

PRODUCT INFORMATION

Discovery Health Medical Scheme provides health plans that are as unique as you are. Seamless, connected health cover to protect you and those that you care for most, at every stage of your life.

In 2020, we will prioritise your healthcare and wellness by:

- Continuing to offer the widest range of plans to choose from, so you can choose the option that best suits your health and financial needs, at any stage of your life.
- Offering unmatched benefits with unlimited private hospital cover and full cover in our networks, at the most affordable cost.
- Providing access to the most advanced digital health technology providing seamless support for you and your doctors.

The benefits explained in this brochure are provided by Discovery Health Medical Scheme, registration number 1125, administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07, an authorised financial services provider. This brochure is only a summary of the key benefits and features of the Discovery Health Medical Scheme plans, awaiting formal approval from the Council for Medical Schemes. For detailed information on all Discovery Health Medical Scheme plan options, please visit www.discovery.co.za for access to plan brochures as well as a full copy of the proposed 2020 Scheme Rules once approved.



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2020 Benefit updates

BELOW IS A SUMMARY OF THE KEY BENEFIT CHANGES OF THE DISCOVERY HEALTH MEDICAL SCHEME PLANS FOR 2020.

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CHANGES TO THE SPECIALISED MEDICINE AND TECHNOLOGY BENEFIT

The Scheme will introduce full cover options for the treatment of rheumatoid arthritis, ulcerative colitis and Crohn's disease funded from the Specialised Medicine and Technology Benefit. Should members voluntarily use alternative treatment for these conditions, the Scheme will pay up to the reference price for the treatment. Reference pricing will apply to treatment authorised on or after 1 January 2020, and will not impact the funding of treatment authorised prior to 1 January 2020.

UPDATES TO FUNDING OF MRI, CT SCANS AND SCOPES FOR THE EXECUTIVE PLAN

The Scheme will be introducing a co-payment for all out-of-hospital MRI/CT scans, scans not related to an approved admission or scans related to conservative back and neck treatment. The first R3 040 of the MRI/CT scan will be funded from your available day-to-day benefits (with accumulation to the Above Threshold Benefit) and the balance of the account from the Hospital Benefit, up to 100% of the Discovery Health Rate. Co-payments will not apply to scans forming part of Prescribed Minimum Benefit (PMB) entitlements.

The Scheme will introduce a co-payment for certain endoscopic procedures performed in-hospital. The co-payment will apply to gastroscopies, colonoscopies, sigmoidoscopies and proctoscopies only. The first R4 100 in respect of the hospital account will be funded from your available day-to-day benefits (with accumulation to the Above Threshold Benefit) and the balance of the account from the Hospital Benefit, up to 100% of the Discovery Health Rate. The deductible does not apply to PMB admissions and for children under 12 years or to endoscopic procedures performed in the doctor's rooms. These endoscopic procedures will continue to fund from the Hospital Benefit as occurs today.

CHANGES TO CHRONIC ILLNESS BENEFIT

From 1 January 2020, certain formulary changes and Chronic Drug Amount updates will be applied. We have been communicating these changes with impacted members. If you are impacted you will have until the end of 2019 to make changes to your treatment to avoid or reduce co-payments.

UPDATES TO LIMITS, CO-PAYMENTS, **DEDUCTIBLES AND THRESHOLDS**

Co-payments and deductibles will be increased by 9.5%.

Benefit limits will be increased by 9.5% with the exception of the following where there is no increase for 2020:

- Cochlear and auditory brain implants;
- International Travel Benefit;
- Overseas Treatment Benefit;
- Hip, knee, shoulder and spinal prostheses limit;

CHANGE TO THE ACUTE MEDICINE BENEFIT **ON THE CLASSIC SMART PLAN**

Acute medicine in the Classic Smart Plan will be subject to an annual benefit limit of R1 500 per member and R2 500 for a family for schedule 3 and above acute medication prescribed by a Smart network GP. The R10 co-payment per item will no longer apply, and members may use both Clicks and Dis-Chem to obtain these medicines.

