

Electronic Authorisation

Provider Details

Provider Number:	34630	Provider Tel:	0114804373
Provider Name:	DR K M RADEBE	Provider Fax:	0114840396
Specialist Network:	Yes		

Member Details

Member Number:	7970147	Dependant Number:	3
Name:	LUKHANYO	Surname:	MDENI
Date of Birth:	2018/02/28	ID Number:	1802286062086
Patient Age:	1 year(s)	Gender:	Male
Scheme:	MediHelp	Scheme Option:	Unify (UY)
Contact:	0846529115	Status:	Active
Network Option:	No		

Authorisation Details

Auth Type:	Hospital		
Auth Number:	201903270183	Capture Date:	2019/03/27
Admission Date:	2019/03/27 13:05	Discharge Date:	2019/03/29 00:00
Auth Captured/Updated Date:	2019/03/27 15:34:46		
Auth Status:	Accept	Auth Status Reason:	
Admission ICD:	R50.9	Description:	FEVER UNSPECIFIED
Primary ICD:	R50.9	Description:	FEVER UNSPECIFIED
Secondary ICD:		Description:	
Co-Morbidity ICD:		Description:	
Facility Provider:	5803004	Facility Name:	PARK LANE CLINIC
Hospital case number:		Number Of Days:	2.0
Procedure Co-Payment:	0.0		
PMB:	No		

Notes

Creation Date	Notes
2019/03/27 15:34:42	Medihelp will grant benefits for one overnight stay only and has requested the hospital case management department to provide further clinical information and a treatment plan to support the reason for the admission and to extend the length of stay. Please note that pre-authorisation must be obtained for any planned surgical interventions, as conditions, limits and co-payments may apply. Please send this information to fax number 012 336 9523 or to hmanagement@medihelp.co.za . Kind regards
2019/03/27 13:51:31	Benefit authorisation during the first year of membership is routinely subject to an investigation to determine the possible non-disclosure of pre-existing medical conditions by the member. You may admit the patient while this investigation is under way, but the member will remain liable for all costs until Medihelp has confirmed the available benefits in terms of the Rules by email or phone.
2019/03/27 13:51:07	Medihelp cannot grant benefits for this hospital admission due to insufficient information received with the benefit authorisation request. Kindly provide a treatment plan and further clinical information to support the reason for the admission and to extend the length of stay. Please note that Medihelp must pre-authorise any planned surgical interventions. You can provide the information to Medihelp by phone on 086 0200 678 or by email to hospitalauth@medihelp.co.za. You may admit the patient in the meantime, but the member will remain liable for all costs until Medihelp has confirmed benefits in terms of the Medihelp Rules.

CPT Details					
Cpt Code	Cpt Description	Modifier Code	Modifier Description	Theatre Time	Procedure Date
99222	Initial Hospital Care, per day, for the evaluation and management of a patient.			0.00	

Hospital Level Of Care Details					
Level Of Care	Approved Length Of Stay	Date From	Date To	Ward Tariff	
004- Medical Ward General Fee	2.00	2019/03/27 PM	2019/03/29 AM	58004	

Disclaimer:

Hospital authorisation is subject to the available benefits:

*Authorisation is only granted for the stated procedure and /or reason for admission. Any amendments must be pre-authorised. This authorisation is not a guarantee of payment, and it is given on the basis of information available at the time and is subject to the validity of the membership and to the Scheme rules, available benefits and Scheme tariff schedules. Pro-rated benefits will be applicable where interchange of benefit option plans took place during the current financial year. Existing illness conditions that haven't been disclosed on the application form (non-disclosures) are specifically excluded. Benefits for items with a Nappi code will be calculated according to the Nappi price for the items, as valid at the time of service. Medical practitioners and members should please take note of the following with regard to provisional PMB diagnosis: The ICD-10 code provided during pre-authorisation of hospitalisation determines whether or not a condition qualifies for PMB. Should pre-authorisation for the provisional diagnosis of a PMB condition be granted according to the relevant ICD-10 code, but the diagnosis is later confirmed as a non-PMB condition based on the results of a diagnostic procedure or investigation, the member will be responsible for a co-payment on the procedure, where applicable. A specialist DSP network exists for treatment of PMB conditions, should the current ICD or future ICDs qualify as a PMB condition. Voluntary use of a non-DSP provider will result in the claim being reimbursed at Medihelp Scheme tariffs. Medical practitioners and members should please take note of the following with regard to the tariff details: The amount confirmed will be affected / reduced by modifiers linked to the item codes. No modifiers have been taken into account in this confirmation. General rules or modifiers are applicable to certain item codes according to the Medihelp Scheme tariff and, where applicable, the tariff will be adjusted accordingly; this could affect the value of an item code and the amount payable as confirmed. Medihelp has not accepted all the codes and modifiers contained in the (MDCM) Medical Doctors' Coding Manual, or that of the representative associations of the specialists. Please note that this may influence the final reimbursement of the medical practitioner's account. Medihelp may conduct coding validation on non-PMB and PMB services and procedures that require hospitalisation. Coding validation refers to a process whereby a clinical consultant reviews the diagnostic and procedure codes provided during a hospital admission pertaining to the treatment of a condition to determine the validity, accuracy and completeness of these codes in accordance with accepted coding guidelines and protocols.

Medihelp is an authorised financial services provider (FSP No 15738)