



## **The Association for Dietetics in South Africa Telehealth Guidance Document**

*On Thursday, the 5th of March 2020, the National Institute for Communicable Diseases confirmed the first positive case of COVID19 in South Africa. Since then, a National State of Disaster was announced by President Cyril Ramaphosa with a 21-day lockdown that started on the 26th of March 2020.*

*The National State of Disaster, as well as the 21-day lockdown, have far-reaching implications for health professionals, including Dietitians. The Health Professions Council of South Africa (HPCSA) issued Guidelines on Telehealth in South Africa on the 26th of March 2020 that provided guidance for health professionals in order to conduct telehealth.*

*The purpose of this Guidance Document is to provide a practical framework for Dietitians to effectively and ethically deliver telehealth services for the interim time-period in which the National State of Disaster continues.*

**Version 2.0 20 April 2020**

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## **1. Definitions**

### **Telemedicine**

Telemedicine refers to the practice of medicine using electronic communications, information technology or other electronic means between a healthcare practitioner in one location and a healthcare practitioner in another location for the purpose of facilitating, improving and enhancing clinical, educational and scientific healthcare and research.

### **Telehealth**

A broader term used that includes Telemedicine, Telepsychology, Telepsychiatry and Telerehabilitation and involves remote consultation with patients using telephonic or virtual platforms of consultation.

## **2. Practical steps to make your dietetics practice virtual**

### **Communicate with your patients and referring healthcare professionals**

The first step to setting up a virtual practice is to communicate with your patients that you will be available and explain the variety of telehealth offerings that you will make available. Explain what a virtual consultation is and how the session would work. Either send out an email to your patients or use social media platforms to communicate with your existing clients. In addition to communicating with your patients you should let other referring health care professionals know that you are still available to treat patients.

### **What platform to use for your virtual practice**

There are a variety of free options that you can make use of to run a virtual dietetics practice. Examples include but are not limited to utilizing [Zoom](#), [Skype](#), Face time, WhatsApp video or voice calls or a telephone. There are various pros and cons to the different options. Telephone calls may cost more than a WhatsApp voice call, while Zoom allows you to share your screen with the patient and provide educational materials with patients. You might use a variety of the latter depending on what the patient is comfortable with and what you have access to in terms of internet connectivity etc. It is not necessary to pay fees to use a “telemedicine” platform to set up your virtual practice. As a dietitian your skill is your knowledge, and you are able to share that in a virtual format and don’t need to pay an additional service fee to set it up. Use the free resources to start with, and you can always upgrade to a paid Zoom subscription later on, for example, if you feel you need to.

### **Get your consent form and practice policy ready to send to patients prior to their session**

Your patient has booked a virtual consultation with you, what is the next step? Firstly, send a consent form to your patient, this is normally included in your practice policy. You should state how long the session will be, what the cost will be for the session, explain that medical aid might not cover the full cost of the session and that the patient is liable for the consultation fee. Make sure your consent form can be signed electronically as many people do not have access to a printer and scanner in their home. An example of the Consent Form can be viewed in Appendix A.

### **Appointment confirmation and technical support**

Confirm the time of the consultation and send the necessary technical support to the patient. If you need to send a Zoom invite with a meeting ID and password, do so 24 hours before the consultation. Some patients may need a voice note explaining how to use WhatsApp video calls. Offering the technical support the day before the consultation will put your patient at ease and also reduce the number of last-minute cancellations due to technical difficulties. Ask your patient to send you a copy or photo of their food diary and a list of questions they have before the consultation.

### **Your knowledge is your power, add value and make the consult count**

As dietitians we are perfectly positioned to implement telehealth. We share knowledge with our patients and guide them to change their dietary habits. Consulting virtually requires the dietitian to have resources on hand to use during the consultation that can be shared with the patient immediately. Make sure you have resources on hand to email during a WhatsApp video call or have an educational power point slide set (e.g. sending a picture of iron-rich foods to a patient with anaemia) ready to view on the Zoom share screen option. Additional educational handouts, like diet sheets, a worksheet, food record sheet or new recipe, are all ideas of resources that can be shared with the patient. Be sure to implement record keeping procedures like you would with any face to face consultation in the clinical file. Recap what the key focus areas are for the patient to work on in the next few weeks before their next session at the end of the virtual consultation. Sending an email or WhatsApp message with the key points from the consultation will add more value for your patient.

