



TERMS AND CONDITIONS: 2026

1. PAYMENT, BILLING AND FEES

1.1. Patient Responsibility

- 1.1.1. All accounts remain the responsibility of the patient or appointed guarantor, irrespective of medical aid membership or third-party involvement.
- 1.1.2. Private (self-funded) services are payable **in advance**. Proof of payment must be emailed to **accounts@drjerrie.co.za** before your consultation.

1.2. Account Queries:

- 1.2.1. Accounts are managed internally. Queries may be directed to Betsie at accounts@drjerrie.co.za

1.3. Adjustments:

- 1.3.1. If payment exceeds the final consultation amount, the credit will be carried forward or refunded on request.
- 1.3.2. Any shortfall must be settled within 7 days of receipt of the statement.

1.4. Outstanding Accounts:

- 1.4.1. Non-emergency services may be paused if accounts remain outstanding. Emergency care will not be withheld.
- 1.4.2. If immediate settlement is not possible, you must contact the accounts department to arrange a payment plan (maximum **three months**).
- 1.4.3. Failure to honour an agreed payment arrangement will result in the account being treated as overdue.
- 1.4.4. Overdue accounts are followed up for up to **120 days** from date of service via email, WhatsApp and telephone.
- 1.4.5. Accounts outstanding beyond 120 days may be handed over to **Lexmed** for debt recovery, legal action and credit bureau listing.
- 1.4.6. Where accounts are handed over, the therapeutic relationship may be terminated in accordance with HPCSA ethical rules, with appropriate referral to avoid clinical harm.
- 1.4.7. The practice is not a registered credit provider under the National Credit Act and does not extend credit facilities.
- 1.4.8. Fees relating to third-party payers (e.g. RAF, Compensation Fund, insurers or trusts) remain the responsibility of the patient or guarantor, pending reimbursement where applicable.

1.5. Medical Aid Payments

- 1.5.1. We submit claims to contracted medical schemes as a courtesy.
- 1.5.2. Non-contracted schemes are charged on a **pay-and-claim** basis.
- 1.5.3. The patient or guarantor remains responsible for resolving shortfalls, rejections or scheme disputes.
- 1.5.4. Authorisations, referrals and benefit limits are the responsibility of the patient. Authorisation does not guarantee payment.

1.5.5. Practice number: 017 1131

Contracted Medical Aids:

- Bonitas (excluding BonCap, BonSavvy, BonStart, BonStart Plus plans)
- Discovery (excluding Keycare plans)
- Fedhealth
- GEMS
- Medshield
- Momentum
- Polmed
- Sedmed

CAMAF and Medihelp claims are submitted; any shortfall remains the patient's responsibility.

1.6. Prescribed Minimum Benefits (PMBs):

1.6.1. PMBs are a statutory entitlement governed by the Medical Schemes Act and Council for Medical Schemes rules.

1.6.2. With your written consent, the practice may assist with PMB motivation where clinically appropriate, particularly for psychiatric conditions.

1.6.3. PMB funding outcomes are regulated by scheme rules and clinical criteria of the medical scheme in accordance with legislation, scheme rules and clinical criteria. Approval cannot be guaranteed.

1.6.4. The patient or guarantor remains liable for fees if PMB funding is declined, limited or partially paid.

1.6.5. Patients can revoke PMB application consent at any time by informing the practice in writing via email or WhatsApp. Revocation applies from the date of receipt.

1.6.6. If you dispute a PMB decision, you may lodge a complaint with the Council for Medical Schemes at complaints@medicalschemes.com.

1.7. Fees:

1.7.1. Additional fees may be charged for services provided with or without the patient present, including:

1.7.1.1. Telephonic consultations

1.7.1.2. Prescriptions

1.7.1.3. Letters, reports, motivations and medical forms

1.7.1.4. PMB or chronic benefit applications (0199, billed annually)

1.7.1.5. Emergency or unplanned consultations or admissions

1.7.2. Third-party reports are not covered by medical aids and require written consent in line with POPIA and PAIA, and HPCSA regulations.

1.7.3. Report fees range from **R1 300 to R9 000**, depending on time and complexity, and are payable in advance.

1.7.4. Fees are reviewed annually and aligned with HealthMan tariff guidance.

1.7.5. Healthcare costs may vary depending on clinical complexity and emergency intervention requirements.

1.7.6. In summary, we do not have, nor undertake to have, any payment agreement with any party apart from you, the patient/guarantor.

1.7.7. Fees and codes charged that the practice may charge are outlined below.

PRACTICE CODES AND PRIVATE RATES: 2026

Duration/Description	Code	Private Rate
New Patient (60min)	2975 + 0161	R 4 050.00
Psychotherapy (new/follow-up) 10-20min	2957	R 1 170.00
Psychotherapy (new/follow-up) 21-40min	2974	R 2 350.00
Psychotherapy (new/follow-up) 41-60 min	2975	R 3 500.00
Directive Therapy to family/friends (Per 20min as part)	2962	R 1 110.00
Group Therapy (per 60-80min session)	2968	R 1 500.00
Medical Aid: PMB and Chronic Medication Applications	0199	-
Writing of Report or Motivation (per 20min as part)	0133	R 1 300.00
ECT procedure	2970	R 955.00
Prescription or short letter/motivation	0132	R 320.00
Emergency Consultation/Admission, all hours (Added to diary last minute due to your emergency)	0146	R 470.00
Other Hospital Consultation: 10-20 minutes	0166	R 880.00
Other Hospital Consultation: 21-35 minutes	0167	R 1 700.00
Other Hospital Consultation: 36-45 minutes	0168	R 2 350.00
Other Hospital Consultation: 46-60minutes	0169	R 3 180.00

