

2017  
Benefit  
Options



# 2017

## What determines your decision to join a medical aid?

Is it the add-on's, you know... the free gym membership and movie tickets or, is it the reliable and affordable medical cover without the unnecessary hidden costs that you know you'll receive when you need it most?

When you phone a call centre, do you want to deal with an administrator that divides attention between members of several medical aids - or do you want peace of mind knowing that your medical aid will be there for you - tomorrow, the next day and as long as you need it?

**If it is:**

- real, sincere and secure medical cover,
- dedicated and personalised service,
- the security of belonging to a well established medical aid,
- service that will exceed all your expectations,

**then your choice is simple... Selfmed**

# At Selfmed we cut straight to the core

## Our approach to healthcare makes us stand out from the rest.

Our Scheme values ensure you of:

- a simplistic, easy to understand product range
- sincere interest in your well-being promoted by an emphasis on personalised service
- the security that our solid financial position ensures; and
- unsurpassed service

## What makes our administrator so unique?

In a traditional medical aid / administrator environment, all administrative functions rest with an administrator. As such, a medical aid would be fully dependent on its administrator to inform it of any problems or complaints received from members. Selfmed controls its own administration and call centre - better known as the "Excellence Centre". Through this model, Selfmed takes total ownership of all member interaction and can address any administrative problems or complaints from members immediately and provide total member satisfaction.

## All of Selfmed's options offer:

- Unlimited hospitalisation at any of the Scheme's Designated Hospitals
- Medicine on discharge payable from hospital benefit
- Unlimited emergency transport benefits where the services of ER24 is utilised in South Africa, Swaziland and Lesotho
- Access to professional, specialised Disease Management Programmes when diagnosed with a life-threatening condition, e.g. cancer or HIV/AIDS
- MRI-, CT scans payable from major medical benefits, both in and out of hospital
- Unlimited benefits for laser tonsillectomies, gastroscopies and colonoscopies when performed both during and/or not during hospitalisation (co-payments may apply)
- Generous benefits for pregnancy and birth, including home deliveries by a registered midwife and pre-birth education (ante-natal classes)
- Unlimited benefits for rehabilitation and home nursing, subject to Scheme approval

# What are your options for 2017?



## MEDXXI

### Principal

**R 1,599.00**

### Adult Dependant

**R 1,592.00**

### Minor Dependant (Payable up to maximum 3)

**R818.00**

### OFFERS

- Unlimited hospital cover at any of the Scheme's Designated Hospitals, paid at 100% of Agreed Tariff
- 25 PMB chronic conditions
- Ante-natal Classes and Foetal Scans (R 1,600.00)
- Contraceptive benefit to a maximum of R 1,500.00
- Benefits for Mammogram and Pap Smear
- Certain clinical procedures (Gastroscopy and Colonoscopy) covered in Doctor's room
- Unlimited MRI-, CT scans in and out of hospital
- Benefits for Non-Elective Maxilla-Facial and Oral Surgery
- Maternity visits (subject to limit)
- Out-Patient Treatment at Hospital Facility
  - Limited to R 1,000.00 per family per annum for treatment at a hospital out-patient facility or emergency rooms





## SELSURE

### Principal

**R 2,456.00**

### Adult Dependant

**R 2,451.00**

### Minor Dependant (Payable up to maximum 3)

**R 836.00**

### OFFERS

- Unlimited hospital cover for any PMB at DSP (Designated Service Providers)
  - any private hospital in South Africa, paid at 100% of Agreed Tariff for elective hospitalisation
- GP visits, specialist visits, acute meds = R 4,800.00 (principal member); R 3,400.00 (adult dependant); R 1,700.00 (minor dependant)
- Basic Dentistry, Pathology, Radiology and Physiotherapy = R 4,900.00 or R 6,900.00 for family
- Optometry = R 2,600.00 per beneficiary or R 5,100.00 per family over two years
- Medical Appliances = R 4,300.00
- 25 PMB conditions
- Unlimited Maternity visits
- Ante-natal Classes and Foetal Scans (R 1,600.00)
- Contraceptive benefit to a maximum of R 1,500.00
- Certain clinical procedures (Gastroscopy and Colonoscopy) covered in Doctor's room
- Unlimited MRI; CT scans in and out of hospital
- Benefits for Non-Elective Maxilla-Facial and Oral Surgery
- Student dependants qualify for minor contributions up to the age of 25



