

NEWSLETTER

Issue 1 of 2025

We are excited to introduce the first issue of the Scriptpharm pharmacy network newsletter – a dedicated platform to keep our network pharmacies informed on matters that impact your daily operations when dealing with medical scheme members. As a pharmacy network management company, our mission is to support our network pharmacies through collaboration and insights that enhance patient care. In each issue we will share industry updates, regulatory developments and pharmacy network management initiatives or changes. Thank you for being part of our network and being committed to improved pharmacy practice and better health outcomes for our client scheme members.

SCRIPTPHARM PHARMACY NETWORK SERVICES

Just a reminder that we manage the pharmacy networks for four medical schemes currently administered by Medscheme.

- ▶ POLMED
- ▶ Bonitas
- ► **M**BMED
- ► SAMWUMED

For Bonitas, Scriptpharm also manages medicine risk on Chronic- and Specialised medication and for Polmed our risk management services include Chronic-, Specialised- and HIV medication. This means that Scriptpharm pays the medicine claims in these benefit categories for Polmed and Bonitas Medical Fund (except for the BonCap option).

MEDICINE PRICE CHANGES FOR JULY 2025

Twice a year Scriptpharm and Medscheme embark on a review of the Medicine Price List (MPL) for all client medical schemes to ensure that members have access to the most clinically appropriate medicine for their chronic conditions at an affordable cost. During these reviews some medicines may be removed from the MPL as more cost-effective generic alternatives become available.

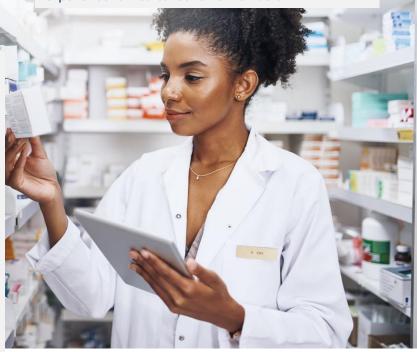
The last review was in December 2024 and the changes to the MPL from that review were implemented effectively from 1 January 2025. The second review was completed in June 2025 and will be implemented from 1 July 2025.

The changes are included with this newsletter for your reference, to stock up on the preferred MPL products and dispense medicines that will provide a "wallet-free" experience to medical scheme members.

TO VAT OR NOT TO VAT?

On 12 March 2025 the Minister of Finance announced a two-step increase in the standard VAT rate: from 15% to 15,5% on 1 May 2025 and a second increase – bringing the VAT rate to 16% – was expected on 1 April 2026. However, on 24 April the National Treasury announced that the VAT increase for 1 May 2025 will be reversed, and the VAT rate will remain at 15%.

We now wait to see if the same will happen in 2026. It is worthy to note that the Scriptpharm dispensing fees on all scheme networks exclude VAT and any change in the VAT rate will not have any impact on the dispensing fee rates as communicated and agreed to. NAPPI product prices on the other hand, will be impacted in the event of a VAT percentage rate increase. Should the proposed VAT increase for 1 April 2026 go ahead, NAPPI product prices will be adjusted.



GETTING THE PRICE RIGHT

Medical schemes apply generic reference pricing, also known as the Medicine Price List (MPL), as a tool to help control medicine costs. It encourages generic substitution and therefore, optimises the cost effectiveness of medicines to ensure that scheme members get the best value from their benefits.

In summary the principle is as follows:

Generic reference pricing uses a benchmark or reference price for generic and generically similar products and sets a maximum reimbursement rate for these products.

How does it impact medical scheme members?

Generic reference pricing does not restrict a member's choice of medicine but instead limits the amount that will be paid. The member is free to choose any item which appears on the reference price list (subject to applicable formularies and scheme rules). However, if the price of the item is more than the reference price set for that specific generic group, the member will have to make a co-payment of the difference in price. There is always a generic medicine available that will be funded without a reference price co-payment.

What is expected of the network pharmacy?

As the dispensing pharmacy you might not have control over the active ingredient prescribed by the treating doctor, but you are encouraged to offer and recommend generic medicines within the generic reference price.

Where do pharmacies find the generic reference prices?

