

Annexure**FEDHEALTH MEDICAL SCHEME, myFED OPTION
DOCTOR NETWORK ARRANGEMENT FOR 2024****1. Application**

The arrangements set out in this annexure are applicable *only* to the members of the myFED Option of Fedhealth Medical Scheme (“the Scheme”) during the 2024 calendar year.

2. Conditions of Participation

To participate in this Scheme specific arrangement the Participating Doctor agrees to the following:

- 2.1 To adhere to the terms of the main Medscheme IPA Doctor Network Agreement to which this is an Annexure;
- 2.2 To function as an appointed designated service provider (DSP) as defined in the Act for purposes of this Annexure;
- 2.3 To function as a preferred primary care provider;
- 2.4 To charge for the Relevant Health Services rendered in terms of the Defined Medical Benefits at the Scheme Rate and not to levy co-payments;
- 2.5 A quarterly review of the performance of his / her practice;
- 2.6 To actively participate in risk management initiatives such as disease management programmes by applying agreed best practice protocols to members. This will be applicable to acute and chronic diseases. In addition, to support risk management initiatives such as coordination of care, Beneficiary risk management and the implementation of the GP (Participating Doctor’s) pathology request form;
- 2.7 To support members who are required to nominate a Network General Practitioner of choice with the relevant information as required by the nomination process;
- 2.8 To use best endeavours to refer a member to a Network Medical Specialist (where applicable) only once an automatic authorisation number has been obtained from Medscheme prior to the referral;
- 2.9 To adhere to the use of agreed formularies, i.e. medicines, pathology and radiology;
- 2.10 To abide to the Scheme’s claims submission processes providing correct ICD-10 coding and submit all claims lines despite payment of a fixed fee;
- 2.11 To consent to having his / her practice listed in a database that is accessible to Beneficiaries;
- 2.12 To confirm that he/she has not been found guilty of a legal transgression in his/her professional capacity nor that he/she is under investigation by the Medscheme special investigation unit; and
- 2.13 To agree to be subject to a peer management process where applicable. This to be performed by a central peer management committee as utilised by the Medscheme IPA Doctor Network.

3. Consultation Fees

Participating Doctors will be reimbursed according to the tariffs as set out in the Fedhealth myFED Participating Doctors’ Guide for 2024.

4. Dispensing

Please tick the applicable one of the following:

- I am a dispensing Doctor and I will dispense to myFED members
- I am a dispensing Doctor, but I will not dispense medication to myFED members
- I am a non-dispensing Doctor

5. Proviso

From time to time it may be necessary to make minor changes to the methodology in this arrangement. Unless these changes have a material effect on the outcome of this arrangement Medscheme reserves the right to make these changes without necessarily adding an addendum to this Agreement.

Practice Name.....

Signature.....

Date.....