CHANGES TO THE DAY-TO-DAY EXTENDER BENEFIT

The Day-to-day Extender Benefit pays for certain day-to-day benefits after you have run out of money in your MSA and before you reach the Annual Threshold. In 2020, the Day-to-day Extender Benefit will cover video call consultations with a network GP as well as pharmacy clinic consultations in our defined wellness network. Members will also have cover for consultations with a network GP, when referred. Consultations are unlimited for Executive, Comprehensive and Priority plans, while Saver plans have limited cover for up to 6 consultations depending on the chosen plan.

UPDATES TO FUNDING OF SCOPES

The Scheme will introduce a higher deductible, where both a gastroscopy and colonoscopy are performed together as part of an admission. This change will apply to all plans except for the KeyCare plans.

UPDATES TO THE KEYCARE PLUS CASUALTY BENEFIT

The Scheme will be introducing a limit of one casualty visit per person for elective casualty visits. The limit will not apply to emergency casualty visits that result in an admission.

EXPANSION OF THE DELTA HOSPITAL NETWORK

The Delta Hospital Network will be expanded to include Life Wilgers Hospital in Pretoria.

CHANGE IN ACCUMULATION OF CLAIMS FOR ACUTE PRESCRIBED MEDICINE

Accumulation of non-preferentially priced generic and brand medication to the Annual Threshold, and payment from the Above Threshold Benefit on the Executive, Comprehensive and Priority plans will be up to 50% of the Discovery Health Rate. Preferentially priced generic and brand medication will continue to accumulate and fund at 100% of the Discovery Health Rate.



- Oncology threshold;
- Specialised Medicine and Technology Benefit limit;
- External Medical Items limit and
- KeyCare Mobility Benefit.

SCREENING FOR ADULTS

This benefit covers certain tests such as blood glucose, blood pressure, cholesterol, body mass index and HIV screening at one of our wellness providers.

We also cover a mammogram every two years, a Pap smear once every three years and a PSA test (prostate screening) each year. In 2020, we will also cover bowel cancer screening tests every two years for members between 45 and 75 years. Members who meet the clinical entry criteria may also qualify for additional tests that include a colonoscopy.



Introducing Classic Smart Comprehensive

For 2020, Classic Comprehensive Zero MSA has been redesigned and renamed as Classic Smart Comprehensive. Classic Smart Comprehensive combines the Comprehensive Series and the Smart Series in a unique plan that offers:

- Extensive day-to-day benefits at a Smart network provider
- Unlimited Above Threshold Benefit from the Comprehensive Series
- Comprehensive maternity benefits
- Comprehensive in-hospital cover in the Smart Hospital Network.

Comprehensive hospital cover in the Smart Hospital Network

Members have full cover for hospital admissions in the Smart Hospital Network, with no overall limit. Planned or elective non-emergency admissions outside the Smart Hospital Network will be subject to a R9 650 upfront co-payment. Specialists who treat Smart Plan members in hospital are covered in full if they are on a payment arrangement. Specialists who are not on a payment arrangement, are covered up to 200% of the Discovery Health Rate.

Chronic Illness Benefit

The Classic Smart Comprehensive Plan provides full cover for all Chronic Disease List conditions. Members will be covered up to the set monthly Chronic Drug Amount (CDA) for medicine not on the formulary. The Classic Smart Comprehensive Plan does not cover the Additional Disease

List or the Specialised Medicine and Technology Benefit.

Comprehensive oncology cover

Oncology treatment that falls within the Prescribed Minimum Benefits (PMB) is covered in full, with no co-payment. For PMB and treatment that is not PMB, members will have cover up to R300 000 of the member's approved cancer treatment over a 12-month cycle, after which a 20% co-payment will apply only to treatment that is not PMB.

The Classic Smart Comprehensive Plan does not cover the Extended Oncology Benefit or the Oncology Innovation Benefit.

Screening and prevention benefit

Members have access to comprehensive screening and prevention benefits, including an annual health check, screening for specific chronic conditions and cancers and age-specific screening for children under the age of 18.

Comprehensive maternity cover

Members on Classic Smart Comprehensive have cover for a rich set of healthcare services for maternity and early childhood paid from the Maternity Benefit. The Maternity Benefit is over-and-above the day-to-day benefits to

For 2020, the Discovery Health Medical Scheme has used the efficiency of the Smart Series networks, digital capabilities of **Discovery Health** and benefits of the Comprehensive Series to create the Classic Smart Comprehensive Plan designed to offer efficient, comprehensive healthcare cover to families that are concerned about their known and unforseen medical needs.

