December 2025

Dear Healthcare Professional

Introduction

Globally and in South Africa, breakthrough technologies are driving significant change in healthcare delivery and funding. These technologies are unlocking exciting possibilities, clinically and administratively for the healthcare professionals who are at the forefront of delivering care. Importantly, this enables healthcare professionals to engage their patients as active participants in their own care. Healthcare funders recognize that these technologies will allow more people to access quality care and make healthcare more personalized, precise, predictive, and preventive.

Tariff adjustments for 2026

In 2026, we'll increase GP Network consultations by 4%. The increase is above the current inflation rate of 3.6%. CPI inflation is expected to average at this level throughout 2026

KeyCare GP Network rates 2026

1. Fee-for-service model

Code	Description	Dispensing	Non-dispensing
0190 - 0193	Consultation	R517.10	R393.60
0146	Emergency consultation at doctor's room	R167.50	R167.50
0147	Emergency consultation away from doctor's room	R294.90	R294.90
0130	Telephone Consultation	R258.50	R196.90
0132	Writing of repeat scripts or requesting routine pre-authorisation without the physical presence of the patient (needs not to be face-to-face contact) ("Consultation" via SMS or electronic media included)	R141.10	R141.10
VCONS	Scheduled Virtual Consultation of an established patient of average duration and/ or complexity	R387.90	R295.20
XCONS	Extended Consultation	R949.90	R825.70
VDHC	Virtual GP House Call	R 17.10	R393.60

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Company Secretary: A C Ceba.

2. Semi-capitation model

Please note that total reimbursement accrues from the management and fee for service components.

Code	Description	Dispensing*	Non-dispensing*
0190 - 0193	Consultation for primary members	R258.60	R196.80
0146	Emergency consultation at doctor's room	R167.50	R167.50
0147	Emergency consultation away from doctor's room	R294.90	R294.90
0130	Telephone Consultation	R129.40	R98.40
0132	Writing of repeat scripts or requesting routine pre-authorisation without the physical presence of the patient (needs not to be face-to-face contact) ("Consultation" via SMS or electronic media included)	R141.10	R141.10
VCONS	Scheduled Virtual Consultation of an established patient of average duration and/ or complexity	R194.10	R147.40
XCONS	Extended Consultation	R691.50	R629.30
VDHC	Virtual GP House Call	R258.60	R196.80

**Practice also receives monthly capitation payment*
Each dependant is entitled to three emergency visits at their chosen GP during the year.

Monthly payment component

In addition to the consultation fees, doctors on the capitation arrangement will receive payment according to the following demographic tables, taking into account differences in underlying practice demographics.

Capitation table for 2026				
Age Band	Dispensing		Non-dispensing	
	Female	Male	Female	Male
0	R83.89	R90.44	R71.85	R77.74
1 – 4	R83.90	R87.57	R67.44	R72.38
5 – 9	R58.82	R59.18	R45.64	R46.23
10 – 19	R51.51	R42.51	R40.13	R32.99
20 – 24	R87.18	R57.91	R63.37	R39.75
25 – 29	R99.10	R71.83	R69.11	R45.48
30 – 34	R104.93	R79.66	R72.94	R50.24
35 – 54	R108.25	R87.90	R74.01	R55.85
55 – 64	R115.93	R101.73	R76.19	R64.45
65 – 74	R117.59	R118.55	R79.00	R74.13
75+	R110.25	R123.74	R77.47	R84.21

In-rooms procedure fees

Doctors will be reimbursed irrespective of which network they are on, for the following procedures:

