



Capt H.E. Potas 56 Boekenhout Cres Wavecrest 6330

05 February 2020

Reference: PLM105001 / 04322193

Member Number: 64004260710

Dependent: 00

Dear Capt Potas,

PAYMENT OF SERVICES FOR MANAGEMENT OF YOUR CONDITION

POLMED has put a Care Plan in place that provides you with specific benefits for the management of your condition. POLMED will pay for the diagnosis, treatment and care of a number of chronic conditions.

What is a Care Plan?

A Care Plan is a list of the services that POLMED will cover. It details the care you have access to in order to manage your condition.

The Care Plan for your condition(s) is provided on the following page.

Please note that the services listed in your Care Plan are for the duration of the year and will be paid in full from the Overall In-hospital benefit.

What if I need more treatment than is listed in my Care Plan?

If you need treatment and care in excess of your Care Plan, a clinical motivation needs to be provided and approved before more services will be covered.

Do I need to do anything?

A Care Plan has automatically been put in place for you. Please make sure that every claim you send to POLMED has an ICD-10 code reflected on it so that it can be identified on the system and paid from the correct benefit limit.

It is important to note that this treatment plan is based on the specified diagnosis and does not take into account other chronic conditions you are already registered for. If you have any other active treatment plans, this one will be merged with the existing plans and will not be additional to that plan. This means you will be authorised for the maximum of the highest number of treatments in the plan for each service. For example, if you have 2 chronic conditions, with 3 GP consultations for the one condition and 2 GP consultations for the other condition, you will be authorised for the maximum of 3 GP consultations overall, to be used for both conditions, and not 5 GP consultations.

Chronic medication approved for the specified condition(s) will be communicated in a separate communication.

For more information or to submit a motivation, please contact the POLMED Client Service Call Centre on 0860 765 633 or send an email to polmedapmb@medscheme.co.za.

Kind regards,

POLMED PMB DEPARTMENT

Capt HE Potas

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Status of authorisation, subject to membership eligibility.

A PMB treatment guideline ('basket of care') has been activated in respect of the following disease(s).

Diagnosis Description	Start Date	End Date
HYPOTHYROIDISM	01-Jan-2020	31-Dec-2020

In terms of the approved treatment guideline for your condition, POLMED will fund the following benefits as per the Scheme Rules. (Please note that certain of these benefits may only be obtained from a Designated Service Provider and co-payments may apply).

Service Description	Extended Description	Tariff Codes	Disciplines Allowed	No Per Year
ECG	Without effort.	1232	General Practitioner, Specialist	1
			Family Medicine	
ECG		477387, 643064,	General Practitioner, Specialist	10
		432814, 541369,	Family Medicine	
		413345, 433152,		
		493663, 588415,		
		494792, 433004,		
		444610, 405234,		
		406977, 402971,		
		431188, 432717,		
		127483		
GP Consultations		0190, 0191, 0192	General Practitioner, Specialist	2
			Family Medicine	
Pathology	Free thyroxine - FT4	4482	Pathologists	1
Pathology	Thyrotropin - TSH	4507	Pathologists	1
Pathology	Thyrotropin - TSH-Free	4484	Pathologists	1
	Thyroxine - FT4			

Kindly note that if you are registered with CDE the above in relation to diabetes type 1 or diabetes type 2 can be ignored.