

Benefits ▶ Effective 1 January 2008

Client Service Team: 0800 004 389 or (021) 480 4801

Members and their dependants are entitled to the following benefits, subject to the provisions of the rules of the Scheme, and in particular the provisions of the statutory Prescribed Minimum Benefits (PMBs).

Overall Annual Limit

The Overall Annual Limit applies to all benefits paid from Scheme funds. No benefits are payable by the Scheme after depletion of the Overall Annual Limit, except for statutory PMBs, which are covered even after the specified sub-limits and Overall Annual Limit are exhausted.

| NO | BENEFIT | BENEFIT AMOUNT | ANNUAL LIMIT |
|----|--|---|---|
| | OVERALL ANNUAL LIMIT | | R500 000 per beneficiary or R1 000 000 per family |
| 1. | Statutory Prescribed Minimum Benefits | 100% of cost | Services rendered by public hospital or DSP unlimited and subject to pre-authorization |
| 2. | <p>Hospitalisation (excluding rehabilitation)</p> <p><i>Benefits for admission to a PPN hospital are subject to utilisation of the PPN hospitals appointed by the Scheme</i></p> <p><i>In the event that a non-PPN hospital is voluntarily utilised, a co-payment of R1 000 may be payable by the member directly to the hospital</i></p> <p>Admissions are subject to pre-authorization with the Scheme's provider two working days prior to admission and within 48 hours in the case of emergencies</p> <p>A penalty of R1 000 is payable by the member to the service provider failing pre-authorization For pre-authorization dial 0800 118 884 toll free</p> <p>Private hospitals</p> <p>Provincial hospitals</p> <p>Medicines dispensed in hospital and upon discharge from hospital</p> <p>Approved secondary/step-down facilities</p> <p>In-patient psychiatric conditions/substance abuse</p> | <p>100% of agreed tariff</p> <p>100% of UPFS or cost</p> <p>100% of SEP and agreed dispensing fee</p> <p>100% of agreed tariff</p> <p>100% of agreed tariff</p> | <p>Subject to overall annual limit</p> <p>To-take-out (TTO) medication limited to 7 days' supply</p> <p>R32 000 per beneficiary</p> |

| NO | BENEFIT | BENEFIT AMOUNT | ANNUAL LIMIT |
|-----|---|--|---|
| 3. | Confinements Subject to pre-authorization, at 36 weeks of pregnancy | 150% of Scheme rate | Subject to overall annual limit |
| 4. | GPs and specialists: In-hospital services Consultations, visits and procedures/operations | 150% of Scheme rate | Subject to overall annual limit |
| 5. | Radiology and pathology in and out of hospital | 100% of Scheme rate or agreed tariff, where applicable | Subject to overall annual limit |
| 6. | Physiotherapy in hospital | 100% of Scheme rate | Subject to overall annual limit |
| 7. | Blood transfusion | 100% of Scheme rate | Subject to overall annual limit |
| 8. | Oncology treatment (in and out-of-hospital treatment) Subject to pre-authorization with Qualsa's Oncology Risk Management programme; tel: 0800 118 884 | 100% of Scheme rate | R300 000 per beneficiary |
| 9. | Surgical/internal prostheses Subject to pre-authorization and the Hospital Risk Management programme | 100% of cost | Limited to amounts detailed in the Surgical Prostheses Schedule (Annexure B) for specified items; non-specified items limited to R25 000 per beneficiary Specified and non-specified items accrue to a R25 000 benefit limit, but specified items may exceed this limit if the amounts in Annexure B are higher than R25 000 |
| 10. | Maxillo-facial surgery (excluding special dentistry) | 100% of Scheme rate | Subject to overall annual limit |
| 11. | Organ transplants (hospitalisation and surgery) | 100% of Scheme rate | Subject to overall annual limit |
| 12. | Emergency transportation Subject to authorisation with the Scheme's preferred provider, International SOS; tel: 0800 127 620 | 100% of cost | Subject to overall annual limit and International SOS protocols |
| 13. | MRI and CT scans (in and out of hospital) Subject to pre-authorization | 100% of Scheme rate | Subject to overall annual limit |
| 14. | HIV/AIDS For access to the HIV/AIDS benefit, registration is required with the Scheme's provider; tel: 0861 888 300 | 100% of Scheme rate | Subject to Prescribed Minimum Benefit protocols |
| 15. | Renal dialysis | 100% of Scheme rate | Subject to overall annual limit |

