



FOR PROFESSIONALS
SINCE 1941

HEALTHCARE
ADMINISTRATORS

PPS HEALTHCARE ADMINISTRATORS **DENTAL BENEFIT MANAGEMENT**



VALUE PROPOSITION

PPS Healthcare Administrators (PPSHA) is proud to launch our dental benefit management services to the market. Profmed is the first medical scheme to implement these dental benefit management services. Our focus is to deliver easily accessible and user-friendly processes that serve all Dental Providers. This principle is in line with our ethos of providing tailor made solutions as a boutique administrator.

We have a dedicated Dental Provider call centre with a team of highly skilled consultants with impeccable technical and medical knowledge to ensure quick turnaround times on requests and queries. Our efficient turnaround times on claim payments will enable improved cash flow to your practice.

We are proud to have well respected dental advisors on our team who bring with them specialised knowledge of dental benefit management. Our intention and promise to our Dental Providers are to provide service excellence that makes doing business with PPSHA seamless and delivers on our promise to enrich the lives of dental professionals.

Our Promise



Ease of doing business with us



Simple, easy-to-use provider processes that will be accessible at all touch points (call centre, SADA website, Scheme website)



Provider Guide on processes, benefits and tariffs



Dedicated call centre and support team to facilitate quick turnaround times on authorisations, quotations, queries and escalations



SADA aligned clinical protocols



Efficient claims payment turnaround times to improve cash flow

HOW TO CONTACT US

| | |
|--------------------------------------|-------------------------------|
| Provider call centre | 0860 679 200 |
| Hospital pre-authorisation | 0860 776 363 |
| Dental authorisations and quotations | dental@profmed.co.za |
| Provider contact information updates | providerrelations@ppsha.co.za |
| Provider changes to banking details | finance@ppsha.co.za |

REQUIREMENTS FOR CHANGES TO BANKING DETAILS:

- Latest bank confirmation letter (not older than three months)
- Confirmation of bank account changes on provider/company letterhead,
- Copy of identity document
- BHF registration
- Company registration letter (CIPC letter)

Original documents must be sent to:



Postal Address:

P O Box 14145
Lyttelton
0140



Courier address:

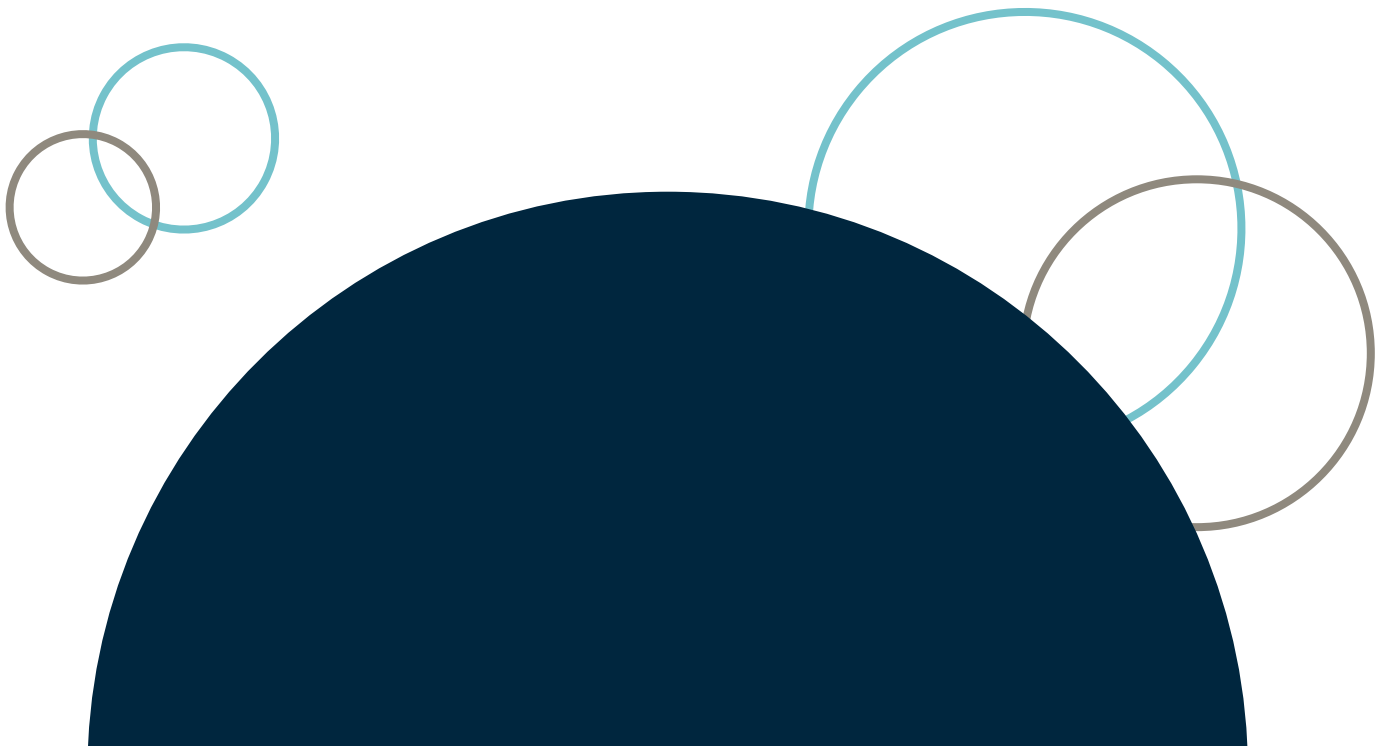
PPS Centurion Square
Cnr Gordon Hood and
Heuwel Road
Centurion
0157