Scriptpharm provides software vendors with our client schemes' specific generic reference price list every month (this includes Bonitas, Polmed, MBMed and SAMWUMED). The lists are included with this newsletter and also available on the Scriptpharm website at: www.scriptpharm.co.za > chronic and acute > select scheme > reference price list

We will continue to engage with software vendors to upload the reference price lists to avoid manual intervention from your side but will appreciate you sharing it with them as well to ensure that your system is updated with the most recent reference prices every month. We hope that sharing the reference price lists with pharmacies directly will support you in assisting members to reduce co-payments when collecting their medication from your pharmacy.

How does the reference price list assist the pharmacist?

Claims analysis show that many of the pharmacies on our network continue to dispense medication above the recommended reference price, leaving members with out-of-pocket expenses. This is especially evident on non-scheduled medicines where a generic reference price group exists.

In addition to the standard information about each product such as generic group, NAPPI code, NAPPI description, pack size and reference price, the list also includes an indicator that shows whether the price of the prescribed item is above or below the reference price for the generic group. Selecting a product "above" the reference price will result in a copayment to the member whilst the member will have a "wallet-free" experience on items with a "below" indicator. Please note that all medicines may still be subject to a formulary depending on which benefit the medicine is claimed from.

If you have any questions or need more information about this matter, please reach out to Scriptpharm at 011 100 7557 or compliance@scriptpharm.co.za.





Patient adherence to chronic medication is a strong focus area for our client medical schemes to keep their members healthy and out of hospital.

Pharmacies play a crucial role in supporting this drive for members to improve chronic medication adherence through various initiatives. We focus on two:

- Patient Education: Help patients understand why the medication is necessary and make sure they know how and when to take it;
- Reminder systems: Send SMS text or WhatsApp messages for refill reminders and script renewals

Regular interactions with patients build healthy and trusting relationships and goes a long way with patients feeling comfortable with your advice and guidance to support their health.

Scriptpharm will be in touch with those pharmacies with higher volumes of non-adherent patients.



All medical schemes apply generic reference pricing to their medicines and with so many products on the market, there are always medicines which fall below the generic reference price and don't attract a co-payment.

For example, a new reference price group was created for aspirin 81mg at the beginning of 2025, after two new generics (AZPAMIN® and CANCARD®) came onto the market. These generic products fall below the reference price, while ECOTRIN®, the original product, falls above the reference price and will attract a co-payment.

We have identified the medicine classes that attract the highest value in co-payments, and for which there are generic alternatives available at the recommended reference price. The classes we identified from the first quarter of 2025 that had the most reference price co-payments are:

Esomeprazole 40mg, Paracet Meproban Caff Codeine, Fluoxetine 20mg, Tramadol Paracetamol and Escitalopram 20mg

The table on the last page lists the alternative products below the reference price.

CLAIM CODE DETERMINE THE FEE

Where medical schemes have different dispensing fees in place for acute and chronic medication, it is important that the respective claim submission codes for acute vs chronic medicines are used when submitting claims. If a patient has a chronic authorisation registered for the specific chronic medication, and the claim is submitted with an (incorrect) acute medicine claiming code, our claims system will recalculate the dispensing fee to the chronic medicine rate, resulting in a response message back to the front-end system to note that the fee has been adjusted according to the benefit category. In the same instance, the claim will show a shortfall which will apply a co-payment incorrectly to the member. This is as a result of the chronic medicine dispensing fee being less than the acute medicine dispensing fee.

Scriptpharm is working on a solution with Medscheme to reduce the number of claiming codes used and refine the response messages to be clearer about the reason for the co-payment applied as well as the required action from the pharmacy. As this is a long-term project, you are reminded of the current claiming codes relevant to the various schemes where Scriptpharm manages the pharmacy network.

As a general guideline, the letter at the end of the claiming code indicates the medicine category, i.e. $\bf A$ indicates Acute Medicine and $\bf Q$ is for Chronic Medicine.

Bonitas

Bonitas has a multitude of claiming codes as it applies to each option. As guideline for separating acute and chronic medicine claims, add a Q at the end of the Bonitas option claiming code, e.g. BONTAQ.