Smart Day-to-day Benefits

Vitality

Members have access to a defined set of day-to-day benefits paid by the Scheme, in addition to the benefits available once you reach your Annual Threshold:

Vitality

Unlimited GP Consultations

The Smart Plan provides members with unlimited GP consultations at a Smart network GP. A R55 co-payment applies for each visit.

Acute Medicine

Members have full cover for a defined list of acute medicine (schedule 3 and above), when prescribed by a Smart network GP and dispensed by a network pharmacy (including Clicks and Dis-Chem). Cover is subject to an annual limit of R2 500 per person, or R4 000 per family.

Over-the-Counter Medicine

Cover for over-the-counter medication (schedule 0-2) obtained from a network pharmacy (Clicks and Dis-Chem), up to an annual limit of R800 per family per year.

Sports Injury Treatment

The Sports Injury Benefit includes defined cover for specialist consultations, basic x-rays and treatment by allied health professionals, when referred by a Smart network GP.

Dental Care and Eye Care

Cover for one defined dental check-up each year and one eye test per year through the Scheme's appointed network providers, subject to a co-payment of R55 for eye care and R110 for dental check-up.

MRI and CT Scans

Cover for out-of-hospital MRI and CT scans, subject to the first R3 040 payable by the member and the balance paid by the Scheme up to 100% of the Discovery Health Rate.

Smart Specialist Consultations

The Smart Specialist Benefit covers consultations with gynaecologists, paediatricians, physicians and ENTs that we have payment arrangements with, including the cost of any radiology or pathology prescribed by the specialist. The benefits covers 100% of the Discovery Health Rate, up to R5 000 per person per year, or R10 000 per family per year, and is subject to referral by a Smart network GP.

provide families with comprehensive cover for maternity and early childhood.

Creating an efficient price point for comprehensive cover

2020 CONTRIBUTIONS FOR CLASSIC SMART COMPREHENSIVE

	⊖ ∯ Main member	∯ Adult	⊖ Child
Contributions	4 327	3 994	1 378
Annual Threshold amounts	23 900	23 900	800

Classic Smart Comprehensive does not offer a Medical Savings Account

Unlimited Above Threshold Benefit 🦉

The Above Threshold Benefit starts paying for day-to-day expenses once you reach your Annual Threshold. The Above Threshold Benefit (ATB) is unlimited, which means it covers all day-to-day expenses at the Discovery Health Rate (DHR) or at a portion of it. Certain annual benefit limits may apply. You will need to pay for any difference between the DHR and the amount claimed.

The benefits covered by the Above Threshold Benefit, but not limited to, include:

- Unlimited GP consultations
- Unlimited specialist consultations
- Prescribed medicine*
- Allied healthcare services*
- Unlimited radiology and pathology
- Unlimited basic dentistry
- Dental appliances*
- Optometry*
- *Subject to an annual limit

Vitality is a separate wellness product sold and administered by Discovery Vitality (Pty) Ltd, registration number 1999/007736/07, an authorised financial services provider.



INTRODUCING DISCOVERY COACH

Supporting you through your healthcare journey

Our members have exclusive access to value-added offers outside of the Discovery Health Medical Scheme benefits and rules. Go to **www.discovery.co.za** to view all the value-added offers.

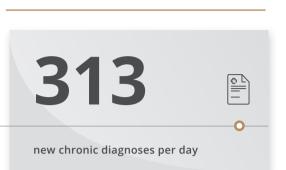
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LARGE NUMBERS OF DISCOVERY HEALTH MEDICAL SCHEME MEMBERS EXPERIENCE LIFE-CHANGING EVENTS EVERY DAY

ONCOLOGY







CHRONIC

Dealing with life-changing health events or the ongoing management of a chronic disease can be a significant burden. Apart from understanding the impact on your health and the treatment required for your condition, members have to consider the associated lifestyle changes and navigate your way through an unfamiliar healthcare system.

Life-changing diagnoses require complex medical intervention. The greater the complexity and frequency of care, the more important it is to coordinate this care. Discovery Health has extensive experience in guiding members with complex medical conditions through their healthcare journeys.