AUTHORISATIONS AND APPROVALS FRAMEWORK

This framework will guide you on cases where authorisation is required. For these instances you will need to either complete an authorisation form or email us the information required seven days prior to date of service. Your request will be assessed, and a response will be provided within 24 – 48 hours.

- Preauthorisation is required for:
 - a) Specialised dentistry – implants, metal-based partial dentures, crowns and bridgework, functional orthognathic surgery, orthodontics up to 18 years of age (must include cephalometric tracing), periodontal treatment (must include clear x-rays, CPITN index, maintenance plan).
 - b) General anaesthesia and conscious sedation – Severe impacted permanent teeth, extensive conservative dental treatment for children under 8 years (benefit limited to 24 months per child).
 - c) Prescribed Minimum Benefit (PMB) benefit.
- All planned in-hospital procedures are subject to pre-authorisation seven days before starting treatment. In case of emergencies that occur after hours or on week ends and public holidays, authorisation must be obtained the next working day.
- Authorisation is not required for conservative and restorative dentistry (including consults, restorations, extractions, root canal treatment and plastic dentures). Subject to day-to-day dentistry benefit limits.





AUTHORISATIONS AND APPROVALS FRAMEWORK

Please provide us with the following information to obtain pre-authorisation:

- Membership number
- Member name and surname
- Patient name
- Patient dependant code
- Date of procedure
- Practice number
- Practice name
- Practice contact information
- ICD-10 codes
- Procedure codes and cost
- Tooth numbers
- Breakdown of laboratory codes, costs and quantity
- Clear radiographs to be submitted
- For hospital admission: date of admission, hospital name and practice number
- For orthodontics: a cephalometric tracing must be submitted
- For periodontal treatment: a CPITN index and maintenance plan must be submitted.

Please submit this information to dental@profmed.co.za.



DENTAL TARIFFS

Profmed's dental tariffs are 135% Profmed tariff, and not 135% OF profmed tariff, the Scheme's base tariff. The list of tariffs and values are available on the provider login portal on the Scheme's website at www.profmed.co.za. Only tariffs that are listed on the file will be covered. The rates will also be provided to SADA to make available to all dental providers.

Considering the above, PPSHA will be rejecting claims that include the subsequent procedure codes below. Service providers will be advised to amend their billing to reflect the latest changes or to contact SADA for further assistance.

- 1) All extractions of tooth or exposed tooth roots should be charged as 8201 (Extraction of tooth or exposed roots). (8202 discontinued as per SADA)
- 2) All surgical removal of residual roots should be charged as 8213 (Surgical removal of residual tooth roots). (8214 discontinued as per SADA)
- 3) All surgical removal of impacted teeth should be charged as 8941 (Surgical removal of the impacted teeth). (8943, 8945 discontinued as per SADA)
- 4) Corticotomy should be charged as 8983. (Code 8984 discontinued as per SADA)
- 5) All surgical placement of endosteal implants should be charged as 9183 (Surgical placement of endosteal implant). (9184, 9185 discontinued as per SADA)
- 6) All surgical exposures of endosteal implants should be charged 9190 (surgical exposure of endosteal implants).(9191,9192 discontinued as per SADA)



