

REHABILITATION

SELFSURE 2019

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△ Self Funded



100% of Medical Scheme Rate

DESCRIPTION OF SERVICE/TREATMENT	SERVICES RENDERED AS PART OF HOSPITALISATION - SUBJECT TO PRE-AUTHORISATION	Annual Day-to-day Limit: Principal Member = R 5,350.00; Additional per adult dependant = R 3,780.00; Additional per minor dependant = R 1,890.00 Radiology, Pathology, Basic Dentistry, Physiotherapy and Biokinetics = R 5,450.00 or R 7,650.00 per family per year Optometry = 100% of Scheme Tariff in respect of consultation and spectacles/contact lenses limited to R5100 per family per 24 month cycle. All Optical benefits are subject to OptiClear Network protocol. Medical Appliances = R 4,300.00 per family per year		
HOSPITALISATION Accommodation, theatre, medicine and material	100% of Agreed Tariff	Not Applicable		
use whilst hospitalised				
Outpatient treatment at hospital facility Medicine received on discharge from hospital	Not Applicable 100% of Agreed Tariff (RP Applies), if purchased on date of discharge	Subject to Annual Day-to-day Limit		
MEDICAL PRACTITIONERS	100% of Agreed Tariff (RP Applies), if purchased on date of discharg	ge, subject to a maximum of 7 days supply		
Consultations/Visits	() Unlimited	Subject to Annual Day-to-day limit		
		Subject to Joint limit for Basic Dentistry,		
Radiology and Pathology	Unlimited	Physiotherapy and Biokinetics		
ECHO-tests	Unlimited	Limited to R 3,150.00 per beneficiary per year		
MRI-, CT scans and Radio-Isotope studies (Benefits subject to separate pre-authorisation)	for MRI-scans, computed tomography and radio-isotope studies, subject to obtaining a PAR, additional to the PAR required for hospitalisation. Benefit is limited to 2 scans per beneficiary and an overall limit of R 15,000.00 per family. A co-payment of R 2,050.00 will apply	for MRI-scans, computed tomography and radio-isotope studies, subject to obtaining a PAR, additional to the PAR required for hospitalisation. Benefit is limited to 2 scans pe beneficiary and an overall limit of R 15,000.00 per family. A co-payment of R 2,050.00 will apply		
Clinical Procedures	Unlimited Co-payments applicable to certain elective procedures, unless funded as PMB treatment. Please refer to Members' Guide for details. No benefits for elective procedures unless funded as PMB treatment: Joint Replacements Spinal Surgery	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 limited to Annual Day-to-day Limit		
Cochlear Implants	Limited to R 30,200.00 per implant	Not Applicable		
Material and injection material administered in doctor's rooms	Not Applicable	Subject to Annual Day-to-day Limit		
MATERNITY				
Ante-natal Classes and Foetal Scans	Unlimited	Foetal Scans limited to 2 per beneficiary per year and the cost of a 3D scan is limited to the cost of a 2D scan. Benefits allowed for additional pregnancy scans and/or pre-childbirth education at 100% of Cost to a maximum of R1,790.00 per Family per Year		
Ante-Natal Consultations	Unlimited	Unlimited		
Confinement	100% of Agreed Tariff in respect of hospitalisation and 100% MSR in respect of Associated Provider services - Unlimited			
AUXILIARY SERVICES				
Physiotherapy and Biokinetics	Unlimited	Subject to joint limit for Radiology, Pathology and Basic Dentistry		
Medical Technology	() Unlimited	Subject to Annual Day-to-day Limit		
Clinical Technology	Unlimited	Subject to Annual Day-to-day Limit		
	Unlimited (treatment to form part of a			
Speech Therapy and Occupational Therapy Podiatry, Orthoptic treatment, Hearing Aid Acoustics, consultations with Dietitians, Chiropractors, Osteopaths,	Case Management Programme) O Subject to Day -to-day Limit	Subject to Annual Day-to-day Limit Subject to Annual Day-to-day Limit		
Homeopaths, Naturopaths and Herbalists				
Aromatherapy, Acupuncture and Reflexology		Δ		
OPTICAL				
Consultation	Not Applicable	For a standard eye examination per beneficiary per 24 month period - Subject to combined family limit per 24 month cycle		
Spectacles and Contact Lenses	Not Applicable	For a pair of generic standard lenses For a frame limited to R500 per beneficiary per 24 mont period - 0R For clear contact lenses limited to R900 per beneficiary per 24 month period - Subject to combined family limit		
Refractive Surgery	,	per 24 month cycle		
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SECONDARY FACILITIES				

Only for cases managed as part of a Case Management Programme, where a medical report was submitted by the attending Physician

