

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Aneesthesiologists
Code: **010**

Practice Type:
General Medical Practice
Code: **014**

Practice Type:
Family Physicians
Code: **015**

Practice Type:
Obstetrics and Gynaecology
Code: **016**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
	In calculating the GEMS Tariff, the following rounding method is used: Values R10 and below rounded to the nearest cent, R10+ rounded to the nearest 10cent. Modifier values are rounded to the nearest cent. When new item prices are calculated, e.g. when applying a modifier, the same rounding scheme should be followed. ALL GEMS TARIFFS ARE VAT INCLUSIVE.				
I.c.1.	New and established patient consultation/visit				
0190	New and established patient: Consultation/visit of new or established patient of an average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 504,50	R 405,90	R 521,40	R 552,20
0191	New and established patient: Consultation/visit of new or established patient of a moderately above average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 504,50	R 405,90	R 521,40	R 552,20
0192	New and established patient: Consultation/visit of new or established patient of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 504,50	R 405,90	R 521,40	R 552,20
0193	New and established patient: Consultation/visit of new or established patient of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109). Typically the doctor spends between 46 and 60 minutes with the patient and/or family.	R 504,50	R 405,90	R 521,40	R 552,20
I.c.2.	Hospital consult /visit				
0173	First hospital consultation/visit of an average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 495,10	R 405,90	R 405,90	R 541,90

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PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0174	First hospital consultation/visit of a moderately above average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 495,10	R 405,90	R 405,90	R 541,90
0175	First hospital consultation/visit of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 495,10	R 405,90	R 405,90	R 541,90
0178	Hospital follow-up visit to patient in ward or nursing facility with a duration of 31-60 minutes: ADD only to item 0109, as appropriate. Psychiatrists ("22") refer to items 0166-0169 for hospital follow-up visits	R 462,90	R 362,10	R 362,10	R 462,90
0179	Prolonged face-to-face attendance to a patient in ward or nursing facility: ADD only to item 0178 as appropriate, for each 15-minute period only if service extends 10 minutes or more inot the next 15-minute period following on the first 60 minutes (please state duration of visit on account in minutes).	R 462,90	R 362,10	R 362,10	R 462,90
0109	Hospital follow-up visit to patient in ward or nursing facility - Refer to general rule G(a) for post-operative care) (may only be charged once per day) (not to be used with items 0111, 0145, 0146, 0147 or ICU items 1204-1214)	R 462,90	R 362,10	R 362,10	R 462,90
0111	Paediatric hospital follow-up visits (excluding neonates) by paediatricians or paediatric cardiologists (may only be charged once per day) (not to be used with items 0109 or ICU items 1204-1214). For a healthy neonate please use item 0109 for a hospital follow-up visit	R 0,00	R 0,00	R 0,00	R 0,00
I.c.3.	Hospital discharge day management				
0176	Hospital discharge day management; 30 minutes or less	R 686,30	R 562,90	R 562,90	R 751,40
0177	Hospital discharge day management; more than 30 minutes (including a hospital summary)	R 686,30	R 562,90	R 562,90	R 751,40
I.c.4.	Add-on consultative services				
0129	Prolonged face-to-face attendance to a patient: ADD to either item 0192, item 0175, item 0164 or item 0169 as appropriate, for each 15-minute period only if service extends 10 minutes or more into the next 15-minute period following on the first 60 minutes	R 462,90	R 362,10	R 362,10	R 462,90
0145	For consultation/visit away from the doctor's home or rooms (non-emergency): ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164 or items 0166-0169, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 0,00	R 144,90	R 144,90	R 185,40

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PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0146	For an unscheduled emergency consultation/visit at the doctors' home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate (refer to general rule B). Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 247,00	R 193,20	R 193,20	R 246,80
0147	For an emergency consultation/visit away from the doctor's home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 432,20	R 338,00	R 338,00	R 432,20
0148	For elective after-hours services on request of the patient or family (non emergency) (refer to general rule B(a)): ADD 50% of the fee for the appropriate consultation/visit item (only to be used with items 0190-0193, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153) and reflect this as a separate item 0148. Usage: This item is used when, for example, a patient or the family request the doctor for a non-emergency consultation/visit outside of the practitioners' normal hours period.	R 0,00	R 0,00	R 0,00	R 0,00
0149	After-hours bona fide emergency consultation/visit (21:00-06:00 daily): ADD 25% of the fee for the appropriate consultation/visit item (only to be used with items 0190-0193, items 0173-0175, items 0161-0164, items 0166-0169, items 0151-0153 or item 0113) and reflect this as a separate item 0149	R 123,80	R 101,50	R 101,50	R 135,50
0126	For an UNSCHEDULED consultation/visit at the doctor's home or rooms: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146, 0126 or 0147 may be charged and not combinations thereof	R 528,10	R 433,00	R 433,00	R 578,00
I.c.5.	Observation care				
7050	Initial observation care, per day: Evaluation and management of a patient. Requires the following 3 key components: (a) detailed or comprehensive history (b) detailed or comprehensive examination (c) straightforward or low complexity medical decision making. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 623,70	R 625,10	R 625,10	R 668,50
7051	Initial observation care, per day. Evaluation and management of a patient. Requiring the following 3 components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of moderate complexity. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 623,70	R 625,10	R 625,10	R 668,50

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PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
7052	Initial observation care, per day. Evaluation and management of a patient. Requiring the following 3 components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of high complexity. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 623,70	R 625,10	R 625,10	R 668,50
I.c.6.	Emergency department				
7060	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) straightforward medical decision making. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor	R 201,30	R 159,70	R 159,70	R 170,90
7061	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) medical decision making of low complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low or moderate severity.	R 201,30	R 159,70	R 159,70	R 170,90
7062	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) medical decision making of moderate complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity.	R 201,30	R 159,70	R 159,70	R 170,90
7063	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) a detailed history (b) a detailed examination (c) medical decision making of moderate complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the medical practitioner but do not pose an immediate significant threat to life or physiologic function.	R 201,30	R 159,70	R 159,70	R 170,90
7064	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of high complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the medical practitioner and pose an immediate significant threat to life or physiologic function.	R 201,30	R 159,70	R 159,70	R 170,90

