32.00			
1314	Supplementary Health Treatment – Allied health practitioner	Contact	32.00			
1320	Supplementary Health Group Treatment – Facility Fee	Contact		31.00	31.00	34.00
1324	Supplementary Health Group Treatment – Allied health practitioner	Contact	23.00			
14	Emergency Medical Services			See administrator's Notice no 646 of 29 August 1958		
1410	Patient transport service – Facility Fee	100km				
1420	Basic life support – Facility Fee	50km				
1430	Intermediate life support – Facility Fee	50km				
1440	Advanced life support – Facility Fee	50km				
1450	Emergency service standby – Facility Fee	Once off				
1451	Emergency service standby – General medical practitioner	Hour				
1452	Emergency service standby – Specialist medical practitioner	Hour				
1453	Emergency service standby – Nursing practitioner	Hour				
1455	Emergency service standby – Basic life support practitioner	Hour				
1456	Emergency services standby- Intermediate life support practitioner	Hour				
1457	Emergency services standby- Advanced life support practitioner	Hour				
1460	Rescue – Facility Fee	Hour				
1461	Rescue – General medical practitioner	Hour				
1462	Rescue – Specialist medical practitioner	Hour				
1463	Rescue – Nursing practitioner	Hour				
1465	Rescue- Basic life support practitioner	Hour				
1466	Rescue – Intermediate life support practitioner	Hour				
1467	Rescue- Advanced life support practitioner	Hour				
1470	Emergency transport air services fixed wing	Flying hour				
1480	Emergency transport air services helicopter	Flying hour				
1490	Emergency services standby- Facility Fee	Additional 50km				

CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE R	FACILITY		
				TOTAL FEE IN BOLD		
				LEVEL 1 R	LEVEL 2 R	LEVEL 3 R
15	Assistive Devices & Prosthesis					
1510	Assistive Devices-Item Fee	Item	Varies			
1520	Prosthetic Devices-Item Fee	Item	Varies			
1530	Dental Items -Item Fee	Item	Varies			
16	Cosmetic Surgery					
1610	Cosmetic Surgery Cat A – Facility Fee	Procedure		2013.00	2013.00	2299.00
1611	Cosmetic Surgery Cat A – General practitioner	Procedure	1055.00			
1612	Cosmetic Surgery Cat A – Specialist practitioner	Procedure	1581.00			
1620	Cosmetic Surgery Cat B – Facility Fee	Procedure		4527.00	4527.00	5174.00
1621	Cosmetic Surgery Cat B – General practitioner	Procedure	1250.00			
1622	Cosmetic Surgery Cat B – Specialist practitioner	Procedure	1875.00			
1630	Cosmetic Surgery – Cat C – Facility Fee	Procedure		7311.00	7311.00	8356.00
1631	Cosmetic Surgery Cat C – General practitioner	Procedure	2113.00			
1632	Cosmetic Surgery Cat C – Specialist practitioner	Procedure	3170.00			
1640	Cosmetic Surgery Cat D – Facility Fee	Procedure		12349.00	12349.00	14112.00
1641	Cosmetic Surgery Cat D – General practitioner	Procedure	2371.00			
1642	Cosmetic Surgery Cat D – Specialist practitioner	Procedure	3489.00			
17	Laboratory Services					
1700	Drawing of Blood	Contact		24.00	24.00	24.00
1710	Laboratory Test	Varies				
18	Radiation Oncology					
1800	Radiation Oncology(NHRPL less VAT)	Item	Varies			
19	Nuclear Medicines					
1900	Itemisation of Isotopes	Item	Varies			
1910	Nuclear Medicines Cat A-Facility Fee	Procedure		481.00	481.00	481.00
1912	Nuclear medicine Cat A- Specialist Practitioner	Procedure	218.00			
1920	Nuclear Medicines Cat B-Facility Fee	Procedure		1059.00	1059.00	1059.00
1922	Nuclear medicine Cat B- Specialist Practitioner	Procedure	478.00			
1930	Nuclear Medicines Cat C-Facility Fee	Procedure		1717.00	1717.00	1717.00
1932	Nuclear medicine Cat C- Specialist Practitioner	Procedure	781.00			

CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE R	FACILITY		
				TOTAL FEE IN BOLD		
				LEVEL 1 R	LEVEL 2 R	LEVEL 3 R
1940	Nuclear Medicines Cat D-Facility Fee	Procedure		2393.00	2393.00	2393.00
1942	Nuclear medicine Cat D- Specialist Practitioner	Procedure	1087.00			
1950	Positron Emission Tomography(PET) Cat E-facility Fee	Procedure		4386.00	4386.00	4386.00
1952	Positron Emission Tomography(PET) Cat E-Specialist Practitioner	Procedure	1993.00			
20	Ambulatory Procedures					
2010	Ambulatory Procedures Cat A-Facility Fee	Procedure		95.00	95.00	116.00
2011	Ambulatory Procedure Cat A-General Medical Practitioner	Procedure	31.00			
2012	Ambulatory Procedure Cat A-Specialist Medical Practitioner	Procedure	62.00			
2013	Ambulatory Procedure Cat A-Nursing Practitioner	Procedure	19.00			
2014	Ambulatory Procedure Cat A-Allied Health Worker	Procedure	19.00			
2020	Ambulatory Procedures Cat B-Facility Fee	Procedure		95.00	95.00	116.00
2021	Ambulatory Procedure Cat B-General Medical Practitioner	Procedure	44.00			
2022	Ambulatory Procedure Cat B-Specialist Medical Practitioner	Procedure	69.00			
2023	Ambulatory Procedure Cat B-Nursing Practitioner	Procedure	24.00			
2024	Ambulatory Procedure Cat B-Allied Health Worker	Procedure	24.00			
21	Blood and Blood Products					
2100	Blood and Blood Products	Varies				
22	Hyperbaric Oxygen Therapy					
2210	Hyperbaric Oxygen Therapy-Facility Fee	Session		992.00	992.00	992.00
2211	Hyperbaric Oxygen Therapy-General Medical Practitioner	Session	381.00			
2212	Hyperbaric Oxygen Therapy-Specialist Medical practitioner	Session	381.00			
2220	Emergency Hyperbaric Oxygen Therapy-Facility Fee	Session		1001.00	1001.00	1001.00
2221	Emergency Hyperbaric Oxygen Therapy-General Medical Practitioner	Session	555.00			
2222	Emergency Hyperbaric Oxygen Therapy-Specialist Medical Practitioner	Session	555.00			
23	Consumables(Not included in Facility Fee)					
2300	Consumables(Not included in Facility Fee)	Item	Varies			

CODE	DESCRIPTION	BASIS	PROFESSIONAL FEE R	FACILITY		
				TOTAL FEE IN BOLD		
				LEVEL 1	LEVEL 2	LEVEL 3
				R	R	R
24	Autopsies					
2410	Autopsy-Facility Fee	Per Case		62.00	62.00	76.00
2411	Autopsy-General Practitioner	Per Case	63.00			
2412	Autopsy-Specialist Practitioner	Per Case	146.00			

Application of regulations

6. The provisions of these regulations shall not apply to a person-

- a) who is an in-patient on the day immediately preceding 1 July 2009; or
- b) whose admission and classification as an in-patient had been approved before 1 July 2009, and for the period ending on the date upon which he or she is discharged from the hospital concerned.

Short title and commencement

6. These regulations shall be called the Amendment Regulations relating to the classification of and fees payable by patients at provincial hospitals, and shall be deemed to have come into operation on 1 July 2009".