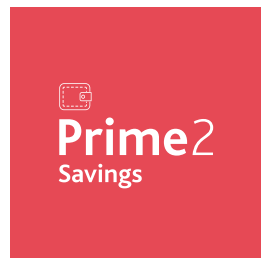




medihelp

medical scheme



Benefit options 2020

Contents (Click on the contents below to read more)

01 A sustainable choice

- 3 Product overview
- 4 Contribution table
- 5 Benefit comparison
- 6 Added insured benefits
- 7 Chronic illness and PMB cover

08 Benefits

- 8 Core benefits
- 13 Day-to-day benefits
- 18 Deductibles

19 Summary of exclusions

- 20 Prime hospital network
- 21 Our healthcare partners
- 22 Explanation of terms
- 24 Contact us

General disclaimer

This brochure is intended for marketing purposes and contains only a summary of Medihelp's benefits. On joining Medihelp, members will receive detailed information. In case of a dispute, the registered Rules of Medihelp apply, which are available on request. The information in this brochure is subject to approval by the Council for Medical Schemes. The content of this brochure may change from time to time. Please refer to Medihelp's website for an updated brochure or consult Medihelp's Rules for the latest information. We encourage you to seek financial advice about your healthcare cover by speaking to your financial adviser.

A sustainable choice

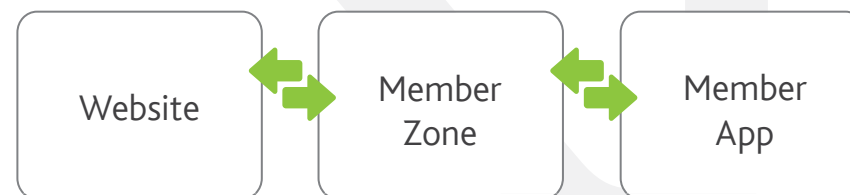


Consistent service delivery

There are various ways in which you can engage with us:

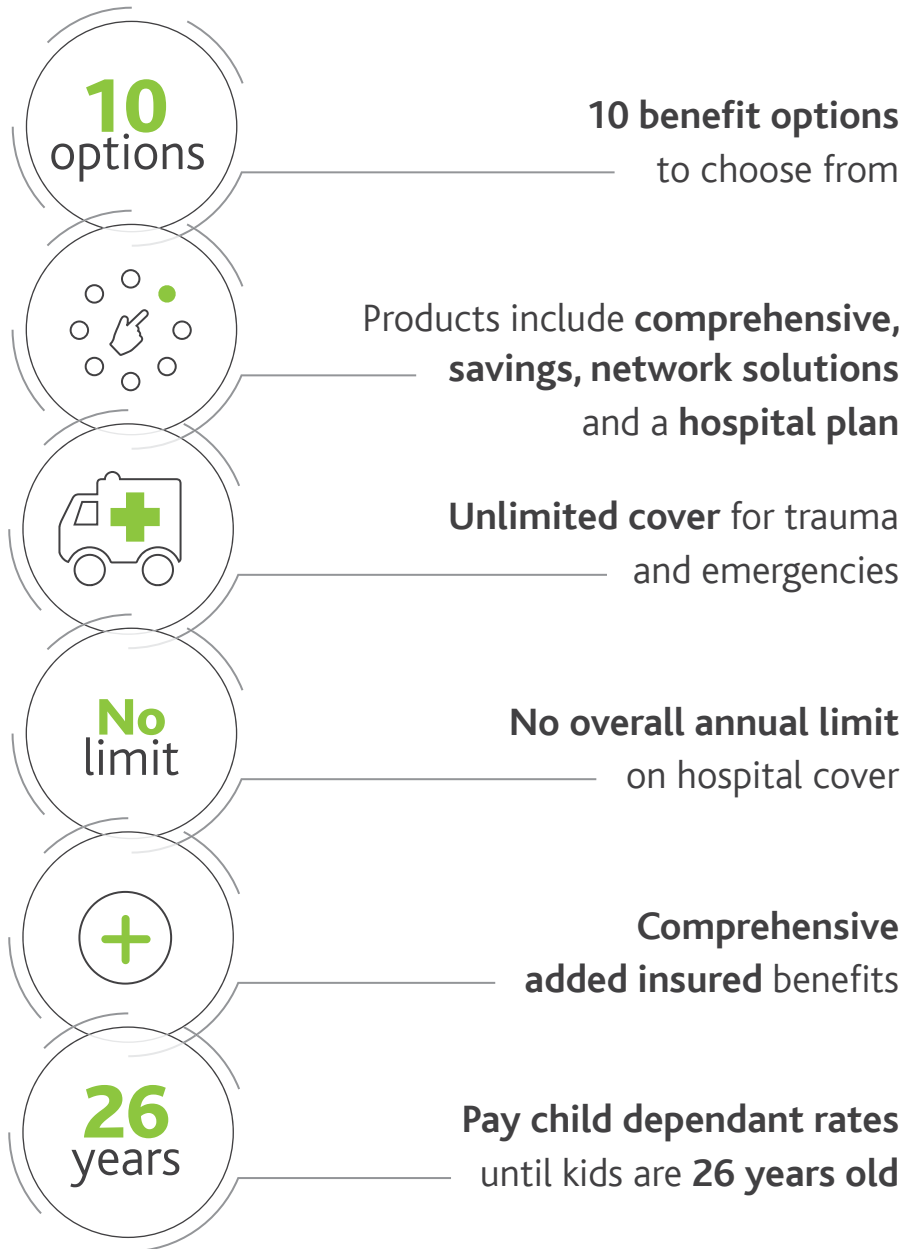


Medihelp's digital service platforms:



- ✓ Download/email your e-membership card and tax certificate
- ✓ View your benefits, track and submit claims
- ✓ Update your contact details
- ✓ Apply for hospital authorisation
- ✓ Locate a healthcare provider near you
- ✓ Access, update and share your Medihelp health data based on screening test results and claims received

Product simplicity and value

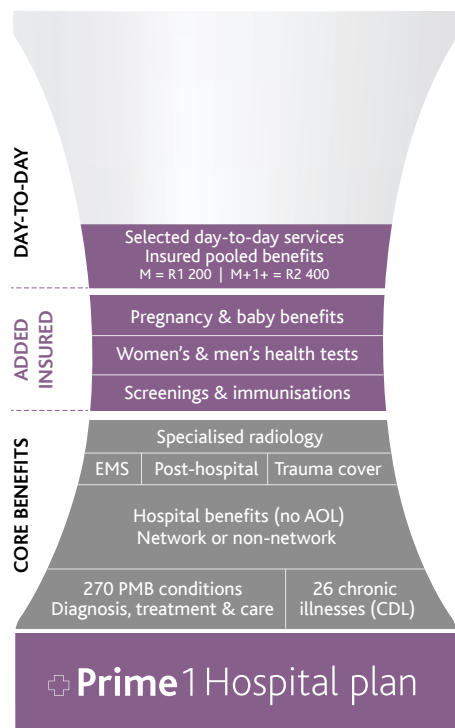


Product overview

Prime 1 Hospital plan

Network/non-network

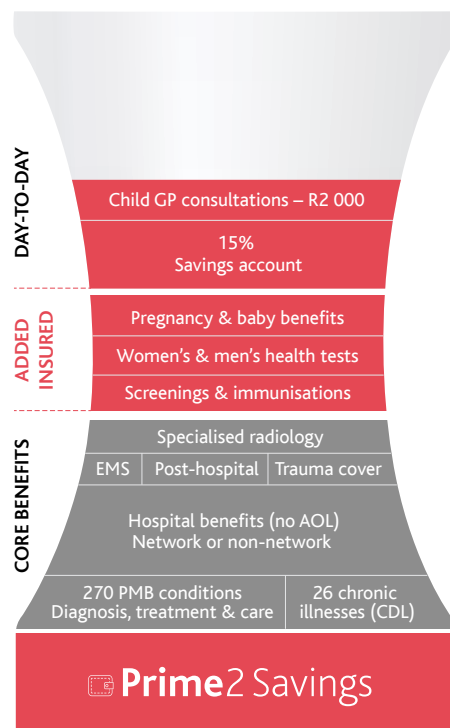
This hospital plan is ideal if you are healthy and want access to private healthcare at an affordable price. Minor day-to-day medical expenses and extensive added insured benefits forms part of Prime 1. The network alternative of the option saves you 22% in monthly contributions.



