

# 2023 Benefits & Contribution Adjustments



BENEFIT DESCRIPTION	PRIME	COMPACT
Adult Vaccination	Limit increased to <b>R445</b> per family	Limit increased to <b>R445</b> per family
Alternatives to Hospitalisation	Limit increased to <b>R70 420</b> per family	Limit increased to <b>R70 420</b> per family
Alternatives to Hospitalisation: Terminal Care Benefit	Sub-limit increased to <b>R41 145</b> per family	Sub-limit increased to <b>R41 145</b> per family
Appliances: General, Medical and Surgical	Limit increased to <b>R10 320</b> per family	Limit increased to <b>R10 320</b> per family
Appliances: Peak flow meters, Nebulizers, Glucometers and Blood pressure monitors (Motivation required)	Sub-limit increased to <b>R885</b> per beneficiary subject to the appliance benefit	Sub-limit increased to <b>R885</b> per beneficiary subject to the appliance benefit
Consultations and Visits Out-of-Hospital: (In-Person) Extended FP visits for all Emergency and Chronic FP consultations for registered Chronic Beneficiaries. Medshield FP Network and CDL applies.	<b>Unlimited</b> , once the Day-to-Day Limit and Care Plan visits have been depleted	<b>Unlimited</b> , once the Day-to-Day Limit and Care Plan visits have been depleted
Contraception: Medication (Oral Birth Control)	Limit increased to <b>R200</b> per month per female beneficiary. <b>Removed</b> formularies and protocols	Limit increased to <b>R200</b> per month per female beneficiary. <b>Removed</b> formularies and protocols
Chronic Renal Dialysis	Limit increased to <b>R205 885</b> <b>Reduced</b> co-payment	Limit increased to <b>R205 885</b> <b>Reduced</b> co-payment
Day-to-Day Limits	Limit increased to: <b>M0 R9 380</b> <b>M+1 R13 100</b> <b>M+2 R14 650</b> <b>M+3 R16 485</b> <b>M+4 R18 090</b>	Limit increased to: <b>M0 R9 380</b> <b>M+1 R13 100</b> <b>M+2 R14 650</b> <b>M+3 R16 485</b> <b>M+4 R18 090</b>
Dentistry: Specialised	Limit increased to <b>R13 870</b> per family	Limit increased to <b>R13 870</b> per family
Dentistry: Wisdom Teeth extraction in Day Clinic	<b>Reduced</b> co-payment of R1 575	<b>Reduced</b> co-payment of R1 575
HIV & AIDS: Antiretroviral and related medication	<b>Reduced</b> co-payment	<b>Reduced</b> co-payment
Maternity: Antenatal Classes and Postnatal Midwife Consultations	<b>8 Visits</b> in total per event	<b>8 Visits</b> in total per event
Maxillo-Facial Surgery	Limit increased to <b>R17 870</b> per family	Limit increased to <b>R17 870</b> per family
Medication: Chronic	Limit increased to <b>R7 465</b> per beneficiary and <b>R14 930</b> per family. <b>Reduced</b> co-payment	Limit increased to <b>R7 465</b> per beneficiary and <b>R14 930</b> per family. <b>Reduced</b> co-payment
Medication: Discharge from Hospital -TTO	Limit increased to <b>R610</b> per admission	Limit increased to <b>R610</b> per admission
Mental Health: In- and Out-of-Hospital	Limit increased to <b>R34 625</b> per family	Limit increased to <b>R34 625</b> per family
Oncology Limit	Limit increased to <b>R282 350</b> per family	Limit increased to <b>R282 350</b> per family
Oncology: PET Scans	<b>Removed</b> co-payment	<b>Removed</b> co-payment
Oncology: Specialised Drugs	Sub-limit increased to <b>R130 630</b> per family	Sub-limit increased to <b>R130 630</b> per family
Oncology: Breast Reconstruction	Limit increased to <b>R94 105</b> per family	Limit increased to <b>R94 105</b> per family
Organ, Tissue & Haemopoietic Stem Cell (Bone Marrow) Transplantation including Hospitalisation	Limit increased to <b>R164 705</b> per family	Limit increased to <b>R164 705</b> per family
Optical: Frames and/or Lens Enhancements	Limit increased to <b>R645</b> per beneficiary	Limit increased to <b>R645</b> per beneficiary
Optical: Readers	Limit increased to <b>R190</b> per beneficiary	Limit increased to <b>R190</b> per beneficiary
Physiotherapy: In-Hospital	Limit increased to <b>R2 955</b> per family	Limit increased to <b>R2 955</b> per family
Prosthesis and Devices: Internal	Limit increased to <b>R40 620</b> per family	Limit increased to <b>R40 620</b> per family
Prosthesis and Devices: Internal - Hips and Knees	Sub-limit increased to <b>R35 510</b> per beneficiary	Sub-limit increased to <b>R35 510</b> per beneficiary
Refractive Surgery	Limit increased to <b>R10 380</b> per family	Limit increased to <b>R10 380</b> per family
Specialised Radiology: In- and Out-of-Hospital	Limit increased to <b>R14 150</b> per family <b>Removed</b> co-payment	Limit increased to <b>R14 150</b> per family <b>Removed</b> co-payment
Wellness Vaccinations	<b>Enhanced</b> list	<b>Enhanced</b> list



