

GEMS TARIFF FOR SERVICES BY RADIOGRAPHERS WITH EFFECT FROM 1 JANUARY 2020

TARIFF CODE	TARIFF DESCRIPTION	CONVERSION FACTOR	BASE FACTOR	NUMBER OF UNITS	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.				
	DIAGNOSTIC PROCEDURES				
	Note: Items 015, 029, 031, 033, 037, 065, 071, 073, 075, 077, 079, 081, 083, 085, 087, 089, 091, 093, 095, 097, 099, 101, 115, 117, 119, 121, 129, 131, 133, 135, 137, 139, 141, 149, 167, 171 and 173 should be only be paid on condition that the radiographer submits the name of the supervising clinician and his/her BHF practice number. Schemes should not pay the radiographer if she/he is supervised by a radiologist.				
	GENERAL RULES				
1000	It is recommended that, when such benefits are granted, drugs, consumables and disposable items used during a procedure or issued to a patient on discharge will only be reimbursed by a medical scheme if the appropriate code is supplied on the account.				
	MODIFIERS				
0001	The specified call-out fee may be charged for any bona-fide, justifiable emergency occurring at any hour which requires the practitioner to travel to the patient. Individual medical schemes may require a motivation to accompany the claim.	290	1,00	12,490	R70,50
0021	Services rendered to hospital patients: Quote modifier 0021 on all accounts for services performed on hospital or day clinic patients.				
0800	Multiple examinations: Full fees				
0081	Repeat examinations: No reduction				
0084	Films should be charged under code 300.				
1	SKELETON				
1,1	LIMBS				
001	Finger, toe	290	1,00	12,300	R69,60
003	Limb per region, e.g. shoulder, elbow, knee, foot, hand, wrist or ankle (an adjacent part which does not require an additional set of views should not be added, e.g. wrist or hand)	290	1,00	16,200	R91,40
005	Smith-Petersen or equivalent control, in theatre	290	1,00	134,600	R759,20
007	Stress studies, e.g. joint	290	1,00	16,200	R91,40
009	Length studies per right and left pair of long bones	290	1,00	16,200	R91,40
011	Skeletal survey under 5 years	290	1,00	48,500	R273,60
013	Skeletal survey over 5 years	290	1,00	52,300	R295,20
015	Arthrography per joint	290	1,00	39,500	R222,90



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1,2	SPINAL COLUMN				
017	Per region, e.g. cervical, sacral, coccygeal, one region thoracic	290	1,00	24,600	R139,00
021	Stress studies	290	1,00	10,000	R56,70
025	Scoliosis studies	290	1,00	39,300	R221,80
027	Pelvis (sacro-iliac or hip joints only to be added where an extra set of views is required)	290	1,00	17,000	R96,00
	MYELOGRAPHY				
029	Lumbar	290	1,00	43,100	R243,30
031	Thoracic	290	1,00	40,100	R226,30
033	Cervical	290	1,00	59,400	R335,30
035	Multiple (lumbar, thoracic, cervical): Same fee as for first segment (no additional introduction of contrast medium)	290	0,00	0,000	R0,00
037	Discography	290	1,00	31,500	R177,60
1,3	SKULL				
039	Skull studies	290	1,00	32,300	R182,30
041	Paranasal sinuses	290	1,00	17,000	R96,00
043	Facial bones and/or orbits	290	1,00	34,900	R196,70
045	Mandible	290	1,00	26,000	R146,80
047	Nasal bone	290	1,00	16,200	R91,40
049	Mastoid: Bilateral	290	1,00	50,000	R282,00
	TEETH				
051	One quadrant	290	1,00	7,700	R43,40
053	Two quadrants	290	1,00	8,500	R48,10
055	Full mouth	290	1,00	10,800	R61,10
057	Rotation tomography of the teeth and jaws	290	1,00	14,600	R82,30
059	Temporo-mandibular joints: Per side	290	1,00	19,200	R108,10
061	Tomography: Per side	290	1,00	30,500	R172,00
063	Localisation of foreign body in the eye	290	1,00	30,700	R173,40
065	Ventriculography	290	1,00	37,400	R211,10
067	Post-nasal studies: Lateral neck	290	1,00	10,000	R56,70
069	Maxillo-facial cephalometry	290	1,00	26,900	R151,80
071	Dacryocystography	290	1,00	24,200	R136,50