## MED ELITE

### Principal

**R 4,406.00**

### Adult Dependant

**R 3,778.00**

### Minor Dependant (Payable up to maximum 3)

**R 1,267.00**

### OFFERS

- Unlimited hospital cover at any of the Scheme's Designated Hospitals, paid at 100% of Agreed Tariff
- Joint Replacements covered (individual sub-limits apply)
- Generous Oncology Benefits, cover for Biological drugs
- 65 Chronic conditions covered up to R 29,200.00
- Ante-natal Classes and Foetal Scans (R 1,600.00)
- Benefits for Mammogram and Pap Smear
- Certain clinical procedures (Gastroscopy and Colonoscopy) covered in Doctor's room
- Unlimited MRI-,CT scans in and out of hospital
- Benefits for Non-Elective Maxilla-Facial and Oral Surgery



## SELFMED 80%

### Principal

**R 6,335.00**

### Adult Dependant

**R5,485.00**



































### Minor Dependant (Payable up to maximum 3)

**R 1,100.00**

### OFFERS

- Unlimited hospital cover for any PMB at DSP (Designated Service Providers) - any private hospital in South Africa, paid at 100% of Agreed Tariff for elective hospitalisation
- Specialist covered at 80% of Cost in- and out- of hospital
- Joint Replacements covered (individual sub-limits apply)
- Generous Oncology benefits, cover for Biological drugs
- 65 Chronic conditions covered up to R 45,400.00
- Optometry = R 5,500.00 per beneficiary or R 10,900.00 per family over two years
- Ante-natal Classes paid at Cost (R 1,400.00)
- Student dependants qualify for minor contributions up to the age of 25



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
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
Pathology	 Unlimited	 Except if treatment part of Disease Management Programme and 1 Pap Smear per year by General Practitioner, except for PMB
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 1,600.00 per Family per Year
Ante-Natal Consultations	Not Applicable	 Limited to 2 per year
Confinement	Benefits as described in respect of Hospitalisation and Medical Practitioners	
<b>AUXILIARY SERVICES</b>		
Physiotherapy	 Unlimited	
Medical Technology	 Unlimited	
Clinical Technology	 Unlimited	
Speech Therapy and Occupational Therapy	 Unlimited	
Podiatry, Orthoptic treatment, Hearing Aid Acoustics, consultations with Dietitians, Chiropractors, Osteopaths, Homeopaths, Naturopaths, Herbalists and Biokinetics		
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	100% of Cost - 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	



Description of Service/Treatment	Services rendered as part of hospitalisation - subject to pre-authorization	Services rendered NOT as part of hospitalisation
<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 2,700.00 per family per year, limit will not apply to PMB
<b>BLOOD TRANSFUSIONS</b>		
	100% of Cost	100% of Cost - subject to pre-authorization
<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, PMB 100% of Cost subject to PMB protocol	⌚ Unlimited, 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 1,500.00 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	Benefit managed as part of an Oncology Benefit Management Programme and subject to use of Preferred Provider Network. Overall limit of R 176,600.00 per family per year. No benefit for Biological drugs. Please refer to Member Guide for detail	
Asthma, Chronic Obstructive Airways Disease, Diabetes and Cardiocare	Benefit managed by the Scheme and payable as per the applicable benefit described elsewhere in this summary	
Oxygen therapy	100% of Cost of 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>AIDS AND HIV</b>		
	Benefits managed as part of a Disease Management Programme	
<b>FOREIGN CLAIMS</b>		
	No benefit, except for Namibian claims	
<b>MENTAL HEALTH</b>		
Clinical Psychology	⌚ Provided that treatment must form part of Case Management Programme	△
Psychiatry	Benefit as described elsewhere in this summary for Medical Practitioners and Hospitalisation. Treatment 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 2017**
**CONTRIBUTIONS:**

Principal member

**R 1,599.00**































Additional Adult Dependant


















**R 1,592.00**

 Additional Minor Dependant  
(payable up to maximum 3)