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PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
I.e	Pre-anaesthetic assessment				
0151	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient (all hours). Problem focused history and clinical examination and straightforward decision making for minor problem. Typically occupies the doctor face-to-face with the patient for between 10 and 20 minutes	R 535,80	R 433,20	R 433,20	R 0,00
0152	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient (all hours). Detailed history and clinical examination and straightforward decision making and counselling. Typically occupies the doctor face-to-face with the patient for between 20 and 35 minutes	R 535,80	R 433,20	R 433,20	R 0,00
0153	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient or other consultative service. Consultation with detailed history, complete examination and moderate complex decision making and counselling. Typically occupies the doctor face-to-face for between 30 and 45 minutes	R 535,80	R 433,20	R 433,20	R 0,00
I.f	Prenatal visits and new born attendance				
0107	New born attendance: Exclusive attendance to baby at Caesarean section, normal delivery or visit in the ward (once per patient) (items 0109, 0111, 0113, 0145, 0146 and/or 0147 may not be added to item 0107)	R 0,00	R 796,90	R 796,90	R 1 018,60
	Item 0107 can be used once only for given confinement				
0113	New born attendance: Emergency attendance to newborn at all hours (once per patient) (items 0107, 0109, 0111, 0145, 0146 and/or 0147 may not be added to item 0113)	R 0,00	R 1 086,80	R 1 086,80	R 0,00
I.g	Consultative services: Miscellaneous				
0130	Telephone consultation (all hours)	R 0,00	R 289,80	R 289,80	R 361,10
0131	Subsequent injections or flu vaccinations as part of a planned series of injections for the same condition administered by medical doctors (refer to modifier 0017) (not to be coded together with any consultation item)	R 247,60	R 203,00	R 203,00	R 270,90
0132	Consulting service e.g. writing of repeat scripts or requesting routine pre-authorisation without the physical presence of the patient (needs not be face-to-face contact) ("Consultation" via SMS or electronic media included)	R 0,00	R 120,80	R 120,80	R 154,30
0133	Writing of special motivations for procedures and treatment without the physical presence of a patient (includes report on the clinical condition of a patient) requested by or on behalf of a third party funder or its agent	R 277,70	R 217,10	R 217,10	R 277,70

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PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0137	Patient and/or family education and/or guidance for a specific condition for 20 minutes, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0138	Patient and/or family education and/or guidance for a specific condition for 40 minutes, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0139	Patient and/or family education and/or guidance for a specific condition for 41 minutes and longer, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0199	Completion of chronic medication forms by medical practitioners with or without the physical presence of the patient requested by or on behalf of a third party funder or its agent	R 0,00	R 517,70	R 517,70	R 617,20

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Pulmonology
Code: **017**

Practice Type:
Medicine (Specialist Physician)
Code: **018**

Practice Type:
Gastroenterology
Code: **019**

Practice Type:
Neurology
Code: **020**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
	In calculating the GEMS Tariff, the following rounding method is used: Values R10 and below rounded to the nearest cent, R10+ rounded to the nearest 10cent. Modifier values are rounded to the nearest cent. When new item prices are calculated, e.g. when applying a modifier, the same rounding scheme should be followed. ALL GEMS TARIFFS ARE VAT INCLUSIVE.				
I.c.1.	New and established patient consultation/visit				
0190	New and established patient: Consultation/visit of new or established patient of an average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 797,20	R 797,20	R 797,20	R 797,20
0191	New and established patient: Consultation/visit of new or established patient of a moderately above average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 797,20	R 797,20	R 797,20	R 797,20
0192	New and established patient: Consultation/visit of new or established patient of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 797,20	R 797,20	R 797,20	R 797,20
0193	New and established patient: Consultation/visit of new or established patient of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109). Typically the doctor spends between 46 and 60 minutes with the patient and/or family.	R 797,20	R 797,20	R 797,20	R 797,20
I.c.2.	Hospital consult /visit				
0173	First hospital consultation/visit of an average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 782,40	R 782,40	R 782,40	R 782,40

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0175	First hospital consultation/visit of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 782,40	R 782,40	R 782,40	R 782,40
0178	Hospital follow-up visit to patient in ward or nursing facility with a duration of 31-60 minutes: ADD only to item 0109, as appropriate. Psychiatrists ("22") refer to items 0166-0169 for hospital follow-up visits	R 462,90	R 462,90	R 462,90	R 462,90
0179	Prolonged face-to-face attendance to a patient in ward or nursing facility: ADD only to item 0178 as appropriate, for each 15-minute period only if service extends 10 minutes or more inot the next 15-minute period following on the first 60 minutes (please state duration of visit on account in minutes).	R 462,90	R 462,90	R 462,90	R 462,90
0109	Hospital follow-up visit to patient in ward or nursing facility - Refer to general rule G(a) for post-operative care) (may only be charged once per day) (not to be used with items 0111, 0145, 0146, 0147 or ICU items 1204-1214)	R 462,90	R 462,90	R 462,90	R 462,90
0111	Paediatric hospital follow-up visits (excluding neonates) by paediatricians or paediatric cardiologists (may only be charged once per day) (not to be used with items 0109 or ICU items 1204-1214). For a healthy neonate please use item 0109 for a hospital follow-up visit	R 0,00	R 0,00	R 0,00	R 0,00
I.c.3.	Hospital discharge day management				
0176	Hospital discharge day management; 30 minutes or less	R 1 084,90	R 1 084,90	R 1 084,90	R 1 084,90
0177	Hospital discharge day management; more than 30 minutes (including a hospital summary)	R 1 084,90	R 1 084,90	R 1 084,90	R 1 084,90
I.c.4.	Add-on consultative services				
0129	Prolonged face-to-face attendance to a patient: ADD to either item 0192, item 0175, item 0164 or item 0169 as appropriate, for each 15-minute period only if service extends 10 minutes or more into the next 15-minute period following on the first 60 minutes	R 462,90	R 462,90	R 462,90	R 462,90
0145	For consultation/visit away from the doctor's home or rooms (non-emergency): ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164 or items 0166-0169, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 185,30	R 185,30	R 185,30	R 185,30

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0146	For an unscheduled emergency consultation/visit at the doctors' home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate (refer to general rule B). Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 247,00	R 247,00	R 247,00	R 247,00
0147	For an emergency consultation/visit away from the doctor's home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 432,20	R 432,20	R 432,20	R 432,20
0148	For elective after-hours services on request of the patient or family (non emergency) (refer to general rule B(a)): ADD 50% of the fee for the appropriate consultation/visit item (only to be used with items 0190-0193, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153) and reflect this as a separate item 0148. Usage: This item is used when, for example, a patient or the family request the doctor for a non-emergency consultation/visit outside of the practitioners' normal hours period.	R 0,00	R 0,00	R 0,00	R 0,00
0149	After-hours bona fide emergency consultation/visit (21:00-06:00 daily): ADD 25% of the fee for the appropriate consultation/visit item (only to be used with items 0190-0193, items 0173-0175, items 0161-0164, items 0166-0169, items 0151-0153 or item 0113) and reflect this as a separate item 0149	R 195,60	R 195,60	R 195,60	R 195,60
0126	For an UNSCHEDULED consultation/visit at the doctor's home or rooms: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146, 0126 or 0147 may be charged and not combinations thereof	R 834,50	R 834,50	R 834,50	R 834,50
I.c.5.	Observation care				
7050	Initial observation care, per day: Evaluation and management of a patient. Requires the following 3 key components: (a) detailed or comprehensive history (b) detailed or comprehensive examination (c) straightforward or low complexity medical decision making. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 985,80	R 985,80	R 985,80	R 985,80
7051	Initial observation care, per day. Evaluation and management of a patient. Requiring the following 3 components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of moderate complexity. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 985,80	R 985,80	R 985,80	R 985,80

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Practice Type:
Pulmonology
Code: **017**

