

Description of Service/Treatment	Services rendered as part of hospitalisation – subject to pre-authorisation	Services rendered NOT as part of hospitalisation
OVERALL MAXIMUM	None	None
HOSPITALISATION		
Accommodation, theatre, medicine and material used 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	
MEDICAL PRACTITIONERS		
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	100% of Medical Scheme Rate – unlimited	80% of Medical Scheme Rate - unlimited
ECHO-tests	100% of Medical Scheme Rate – unlimited	80% of Medical Scheme Rate - limited to R2 100 per beneficiary per year
MRI-, CT-scans and radio-isotope studies (Benefits subject to separate pre-authorisation)	100% of Medical Scheme Rate – R1 100 co-payment applies	80% of Medical Scheme Rate - R1 100 co-payment applies
Pathology	100% of Medical Scheme Rate – unlimited	80% of Medical Scheme Rate - unlimited
Clinical Procedures	80% of cost – unlimited	80% of cost for the following, 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 are payable at 80% of cost - unlimited
Cochlear Implants	100% of Medical Scheme Rate, limited to R55 500 per implant	Not applicable
Material and injection material administered in doctor's rooms	Not applicable	80% of Agreed Tariff (RP applies) – unlimited
MATERNITY		
Foetal Scans	100% of Medical Scheme Rate – unlimited	80% of Medical Scheme Rate - unlimited Benefits limited to 2 per beneficiary per year and the cost of a 3D-scan is limited to the cost of a 2D-scan
Ante-natal Classes	To be self-funded	100% of cost, limited to R1 100 per family per year
Confinement	Benefits as described in respect of Medical Practitioners and Hospitalisation	
AUXILIARY SERVICES		
Medical Technology	100% of Medical Scheme Rate – unlimited	80% of Medical Scheme Rate - unlimited
Clinical Technology	100% of Medical Scheme Rate – unlimited	80% of Medical Scheme Rate - unlimited
Physiotherapy	100% of Medical Scheme Rate – unlimited	80% of Medical Scheme Rate – limited to R3 500 per beneficiary to a maximum of R10 000 per family per year
Speech Therapy and Occupational Therapy	100% of Medical Scheme Rate – unlimited Treatment to form part of a Case Management Programme	
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	To be self-funded	To be self-funded
OPTICAL		
Consultation	Not applicable	Limited to R4 000 per beneficiary to a maximum of R8 000 per family over two years 80% of cost
Spectacles and Contact Lenses	Not applicable	80% of cost
Refractive Surgery	To be self-funded	To be self-funded

Description of Service/Treatment	Services rendered as part of hospitalisation – subject to pre-authorisation	Services rendered NOT as part of hospitalisation
SECONDARY FACILITIES		
Treatment that forms part of a Case Management Programme	100% of cost, subject to approval by Case Manager	100% of cost, subject to approval by Case Manager
REHABILITATION		
Only benefits for cases managed as part of a Case Management Programme, where a medical report was submitted by the attending physician		
AMBULANCE SERVICES		
Preferred Provider (ER24)	Not applicable	100% of Agreed Tariff for emergency transport to and from a hospital
Non-preferred Provider	Not applicable	100% of Medical Scheme Rate, limited to R2 000 per family per year
BLOOD TRANSFUSIONS		
100% of cost		
MEDICAL AND SURGICAL PROSTHESIS / APPLIANCES		
Internal Prosthesis	Specific sub-categories with limits apply. Please refer to Members' Guide for detail	
External Prosthesis	100% of cost, limited to R47 500 per family per year – subject to approval by case manager	
Orthopaedic Appliances	100% of cost limited to R7 000 per family per year – subject to case management	
Medical Appliances	Not applicable	80% of cost, limited to R4 000 per family per year
Hearing Aids	Not applicable	80% of cost, limited to R12 000 per family per year
DENTISTRY		
Basic	80% of Medical Scheme Rate	80% of Medical Scheme Rate
Specialised	80% of Medical Scheme Rate – limited to R5 500 per beneficiary to a maximum of R17 000 per family per year	
MAXILLA-FACIAL AND ORAL SURGERY		
Elective	80% of Medical Scheme Rate - unlimited	80% of Medical Scheme Rate - unlimited
Non-elective	100% of Medical Scheme Rate - unlimited	100% of Medical Scheme Rate - unlimited
Implantology	80% of Medical Scheme Rate – implants (prosthesis) limited to R4 200 per beneficiary per year	
PRESCRIBED MEDICINE		
Chronic (member must apply for benefit)	Not applicable	80% of Agreed Tariff (RP applies), limited to R17 000 per beneficiary per year with a maximum of R33 000 per family per year
Acute	Not applicable	80% of Agreed Tariff (RP applies) limited to R4 200 per beneficiary to a maximum of R12 500 per family per year
Immunisations	Not applicable	
Oral contraceptives and IUD's	Not applicable	
NON-PRESCRIBED MEDICINE (PAT)	Not applicable	80% of Agreed Tariff (RP applies) - limited to R1 000 per family per year and subject to the acute medicine maximum
CASE MANAGED / DISEASE MANAGED CONDITIONS / PROCEDURES		
Organ Transplants	The following benefits apply to organ donors in RSA: R38 000 for a live donor, R22 500 for a cadaver. Benefits 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 the transplant procedure will also qualify for benefits	
Chronic Renal Failure	100% of Medical Scheme Rate for kidney dialysis, including associated radiology and pathology services - unlimited	
Oncology	Benefit managed as part of an Oncology Management Programme. Overall limit of R306 000 per family per year applies with a sub-limit of R122 500 for biological drugs, if approved by the Scheme. Please refer to Members' Guide for more 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	
AIDS AND HIV	Benefits managed as part of a Disease Management Programme	
FOREIGN CLAIMS	No benefits except for Namibian claims	
MENTAL HEALTH		
Clinical Psychology	100% of Medical Scheme Rate – unlimited – provided that treatment must form part of Case Management Programme	80% of Medical Scheme Rate – limited to R6 500 per family per year
Psychiatry	Benefits 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	
PRESCRIBED MINIMUM BENEFITS (PMB)	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 co-payment (determined by the Scheme) will apply. Scheme protocol apply	

Contributions - effective 1 January 2012

	Principal member	Additional Adult Dependant	Additional Minor Dependant (payable up to maximum 3)
Contributions	R4 213	R3 650	R 727

ABBREVIATION: RP = Reference Pricing
PMB= Prescribed Minimum Benefits

Medical Scheme Rate= Reference Price or such other rate as agreed by the Scheme

This is only a summary of the Benefits and Contributions. In case of a dispute the Registered Scheme Rules will apply. Reg. No: 1446 FSP No: 15494