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TO ALL ORGANISATIONS
12 MAY 1992
ATTENTION: HEALTH DEPARTMENT
RE: MEETI G 9_ ISCUQ INCREASED 1 IFES BY THE TEA.
"m--_--_--_ - -n .._____..-._-_- __.u.h..... - _ . _____ _,'___V_____
The meeting held at CAST offices on the 7th May 1992 to digcuss
the increase hospital'tnnrrifs by the TPA with effect from
lat May 1992. Organisations that were pregent like CAST, PAC and
NPPHCN felt that a much bromdnr meeting comprising of all othez
organisation: be convened. Members of organisations that worn
present were asked to be conveners of the proposed meetjng.
It was suggested that invitations should be cont to all community
organisations, workers and women to participate. The meeting is
to b9 held at:
VENUE: CAST OFFICES
DATE: 19 MAY 1992
TIME: 17 HRS (5 pm)
The purpose of the meeting will be to deliberate and nhare vlnwn
on Lhesse tariffs hikes which will further burden the larger
population of the oppressed manna: with financlal problems.
Thus making them less possible to basic health facilities.
Hope to meet you on the day of the meeting.
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EMBARGO; FOR IMMEDIATE USE

NEWS RELEASE BY THE DIRECTORATE OF COMMUNICATION SERVICES
OF THE TRANSVAAL PROVINCIAL ADMINISTRATION ON THE REVISED
AMBULANCE TARIFF SYSTEM WHICH WILL TAKE EFFECT ON 1 MAY
1992

A revised ambulance tariff system will take effect on 1 May
this year.

If the revised tariff system is compared with the present
ambulance tariff system, it is evident that the new tariff
system does not indicate a general increase at all levels.
In some cases the new system will result in an increase and
in others in a decrease of tariffs.

Hospital patients classified under H1 will pay less for
ambulance transport over 50 km or less (R10 instead of R15
per trip). Patients classified as H2 and H3 will pay R3
and R5 more respectively for the same distances. Hospital
patients will pay more for ambulance transport over
distances of more than 50 km.

According to the present tariff system, the charge is
calculated at R3 per km, and the distance covered is
measured from the point of departure (normally where the
ambulance is garaged) and back again.

According to the new tariff system the distance covered
will be measured from the point where the patient is picked
up to the point where he is set down. This implies that
the distance taken into account under the new tariff system
will be approximately half of what it is at present.

According to the new tariff structure, a private patient
will pay considerably more for distances up to 15 km.

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EMBARGO: FOR IMMEDIATE USE

NEWS RELEASE BY MR FANIE FERREIRA, MEC FOR HEALTH SERVICES,
ON THE ADJUSTMENT OF HOSPITAL TARIFFS AT PROVINCIAL
HOSPITALS IN THE TRANSVAAL FROM 1 MAY 1992

Because of the rising cost of rendering health services, it
has become necessary to adjust the hospital tariffs of the
Transvaal Provincial Administration, and this will take
place in synchronisation with the other provinces and will
come into effect from 1 May 1992.

The principle followed in the fixing of tariffs still is
that those who can afford the service rendered to them
should pay for it. Less privileged members of our
community, however, who lack the financial capacity to pay
fully for services, ought to be assisted to a level at
which health services become financially accessible to all
people in the Province.

1. CLASSIFICATION AND PARIRFF CATEGORIES BASED ON INCOME
AND MARITAL STATUS:

Whilm hncpital thrift: aLm Lucreased, income ceilings
according to which hospital and private patients are
classified are also raised considerably. This has the
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category (H).

Persons enjoying cover from medical schemes are classified
a3 private patients.

For ClaSSifiUdLiOn of patients according to income, see
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