| NO | BENEFIT | BENEFIT AMOUNT | ANNUAL LIMIT |
|-----|---|--|---|
| 16. | <p>Chronic conditions Members must contact the Pick 'n Pay Client Service Team to obtain the relevant application forms to register on the Scheme's chronic medication programme or the Prescribed Minimum Benefit Chronic Disease List programme (care plan services)</p> <p>Chronic medication All medication will be subject to the MMAP</p> <p>Prescribed Minimum Benefit conditions</p> | <p>100% of SEP plus agreed dispensing fee</p> <p>100% of SEP plus agreed dispensing fee, or Scheme rate in respect of care plan services</p> | <p>Subject to chronic condition limits of: R37 000 per beneficiary or R76 000 per family</p> <p>Subject to chronic conditions limit</p> <p>Unlimited – subject to care plan protocols</p> |
| 17. | <p>Diabetes treatment All diabetes treatment, including consultations, in-hospital treatment and medication will be subject to registration with the Scheme's appointed provider: Centre for Diabetes and Endocrinology (CDE)</p> <p>A 30% co-payment will apply where members are not registered with CDE</p> <p>Members may make use of a non-CDE provider in emergency situations; the emergency hotline number will be provided to members upon registration with CDE</p> <p>For information regarding CDE or to obtain an application form, please contact (011) 712 6000</p> | 100% of cost at CDE Centres | Unlimited insured benefits subject to CDE protocols |
| 18. | <p>Preventative out-of-hospital procedures</p> <p>Dental check-up/oral hygienist</p> <p>Flu vaccine injection</p> <p>Eye testing</p> <p>Cholesterol</p> <p>Pap smear</p> <p>Mammogram</p> | <p>100% of Scheme rate</p> <p>1 visit per beneficiary per year</p> <p>1 per beneficiary per year</p> <p>1 visit per beneficiary per year</p> <p>Number of visits unlimited</p> <p>Number of visits unlimited</p> <p>Number of visits unlimited</p> | Subject to overall annual limit |
| 19. | <p>Out-patient surgical procedures (refer to Annexure A of benefit schedule for the list of procedures covered)</p> | 150% of Scheme rate | Subject to overall annual limit |

Benefits payable from members' Medical Spending Accounts (MSAs), except in respect of PMBs

| NO | BENEFIT | BENEFIT AMOUNT | ANNUAL LIMIT |
|-----|--|--|--|
| 1. | General practitioners and specialists (out of hospital) Consultations and visits | 150% of Scheme rate | Subject to MSA balance |
| 2. | Circumcision procedures | 150% of Scheme rate | Subject to MSA balance |
| 3. | Physiotherapy (out of hospital) | 100% of Scheme rate | Subject to MSA balance |
| 4. | Dentistry i) Conservative dentistry – fillings, extractions, x-rays and prophylaxis ii) Special – orthodontic, periodontic, crowns, bridgework, dentures, dental implants and osseo-integration | 100% of Scheme rate | 1 conservative dentistry visit per beneficiary per year, payable from insured benefits Subject to MSA balance |
| 5. | Acute medication Subject to MMAP | 100% of SEP and agreed dispensing fee | Subject to MSA balance |
| 6. | Pharmacy Advised Therapy (PAT) Homeopathic and naturopathic medication | 100% of agreed tariff or SEP and agreed dispensing fee | Subject to MSA balance |
| 7. | Optical i) Optometric tests (including all visual tests) ii) Spectacles, lenses (including contact lenses), frames and "readers" | 100% of agreed tariff | 1 visit per beneficiary per year, payable from insured benefits Subject to MSA balance |
| 8. | External surgical appliances | 100% of cost | Subject to MSA balance |
| 9. | Homeopaths, naturopaths and chiropractors (excluding x-rays and appliances) | 100% of Scheme rate | Subject to MSA balance |
| 10. | Nursing (subject to Scheme authorisation) i) Private or home nursing ii) Hospice services (accommodation, home care visits, visits by medical officer) | 100% of Scheme rate | Subject to MSA balance |
| 11. | Auxiliary services Includes clinical psychology, psychiatric consultations (excluding educational counselling), speech therapy, audiology, occupational therapy, podiatry and orthoptics | 100% of Scheme rate | Subject to MSA balance |

