

## **CIRCULAR TO SUPPLIERS OF SERVICES**

**2016 Issue 1**



Witbank Coalfields Medical Aid Scheme

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### **BANKING DETAILS (EFT)**

For security reasons no cheques are issued. Suppliers of medical services must ensure that the Scheme has their correct banking details for electronic payments to their practices. **Original documents are required.** We do not download the banking details from the BHF files.

### **WHAT WOULD HAPPEN IF NO BANKING DETAILS ARE AVAILABLE?**

**Suppliers are reminded that after several unsuccessful attempts to collect banking practice details, the Scheme will have no other option but to make payment directly to the member following the third month after date of treatment. The member will then have to settle the outstanding account with the supplier.**

### **ELECTRONIC REMITTANCE ADVICES (RA)/STATEMENTS**

Suppliers are requested to register their e-mail information with WCMAS in order to receive their monthly statement/remittance advices via e-mail.

### **VIEW PRACTICE INFORMATION ON WEBSITE**

Kindly note that suppliers of services may view their practice statement/remittance advices paid over the past six (6) months via the Web at [www.wcmas.co.za](http://www.wcmas.co.za). Practices can register online by following the easy steps explained on the registration page.

### **DEADLINE FOR SUBMISSION OF CLAIMS**

**Please remember to submit your claims before the 4<sup>th</sup> month after the date of service in order to qualify for benefits. Claims older than 4 months will be considered stale and will not be considered for benefits.**

### **PAPER CLAIMS AND EDI CLAIMS**

Certain practices still submit medical claims for our members manually as well as electronically.

To expedite payment of suppliers' claims and *reduce the administration burden*, it is imperative that suppliers adhere to the following when submitting claims:-

- Submit claims *only* electronically as the duplication of claims with hard copies causes an administrative problem which will result in the delay of payment and an *increase in your practices' administration costs*,
- Please mark off all credits before submitting the new claims for payment,
- Kindly address the queries for "*unpaid*" claims according to the "*reason codes*" on your remittance advices,
- Please allow at least *thirty (30) days* before resubmitting the same claims, and
- Please allow at least *thirty (30) days* before querying payment of accounts.

### **MEDICAL CLAIMS**

The Scheme often receives accounts from practices which *cannot* be processed for payment due to *incorrect or insufficient details*. To ensure that suppliers' claims are being paid correctly and timeously, the following details must be clearly indicated on all accounts or edi submissions:-

- Medical aid number,
- Member details,
- Patient details,
- Service dates,
- Service codes,
- Diagnosis, and
- ICD10 codes.
- Prescriptions must also indicate ICD10 codes to enable us to allocate benefits to the correct option.

Should a member have settled the account at the time of the consultation please may we request suppliers to provide a specified account together with the proof of payment to the member in order for them to claim a refund.

### **SELF DISPENSING DOCTORS**

**Important to note that the Scheme will only pay self-dispensing doctors direct if an agreement is in place. If no agreement in place then members must obtain a prescription to be dispensed at a pharmacy.**

### **HOSPITAL DISCHARGE TTO'S**

Suppliers are reminded that patients may receive TTO's (take home medication) for a 30 day quantity.

### Confirmation of membership

GP's may log onto our website to confirm membership and available MSA consultation benefits – [www.wcmas.co.za](http://www.wcmas.co.za)

Other providers may only confirm\_membership.

### HIV/Aids REGISTRATIONS

Doctors need to please phone SwiftAuth (Medikredit) at the toll free number 0800132345 to register patients. SwiftAuth will require laboratory results as well as a script which can be faxed to them on 011-7706247 for registration purposes.

### CHRONIC MEDICINE REGISTRATIONS

In terms of legislation, doctors may not prescribe chronic medicine for longer than six (6) months at a time. WCMAS is using the Swift-Auth (Medikredit) chronic medicine management system whereby doctors only need to phone the toll free number 080 013 2345 to register or renew all chronic conditions. No medical forms are needed.

As Swift-Auth (Medikredit) will require clinical information about patients, staff at WCMAS will not be able to assist practices and members with registrations. It still remains members' responsibility to ensure that their chronic conditions are registered and their prescriptions for chronic conditions are renewed timeously.

Kindly note that the Scheme applies **Maximum Medical Aid Pricing (MMAP)** whereby a pre-determined maximum benefit is paid towards a specific medication and **Reference Pricing (RP)** whereby benefits are paid according to the cost of an approved generic equivalent. In both instances the member will be liable for the difference in price should the more expensive medication be taken.

### GENERIC MEDICATION

Drugs that are identified as a generic equivalent of a brand-name medication have a similar chemical or drug formulation that acts on the body with the same strength and absorption process of the brand name drug.

If a generic version has the same effect on the body as the brand-name version, what would be the advantage of generic drugs, one word is **costs**.

We would therefore like to encourage Doctors to make use of generic medication when prescribing for WCMAS members and families and to assure them of the safety in using generic medication.

### MEDICINE RULE RELATING TO ANXIOLYTICS / SEDATIVES / HYPNOTICS & ANTI-DEPRESSANTS

Please note that all anxiolytics, sedatives and hypnotic medication supply will be limited to 30 days supply every 90 days. Pain medication will only be dispensed every 25 days.

Anti-depressants must be registered on chronic at SwiftAuth 080 013 2345.

### Importance of submitting the time of consultations and locum details on accounts

Suppliers are requested to indicate the time of each consultation on their accounts. Should suppliers make use of locums then the locums details must be provided in the attending / treating doctor's fields on the accounts or edi switches.

### ISIMO HEALTH (ICON - INDEPENDANT CLINICAL ONCOLOGY NETWORK)

WCMAS has appointed ISIMO (ICON) to provide our members and their families in need of cancer treatment with a professionally managed oncology program.

Members will be required to obtain pre-authorisation and to be registered on the oncology program to qualify for oncology benefits.

Registration and authorisation will be done by Managed Healthcare Services (MHS) who also does the WCMAS hospital authorisations.

The contact details at MHS to register patients on the ISIMO (ICON) program are as follows:-

011-548 8100 option 2 or on their Facsimile number 086 768 9846 or e-mail address [wcmas.oncology@mhs.co.za](mailto:wcmas.oncology@mhs.co.za)