

ANNEXURE D

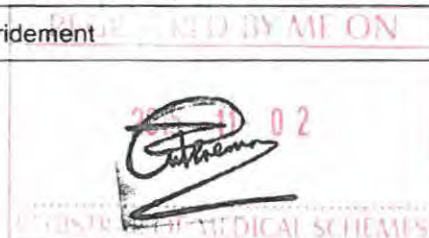
PROCEDURES PRE-AUTHORISED UNDER AUSPICES OF MANAGED HEALTHCARE

The following elective procedures will be funded from the hospital benefit if done in doctors' rooms, and day clinics. If these are done in hospital, the member may be liable for co-payment unless in case of emergency. If these procedures are done in the doctors' rooms, there is no need for pre – authorisation.

Procedure description
Additional intra-articular injection for arthritis
Ascites / pleural tapping
Aspiration of joint or intra-articular injection
Aspiration or injection
Bartholin's abscess- marsupialization
Bilateral myringotomy
Bilateral myringotomy with insertion of tube
Biopsy nerve
Biopsy or excision of cyst or lymph node biopsy
Biopsy: muscle, skin
Bronchial lavage.
Circumcision
Cone biopsy - cervix.
Dilation and Curettage (excluding aftercare)
Diathermy to nose or pharynx - under L.A.
Drainage of subcutaneous abscess. <u>Onychia</u> , etc.
Drainage of submucous abscess.
ENT endoscopy in rooms with rigid endoscope
Excision of cysts or tumours (vagina).
Excision of the ganglion
Excision of lymph node for biopsy - neck or axilla.
Excision of meibomian cyst.



Procedure description
Fine needle aspiration cytology
Fine needle aspiration for soft tissue (all areas including breast).
Flexible nasopharyngo-laryngoscope examination
Incision and drainage of peri-anal abscess.
Intra-articular injection for arthritis - first joint.
Intra-pleural block
Laser tonsillectomy
Limb cast.
Ludwig's angina: drainage
Opening of quinsy at rooms.
Plexus nerve block
Proctoscopy with removal of polyps - first time.
Proof puncture at rooms (unilateral).
Proof puncture uni or bilateral under G.A.
Proctoscopy with removal of polyps -subsequent times
Removal of foreign body-deep fascia (except hands)
Removal of foreign body (except hands).
Removal of single nasal polyp at rooms.
Retropharyngeal abscess external approach.
Retropharyngeal abscess internal approach.
Secondary suturing
Suturing of contused lacerated wounds
Tendon or ligament injection.
Tonsillectomy (dissection of the tonsils)
Treatment by chemo-cryotherapy
Treatment by chemo-cryotherapy - first lesion.
Vasectomy - uni- or bilateral.
Vulva and introitus - drainage of abscess.
Wound debridement



Pre - authorisation policies and procedure

Where applicable, pre- authorisation must be obtained for clinical services and will be subject to benefit limits. Managed Healthcare might require a clinical motivation for certain services, subject to clinical protocols.

Pre-authorisation for hospitalisation

All elective / scheduled hospital admissions must be pre-authorised and where indicated a hospital network will apply

- You may obtain a hospital authorisation number by phoning the Hospital Risk Management programme department
- Payment to a hospital is subject to meeting the stipulated standards like pre-authorisation, clinical necessity, appropriate treatment, benefit limits and prescribed minimum benefits (PMBs).
- If you are admitted to an intensive care unit (ICU) or high care ward (HC), the hospital is required to motivate your continued accommodation in either of these facilities every 72 hours.
- You may be liable for a co-payment (except in the case of an emergency):
 - if your option stipulates that you use a hospital network
 - if you have not obtained a pre-authorisation.
- In case of an emergency the scheme must be notified within 48 hours or first working day after treatment or admission.
- *An authorisation does not guarantee payment.*

Pre-authorisation for dentistry

It is not necessary to obtain authorisation for routine procedures, e.g. fillings, extractions. However registration is necessary when more than four fillings and two root canal treatments are required.



Basic dentistry

- The scheme must authorise dental procedures that require general anaesthesia.
- Procedures done under general anaesthesia are only permitted for children under the age of seven (7) years or in the case of the surgical removal of impacted wisdom teeth.

Specialised dentistry

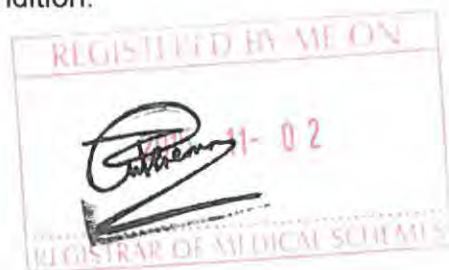
- All specialised dentistry services and procedures must be pre-authorised.
- If any of the procedures involve hospitalisation, the member must obtain a pre-authorisation number via the Managed Healthcare organization.

Maxillofacial Surgery

- All procedures performed by maxillofacial surgeon in hospital must be authorised.

Pre-authorisation for PMB CDL / Chronic condition

- The Disease Risk Management (DRM) Care plan programme will grant each registered beneficiary a certain number of consultations and investigations according to the clinical protocols.
- The beneficiary is notified about these benefits at the beginning of each calendar year or shortly after being diagnosed with the condition.



- No co-payment applies for the treatment of a PMB CDL and or chronic condition if you use the medicines within the Medicine Reference price or medicine 'basket(s)'

Pre-authorisation of high cost or non-effective procedures

- High cost and non-effective procedures are pre-authorised at the auspices of managed healthcare.
- Where there is an alternative option of treatment the scheme might limit the benefit to the price of the open procedure.