Practice Type:
Medicine (Specialist Physician)
Code: **018**

Practice Type:
Gastroenterology
Code: **019**

Practice Type:
Neurology
Code: **020**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
7052	Initial observation care, per day. Evaluation and management of a patient. Requiring the following 3 components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of high complexity. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 985,80	R 985,80	R 985,80	R 985,80
I.c.6.	Emergency department				
7060	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) straightforward medical decision making. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor	R 318,20	R 318,20	R 318,20	R 318,20
7061	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) medical decision making of low complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low or moderate severity.	R 318,20	R 318,20	R 318,20	R 318,20
7062	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) medical decision making of moderate complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity.	R 318,20	R 318,20	R 318,20	R 318,20
7063	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) a detailed history (b) a detailed examination (c) medical decision making of moderate complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the medical practitioner but do not pose an immediate significant threat to life or physiologic function.	R 318,20	R 318,20	R 318,20	R 318,20
7064	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of high complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the medical practitioner and pose an immediate significant threat to life or physiologic function.	R 318,20	R 318,20	R 318,20	R 318,20

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Pulmonology
Code: **017**

Practice Type:
Medicine (Specialist Physician)
Code: **018**

Practice Type:
Gastroenterology
Code: **019**

Practice Type:
Neurology
Code: **020**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
I.e	Pre-anaesthetic assessment				
0151	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient (all hours). Problem focused history and clinical examination and straightforward decision making for minor problem. Typically occupies the doctor face-to-face with the patient for between 10 and 20 minutes	R 0,00	R 0,00	R 0,00	R 0,00
0152	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient (all hours). Detailed history and clinical examination and straightforward decision making and counselling. Typically occupies the doctor face-to-face with the patient for between 20 and 35 minutes	R 0,00	R 0,00	R 0,00	R 0,00
0153	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient or other consultative service. Consultation with detailed history, complete examination and moderate complex decision making and counselling. Typically occupies the doctor face-to-face for between 30 and 45 minutes	R 0,00	R 0,00	R 0,00	R 0,00
I.f	Prenatal visits and new born attendance				
0107	New born attendance: Exclusive attendance to baby at Caesarean section, normal delivery or visit in the ward (once per patient) (items 0109, 0111, 0113, 0145, 0146 and/or 0147 may not be added to item 0107)	R 0,00	R 0,00	R 0,00	R 0,00
	Item 0107 can be used once only for given confinement				
0113	New born attendance: Emergency attendance to newborn at all hours (once per patient) (items 0107, 0109, 0111, 0145, 0146 and/or 0147 may not be added to item 0113)	R 0,00	R 0,00	R 0,00	R 0,00
I.g	Consultative services: Miscellaneous				
0130	Telephone consultation (all hours)	R 541,80	R 541,80	R 541,80	R 541,80
0131	Subsequent injections or flu vaccinations as part of a planned series of injections for the same condition administered by medical doctors (refer to modifier 0017) (not to be coded together with any consultation item)	R 391,20	R 391,20	R 391,20	R 391,20
0132	Consulting service e.g. writing of repeat scripts or requesting routine pre-authorization without the physical presence of the patient (needs not be face-to-face contact) ("Consultation" via SMS or electronic media included)	R 154,50	R 154,50	R 154,50	R 154,50
0133	Writing of special motivations for procedures and treatment without the physical presence of a patient (includes report on the clinical condition of a patient) requested by or on behalf of a third party funder or its agent	R 277,70	R 277,70	R 277,70	R 277,70

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
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Practice Type:
Neurology
Code: **020**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0137	Patient and/or family education and/or guidance for a specific condition for 20 minutes, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0138	Patient and/or family education and/or guidance for a specific condition for 40 minutes, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0139	Patient and/or family education and/or guidance for a specific condition for 41 minutes and longer, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0199	Completion of chronic medication forms by medical practitioners with or without the physical presence of the patient requested by or on behalf of a third party funder or its agent	R 582,30	R 582,30	R 582,30	R 582,30

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Cardiology
Code: **021**

Practice Type:
Neurosurgery
Code: **024**

Practice Type:
Ophthalmology
Code: **026**

Practice Type:
Orthopaedics
Code: **028**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
	In calculating the GEMS Tariff, the following rounding method is used: Values R10 and below rounded to the nearest cent, R10+ rounded to the nearest 10cent. Modifier values are rounded to the nearest cent. When new item prices are calculated, e.g. when applying a modifier, the same rounding scheme should be followed. ALL GEMS TARIFFS ARE VAT INCLUSIVE.				
I.c.1.	New and established patient consultation/visit				
0190	New and established patient: Consultation/visit of new or established patient of an average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 797,20	R 797,20	R 521,40	R 521,40
0191	New and established patient: Consultation/visit of new or established patient of a moderately above average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 797,20	R 797,20	R 521,40	R 521,40
0192	New and established patient: Consultation/visit of new or established patient of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 797,20	R 797,20	R 521,40	R 521,40
0193	New and established patient: Consultation/visit of new or established patient of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109). Typically the doctor spends between 46 and 60 minutes with the patient and/or family.	R 797,20	R 797,20	R 521,40	R 521,40
I.c.2.	Hospital consult /visit				
0173	First hospital consultation/visit of an average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 782,40	R 782,40	R 511,70	R 511,70

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Cardiology
Code: **021**

Practice Type:
Neurosurgery
Code: **024**

Practice Type:
Ophthalmology
Code: **026**

Practice Type:
Orthopaedics
Code: **028**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0174	First hospital consultation/visit of a moderately above average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 782,40	R 782,40	R 511,70	R 511,70
0175	First hospital consultation/visit of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 782,40	R 782,40	R 511,70	R 511,70
0178	Hospital follow-up visit to patient in ward or nursing facility with a duration of 31-60 minutes: ADD only to item 0109, as appropriate. Psychiatrists ("22") refer to items 0166-0169 for hospital follow-up visits	R 462,90	R 463,00	R 463,00	R 463,00
0179	Prolonged face-to-face attendance to a patient in ward or nursing facility: ADD only to item 0178 as appropriate, for each 15-minute period only if service extends 10 minutes or more inot the next 15-minute period following on the first 60 minutes (please state duration of visit on account in minutes).	R 462,90	R 463,00	R 463,00	R 463,00
0109	Hospital follow-up visit to patient in ward or nursing facility - Refer to general rule G(a) for post-operative care) (may only be charged once per day) (not to be used with items 0111, 0145, 0146, 0147 or ICU items 1204-1214)	R 462,90	R 463,00	R 463,00	R 463,00
0111	Paediatric hospital follow-up visits (excluding neonates) by paediatricians or paediatric cardiologists (may only be charged once per day) (not to be used with items 0109 or ICU items 1204-1214). For a healthy neonate please use item 0109 for a hospital follow-up visit	R 0,00	R 0,00	R 0,00	R 0,00
I.c.3.	Hospital discharge day management				
0176	Hospital discharge day management; 30 minutes or less	R 1 084,90	R 1 084,90	R 709,40	R 709,40
0177	Hospital discharge day management; more than 30 minutes (including a hospital summary)	R 1 084,90	R 1 084,90	R 709,40	R 709,40
I.c.4.	Add-on consultative services				
0129	Prolonged face-to-face attendance to a patient: ADD to either item 0192, item 0175, item 0164 or item 0169 as appropriate, for each 15-minute period only if service extends 10 minutes or more into the next 15-minute period following on the first 60 minutes	R 462,90	R 0,00	R 0,00	R 453,40
0145	For consultation/visit away from the doctor's home or rooms (non-emergency): ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164 or items 0166-0169, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 185,30	R 185,20	R 185,20	R 185,20