Prime 2 Savings

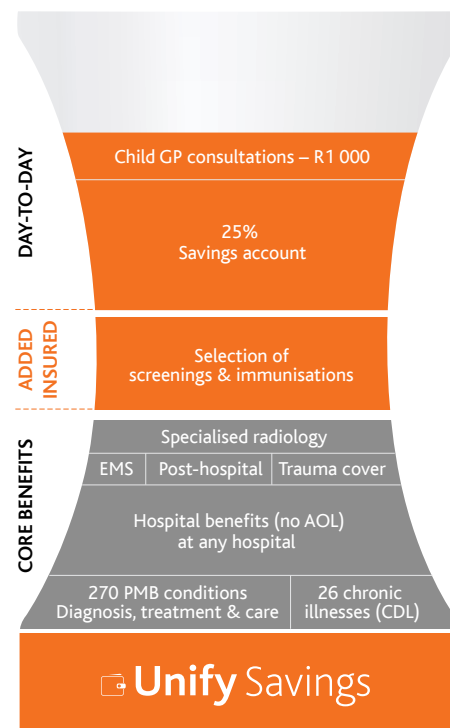
Network/non-network

Prime 2 provides hospital cover either at any facility or through a network (pay 22% less for the network option). A 15% savings account and added insured benefits cover day-to-day medical expenses and a special GP consultation benefit for children is activated after depletion of the savings account.



Unify Savings

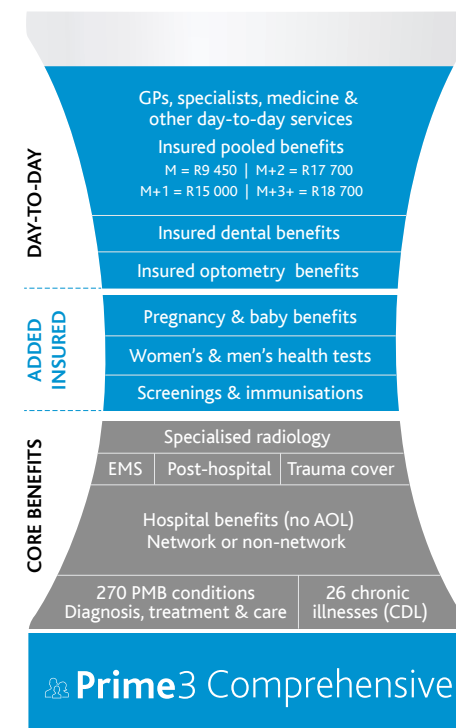
A generous 25% medical savings account for day-to-day medical expenses and a special GP consultation benefit for children which is activated after depletion of the savings account, as well as insured preventive care and excellent hospital benefits makes Unify a smart choice.















Prime 3 Comprehensive

Network/non-network

With ample pooled insured cover for day-to-day medical expenses, comprehensive hospital cover and added insured benefits, this is the ideal product for families. The network alternative of the option saves you 18% in monthly contributions.







Contribution table

	 Prime 1 Hospital plan		 Prime 2 Savings		 Unify Savings		 Prime 3 Comprehensive	
	Network	Non-network	Network	Non-network	Network	Non-network	Network	Non-network
Principal member 	R1 626	R2 082	R2 160 (R324 savings contribution included per month and R3 888 per year)	R2 772 (R414 savings contribution included per month and R4 968 per year)	R2 598 (R648 savings contribution included per month and R7 776 per year)	R2 964	R3 618	
Dependant 	R1 338	R1 716	R1 776 (R264 savings contribution included per month and R3 168 per year)	R2 280 (R342 savings contribution included per month and R4 104 per year)	R2 136 (R534 savings contribution included per month and R6 408 per year)	R2 508	R3 060	
Child dependant <26 years* 	R492	R630	R648 (R96 savings contribution included per month and R1 152 per year)	R828 (R120 savings contribution included per month and R1 440 per year)	R780 (R192 savings contribution included per month and R2 304 per year)	R864	R1 056	
	R2 964	R3 798	R3 936 (R588 savings contribution included per month and R7 056 per year)	R5 052 (R756 savings contribution included per month and R9 072 per year)	R4 734 (R1 182 savings contribution included per month and R14 184 per year)	R5 472	R6 678	
	R2 118	R2 712	R2 808 (R420 savings contribution included per month and R5 040 per year)	R3 600 (R534 savings contribution included per month and R6 408 per year)	R3 378 (R840 savings contribution included per month and R10 080 per year)	R3 828	R4 674	
	R2 610	R3 342	R3 456 (R516 savings contribution included per month and R6 192 per year)	R4 428 (R654 savings contribution included per month and R7 848 per year)	R4 158 (R1 032 savings contribution included per month and R12 384 per year)	R4 692	R5 730	
	R3 456	R4 428	R4 584 (R684 savings contribution included per month and R8 208 per year)	R5 880 (R876 savings contribution included per month and R10 512 per year)	R5 514 (R1 374 savings contribution included per month and R16 488 per year)	R6 336	R7 734	
	R3 948	R5 058	R5 232 (R780 savings contribution included per month and R9 360 per year)	R6 708 (R996 savings contribution included per month and R11 952 per year)	R6 294 (R1 566 savings contribution included per month and R18 792 per year)	R7 200	R8 790	
	R3 948	R5 058	R5 232 (R780 savings contribution included per month and R9 360 per year)	R6 708 (R996 savings contribution included per month and R11 952 per year)	R7 854 (R1 950 savings contribution included per month and R23 400 per year)	R7 200	R8 790	

Important: This table provides a guideline for contributions based on your family's composition. On Prime 2 Savings and Unify Savings, a credit facility equalling the monthly contribution to the personal medical savings account multiplied by 12 months, will be available at the beginning of each financial year. If you join Medihelp after January, your savings amount will be calculated based on the remaining months in the year. Please note that late-joiner penalties and employer subsidies were not taken into consideration. You are advised to obtain a detailed quotation from your accredited adviser based on your information.

* Pay child dependant rates for children younger than 26 years. On Prime 1, 2 and 3 you only pay for the youngest two children younger than 18 years.

Benefit comparison

	 Prime 1 Hospital plan		 Prime 2 Savings		 Unify Savings		 Prime 3 Comprehensive	
	Network	Non-network	Network	Non-network	Network	Non-network	Network	Non-network
Day-to-day benefits	INSURED DAY-TO-DAY BENEFITS M = R1 200 per year M+ = R2 400 per year GPs, specialists, physiotherapy, acute and self-medication		DAY-TO-DAY MEDICAL EXPENSES 15% medical savings account CHILD CARE BENEFITS M+ = R2 000 per year GP consultations for children ≥2 to <12 years old once savings account funds are depleted		DAY-TO-DAY MEDICAL EXPENSES 25% medical savings account CHILD CARE BENEFITS M+ = R1 000 per year GP consultations for children ≥2 to <12 years old once savings account funds are depleted		INSURED DAY-TO-DAY POOLED BENEFITS M = R9 450 per year M+1 = R15 000 per year M+2 = R17 700 per year M+3+ = R18 700 per year • GPs & specialists • Clinical psychology & physiotherapy • Supplementary health services • Acute medicine and self-medication • Standard radiology and pathology INSURED DENTISTRY BENEFITS Conservative & specialised INSURED OPTICAL BENEFITS Spectacles/contact lenses	
Added insured benefits	ADDED INSURED BENEFITS <ul style="list-style-type: none"> • Pregnancy and baby benefits • Women's & men's health tests • Screenings & immunisations 		ADDED INSURED BENEFITS <ul style="list-style-type: none"> • Pregnancy and baby benefits • Women's & men's health tests • Screenings & immunisations 		ADDED INSURED BENEFITS <ul style="list-style-type: none"> • A selection of screenings & immunisations 		ADDED INSURED BENEFITS <ul style="list-style-type: none"> • Pregnancy and baby benefits • Women's & men's health tests • Screenings & immunisations 	
Core benefits	HOSPITAL BENEFITS (NO OAL)		HOSPITAL BENEFITS (NO OAL)		HOSPITAL BENEFITS (NO OAL)		HOSPITAL BENEFITS (NO OAL)	
	119 network facilities	Any hospital	119 network facilities	Any hospital	Any hospital	119 network facilities	Any hospital	
	CHRONIC ILLNESS/PMB Diagnosis, treatment and care costs of 270 PMB and 26 chronic conditions on the CDL DSPs & specialist network apply		CHRONIC ILLNESS/PMB Diagnosis, treatment and care costs of 270 PMB and 26 chronic conditions on the CDL DSPs & specialist network apply		CHRONIC ILLNESS/PMB Diagnosis, treatment and care costs of 270 PMB and 26 chronic conditions on the CDL DSPs & specialist network apply		CHRONIC ILLNESS/PMB Diagnosis, treatment and care costs of 270 PMB and 26 chronic conditions on the CDL DSPs & specialist network apply	
	POST-HOSPITAL CARE Up to 30 days after discharge		POST-HOSPITAL CARE Up to 30 days after discharge		POST-HOSPITAL CARE Up to 30 days after discharge		POST-HOSPITAL CARE Up to 30 days after discharge	
	SPECIALISED RADIOLOGY Unlimited In and out of hospital Member pays the first R1 650 per examination Balance paid at 100% of the MT		SPECIALISED RADIOLOGY Unlimited In and out of hospital Member pays the first R1 650 per examination Balance paid at 100% of the MT		SPECIALISED RADIOLOGY Unlimited In and out of hospital Member pays the first R1 650 per examination Balance paid at 100% of the MT		SPECIALISED RADIOLOGY Unlimited In and out of hospital Member pays the first R1 650 per examination Balance paid at 100% of the MT	
TRAUMA-RELATED BENEFITS Including post-exposure prophylaxis in the event of sexual assault or accidental exposure to HIV		TRAUMA-RELATED BENEFITS Including post-exposure prophylaxis in the event of sexual assault or accidental exposure to HIV		TRAUMA-RELATED BENEFITS Including post-exposure prophylaxis in the event of sexual assault or accidental exposure to HIV		TRAUMA-RELATED BENEFITS Including post-exposure prophylaxis in the event of sexual assault or accidental exposure to HIV		
EMS	ROAD & AIR TRANSPORT Netcare 911 Unlimited within RSA		ROAD & AIR TRANSPORT Netcare 911 Unlimited within RSA		ROAD & AIR TRANSPORT Netcare 911 Unlimited within RSA		ROAD & AIR TRANSPORT Netcare 911 Unlimited within RSA	