In 2020, Discovery will utilise this experience and enhance the healthcare journeys of members through the introduction of Discovery Coaches.

Discovery Coaches

When Discovery Health Medical Scheme members experience a life-changing event, they have immediate access to:

- comprehensive benefits that fund access to healthcare;
- sophisticated managed care programmes that ensure compliance with treatment protocols and clinical guidelines; and
- digital tools that support you and your doctor with relevant clinical information.

In 2020, Discovery Coaches will enhance this access for specific conditions and programmes, to provide relevant support to you through your healthcare journey. The Discovery Coaches will enroll qualifying members to participate in the programme.





- Goal setting and tracking to help members set and reach realistic but challenging goals
- Referral and onboarding to the relevant existing Discovery interventions.

HEALTH COACHES WILL BE DEPLOYED ACROSS SPECIFIC HIGH-RISK PROGRAMMES

CARDIAC PROGRAMME Lifestyle, clinical pathway and ONCOLOGY PROGRAMME Education, emotional support



emotional support programme for members who recently had a heart attack and navigation programme for members recently enrolled on the Oncology Benefit

DIABETES PROGRAMME

Lifestyle and clinical programme for members recently diagnosed with Type 2 diabetes.

Benefits for members

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- Better-quality care through a coordinated approach across multiple providers within the healthcare system
- Better management of your holistic health and wellbeing
- Improved understanding of your medical scheme benefits
- Support and guidance through human interaction in your time of need.

Benefits for doctors

- Improved patient outcomes
- Reduced administration burden
- Increased members' adherence to treatment guidelines and benefit protocols.

Discovery Coaches is brought to you by Discovery Health (Pty) Ltd; registration number 1997/013480/07, an authorised financial services provider and administrator of medical schemes.

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Enhanced DIGITAL HEALTHCAR experience for members

Intuitive app navigation

O DISCOVERY APP

The Discovery app empowers members to manage their health through self-directed tools and provides the information they need to navigate the healthcare system more effectively. The Discovery app provides a seamless member experience.

We have enhanced the navigation and functionality to make it easier for members to manage their health and their health plan, to find doctors, track claims and download important documents.

=	Medical aid	
Classic	an Saver	
Annual MSA R42 532,07	MSA balance R41 537,00	Used -R995,07
Membership c	ard	
Recent interact	tions	
Claims		
Submit a claim Claims history		
Healthcare	e providers	
Find a healthca	are provider	
Your doctors		
Ask a doctor		

Improved access to **quality care**

AI-POWERED SYMPTOM CHECKER

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The DrConnect functionality on the Discovery app uses state-of-the-art technology and now includes a new Al-powered symptom checker. This technology facilitates self-diagnosis and assists with triage by recommending when to seek emergency care, non-emergency medical care or self-care – so channelling people to credible content and a deeper understanding of the best steps to take next.

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Empowering members with **claims information**

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/I S	NOTIFICATION	AND	HOSPITAL	SUMM

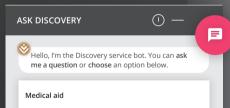
We will be enhancing the Daily Claims Notification sent

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YOUR ROCENT CLANES		TS (MANAGE NOVE NEALTH PLAN

Real-time digital **self-service**

ASK DISCOVERY

Ask Discovery, our chat bot, available on the website



to members. It will provide an overview of claims received, processed and how they are paid for, both out-of-hospital and after a hospital event. This notification has been intuitively designed to improve how this information is displayed to members.



to get real-time answers to their product-related questions.

Our chat bot can carry out a number of transactions related to a member's policy such as finding healthcare professionals, updating details and sending specific policy documents directly via email.

Get your tax certificate
Find a doctor
Choose a health plan
Compare medical aid premiums
/pe a message

The Discovery app, Dr Connect and Ask Discovery are brought to you by Discovery Health (Pty) Ltd; registration number 1997/013480/07, an authorised financial services provider and administrator of medical schemes.



Final date for telephonic and email plan changes



Final date for website plan changes



PRODUCT INFORMATION | 2020

Discovery Health Medical Scheme

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Discovery Health Medical Scheme is regulated by the Council for Medical Schemes.

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