

ABOUT THE SUPREME OPTION

THE SUPREME 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

This Option is well suited for those individuals who need generous cover and benefits without compromising their freedom.

* 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: Limited to R2 900 per beneficiary



MALE HEALTH

- 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 *



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 R160 per event, per beneficiary. Maximum of R1 920 per beneficiary per annum



DENTAL CARE

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



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

Must be pre-authorised

Pre-authorisation is required before accessing these benefits

FAMILY BENEFIT BREAKDOWN





R10 320





MAIN MEMBER + **ADULT DEPENDANT**

R18 540



MAIN MEMBER + ADULT DEPENDANT + CHILD DEPENDANT x 1

R22 620



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

R26 700



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

R30 780

	Main member	Adult dependant	Child dependant x 1	Child dependant x 2	Child dependant x 3	TOTAL FAMILY BENEFIT
М	R10 320					R10 320
M + A	R10 320	R8 220				R18 540
M + A + 1C	R10 320	R8 220	R4 080			R22 620
M + A + 2C	R10 320	R8 220	R4 080	R4 080		R26 700
M + A + 3C	R10 320	R8 220	R4 080	R4 080	R4 080	R30 780

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

- » R5 100 per family per annum
 - Occupational therapy
 - Podiatry
 - Dieticians
 - Psvchology
 - Speech therapy and audiology
 - Physiotherapy, chiropractors & biokinetics



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





APPLIANCES (ORTHOPAEDIC/SURGICAL/MEDICAL)

- R10 200 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 services



INVESTIGATIONS (OUT OF HOSPITAL)

- Limited to R6 150 per family per year
- X-rays and blood tests

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

- » R60 100 overall per family per year The following sub-limits are applicable:
 • Vascular prosthesis R39 500

 - Joint replacements R39 400
 - Functional prosthesis R14 000
- Major musculoskeletal prosthesis R23 700



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

- · 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

R2 419.00



PER ADULT DEPENDANT

R2 274.00



CHILD DEPENDANT

R798.00

CONTRIBUTION: FULL DEAL

SINGLE MEMBER



CONTRIBUTION R2 419.00

DUAL PARENT FAMILY







SINGLE PARENT FAMILY

CONTRIBUTION

CONTRIBUTION





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

012 845 0000 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
- » 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

- 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**

COUNCIL FOR MEDICAL SCHEMES

0861 123 267

E-mail: support@medicalschemes.com complaints@medicalschemes.com Website: www.medicalschemes.com



Find us on Facebook: Umvuzo Health