

Benefits Summary

Effective 1 January 2019

ANNUAL BENEFITS FOR DAY-TO-DAY MEDICAL SERVICES

A OUT-OF-HOSPITAL BENEFITS

			PRIMARY OPTION	STANDARD OPTION
Overall annual limit Member Member + 1 Member + 2 Member + 3 Member + 4			R9 290 single member R10 060 per family R11 500 per family R12 900 per family R14 360 per family	R9 290 single member R10 060 per family R11 500 per family R12 900 per family R14 360 per family
General practitioner network	Consultations and acute medication All-inclusive fee applicable OR Consultation only with a prescription issued for acute medication – refer to acute medication benefits	Members may only use MMI Health's general practitioner network	100% of Scheme rate, limited to overall annual limit 100% of Scheme rate, limited to overall annual limit	100% of Scheme rate, limited to overall annual limit 100% of Scheme rate, limited to overall annual limit



A OUT-OF-HOSPITAL BENEFITS (CONTINUED)

			PRIMARY OPTION	STANDARD OPTION
Non-network general practitioners	Consultations Prescribed medication should be obtained from a pharmacy, subject to the acute medicine benefit	Only tariff codes applicable to MMI Health's network apply Members are responsible for paying any difference in cost directly to the non-network general practitioner	100% of Scheme rate, limited to overall annual limit	100% of Scheme rate, limited to overall annual limit
Acute medication (general practitioner)	Acute medication dispensed by a general practitioner	Acute medication dispensed by a general practitioner Medication prescribed but not dispensed by a general practitioner	R1 340 per family per annum, limited to R180 per prescription and subject to MMI Health's acute medicine formulary and generic reference pricing	R1 340 per family per annum, limited to R180 per prescription and subject to MMI Health's acute medicine formulary and generic reference pricing
Acute medication (specialist)	Acute medication prescribed by a specialist	The member must obtain authorisation from MMI Health before obtaining any medication from the pharmacy	Subject to MMI Health's acute medicine formulary and generic reference pricing and limited to overall annual limit	Subject to MMI Health's acute medicine formulary and generic reference pricing and limited to overall annual limit
Acute medication (emergency)	Acute medication prescribed or dispensed by a service provider during an emergency consultation	Acute medication dispensed by a general practitioner during an emergency; forms part of the all-inclusive after-hours/emergency fee Medication prescribed but not dispensed by a general practitioner	R1 340 per family per annum, limited to R180 per prescription and subject to MMI Health's acute medicine formulary and generic reference pricing	R1 340 per family per annum, limited to R180 per prescription and subject to MMI Health's acute medicine formulary and generic reference pricing
Pharmacy-advised therapy (over-the-counter medicine benefit)	Medication obtained over the counter at the pharmacy	R250 per family per annum, limited to R50 per prescription per beneficiary per day	R250 per family per annum, limited to R50 per prescription per beneficiary per day	R250 per family per annum, limited to R50 per prescription per beneficiary per day
Preventative care benefit	Flu vaccinations Obtainable from pharmacies	100% of Scheme rate up to maximum benefit amount	R85 per beneficiary per annum	R85 per beneficiary per annum
Specialists	Consultations	The member is responsible for ensuring that the general practitioner obtains an authorisation number from MMI Health before he/she consults a specialist	100% of Scheme rate, limited to overall annual limit	100% of Scheme rate, limited to overall annual limit



A OUT-OF-HOSPITAL BENEFITS (CONTINUED)

			PRIMARY OPTION	STANDARD OPTION
Network dentists	<p>Conservative dentistry</p> <p>Dentures limited to a maximum of R4 230 per family per annum (dental fee is inclusive of the laboratory fee)</p> <p>No benefit for advanced/ specialised dentistry</p>	Tariff code 8334 is only applicable to anterior teeth	<p>100% of Scheme rate, limited to overall annual limit</p> <p>100% of Scheme rate; denture limit subject to overall annual limit</p>	<p>100% of Scheme rate, limited to overall annual limit</p> <p>100% of Scheme rate; denture limit subject to overall annual limit</p>
Non-network dentists	<p>Conservative dentistry</p> <p>Limited to:</p> <ul style="list-style-type: none"> • out-of-area dentists; and • emergencies only <p>No benefit for advanced/ specialised dentistry</p>	Only tariff codes applicable to MMI Health's network apply – members are responsible for paying any difference in cost directly to the dentist	100% of Scheme rate, limited to overall annual limit	100% of Scheme rate, limited to overall annual limit
Optometrists	Frames, lenses, tints (up to 35%) and eye tests	Optometrist must obtain authorisation from MMI Health for patient referral to a specialist	<p>100% of Scheme rate; family optical limit subject to overall annual limit</p> <p>Limited to a maximum of R2 720 per family per annum</p> <p>Excludes contact lenses</p>	<p>100% of Scheme rate; family optical limit subject to overall annual limit</p> <p>Limited to a maximum of R2 720 per family per annum</p> <p>Excludes contact lenses</p>
Radiology			100% of Scheme rate, limited to overall annual limit	100% of Scheme rate, limited to overall annual limit
Pathology			100% of negotiated preferred provider rates, limited to overall annual limit	100% of negotiated preferred provider rates, limited to overall annual limit
Auxiliary services	<ul style="list-style-type: none"> • Audiologist • Chiropodist • Chiropractor • Dietician • Nursing services • Occupational therapist • Social worker • Speech therapist • Physiotherapist 		100% of Scheme rate, limited to overall annual limit	100% of Scheme rate, limited to overall annual limit
Surgical appliances	<ul style="list-style-type: none"> • Nebulisers • Crutches • Glucometers • Hearing aids 	Written motivation from a general practitioner is required; subject to approval from MMI Health's medical advisor	100% of Scheme rate, limited to overall annual limit	100% of Scheme rate, limited to overall annual in-hospital benefit
Clinical psychology		The member is responsible for ensuring that the general practitioner obtains an authorisation number from MMI Health before he/she consults a clinical psychologist	100% of Scheme rate, limited to overall annual limit	100% of Scheme rate, limited to overall annual limit

