



CLASSIC OPTION

ANNUAL SAVINGS LIMIT (ASL)			
OPTION	MEMBER	ADULT	CHILD
Classic Network	R6 228	R5 304	R1 560
Classic	R7 286	R6 196	R1 820
MONTHLY CONTRIBUTION			
OPTION	MEMBER	ADULT	CHILD
Classic Network	R2 883	R2 452	R723
Classic	R3 373	R2 868	R843

OUT-OF-HOSPITAL BENEFITS

Not sure what we mean? Refer to glossary on page 50.

	CLASSIC NETWORK	CLASSIC
General practitioners (GPs) and specialists	Subject to ASL	Subject to ASL
Medicines Acute Over the counter (OTC) Preventative medicines	Subject to ASL R190 per event per day Paid from ASL – refer to page 7	Subject to ASL R190 per event per day Paid from ASL – refer to page 7
Optometry Subject to ASL	Per beneficiary: 1 examination, a frame of up to R780 and 2 lenses every 24 months OR contact lenses of up to R1 530 instead of glasses per year	Per beneficiary: 1 examination, a frame of up to R780 and 2 lenses every 24 months OR contact lenses of up to R1 530 instead of glasses per year
Dentistry: Basic and specialised Please note that, while dentures are covered, there is a limit of 1 set of dentures every 4 years per beneficiary. General anaesthetic is available for children under the age of 8 for extensive basic treatment and this is limited to once every 24 months per beneficiary. Cover is available for the removal of impacted wisdom teeth in theatre but must be pre-authorized by emailing a detailed quotation and clear panoramic radiograph.	Subject to ASL	Subject to ASL
Auxiliary services	Subject to ASL	Subject to ASL



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ADDITIONAL BENEFITS (not paid from ASL)

Chronic medicines Non-CDL chronic medicine	26 conditions – unlimited (page 12) – plus 10 conditions, subject to sub-limits: M0 – R4 300 M1 – R8 400 M2 – R10 500 M3 – R11 500 M4 – R13 000 M5+ – R15 000	26 conditions – unlimited (page 12) – plus 10 conditions, subject to sub-limits: M0 – R4 300 M1 – R8 400 M2 – R10 500 M3 – R11 500 M4 – R13 000 M5+ – R15 000
Network provider Co-payment for non-formulary medicine Co-payment for use of non-network provider	Medipost Pharmacy 20% 30%	Scheme network pharmacy 20% 30%
Maternity Subject to registration onto the patient care programme	12 antenatal visits x2 2D scans per pregnancy. 3D and 4D scans are paid up to the rate of 2D scans 2 paediatric visits Pregnancy vitamins	12 antenatal visits x2 2D scans per pregnancy. 3D and 4D scans are paid up to the rate of 2D scans 2 paediatric visits Pregnancy vitamins
Medical and surgical appliances General appliances per family per annum Sub-limits to Appliance Benefit: Glucometer per beneficiary every 2 years Nebuliser per family every 3 years	R12 627 R750 R750	R12 627 R750 R750
External Prosthesis per family per annum	R22 344	R22 344
MRI, CT, PET and radio isotope scans	Per beneficiary = 2 scans paid from risk benefits thereafter ASL Subject to pre-authorisation and managed care protocols	Per beneficiary = 2 scans paid from risk benefits thereafter ASL Subject to pre-authorisation and managed care protocols
Hearing aids	Subject to medical and surgical appliance limit	Subject to medical and surgical appliance limit
Hearing aid maintenance	R1 000 per beneficiary per annum	R1 000 per beneficiary per annum
Mental health	Subject to ASL	Subject to ASL
Health Maximiser™	Refer to page 7	Refer to page 7
Extra consultations and medicine (Only once ASL reaches R300)	Single member = 2 visits Family = 5 visits	Single member = 2 visits Family = 5 visits
Patient care programmes (Diabetes, HIV, oncology)	Subject to registration and managed care protocols	Subject to registration and managed care protocols



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IN-HOSPITAL BENEFITS

Subject to pre-authorisation and managed care protocols	CLASSIC NETWORK	CLASSIC
In-hospital limits	Network hospital - Life Healthcare	Any hospital
State and private hospital	Unlimited 30% co-payment for using non-network provider	Unlimited
GPs and specialists	At Scheme rate Specialists subject to preferred provider rates	At Scheme rate Specialists subject to preferred provider rates
To-take-out medicine	Up to 7 days	Up to 7 days
Organ transplants (non-PMB cases)	Per family = R61 520 (limit includes harvesting and transportation costs) National donor only	Per family = R61 520 (limit includes harvesting and transportation costs) National donor only
Internal prosthesis	Per family per annum = R33 516	Per family per annum = R33 516
Refractive eye surgery	Per eye = R5 300; maximum of R10 600 for both eyes once per lifetime	Per eye = R5 300; maximum of R10 600 for both eyes once per lifetime
Reconstructive surgery (as part of PMBs)	Per family = R61 520	Per family = R61 520
MRI, CT, PET and radio isotope scans	Per beneficiary = 2 scans paid from risk thereafter from ASL	Per beneficiary = 2 scans paid from risk thereafter from ASL
Alternate care instead of hospitalisation	Per family = 30 days to a maximum of R33 130	Per family = 30 days to a maximum of R33 130
Mental health (in- and out-of-hospital)	100% of Scheme rate	100% of Scheme rate
Alcohol and drug rehabilitation	100% of negotiated rate, at a South African National Council on Alcoholism and Drug Dependence (SANCA)-approved facility	100% of negotiated rate, at a South African National Council on Alcoholism and Drug Dependence (SANCA)-approved facility
Oncology in and out of hospital Non-PMB cases	Per family = R500 000 20% co-payment after limit has been reached	Per family = R500 000 20% co-payment after limit has been reached
PMB cases	Unlimited	Unlimited
Pathology and radiology	At Scheme rate	At Scheme rate
Dialysis	At Scheme rate	At Scheme rate
General dentistry	Subject to ASL and dental protocols	Subject to ASL and dental protocols
Ambulance transport	Emergency – road and air	Emergency – road and air