Annexure A:

List of out-patient surgical procedures covered under overall annual limit

Out-patient surgical procedures, if performed in a doctor's surgery, do not require pre-authorization, and will be covered from the overall annual limit. Anaesthetic costs, if applicable, are only covered for local/regional anaesthetic or, at most, conscious sedation. General anaesthetic costs are not covered for procedures performed in a doctor's rooms except in respect of Prescribed Minimum Benefits.

| PROCEDURE | CODES |
|---------------------------------------|---|
| Gastroscopy and related procedures | 1587/88/89/91; 1626; 1770/72/73/74/78/79/82 |
| Oesophagoscopy and related procedures | 1545/49/50/51/52/53/57/78/80/84/85 |
| Colonoscopy and related procedures | 1653/54/56 |
| Cystoscopy and related procedures | 1949/51 to 73; 2088 |
| Direct laryngoscopy | 1018; 1019 |
| Bronchoscopy and related procedures | 1132/33/34 |

The following additional procedures, if performed by an ophthalmologist in his/her rooms, will also not require pre-authorization and will be covered from the overall annual limit.

| PROCEDURE | CODES |
|---|-------|
| Treatment of retina and choroids by cryotherapy | 3039 |
| Pan retinal photocoagulation in one sitting | 3041 |
| Laser capsulotomy | 3052 |
| Laser trabeculoplasty | 3064 |
| Laser apparatus hire fee | 3201 |

Annexure B:

Surgical prostheses schedule

This schedule lists surgical prostheses and appliances (excluding dental implants) placed in the body as internal fixtures during an operation.

The items below are subject to the limits indicated. Benefits for non-specified surgical prosthetic items will be subject to the maximum annual benefits for non-specified items, as indicated elsewhere in this benefit schedule and subject to the requirements for Prescribed Minimum Benefits.

| PROSTHESIS | AMOUNT | LIMIT |
|--|---------|--------------------------------------|
| Partial hip replacements | R14 000 | Per beneficiary per year |
| Total hip replacements | R30 000 | Per beneficiary per year |
| Spinal fusions | R32 000 | Per beneficiary per year |
| Cardiac stents | R15 000 | Per beneficiary (maximum 3 per year) |
| Cardiac pacemakers | R39 000 | Per beneficiary per year |
| Grafts | R26 000 | Per graft per beneficiary per year |
| Cardiac valves | R27 000 | Per valve per beneficiary per year |
| Artificial limbs | R22 000 | Per family per year |
| Artificial eyes | R11 000 | Per family per year |
| Knee replacements | R28 000 | Per beneficiary per year |
| Shoulder replacements | R32 000 | Per shoulder per family per year |
| All other claims for surgical prostheses | R25 000 | Per beneficiary per year |

KEY:

- Agreed tariff** = The fees for any healthcare services which are determined by the Board of Trustees in conjunction with a network of service providers
- CDE** = Centre for Diabetes and Endocrinology provides complete care to members with diabetes mellitus, types 1 and 2
- DSP** = Designated Service Provider, a network of service providers appointed by the Scheme as preferred providers to provide members with diagnosis, treatment and care in respect of one or more Prescribed Minimum Benefit conditions
- MMAF** = Maximum Medical Aid Price is the price the Scheme will pay for the generic equivalent of patented medication
- PPN** = Preferred Provider Network of hospitals appointed by the Scheme for the provision of private hospitalisation to members
- Scheme rate** = The reimbursement rate determined annually by the Board of Trustees by using the National Health Reference Price List (NHRPL) as a basis; the 2008 reimbursement rate is the NHRPL rate for 2008
- SEP** = Single Exit Price, a price set by the manufacturer or importer of the medicine or scheduled substance, combined with the logistics fee and VAT
- UPFS** = Uniform Patient Fee Schedule, the tariff structure used by provincial hospitals



Medical scheme