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Cardiology
Code: **021**

Practice Type:
Neurosurgery
Code: **024**

Practice Type:
Ophthalmology
Code: **026**

Practice Type:
Orthopaedics
Code: **028**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0146	For an unscheduled emergency consultation/visit at the doctors' home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate (refer to general rule B). Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 247,00	R 247,10	R 247,10	R 247,10
0147	For an emergency consultation/visit away from the doctor's home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 432,20	R 432,20	R 432,20	R 432,20
0148	For elective after-hours services on request of the patient or family (non emergency) (refer to general rule B(a)): ADD 50% of the fee for the appropriate consultation/visit item (only to be used with items 0190-0193, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153) and reflect this as a separate item 0148. Usage: This item is used when, for example, a patient or the family request the doctor for a non-emergency consultation/visit outside of the practitioners' normal hours period.	R 0,00	R 0,00	R 0,00	R 0,00
0149	After-hours bona fide emergency consultation/visit (21:00-06:00 daily): ADD 25% of the fee for the appropriate consultation/visit item (only to be used with items 0190-0193, items 0173-0175, items 0161-0164, items 0166-0169, items 0151-0153 or item 0113) and reflect this as a separate item 0149	R 195,60	R 195,60	R 127,90	R 127,90
0126	For an UNSCHEDULED consultation/visit at the doctor's home or rooms: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146, 0126 or 0147 may be charged and not combinations thereof	R 834,50	R 834,50	R 545,80	R 545,80
I.c.5.	Observation care				
7050	Initial observation care, per day: Evaluation and management of a patient. Requires the following 3 key components: (a) detailed or comprehensive history (b) detailed or comprehensive examination (c) straightforward or low complexity medical decision making. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 985,80	R 985,80	R 644,60	R 644,60
7051	Initial observation care, per day. Evaluation and management of a patient. Requiring the following 3 components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of moderate complexity. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 985,80	R 985,80	R 644,60	R 644,60

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Cardiology
Code: **021**

Practice Type:
Neurosurgery
Code: **024**

Practice Type:
Ophthalmology
Code: **026**

Practice Type:
Orthopaedics
Code: **028**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
7052	Initial observation care, per day. Evaluation and management of a patient. Requiring the following 3 components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of high complexity. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 985,80	R 985,80	R 644,60	R 644,60
I.c.6.	Emergency department				
7060	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) straightforward medical decision making. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor	R 318,20	R 318,20	R 208,20	R 208,20
7061	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) medical decision making of low complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low or moderate severity.	R 318,20	R 318,20	R 208,20	R 208,20
7062	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) medical decision making of moderate complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity.	R 318,20	R 318,20	R 208,20	R 208,20
7063	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) a detailed history (b) a detailed examination (c) medical decision making of moderate complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the medical practitioner but do not pose an immediate significant threat to life or physiologic function.	R 318,20	R 318,20	R 208,20	R 208,20
7064	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of high complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the medical practitioner and pose an immediate significant threat to life or physiologic function.	R 318,20	R 318,20	R 208,20	R 208,20

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Code: **024**

Practice Type:
Ophthalmology
Code: **026**

Practice Type:
Orthopaedics
Code: **028**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
I.e	Pre-anaesthetic assessment				
0151	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient (all hours). Problem focused history and clinical examination and straightforward decision making for minor problem. Typically occupies the doctor face-to-face with the patient for between 10 and 20 minutes	R 0,00	R 0,00	R 0,00	R 0,00
0152	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient (all hours). Detailed history and clinical examination and straightforward decision making and counselling. Typically occupies the doctor face-to-face with the patient for between 20 and 35 minutes	R 0,00	R 0,00	R 0,00	R 0,00
0153	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient or other consultative service. Consultation with detailed history, complete examination and moderate complex decision making and counselling. Typically occupies the doctor face-to-face for between 30 and 45 minutes	R 0,00	R 0,00	R 0,00	R 0,00
I.f	Prenatal visits and new born attendance				
0107	New born attendance: Exclusive attendance to baby at Caesarean section, normal delivery or visit in the ward (once per patient) (items 0109, 0111, 0113, 0145, 0146 and/or 0147 may not be added to item 0107)	R 0,00	R 0,00	R 0,00	R 0,00
	Item 0107 can be used once only for given confinement				
0113	New born attendance: Emergency attendance to newborn at all hours (once per patient) (items 0107, 0109, 0111, 0145, 0146 and/or 0147 may not be added to item 0113)	R 0,00	R 0,00	R 0,00	R 0,00
I.g	Consultative services: Miscellaneous				
0130	Telephone consultation (all hours)	R 541,80	R 541,90	R 361,20	R 361,20
0131	Subsequent injections or flu vaccinations as part of a planned series of injections for the same condition administered by medical doctors (refer to modifier 0017) (not to be coded together with any consultation item)	R 391,20	R 391,20	R 255,90	R 255,90
0132	Consulting service e.g. writing of repeat scripts or requesting routine pre-authorisation without the physical presence of the patient (needs not be face-to-face contact) ("Consultation" via SMS or electronic media included)	R 154,50	R 154,40	R 154,40	R 154,40
0133	Writing of special motivations for procedures and treatment without the physical presence of a patient (includes report on the clinical condition of a patient) requested by or on behalf of a third party funder or its agent	R 277,70	R 277,80	R 277,80	R 277,80

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
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PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0137	Patient and/or family education and/or guidance for a specific condition for 20 minutes, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0138	Patient and/or family education and/or guidance for a specific condition for 40 minutes, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0139	Patient and/or family education and/or guidance for a specific condition for 41 minutes and longer, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0199	Completion of chronic medication forms by medical practitioners with or without the physical presence of the patient requested by or on behalf of a third party funder or its agent	R 582,30	R 582,30	R 582,30	R 582,30

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Otorhinolaryngology
Code: **030**

