



myFED  
2021



Fedhealth. We let you be YOU.

A close-up photograph of a woman with voluminous, curly brown hair and black-rimmed glasses. She is laughing heartily, with her mouth wide open, showing her teeth. The background is a solid, muted olive-green color. A white rectangular frame is superimposed over the right side of her face and neck, containing text.

## myFED

The myFED option offers **lower-income, previously uncovered employees** sound medical aid cover that takes care of their health so they can keep taking care of their families. It's starter healthcare that provides great value for money and peace of mind.

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# Starter healthcare that preserves your most valuable asset



Competitively priced for lower income earners



Sound in-hospital, chronic, screening and day-to-day benefits



Don't pay for certain benefits till you need them with our 30-day upgrade policy



We pay more from Risk



Boasting an **84-year track record**, Fedhealth Medical Scheme has a solvency rate of 43.43% (as at 31 December 2019), and a **Global Credit Rating of AA-**, retained for 14 consecutive years.



Our financial health and expertise aside, it's our philosophy of being run **'by members for members'** that helps us really put our members first in everything we do.



Fedhealth **pays more benefits from Risk** than other schemes, to help our members' day-to-day benefits last longer. Some of these valuable benefits include unlimited contracted nominated GP visits, certain oral and injectable female contraceptives and the myFED Baby programme.



Our myFED option is specially designed to take care of formerly uncovered employees' health, so that they can keep working and looking after their families.



# @FedhealthMed at your service

Using the latest technology to our advantage, we employ the following platforms to enable members to manage their Fedhealth membership and interact with us...



### Fedhealth website

The Fedhealth website, [fedhealth.co.za](https://www.fedhealth.co.za), provides easy-to-navigate information on the various Fedhealth options, step-by-step instructions on how to submit claims etc., Scheme news, and also hosts the informative Living Fedhealthy blog - filled with lifestyle and wellness topics.



### Fedhealth Family Room

Fedhealth's online member portal makes members' interaction with the Scheme more hassle-free, informative and rewarding. Here, members can:

- **Manage their membership** by updating contact details, viewing and submitting claims, registering for chronic medication and obtaining hospital authorisations.



### LiveChat and chatbot

LiveChat is a functionality that's available to members via [fedhealth.co.za](https://www.fedhealth.co.za). They can type in their queries and one of our LiveChat agents will assist them online. The Fedhealth chatbot can be used for all members' queries about the MediVault and Wallet, and is also accessed through [fedhealth.co.za](https://www.fedhealth.co.za)



### Fedhealth Member App

Our app has been designed to help simplify your interaction with Fedhealth. Available from the **Google Play Store** and **Apple App store**, it lets you download your e-card, view your option's benefits, and set medication reminders, to name but a few.



### Fedhealth WhatsApp bot

This Fedhealth service is completely private and secure, and easy to use - simply choose from self-service actions like getting your tax certificate or seeing your e-card to share with your GP. To get started, just add the number **060 070 2479** as a contact and then type 'hi' to get the conversation started, from your mobile device.



### Network GP, specialist and hospital locator

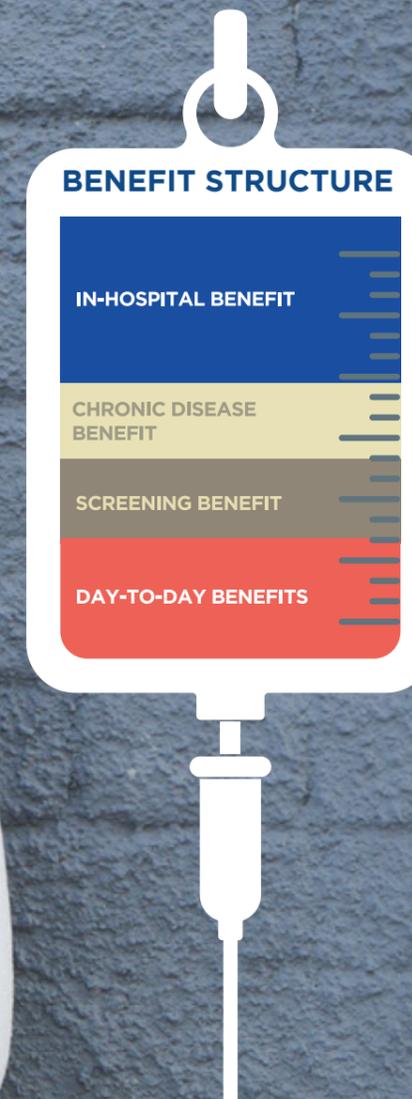
Members may access the provider locator via the Fedhealth website or the **Fedhealth Family Room** to find a GP, specialist or hospital on the Fedhealth network. Go to [www.fedhealth.co.za/provider-locator](https://www.fedhealth.co.za/provider-locator)

