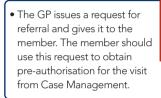
Specialist Referrals

STEP I first visit



- Member has to visit GP with a specific condition/problem.
- General practitioner will refer member to a specialist.







The referral request from the GP should contain the following detail:

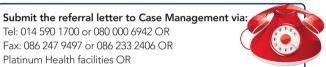
- The patient's
- Name
- Date of birth
- Medical scheme number
- Contact details
- The specialist's details and practice number
- A detailed clinical referral letter (as well as whether or not the visit is related to an MVA or
- The referring GP's details and practice number

Submit the referral letter to Case Management via:

Fax: 086 247 9497 or 086 233 2406 OR

Platinum Health facilities OR

Email: plathealth@platinumhealth.co.za (specialist authorisation)



Authorisation will be valid for only the date of treatment.



If a specialist referral is approved or rejected: **Approved**

- Case Management evaluates the request with the Case Management evaluates the referring assistance of the Medical Advisor.
- Member receives an authorisation number via SMS, email, and telephone or from Platinum Health facility.
- Copy of referral letter, X-rays, blood results and all related documentation to be taken with to the specialist.
- Member to give authorisation number to specialist.

Rejected

- request with the assistance of the Medical Advisor and reject referral.
- If a member's authorisation is rejected, the member will receive notification via SMS, email, telephone or from Platinum Health facility; stating the reason why authorisation request was declined.
- Member can contact Case Management and Platinum Health facilities at their sites with regards to follow-up queries.



Members need to follow the same procedure for consultations with Paediatricians and Gynaecologists.

- 1. General practitioner
- Case Management (obtain authorisation)
- 3. Gynaecologist or Paediatrician

STEP 2 follow-up visits

Follow-up visits to specialists follow the same procedure as first visits, except that the specialist will request the follow-up visit.





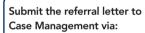
In addition:

- Specialists will be required to write a feedback report to the referring GP to ensure that he/her has clarity on the condition/treatment of his
- The letter requesting the follow-up visit should contain the following details:
- The reason for the follow-up visit or frequency of visits, with a full clinical report on diagnosis and treatment, required from treating specialist.

- The patient's:
- Name
- Date of birth
- Medical scheme number
- Contact details
- A copy of the required documentation should be submitted to Case Management for approval prior to the follow-up visit.
- Case Management will capture the motivation/diagnosis and issue a follow-up authorisation number to the patient. This number is valid for only the date of treatment.



- Follow-up visits to specialists after hospitalisation/surgery have to be authorised by Case Management.
- On discharge, the specialist will inform the member when follow-up visits are required.
- This is usually two or six weeks after discharge.
- Contact Case Management with this information for approval and an authorisation number.





Refer to the left-hand side regarding approval/rejection process.



Important note

- If the date of specialist appointment change after authorisation number has been issued, please remember to inform Case Management of date change so that it can be amended on the system to ensure that accounts are not rejected as a result of incorrect consultation date.
- Emergency specialist referrals can be arranged telephonically between referring GP and the responsible Case

- Manager, but the documentation still needs to be finalised afterwards.
- After-hours specialist referrals should be arranged with the Case Manager on call and submitted to Case Management on the first working day after the consultation.
- Members, who do not honour appointments, will be held liable for the cost of the appointment.

