



2020  
**EXTREME**  
BENEFIT GUIDE



# ABOUT THE EXTREME OPTION

**THE EXTREME OPTION** is a traditional, fee-for-service Option. Members have the freedom to choose any provider of choice for their every day needs. For all these day to day needs members are allocated a generous family benefit.

All secondary and hospital benefits must be pre-authorised beforehand.

This Option is well suited for those individuals and families with extensive needs, looking for comprehensive cover while still enjoying freedom of choice.

**\* Please note that the Scheme Rules supersede information contained in this document.**

## PRIMARY BENEFITS

NO PRE-AUTHORISATION REQUIRED • SUBJECT TO FAMILY BENEFIT SCHEME RATES APPLY



### GENERAL PRACTITIONER & SPECIALIST VISITS

- » Consultations
- » Minor procedures in the doctors' rooms



### OPTOMETRY

- » Eye test
- » Frames/lenses/contact lenses: Limited to R3 650 per beneficiary every 24 months



### MALE HEALTH

- » PSA
- » Circumcision \* (boys up to the age of 12 in-hospital and over 13 in doctors' rooms only)
- » Vasectomy \*



### FEMALE HEALTH

- » Oral contraceptives limited to R140 per registered female per month
- » PAP smear
- » Mammogram
- » HPV vaccine (from the age of 9 years)
- » Laparoscopic sterilisation \*



### HOMEOPATHY

- » Cover limited to homeopathic consultations and medication, subject to available funds in the family benefit



### DENTAL CARE

- » Consultations
- » Cleaning, fluoride treatment, scaling, polishing
- » Fillings
- » Wisdom teeth extraction (in the dentists' rooms)
- » Dentures



### PREVENTION & SCREENINGS

Benefits include, but are not limited to:

- » HIV test
  - » Glucose test
  - » Lipogram test
  - » Breast exam
  - » Foot screening
  - » Malaria screening
- These services are available per beneficiary per annum at any pharmacy with clinic services



### \* MATERNITY

**A basket of services consisting of the following benefits will be made available to the expecting mother upon advising Umvuzo within 12 weeks of the pregnancy**

- » 5 visits to the GP or gynaecologist
- » Additional blood and urine tests as required
- » 3 x 2D ultrasound scans
- » 1 x 3D scan

Prenatal vitamins (iron, calcium and folic acid) for the duration of the pregnancy – according to formulary



### MEDICATION

- » **Scripted:** acute medication as prescribed
- » **ADDITIONAL CHRONIC MEDICATION (FORMULARY)**
- » **Scripted:** 9 additional chronic conditions subject to available funds in the family benefit and Disease Management Programme registration

### OVER THE COUNTER MEDICATION

- » Limited to R185 per event, per beneficiary. Maximum of R2 220 per beneficiary per annum

\* Pre-authorisation is required before accessing these benefits

\* Must be pre-authorised

## FAMILY BENEFIT BREAKDOWN



### MAIN MEMBER

R11 760.00



### MAIN MEMBER + ADULT DEPENDANT

R21 240.00



### MAIN MEMBER + ADULT DEPENDANT + CHILD DEPENDANT x 1

R25 920.00



### MAIN MEMBER + ADULT DEPENDANT + CHILD DEPENDANT x 2

R30 600.00



### MAIN MEMBER + ADULT DEPENDANT + CHILD DEPENDANT x 3

R35 280.00

	Main member	Adult dependant	Child dependant x 1	Child dependant x 2	Child dependant x 3	TOTAL FAMILY BENEFIT
M	R11 760					R11 760
M + A	R11 760	R9 480				R21 240
M + A + 1C	R11 760	R9 480	R4 680			R25 920
M + A + 2C	R11 760	R9 480	R4 680	R4 680		R30 600
M + A + 3C	R11 760	R9 480	R4 680	R4 680	R4 680	R35 280

M Main member

A Adult dependant

1C Child dependant x 1

2C Child dependant x 2

3C Child dependant x 3

# SECONDARY BENEFITS

PRE-AUTHORISATION REQUIRED • SCHEME RATES APPLY



## SUPPLEMENTARY BENEFITS

- » R6 200 per family per annum
- Occupational therapy
- Podiatry
- Dieticians
- Psychology
- Speech therapy and audiology
- Physiotherapy, chiropractors & biokinetics



## SPECIALISED DENTISTRY

- » R8 400 per family per year
- Orthodontic and prosthodontic treatment
- Metal base dentures
- Ceramic/laminated inlays
- Gold inlays
- Crowns and bridges



## APPLIANCES (CRUTCHES /SUPPORT/ SLINGS)

- » R11 600 per family per annum
- Back/leg/arm/neck support
- Crutches post surgery
- Surgical footwear
- Respiratory oxygen



## TERMINAL AND WOUND CARE

- » R10 000 per family per year
- The cost for all services related to care for a terminal condition that do not conform to acute admission or service