Code	Description	Rate
0206	Intravenous treatment: Intravenous infusions: Insertion of cannula – chargeable once per 24 hours	R387.60
0244	Repair of nail bed	R890.90
0255	Drainage of abscess	R527.20
0259	Removal of foreign body	R570.80
0300	Stitching of wound	R551.60
0301	Stitching of additional wound	R130.50
0307	Excision and repair	R654.60
0308	Each additional small procedure done at the same time	R260.00
0316	Fine needle aspiration for soft tissue (all areas)	R402.50
0317	Aspiration of cyst or tumour	R291.30
0321	Biopsy or excision of cyst, benign tumour. Aberrant breast tissue, duct papilloma	R1,906.70
0887	POP	R670.90
0922	Removal of foreign bodies requiring incision	R713.90
1136	Nebulisation (in rooms)	R376.40
1192	Peak expiratory flow only	R166.20
1228	General practitioner's fee for taking of an ECG only: Without effort: ½ (item 1232)	R154.60
1229	General practitioner's fee for taking of an ECG only: Without and with effort: ½ (item 1233)	R191.60
1232	Electrocardiogram: Without effort	R238.30
1233	Electrocardiogram: With and without effort	R312.40
1234	Effort electrocardiogram with the aid of a special bicycle ergometer, monitoring apparatus and availability of associated apparatus	R814.80
1235	Multi-stage treadmill test	R1,199.50
1236	Electrocardiogram without effort: under 4 years old	R403.70
1996	Bladder catheterisation: Male (not at operation)	R299.90
1997	Bladder catheterisation: Female (not at operation)	R239.80
2133	Circumcision: Clamp procedure	R960.30
2137	Circumcision: Surgical excision other than by clamp or dorsal slit, any age	R1,525.60
2139	Circumcision: Dorsal slit of prepuce (independent procedure)	R936.80
3615	Routine obstetric ultrasound at 10 to 20 weeks gestational age preferable at 10 to 14 weeks gestational age to include nuchal translucency assessment	R893.30
3617	Routine obstetric ultrasound at 20 to 24 weeks to include detailed anatomical assessment	R893.30

Engaged HealthID users receive additional remuneration

HealthID gives you up-to-date access to your patients' health information, which facilitates the efficient co-ordination of patient care, enabling better patient outcomes. Through HealthID you can:

- Access your patients' data and details of their previous doctor and hospital visits.
- Complete an electronic Chronic Illness Benefit application form.
- Prescribe medicine for chronic and acute conditions (o*nly available on the app).*
- Request that your patients grant you consent in real-time, by signing on screen through the Discovery mobile member application to ensure compliance with ethical and legal requirements for personal information sharing.
- Refer a patient to another healthcare professional with automatic approval on select plans.
- View your patients' medical and benefit information, where consent has been acquired.

Your practice should be digitally enabled and use HealthID frequently. This includes:

- Sending 75% of your Chronic Illness Benefit applications electronically
- Accessing 25% of your patients' electronic health records
- Submitting 30% of your GP to specialist referral forms electronically.

Engaged HealthID users receive an additional **R25 per consultation** when accessing the HealthID functionality.

Premier Plus network participation compulsory for KeyCare network GPs

The Premier Plus GP network is underpinned by tailored condition management programmes that facilitate evidence-based care pathways. The programmes accentuate quality of care in ways that will profoundly improve the overall health of members diagnosed with chronic conditions. The Premier Plus GP Network places the GP as the coordinator of care, working as part of a high functioning team that matches patient needs to the appropriate level of care.

GPs in the KeyCare network who have not yet joined the Premier Plus network will be required to do so. This will assist chronic patients to enroll in the appropriate Care Programme. This update aligns with best practices in disease management, helping to ensure that patients receive improved benefits and more coordinated care. Patients that are eligible for a Care Programme but not enrolled, will have up to 80% cover for their chronic basket of care, effective 1st of July 2026.

The 2026 tariffs for doctors that participate in the Premier Plus network, is available in the Premier Plus GP communication.

Changes effective from 1 January 2026

- patients also need an approved specialist referral obtained from their nominated GP (or network optometrist) when visiting an ophthalmologist

- patients that are registered for approved oncology treatment, and in need of radiology or pathology treatment, has to be referred to a network radiologist or pathologist.

Discovery Health administered schemes that participate in the KeyCare GP Network

The following Discovery Health administered schemes participate in the KeyCare GP Network:

- LA KeyPlus
- TFG Health

Important to note for LA KeyPlus patients:

- The Scheme will fully align to the Premier Plus network participation for KeyCare network GPs where enrolment on a Care Programme for chronic registered patients is encouraged to ensure full cover effective 1 July 2026.

- The Scheme will fully align to the changes introduced effective 1 January 2026 related to the specialist referral process for ophthalmologist and the referral for oncology patients for network radiologists and pathologists.

Important to note for TFG Health patients:

- The Scheme is not aligning to the newly introduced changes and will continue on existing funding rules.

Find out more on the Healthcare Professional Zone

For more information about the KeyCare GP Network, including network rates, benefit information, formularies and hospital network lists, please refer to the Healthcare Professional Zone at www.discovery.co.za under Tools > Network Information Guide > KeyCare Network Information.

If you need any further information, please email healthpartnerinfo@discovery.co.za

These 2026 updates are designed to make healthcare more accessible, affordable and sustainable for patients and healthcare professionals. Improved access to private healthcare is vital for the funding pool and the ongoing viability and growth of your practice. Thank you for your continued partnership and dedication to patient care. Together, we are building a healthier future.

Regards



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