**R 818.00**



Description of Service/Treatment	Services rendered as part of hospitalisation - subject to pre-authorization	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	Benefit as described in respect of doctor visits and Acute Medicine
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	 Subject to Annual Day-to-day limit
Radiology and Pathology	 Unlimited	 Subject to joint limit for Basic Dentistry, Physiotherapy and Biokinetics
ECHO-tests	 Unlimited	 Limited to R 2,800.00 per beneficiary per year
MRI-, CT scans and Radio-Isotope studies (Benefits subject to separate pre-authorization)	 R 1,600.00 co-payment applies	 R 1,600.00 co-payment applies
Clinical Procedures	 Unlimited  Please refer to Members' Guide for detail No benefits for elective procedures, unless funded as PMB treatment: - Joint Replacements - Spinal Surgery	 Subject to pre-authorization: - 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 limited to Annual Day-to-day Limit
Cochlear Implants	 Limited to R 30,200.00 per implant	Not Applicable
Material and injection material administered in doctor's rooms	Not Applicable	 Subject to Annual Day-to-day Limit
<b>MATERNITY</b>		
Ante-natal Classes and Foetal Scans	 Unlimited	 Foetal Scans limited to 2 per beneficiary per year and the cost of a 3D scan is limited to the cost of a 2D scan. Benefits allowed for additional pregnancy scans and/or pre-childbirth education at 100% of Cost to a maximum of R1,600.00 per Family per Year
Ante-Natal Consultations	 Unlimited	 Unlimited
Confinement	Benefits as described in respect of Hospitalisation and Medical Practitioners. Benefits in respect of pre-term babies are limited to the Prescribed Minimum Benefits	
<b>AUXILIARY SERVICES</b>		
Physiotherapy and Biokinetics	 Unlimited	 Subject to joint limit for Radiology, Pathology and Basic Dentistry
Medical Technology	 Unlimited	 Subject to Annual Day-to-day Limit
Clinical Technology	 Unlimited	 Subject to Annual Day-to-day Limit
Speech Therapy and Occupational Therapy	 Unlimited (treatment to form part of a Case Management Programme)	 Subject to Annual Day-to-day Limit
Podiatry, Orthoptic treatment, Hearing Aid Acoustics, consultations with Dietitians, Chiropractors, Osteopaths, Homeopaths, Naturopaths, Herbalists and Biokinetics	Benefits as described in respect of services rendered not as part of hospitalisation	 Subject to Annual Day-to-day Limit
Aromatherapy, Acupuncture and Reflexology		
<b>OPTICAL</b>		
Consultation	Not Applicable	100% of Cost
Spectacles and Contact Lenses	Not Applicable	100% of Cost
Refractive Surgery		
<b>SECONDARY FACILITIES</b>		
Treatment that forms part of a Case Management Programme	100% of Cost, subject to approval by Case Manager	
<b>REHABILITATION</b>		
Only benefits 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 2,700.00 per family per year, limit will not apply to PMB

Description of Service/Treatment	Services rendered as part of hospitalisation - subject to pre-authorisation	Services rendered NOT as part of hospitalisation
<b>BLOOD TRANSFUSIONS</b>		
	100% of Cost	100% of Cost - 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 detail	
External Prosthesis	100% of Cost, limited to R 56,300.00 per family per year - subject to approval by Case Manager	
Orthopaedic Appliances	100% of Cost limited to R 8,000.00 per family per year - subject to Case Management	
Medical Appliances	Not Applicable	100% of Cost, limited to R 4,300.00 per family per year. This maximum may be exceeded, subject to a maximum of R 12,900.00, in respect of certain appliances, provided that the treatment forms part of a Case Management Programme
Hearing Aids	Not Applicable	
<b>DENTISTRY</b>		
Basic	 R 1,100.00 co-payment applies and subject to joint limit for Radiology, Pathology, Physiotherapy and Biokinetics	 Subject to joint limit for Radiology, Pathology, Physiotherapy and Biokinetics
Specialised	 R1,100.00 co-payment applies and subject to Annual Day-to-day Limit	 Subject to Annual Day-to-day Limit
<b>MAXILLA-FACIAL AND ORAL SURGERY</b>		
Elective	 R 1,100.00 co-payment applies and subject to Annual Day-to-day Limit	 Subject to Annual Day-to-day Limit
Non-elective (excluding extractions)	 R 1,100.00 co-payment applies and subject to Annual Day-to-day Limit, except for PMB	 Unlimited, PMB 100% of Cost subject to PMB protocol
Implantology	 R 1,100.00 co-payment applies, PMB 100% of Cost subject to PMB protocol	 Subject to Annual Day-to-day Limit
<b>PRESCRIBED MEDICINE</b>		
Chronic (Member must apply for benefit)	Not Applicable	 Except PMB
Acute	Not Applicable	100% of Agreed Tariff (RP applies) - subject to Annual Day-to-day Limit
Immunisations	Not Applicable	100% of Agreed Tariff (RP applies) - subject to Annual Day-to-day Limit
Oral & Injectable Contraceptives	Not Applicable	 Limited to R 1,500.00 per family per year
<b>NON-PRESCRIBED MEDICINE (PAT)</b>		
	Not Applicable	100% of Agreed Tariff (RP applies) - limited to R 260.00 per day and subject to Annual Day-to-day Limit
<b>CASE MANAGED / DISEASE MANAGED CONDITIONS / PROCEDURES</b>		
Organ Transplants	The following benefits apply to organ donors in RSA. R 44,900.00 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	Benefit managed as part of an Oncology Benefit Management Programme and subject to use of Preferred provider. Overall limit R 242,400.00 per family per year. No benefit for Biological drugs. Please refer to Member Guide for detail	
Asthma, Chronic Obstructive Airways Disease, Diabetes and Cardiacare	Benefits managed by the Scheme and payable as per the applicable benefits described elsewhere in this summary	
Oxygen therapy	100% of Cost of 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 subjected to member being registered on the Programme and member being compliant	
Mammograms and Pap Smears	Benefit Subject to Disease Management protocol	
<b>AIDS AND HIV</b>	Benefits managed as part of a Disease Management Programme	
<b>FOREIGN CLAIMS</b>	No benefit, except for Namibian claims	
<b>MENTAL HEALTH</b>		
Clinical Psychology	 Unlimited - provided that treatment must form part of Case Management Programme	 Subject to Annual Day-to-day Limit
Psychiatry	Benefit as described elsewhere in this summary for Medical Practitioners and Hospitalisation. Treatment 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 2017**
**CONTRIBUTIONS:**

