

# Selfmed 80% 2014

Description of Service/Treatment	Services rendered as part of hospitalisation – subject to pre-authorisation	Services rendered NOT as part of hospitalisation
<b>OVERALL MAXIMUM</b>	None	None
<b>HOSPITALISATION</b>		
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	
<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	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 400 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 R63 300 per implant	Not applicable
Material and injection material administered in doctor's rooms	Not applicable	80% of Agreed Tariff (RP applies) – unlimited
<b>MATERNITY</b>		
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 300 per family per year
Confinement	Benefits as described in respect of Medical Practitioners and Hospitalisation	
<b>AUXILIARY SERVICES</b>		
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 900 per beneficiary to a maximum of R11 200 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
<b>OPTICAL</b>		
Consultation	Not applicable	Limited to R4 500 per beneficiary to a maximum of R8 900 per family over two years
Spectacles and Contact Lenses	Not applicable	80% of cost
Refractive Surgery	To be self-funded	To be self-funded

<b>SECONDARY FACILITIES</b>		
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
<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	100% of Medical Scheme Rate, limited to R2 200 per family per year
<b>BLOOD TRANSFUSIONS</b>	100% of cost	100% of cost
<b>MEDICAL AND SURGICAL PROSTHESIS / APPLIANCES</b>		
Internal Prosthesis	Specific sub-categories with limits apply. Please refer to Members' Guide for detail	
External Prosthesis	100% of cost, limited to R54 100 per family per year – subject to approval by case manager	
Orthopaedic Appliances	100% of cost limited to R8 000 per family per year – subject to case management	
Medical Appliances	Not applicable	80% of cost, limited to R4 500 per family per year
Hearing Aids	Not applicable	80% of cost, limited to R13 700 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 R6 300 per beneficiary to a maximum of R19 300 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	100% of Medical Scheme Rate - unlimited	100% of Medical Scheme Rate - unlimited
Implantology	80% of Medical Scheme Rate – implants (prosthesis) limited to R4 800 per beneficiary per year	
<b>PRESCRIBED MEDICINE</b>		
Chronic (member must apply for benefit)	Not applicable	80% of Agreed Tariff (RP applies), limited to R19 000 per beneficiary per year with a maximum of R36 900 per family per year
Acute	Not applicable	80% of Agreed Tariff (RP applies) limited to R4 700 per beneficiary to a maximum of R14 000 per family per year
Immunisations	Not applicable	
Oral contraceptives and IUD's	Not applicable	
<b>NON-PRESCRIBED MEDICINE (PAT)</b>	Not applicable	80% of Agreed Tariff (RP applies) - limited to R1 200 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: R43 300 for a live donor, R25 600 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 R348 600 per family per year applies with a sub-limit of R137 000 for biological drugs, if approved by the Scheme. Please refer to Members' Guide for more 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	
<b>AIDS AND HIV</b>	Benefits managed as part of a Disease Management Programme	
<b>FOREIGN CLAIMS</b>	No benefits except for Namibian claims	
<b>MENTAL HEALTH</b>		
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 R7 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	
<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 co-payment (determined by the Scheme) will apply. Scheme protocol apply	

**Contributions - effective 1 January 2014**

	Principal member	Additional Adult Dependant	Additional Minor Dependant (payable up to maximum 3)
<b>Contributions</b>	<b>R4 937</b>	<b>R4 275</b>	<b>R857</b>

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