Practice Type:
Rheumatology
Code: **031**

Practice Type:
Paediatricians
Code: **032**

Practice Type:
**Plastic and
Reconstructive Sur**
Code: **036**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
	In calculating the GEMS Tariff, the following rounding method is used: Values R10 and below rounded to the nearest cent, R10+ rounded to the nearest 10cent. Modifier values are rounded to the nearest cent. When new item prices are calculated, e.g. when applying a modifier, the same rounding scheme should be followed. ALL GEMS TARIFFS ARE VAT INCLUSIVE.				
I.c.1.	New and established patient consultation/visit				
0190	New and established patient: Consultation/visit of new or established patient of an average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 521,40	R 797,20	R 797,20	R 521,40
0191	New and established patient: Consultation/visit of new or established patient of a moderately above average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 521,40	R 797,20	R 797,20	R 521,40
0192	New and established patient: Consultation/visit of new or established patient of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 521,40	R 797,20	R 797,20	R 521,40
0193	New and established patient: Consultation/visit of new or established patient of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109). Typically the doctor spends between 46 and 60 minutes with the patient and/or family.	R 521,40	R 797,20	R 797,20	R 521,40
I.c.2.	Hospital consult /visit				
0173	First hospital consultation/visit of an average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 511,70	R 782,40	R 782,40	R 511,70

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Otorhinolaryngology
Code: **030**

Practice Type:
Rheumatology
Code: **031**

Practice Type:
Paediatricians
Code: **032**

Practice Type:
**Plastic and
Reconstructive Sur**
Code: **036**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0174	First hospital consultation/visit of a moderately above average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 511,70	R 782,40	R 782,40	R 511,70
0175	First hospital consultation/visit of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 511,70	R 782,40	R 782,40	R 511,70
0178	Hospital follow-up visit to patient in ward or nursing facility with a duration of 31-60 minutes: ADD only to item 0109, as appropriate. Psychiatrists ("22") refer to items 0166-0169 for hospital follow-up visits	R 463,00	R 462,90	R 462,90	R 463,00
0179	Prolonged face-to-face attendance to a patient in ward or nursing facility: ADD only to item 0178 as appropriate, for each 15-minute period only if service extends 10 minutes or more inot the next 15-minute period following on the first 60 minutes (please state duration of visit on account in minutes).	R 463,00	R 462,90	R 462,90	R 463,00
0109	Hospital follow-up visit to patient in ward or nursing facility - Refer to general rule G(a) for post-operative care) (may only be charged once per day) (not to be used with items 0111, 0145, 0146, 0147 or ICU items 1204-1214)	R 463,00	R 462,90	R 462,90	R 463,00
0111	Paediatric hospital follow-up visits (excluding neonates) by paediatricians or paediatric cardiologists (may only be charged once per day) (not to be used with items 0109 or ICU items 1204-1214). For a healthy neonate please use item 0109 for a hospital follow-up visit	R 0,00	R 0,00	R 677,30	R 0,00
I.c.3.	Hospital discharge day management				
0176	Hospital discharge day management;30 minutes or less	R 1 084,90	R 1 062,50	R 782,40	R 709,40
0177	Hospital discharge day management;more than 30 minutes (including a hospital summary)	R 1 084,90	R 1 062,50	R 782,40	R 709,40
I.c.4.	Add-on consultative services				
0129	Prolonged face-to-face attendance to a patient: ADD to either item 0192, item 0175, item 0164 or item 0169 as appropriate, for each 15-minute period only if service extends 10 minutes or more into the next 15-minute period following on the first 60 minutes	R 0,00	R 462,90	R 462,90	R 0,00
0145	For consultation/visit away from the doctor's home or rooms (non-emergency): ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164 or items 0166-0169, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 185,20	R 185,30	R 185,40	R 185,20

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Otorhinolaryngology
Code: **030**

Practice Type:
Rheumatology
Code: **031**

Practice Type:
Paediatricians
Code: **032**

Practice Type:
**Plastic and
Reconstructive Sur**
Code: **036**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0146	For an unscheduled emergency consultation/visit at the doctors' home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate (refer to general rule B). Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 247,10	R 247,00	R 246,80	R 247,10
0147	For an emergency consultation/visit away from the doctor's home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 432,20	R 432,20	R 432,20	R 423,70
0148	For elective after-hours services on request of the patient or family (non emergency) (refer to general rule B(a)): ADD 50% of the fee for the appropriate consultation/visit item (only to be used with items 0190-0193, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153) and reflect this as a separate item 0148. Usage: This item is used when, for example, a patient or the family request the doctor for a non-emergency consultation/visit outside of the practitioners' normal hours period.	R 0,00	R 0,00	R 0,00	R 0,00
0149	After-hours bona fide emergency consultation/visit (21:00-06:00 daily): ADD 25% of the fee for the appropriate consultation/visit item (only to be used with items 0190-0193, items 0173-0175, items 0161-0164, items 0166-0169, items 0151-0153 or item 0113) and reflect this as a separate item 0149	R 127,90	R 195,60	R 195,60	R 127,90
0126	For an UNSCHEDULED consultation/visit at the doctor's home or rooms: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146, 0126 or 0147 may be charged and not combinations thereof	R 545,80	R 834,50	R 834,50	R 545,80
I.c.5.	Observation care				
7050	Initial observation care, per day: Evaluation and management of a patient. Requires the following 3 key components: (a) detailed or comprehensive history (b) detailed or comprehensive examination (c) straightforward or low complexity medical decision making. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 644,60	R 985,80	R 765,00	R 644,60
7051	Initial observation care, per day. Evaluation and management of a patient. Requiring the following 3 components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of moderate complexity. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 644,60	R 985,80	R 765,00	R 644,60

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Otorhinolaryngology
Code: **030**

Practice Type:
Rheumatology
Code: **031**

Practice Type:
Paediatricians
Code: **032**

Practice Type:
**Plastic and
Reconstructive Sur**
Code: **036**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
7052	Initial observation care, per day. Evaluation and management of a patient. Requiring the following 3 components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of high complexity. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 644,60	R 985,80	R 765,00	R 644,60
I.c.6.	Emergency department				
7060	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) straightforward medical decision making. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor	R 208,20	R 318,20	R 246,90	R 208,20
7061	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) medical decision making of low complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low or moderate severity.	R 208,20	R 318,20	R 246,90	R 208,20
7062	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) medical decision making of moderate complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity.	R 208,20	R 318,20	R 246,90	R 208,20
7063	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) a detailed history (b) a detailed examination (c) medical decision making of moderate complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the medical practitioner but do not pose an immediate significant threat to life or physiologic function.	R 208,20	R 318,20	R 246,90	R 208,20
7064	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of high complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the medical practitioner and pose an immediate significant threat to life or physiologic function.	R 208,20	R 318,20	R 246,90	R 208,20

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Otorhinolaryngology
Code: **030**