Principal member

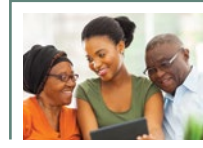
**R 2,456.00**
















Additional Adult Dependant

**R 2,451.00**

 Additional Minor Dependant  
(payable up to maximum 3)

**R 836.00**



Description of Service/Treatment	Services rendered as part of hospitalisation - subject to pre-authorization	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	△
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 Limit will not apply to PMB
ECHO-tests	 Unlimited	△
MRI, CT scans and Radio-Isotope studies (Benefits subject to separate pre-authorization)	 R 1,100.00 co-payment applies	 R 1,100.00 co-payment applies
Pathology	 Unlimited	△ Except for cases managed as part of a Case Management Program and 1 Pap Smear per year by General Practitioner. Limit will not apply to PMB
Clinical Procedures	 Unlimited Co-payments applicable to certain elective procedures, unless funded as PMB treatment Refer to Members' Guide for details	 = Subject to pre-authorization: - 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 74,500.00 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 1,600.00 per Family per Year
Confinement	Benefits as described in respect of Hospitalisation and Medical Practitioners	
<b>AUXILIARY SERVICES</b>		
Physiotherapy and Biokinetics	 Unlimited	△
Medical Technology	 Unlimited	△
Clinical Technology	 Unlimited	△
Speech Therapy and Occupational Therapy	 Unlimited	△
Podiatry, Orthoptic treatment, Hearing Aid Acoustics, consultations with Dietitians, Chiropractors, Osteopaths, Homeopaths, Naturopaths, Herbalists and Biokinetics	△	△
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	100% of Cost, subject to approval by Case Manager	
<b>REHABILITATION</b>		
To be self-funded, except 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 2,700.00 per family per year, limit will not apply to PMB



