



2020  
**STANDARD**  
BENEFIT GUIDE



# ABOUT THE STANDARD OPTION

**THE STANDARD OPTION** is an all-rounder Option, including great benefits for the whole family and is ideal for middle income earners.

This Option allows members to have more secondary benefits, makes use of the Universal Network and gives access to all private hospital groups.

It is important that you first consult your selected and contracted

GP for all ailments and let your GP be the one to refer you for other medical interventions, if and when necessary.

This is how we ensure an integrated approach to your health.

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

## PRIMARY BENEFITS

NO PRE-AUTHORISATION REQUIRED • UNIVERSAL HEALTH ONLY



### GENERAL PRACTITIONER

- » Unlimited but managed
  - After the 10th visit in a 12 month period the member must choose one GP for better management



### OPTOMETRY

- (Subject to Universal Health provider and clinical entry criteria)
- » 1 eye test per beneficiary every 24 months
  - » 1 set of spectacles per beneficiary every 24 months
    - Selection from a specified range of frames and lenses



### 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 1 supply per registered female per month
- » Pap smear
- » Mammogram
- » Laparoscopic sterilisation \*



### OUT OF NETWORK

- » 1 out-of-network visit per beneficiary or 2 per family per annum are available. Universal will pay the health provider directly on receipt of a valid claim to a maximum of R985 per event. This limit includes GP consultation and all related costs such as radiology, pathology and acute medicines
- » Unlimited if the visit is for an Emergency Medical Condition, as defined in the Medical Schemes Act



### DENTAL CARE

- » 1 consultation per beneficiary per year
- » 1 follow-up per beneficiary per year
- » Cleaning, fluoride treatment, scaling, polishing
- » Fillings
- » Oral X-rays
- » Emergency root canal
- » Wisdom teeth extraction (in the dentists' rooms)
- » 1 set of dentures per family every 24 months. Minimum age of 21 years applies



### PREVENTION & SCREENINGS

The following benefits are available from selected network pharmacies or a network GP:

- » Flu vaccine
- » Glucose test (finger prick)
- » Lipogram
- » Rapid HIV test
- » Childhood vaccines (according to the Department of Health, childhood immunisation and formularies)



### \* 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**

- » 3 visits to the GP or gynaecologist
- » Additional blood and urine tests as required
- » 2 x 2D ultrasound scans
- » Prenatal vitamins (iron, calcium and folic acid) for the duration of the pregnancy – according to formulary



### MEDICATION (FORMULARY)

- » **Scripted:** acute unlimited
- » **Scripted:** chronic unlimited (Subject to 26 CDL PMB conditions as well as selective Hormone Replacement Therapy (HRT) and Disease Management Programme registration)
- » **Medicine for minor ailments (OTC):** Subject to the medicine formulary list of covered medicines, dispensed by an approved pharmacy. Limited to R500 per year, and a maximum of R100 per event per beneficiary per annum



### INVESTIGATIONS

- » X-rays
- » Soft tissue ultrasound
- » Pathology

\* Must be pre-authorised

\* Pre-authorisation is required before accessing these benefits

### IMPORTANT NOTE TO REMEMBER

Only a contracted network GP can refer you for other medical interventions. Make sure that your GP is part of the Universal Health network and avoid out of pocket expenses.

## SECONDARY BENEFITS

PRE-AUTHORISATION REQUIRED • SCHEME RATES APPLY



### SPECIALIST VISITS

- » 7 visits per family per year
- Must be referred by the GP and be clinically necessary



### MEDICATION (FORMULARY)

- » **Scripted:** Acute unlimited
- » **Scripted:** Chronic unlimited (subject to 26 CDL PMB conditions and 6 additional chronic conditions subject to Disease Management Programme registration)



### APPLIANCES (ORTHOPAEDIC/SURGICAL/MEDICAL)

- » R10 100 per family per annum
- Back/leg/arm/neck support
- Crutches post surgery
- Surgical footwear
- Respiratory oxygen



### TERMINAL AND WOUND CARE

- » R8 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 services



### AFTER-HOUR VISITS

- » 5 visits per family per year



### SUPPLEMENTARY BENEFITS

- » R3 400 per family per annum.
- Occupational therapy
- Dieticians
- Speech therapy & audiology
- Physiotherapy
- Podiatry
- Psychology



### 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

## 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)



### BLOOD TRANSFUSION

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



### DISCHARGE MEDICATION

- » 7 days' supply of acute or chronic medication



### SCANS (IN & OUT OF HOSPITAL)

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



### OVERALL PROSTHESES

- » R55 400 overall per family per year
- The following sub-limits are applicable:
  - Vascular prosthesis R30 500
  - Functional prosthesis R10 100
  - Joint replacements R34 200
  - Major musculoskeletal prosthesis R20 500



### INVESTIGATIONS

- » Radiology
- » Pathology
- » Medical technology

### KINDLY NOTE

- All specialist visits must be referred by the network GP and pre-authorised through the Umvuzo call centre.
- Each specialist follow up visit must also be pre-authorised.
- 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.**

### UMVUZO ABBREVIATION DICTIONARY

GP - General Practitioner • DSP - Designated Service Provider • CDL - Chronic Disease List • PMB - Prescribed Minimum Benefits

# WHAT IS THE MONTHLY COST?



PER  
MAIN MEMBER

R1 900.00



PER  
ADULT DEPENDANT

R1 804.00



PER  
CHILD DEPENDANT

R810.00

## CONTRIBUTION: FULL DEAL

### SINGLE MEMBER



CONTRIBUTION  
R1 900.00

### DUAL PARENT FAMILY

CONTRIBUTION



R3 704.00



R4 514.00



R5 324.00



R6 134.00

### SINGLE PARENT FAMILY

CONTRIBUTION



R2 710.00



R3 520.00



R4 330.00



R5 140.00

#### 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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