DESCRIPTION OF SERVICE/TREATMENT	- SUBJECT TO PRE-AUTHORIS	ATION	SERVICES RENDER	ED NOT AS PART OF HOSPITALISATION		
AMBULANCE SERVICES						
Preferred Provider (ER24)	Not Applicable		100% of Agreed Tariff for emergency transport to and from a hospital			
Non-preferred Provider	Not Applicable		Limited to R 2,950.00 per family per year, limit will not apply to PMB			
BLOOD TRANSFUSIONS Subject to pre-authorisation						
MEDICAL AND SURGICAL PROSTHESIS / APPLIANCES						
Internal Prosthesis	Specific sub-categories with limits apply. Please refer to Member Guide for detail					
External Prosthesis	Limited to R 56,300.00 per family per year - Subject to approval by Case Manager					
Orthopaedic Appliances	Limited to R 8,000.00 per family per year - Subject to Case Management					
Medical Appliances	Not Applicable		Limited to R 4,300.00 per family per year. This maximum may be exceeded, subject to a maximum of R 12,900.00, in respect of certain appliances, provided that the treatment forms part of a Case Management Programme			
Hearing Aids	Not Applicable		\triangle			
DENTISTRY						
Basic	R 1,800.00 co-payment applies and subto joint limit for Radiology, Pathology, Physiotherapy and Biokinetics	oject	Subject to joint limit for Radiology, Pathology, Physiotherapy and Biokinetics			
Specialised	R1,800.00 co-payment applies and sub to Annual Day-to-day Limit	ject	Subject to Annual Day-to-day Limit			
MAXILLA-FACIAL AND ORAL SURGERY						
Elective	R 1,800.00 co-payment applies and subject to Annual Day-to-day Limit		Subject to Annu	ıal Day-to-day Limit		
Non-elective (excluding extractions)	R 1,800.00 co-payment applies. In the e 100% of Cost - Subject to PMB protocol	vent of PMB,	Unlimited - In the event of PMB, 100% of Cost - Subject to PMB protocol			
Implantology	R 1,800.00 co-payment applies - In the e 100% of Cost - Subject to PMB protocol	event of PMB,	Subject to Annu	ıal Day-to-day Limit		
PRESCRIBED MEDICINE						
Chronic (Member must apply for benefit)	Not Applicable					
Acute	Not Applicable		100% of Agreed Tariff (RP applies) – Subject to Annual Day-to-day Limit			
Immunisations	Not Applicable		100% of Agreed Tariff (RP applies) – Subject to Annual Day-to-day Limit			
Oral & Injectable Contraceptives	Not Applicable		Limited to R 1,680.00 per family per year			
NON-PRESCRIBED MEDICINE (PAT)	Not Applicable 100% of Agreed Tariff (RP applies) - Limited to R 280.00 per day and subject to Annual Day-to-day Limit					
CASE MANAGED / DISEASE MANAGED CONDITIONS / PROCEDU	JRES					
Organ Transplants	The following benefits apply to organ donors in RSA. R 44,900.00 for a live donor, R 26,800.00 for a cadaver. Benefit 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 transplant procedure also qualify for benefit. Limit will not apply to PMB					
Chronic Renal Failure	For Kidney Dialysis, incl. associated Radiology and Pathology tests - Unlimited					
Oncology	100% of Agreed Tariff - Benefit managed as part of an Oncology Benefit Management Programme and subject to use of Preferred Provider. Overall limit R 242,400.00 per family per year. Limit will not apply to PMB. No benefit for Biological drugs.					
Asthma, Chronic Obstructive Airways Disease, Diabetes and Cardiocare	Benefits managed by the Scheme and payable as per the applicable benefits described elsewhere in this summary					
Oxygen Therapy	Tor Oxygen Therapy (cylinders included) subject to Case Management					
Human Papillomavirus Vaccine (HPV)	Benefit Subject to Authorisation on Disease Management Programme and provided that condition forms part of Disease Management protocol. Further subjected to member being registered on the Programme and member being compliant					
Mammograms and Pap Smears	Benefit Subject to Disease Management protocol					
FOREIGN CLAIMS	Namibian claims only					
AIDS AND HIV Benefits managed as part of a Disease Management Programme						
MENTAL HEALTH						
Clinical Psychology	Unlimited - provided that treatment forms part of Case Management Programme		Subject to Annual Day-to-day Limit			
Psychiatry	Provided that treatment forms part of C Program. Treatment to be obtained in a institution, as approved by the Scheme	a mental health Subject to Annual Day-to-day Limit				
PRESCRIBED MINIMUM BENEFITS (PMB)	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 40% co-payment will apply. Scheme protocol apply					
CONTRIBUTIONS - EFFECTIVE 1 JANUARY 2019 Principal member Additional Adult Dependant Additional Minor Dependant						
CONTRIBUTIONS:	R 3,175.00	R 3,170.00		(payable up to maximum 3) R794.00		

R 3,170.00

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