Description of Service/Treatment	Services rendered as part of hospitalisation - subject to pre-authorisation	Services rendered NOT as part of hospitalisation
<b>BLOOD TRANSFUSIONS</b>		
	100% of Cost	100% of Cost - 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 detail	
External Prosthesis	100% of Cost, limited to R 58,400.00 per family per year – subject to approval by Case Manager	
Orthopaedic Appliances	100% of Cost limited to R 8,800.00 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, PMB 100% of Cost subject to PMB protocol	🔌 Unlimited, PMB 100% of Cost subject to PMB protocol
Implantology	△	△
<b>PRESCRIBED MEDICINE</b>		
Chronic (Member must apply for benefit)	Not Applicable	100% of Agreed Tariff (RP), limited to R 29,200.00 per family per year
Acute	Not Applicable	△
Immunisations	Not Applicable	△
Oral & Injectable Contraceptives	Not Applicable	🕒 Limited to R 1,500.00 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 46,200.00 for a live donor, R 27,500.00 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	100% Medical Scheme Rate for Kidney Dialysis, incl. associated Radiology and Pathology tests - Unlimited	
Oncology	Benefit managed as part of an Oncology Benefit Management Programme. Overall limit R 327,100.00 per family per year with a sub-limit of R 157,600.00 for Biological drugs, if approved by Scheme. Please refer to Member Guide for detail	
Asthma, Chronic Obstructive Airways Disease, Diabetes and Cardiacare	Benefits managed by the Scheme and payable as per the applicable benefits described elsewhere in this summary	
Oxygen therapy	100% of Cost of oxygen therapy (cylinders included) subject to Case Management	
Human Papillomavirus (HPV), Prostate Test, Pneumococcal Conjugate Vaccine (PVC) and Annual Influenza Type B Single Dose.	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>AIDS AND HIV</b>	Benefits managed as part of a Disease Management Programme	
<b>FOREIGN CLAIMS</b>	No benefit, except for Namibian claims	
<b>MENTAL HEALTH</b>		
Clinical Psychology	🔌 Unlimited – provided that treatment must form part of Case Management Programme	△
Psychiatry	Benefit as described elsewhere in this summary for Medical Practitioners and Hospitalisation. Treatment 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 2017**
**CONTRIBUTIONS:**

Principal member

**R 4,406.00**

















Additional Adult Dependant





**R 3,778.00**

 Additional Minor Dependant  
(payable up to maximum 3)

**R 1,267.00**



Description of Service/Treatment	Services rendered as part of hospitalisation - subject to pre-authorization	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	Benefits as described in respect of doctor visits and Acute Medicine
Medicine received on discharge from hospital	100% of Agreed Tariff (RP applies), if purchased on date of discharge, limited to a maximum of 7 days supply	
<b>MEDICAL PRACTITIONERS</b>		
Consultations/Visits	80% of Cost - Unlimited	80% of Cost - subject to the following limits: Single member = max 15 visits Member + 1 dependant = max 30 visits Member + 2 or more dependants = max 45 visits
Radiology and Pathology	 Unlimited	80% of Medical Scheme Rate - Unlimited
ECHO-tests	 Unlimited	80% of Medical Scheme Rate - limited to R 2,800.00 per beneficiary per year
MRI-, CT scans and Radio-Isotope studies (Benefits subject to separate pre-authorization)	 R 1,100.00 co-payment applies	80% of Medical Scheme Rate R 1,100.00 co-payment applies
Pathology	 Unlimited	80% of Medical Scheme Rate - Unlimited
Clinical Procedures	80% of Cost - Unlimited	80% of Cost for the following, subject to pre-authorization: - 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 are payable at 80% of Cost - Unlimited
Cochlear Implants	 Limited to R 74,500.00 per implant	Not Applicable
Material and injection material administered in doctor's room	Not Applicable	80% of Agreed Tariff (RP applies) - subject to Acute Medicine Limit
<b>MATERNITY</b>		
Ante-natal Classes and Foetal Scans	 Unlimited	80% of Cost - Benefits limited to 2 per beneficiary per year and the cost of a 3D-scan is limited to the cost of a 2D-scan Benefits allowed for additional pregnancy scans and/or pre-childbirth education at 100% of Cost to a maximum of R 1,400.00 per Family per Year
Confinement	Benefits as described in respect of Hospitalisation and Medical Practitioners	
<b>AUXILIARY SERVICES</b>		
Medical Technology	 Unlimited	80% of Medical Scheme Rate - Unlimited
Clinical Technology	 Unlimited	80% of Medical Scheme Rate - Unlimited
Physiotherapy	 Unlimited	
Speech Therapy and Occupational Therapy	 Treatment to form part of a Case Management Programme	80% of Medical Scheme Rate - limited to R 4,800.00 per beneficiary to a maximum of R 13,600.00 per family per year
Podiatry, Orthoptic treatment, Hearing Aid Acoustics, consultations with Dietitians, Chiropractors, Osteopaths, Homeopaths, Naturopaths, Herbalists and Biokinetics	 Benefits as described in respect of services rendered not as part of hospitalisation	
Aromatherapy, Acupuncture and Reflexology		
<b>OPTICAL</b>		
	Limited to R 5,500.00 per beneficiary to a maximum of R 10,900.00 per family over two years	
Consultation	Not Applicable	80% of Cost
Spectacles and Contact Lenses	Not Applicable	80% of Cost
Refractive Surgery		
<b>SECONDARY FACILITIES</b>		
Treatment that forms part of a Case Management Programme	100% of Cost, 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 2,700.00 per family per year, limit will not apply to PMB

