

 mediscorpbm <small>Pharmaceutical Benefit Management</small> <i>Solutions Together</i>	MEDISCOR (PTY) LTD 1257 South Street, Centurion PO Box 8796, Centurion, 0046 Tel: (012) 674 8000 Fax: (012) 674 8001	NOTIFICATION 34 OF 2014
		10 December 2014

Medical Scheme	SAMWUMED
Administrator	SAMWUMED
Information Relevant to	Benefits and Options for 2014/15 (Amended switch destination code)
Effective Date	26 December 2014

With effect **26 December 2014**, Mediscor will be applying the scheme rules for **SAMWUMED** as outlined below.

Herewith the detail for submitting medicine claims to Mediscor:

1.	Scheme Code (PCN)	MDS0092
2.	Switch Destination Code	SAMW0001
3.	EDI Activation Code (Dispensing Doctors)	611P
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's 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	Min 9 numerical digits
16.	Payments to Providers	SAMWUMED
17.	Chronic pre-authorisation	Mediscor ChroniLine®
18.	Default Dispensing Fee – Dispensing Doctors	SEP + 30%/R27.00 (Excl. VAT)
19.	Default Dispensing Fee – Pharmacies	SEP + 36%/R59.40 (Excl. VAT)
20.	Over the counter (OTC)	SEP + 36%/R59.40 (Excl. VAT)
21.	PESA Exclusions*	3-5, 14, 16, 19-20, 22-28, 30-32, 34, 40-41, 43-51, 53, 55, 60-61

- 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.

* Refer to Mediscor website www.mediscor.net

IMPORTANT: The details below serve as a **GUIDELINE ONLY**.

Herewith the scheme rules for **SAMWUMED** effective from 26 December 2014:

OPTION	BENEFIT STRUCTURE	LEVY/CO-PAYMENT	REF. PRICING
Option A Option B	Acute	No	MRP
	Primary Healthcare Benefit Formulary	No	
	OTC	10% Option A: Maximum of R100 per day Option B: Maximum of R130 per day	
	PBM CDL Formulary	Mediscor Formulary	
	Non-CDL PMB	Formulary: Subject to state Non State claims: 25% on DTP medicines	
	HIV	No	
	HIV PEP	No	
	Oncology PMB	No	
	Oncology non-PMB (Option B Only)	No	
	Organ Transplant	No	
	Appliance Benefit	No	
	Preventative Care Benefit	No	
	Ex-Gratia	No	

LIMITATIONS AND SPECIAL REQUIREMENTS:

Pre-authorisation for the following is required from MSO:

- Oncology

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

- Medicines for Prescribed Minimum Benefits (PMB)
- HIV/AIDS pre-authorisation

IF YOU REQUIRE ANY ASSISTANCE, PLEASE CONTACT:

Mediscor's Contact Centre : **0860 113 238 / 0860 117 705**
Mediscor E-Mail : info@mediscor.co.za
Mediscor ChroniLine® : **0860 119 553 or 0860 106 203**
Mediscor HIV/AIDS : **0861 018 883**
SAMWUMED Call Centre : **0860 104 117**
MSO Oncology authorisations : **0860 333 387**
MSO E-Mail : samwumedpreauth@mso.co.za

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

Kind Regards

ILSE STEYN