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2	ALIMENTARY TRACT				
073	Sialography (plus 80% for each additional gland)	290	1,00	24,600	R139,00
075	Pharynx and oesophagus	290	1,00	22,800	R128,60
077	Oesophagus, stomach and duodenum (control film of abdomen included) and limited follow through	290	1,00	31,500	R177,60
079	Small bowel meal (control film of abdomen included, except when part of item 081)	290	1,00	27,700	R156,30
081	Barium meal and dedicated gastro-intestinal tract follow through (including control film of the abdomen, oesophagus, duodenum, small bowel and colon)	290	1,00	47,200	R266,40
083	Barium enema (control film of abdomen included)	290	1,00	50,900	R287,10
085	Biliary tract: ERCP (choledogram and/or pancreatography screening included)	290	1,00	47,000	R265,20
087	Gastric/oesophageal/duodenal intubation control	290	1,00	20,800	R117,30
089	Hypotonic duodenography (077 included)	290	1,00	57,300	R323,30
3	BILIARY TRACT				
091	Oral cholecystography	290	1,00	47,800	R269,80
093	Intravenous	290	1,00	58,600	R330,70
095	Operative: First series	290	1,00	58,100	R327,90
097	Subsequent series	290	1,00	24,000	R135,30
099	Post-operative: T-tube	290	1,00	20,100	R113,60
101	Trans-hepatic, percutaneous	290	1,00	34,600	R195,10
103	Tomography of biliary tract: Add	290	1,00	21,500	R121,30
4	CHEST				
105	Larynx (tomography included)	290	1,00	42,400	R239,20
107	Chest (item 167 included)	290	1,00	19,200	R108,10
109	Chest and cardiac studies (item 167 included)	290	1,00	23,100	R130,20
111	Ribs	290	1,00	19,200	R108,10
113	Sternum or sterno-clavicular joints	290	1,00	24,600	R139,00
	BRONCHOGRAPHY				
115	Unilateral	290	1,00	33,500	R188,90
117	Bilateral	290	1,00	56,500	R318,90
119	Pleurography	290	1,00	15,700	R88,60
121	Laryngography	290	1,00	15,700	R88,60
123	Thoracic inlet	290	1,00	15,700	R88,60



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5	ABDOMEN				
125	Control films of the abdomen (not being part of examination for barium meal, barium enema, pyelogram, cholecystogram, cholangiogram, etc.)	290	1,00	17,000	R96,00
127	Acute abdomen or equivalent studies	290	1,00	30,700	R173,40
6	URINARY TRACT				
129	Control film included and bladder views before and after micturition	290	1,00	67,000	R378,10
133	Waterload test: Add	290	1,00	20,100	R113,60
135	Cystography only or urethrography only (retrograde)	290	1,00	37,600	R212,10
	CYSTO-URETHROGRAPHY				
137	Retrograde	290	1,00	33,100	R186,80
139	Retrograde-prograde pyelography	290	1,00	42,400	R239,20
141	Aspiration renal cyst	290	1,00	17,000	R96,00
143	Tomography of renal tract: Add	290	1,00	19,200	R108,10
7	GYNAECOLOGY AND OBSTETRICS				
145	Pregnancy	290	1,00	19,200	R108,10
147	Pelvimetry	290	1,00	35,500	R200,50
149	Hysterosalpingography	290	1,00	32,000	R180,30
8	TOMOGRAPHY AND CINEMATOGRAPHY				
151	Tomography (conventional except where otherwise specified): Add 100% provided that if it is more than one dimension, fees shall be charged for the additional investigation at 50% of the rate with a maximum of two additional investigations	290	0,00	0,000	
153	Tomography (multi-dimensional in motion): Add 150%	290	0,00	0,000	
9	COMPUTED TOMOGRAPHY				
155	Head, single examination, full series	290	1,00	262,700	R1 482,10
157	Head, repeat examination at the same visit, after contrast, full series	290	1,00	90,200	R508,70
159	Chest	290	1,00	303,700	R1 713,40
161	Abdomen (including base of chest and/or pelvis)	290	1,00	353,000	R1 991,50
163	Multiple examinations: For an additional part, the lesser fee shall be reduced to	290	1,00	82,100	R463,20
165	Limbs and other limited examinations	290	1,00	82,100	R463,20
	MODIFIER GOVERNING THIS SPECIFIC SECTION OF THE TARIFFS				
0089	The number of sections of each examination and the matrix number must be specified. A full series of sections would be 8 or more for brain examinations, 12 or more for chest examinations, and 16 or more for abdomen examinations. Fees for examinations on a matrix number of less than 250 shall be reduced by 50%				