Description of Service/Treatment	Services rendered as part of hospitalisation - subject to pre-authorisation	Services rendered NOT as part of hospitalisation
<b>BLOOD TRANSFUSIONS</b>		
	100% of Cost	100% of Cost - 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 detail	
External Prosthesis	100% of Cost, limited to R 63,700.00 per family per year - subject to approval by Case Manager	
Orthopaedic Appliances	100% of Cost, limited to R 9,400.00 per family per year - subject to Case Management	
Medical Appliances	Not Applicable	80% of Cost - limited to R 5,300.00 per family per year. This maximum may be exceeded, subject to a maximum limit of R 15,900.00, in respect of certain appliances, provided that the treatment forms part of a Case Management Programme
Hearing Aids	Not Applicable	80% of Cost, limited to R 16,200.00 per family per year
<b>DENTISTRY</b>		
Basic	80% of Medical Scheme Rate	80% of Medical Scheme Rate
Specialised	80% of Medical Scheme Rate - limited to R 7,700.00 per beneficiary to a maximum of R 23,600.00 per family per year	
<b>MAXILLA-FACIAL AND ORAL SURGERY</b>		
Elective	80% of Medical Scheme Rate - Unlimited	80% of Medical Scheme Rate - Unlimited
Non-elective (excluding extractions)	 Unlimited, PMB 100% of Cost subject to PMB protocol	 Unlimited, PMB 100% of Cost subject to PMB protocol
Implantology	80% of Medical Scheme Rate - implants (prosthesis) limited to R 5,600.00 per beneficiary per year	
<b>PRESCRIBED MEDICINE</b>		
Chronic (Member must apply for benefit)	Not Applicable	80% of Agreed Tariff (RP applies), limited to R 23,300.00 per beneficiary per year with a maximum of R 45,400.00 per family per year
Acute	Not Applicable	80% of Agreed Tariff (RP applies) limited to R 5,800.00 per beneficiary to a maximum of R 17,200.00 per family per year
Immunisations	Not Applicable	
Oral & Injectable Contraceptives	Not Applicable	
<b>NON-PRESCRIBED MEDICINE (PAT)</b>		
	Not Applicable	80% of Agreed Tariff (RP applies) - limited to R 1,500.00 per family per year and subject to the Acute Medicine maximum
<b>CASE MANAGED / DISEASE MANAGED CONDITIONS / PROCEDURES</b>		
Organ Transplants	The following benefits apply to organ donors in RSA: R 51,000.00 for a live donor, R 30,200.00 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	100% of Medical Scheme Rate for Kidney Dialysis, incl. associated Radiology and Pathology tests - Unlimited	
Oncology	Benefit managed as part of an Oncology Management Programme. Overall limit of R 408,500.00 per family per year applies with a sub-limit of R 157,600.00 for Biological Drugs, if approved by the Scheme. Please refer to Member Guide for detail	
Asthma, Chronic Obstructive Airways Disease, Diabetes and Cardiocare	Benefits managed by the Scheme and payable as per the applicable benefits described elsewhere in this summary	
Oxygen therapy	100% of Cost of oxygen therapy (cylinders included) subject to Case Management	
Human Papillomavirus (HPV), Prostate Test, Pneumococcal Conjugate Vaccine (PVC) and Annual Influenza Type B Single Dose	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>AIDS AND HIV</b>		
	Benefits managed as part of a Disease Management Programme	
<b>FOREIGN CLAIMS</b>		
	No benefit, except for Namibian claims	
<b>MENTAL HEALTH</b>		
Clinical Psychology	 Unlimited - provided that treatment must form part of Case Management Programme	80% of Medical Scheme Rate - subject to R 8,800.00 Clinical Psychology limit
Psychiatry	 Unlimited - provided that treatment must form part of Case Management Programme	80% of Medical Scheme Rate - subject to R 8,800.00 Clinical Psychology limit
<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 2017**
**CONTRIBUTIONS:**