### **Confirm billing procedures and book the follow up session**

At the end of the consultation discuss payment options with your patient. For example, an account will be sent to X email address, the patient will do an electronic fund transfer (EFT) and send a proof of payment to X email address. Book the next follow up session at the end of the consultation to reduce administration tasks.

### **Ask for feedback**

Running a 100% virtual practice may be new to many dietitians, so once you have been implementing your virtual practice for a few days consider sending out an email requesting any feedback or suggestions from your patients, to help guide you and improve your offerings and meet your patients requirements.

## **3. Ethical considerations**

The core ethical values as outlined in the HPCSA guidelines for healthcare practitioners are also applicable in telehealth practice.

- Practitioners are to apply clinical reasoning to make certain that services provided through telehealth meet the same professional, legal, quality and ethical standards as services provided in person.
- Telehealth may not be the most appropriate model of care for every patient. The practitioner is to use clinical judgment to make decisions about the most appropriate method of consultation on a case-by-case basis.

- The practitioner is obliged to **promote competent care**. This includes not only providing quality clinical services, but also being proficient in using the technology required to interact with patients via telehealth.
- The practitioner must remain **transparent** about the service provided via telehealth, the potential risk to data security, and must **obtain informed consent**.
- The practitioner must **respect patients' privacy and confidentiality**. Practitioners must ensure that the telehealth platform used has appropriate protocols to protect patient information against improper disclosure, and this should be communicated to the patient.
- Steps should be taken to **ensure continuity of care**. This includes detailed record-keeping of the services provided, communication with other members of the healthcare team as required, and arrangements for appropriate follow up.

#### 4. Coding and Billing Guidelines

Currently there are no billing codes for telehealth consultations and therefore, dietitians are advised to use existing time-based billing codes. During this time, medical schemes can still forensically investigate billing practices as well as the clinical appropriateness of consultations and dietitians are requested to ensure they are using sound clinical reasoning as well as ethical principles when billing patients. Discovery, Medscheme and Bestmed have indicated reimbursement for teleconsultations during this time. Depending on individual practice policies and tariffs charged, patients will remain liable for services rendered or the part of services not covered by medical schemes. Members will be updated with information as it becomes available.

The following interim recommendations for telehealth billing are made:

- A signed telehealth informed consent for each patient consulted (Appendix A);
- Ensure that the consultation is diarised, also indicating the duration of the consultation as evidence;
- Ensure detailed clinical record keeping of each component of the nutrition care process i.e. assessment, planning, nutrition education, monitoring etc. during consultations;
- Clinical records should reflect the time spent on the consultation;
- As per usual billing, planning, i.e. "non-face time", may be billed for. For Discovery Health, indicate non-face time billed for on the verification form that needs to be completed for each consultation (Appendix B) in the space provided for "a brief overview of the session".
- It is suggested to indicate on billing, that the consultation was for a telehealth session. However, logistical and software related issues will arise depending on billing software that is used. Dietitians are requested to consult their practice management application vendors with assistance with adding these requirements to your claims. For Discovery Health claims, please refer to Appendix B for place of service indicator. For dietitians not making use of software companies, please indicate telehealth session manually on the invoice as follows:

1) Discovery Health:

Place of Service Code	Place of Service Name	Place of service description
02	Telehealth	Place where service was provided and received

2) Other Medical Aids

Place of Service Name	Place of service description
Telehealth	Place where service was provided

- For Discovery Health, a telehealth and virtual consultation form needs to be submitted for each consultation (Appendix B).
- Dietitians rendering services to COVID-19 positive patients that require in-hospital nutrition support may bill for telehealth consultations if they are requested by hospitals to do virtual consultations to avoid patient contact. Please ensure to complete the virtual consultation form (Appendix B) for each consultation for Discovery patients.