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10	MISCELLANEOUS				
167	Fluoroscopy: Per half hour: Add (not applicable to items 107 and 109)	290	1,00	21,400	R120,90
169	Where a C-arm portable x-ray unit is used in hospital or theatre: Per half hour: Add	290	1,00	29,600	R167,00
171	Sinography	290	1,00	44,300	R250,00
173	Bone densitometry	290	1,00	80,900	R456,50
175	Mammography: Unilateral or bilateral	290	1,00	58,100	R327,90
177	Repeat mammography, unilateral or bilateral for localisation of tumour	290	1,00	58,100	R327,90
179	Attendance at operation in theatre or at radiological procedure performed by a surgeon or physician in x-ray department except 005: Per 1/2 hour: Plus fee for examination performed	290	1,00	17,600	R99,30
181	Setting of sterile trays	290	1,00	3,000	R16,90
	Films are to be charged (exclusive of VAT) at net acquisition price plus - * 26% of the net acquisition price where the net acquisition price of that material is less than one hundred rands; and * a maximum of twenty six rands where the net acquisition price of that material is greater than or equal to one hundred rands.				
300	X-Ray films				
	ATTENDANCE IN CATHETERISATION LABORATORY				
	Use codes 191 to 193 to charge for radiographer input where that is not included in cath lab facility fee				
191	Preparation in catheterisation laboratory for purposes of cardiac catheterisation and/or invasive intravascular procedures.	290	1,00	43,000	R242,60
192	Post-processing in catheterisation laboratory for purposes of cardiac catheterisation and/or invasive intravascular procedures	290	1,00	43,000	R242,60
193	Coronary angiogram per 30 minutes or part thereof provided that such part comprises 50% or more of the time	290	1,00	43,000	R242,60
194	Right heart investigation of valve and venous system of the right heart	290	1,00	43,000	R242,60
195	PTCA per 30 minutes or part thereof provided that such part comprises 50% or more of the time	290	1,00	43,000	R242,60
196	Left heart investigation of valve of the left heart and ventrical	290	1,00	43,100	R243,30
197	Stent procedure per 30 minutes or part thereof provided that such part comprises 50% or more of the time	290	1,00	43,000	R242,60
199	Vascular Study per 30 minutes or part thereof provided that such part comprises 50% or more of the time	290	1,00	43,000	R242,60
201	Temporary pacemaker procedure per 30 minutes or part thereof provided that such part comprises 50% or more of the time	290	1,00	43,000	R242,60
203	Permanent pacemaker procedure in catheterisation laboratory per 30 minutes or part thereof provided that such part comprises 50% or more of the time	290	1,00	43,000	R242,60
205	Intra-aortic balloon pump procedure per 30 minutes or part thereof provided that such part comprises 50% or more of the time	290	1,00	43,000	R242,60
207	Electro-physiological studies per 30 minutes or part thereof provided that such part comprises 50% or more of the time	290	1,00	43,000	R242,60
209	Bleomycine and other studies per 30 minutes or part thereof provided that such part comprises 50% or more of the time	290	1,00	43,000	R242,60



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211	Intra vascular ultrasound per 30 minutes of part thereof provided that such part comprises 50% or more of the time	290	1,00	43,000	R242,60
213	Rotablator/Laser procedures per 30 minutes or part thereof provided that such part comprises 50% or more of the time	290	1,00	43,000	R242,60
215	Embolisation per 30 minutes or part thereof provided that such part comprises 50% or more of the time	290	1,00	43,000	R242,60
	RULES				
Z	NO FEE TO BE SUBJECT TO MORE THAN ONE REDUCTION				
11	PORTABLE UNIT EXAMINATIONS				
185	Where portable x-ray unit is used in the hospital or theatre: Add	290	1,00	19,400	R109,50
187	Theatre investigations with fixed installation: Add	290	1,00	8,300	R46,80