

## Case study 1: Patient with a Hernia

### Description of PMB Condition:

Hernia with obstruction and or Gangrene; Uncomplicated hernias under the age of 18 years.

### Legislated Treatment:

Repair & Bowel resection

### Notes:

1. Even if the patient was on a hospital only plan or on a comprehensive plan with exhausted benefits, the scheme must still cover the costs of the consultation (GP and specialist) and any investigations performed in the state sector (e.g. blood tests and X-Rays).

2. Hernias are then only PMB conditions when

- the patient with the hernia is younger than 18 years (regardless of it being a complicated or simple hernia)
- For patients 18 years and older, the hernia will only be viewed as a PMB condition if there are complicating factors like infection, strangulated, cannot reduce/retrieve back to its position.

A patient with a hernia (without complications) is therefore not a PMB condition.

3. Although repair and bowel resection is defined as the treatment which has to be covered by the scheme, the scheme can still insist that they will only pay for the type of treatment which would have been provided on the state sector. For example the scheme might say that if in the state hospitals they would have done an incision and open operation only, the scheme will not pay for a laparoscopic (keyhole surgery) procedure.

4. If the scheme appointed for example the surgeons in the State or MediClinic hospitals as their Designated Service Providers, the patient has to go to one of these surgeons – if not, the scheme may impose a co-payment. But if the patient required immediate treatment or the service wasn't readily available at that time from the mentioned DSP's, then the patient may go any other surgeon – and the scheme must cover the cost in full (without a co-payment to the patient).

Ensure that your registered ICD-10 code  
appears on all these accounts & forms!  
e.g. **K43.1**  
Ventral hernia with obstruction and gangrene