Practice Type:
Rheumatology
Code: **031**

Practice Type:
Paediatricians
Code: **032**

Practice Type:
Plastic and Reconstructive Sur
Code: **036**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
I.e	Pre-anaesthetic assessment				
0151	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient (all hours). Problem focused history and clinical examination and straightforward decision making for minor problem. Typically occupies the doctor face-to-face with the patient for between 10 and 20 minutes	R 0,00	R 0,00	R 0,00	R 0,00
0152	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient (all hours). Detailed history and clinical examination and straightforward decision making and counselling. Typically occupies the doctor face-to-face with the patient for between 20 and 35 minutes	R 0,00	R 0,00	R 0,00	R 0,00
0153	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient or other consultative service. Consultation with detailed history, complete examination and moderate complex decision making and counselling. Typically occupies the doctor face-to-face for between 30 and 45 minutes	R 0,00	R 0,00	R 0,00	R 0,00
I.f	Prenatal visits and new born attendance				
0107	New born attendance: Exclusive attendance to baby at Caesarean section, normal delivery or visit in the ward (once per patient) (items 0109, 0111, 0113, 0145, 0146 and/or 0147 may not be added to item 0107)	R 0,00	R 0,00	R 1 018,60	R 0,00
	Item 0107 can be used once only for given confinement				
0113	New born attendance: Emergency attendance to newborn at all hours (once per patient) (items 0107, 0109, 0111, 0145, 0146 and/or 0147 may not be added to item 0113)	R 0,00	R 0,00	R 1 389,10	R 0,00
I.g	Consultative services: Miscellaneous				
0130	Telephone consultation (all hours)	R 361,20	R 541,80	R 541,90	R 361,20
0131	Subsequent injections or flu vaccinations as part of a planned series of injections for the same condition administered by medical doctors (refer to modifier 0017) (not to be coded together with any consultation item)	R 255,90	R 391,20	R 391,20	R 255,90
0132	Consulting service e.g. writing of repeat scripts or requesting routine pre-authorisation without the physical presence of the patient (needs not be face-to-face contact) ("Consultation" via SMS or electronic media included)	R 154,40	R 154,50	R 154,30	R 154,40
0133	Writing of special motivations for procedures and treatment without the physical presence of a patient (includes report on the clinical condition of a patient) requested by or on behalf of a third party funder or its agent	R 277,80	R 277,70	R 277,70	R 277,80

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Otorhinolaryngology
Code: **030**

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Rheumatology
Code: **031**

Practice Type:
Paediatricians
Code: **032**

Practice Type:
**Plastic and
Reconstructive Sur**
Code: **036**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0137	Patient and/or family education and/or guidance for a specific condition for 20 minutes, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0138	Patient and/or family education and/or guidance for a specific condition for 40 minutes, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0139	Patient and/or family education and/or guidance for a specific condition for 41 minutes and longer, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0199	Completion of chronic medication forms by medical practitioners with or without the physical presence of the patient requested by or on behalf of a third party funder or its agent	R 582,30	R 582,30	R 617,20	R 582,30

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Surgery/Paediatric surgery
Code: **042**

Practice Type:
Cardiothoracic Surgery
Code: **044**

Practice Type:
Urology
Code: **046**

Practice Type:
Paediatric Surgeon
Code: **114**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
	In calculating the GEMS Tariff, the following rounding method is used: Values R10 and below rounded to the nearest cent, R10+ rounded to the nearest 10cent. Modifier values are rounded to the nearest cent. When new item prices are calculated, e.g. when applying a modifier, the same rounding scheme should be followed. ALL GEMS TARIFFS ARE VAT INCLUSIVE.				
I.c.1.	New and established patient consultation/visit				
0190	New and established patient: Consultation/visit of new or established patient of an average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 521,40	R 797,20	R 521,40	R 521,40
0191	New and established patient: Consultation/visit of new or established patient of a moderately above average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 521,40	R 797,20	R 521,40	R 521,40
0192	New and established patient: Consultation/visit of new or established patient of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	R 521,40	R 797,20	R 521,40	R 521,40
0193	New and established patient: Consultation/visit of new or established patient of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109). Typically the doctor spends between 46 and 60 minutes with the patient and/or family.	R 521,40	R 797,20	R 521,40	R 521,40
I.c.2.	Hospital consult /visit				
0173	First hospital consultation/visit of an average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 511,70	R 782,40	R 511,70	R 511,70

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Surgery/Paediatric surgery
Code: **042**

Practice Type:
Cardiothoracic Surgery
Code: **044**

Practice Type:
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Code: **046**

Practice Type:
Paediatric Surgeon
Code: **114**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0174	First hospital consultation/visit of a moderately above average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 511,70	R 782,40	R 511,70	R 511,70
0175	First hospital consultation/visit of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	R 511,70	R 782,40	R 511,70	R 511,70
0178	Hospital follow-up visit to patient in ward or nursing facility with a duration of 31-60 minutes: ADD only to item 0109, as appropriate. Psychiatrists ("22") refer to items 0166-0169 for hospital follow-up visits	R 463,00	R 463,00	R 463,00	R 463,00
0179	Prolonged face-to-face attendance to a patient in ward or nursing facility: ADD only to item 0178 as appropriate, for each 15-minute period only if service extends 10 minutes or more inot the next 15-minute period following on the first 60 minutes (please state duration of visit on account in minutes).	R 463,00	R 463,00	R 463,00	R 463,00
0109	Hospital follow-up visit to patient in ward or nursing facility - Refer to general rule G(a) for post-operative care) (may only be charged once per day) (not to be used with items 0111, 0145, 0146, 0147 or ICU items 1204-1214)	R 463,00	R 463,00	R 463,00	R 463,00
0111	Paediatric hospital follow-up visits (excluding neonates) by paediatricians or paediatric cardiologists (may only be charged once per day) (not to be used with items 0109 or ICU items 1204-1214). For a healthy neonate please use item 0109 for a hospital follow-up visit	R 0,00	R 663,30	R 0,00	R 0,00
I.c.3.	Hospital discharge day management				
0176	Hospital discharge day management; 30 minutes or less	R 1 084,90	R 709,40	R 709,40	R 1 084,90
0177	Hospital discharge day management; more than 30 minutes (including a hospital summary)	R 1 084,90	R 709,40	R 709,40	R 1 084,90
I.c.4.	Add-on consultative services				
0129	Prolonged face-to-face attendance to a patient: ADD to either item 0192, item 0175, item 0164 or item 0169 as appropriate, for each 15-minute period only if service extends 10 minutes or more into the next 15-minute period following on the first 60 minutes	R 0,00	R 0,00	R 0,00	R 0,00
0145	For consultation/visit away from the doctor's home or rooms (non-emergency): ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164 or items 0166-0169, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 185,20	R 185,20	R 185,20	R 185,20

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Surgery/Paediatric surgery
Code: **042**