Added insured benefits

These benefits are provided in addition to other insured benefits and available annually unless otherwise indicated and codes may apply.



Women's health

Prime range

- A mammogram for women 40 years and older requested by a medical doctor (per 2-year cycle)

Prime range & Unify

- A pap smear requested by a medical doctor (per 3-year cycle)
- A flu vaccination at Clicks/Dis-Chem pharmacy clinics



Enhanced maternity benefits

Prime range & Unify

- Free registration on the HealthPrint pregnancy and baby programme
- Flu vaccination at Clicks/Dis-Chem pharmacy clinics

Prime range

- 12 ante- & postnatal consultations per family
- Two 2D ultrasound scans per family



Child benefits

Prime range & Unify

- Child flu vaccination at Clicks/Dis-Chem pharmacy clinics

Prime range

- Babies under a year receive two additional visits to a GP or specialist
- Full schedule of standard child immunisations covered up to 7 years at Dis-Chem and Clicks pharmacy clinics



Routine screening & immunisation

Prime range & Unify

- Available at Clicks/Dis-Chem pharmacy clinics per person:
 - A combo test (blood glucose, cholesterol, BMI & blood pressure measurement)/ individual test (blood glucose or cholesterol)
 - HIV testing, counselling & support
 - A tetanus vaccine
 - A flu vaccination

Prime range

- Two HPV vaccinations for girls and boys between 10-14 years or three between 15-26 years



Men's health

Prime range

- A prostate test (PSA level) requested by a medical doctor for men 40 years and older

Prime range & Unify

- A flu vaccination at Clicks/Dis-Chem pharmacy clinics



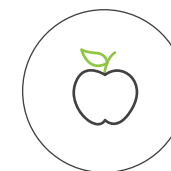
Screening and immunisation for over 50s

Prime range

- Women over 50 years have access to one bone mineral density test requested by a medical doctor
- A Pneumovax vaccine in a 5-year cycle per person older than 55 years registered on Medihelp's asthma/ COPD programme
- A faecal occult blood test (FOBT) for people over 50 years

Prime range & Unify

- A flu vaccination at Clicks/Dis-Chem pharmacy clinics



Supporting wellness

Prime range & Unify

- **Maintain a healthy weight** Participation in Medihelp's HealthPrint BMI programme

One dietician consultation per registered HealthPrint member if a BMI test result indicates a BMI higher than 30

- **An alternative to surgery** Back treatment at a Document Based Care facility for patients who qualify for this benefit

- **Chronic Care programme** People who suffer from high blood pressure, high cholesterol and diabetes simultaneously have access to Medihelp's Chronic Care programme, which will provide personal support through a care coordinator to assist in maintaining and optimising their well-being

Chronic illness and PMB cover

You are covered for the diagnosis, treatment and care of 270 conditions (DTPs), the treatment of 26 chronic diseases (CDL), and medical emergencies defined as prescribed minimum benefits (PMB) in terms of the Medical Schemes Act 131 of 1998 and its Regulations:

270 diagnoses

The Regulations define a list of 270 diagnoses and treatment pairs (DTPs) with specific codes and treatment guidelines which qualify for PMB.

26 chronic conditions

- Addison's disease
- Asthma
- Bipolar mood disorder
- Bronchiectasis
- Cardiac failure
- Cardiomyopathy
- Chronic obstructive pulmonary disease (COPD)
- Chronic renal disease
- Coronary artery disease
- Crohn's disease
- Diabetes insipidus
- Diabetes mellitus type 1
- Diabetes mellitus type 2
- Dysrhythmia
- Epilepsy
- Glaucoma
- Haemophilia A and B
- Hyperlipidaemia
- Hypertension
- Hypothyroidism
- Multiple sclerosis
- Parkinson's disease
- Rheumatoid arthritis
- Schizophrenia
- Systemic lupus erythematosus (SLE)
- Ulcerative colitis

Medical emergencies

What is an emergency?

An emergency is the sudden and unexpected onset of a health condition that requires immediate medical or surgical treatment. Failure to provide medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person's life in serious jeopardy.

What to do in an emergency

If you have an emergency, you can go directly to hospital. Register emergency hospital admissions on the 1st working day after the emergency admission – phone 086 0200 678.





If you need emergency transport, phone Netcare 911, the designated service provider for emergency transport, on 082 911.

To access prescribed minimum benefits, certain conditions apply, such as pre-authorization in line with the list of PMB conditions and codes as described in the Regulations, the use of designated service providers and network providers, treatment protocols and medicine formularies.

Benefits





The following provides a detailed comparison of the benefits provided by each benefit option.

Core benefits





Description	 Prime1 Hospital plan	 Prime2 Savings	 Unify Savings	 Prime3 Comprehensive
	Benefit	Benefit	Benefit	Benefit
CHRONIC ILLNESS AND PMB Diagnosis, treatment and care costs of 270 PMB and 26 chronic conditions on the CDL Subject to protocols, pre-authorisation and DSPs	100% of the cost* Unlimited	100% of the cost* Unlimited	100% of the cost* Unlimited	100% of the cost* Unlimited
TRAUMA BENEFITS Benefits for major trauma that necessitates hospitalisation in the case of: <ul style="list-style-type: none"> • Motor vehicle accidents • Stab wounds • Gunshot wounds • Head trauma • Burns • Near drowning Subject to authorisation, PMB protocols and case management	100% of the cost* Unlimited	100% of the cost* Unlimited	100% of the cost* Unlimited	100% of the cost* Unlimited
POST-EXPOSURE PROPHYLAXIS (for HIV/Aids)				
EMERGENCY TRANSPORT SERVICES Netcare 911 Subject to pre-authorisation and protocols In beneficiary's country of residence In the RSA, Lesotho, Swaziland, Mozambique, Namibia and Botswana <ul style="list-style-type: none"> • Transport by road • Transport by air 	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
Outside beneficiary's country of residence <ul style="list-style-type: none"> • Transport by road 	100% of the MT R2 050 per case	100% of the MT R2 050 per case	100% of the MT R2 050 per case	100% of the MT R2 050 per case
<ul style="list-style-type: none"> • Transport by air 	100% of the MT R13 700 per case	100% of the MT R13 700 per case	100% of the MT R13 700 per case	100% of the MT R13 700 per case

* Contracted tariffs may apply.