A OUT-OF-HOSPITAL BENEFITS (CONTINUED)

			PRIMARY OPTION	STANDARD OPTION
Chronic medication	To obtain benefits for chronic medication, the patient must be registered with MMI Health's Medicine Risk Management Programme	<p>The Scheme's approved chronic condition list is applicable</p> <p>Medication approved as per MMI Health's Chronic Disease List medication formulary</p> <p>Chronic medication can be obtained from any pharmacy or contracted dispensing network general practitioner</p>	<p>R9 020 per beneficiary per annum</p> <p>Subject to generic reference pricing</p>	<p>R9 020 per beneficiary per annum</p> <p>Subject to generic reference pricing</p>
Attendance at 24-hour emergency facility	Emergency consultations	<p>For emergencies only</p> <p>Only tariff codes applicable to MMI Health's network apply – members are responsible for paying any difference in cost directly to the general practitioner</p>	<p>100% of Scheme rate, limited to overall annual limit</p> <p>Procedures resulting from an emergency consultation included in the emergency consultation fee</p>	<p>100% of Scheme rate, limited to overall annual limit</p> <p>Procedures resulting from an emergency consultation subject to annual in-hospital benefit</p>
Ambulance services	<p>Provincial and private sector</p> <p>Limited to medical emergencies that require urgent medical attention</p>		<p>R1 070 per case</p> <p>100% of Scheme rate, limited to overall annual limit</p>	<p>R1 070 per case</p> <p>100% of Scheme rate, limited to overall annual limit</p>

ANNUAL BENEFITS FOR HOSPITALISATION AND OTHER MAJOR MEDICAL SERVICES

B IN-HOSPITAL BENEFITS

			PRIMARY OPTION	STANDARD OPTION
Annual in-hospital benefit		<p>All admissions and procedures in hospital must be authorised by MMI Health 48 hours before admission</p> <p>This applies to all beneficiaries registered on the Standard Option</p> <p>Members must use contracted hospitals designated by MMI Health</p>	<p>Limited to overall annual limit</p> <p>No private hospital cover</p>	<p>R172 400 per beneficiary per annum</p>
Private or State facility	<p>In patient</p> <p>Includes associated professional services rendered during admission, i.e.:</p> <ul style="list-style-type: none"> • Doctor • Physiotherapist • Occupational therapist • Dietician 	<p>Preferred provider only; MMI Health's designated service provider must be used</p>	<p>Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable</p> <p>Limited to overall annual limit</p>	<p>100% of MMI Health's negotiated rates</p> <p>Limited to annual in-hospital benefit</p>

B IN-HOSPITAL BENEFITS (CONTINUED)

			PRIMARY OPTION	STANDARD OPTION
Private or State facility	Maternity	<p>Patient must enrol on MMI Health's Maternity Programme within the first sixteen (16) weeks of pregnancy to qualify for maternity benefits</p> <p>Member must use Mowbray Maternity or Melomed Private Hospitals, or any other hospital designated by MMI Health</p>	<p>Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable</p> <p>Limited to overall annual limit</p>	<p>Case managed up to a maximum of three (3) days for normal delivery</p> <p>Case managed up to a maximum of four (4) days for a caesarean section</p> <p>Limited to annual in-hospital benefit</p>
	Intensive care unit		<p>Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable</p> <p>Limited to overall annual limit</p>	<p>Case managed by MMI Health</p> <p>Limited to annual in-hospital benefit</p>
	Radiology		<p>Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable</p> <p>Limited to overall annual limit</p>	<p>Case managed by MMI Health</p> <p>100% of MMI Health's negotiated rates</p> <p>Limited to annual in-hospital benefit</p>
	Pathology		<p>Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable</p> <p>Limited to overall annual limit</p>	<p>Case managed by MMI Health</p> <p>100% of MMI Health's negotiated rates</p> <p>Limited to annual in-hospital benefit</p>
	Physiotherapy	In-hospital treatment	<p>Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable</p> <p>Limited to overall annual limit</p>	<p>Case managed by MMI Health</p> <p>100% of Scheme rate</p> <p>Limited to annual in-hospital benefit</p>