Practice Type:
Cardiothoracic Surgery
Code: **044**

Practice Type:
Urology
Code: **046**

Practice Type:
Paediatric Surgeon
Code: **114**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0146	For an unscheduled emergency consultation/visit at the doctors' home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate (refer to general rule B). Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 247,10	R 247,10	R 247,10	R 247,10
0147	For an emergency consultation/visit away from the doctor's home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	R 423,70	R 423,70	R 423,70	R 423,70
0148	For elective after-hours services on request of the patient or family (non emergency) (refer to general rule B(a)): ADD 50% of the fee for the appropriate consultation/visit item (only to be used with items 0190-0193, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153) and reflect this as a separate item 0148. Usage: This item is used when, for example, a patient or the family request the doctor for a non-emergency consultation/visit outside of the practitioners' normal hours period.	R 0,00	R 0,00	R 0,00	R 0,00
0149	After-hours bona fide emergency consultation/visit (21:00-06:00 daily): ADD 25% of the fee for the appropriate consultation/visit item (only to be used with items 0190-0193, items 0173-0175, items 0161-0164, items 0166-0169, items 0151-0153 or item 0113) and reflect this as a separate item 0149	R 127,90	R 195,60	R 127,90	R 127,90
0126	For an UNSCHEDULED consultation/visit at the doctor's home or rooms: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146, 0126 or 0147 may be charged and not combinations thereof	R 545,80	R 834,50	R 545,80	R 545,80
I.c.5.	Observation care				
7050	Initial observation care, per day: Evaluation and management of a patient. Requires the following 3 key components: (a) detailed or comprehensive history (b) detailed or comprehensive examination (c) straightforward or low complexity medical decision making. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 644,60	R 985,80	R 644,60	R 644,60
7051	Initial observation care, per day. Evaluation and management of a patient. Requiring the following 3 components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of moderate complexity. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 644,60	R 985,80	R 644,60	R 644,60

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Surgery/Paediatric surgery
Code: **042**

Practice Type:
Cardiothoracic Surgery
Code: **044**

Practice Type:
Urology
Code: **046**

Practice Type:
Paediatric Surgeon
Code: **114**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
7052	Initial observation care, per day. Evaluation and management of a patient. Requiring the following 3 components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of high complexity. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	R 644,60	R 985,80	R 644,60	R 644,60
I.c.6.	Emergency department				
7060	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) straightforward medical decision making. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor	R 208,20	R 318,20	R 208,20	R 208,20
7061	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) medical decision making of low complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low or moderate severity.	R 208,20	R 318,20	R 208,20	R 208,20
7062	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) medical decision making of moderate complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity.	R 208,20	R 318,20	R 208,20	R 208,20
7063	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) a detailed history (b) a detailed examination (c) medical decision making of moderate complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the medical practitioner but do not pose an immediate significant threat to life or physiologic function.	R 208,20	R 318,20	R 208,20	R 208,20
7064	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of high complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the medical practitioner and pose an immediate significant threat to life or physiologic function.	R 208,20	R 318,20	R 208,20	R 208,20

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
Surgery/Paediatric surgery
Code: **042**

Practice Type:
Cardiothoracic Surgery
Code: **044**

Practice Type:
Urology
Code: **046**

Practice Type:
Paediatric Surgeon
Code: **114**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
I.e	Pre-anaesthetic assessment				
0151	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient (all hours). Problem focused history and clinical examination and straightforward decision making for minor problem. Typically occupies the doctor face-to-face with the patient for between 10 and 20 minutes	R 0,00	R 0,00	R 0,00	R 0,00
0152	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient (all hours). Detailed history and clinical examination and straightforward decision making and counselling. Typically occupies the doctor face-to-face with the patient for between 20 and 35 minutes	R 0,00	R 0,00	R 0,00	R 0,00
0153	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient or other consultative service. Consultation with detailed history, complete examination and moderate complex decision making and counselling. Typically occupies the doctor face-to-face for between 30 and 45 minutes	R 0,00	R 0,00	R 0,00	R 0,00
I.f	Prenatal visits and new born attendance				
0107	New born attendance: Exclusive attendance to baby at Caesarean section, normal delivery or visit in the ward (once per patient) (items 0109, 0111, 0113, 0145, 0146 and/or 0147 may not be added to item 0107)	R 0,00	R 0,00	R 0,00	R 0,00
	Item 0107 can be used once only for given confinement				
0113	New born attendance: Emergency attendance to newborn at all hours (once per patient) (items 0107, 0109, 0111, 0145, 0146 and/or 0147 may not be added to item 0113)	R 0,00	R 0,00	R 0,00	R 0,00
I.g	Consultative services: Miscellaneous				
0130	Telephone consultation (all hours)	R 361,20	R 511,70	R 361,20	R 361,20
0131	Subsequent injections or flu vaccinations as part of a planned series of injections for the same condition administered by medical doctors (refer to modifier 0017) (not to be coded together with any consultation item)	R 255,90	R 391,20	R 255,90	R 255,90
0132	Consulting service e.g. writing of repeat scripts or requesting routine pre-authorization without the physical presence of the patient (needs not be face-to-face contact) ("Consultation" via SMS or electronic media included)	R 154,40	R 154,40	R 154,40	R 154,40
0133	Writing of special motivations for procedures and treatment without the physical presence of a patient (includes report on the clinical condition of a patient) requested by or on behalf of a third party funder or its agent	R 277,80	R 277,80	R 277,80	R 277,80

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type:
**Surgery/Paediatric
surgery**
Code: **042**

Practice Type:
**Cardiothoracic
Surgery**
Code: **044**

Practice Type:
Urology
Code: **046**

Practice Type:
Paediatric Surgeon
Code: **114**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE	TARIFF VALUE
0137	Patient and/or family education and/or guidance for a specific condition for 20 minutes, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0138	Patient and/or family education and/or guidance for a specific condition for 40 minutes, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0139	Patient and/or family education and/or guidance for a specific condition for 41 minutes and longer, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	R 0,00	R 0,00	R 0,00	R 0,00
0199	Completion of chronic medication forms by medical practitioners with or without the physical presence of the patient requested by or on behalf of a third party funder or its agent	R 582,30	R 582,30	R 582,30	R 582,30

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type: **Psychiatry**
Code: **022**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE
	<p>In calculating the GEMS Tariff, the following rounding method is used: Values R10 and below rounded to the nearest cent, R10+ rounded to the nearest 10cent. Modifier values are rounded to the nearest cent. When new item prices are calculated, e.g. when applying a modifier, the same rounding scheme should be followed.</p> <p>ALL GEMS TARIFFS ARE VAT INCLUSIVE.</p>	
I.c.1.	New and established patient consultation/visit	
0190	New and established patient: Consultation/visit of new or established patient of an average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	
0191	New and established patient: Consultation/visit of new or established patient of a moderately above average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	
0192	New and established patient: Consultation/visit of new or established patient of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109) - not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure	
0193	New and established patient: Consultation/visit of new or established patient of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (for hospital consultation/visit - refer to item 0173-0175 or item 0109). Typically the doctor spends between 46 and 60 minutes with the patient and/or family.	
I.c.2.	Hospital consult /visit	
0173	First hospital consultation/visit of an average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	

Codes appropriate to psychiatry consultations are contained in the Contracted Psychiatry Medical Practitioner file