PROFMED MEDICAL SCHEME DENTAL BENEFITS

| BENEFIT | PROPINNACLE | PROSECURE PLUS | PROSECURE | PROACTIVE PLUS | PROSELECT (NETWORK OPTION) |
|---------|-------------|----------------|-----------|----------------|----------------------------|
|---------|-------------|----------------|-----------|----------------|----------------------------|

DENTAL PROCEDURES IN HOSPITAL

Subject to pre-authorisation and protocols. Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits.

| | | | | | | |
|-----|---|---|--|----------------------|--|---|
| 1G1 | HOSPITALISATION: - Permanent tooth impaction removals - Extensive conservative dental treatment only for children younger than 8 years (24-month benefit) (Subject to pre-authorisation, protocols and management) | 100% Negotiated Tariff | 100% Negotiated Tariff (Subject to use of the Day Procedure network) | | 100% Negotiated Tariff (Subject to the use of the Day Procedure network) | 100% Negotiated Tariff (Subject to use of the ProSelect DSPN) |
| | a) Specialist and anaesthetist fees | 300% Profmed Tariff | 200% Profmed Tariff | 100% Specific tariff | 175% Profmed Tariff | 100% Specific Tariff |
| | b) Dentist fees | 135% Profmed Tariff | 135% Profmed Tariff | | 135% Profmed Tariff | |
| 1G2 | HOSPITALISATION: - Other (Subject to pre-authorisation, protocols and management) | 100% Negotiated Tariff | 100% Negotiated Tariff (Subject to use of the Day Procedure network) | | Subject to PMB legislation (Subject to use of the Day Procedure network) | Subject to PMB legislation (Subject to use of ProSelect DSPN) |
| | a) Specialist (excluding dental specialists) and anaesthetist fees | 300% Negotiated Tariff | 200% Profmed Tariff | 100% Specific tariff | Subject to PMB legislation | |
| | b) Dentist fees | 135% Profmed Tariff Subject to Section 5E | 135% Profmed Tariff Subject to Section 5E | | 135% Profmed Tariff | Subject to PMB legislation |
| 1G3 | Functional orthognathic surgery Includes all costs related to the admission and procedure, e.g. all medical practitioner fees, hospitalisation, etc. (Subject to pre-authorisation) | R 41 200 per family | No benefit | | No benefit | |

BENEFIT

PROPINNACLE

PROSECURE
PLUS

PROSECURE

PROACTIVE
PLUS

PROSELECT
(NETWORK OPTION)

DENTISTRY - OUT OF HOSPITAL

Benefits are subject to protocols and management.

| | HOSPITALISATION: - Conservative dentistry (includes annual check-ups, restorations, extractions, root canal treatment, dentures) - Advanced dentistry (includes crowns, bridges, implants, orthodontics) Orthodontics available only up to age 18. (Orthodontics and implants subject to pre-authorisation. Call 0860 679 200 for authorisation and protocols) | 135% Profmed Tariff Maximum R16 100 per family Not subject to day-to-day limit | 135% Profmed Tariff Maximum R13 800 per family Not subject to day-to-day limit | 135% Profmed Tariff Subject to day-to-day limit | 135% Profmed Tariff R1058 per beneficiary Maximum R2 000 per family |
|--|--|--|--|--|---|

AMPLIFIRE

Beneficiaries who meets the relevant qualification can unlock additional benefits.

The following steps must be followed to unlock additional:

1. Download the Profmed App:
2. Conduct a Digital Health assessment via Profmed WellBeing;
3. If required, complete a physical health assessment;
4. Complete all individual relevant Preventative Care benefits (see Section 2);
5. Where a beneficiary is registered on a Chronic Treatment Care plan, they are required to fully comply with the plan, to unlock benefits.

The benefit is an additional R2 750 cover for out-of-office consultations, and is payable once the overall day-to-day benefits have been depleted. This is available every 24 months to the principle member and and beneficieries who pay adult contributions and is subject to the relevant qualifying criteria.

The amount of R2 750 can be used for **Conservative denstistry** and is subject to availability of benefits.



