
















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-authorization	Services rendered NOT as part of hospitalisation
<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 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**