Dietitians are referred to Appendix B and C for specific documentation received from Discovery Health and Medscheme.

Please see refer to the current NHRPL for dietitians listed below:

**INDIVIDUAL ASSESSMENT, COUNSELLING AND/OR TREATMENT**

CODE	TARIFF DESCRIPTION	RVU
107	Appointment not kept (schemes will not necessarily grant benefits in respect of this item, it will fall into the "By arrangement with the scheme" or "Patient own account" category).	
84200	Nutritional assessment, medical nutrition therapy planning, counselling and/or treatment duration 1-10 min	0.50
84201	Nutritional assessment, medical nutrition therapy planning, counselling and/or treatment duration 11-20 min	1.50
84202	Nutritional assessment, medical nutrition therapy planning, counselling and/or treatment duration 21-30min	2.50
84203	Nutritional assessment, medical nutrition therapy planning, counselling and/or treatment duration 31-40 min	3.50
84204	Nutritional assessment, medical nutrition therapy planning, counselling and/or treatment duration 41-50 min	4.50
84205	Nutritional assessment, medical nutrition therapy planning, counselling and/or treatment duration 51-60 min	5.50
84206	Nutritional assessment, medical nutrition therapy planning, counselling and/or treatment duration 61-70 min	6.50

84207	Nutritional assessment, medical nutrition therapy planning, counselling and/or treatment duration 71-80 min	7.50
84208	Nutritional assessment, medical nutrition therapy planning, counselling and/or treatment duration 81-90 min	8.50
84209	Nutritional assessment, medical nutrition therapy planning, counselling and/or treatment duration 91-100 min	9.50
84210	Nutritional assessment, medical nutrition therapy planning, counselling and/or treatment duration 101-110 min	10.50
84211	Nutritional assessment, medical nutrition therapy planning, counselling and/or treatment duration 111-120 min	11.50

## 5. References

- Chaet *et al.* Ethical practice in Telehealth and Telemedicine. J Gen Intern Med, 2017;32(10):1136–40
- British Dietetics Association, Digital Tools: Rapid Implementation <https://www.bda.uk.com/practice-and-education/nutrition-and-dietetic-practice/digital-practice/digital-tools.html>
- Guidance on the Application of Telemedicine Guidelines During the COVID-19 Pandemic. HPCSA; 26 March 2020
- COVID-19 Outbreak in South Africa: Guidance to Health Practitioners. HPCSA; 26 March 2020
- General Ethical Guidelines for Good Practice in Telemedicine: Booklet 10. HPCSA; 2014

## Appendix A: Consent Form

### Consent for Telehealth Nutritional Counselling

I, (Patient Full Names), (Patient ID) hereby enter into the following agreement with (Registered Dietitian full name as HPCSA registration) hereafter referred to as (Registered Dietitian Initials and Surname).

#### 1. Consent for Nutritional Counselling

- 1.1. I hereby request and consent to (Registered Dietitian Initials and Surname) providing Nutrition Counselling to myself or the client for which I am legally responsible.
- 1.2. I understand that the consult will provide information and guidance about my diet, nutrition, and lifestyle.
- 1.3. I understand that (Registered Dietitian Initials and Surname) is a Registered Dietitian and does not dispense medical advice but will treat a diagnosed medical condition through medical nutrition therapy.
- 1.4. Methods of nutritional evaluation or testing made available to me are not intended to diagnose disease. Rather, these assessments are intended as a guide to enhance my nutritional health.
- 1.5. (Registered Dietitian Initials and Surname) will provide nutritional support and nutrition education that relates to existing medical conditions, prevention of chronic diseases, improved athletic performance and or for general healthy eating.

#### 2. Confidentiality

- 2.1. Medical records and personal information and history divulged in the session to (Registered Dietitian Initials and Surname) will be kept confidential, unless I consent to sharing my medical information.