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type: **Psychiatry**
Code: **022**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE
0174	First hospital consultation/visit of a moderately above average duration and/or complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	Codes appropriate to psychiatry consultations are contained in the Contracted Psychiatry Medical Practitioner file
0175	First hospital consultation/visit of long duration and/or high complexity. Includes counselling with the patient and/or family and co-ordination with other health care providers or liaison with third parties on behalf of the patient (not appropriate for pre-anaesthetic assessment followed by the appropriate anaesthetics - refer to new anaesthetic structure)	
0178	Hospital follow-up visit to patient in ward or nursing facility with a duration of 31-60 minutes: ADD only to item 0109, as appropriate. Psychiatrists ("22") refer to items 0166-0169 for hospital follow-up visits	
0179	Prolonged face-to-face attendance to a patient in ward or nursing facility: ADD only to item 0178 as appropriate, for each 15-minute period only if service extends 10 minutes or more inot the next 15-minute period following on the first 60 minutes (please state duration of visit on account in minutes).	
0109	Hospital follow-up visit to patient in ward or nursing facility - Refer to general rule G(a) for post-operative care) (may only be charged once per day) (not to be used with items 0111, 0145, 0146, 0147 or ICU items 1204-1214)	
0111	Paediatric hospital follow-up visits (excluding neonates) by paediatricians or paediatric cardiologists (may only be charged once per day) (not to be used with items 0109 or ICU items 1204-1214). For a healthy neonate please use item 0109 for a hospital follow-up visit	
I.c.3.	Hospital discharge day management	
0176	Hospital discharge day management; 30 minutes or less	
0177	Hospital discharge day management; more than 30 minutes (including a hospital summary)	
I.c.4.	Add-on consultative services	
0129	Prolonged face-to-face attendance to a patient: ADD to either item 0192, item 0175, item 0164 or item 0169 as appropriate, for each 15-minute period only if service extends 10 minutes or more into the next 15-minute period following on the first 60 minutes	
0145	For consultation/visit away from the doctor's home or rooms (non-emergency): ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164 or items 0166-0169, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type: **Psychiatry**
Code: **022**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE
0146	For an unscheduled emergency consultation/visit at the doctors' home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate (refer to general rule B). Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	Codes appropriate to psychiatry consultations are contained in the Contracted Psychiatry Medical Practitioner file
0147	For an emergency consultation/visit away from the doctor's home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof	
0148	For elective after-hours services on request of the patient or family (non emergency) (refer to general rule B(a)): ADD 50% of the fee for the appropriate consultation/visit item (only to be used with items 0190-0193, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153) and reflect this as a separate item 0148. Usage: This item is used when, for example, a patient or the family request the doctor for a non-emergency consultation/visit outside of the practitioners' normal hours period.	
0149	After-hours bona fide emergency consultation/visit (21:00-06:00 daily): ADD 25% of the fee for the appropriate consultation/visit item (only to be used with items 0190-0193, items 0173-0175, items 0161-0164, items 0166-0169, items 0151-0153 or item 0113) and reflect this as a separate item 0149	
0126	For an UNSCHEDULED consultation/visit at the doctor's home or rooms: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146, 0126 or 0147 may be charged and not combinations thereof	
I.c.5.	Observation care	
7050	Initial observation care, per day: Evaluation and management of a patient. Requires the following 3 key components: (a) detailed or comprehensive history (b) detailed or comprehensive examination (c) straightforward or low complexity medical decision making. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	
7051	Initial observation care, per day. Evaluation and management of a patient. Requiring the following 3 components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of moderate complexity. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type: **Psychiatry**
Code: **022**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE
7052	Initial observation care, per day. Evaluation and management of a patient. Requiring the following 3 components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of high complexity. Counselling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or needs. Usually, the problem(s) requiring admission to observation status are of high severity.	<p>Codes appropriate to psychiatry consultations are contained in the Contracted Psychiatry Medical Practitioner file</p>
I.c.6.	Emergency department	
7060	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) straightforward medical decision making. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor	
7061	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) medical decision making of low complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low or moderate severity.	
7062	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) expanded problem focused history (b) expanded problem focused examination (c) medical decision making of moderate complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity.	
7063	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) a detailed history (b) a detailed examination (c) medical decision making of moderate complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the medical practitioner but do not pose an immediate significant threat to life or physiologic function.	
7064	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: (a) comprehensive history (b) comprehensive examination (c) medical decision making of high complexity. Counselling and / or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the medical practitioner and pose an immediate significant threat to life or physiologic function.	

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type: **Psychiatry**
Code: **022**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE
I.e	Pre-anaesthetic assessment	
0151	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient (all hours). Problem focused history and clinical examination and straightforward decision making for minor problem. Typically occupies the doctor face-to-face with the patient for between 10 and 20 minutes	
0152	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient (all hours). Detailed history and clinical examination and straightforward decision making and counselling. Typically occupies the doctor face-to-face with the patient for between 20 and 35 minutes	
0153	Pre-anaesthetic assessment: Pre-anaesthetic assessment of patient or other consultative service. Consultation with detailed history, complete examination and moderate complex decision making and counselling. Typically occupies the doctor face-to-face for between 30 and 45 minutes	
I.f	Prenatal visits and new born attendance	
0107	New born attendance: Exclusive attendance to baby at Caesarean section, normal delivery or visit in the ward (once per patient) (items 0109, 0111, 0113, 0145, 0146 and/or 0147 may not be added to item 0107)	
	Item 0107 can be used once only for given confinement	
0113	New born attendance: Emergency attendance to newborn at all hours (once per patient) (items 0107, 0109, 0111, 0145, 0146 and/or 0147 may not be added to item 0113)	
I.g	Consultative services: Miscellaneous	
0130	Telephone consultation (all hours)	
0131	Subsequent injections or flu vaccinations as part of a planned series of injections for the same condition administered by medical doctors (refer to modifier 0017) (not to be coded together with any consultation item)	
0132	Consulting service e.g. writing of repeat scripts or requesting routine pre-authorisation without the physical presence of the patient (needs not be face-to-face contact) ("Consultation" via SMS or electronic media included)	
0133	Writing of special motivations for procedures and treatment without the physical presence of a patient (includes report on the clinical condition of a patient) requested by or on behalf of a third party funder or its agent	

Codes appropriate to psychiatry consultations are contained in the Contracted Psychiatry Medical Practitioner file

CONTRACTED MEDICAL PRACTITIONER CONSULTATIVE



GEMS TARIFF FOR CONSULTATIVE SERVICES BY CONTRACTED MEDICAL PRACTITIONERS WITH EFFECT FROM 1 JANUARY 2020

Practice Type: **Psychiatry**
Code: **022**

PRAC TYPE	DESCRIPTION OF TARIFF CODE	TARIFF VALUE
0137	Patient and/or family education and/or guidance for a specific condition for 20 minutes, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	Codes appropriate to psychiatry consultations are contained in the Contracted Psychiatry Medical Practitioner file
0138	Patient and/or family education and/or guidance for a specific condition for 40 minutes, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	
0139	Patient and/or family education and/or guidance for a specific condition for 41 minutes and longer, supported by the appropriate ICD-10 code(s). ICD-10 codes to be added for this service. This item may be added to a consultation if done in addition to the consultation (specific items from consultative services structure will be added in the wording of the description)	
0199	Completion of chronic medication forms by medical practitioners with or without the physical presence of the patient requested by or on behalf of a third party funder or its agent	