Polmed

Marine Acute	MARIN		
Marine Chronic	MARINQ		
Aquarius Acute	AQUAR		
Aquarius Chronic	AQUARQ		

MBMed

Acute	DCMA
Chronic	DCMAC

SAMWUMED

Option A Acute	SMUAA		
Option A Chronic	SMUAQ		
Option B Acute	SMUBA		
Option B Chronic	SMUBQ		

OFNERIO REFERENCE PRIOR			GENERIC	GENERIC	
GENERIC REFERENCE PRICE DESCRIPTION	NAPPI CODE	NAPPI DESCRIPTION	PACK SIZE	REFERENCE PRICE	SEP
ESOMEPRAZOLE 40MG	3005258	FLUXTRIN	14	R191.13	R176.87
ESOMEPRAZOLE 40MG	3006964	JUBIGORD	14	R191.13	R174.93
ESOMEPRAZOLE 40MG	721062	NECTIZOLE 40MG TAB	14	R191.13	R191.13
ESOMEPRAZOLE 40MG	3005341	NEXILOK	14	R191.13	R181.21
ESOMEPRAZOLE 40MG	3005142	TRULOC	14	R191.13	R164.85
PARACET MEPROBAN CAFF CODEINE	809055	ADCO-SALTERPYN TAB	500	R263.99	R231.70
PARACET MEPROBAN CAFF CODEINE	823538	ASTRAPAIN FORTE TAB	500	R263.99	R201.40
PARACET MEPROBAN CAFF CODEINE	793574	GOLDGESIC TAB	500	R263.99	R263.99
PARACET MEPROBAN CAFF CODEINE	800325	HOPYN (BRISCOPYN) TAB	500	R263.99	R254.37
PARACET MEPROBAN CAFF CODEINE	892662	NUCOPAIN TAB	500	R263.99	R228.92
PARACET MEPROBAN CAFF CODEINE	834440	SPECTRAPAIN FORTE TA TAB	500	R263.99	R254.90
PARACET MEPROBAN CAFF CODEINE	793892	XEROGESIC TAB	500	R263.99	R207.00
FLUOXETINE 20MG	894303	DEPROZAN 20MG CAP	30	R42.22	R13.66
FLUOXETINE 20MG	3001358	FLUOXETINE BIOTECH	30	R42.22	R42.16
FLUOXETINE 20MG	838713	OETHMAAN FLUOXETINE 20MG CAP	30	R42.22	R29.52
FLUOXETINE 20MG	719658	PROLAX 20MG CAP	30	R42.22	R35.71
FLUOXETINE 20MG	700686	RANFLOCS 20MG CAP	30	R42.22	R40.86
FLUOXETINE 20MG	705064	ZYDUS FLUOXETINE 20MG CAP	30	R42.22	R39.10
TRAMADOL PARACETAMOL	3008649	DOMADOL PLUS	60	R131.73	R115.00
TRAMADOL PARACETAMOL	3007426	DYTRACET	60	R131.73	R129.38
TRAMADOL PARACETAMOL	3005997	PAINOGESIC CO	60	R131.73	R95.98
TRAMADOL PARACETAMOL	3005380	PANREX 37.5MG/325MG	60	R131.73	R124.89
TRAMADOL PARACETAMOL	723749	TAMOLTRA 37.5MG/325MG	60	R131.73	R131.66
TRAMADOL PARACETAMOL	3005311	TRAMADOL/PARACETAMOL 37.5/325MG AUSTELL	60	R131.73	R131.72
TRAMADOL PARACETAMOL	3006155	TRAMASPEN CO 37.5MG/325MG	60	R131.73	R111.19
TRAMADOL PARACETAMOL	3006045	TRAPACETOL 37.5MG/325MG	60	R131.73	R100.05
ESCITALOPRAM 20MG	719548	ACCORD ESCITALOPRAM 20MG TAB	30	R100.86	R81.00
ESCITALOPRAM 20MG	720378	DOLIN 20MG TAB	30	R100.86	R80.99
ESCITALOPRAM 20MG	721159	EMERDYNE (WAS MACLEODS ESCITALOPRAM) 20MG TAB	30	R100.86	R80.99
ESCITALOPRAM 20MG	3005244	EPRAJUB	30	R100.86	R100.86
ESCITALOPRAM 20MG	3000922	ESETAM	30	R100.86	R81.01
ESCITALOPRAM 20MG	3002267	ZYESCITO	30	R100.86	R85.25