PROFMED MEDICAL SCHEME SAVVY DENTAL BENEFITS

| BENEFIT | | PROPINNACLE SAVVY | PROSECURE PLUS SAVVY | PROSECURE SAVVY | PROACTIVE PLUS SAVVY | PROSELECT SAVVY |
|---|--|--|--|---------------------|----------------------------|----------------------------|
| DENTAL PROCEDURES IN HOSPITAL | | | | | | |
| Subject to pre-authorisation and protocols. Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits. | | | | | | |
| 1G1 | HOSPITALISATION: - Permanent tooth impaction removals - Extensive conservative dental treatment only for children younger than 8 years (24-month benefit) (Subject to pre-authorisation, protocols, management and use of the DSPN) | 100% Negotiated Tariff | 100% Negotiated Tariff | | 100% Negotiated Tariff | |
| | a) Specialist and anaesthetist fees | 300% Profmed Tariff | 200% Profmed Tariff | 100% Profmed Tariff | 175% Profmed Tariff | 100% Profmed Tariff |
| | b) Dentist fees | 135% Profmed Tariff | 135% Profmed Tariff | | 135% Profmed Tariff | |
| BENEFIT | | PROPINNACLE SAVVY | PROSECURE PLUS SAVVY | PROSECURE SAVVY | PROACTIVE PLUS SAVVY | PROSELECT SAVVY |
| 1G2 | HOSPITALISATION: - Other (Subject to pre-authorisation, protocols, management and use of the DSPN) | 100% Negotiated Tariff | 100% Negotiated Tariff | | Subject to PMB legislation | |
| | a) Specialist (excluding dental specialists) and anaesthetist fees | 300% Negotiated Tariff | 200% Profmed Tariff | 100% Profmed Tariff | Subject to PMB legislation | |
| | b) Dentist fees | 135% Profmed Tariff Subject to Section 5E | 135% Profmed Tariff Subject to Section 5E | | 135% Profmed Tariff | Subject to PMB legislation |
| 1G3 | Functional orthognathic surgery Includes all costs related to the admission and procedure, e.g. all medical practitioner fees, hospitalisation, etc. (Subject to pre-authorisation) | R 41 200 per family | No benefit | | No benefit | |

DENTISTRY

Benefits are subject to protocols and management. (See Section 1G for dentist and specialist fees in-hospital)

| | | | | | |
|--|---|--|--|---|--|
| | <div>- Conservative dentistry (includes annual check-ups, restorations, extractions, root canal treatment, dentures) - Advanced dentistry (includes crowns, bridges, implants, orthodontics) Orthodontics available only up to age 18. (Orthodontics and implants subject to preauthorisation. Call 0860 679 200 for authorisation and protocols)</div> | <div>135% Profmed Tariff Maximum R16 100 per family Not subject to day-to-day limit</div> | <div>135% Profmed Tariff Maximum R13 800 per family Not subject to day-to-day limit</div> | <div>135% Profmed Tariff Subject to day-to-day limit</div> | <div>135% Profmed Tariff R1058 per beneficiary Maximum R2000 per family</div> |
|--|---|--|--|---|--|

AMPLIFIRE

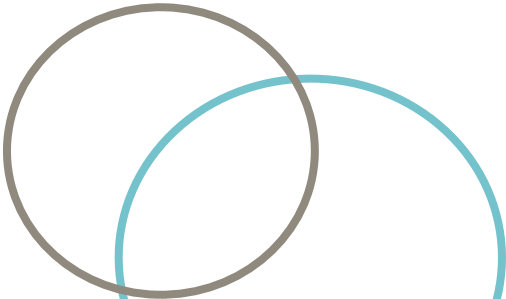
Beneficiaries who meets the relevant qualification can unlock additional benefits.

The following steps must be followed to unlock additional:

1. Download the Profmed App:
2. Conduct a Digital Health assessment via Profmed WellBeing;
3. If required, complete a physical health assessment;
4. Complete all individual relevant Preventative Care benefits (see Section 2);
5. Where a beneficiary is registered on a Chronic Treatment Care plan, they are required to fully comply with the plan, to unlock benefits.

The benefit is an additional R2 750 cover for out-of-office consultations, and is payable once the overall day-to-day benefits have been depleted. This is available every 24 months to the principle member and and beneficieries who pay adult contributions and is subject to the relevant qualifying criteria.

The amount of R2750 can be used for **Conservative dentistry** and is subject to availability of benefits.