#### 3. Consent for Telehealth / Web-Based Counselling

- 3.1. Further, when I would like nutritional advice provided through telehealth or web-supported platforms (including but not limited to Zoom, Microsoft teams, Skype or Telephonic) I understand that these platforms will be used to provide healthcare services to me, and that the usual consent processes are followed.
- 3.2. I understand that the consultation will be done via video/internet conferencing technology and I agree to this.
- 3.3. Practicalities:
  - 3.3.1. The telehealth or web-supported consultation is done through a two-way video whereby (Registered Dietitian Initials and Surname) can see my image on the screen and hear my voice.
  - 3.3.2. I may ask questions and seek explanation from (Registered Dietitian Initials and Surname) regarding the methods and processes of telehealth and I may at any time ask that the telehealth consultation be stopped.
    - 3.3.2.1. I also acknowledge that if I request for the session to be stopped that it might not be in my best interest and I therefore release (Registered Dietitian Initials and Surname) from being legally liable for this.
  - 3.3.3. Any paperwork exchanged will be provided through electronic means.



3.3.4. I understand that telehealth may have limitations, such as data- and internet failures (e.g. dropped calls or bad reception).

3.3.5. The data being used during the online sessions will be my responsibility and at my cost.

3.4. I understand that all available information and all vital information regarding my medical conditions, diet, nutrition, and lifestyle need to be disclosed to (Registered Dietitian Initials and Surname), I acknowledge and accept the risks of non-disclosure.

3.5. I understand and consent to the telehealth consultation being recorded.

#### **4. Reimbursement**

4.1 I understand that I will be billed for a consultation at the rates indicated in the practice policy. Should my medical scheme not cover the cost of this nutrition consultation, I undertake to cover any shortfall that my scheme does not cover, that may be the full amount.

I, (Patient Full Names), understand that scheduling a telehealth consultation implies consent. I voluntarily consent to this and I understand the implications thereof.

---

Patient/Guardian signature

---

Patient/Guardian name

---

Time and place

## Appendix B: Discovery Health Telehealth Documents

- **Discovery Health Allied, Therapeutic & Psychology (AT&P) Telehealth and Virtual Consultations Form** – PDF for electronic editing available [here](#)



10 April 2020

Dear Healthcare Professional

### Discovery Health Telehealth and Virtual Consultation Rates

In these unprecedented times we are all asked to work quickly and collaboratively in responding to the COVID-19 outbreak.

Discovery Health remains committed to ensuring the continuity of practice for consulting healthcare services through sustainable funding that assures access to care for medical scheme members.

Please find the Dietitians fee schedule for telehealth and virtual consultations below:

Procedure Code	Procedure Description	Telehealth/Virtual Consult Rate
84200	Nutritional assessment, counselling and/or treatment. Duration: 1-10min.	58.70
84201	Nutritional assessment, counselling and/or treatment. Duration: 11-20min.	176.10
84202	Nutritional assessment, counselling and/or treatment. Duration: 21-30min.	293.30
84203	Nutritional assessment, counselling and/or treatment. Duration: 31-40min.	410.60
84204	Nutritional assessment, counselling and/or treatment. Duration: 41-50min.	469.40
84205	Nutritional assessment, counselling and/or treatment. Duration: 51-60min.	527.90
84206	Nutritional assessment, counselling and/or treatment. Duration: 61-70min.	586.80
84207	Nutritional assessment, counselling and/or treatment. Duration: 71-80min.	645.50
84208	Nutritional assessment, counselling and/or treatment. Duration: 81-90min.	704.00
84209	Nutritional assessment, counselling and/or treatment. Duration: 91-100min.	762.60
84210	Nutritional assessment, counselling and/or treatment. Duration: 101-110min.	821.30
84211	Nutritional assessment, counselling and/or treatment. Duration: 111-120min.	880.20

Please continue to use the existing channels for claims submission with a brief note describing the session sent to e-mail: [AT&PVCNReports@discovery.co.za](mailto:AT&PVCNReports@discovery.co.za)

Wishing you all strength at this time.