Core benefits

Description	 Benefit	 Benefit	 Benefit	 Benefit
HOSPITALISATION (State and private hospitals and day clinics) Subject to pre-authorization, protocols and case management <ul style="list-style-type: none"> Intensive and high-care wards Ward accommodation Theatre fees Treatment and ward medicine Consultations, surgery and anaesthesia 	100% of the MT Unlimited Any hospital Prime 1 Network 119 network hospitals	100% of the MT Unlimited Any hospital Prime 2 Network 119 network hospitals	100% of the MT Unlimited Any hospital	100% of the MT Unlimited Any hospital Prime 3 Network 119 network hospitals
CONFINEMENT (childbirth) Subject to pre-authorization, protocols and case management	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
HOME DELIVERY Subject to pre-authorization <ul style="list-style-type: none"> Professional nursing fees Equipment Material and medicine 	100% of the MT R13 000 per event	100% of the MT R13 000 per event	100% of the MT R13 000 per event	100% of the MT R13 000 per event
STANDARD RADIOLOGY, PATHOLOGY AND MEDICAL TECHNOLOGIST SERVICES In hospital Subject to clinical protocols	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
RADIOGRAPHY (services by radiographers) In and out of hospital Subject to clinical protocols and on request by a medical doctor	100% of the MT R1 050 per family per year	100% of the MT R1 050 per family per year	100% of the MT R1 050 per family per year	100% of the MT R1 050 per family per year
SPECIALISED RADIOLOGY In and out of hospital On request of a specialist and subject to clinical protocols <ul style="list-style-type: none"> MRI and CT imaging (subject to pre-authorization) 	100% of the MT Unlimited Member pays the first R1 650 per examination	100% of the MT Unlimited Member pays the first R1 650 per examination	100% of the MT Unlimited Member pays the first R1 650 per examination	100% of the MT Unlimited Member pays the first R1 650 per examination
<ul style="list-style-type: none"> Angiography 	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
ORGAN TRANSPLANTS Subject to pre-authorization and clinical protocols	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
<ul style="list-style-type: none"> Cornea implants 	100% of the MT R28 800 per implant per year	100% of the MT R28 800 per implant per year	100% of the MT R28 800 per implant per year	100% of the MT R28 800 per implant per year





Core benefits

Description	 Benefit	 Benefit	 Benefit	 Benefit
POST-HOSPITAL CARE Professional services relating to a Medihelp authorised private hospital admission, required for up to 30 days after discharge <ul style="list-style-type: none"> • Speech therapy • Occupational therapy • Physiotherapy 	100% of the MT M = R1 800 per year M+ = R2 500 per year	100% of the MT M = R1 800 per year M+ = R2 500 per year	100% of the MT M = R1 800 per year M+ = R2 500 per year	100% of the MT M = R1 800 per year M+ = R2 500 per year
SUPPLEMENTARY HEALTH SERVICES In hospital <ul style="list-style-type: none"> • Occupational and speech therapy, audiometry, podiatry, massage, orthoptic, chiropractic, homeopathic, herbal and naturopathic, osteopathic and biokinetic services <hr/> <ul style="list-style-type: none"> • Physiotherapy and dietician services on referral by the attending medical doctor 	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
OXYGEN In hospital	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
NEUROSTIMULATORS Subject to pre-authorisation and clinical protocols <ul style="list-style-type: none"> • Device and components 	100% of the MT R111 900 per beneficiary per year	100% of the MT R111 900 per beneficiary per year	100% of the MT R111 900 per beneficiary per year	100% of the MT R111 900 per beneficiary per year
RENAL DIALYSIS In and out of hospital Subject to pre-authorisation and clinical protocols	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited PMB only	100% of the MT Unlimited
APPLICABLE PRESCRIPTION MEDICINE DISPENSED AND CHARGED BY THE HOSPITAL ON DISCHARGE FROM THE HOSPITAL (TTO) (excluding PMB chronic medicine)	100% of the MT R350 per admission	100% of the MT Savings account	100% of the MT Savings account	100% of the MT R350 per admission
PSYCHIATRIC TREATMENT OF A MENTAL HEALTH CONDITION Subject to pre-authorisation, protocols and services rendered in an approved/network hospital/facility and prescribed by a medical doctor <ul style="list-style-type: none"> • Professional services rendered in and out of hospital by a psychiatrist • General ward accommodation • Medicine supplied during the period of the treatment in the institution • Outpatient consultations 	100% of the MT R19 300 per beneficiary per year (maximum R29 300 per family per year)	100% of the MT R24 400 per beneficiary per year (maximum R33 500 per family per year)	100% of the MT R24 400 per beneficiary per year (maximum R33 500 per family per year)	100% of the MT R29 300 per beneficiary per year (maximum R39 300 per family per year)





Core benefits

Description	 Benefit	 Benefit	 Benefit	 Benefit
ONCOLOGY Subject to pre-authorization and registration on the Medihelp Oncology Programme. Protocols, DSP and MORP apply PMB cases <ul style="list-style-type: none"> Hospital and related cancer treatments and services, including bone marrow/stem cell transplants (subject to PMB legislation) 	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
Non-PMB cases <ul style="list-style-type: none"> Hospital and related cancer treatments, including radiotherapy, brachytherapy, chemotherapy and associated adjuvant medicine 	100% of the MT R210 800 per family per year	100% of the MT R231 800 per family per year	100% of the MT R231 800 per family per year	100% of the MT R263 500 per family per year
HOSPICE SERVICES AND SUB-ACUTE CARE FACILITIES AS AN ALTERNATIVE TO HOSPITALISATION Subject to pre-authorization Services rendered in an approved facility and prescribed by a medical doctor	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
PRIVATE NURSING AS AN ALTERNATIVE TO HOSPITALISATION Subject to pre-authorization (Excluding general day-to-day care)	100% of the MT	100% of the MT	100% of the MT	100% of the MT
APPENDECTOMY Subject to pre-authorization <ul style="list-style-type: none"> Conventional or laparoscopic procedure 	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
PROSTATECTOMY Subject to pre-authorization <ul style="list-style-type: none"> Conventional or laparoscopic procedure 	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
<ul style="list-style-type: none"> Robotic assisted laparoscopic procedure 	100% of the MT Hospitalisation: R111 000 per beneficiary	100% of the MT Hospitalisation: R111 000 per beneficiary	100% of the MT Hospitalisation: R111 000 per beneficiary	100% of the MT Hospitalisation: R111 000 per beneficiary





Core benefits

Description	 Benefit	 Benefit	 Benefit	 Benefit
INTERNALLY IMPLANTED PROSTHESES All hospital admissions and prostheses are subject to pre-authorization, protocols and case management	100% of the MT	100% of the MT	100% of the MT	100% of the MT
<ul style="list-style-type: none"> EVARS prosthesis 	R34 600 per beneficiary per year	R130 600 per beneficiary per year	R130 600 per beneficiary per year	R130 600 per beneficiary per year
<ul style="list-style-type: none"> Vascular/cardiac prosthesis 	R34 600 per beneficiary per year	R55 900 per beneficiary per year	R55 900 per beneficiary per year	R55 900 per beneficiary per year
<ul style="list-style-type: none"> Health-essential functional prosthesis 	R23 000 per beneficiary per year	R61 900 per beneficiary per year	R61 900 per beneficiary per year	R61 900 per beneficiary per year
<ul style="list-style-type: none"> Hip, knee and shoulder replacements (non-PMB) <ul style="list-style-type: none"> In case of acute injury where replacement is the only clinically appropriate treatment modality 	Hospitalisation: 100% of the MT Prosthesis: Health-essential functional prosthesis benefits apply	Hospitalisation: 100% of the MT Prosthesis: Health-essential functional prosthesis benefits apply	Hospitalisation: 100% of the MT Prosthesis: Health-essential functional prosthesis benefits apply	Hospitalisation: 100% of the MT Prosthesis: Health-essential functional prosthesis benefits apply
<ul style="list-style-type: none"> In case of wear and tear 	This option does not cover this benefit	This option does not cover this benefit	This option does not cover this benefit	This option does not cover this benefit
<ul style="list-style-type: none"> Intra-ocular lenses 	Sub-limit subject to health-essential functional prosthesis benefit 2 lenses per beneficiary per year, R4 150 per lens	Sub-limit subject to health-essential functional prosthesis benefit 2 lenses per beneficiary per year, R4 150 per lens	Sub-limit subject to health-essential functional prosthesis benefit 2 lenses per beneficiary per year, R4 150 per lens	Sub-limit subject to health-essential functional prosthesis benefit 2 lenses per beneficiary per year, R4 150 per lens
<ul style="list-style-type: none"> Implantable hearing devices (including devices and components) 	This option does not cover this benefit	This option does not cover this benefit	This option does not cover this benefit	R105 100 per beneficiary per year
<ul style="list-style-type: none"> Prosthesis with reconstructive or restorative surgery In and out of hospital 	R4 250 per family per year	R9 600 per family per year	R9 600 per family per year	R9 600 per family per year
<ul style="list-style-type: none"> External breast prostheses in and out of hospital 		Savings account	Savings account	