Principal member

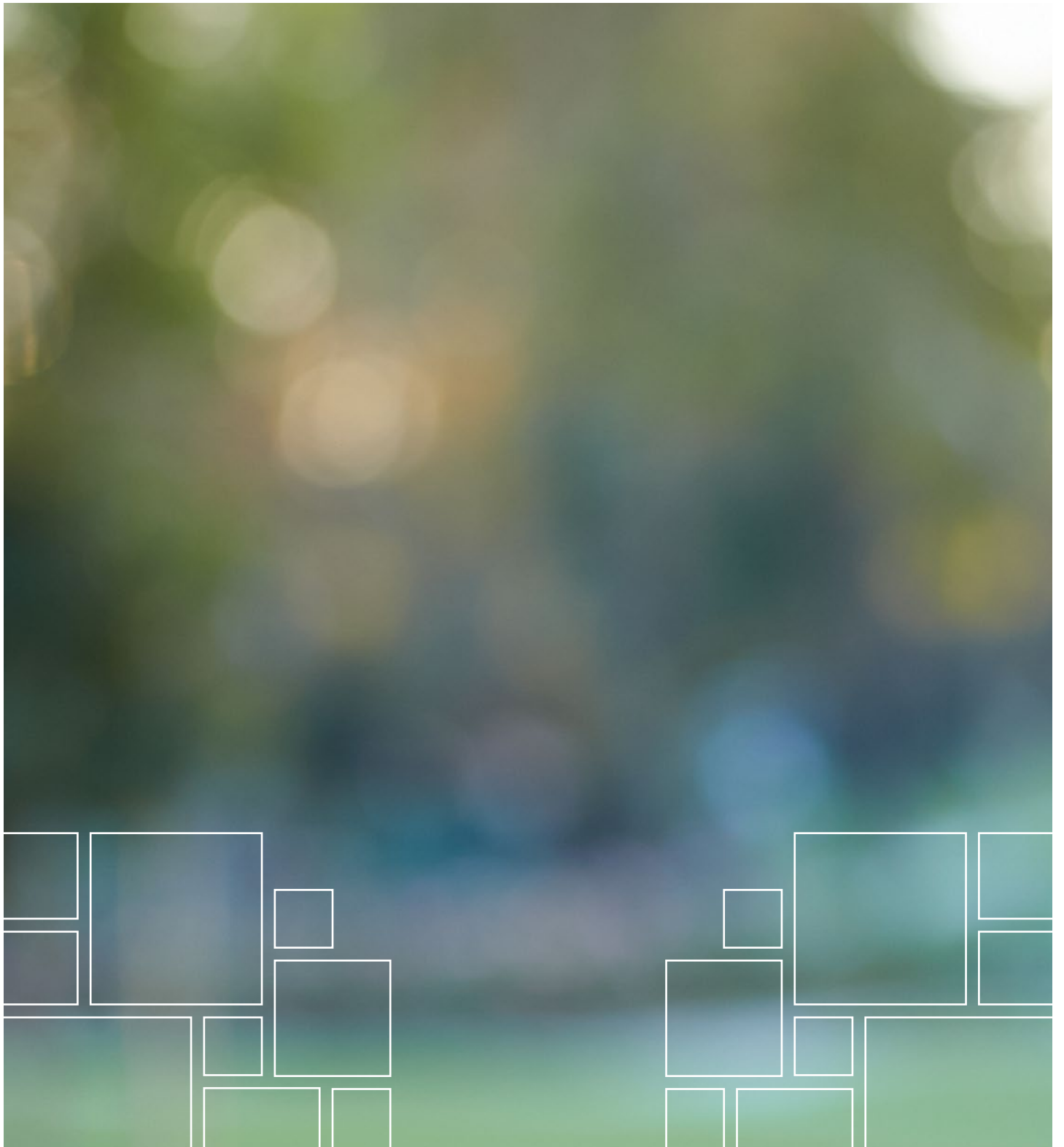
**R 6,335.00**

Additional Adult Dependant

**R 5,485.00**

 Additional Minor Dependant  
(payable up to maximum 3)

**R 1,100.00**



<b>Cape Town</b> 021 943 2300	<b>Durban</b> 031 576 0366	<b>Free State</b> 011 466 6068	<b>Johannesburg</b> 011 466 6068	<b>Mpumalanga</b> 013 741 4588	<b>Port Elizabeth</b> 021 943 2300
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