



B·H·F

**PRACTICE CODE
NUMBERING SYSTEM**

Lower Ground Floor, South Tower, 1Sixty Jan Smuts,
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Dear Provider

We request that all Healthcare Professionals ensure that their annual fees and their practice information is updated on the PCN System, so that the information shared with Medical Schemes and their Administrators is accurate. As part of the running and the maintenance of the system, Health Professionals are required to provide their updated practice details and signed declaration form. Please submit the following supporting documents:

- Copy of Identity Document
- Copy of Company Registration Certificate, where applicable
- Brochure or Pictures of the product being supplied
- Motivational letter and Nappi Codes
- Updated letters from 2 or more Medical Schemes confirming they will pay for the products being supplied
- Proof of payment for PCNS fees paid for 2017
- Signed Declaration (please go to BHF website to obtain the declaration)
- Copy of SABS approval license including a copy of the distribution letter/agreement from manufacturing company
- Proof that the company is registered with an international accreditation body including a copy of the distribution letter/agreement from manufacturing company

We would like to take this opportunity to thank you for your ongoing support and assure you of our ongoing commitment to providing you, with service and value.

For assistance or further information, please do not hesitate to contact PCNS Client Services on 0861 30 20 10 or e-mail clientservices@bhfglobal.com

Regards

PCNS Client Services

SERVING MEDICAL SCHEME MEMBERS



DIRECTORS: Executive K Mothudi (Managing), Non-Executive: A Hamdulay (Chairman), A Fourie-Van Zyl, G Goolab, I Isdale, Y Mabule, O Mahanjana, V Memela, S Motseko (Lesotho), H Nhlapo, T Nsele, C Raftopoulos, S Sanyanga (Zimbabwe), H Stephens, C Schafer (Namibia), T Moutmakwa (Botswana), N Nyathi, M Mahlaba. M Bayley, CM Mini