Yours sincerely,

Darren Sweidan  
Head: Health Professional Unit  
Strategic Risk Management  
Discovery Health

Discovery Health (Pty) Ltd. Registration number: 1997/013480/07. An authorised financial services provider and administrator of medical schemes.  
1 Discovery Place, Sandton, 2196 | [www.discovery.co.za](http://www.discovery.co.za)

Directors: Dr A Ntshaluba (Chairperson), A Gore<sup>1</sup> (Group CEO), Dr J Broomberg<sup>2</sup>, H L Bosman, Dr B A Brink, S E N De Bruyn, R Farber, H D Kallner<sup>3</sup>, F N Khanyile, N S Koopowitz<sup>4</sup>, Dr T V Maphai, H P Mayers, A Pollard<sup>5</sup>, B Swartzberg<sup>6</sup>, D M Viljoen<sup>7</sup>, S V Zilwa (\*Executive).  
Secretary: M J Botha

2020/02

10 April 2020

REF: Revision of funding for Tele-therapy

Dear Allied, Therapeutic and Psychology (AT&P) Practitioner

Since sharing Discovery Health's initial benefit regarding virtual therapy reimbursement last week, we have engaged with the various professions to understand and respond to questions raised about the details of the benefit. Based on these meaningful and constructive engagements, we have made adjustments to the benefit to align with the current and longer term demands for virtual therapy.

It is important to clarify that with the surge in queries regarding virtual therapy benefits in the unprecedented Covid-19 period, quick and responsive communication was important to address the issues that were being raised, which were further complicated by the absence of virtual therapy codes in any of the AT&P billing schedules. Our initial benefit aimed to enable continuity of care via digital channels, without any risk of misrepresenting the mode of care delivery through existing billing codes, which were developed for in-person, face-to-face therapy.

With immediate effect, Discovery Health will fund time based, tele-therapy consults at the full Discovery Health Rate.

It is crucial that virtual care be conducted through the highest standards, and that records are kept similar to what happens in practice. This aspect of care is especially relevant when such healthcare services are funded through scheme benefits. We have invested extraordinarily to build a virtual consult ecosystem that is amongst the best in the world, with the highest standards of care, as our commitment to those using the platform – members and healthcare professionals. The Discovery virtual consultation platform (DrConnect) is currently designed for doctors, but it is our intent to quickly scale the platform to Allied, Therapeutic and Psychology professionals. Once in place, safe and secure tele-therapy sessions will be funded at the DH Health rates if done through this platform, and will be applicable to all participating client medical schemes.

Until such time that the DrConnect platform is able to accommodate AT&P professionals, an interim solution will be implemented as follows:

- The tele-therapy interface that a practitioner chooses must be secure and private.
- Data transmission and storage must be compliant with protection of personal information regulations.
- Funding will be at the full Discovery Health rate for time based, tele-therapy codes only, as detailed in the discipline specific fee schedules:
  - Funding is from available day to day benefits.

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1 Discovery Place, Sandton, 2196 | [www.discovery.co.za](http://www.discovery.co.za)

Directors: Dr A Ntsaluba (Chairperson), A Gore\* (Group CEO), Dr J Broomberg\*, H L Bosman, Dr B A Brink, S E N De Bruyn, R Farber, H D Kalliner\*, F N Khanyile, N S Koopowitz\*, Dr T V Maphai, H P Mayers, A Pollard\*, B Swartzberg\*, D M Viljoen\*, S V Zilwa (\*Executive).  
Secretary: M J Botha

2020/02

- Where applicable, funding for registered chronic conditions will be available from specified funding baskets.
- Discipline specific fee schedules will be posted on the Discovery website by 15 April 2020.
- Claim submission processes must include the newly created place of service indicator for telemedicine - 02.
  - Please consult your practice management application Vendor for assistance with adding this requirement to your claims.
- For the purpose of upholding the standards of care, the completion of a short verification form is required for all tele-therapy sessions that are claimed:
  - This form must be e-mailed to [AT&PVCONReports@discovery.co.za](mailto:AT&PVCONReports@discovery.co.za)
  - The form does not include the capture of any confidential information. The form is a brief record with a minimum level of information required to verify the therapy session.
- In the weeks ahead, the verification form will be converted to a discipline specific quality improvement record and be incorporated into the DrConnect platform and process.
  - More information will follow as progress is made in providing access to the Dr Connect channel. At that point the interim e-mail channel will be closed.