B IN-HOSPITAL BENEFITS (CONTINUED)

			PRIMARY OPTION	STANDARD OPTION
Private or State facility (continued)	Psychiatric care and substance abuse rehabilitation	Preferred provider only; MMI Health's designated service provider must be used	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to overall annual limit	Maximum of twenty-one (21) days per beneficiary per annum Limited to annual in-hospital benefit
	MRI and CT scans	Authorisation must be obtained prior to procedure	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to overall annual limit	One (1) per family per annum Only covered at MMI Health's designated service provider 100% of MMI Health's negotiated rates Limited to annual in-hospital benefit
	Internal prostheses and joint replacements	Preferred provider only; MMI Health's designated service provider must be used	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to overall annual limit	R49 000 per beneficiary per annum Limited to annual in-hospital benefit
	Maxillofacial and oral surgery	Trauma cases only	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to overall annual limit	100% of Scheme rate Limited to annual in-hospital benefit
	To-take-out (TTO) medicine	Medicine dispensed on discharge from hospital	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to overall annual limit	Maximum of five (5) days' supply Limited to annual in-hospital benefit
	Radiotherapy and chemotherapy	MMI Health authorisation must be obtained prior to treatment Benefit applicable at State facility only	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to overall annual limit	Case managed by MMI Health 100% of approved treatment plan; limited to Uniform Patient Fee Schedule (UPFS) rates Limited to annual in-hospital benefit
	Transplants	MMI Health authorisation must be obtained prior to admission Benefit applicable at State facility only	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to overall annual limit	Case managed by MMI Health Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to annual in-hospital benefit

B IN-HOSPITAL BENEFITS (CONTINUED)

			PRIMARY OPTION	STANDARD OPTION
Private or State facility (continued)	Angiograms and cardio-thoracic surgery	MMI Health authorisation must be obtained prior to admission Benefit applicable at State facility only	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to overall annual limit	Case managed by MMI Health Only covered at MMI Health's designated service provider 100% of MMI Health's negotiated rates Limited to annual in-hospital benefit
	Neurosurgery	MMI Health authorisation must be obtained prior to admission Benefit applicable at State facility only	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to overall annual limit	Case managed by MMI Health Only covered at MMI Health's designated service provider Limited to annual in-hospital benefit
	Renal dialysis	MMI Health authorisation must be obtained prior to treatment Benefit applicable at State facility only	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to overall annual limit	Case managed by MMI Health Only covered at MMI Health's designated service provider Limited to annual in-hospital benefit
	Hospice/home nursing in lieu of hospitalisation	Medical motivation is required and subject to MMI Health's protocols No benefit for frail care nursing services	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Subject to the approval of MMI Health's medical advisor Limited to overall annual limit	Maximum of fourteen (14) days per family per annum 100% of Scheme rate Limited to annual in-hospital benefit
	Scopes	No benefit for endoscopic appendisectomy, inguinal or incisional hernia repair or laparoscopically-assisted vaginal hysterectomy No benefit for disposable instruments Members will be liable for any costs in excess of the specified limits	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to overall annual limit	Diagnostic endoscopic procedures at MMI Health's designated facilities only Limited to R8 000 per family per annum for upper or lower gastrointestinal endoscopy Conscious sedation only covered at MMI Health's designated service providers



B IN-HOSPITAL BENEFITS (CONTINUED)

			PRIMARY OPTION	STANDARD OPTION
Private or State facility (continued)	Scopes (continued)			Endoscopically-assisted surgery limited to R16 100 per family per annum; only covered at MMI Health's designated service provider and at MMI Health's negotiated rates Limited to annual in-hospital benefit
	Trauma unit	Benefit limited to stabilisation of patient only and thereafter transferred to MMI Health's designated service provider Subject to authorisation and case management	Treatment at State facility only; Uniform Patient Fee Schedule (UPFS) rates applicable Limited to overall annual limit	100% of MMI Health's negotiated rates Limited to annual in-hospital benefit

GLOSSARY

MMI Health	Contracted to the Scheme for administration, managed healthcare services and the management of the Scheme's provider network
Scheme rate	The rate set by the Scheme for the reimbursement of claims in the absence of any other agreed or contracted tariff with any service provider
UPFS	Uniform Patient Fee Schedule – the fee schedule applied by the public sector
Generic reference pricing	The maximum price that the Scheme pays for medication, based on the cost of any original product

Contribution Rates

Effective 1 January 2019

Primary Option

PRINCIPAL MEMBER	ADULT DEPENDANT	CHILD DEPENDANT
R358	R358	R142

Standard Option

PRINCIPAL MEMBER	ADULT DEPENDANT	CHILD DEPENDANT
R795	R795	R322