## EMERGENCY MEDICAL SERVICES

- » Netcare 911
- » Medical and hospital logistics services
- » Emergency road and air evacuation
- » 1 medicine bag per family upon joining
- » 1 medicine bag refill per year



## INVESTIGATIONS (OUT OF HOSPITAL)

- » Limited to R7 300 per family per year
- X-rays and blood tests



## EYE SURGERY

- » Radial keratotomy/excimer laser once every 2 years (set protocols apply)

# HOSPITAL BENEFITS

UNLIMITED • PRE-AUTHORISATION REQUIRED • SCHEME RATES APPLY  
THIS OPTION USES ALL HOSPITAL GROUPS



## GENERAL

- » Consultations (GP and specialists)
- » Treatment
- » Surgical procedures
- » Non-surgical procedures
- » Anaesthesia



## ACCOMMODATION

- » General ward
- » High care
- » Intensive care unit (ICU)



## OVERALL PROSTHESES

- » R 78 100 overall per family per year
- The following sub-limits are applicable:
- Vascular prosthesis R51 200
- Functional prosthesis R18 100
- Joint replacements R51 200
- Major musculoskeletal prosthesis R30 800



## INVESTIGATIONS

- » Radiology
- » Pathology
- » Medical technology



## SCANS (IN & OUT OF HOSPITAL)

- » 2 scans per family per year
- RT scan
- MRI scan
- CAT scan



## DISCHARGE MEDICATION

- » 7 days' supply of acute or chronic medication



## BLOOD TRANSFUSION

- » 100% of the cost, including the cost of:
- Blood
- Apparatus
- Operator's fee

### KINDLY NOTE

- Penalties will apply if authorisation is obtained after treatment.
- The claim may not be paid if pre-authorisation is not obtained.
- The Scheme rules supersede the information on this brochure.

# DISEASE MANAGEMENT



## ACTIVE DISEASE MANAGEMENT PROGRAMMES

- » Our Active Disease Management Programmes enable us to plan and co-ordinate the healthcare of members living with chronic medical conditions, in order to give them the best possible outcomes.

All 26 diseases on the CDL (Chronic Disease List) are covered as part of your PMB (Prescribed Minimum Benefits).

Registration on these Disease Management Programmes is necessary to access full benefits:

- » HIV/Aids
- » Oncology
- » Diabetes
- » Musculoskeletal
- » Renal
- » Hypertension
- » Hyperlipidaemia (high cholesterol)
- » Asthma/COPD/Bronchiectasis

**A total treatment plan for each member includes:**

- » Confidentiality
- » Ongoing member support and education
- » Individualised treatment plan
- » Ongoing counselling and health monitoring

**All Prescribed Minimum Benefits are covered according to Scheme rules, protocols and formularies.**

# WHAT IS THE MONTHLY COST?



PER  
MAIN MEMBER

R3 153.00



PER  
ADULT DEPENDANT

R2 964.00



PER  
CHILD DEPENDANT

R1 056.00

## CONTRIBUTION: FULL DEAL

### SINGLE MEMBER



CONTRIBUTION  
R3 153.00

### DUAL PARENT FAMILY

#### CONTRIBUTION



R6 117.00



R7 173.00



R8 229.00



R9 285.00

### SINGLE PARENT FAMILY

#### CONTRIBUTION



R4 209.00



R5 265.00



R6 321.00



R7 377.00

#### IMPORTANT CONTACT INFORMATION

Alenti Office Park, Building D, 457 Witherite Road,  
The Willows, Pretoria, 0040  
PO Box 1463, Faerie Glen, 0043

24 Hour Call Centre and Authorisations: **0861 083 084**

Please Call Me: **060 070 2095 - Client Services**  
**060 070 2352 - Hospital, Specialist, Chronic Medication**

Tel: **012 845 0000**  
Fax: **086 670 0242**  
E-mail: **info@umvuzohealth.co.za**

**www.umvuzohealth.co.za**

#### HOW DO I GET A PRE-AUTHORISATION NUMBER?

- » Call us on 0861 083 084
- » E-mail: [authorisations@rxhealth.co.za](mailto:authorisations@rxhealth.co.za)
- » We will access your medical history immediately and assist you with obtaining any information you may need

#### PLEASE BE READY TO SUPPLY THE FOLLOWING INFORMATION WHEN CALLING UMVUZO HEALTH

- » Umvuzo Health membership number
- » Surname
- » South African ID number
- » Passport number (if you are from a neighbouring country)

Administrative services are attended to during business hours from:

#### MONDAYS TO FRIDAYS

08:00 - 18:00

#### SATURDAYS

08:00 - 13:00

#### COUNCIL FOR MEDICAL SCHEMES

Tel: **0861 123 267**  
E-mail: **support@medicalschemes.com**  
**complaints@medicalschemes.com**  
Website: **www.medschemes.com**



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