2. APPOINTMENTS AND CANCELLATION POLICY

- 2.1. Appointments may only be made or cancelled by the patient, except where legal incapacity applies.
- 2.2. Patients are responsible for keeping track of their appointment dates and times.
- 2.3. Missed appointments due to scheduling errors are billable. If unsure, contact the practice to confirm.
- 2.4. Cancellations within 48 hours without valid reason (e.g., illness, family emergency) may be billed at the practice's discretion.
- 2.5. Charges for missed/cancelled appointments are based on the booked time slot.
- 2.6. Missed appointments may be billed as a private, non-clinical fee in accordance with medical scheme rules. Medical schemes may not reimburse missed appointment fees.
- 2.7. Late arrivals exceeding **15 minutes** may require rescheduling and may be billed.
- 2.8. Appointment delays may occur due to clinical emergencies.
- 2.9. Appointments missed due to practice-related emergencies will not be billed and will be rescheduled as soon as possible.

3. EMERGENCY SITUATIONS AND COMMUNICATION

3.1. Emergency Situations:

- 3.1.1. Our practice is not an emergency service.
- 3.1.2. In the event of a psychiatric/medical emergency, please go to the nearest GP or emergency room for immediate assistance.
- 3.1.3. After-hours emergency admissions for existing patients should contact **Vista Clinic: 012 644 0222**.
- 3.1.4. Contact the practice via landline for urgent appointments not scheduled.

3.2. Communication:

- 3.2.1. Accepted communication channels: landline, WhatsApp message and email.

- 3.2.2. The practice does not communicate via SMS/Facebook/Instagram.
- 3.2.3. Queries outside of business hours will be addressed during office hours.
- 3.2.4. For urgent contact, please phone our landline in business hours for assistance.
- 3.2.5. Disrespectful or abusive behaviour toward admin or clinical staff may result in lawful refusal of non-emergency services and, where appropriate, termination of the therapeutic relationship with referral, in accordance with HPCSA ethical rules.

4. POPIA, PAIA AND HPCSA CONDITIONS

- 4.1. In accordance with the Health Professions Council of South Africa (HPCSA) guidelines, POPIA and PAIA, we ensure that all clinical practices, including confidentiality, informed consent, and record keeping, are maintained at the highest standard.
- 4.2. Personal and clinical information is collected solely for healthcare and related administrative purposes.
- 4.3. Data is securely stored using industry-standard encryption and access is strictly limited to authorised personnel only.
- 4.4. Consent and confidentiality for minors are managed in accordance with the Children's Act, taking into account age, maturity and capacity, and HPCSA rules.
- 4.5. HPCSA requires that treating clinicians share clinical data regarding your treatment with each other. This is handled with the due privacy and confidentiality.
- 4.6. For debt recovery, relevant information may be shared in terms of the Debt Collectors Act 114 of 1998.
- 4.7. Clinical records are retained for **six years** after the last consultation, in line with HPCSA requirements.
- 4.8. No clinical information is released to third parties without written patient consent, unless legally mandated (Including to spouses/family members/employers etc.).
- 4.9. Requests for records or reports must follow formal PAIA procedures.
- 4.10. Queries regarding information handling may be directed to Danielle at practice@drjerrie.co.za.

5. GENERAL TERMS AND DISCLAIMERS

5.1. Medical Advice:

- 5.1.1. The patient agrees to follow medical advice. Refusal to follow recommended treatment limits the practice's responsibility for treatment outcomes.
- 5.1.2. Medication forms part of standard psychiatric care. Patients declining medication may be referred elsewhere.
- 5.2. The patient, their dependant or guarantor's behaviour can affect the patient's treatment outcomes.
- 5.3. Medico-Legal: Our practice does not do reports unrelated to treatment outcomes. We do not provide court evaluations, RAF, workforce evaluations etc. or any kind of report for new patients.
- 5.4. For any queries on patient rights, visit the [Patient Rights Charter](#).
- 5.5. Patient Record-Keeping and Health Advocacy:

- 5.5.1. You are expected to keep track of your treatment to support long-term care:
 - Treatment received (consultations, procedures, hospital stays)
 - Treating clinicians
 - Medications used (names, dosages, side effects, duration)

5.5.2. We keep clinical records but cannot be your only record source, especially for:

- Long-term care
- Medication trials
- Transfers
- Benefit applications or second opinions.

5.6. The latest updated version of this document is available on our website at [Practice Terms and Conditions](#). Material changes will be communicated to patients where required.

5.7. These Terms and Conditions are reviewed annually. Unless otherwise stated, any consents provided in terms of this document will remain in effect across annual updates, unless revoked in writing by the patient at any time.

6. CONSENT

PMB Consent: I, the patient, consent to the practice assisting with PMB motivation where clinically appropriate. This consent may be renewed annually.

Yes

No

I, Full Name and Surname, _____

ID: _____, have read, understood and agreed to the above terms and conditions for Dr Jerrie Bezuidenhout's practice as the patient/guarantor.

Signature _____

Date _____