

## Pre-authorisation

Pre-authorisation is a process where a member applies to the Scheme before being admitted to hospital for approval of a procedure or treatment that requires hospitalisation. The pre-authorisation process assesses the clinical necessity and appropriateness of the procedure according to Scheme's clinical protocols and guidelines, prior to hospital admission. It also serves as confirmation of available benefits.



### What is hospital pre-authorisation?



### Why is it important to pre-authorise?

It is important for all members to confirm their benefits for hospital visits before being admitted, in order for the Scheme to confirm the cover for the procedure and for the claims to be funded from the correct benefit. When you receive pre-authorisation, this does not mean the procedure will be paid for. This is a confirmation that you have received approval to have it performed. It also does not confirm that a claim will be paid for in full. Full funding is determined by availability of benefits and Bankmed's utilisation of a Bankmed Designated Service Provider (DSP) and Network.

Members should note that any additional days in hospital, multiple procedures or additional services will require further pre-authorisation or motivation. No further benefits will be covered or paid for unless a longer stay or revised requirements are authorised by the Scheme.

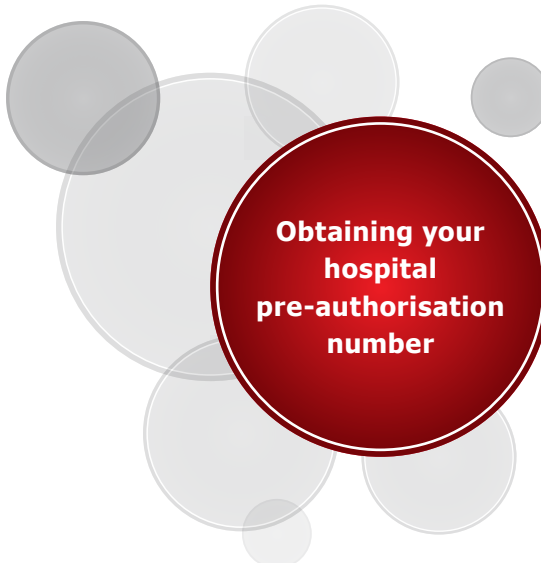
Whenever your Healthcare Professional plans a hospital admission for you, you should advise us at least 48-hours prior to your admission into hospital.

In case of emergency admissions, authorisations must be obtained within 24-hours or on the first working day after the emergency.

'As per Regulation 7 of the Act, an emergency medical condition is defined as - "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 of bodily functions or serious dysfunction of a bodily organ or part, or would place the person's life in serious jeopardy". Members do not necessarily have to be admitted into hospital for their condition to qualify as a PMB. Certain conditions can be treated in casualty for example low blood sugar, acute asthma or even some fractures.'



### How to pre-authorise a hospital admission or a procedure?



**Obtaining your  
hospital  
pre-authorisation  
number**

**STEP 1: Ensure you have the following information available**

- Bankmed membership number
- Name and contact details of the principal member
- Name and practice number of treating Healthcare Professional
- Name and practice number of hospital where you are to be admitted
- Date and time of admission
- ICD-10 code for diagnosis
- CPT-4 code/s for the procedure


**STEP 2: Obtain the hospital pre-authorisation number**

Contact us on 0800 BANKMED (0800 226 5633), e-mail [treatment@bankmed.co.za](mailto:treatment@bankmed.co.za) or send a fax to 011 529 6485 for pre-authorisation, at least 48-hours prior to your admission into hospital. We will provide you with an authorisation number. Kindly ensure the authorisation number is handed to the relevant Healthcare Professional and request that they include it when they submit a claim.

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Once we have approved your hospital admission, we will provide you with your reference or confirmation/authorisation number. Kindly ensure you provide this number to the hospital.

Should we not approve your admission prior to you undergoing treatment, and it is not an emergency, you may apply for the admission to be reviewed retrospectively. Should authorisation be declined, we will not pay for the costs related to your admission. As a result you will be liable for this account.



**You have your  
hospital  
pre-authorisation  
number,  
now what?**



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**Bankmed App**