Day-to-day benefits

Description	 Benefit	 Benefit	 Benefit	 Benefit
GPs AND SPECIALISTS Consultations and follow-up consultations	100% of the MT M = R1 200 per year M+ = R2 400 per year Pooled benefit for GP and specialist consultations, physiotherapy, acute medicine and self-medication			
PHYSIOTHERAPY Treatment and material				
CLINICAL PSYCHOLOGY AND PSYCHIATRIC NURSING In and out of hospital	This option does not cover these benefits	100% of the MT Savings account	100% of the MT Savings account	100% of the MT M = R9 450 per year M+1 = R15 000 per year M+2 = R17 700 per year M+3+ = R18 700 per year
SUPPLEMENTARY HEALTH SERVICES Occupational and speech therapy, dietician services, audiometry, podiatry, massage, orthoptic, chiropractic, homeopathic, herbal and naturopathic, osteopathic and biokinetic services				
PATHOLOGY AND MEDICAL TECHNOLOGIST SERVICES Out of hospital Subject to clinical protocols and requested by a medical doctor				
STANDARD RADIOLOGY Out of hospital Subject to clinical protocols and requested by a medical doctor (if chiropractor – black and white X-rays only)		CHILD CARE BENEFITS M+ = R2 000 per year GP consultations for children ≥2 to <12 years old once savings account funds are depleted	CHILD CARE BENEFITS M+ = R1 000 per year GP consultations for children ≥2 to <12 years old once savings account funds are depleted	
MEDICINE Medicine obtained in the Medihelp Preferred Pharmacy Network and prescribed/dispensed by a medical doctor <ul style="list-style-type: none"> Acute generic medicine Including medicine dispensed at an emergency unit and self-medication, immunisations, contraceptives and homeopathic, herbal, naturopathic and osteopathic medicine Please note: <ul style="list-style-type: none"> Original medicine when no generic equivalent is available – 80% of the MT will apply Voluntary use of original medicine when a generic equivalent is available – 70% of the MMAP will apply 	100% of the MMAP Generic medicine M = R1 200 per year M+ = R2 400 per year See GP and specialist consultations – pooled benefit for acute and self-medication, GP and specialist consultations and physiotherapy			100% of the MMAP Generic medicine





Day-to-day benefits

Description	 Benefit	 Benefit	 Benefit	 Benefit
<ul style="list-style-type: none"> Non-PMB generic chronic medicine Subject to pre-authorisation and registration on Medihelp's chronic medicine management programme <ul style="list-style-type: none"> Original medicine when no generic equivalent is available – 80% of the MT will apply Voluntary use of original medicine when a generic equivalent is available – 70% of the MMAP will apply 	This option does not cover this benefit	100% of the MT Savings account	100% of the MT Savings account	This option does not cover this benefit
<ul style="list-style-type: none"> PMB chronic medicine Subject to pre-authorisation and registration on Medihelp's PMB medicine management programme 	100% of the MHRP Prime 1 Network DSP & formulary apply	100% of the MHRP Prime 2 Network DSP & formulary apply	100% of the MHRP	100% of the MHRP Prime 3 Network DSP & formulary apply
<p>OXYGEN Out of hospital Subject to pre-authorisation, clinical protocols and services prescribed by a medical doctor</p>	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
<p>OPTOMETRY Subject to pre-authorisation by PPN and services should be obtained from a PPN provider</p> <ul style="list-style-type: none"> Optometric examinations 1 composite consultation, including refraction test, tonometry and visual field test 	This option does not cover these benefits	100% of the MT Savings account	100% of the MT Savings account	100% of the MT 1 composite examination per beneficiary per 24-month cycle
<ul style="list-style-type: none"> Spectacles or contact lenses Benefits are limited to either spectacles or contact lenses <ul style="list-style-type: none"> Spectacles <ul style="list-style-type: none"> Frames and/or lens enhancements Lenses (one pair of standard clear Aquity lenses) 				R800 per beneficiary per 24-month cycle
<ul style="list-style-type: none"> Contact lenses 				Single vision or bifocal lenses per beneficiary per 24-month cycle (multifocal lenses paid at the cost of bifocal lenses) R1 185 per beneficiary per 24-month cycle

Day-to-day benefits





Description	 Benefit	 Benefit	 Benefit	 Benefit
EXTERNAL PROSTHESES AND MEDICAL APPLIANCES In and out of hospital				
<ul style="list-style-type: none"> Artificial eyes 	100% of the MT R4 700 per family per 3-year cycle			100% of the MT R4 700 per family per 3-year cycle
<ul style="list-style-type: none"> Speech and hearing aids 	100% of the MT R4 700 per family per 3-year cycle	100% of the MT Savings account	100% of the MT Savings account	100% of the MT R4 700 per family per 3-year cycle
<ul style="list-style-type: none"> Artificial limbs 	100% of the MT R4 700 per family per 3-year cycle			100% of the MT R4 700 per family per 3-year cycle
<ul style="list-style-type: none"> Wheelchairs 	100% of the MT R4 700 per family per 3-year cycle	100% of the MT Savings account	100% of the MT Savings account	100% of the MT R4 700 per family per 3-year cycle
<ul style="list-style-type: none"> Medical appliances 		100% of the MT Savings account	100% of the MT Savings account	
<ul style="list-style-type: none"> Hyperbaric oxygen treatment <ul style="list-style-type: none"> In hospital 	This option does not cover these benefits	100% of the MT R630 per family per year	100% of the MT R630 per family per year	100% of the MT R1 250 per family per year
<ul style="list-style-type: none"> Out of hospital 			100% of the MT Savings account	
<ul style="list-style-type: none"> Stoma components Incontinence products/supplies 	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited	100% of the MT Unlimited
<ul style="list-style-type: none"> CPAP apparatus Prescribed by a medical doctor 	100% of the MT R9 700 per beneficiary per 24-month cycle	100% of the MT Savings account	100% of the MT Savings account	100% of the MT R9 700 per beneficiary per 24-month cycle

Day-to-day benefits

Description	 Benefit	 Benefit	 Benefit	 Benefit
DENTAL SERVICES* Subject to DSP's managed care protocols Conservative dental services <ul style="list-style-type: none"> Routine check-ups 		100% of the MT Savings account 2 per beneficiary per year (once every 6 months)	100% of the MT Savings account 2 per beneficiary per year (once every 6 months)	100% of the MT 2 per beneficiary per year (once every 6 months)
<ul style="list-style-type: none"> Oral hygiene <ul style="list-style-type: none"> Scale and polish treatments 		100% of the MT Savings account 2 per beneficiary per year (once every 6 months)	100% of the MT Savings account 2 per beneficiary per year (once every 6 months)	100% of the MT 2 per beneficiary per year (once every 6 months)
<ul style="list-style-type: none"> Fluoride treatment for children >5 and <13 years Fissure sealants for children >5 and <16 years only (permanent teeth) 		This option does not cover these benefits	100% of the MT Savings account	100% of the MT Savings account
<ul style="list-style-type: none"> Fillings (treatment plans and X-rays may be requested for multiple fillings) 		100% of the MT Savings account 1 filling per tooth in 365 days	100% of the MT Savings account 1 filling per tooth in 365 days	100% of the MT 1 filling per tooth in 365 days
<ul style="list-style-type: none"> Tooth extractions and root canal treatment in the dentist's chair Laughing gas (in the dentist's chair) 		100% of the MT Savings account	100% of the MT Savings account	100% of the MT
<ul style="list-style-type: none"> Dental procedures under conscious sedation in the dentist's chair (sedation cost) Subject to pre-authorisation and managed care protocols 	100% of the MT Removal of impacted teeth only (3rd molars) (Dentist's account – item codes apply)	100% of the MT Removal of impacted teeth only (3rd molars) (Dentist's account – item codes apply)	100% of the MT Removal of impacted teeth only (3rd molars) (Dentist's account – item codes apply)	100% of the MT Removal of impacted teeth (3rd molars) and extensive treatment for children <12 years
<ul style="list-style-type: none"> Plastic dentures 	This option does not cover these benefits	100% of the MT Savings account 1 set per beneficiary in a 4-year period	100% of the MT Savings account 1 set per beneficiary in a 4-year period	100% of the MT 1 set per beneficiary in a 4-year period
<ul style="list-style-type: none"> X-rays <ul style="list-style-type: none"> Intra-oral X-rays 		100% of the MT Savings account	100% of the MT Savings account	100% of the MT
<ul style="list-style-type: none"> Extra-oral X-rays 		100% of the MT Savings account 1 per beneficiary in a 3-year period	100% of the MT Savings account 1 per beneficiary in a 3-year period	100% of the MT 1 per beneficiary in a 3-year period

* Benefits for the retreatment of a tooth are subject to managed care protocols; specific item codes and pre-authorisation apply on certain dental services.