We trust that these changes will support healthcare professionals in delivering care to patients during this stressful time, and post this period, will spur digital care strategies more widely.

We wish you strength in your personal and professional responsibilities at this time.

Sincerely,



Darren Sweidan  
Head: Health Professional Unit  
Strategic Risk Management  
Discovery Health

## Appendix C: Medscheme Telehealth Documents



PO Box 1101, Florida Glen, 1708  
37 Conrad Street, Florida North,  
Roodepoort, 1709  
t +27 11 671 2000  
[www.medscheme.com](http://www.medscheme.com)

07 April 2020

Dear Healthcare Professional

### **Telephonic and Virtual consultation codes offered by Medscheme in light of the COVID-19 nationwide public health emergency**

The Republic of South Africa, through the National Department of Health is responsible for gazetting and enforcing certain regulations during a nationwide public health emergency. In response to measures mentioned by the President of the Republic of South Africa and gazetted publications, Medscheme recognises the need for patients who require ongoing care and services while COVID-19 is still considered a nationwide public health emergency.

There are countless healthcare professionals that are trying to maintain medical support for their patients, in very trying and concerning conditions. However, we do need to take cognisance of the fact that many healthcare professionals, by providing ongoing medical support for their patients, are putting themselves and their families at risk of COVID-19 transmission and contamination.

In an attempt to lessen the risk, with the above in mind, Medscheme is implementing in-house telephonic and virtual consultation codes for certain health care professionals who do not have such codes allocated in their respective national and private coding schema. These codes are applicable where communication technology is used to provide services to patients during the COVID-19 nationwide public health emergency using any non-face-to-face remote communication platforms that are available to connect with patients, inter alia telephonically, Skype, and Facetime or any other form of virtual communication.

Medscheme, in partnership with our affiliate solution providers, have developed a digital platform to facilitate virtual consultations. Further communication on this solution will be released soon. For more information, please visit <https://portal.allegra.co.za/products>.

Medscheme Holdings (Pty) Ltd Reg No 1970/015014/07

DIRECTORS: A Banderker, JW Boonzaaier, MJ Madungandaba, AA Mahmood, Dr N Nyathi, SE Mmakau

Group Company Secretary: DR Mokale





Health care professionals are requested to please exercise discretion in respect of telephonic and virtual communication provided for any reason, regardless of whether the service is related to the diagnosis and treatment of health conditions related to COVID-19, as well as keep detailed personal records of all telephonic and virtual consultations.

We urge you, for correct reporting and monitoring as expected by NICD, to use appropriate ICD10 coding, namely:

- **U07.1 COVID-19** - virus identified
- **U07.2 COVID-19** - virus not identified
  - Clinically/epidemiologically diagnosed COVID-19 infection
  - Probable COVID-19 infection
  - Suspected COVID-19 infection

Keeping aligned with the update circulated by the Health Professions Council of South Africa (HPCSA) on 26th of March about the HPCSA Guidelines for Healthcare Practitioners<sup>1</sup>, Medscheme is conscious that certain healthcare professionals will be able to offer these types of services and as a result will be allowed to use these in-house codes.

