

	<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 30 OF 2020</b>
		<b>30 April 2020</b>

<b>Medical Scheme</b>	Sizwe Copper Core Plan
<b>Administrator</b>	Enabledmed
<b>Option</b>	<b>Copper Core Plan</b> (previously Gomomo Care)
<b>Information Relevant to</b>	Chronic pre-authorisation done by ChroniLine®
<b>Effective Date</b>	Immediate

With immediate effect, Mediscor will apply the scheme rules applicable to pharmacies for **Sizwe Copper Core Plan** as outlined below.

**Herewith the details for submitting medicine claim to Mediscor:**

<b>1.</b>	<b>Claiming Code (PCN)</b>	<b>MDS0090</b>
<b>2.</b>	<b>Switch Destination Code</b>	<b>SBOP0001</b>
<b>3.</b>	<b>EDI Activation Code (Dispensing Doctors)</b>	<b>No</b>
<b>4.</b>	<b>Default Reference Pricing</b>	<b>MRP</b>
<b>5.</b>	<b>Maximum supply of medicine</b>	<b>30 Days</b>
<b>6.</b>	<b>Days supply of the dispensed medicine</b>	<b>Yes / Compulsory</b>
<b>7.</b>	<b>Membership number as per membership card</b>	<b>Yes / Compulsory</b>
<b>8.</b>	<b>Dependant code as per membership card</b>	<b>Yes / Compulsory</b>
<b>9.</b>	<b>Dependant first name as per membership card</b>	<b>Yes / Compulsory</b>
<b>10.</b>	<b>Dependant date of birth</b>	<b>Yes / Compulsory</b>
<b>11.</b>	<b>Dependant gender (male/female)</b>	<b>Yes / Compulsory</b>
<b>12.</b>	<b>Practice number of the prescriber</b>	<b>Yes / Compulsory</b>
<b>13.</b>	<b>ICD-10 diagnosis code</b>	<b>Yes / Compulsory</b>
<b>14.</b>	<b>9-digit NAPPI code of medicine dispensed</b>	<b>Yes / Compulsory</b>
<b>15.</b>	<b>Membership number requirements</b>	<b>11 Numerical digits</b>
<b>16.</b>	<b>Payments to Providers</b>	<b>Enabledmed</b>
<b>17.</b>	<b>Chronic pre-authorisation</b>	<b>Mediscor ChroniLine®</b>
<b>18.</b>	<b>Default Dispensing Fee – Dispensing Doctors</b>	<b>N/A</b>
<b>19.</b>	<b>Default Dispensing Fee – Pharmacies</b>	<b>SEP + 30%/R30 (Excl. VAT)</b>
<b>20.</b>	<b>Default Dispensing Fee – Over the counter (OTC)</b>	<b>SEP + 30%/R30 (Excl. VAT)</b>
<b>21.</b>	<b>PESA Exclusions</b>	<b>1-11, 14-16, 19-35, 38-41, 43-48, 50-53, 55-64</b>

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

**LIMITATIONS AND SPECIAL REQUIREMENTS:**

Pre-authorisation for the following is required from Enabledmed:

- Products requiring pre-authorisation from the acute benefit

Pre-authorisation for the following is required from Mediscor ChroniLine®:

- HIV / Aids
- Chronic benefit
- PMB benefit

**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 or 0860 106 203**

**Enabledmed** : **0860 002 400**

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

Kind Regards

**ILSE STEYN**