Day-to-day benefits





Description	 Benefit	 Benefit	 Benefit	 Benefit
Specialised dental services Subject to pre-authorisation and DSP's managed care protocols <ul style="list-style-type: none"> Partial metal frame dentures 		100% of the MT Savings account	100% of the MT Savings account	100% of the MT 1 partial frame (upper or lower jaw) per beneficiary in a 5-year period
<ul style="list-style-type: none"> Maxillofacial surgery and oral pathology <ul style="list-style-type: none"> Surgery in the dentist's chair Benefits for temporomandibular joint (TMJ) therapy are limited to non-surgical interventions/treatment 		100% of the MT Savings account	100% of the MT Savings account	100% of the MT
<ul style="list-style-type: none"> Crowns and bridges Subject to pre-authorisation 	This option does not cover these benefits	100% of the MT Savings account	100% of the MT Savings account	100% of the MT 1 crown per family per year, once per tooth in a 5-year period
<ul style="list-style-type: none"> Implants Subject to pre-authorisation 		100% of the MT Savings account	100% of the MT Savings account	This option does not cover this benefit
<ul style="list-style-type: none"> Orthodontic treatment (only one beneficiary per family may begin orthodontic treatment per calendar year) Subject to pre-authorisation and orthodontic needs analysis 		100% of the MT Savings account Once per lifetime for beneficiaries < 18 years Payment from date of authorisation, until the patient turns 18	100% of the MT Savings account Once per lifetime for beneficiaries < 18 years Payment from date of authorisation, until the patient turns 18	100% of the MT R9 000 once per lifetime per beneficiary < 18 years Payment from date of authorisation, until the patient turns 18
<ul style="list-style-type: none"> Periodontal treatment (conservative non-surgical therapy only) Subject to pre-authorisation and a treatment plan 		100% of the MT Savings account	100% of the MT Savings account	100% of the MT

Deductibles

Visiting network service providers, making use of DSPs, following the correct pre-authorisation process and negotiating tariffs with your doctor are just some of the ways in which you can manage or reduce out-of-pocket medical expenses.



Procedure-specific deductibles

There are a limited number of low-incidence procedures that require a procedure-specific payment.

Description	 Prime 1 Hospital plan	 Prime 2 Savings	 Unify Savings	 Prime 3 Comprehensive
SPINAL COLUMN SURGERY Subject to protocols and pre-authorisation	Member pays the first R11 600 per admission	Member pays the first R10 400 per admission	Member pays the first R10 400 per admission	Member pays the first R9 100 per admission
ENDOSCOPIC PROCEDURES Subject to protocols and pre-authorisation Gastroscopy, colonoscopy, arthroscopy and sigmoidoscopy	Member pays the first R2 100 per admission	Member pays the first R2 750 per admission	Member pays the first R2 750 per admission	Member pays the first R2 100 per admission
• In a day clinic				
• In a hospital	Member pays the first R3 200 per admission	Member pays the first R3 850 per admission	Member pays the first R3 850 per admission	Member pays the first R3 200 per admission
• In the doctor's rooms	No deductible	No deductible	No deductible	No deductible
DENTAL PROCEDURES UNDER GENERAL ANAESTHESIA In hospital Subject to pre-authorisation and DSP's managed care protocols	Member pays the first R3 300 per admission	Member pays the first R3 300 per admission	Member pays the first R3 300 per admission	Member pays the first R960 per admission
• Removal of impacted teeth (3rd molars)*				
• Extensive treatment for children younger than 5 years – once per lifetime*				
SPECIALISED RADIOLOGY In and out of hospital Subject to pre-authorisation, clinical protocols and services must be requested by a specialist MRI and CT imaging	Member pays the first R1 650 per examination	Member pays the first R1 650 per examination	Member pays the first R1 650 per examination	Member pays the first R1 650 per examination
PRIME NETWORK OPTIONS				
• Out-of-network hospital used by choice	65% of the benefit applies		Not applicable	65% of the benefit applies
• PMB chronic medicine outside the formulary and/or not obtained from the DSP	40% of the benefit applies			40% of the benefit applies

* On all options, item codes may apply on the dentist's account for removal of impacted teeth. For Prime 1, 2 and Unify, the dentist's account for extensive dental treatment, is for the member's account/payable from the savings account.

Deductibles

Description				
<p>NO PRE-AUTHORISATION OBTAINED</p> <ul style="list-style-type: none"> All planned hospital admissions Oxygen for out-of-hospital use Dental procedures under conscious sedation (sedation cost) in the dentist's chair Specialised dental services <hr/> <ul style="list-style-type: none"> Emergency transport services 		80% of the benefit applies		
		50% of the benefit applies		

Summary of exclusions

Please refer to Medihelp's Rules for the medical conditions, procedures and services, appliances, medicines, consumables and other products that are excluded from benefits, with the exception of services which qualify for PMB and are authorised by Medihelp. The following is an extract from the Rules:

- Services which are not mentioned in the Rules as well as services which in the opinion of the Board of Trustees, are not aimed at the generally accepted medical treatment of an actual or a suspected medical condition or handicap, which is harmful or threatening to necessary bodily functions (the process of ageing is not considered to be a suspected medical condition or handicap).
- Travelling and accommodation/lodging costs, including meals as well as administration costs of a beneficiary and/or service provider.
- Operations, treatments and procedures of own choice, for cosmetic purposes, and obesity related treatment, with the exception of services which qualify for PMB and are approved beforehand by Medihelp.
- Costs exceeding the Medihelp tariff for a service or the maximum benefit to which a member is entitled, subject to PMB.
- Appointments not kept.
- The treatment of infertility, other than that stipulated in the Regulations under the Medical Schemes Act, 1998.
- Treatment of alcoholism and drug abuse as well as services rendered by institutions which are registered in terms of the Prevention of and Treatment for Substance Abuse Act 70 of 2008 or other institutions whose services are of a similar nature, other than stipulated in the Regulations published under the Medical Schemes Act, 1998.
- The cost of transport with an ambulance/emergency vehicle from a hospital/other institution to a residence/medical doctor's rooms if the visit does not pertain to a hospital admission.
- Emergency room facility fees.
- Physiotherapy services associated with the removal of impacted wisdom teeth.
- Dietician and physiotherapy services rendered in hospital not referred by the attending medical doctor.
- Cochlear implants – all related procedures, services and devices (not applicable to Prime 3).

This is a summary of benefits. In the event of a dispute, the registered Rules of Medihelp will apply (which are subject to approval by the Council for Medical Schemes). If a beneficiary joins during the course of a financial year, the benefits are calculated pro rata according to the remaining number of months per year.

Prime hospital network

Members of the Prime network benefit options must be admitted to one of the network hospitals or day clinics below when they need to undergo planned procedures.



Our website lists all the network hospitals. Visit www.medihelp.co.za.



Download our **Medihelp member app**, which is available on iOS and Android devices.

