



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 ID for the Responsible Pharmacist.
- Copy of ID for the Pharmacy Owner.
- Copy of Company Registration Certificate
- Copy of Registration Certificate for the Pharmacy recording.
- Copy of Registration Certificate of the recording of the owner.
- Copy of Registration Certificate of the recording of the responsible pharmacist.
- Copy of the license from the Department of Health of South Africa, for the registration of the Pharmacy.
- Proof that council fees are paid for 2017
- Proof that Responsible Pharmacist fees are paid for 2017
- Proof of payment for PCNS fees paid for 2017
- Signed Declaration (please go to the BHF website to obtain the declaration)

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