

 mediscor pbm <small>Pharmaceutical Benefit Management</small> <i>Solutions Together</i>	MEDISCOR (PTY) LTD Baobab Building, River Falls Office Park, Rose Avenue, Centurion PO Box 8796, Centurion, 0046 Tel: (012) 674 8000 Fax: (012) 674 8001	NOTIFICATION 88 OF 2021
		9 December 2021

Health Insurance	Sanlam Primary Care
Administrator	Essential Med
Options	<ul style="list-style-type: none"> • <i>ESS000201 PRIMARY STANDARD</i> • <i>ESS000202 PRIMARY STANDARD+ACCIDENT</i> • <i>ESS000203 COMPREHENSIVE PLUS</i> • <i>ESS000204 COMPREHENSIVE ADVANCED</i>
Information Relevant to	New Client – Sanlam Primary Care
Effective Date	01 January 2022

With effect 1 January 2022, Mediscor will apply the health insurance funder rules applicable to pharmacies for Sanlam Primary Care as outlined below.

Herewith the detail for submitting medicine claims to Mediscor:

1.	Claiming Code (PCN)	ESS0002
2.	Switch Destination Code	SPHE0008
3.	EDI Activation Code (Dispensing Doctors)	N/A
4.	Default Reference Pricing	MRP
5.	Maximum supply of medicine	30 Days
6.	Days supply of the dispensed medicine	Yes / Compulsory
7.	Membership number as per membership card	Yes / Compulsory
8.	Dependant code as per membership card	Yes / Compulsory
9.	Dependant first name as per membership card	Yes / Compulsory
10.	Dependant date of birth	Yes / Compulsory
11.	Dependant gender (male/female)	Yes / Compulsory
12.	Practice number of the prescriber	Yes / Compulsory
13.	ICD-10 diagnosis code	Yes / Compulsory
14.	9-digit NAPPI code of medicine dispensed	Yes / Compulsory
15.	Membership number requirements	Alpha numeric as per membership card
16.	Payments to Providers	Mediscor PBM
17.	Chronic pre-authorisation	Mediscor ChroniLine®
18.	Default Dispensing Fee – Pharmacies	SEP + 30%/R33 (Excl. VAT)
19.	PESA Exclusions	3-5; 7-9; 11; 14; 15; 17; 22-25; 27; 29-32; 43; 45; 53; 60; 61

- 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.

SANLAM Primary Care Clinic Service for 2022

#	Code	Description	2022 (Excl. VAT)	2022 (Incl. VAT)
1	981133001	SANLAM PRMRYCARE NURSE CONSULT	R78.40	R90.16
2	981115001	SANLAM BLODD GLUCOSE TEST	R44.60	R51.29
3	981119001	SANLAM BREAST EXAM(BOTH)	R53.60	R61.64
4	981116001	SANLAM CHOLESTEROL TEST	R66.20	R76.13
5	981123001	SANLAM FOOT SCREENING(BOTH)	R53.60	R61.64
6	981125001	SANLAM HB SCREENING	R69.00	R79.35
7	981121001	SANLAM HBA1C SCREENING	R130.00	R149.50
8	981113001	SANLAM HIV/VCT TEST/CNSL	R95.40	R109.71
9	981128001	SANLAM INJECTION ADMINISTRATION	R53.60	R61.64
10	981122001	SANLAM LIPOGRAM SCREENING	R130.00	R149.50
11	981127001	SANLAM MALARIA SCREENING	R69.00	R79.35
12	981118001	SANLAM PAP SMEAR	R120.80	R138.92
13	981124001	SANLAM PEAK FLOW MEASUREMENT	R26.20	R30.13
14	981120001	SANLAM PREGNANCY URINE TEST WITH CNSL	R53.60	R61.64
15	981129001	SANLAM SYRINGE EARS(BOTH)	R69.00	R79.35
16	981126001	SANLAM URINE TEST SCREENING	R53.60	R61.64
17	981062001	FLU VAC ADMINISTRATION	R31.40	R36.11

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

Mediscor ChroniLine® : **0860 119 553**

Sanlam Primacy Care : **0861 70 70 70**

Please send any questions regarding this communiqué to updates@mediscor.co.za

Kind regards

ILSE STEYN