Gauteng

Alberton	Netcare Clinton Hospital Netcare Union Hospital
Benoni	Netcare Lakeview Hospital (maternity and neonatal only) Netcare Linmed Hospital
Johannesburg	Netcare Garden City Hospital Netcare Mulbarton Hospital Netcare Park Lane Hospital Netcare Rand Hospital
Kempton Park	Birchmed Surgical Centre Ekurhuleni Surgiklin Day Clinic
Krugersdorp	Netcare Bell Street Hospital Netcare Krugersdorp Hospital Netcare Pinehaven Hospital
Midrand	Cure Day Hospital Midstream
Pretoria	Cure Day Hospital Erasmuskloof Cure Day Hospital Medkin Intercare Hazeldean Day Hospital Life Brooklyn Day Hospital Louis Pasteur Private Hospital Netcare Akasia Hospital Netcare Jakaranda Hospital Netcare Montana Hospital Netcare Pretoria East Hospital Netcare Unitas Hospital Zuid-Afrikaans Hospital
Roodepoort	Mayo Clinic
Springs	Netcare N17 Hospital
Vanderbijlpark	Cormed Clinic Mediclinic Emfuleni PJ Schutte Theatre Unit (dental procedures only)
Vereeniging	Mediclinic Vereeniging Midvaal Private Hospital

Mpumalanga

eMalahleni	Advanced De La Vie Day Hospital eMalahleni Private Hospital
Ermelo	Mediclinic Ermelo
Middelburg	Life Midmed Hospital
Nelspruit	Busamed Lowveld Private Hospital Kiaat Private Hospital Mediclinic Nelspruit
Secunda	Mediclinic Secunda

KwaZulu-Natal

Amanzimtoti	Netcare Kingsway Hospital
Ballito	Netcare Alberlito Hospital
Durban	Busamed Hillcrest Private Hospital Lenmed Shifa Private Hospital Life Chatsmed Garden Hospital Netcare St Augustine's Hospital Mediclinic Howick
Howick	Mediclinic Howick
Ladysmith	Lenmed La Verna Private Hospital
Newcastle	Mediclinic Newcastle Mediclinic Newcastle Day Hospital Mediclinic Pietermaritzburg
Pietermaritzburg	Netcare St Anne's Hospital Life The Crompton Hospital
Pinetown	Hibiscus Private Hospital
Port Shepstone	Netcare The Bay Hospital
Richards Bay	Shelly Beach Day Clinic
Shelly Beach	KZN Day Clinic
Umhlanga	Netcare Umhlanga Hospital

Western Cape

Cape Town	Life Vincent Pallotti Hospital Mediclinic Cape Gate Mediclinic Durbanville Mediclinic Durbanville Day Hospital Mediclinic Louis Leipoldt Mediclinic Milnerton Mediclinic Strand Medicross Foreshore Day Hospital Melomed Bellville Melomed Gatesville Netcare Christiaan Barnard Memorial Hospital Netcare Kuilsriver Hospital Netcare N1 City Hospital Mediclinic Geneva Mediclinic George
George	Mediclinic Hermanus
Hermanus	Life Bayview Private Hospital
Mossel Bay	Mediclinic Klein Karoo
Oudtshoorn	Cure Day Hospital Paarl Mediclinic Paarl
Paarl	Mediclinic Plettenberg Bay
Plettenberg Bay	Mediclinic Vergelegen
Somerset West	Mediclinic Stellenbosch
Stellenbosch	Mediclinic Stellenbosch Day Clinic Mediclinic Winelands Orthopaedic Hospital
Vredenburg	Life West Coast Private Hospital
Worcester	Mediclinic Worcester

Limpopo

Bela-Bela	St Vincent's Hospital
Lephalale	Mediclinic Lephalale
Makhado	Zoutpansberg Private Hospital
Polokwane	Mediclinic Limpopo Mediclinic Limpopo Day Clinic
Tzaneen	Mediclinic Tzaneen

North West

Klerksdorp	Sunningdale Hospital Wilmed Park Private Hospital
Potchefstroom	Mediclinic Potchefstroom Medicross Potchefstroom
Rustenburg	Netcare Ferncrest Hospital
Vryburg	Vryburg Private Hospital

Northern Cape

Kimberley	Mediclinic Kimberley
Upington	Mediclinic Upington

Eastern Cape

East London	Life Beacon Bay Hospital Life St Dominic's Hospital Life St James Hospital
Grahamstown	Netcare Settlers Hospital
Humansdorp	Life Isivivana Private Hospital
Port Alfred	Netcare Port Alfred Hospital
Port Elizabeth	Life St George's Hospital (maternity and neonatal only) Medical Forum Theatre Netcare Greenacres Hospital
Queenstown	Life Queenstown Private Hospital
Uitenhage	Netcare Cuyler Hospital

Free State

Bethlehem	Bethlehem Medical Centre Mediclinic Hoogland
Bloemfontein	Citymed Day Hospital Mediclinic Bloemfontein Pasteur Eye Hospital Universitas Private Hospital
Kroonstad	Netcare Kroon Hospital
Welkom	Mediclinic Welkom Welkom Medical Centre

Medihelp may change the information contained in this list from time to time and will publish any changes on our website at www.medihelp.co.za.

Our healthcare partners

We partner with preferred providers and networks to give you access to affordable, quality care.



Dental Risk Company

Dental Risk Company (DRC) specialises in offering effective dental managed care solutions and provides Medihelp's dental benefits in partnership with more than 2 300 dentists across South Africa. Members may visit any dentist of their choice, but benefits are managed by DRC and granted in accordance with DRC protocols.



Medihelp Preferred Pharmacy Network

Medihelp's Preferred Pharmacy Network consists of more than 2 000 pharmacies who offer Medihelp members the most cost-effective professional fee structure for prescribed medicine. This means that members who visit network pharmacies will not have to pay any excess amounts for higher professional fees which non-network pharmacies charge to dispense medicine items.



LifeSense, Dis-Chem Direct and Medipost

LifeSense Disease Management is the managed healthcare partner for HIV/Aids-related services and post-exposure prophylaxis, while Dis-Chem Direct and Medipost are the designated service providers (DSPs) for HIV/Aids medicine.



Specialist networks

Two specialist networks (for Medihelp's non-network range and the Prime network range) effectively manage any PMB specialist care that our members may require, while reducing their out-of-pocket expenses. For members of our network options, specific specialist networks also ensure streamlined care between the specialist and the network hospital, especially with regard to PMB services.



Netcare 911

Netcare 911 is our partner in providing emergency medical services.



ICON

ICON is the Independent Clinical Oncology Network to which more than 80% of the country's oncologists belong. They provide the highest quality cancer care through a countrywide footprint of high-tech chemotherapy and radiotherapy facilities. ICON is Medihelp's designated service provider for oncology treatment.



DBC

Medihelp's back treatment programme is offered in cooperation with Document Based Care (DBC). Each programme is developed by an inter-disciplinary medical team according to the individual's clinical profile.



PPN (optometry network)

The Preferred Provider Negotiators (PPN) provide Medihelp's optical benefits (in options which cover optometry) in partnership with more than 2 300 optometrists across South Africa. Medihelp members may visit any optometrist and benefits are paid according to PPN tariffs.



DSPs for the Prime network range only

MobileMeds

Members must obtain their PMB chronic medicine from a designated service provider (DSP) to avoid a 60% deductible. Order your authorised PMB chronic medicine from MobileMeds.

Dis-Chem Oncology and Medipost

Dis-Chem Oncology and Medipost are the DSPs for oncology medicine.

Explanation of terms

BMI	–	Body mass index
COPD	–	Chronic obstructive pulmonary disease
CT	–	Computerised tomography
EMS	–	Emergency medical services
GP	–	General practitioner
HPV	–	Human papilloma virus
M	–	Member
MORP	–	Medihelp Oncology Reference Price
MRI	–	Magnetic resonance imaging
OAL	–	Overall annual limit
PPN	–	Preferred Provider Negotiators

The **back treatment programme** provided by Document Based Care (DBC) is a non-surgical intervention in lieu of surgery for the management of spinal column disease/conditions/abnormalities. This approach to the treatment of back and neck pain involves an inter-disciplinary team handling the rehabilitation programme, which is individualised for each patient based on the patient's needs and clinical diagnosis. Patients are assessed to ascertain if they are eligible to participate in the programme.

CDL – Chronic Diseases List which is covered in terms of prescribed minimum benefits.

The **Chronic Care programme** provides members who suffer from a combination of high blood pressure, diabetes and high cholesterol with the support they need to contribute to their optimum health. Participation in the programme entails support by a registered nurse who coordinates the member's care to ensure optimal utilisation of medicine and consultations within available benefits, with the objective of improving members' lifestyle and well-being.

Contraceptives refer to injectable, implantable, intra-uterine, trans- and subdermal as well as oral contraceptives.

Cost means the cost of PMB services, payable in full by Medihelp if the services are registered with Medihelp as qualifying for PMB and rendered by DSPs according to accepted PMB treatment protocols.

CPAP is an apparatus which provides continuous positive airway pressure to assist breathing.