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**MEDSHIELD**  
medical scheme

MEDIPLUS	MONTHLY CONTRIBUTION - PRIME	MONTHLY CONTRIBUTION - COMPACT
Principal Member	R4 146	R3 768
Adult Dependand	R2 958	R2 688
Child*	R930	R846

\*Contribution rate is applicable to the members first, second and third biological or legally adopted children only, excluding students.

## The following services will attract upfront co-payments:

Specialised Drugs for Oncology, non-Oncology and Biological Drugs	15% upfront co-payment
Non-PMB Internal Prosthesis and Devices	20% upfront co-payment
Voluntary use of a non-Medshield Network Hospital (Prime or Compact as applicable)	25% upfront co-payment
Voluntary use of a non-Medshield Network Hospital - Mental Health	25% upfront co-payment
Voluntary use of a non-Medshield Network Hospital - Organ, Tissue and Haemopoietic stem cell (Bone marrow) transplant	25% upfront co-payment
Voluntary use of a non-DSP or a non-Medshield Pharmacy Network	35% upfront co-payment
Voluntarily obtained out of formulary medication	35% upfront co-payment
Voluntary use of a non-DSP for HIV & AIDS related medication	35% upfront co-payment
Voluntary use of a non-DSP provider - Chronic Renal Dialysis	35% upfront co-payment
Voluntary use of a non-ICON provider - Oncology	40% upfront co-payment

### In-Hospital and Day Clinic Procedural upfront co-payments for non-PMB

Endoscopic procedures (refer to <b>Addendum B*</b> )	R1 500 upfront co-payment
Functional Nasal surgery	R1 500 upfront co-payment
Hernia Repair (except in infants)	R3 000 upfront co-payment
Laparoscopic procedures	R3 500 upfront co-payment
Arthroscopic procedures	R3 500 upfront co-payment
Impacted Teeth, Wisdom Teeth and Apicectomy	R3 500 upfront co-payment
Wisdom Teeth extraction in a Day Clinic	R1 575 upfront co-payment
Nissen Fundoplication	R5 000 upfront co-payment
Hysterectomy	R5 000 upfront co-payment
Back and Neck surgery	R7 000 upfront co-payment

Please note: Failure to obtain an authorisation prior to hospital admission or surgery and/or treatment (except for an emergency), will attract a 20% penalty, in addition to the above co-payments.

\*No In-Hospital Endoscopic procedural co-payment applicable for children 8 years and younger.

The Medshield Specialist Network list shall be as designated in writing by the Scheme from time to time.

Medshield Medical Scheme Rules indicate that a member is entitled to change from one benefit option to another provided that the change is made with effect 1 January of any financial year, therefore mid-year option changes are not permitted.