

DESCRIPTION OF SERVICE/TREATMENT	SERVICES RENDERED AS PART OF HOSPITALISATION - SUBJECT TO PRE-AUTHORISATION	SERVICES RENDERED NOT AS PART OF HOSPITALISATION
<b>HOSPITALISATION</b>		
Accommodation, theatre, medicine and material use whilst hospitalised	100% of Agreed Tariff	Not Applicable
Outpatient treatment at hospital facility	Not Applicable	🕒 Limited to R 1,000.00 per family per annum for treatment at a hospitals out-patient facility or emergency rooms
Medicine received on discharge from hospital	100% of Agreed Tariff (RP Applies), if purchased on date of discharge, subject to a maximum of 7 days supply	
<b>MEDICAL PRACTITIONERS</b>		
Consultations / Visits	🕒 Unlimited	△
Radiology	🕒 Unlimited	△ Except for 1 Mammogram per year, except for PMB
Pathology	🕒 Unlimited	△ Except if treatment forms part of Disease Management Programme and 1 Pap Smear per year by General Practitioner, except for PMB
ECHO-tests	🕒 Unlimited	△
MRI, CT scans and Radio-Isotope studies (Benefits subject to separate pre-authorisation)	🕒 R 1,600.00 co-payment applies	🕒 R 1,600.00 co-payment applies
Clinical Procedures	🕒 Unlimited  Co-payments applicable to certain elective procedures, unless funded as PMB treatment. Please refer to Members' Guide for details. No benefits for elective procedures unless funded as PMB treatment: • Joint Replacements • Spinal Surgery	🕒 Subject to pre-authorisation: • Upper and lower gastro-intestinal endoscopy (excl. sigmoidoscopy and anoscopy) • Laser tonsillectomy • 24-hour oesophageal pH studies • Oesophageal motility • Yag laser • Photocoagulation therapy • Photodynamic therapy  △ All other clinical procedures
Cochlear Implants	🕒 Limited to R 30,200.00 per implant	Not Applicable
Material and injection material administered in doctor's rooms	Not Applicable	△
<b>MATERNITY</b>		
Ante-natal Classes and Foetal Scans	🕒 Unlimited	Pre-childbirth Education paid at 100% of Cost and/ or Ultrasound Scans paid at 100% of Medical Scheme Rate per Year, subject to a combined limit of R 1,700.00 per Family per Year
Ante-Natal Consultations	Not Applicable	🕒 Limited to 2 per year
Confinement	100% of Agreed Tariff in respect of hospitalisation and 100% MSR in respect of Associated Provider services - Unlimited	
<b>AUXILIARY SERVICES</b>		
Physiotherapy and Biokinetics	🕒 Unlimited	△
Medical Technology	🕒 Unlimited	△
Clinical Technology	🕒 Unlimited	△
Speech Therapy and Occupational Therapy	🕒 Unlimited - Treatment must form part of Case Management Program	△
Podiatry, Orthoptic treatment, Hearing Aid Acoustics, consultations with Dietitians, Chiropractors, Osteopaths, Homeopaths, Naturopaths and Herbalists	△	△
Aromatherapy, Acupuncture and Reflexology	△	△
<b>OPTICAL</b>		
Consultation	Not Applicable	△
Spectacles and Contact Lenses	Not Applicable	△
Refractive Surgery	△	△
<b>SECONDARY FACILITIES</b>		
Treatment that forms part of a Case Management Programme	🕒 Subject to approval by Case Manager	
<b>REHABILITATION</b>		
△ Only for cases managed as part of a Case Management Programme, where a medical report was submitted by the attending Physician		
<b>AMBULANCE SERVICES</b>		
Preferred Provider (ER24)	Not Applicable	100% of Agreed Tariff - For emergency transport to and from a hospital
Non-preferred Provider	Not Applicable	🕒 Limited to R 2,800.00 per family per year, limit will not apply to PMB

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<b>BLOOD TRANSFUSIONS</b>		⌚ Subject to pre-authorisation
<b>MEDICAL AND SURGICAL PROSTHESIS / APPLIANCES</b>		
Internal Prosthesis	⌚ Specific sub-categories with limits apply. Please refer to Member Guide for details	
External Prosthesis	⌚ Limited to R 56,300.00 per family per year - subject to approval by Case Manager	
Orthopaedic Appliances	⌚ Limited to R 8,000.00 per family per year - subject to Case Management	
Medical Appliances	Not Applicable	△
Hearing Aids	Not Applicable	△
<b>DENTISTRY</b>		
Basic	△	△
Specialised	△	△
<b>MAXILLA-FACIAL AND ORAL SURGERY</b>		
Elective	△	△
Non-elective (excluding extractions)	⌚ R 1,100.00 co-payment applies - in the event of PMB, 100% of Cost - Subject to PMB protocol	⌚ Unlimited - In the event of PMB, 100% of Cost - Subject to PMB protocol
Implantology	△	△
<b>PRESCRIBED MEDICINE</b>		
Chronic (Member must apply for benefit)	Not Applicable	△ Except PMB
Acute	Not Applicable	△
Immunisations	Not Applicable	△
Oral & Injectable Contraceptives	Not Applicable	⌚ Limited to R 1,600.00 per family per year
<b>NON-PRESCRIBED MEDICINE (PAT)</b>	Not Applicable	△
<b>CASE MANAGED / DISEASE MANAGED CONDITIONS / PROCEDURES</b>		
Organ Transplants	The following benefits apply to organ donors in RSA: R 44,800.00 for a live donor, R 26,800.00 for a cadaver. Benefit in respect of donors only allowed if the recipient of the organ is a beneficiary of the Scheme. Specific Radiology and Pathology tests associated with transplant procedure also qualify for benefit. Limit will not apply to PMB	
Chronic Renal Failure	⌚ For Kidney Dialysis, incl. associated Radiology and Pathology tests - Unlimited	
Oncology	100% of Agreed Tariff - Benefit managed as part of an Oncology Benefit Management Programme and subject to use of Preferred Provider Network. Overall limit of R 177,000.00 per family per year. No benefit for Biological drugs.	
Asthma, Chronic Obstructive Airways Disease, Diabetes and Cardiacare	Benefit managed by the Scheme and payable as per the applicable benefit described elsewhere in this summary	
Oxygen Therapy	⌚ For Oxygen Therapy (cylinders included) subject to Case Management	
Human Papillomavirus Vaccine (HPV)	Benefit Subject to Authorisation on Disease Management Programme and provided that condition forms part of Disease Management protocol. Further subject to member being registered on the Programme and member being compliant	
Mammograms and Pap Smears	Benefit subject to Disease Management protocol	
<b>FOREIGN CLAIMS</b>		Namibian claims only
<b>AIDS AND HIV</b>		Benefits managed as part of a Disease Management Programme
<b>MENTAL HEALTH</b>		
Clinical Psychology	⌚ Unlimited - provided that treatment must form part of Case Management Programme	△
Psychiatry	⌚ Provided that treatment forms part of Case Management Program. To be obtained in a mental health institution, as approved by the Scheme	
<b>PRESCRIBED MINIMUM BENEFITS (PMB)</b>	Benefits subject to application and provided that the treatment and/or chronic medicine is received from a Designated Service Provider. If voluntarily obtained from any other provider, a 40% co-payment will apply. Scheme protocol apply	

**CONTRIBUTIONS - EFFECTIVE 1 JANUARY 2018**

**CONTRIBUTIONS:**

Principal member  
**R 1,760.00**

Additional Adult Dependant  
**R 1,750.00**

Additional Minor Dependant  
(payable up to maximum 3)  
**R 899.00**