A **cycle** means the stated length of the benefit cycle, commencing on the date of the first service and thereafter calculated from the date of each subsequent service after the completion of a previous cycle, regardless of a break in membership or registration, or change in benefit option.

Deductibles are the difference between the cover provided by Medihelp and the cost/tariff charged for the medical service, and are payable directly to the service provider. Deductibles are applicable in the following cases:

- When doctors and other providers of medical services charge fees which exceed Medihelp's tariffs, the member is responsible for paying the difference between the amount charged and the amount which Medihelp pays;
- When Medihelp's benefit allocation is not 100% (e.g. for original acute medicine), or where the cost exceeds the limit available for the service (e.g. for medical appliances); and
- When the member chooses not to obtain services from a designated service provider (e.g. ICON in the case of oncology) or when a pre-determined deductible is applicable to a specific benefit as indicated per benefit option.

DSP – Designated service providers appointed by Medihelp to provide certain medical services.

An **emergency medical condition** means any sudden and unexpected onset of a health condition that requires immediate medical or surgical treatment, where failure to provide such treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part, or would place the person's life in serious jeopardy. An emergency medical condition must be certified as such by a medical practitioner. Emergencies qualify for PMB and must therefore also be registered for PMB (see also "PMB").

EVARS prosthesis means endovascular aortic replacement surgery and is considered when the patient suffers from an aortic aneurysm with an accompanying risk for anaesthesia.

Formulary means a list of preferred items (medicine, pathology, prosthetic or otherwise) based on its safety, efficacy and cost-effectiveness, used in the diagnosis and/or treatment of a medical condition (Prime network options only).

Explanation of terms

Hospital benefits refer to benefits for services rendered by a hospital during a patient's stay in hospital. Services include ward accommodation and ward medicine, standard radiology, pathology and consultations during hospitalisation. Hospital benefits are subject to pre-authorisation and Medihelp pays 80% of the hospital account if the admission is not pre-authorised. 65% benefits are paid on the Prime network options in case of a voluntary admission to a non-network hospital. Procedure-specific deductibles may apply. Emergency admissions must be registered on the first workday following the admission (see also "emergency medical condition").

MHRP – The **Medihelp Reference Price** is applicable to all pre-authorised PMB medicine. The price is determined according to the most cost-effective treatment based on evidence-based principles. The MHRP will differ for the different benefit options and is subject to change (e.g. when new generic equivalents are introduced to the market). Please visit Medihelp's website at www.medihelp.co.za (the secured site for members) for the latest MHRP. Members are advised to consult their doctor when using PMB medicine to make sure they use medicine on the MHRP where possible and so prevent or reduce deductibles.

MMAP – The **Maximum Medical Aid Price** is the reference price used by Medihelp to determine benefits for acute and chronic medicine. The MMAP is the average price of all the available generic equivalents for an ethical patented medicine item.

MT – **Medihelp tariff** refers to the tariff paid by Medihelp for different medical services, and can include the contracted tariff for services agreed with certain groups of service providers such as hospitals, the Medihelp Dental Tariff for dental services, and the single exit price for acute medicine. The various tariffs are defined in the Rules of Medihelp.

Network benefit options offer benefits to members in collaboration with a medical provider network. Members on these options must make use of the network to qualify for benefits and prevent deductibles. Please visit www.medihelp.co.za for details of the network providers for your benefit option.

Oncology: The majority of oncology cases qualify for prescribed minimum benefits (PMB), which Medihelp will cover at 100% of the cost in accordance with the protocols as set out in the Regulations published under the Act, while non-PMB oncology is covered at specific benefit amounts per option, provided that oncology is rendered by oncologists within the Independent Clinical Oncology Network (ICON). All oncology treatments will be evaluated on an individual basis according to ICON's protocols and must adhere to ICON's oncology treatment programmes. Medihelp covers PMB bone marrow/stem cell transplants subject to the applicable PMB legislation. Oncology received outside ICON or that deviates from the protocols is subject to deductibles.

Period refers to the specific duration described per benefit, e.g. dentistry, or the date of enrolment as a beneficiary.

PMB – Prescribed minimum benefits are paid for 26 chronic conditions on the CDL and 270 diagnoses with their treatments as published in the Regulations under the Medical Schemes Act 131 of 1998. In terms of these Regulations, medical schemes are compelled to grant benefits for the diagnosis, treatment and care costs of any of these conditions as well as emergency medical conditions (that meet the published definition) without imposing any limits. PMB are subject to pre-authorisation, protocols, and the utilisation of designated service providers, where applicable, e.g. ICON for cancer treatment. Benefits for PMB services are first funded from the related day-to-day benefits.

Protocol means a set of clinical guidelines in relation to the optimal sequence of diagnostic testing and treatments for specific conditions and includes, but is not limited to, clinical practice guidelines, standard treatment guidelines, disease management guidelines, treatment algorithms, clinical pathways and formularies.

Savings account means an account which is held by Medihelp as part of the funds of Medihelp. Funds in the savings account are used to pay for qualifying medical expenses and funds not used, accumulate.

TTO – **To take out;** medicine dispensed and charged by the hospital at discharge.

Vascular/cardiac prostheses include artificial aortic valves, pacemakers and related or connected functional prostheses.

Contact us

Medihelp

Medihelp Customer Care centre

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Fax: 012 336 9540

enquiries@medihelp.co.za

www.medihelp.co.za

Application forms (new business)

newbusiness@medihelp.co.za

Membership enquiries

Fax: 012 336 9532

membership@medihelp.co.za

Subscriptions enquiries

Fax: 012 336 9537

subscriptions@medihelp.co.za

E-services

Access the secured site for members (Member Zone)

via www.medihelp.co.za

Download the member app from iStore/Google Play

Submission of claims

Fax: 012 336 9556

claims@medihelp.co.za

Hospital admissions (all hospital admissions must be pre-authorized)

Member Zone

Member app

Tel: 086 0200 678

Fax: 012 336 9535

hospitalauth@medihelp.co.za

PMB chronic medicine and more than 30 days' medicine supply

Tel: 086 0100 678

Fax: 012 334 2466

medicineapp@medihelp.co.za

Prescribed minimum benefits (PMB)

Tel: 086 0100 678

Fax: 086 0064 762

enquiries@medihelp.co.za

MRI and CT imaging

Tel: 086 0200 678

Oncology

Disease management programme

Tel: 086 0100 678

Fax: 086 0064 762

oncology@medihelp.co.za

Oncology medicine (Prime network options only)

Dis-Chem Oncology

Tel: 010 003 8948

Fax: 086 597 0573

oncology@dischem.co.za

or

Medipost

Tel: 012 404 4430

Fax: 086 680 3319

oncology@medipost.co.za

Private nursing, hospice and sub-acute care facilities

Tel: 086 0100 678

Fax: 012 336 9523

hmanagement@medihelp.co.za

Chronic renal dialysis & oxygen administered at home

Tel: 086 0100 678

Fax: 012 336 9540

preauth@medihelp.co.za

Medihelp fraudline

Tel: 012 334 2428

Fax: 012 336 9538

fraud@medihelp.co.za

MobileMeds (Prime network options only)

PMB chronic medicine

Tel: 086 0100 678

Fax: 012 336 9544

mobilemeds@medihelp.co.za

Partners

Netcare 911 (emergency medical transport)

Tel: 082 911

mySOS app

DRC (dental services)

Tel: 087 943 9618

Fax: 086 687 1285

medihelp@dentalrisk.com

claims@dentalrisk.com

auth@dentalrisk.com

www.dentalrisk.com

HIV/Aids programme & post-exposure prophylaxis (PEP)

Disease management programme

LifeSense

Tel: 0860 50 60 80

SMS: 31271 for a call back

Fax: 0860 80 49 60

Enquiries: enquiry@lifesense.co.za

Scripts & pathology: results@lifesense.co.za

www.lifesensedm.co.za

Medicine

Dis-Chem Direct

Tel: 011 589 2788

Fax: 086 641 8311

direct.medihelp@dischem.co.za

or

Medipost

Tel: 012 426 4000

Fax: 086 688 9867

life@medipost.co.za

PPN (optometry)

Tel: 086 1103 529 or 086 1101 477

info@ppn.co.za

www.ppn.co.za

Council for Medical Schemes

Tel: 086 1123 267

complaints@medicalschemes.com

www.medicalschemes.com



medihelp
medical scheme

086 0100 678
www.medihelp.co.za



Medihelp is an authorised financial services provider (FSP No 15738)