

	<b>MEDISCOR (PTY) LTD</b> Baobab Building, River Falls Office Park, Rose Avenue, Centurion PO Box 8796, Centurion, 0046 Tel: (012) 674 8000 Fax: (012) 674 8001	<b>NOTIFICATION 78 OF 2019</b>
		<b>11 December 2019</b>

## Health Insurance

Wesmart Health Insurance

## Administrator

Wesmart Health Insurance

## Options

- DOCSURE ADVANCED (109001)
- DOCSURE INTERMEDIATE (109002)
- DOCSURE SIMUNYE (109003)
- DOCSURE PRIMARY (109004)
- DOCSURE MEDISEC (109005)
- DEMA-SURE (109006)
- DOCSURE START-UP RH (109007)
- DOCSURE PRIMARY RH (109008)
- DOCSURE DEMA-SURE RH (109009)
- DOCSURE SIMUNYE RH (109010)
- DOCSUREINTERMEDIATE RH (109011)
- GOLDEN HOUR (109012)
- GOLDEN HOUR LEVEL 1 (109013)
- GOLDEN HOUR LEVEL 2 (109014)

## Information Relevant to

Benefits and Options for 2020

## Effective Date

1 January 2020

With effect 1 January 2020, Mediscor will apply the insurance funder rules applicable to pharmacies for Wesmart Health Insurance as outlined below.

### Herewith the detail for submitting medicine claims to Mediscor:

1.	<b>Claiming Code (PCN)</b>	<b>MDS0109</b>
2.	<b>Switch Destination Code</b>	<b>WESM0001</b>
3.	<b>EDI Activation Code (Dispensing Doctors)</b>	<b>998P</b>
4.	<b>Default Reference Pricing</b>	<b>MRP</b>
5.	<b>Maximum supply of medicine</b>	<b>30 Days</b>
6.	<b>Days supply of the dispensed medicine</b>	<b>Yes / Compulsory</b>
7.	<b>Membership number as per membership card</b>	<b>Yes / Compulsory</b>
8.	<b>Dependant code as per membership card</b>	<b>Yes / Compulsory</b>
9.	<b>Dependant first name as per membership card</b>	<b>Yes / Compulsory</b>
10.	<b>Dependant date of birth</b>	<b>Yes / Compulsory</b>
11.	<b>Dependant gender (male/female)</b>	<b>Yes / Compulsory</b>
12.	<b>Practice number of the prescriber</b>	<b>Yes / Compulsory</b>
13.	<b>ICD-10 diagnosis code</b>	<b>Yes / Compulsory</b>
14.	<b>9-digit NAPPI code of medicine dispensed</b>	<b>Yes / Compulsory</b>
15.	<b>Membership number requirements</b>	<b>Alpha numeric as per membership card</b>
16.	<b>Payments to Providers</b>	<b>Mediscor PBM</b>
17.	<b>Chronic pre-authorisation</b>	<b>Medicor ChroniLine®</b>
18.	<b>Default Dispensing Fee – Pharmacies</b>	<b>SEP + 30%/R33 (Excl. VAT)</b>
19.	<b>PESA Exclusions</b>	<b>3-5; 7-9; 11; 14; 15; 17; 22-25; 27; 29-32; 43; 45; 53; 60; 61</b>

- Due to the complexities of the various levies, co-payments, formularies and exclusion criteria; service providers must refer to our on-line responses to understand the rules applied.
- Dispensing fees may differ from the default fee where DSP's (and PPN's) have been contracted by the Funder.
- Dispensing fee structure(s) will be applied on scheduled medicines (0 – 8) and unscheduled products.

Refer to Mediscor website [www.mediscor.co.za](http://www.mediscor.co.za)

Only acute medicine as well as selective chronic medicine for certain options may be dispensed by pharmacies.

**IF YOU REQUIRE ANY ASSISTANCE, PLEASE CONTACT:**

**Mediscor's Contact Centre** : **0860 113 238 or 0860 117 705**

**Mediscor E-Mail** : [info@mediscor.co.za](mailto:info@mediscor.co.za)

**Mediscor ChroniLine®** : **0860 119 553**

**Wesmart** : **010 511 1170**

**Wesmart E-Mail** : [claims@wesmart.co.za](mailto:claims@wesmart.co.za)

Please send any questions regarding this communiqué to [updates@mediscor.co.za](mailto:updates@mediscor.co.za)

Kind regards

**ILSE STEYN**