These would include:

1. All medical doctors – GP's and Specialists
2. Psychologists
3. Social Workers
4. Occupational Therapists
5. Physiotherapists
6. Speech and Hearing Therapists
7. Audiologists
8. Nurse Practitioners
9. Dieticians
10. Pharmacies offering in-house nurse consultations
11. Chiropractors
12. Biokineticists

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<sup>1</sup> <https://www.hpcsa-blogs.co.za/covid-19-hpcsa-guidelines-for-healthcare-practitioners/>

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The following provisions would be applicable in the instances where these in-house codes are used:

- Medical Doctors (GP's, Specialists and Psychiatrists) will continue using code 0130 for telephone consultations.
  - Except for COVID-19 possible infections, Telehealth should be practiced where there is an already established practitioner-patient relationship. HPCSA further states, where such a relationship does not exist, practitioners may still consult using Telehealth provided that such consultations are done in the best interest of the patient Psychologists whom can use the codes for new and established patients.
  - Psychiatrists that can also add codes 2957, 2974 or 297 for individual psychotherapy to Medscheme's virtual code or code 0130
- These codes cannot be billed if the service is offered within the post-operative period.
- The usual consultation codes 0190- 0192 and 0173- 0175, 0161- 0169 with add-on codes 0145- 0147, consultation, assessment and therapy codes cannot be billed together with non-face-to-face services.
- Codes can only be billed once per day per patient.

The codes and rates in Annexure are CPT based with some adaptations made to suit the South African context.

For full description of these codes and applicable rates please see **Annexure A**.

For details of individual schemes rates relating to Code 0130: Telephonic consultations for Medical Professionals: Drs and Specialists, please see **Annexure B**.

Please note that these codes will be effective from 3rd of April 2020 however they will be backdated to the 15th of March 2020.

Kind regards,

Dr Claude Ndlovu

**General Manager: Health Professions Strategy Unit**

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**ANNEXURE A**

**Medscheme Telephonic and Virtual consultation codes with applicable rates**

<b>Medscheme In-House Code</b>	<b>Medscheme In-House Code description</b>	<b>2020 Medscheme rates</b>
0130	<b><u>Telephonic consultations (all hours)</u></b> <ul style="list-style-type: none"> <li>• Doctors (GP's and Specialists)</li> </ul>	See "Annexure B"
078330	<b><u>Virtual consultations (all hours):</u></b> <ul style="list-style-type: none"> <li>• Doctors (GP's and Specialists)</li> </ul>	R 300.00
	<ul style="list-style-type: none"> <li>• Physiotherapists, Social Workers, Occupational Therapists, Dieticians, Speech and Hearing Therapists, Audiologists, Chiropractors, Biokineticists</li> </ul>	R 236.05
	<ul style="list-style-type: none"> <li>• Psychologists</li> </ul>	R 265.97
	<ul style="list-style-type: none"> <li>• Nurse Practitioners</li> </ul>	R 223.30
078340	<b><u>Telephonic consultations (all hours):</u></b> <ul style="list-style-type: none"> <li>• Physiotherapists, Social Workers, Occupational Therapists, Dieticians, Speech and Hearing Therapists, Audiologists, Chiropractors, Biokineticists</li> </ul>	R 236.05
	<ul style="list-style-type: none"> <li>• Psychologists</li> </ul>	R 265.97
	<ul style="list-style-type: none"> <li>• Nurse Practitioners</li> </ul>	R 223.30
078332	<b><u>Telephonic and Virtual Private Nurse Practitioner consultations with Medical Practitioners:</u></b> <ul style="list-style-type: none"> <li>• GP and Specialists</li> </ul>	R 200.00
078335	<b><u>Telephonic and Virtual Private Nurse Practitioner consultations with Medical Practitioners:</u></b> <ul style="list-style-type: none"> <li>• Nurse Practitioners</li> </ul>	R 90.00

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## ANNEXURE B

### Table of 2020 Scheme rates for Code 0130: Telephonic Consultations (All Hours) for all medical doctors (GP's and Specialists)

Scheme	2020 Tariff Rate
AECI	R 287.00
Barloworld	R 283.40
Bonitas	R281.60
Fedhealth	R281.50
Horizon	R293.70
Hosmed	R 325.40
MBMed	R 282.70
Medshield	R 436.60
Nedgroup	R 287.00
Parmed	R 279.80
Polmed	R 268.80
SABC	R 282.00
Sasolmed	R 281.60

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