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Dear Service Provider

**Subject: Tariff codes 0146 or 0147**

Based on a claims analysis that was conducted on your practice, **UMVUZO HEALTH** noted that tariff code 0146 or 0147 was used extensively.

Although we appreciate that there are distinct differences in patient profiles from practice to practice your utilization of tariff code 0146 or 0147 requires more input from you.

Tariff code 0146's description states the following (quoted verbatim from the NHRPL tariff descriptor):

*"For an **unscheduled emergency consultation/visit** at the doctors' home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0161-0164 or items 0151-0153, as appropriate (refer to general rule B). Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof"*

Tariff code 0147's description states the following (quoted verbatim from the NHRPL tariff descriptor):

*"For an **emergency consultation/visit** away from the doctor's home or rooms, all hours: ADD only to the consultation/visit items 0190-0192, items 0173-0175, items 0161-0164, items 0166-0169 or items 0151-0153, as appropriate. Note: Only one of items 0145, 0146 or 0147 may be charged and not combinations thereof"*

It is important to note that the common denominator in both codes 0146 and 0147 is the term "**emergency consultation/visit**". The definition of a medical emergency as defined in the Medical Schemes Act 131 of 1998 is:

*"**emergency medical condition**" means the sudden and, at the time, unexpected onset of a health condition that requires immediate medical or surgical treatment, where failure to provide medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part, or would place the person's life in serious jeopardy;*

For ease of reference, please find attached a communique from the Council for Medical Schemes that provides clarity on when a clinical case is deemed a medical emergency for funding purposes (**ANNEXURE A**).

In this regard, **UMVUZO HEALTH**, like all medical aids in South Africa, must comply with all Sections in the Medical Schemes Act (MSA) in adjudicating payment to service providers and as such medical emergencies should be paid in line with the definition as stipulated in the MSA.

Based on the analysis of your claims that were paid by **UMVUZO HEALTH** from January 2021 to date, it was noted that tariff codes 0146 and/or 0147 were used for ICD10 codes where there's insufficient evidence to confirm

compliance with the criteria for a medical emergency as highlighted above. Our analysis revealed that tariff codes 0146 and/or 0147 were not always appropriately billed by your practice.

Consistent with Section 59(3) of the MSA and **UMVUZO HEALTH**'s fiduciary duty, the Scheme is not expected to pay claims negligently, particularly where there is reasonable suspicion of irregularity. Accordingly, the scheme has resolved to write back payments that were made towards your practice where tariff codes 0146 and/or 0147 were used inappropriately.

The impacted claims and member details will be reflected in your next member statement from **UMVUZO HEALTH**.

You have the right to resubmit verifiable clinical information, if you are of the view that tariff codes 0146 and/or 0147 were used appropriately for medical emergencies as described in the MSA to [compliance@umvuzohealth.co.za](mailto:compliance@umvuzohealth.co.za)

Yours sincerely,

**FRAUD, WASTE AND ABUSE TEAM**  
**UMVUZO HEALTH MEDICAL SCHEME**