SUBMITTING CLAIMS

This framework will guide you on cases where authorisation is required. For these instances you will need to either complete an authorisations form or email us the information required seven days prior to date of service. Your request will be assessed, and a response will be provided within 24 - 48 hours.

- All claims for Profmed must be submitted electronically. PPSHA accepts claims from all software vendors. Please contact your software vendor for more information.
- The following supporting information/documents must be submitted in order for a stale claim to be reviewed for payment:
 - Proof that the claim was queried within four months from the date of service; and
 - Proof of submission.

GENERAL RULES

1. Where a procedure is declined or where there is no benefit available, all associated treatments for the event will not be covered.
2. Any discrepancy between authorised and claimed treatment codes and tooth numbers will result in rejection of the claim. Please provide any updates or changes prior to submission of the claim.
3. More than one restoration cannot be claimed on the same tooth surface on the same day.

PROTOCOLS

1. Full mouth examinations will be covered once every 6 months.
2. Restorations on the same tooth will be covered once within a 9-month period.
3. Where code 8132 is claimed, restorations cannot be claimed on the same tooth number and same service date.
4. No benefits for:
 - laboratory fabricated crowns on primary teeth
 - root canal treatment on primary teeth
 - root canal treatment on wisdom teeth (18, 28, 38, 48)
 - crowns on wisdom teeth (18, 28, 38, 48)
 - pontics on 2nd molars (17, 27, 37, 47), unless 3rd molars are fully functional, and has been preauthorised
 - high-impact acrylic.



EXCLUSIONS

| | | |
|------------|--|--|
| 1. | <p>Restorations, crowns and bridges:</p> <ul style="list-style-type: none"> - for restorations on teeth for cosmetic purposes - where the tooth has recently been restored within a period of 9 months. <p>All clinical codes related to amalgam, resin, gold foil, inlay/onlay, metal inlays, ceramic inlays/onlays, resin-based inlays/onlays, crowns, veneers, temporary crowns and bridges are excluded.</p> | TARIFF CODE |
| 2. | Nutritional counselling | 8149 |
| 3. | Counselling for high-risk substance use | 8150 |
| 4. | Caries susceptibility tests | 8123 |
| 5. | Microbiological studies | 8122 |
| 6. | Electrognathographic recording | 8508 |
| 7. | Electrognathographic recording with computer analysis | 8509 |
| 8. | Reburnishing and polishing of restorations | 8157 |
| 9. | Ozone therapy | |
| 10. | Metal base to complete denture | 8663, including laboratory cost |
| 11. | Resin bonding for restorations charged as a separate procedure | 8146 |
| 12. | Dental bleaching | 8310, 8308, 8309, 8311, 8325, 8327 |
| 13. | Conservative dental treatment for adults in hospital, including restorations, extractions and root canal treatment for adults in hospital | 8140, plus procedure code |
| 14. | Professional oral hygiene procedures in hospital | 8140, plus 8151, 8153, 8155, 8159, 8160, 8161, 8162 |
| 15. | Laboratory costs where the associated dental treatment is not covered and laboratory delivery fees | (delivery fees - 9330) |
| 16. | Oral hygiene instruction | 8151, 8153 |
| 17. | Lingual orthodontic treatment | 8841, 8842, 8843, 8874, 8876, 8878, 8880, 8882, 8884, 8886, 8888 |

| | | |
|------------|---|-----------------------------|
| 18. | Re-treatment of failed orthodontic cases | 8892 |
| 19. | Hospitalisation in adults based on fear/anxiety | 8140, plus treatment code |
| 20. | In-hospital dentectomies | 8140, plus extraction codes |
| 21. | Occlusal mouth guard for sport purposes | 8171, 8170 |
| 22. | Pulp test | 8124 |
| 23. | Occlusal analysis on adjustable articulator | 8503 |
| 24. | Pantographic recording | 8505 |
| 25. | Diagnostic denture | 8661 |
| 26. | Altered cast technique | 8672 |
| 27. | Special report | 8106 |
| 28. | Appointment not kept | 8139 |
| 29. | Behaviour management | 8168 |
| 30. | Therapeutic drug injection | 8183 |
| 31. | Enamel micro abrasion | 8158 |
| 32. | Removal of gross calculus | 8160 |
| 33. | Minor occlusal adjustment | 8553 |
| 34. | Snoring apparatus | |
| 35. | Toothbrushes, toothpastes and mouthwashes | |