# myFED

## Starter healthcare

myFED is an affordable, entry-level medical aid option that looks after the health of previously uncovered, lower-income employees. This option protects the health of members so that they can continue providing for their loved ones and live life to the full. Competitively priced, it's the perfect option to offer employees who've never had medical aid before.

Some of the great benefits include a free flu vaccine per year, unlimited visits at a contracted nominated GP, as well as the free Fedhealth myFED Baby Programme. Please see the following pages for more detail on the myFED option and what it offers members.



On myFED, members enjoy the following benefits:

- **In-hospital benefit** – No overall annual limit for hospitalisation at network hospitals.
- **Chronic disease benefit** – Members are covered for conditions on the Chronic Disease List (CDL). Covered in full up to the Medicine Price List if the member uses medicine on the basic formulary and obtains it from one of our DSPs: Clicks, Dis-Chem, MediRite, Pharmacy Direct, Clicks Direct Medicines and Dis-Chem Direct.
- **Screening benefit** – This benefit pays for lifestyle screenings, wellness screenings like finger prick glucose and total cholesterol, blood pressure, waist circumference and body mass index (BMI), and physical screenings.
- **Day-to-day benefits** – We provide comprehensive day-to-day benefits on myFED, like unlimited contracted nominated GP visits.
- **Additional benefits** – Members can enjoy lots of additional valuable benefits like the myFED Baby Programme, oral and injectable contraceptives (acute formulary) and the free Fedhealth Nurse Line.

# More about Fedhealth's hospital cover

We pay for  
**unlimited**  
private  
hospitalisation!



All our options have an unlimited in-hospital benefit. Members must obtain pre-authorisation for all planned hospital admissions and in the case of an emergency admission, they must obtain authorisation within two working days after going to hospital.

On **myFED** members must use a hospital on the Fedhealth Hospital Network. If they use any other hospital, they will have to pay a co-payment on the hospital account.

The in-hospital benefit covers hospital costs as well as the accounts from doctors, specialists e.g. the anaesthetist and other healthcare providers like the x-ray department.

This benefit also covers selected procedures performed in day wards, day clinics and doctor's rooms. Members must use day clinics on the Fedhealth Day Clinic Network to avoid a co-payment of R2 000.

#### Cover for hospital admissions

We cover the hospital account from the in-hospital benefit. Specialists and GPs who are on the Fedhealth network are covered in full. Specialists and GPs who are not on the Fedhealth network, are covered up to the Fedhealth Rate.

#### Prescribed Minimum Benefits and how Fedhealth covers them

Prescribed Minimum Benefits or PMBs refer to a basic level of cover for a defined set of conditions.

By law, all medical schemes are required to cover the treatment of 270 hospital-based conditions and 27 chronic conditions, i.e the Chronic Disease List (CDL), in full without co-payment or deductibles, as well as any emergency treatment and certain out-of-hospital treatment.

This means that all schemes must provide PMB level of care at cost for these conditions. The Medical Schemes Act 131 of 1998 allows schemes to require members to make use of Designated Service Providers (DSPs) in order for a member to be entitled to funding in full. Schemes may also apply formularies – a list of medicines which should be used to treat PMBs, and managed care protocols – based on evidence-based medicine and cost-effectiveness principles to manage this benefit.

Fedhealth has appointed our network specialists, network GPs, network hospitals and Designated Service Provider pharmacies, Clicks, MediRite group of pharmacies located in Checkers and Shoprite supermarkets, Dis-Chem as well as Pharmacy Direct, Clicks Direct Medicines and Dis-Chem Direct, courier pharmacies, for the provision of PMBs. A 40% co-payment will apply if a DSP is not used. Members must make use of a Fedhealth network specialist and a nominated network GP in order for the cost to be refunded in full.

Should the member not use these DSPs for the treatment of a PMB condition, the Scheme will reimburse treatment at the non-network rate. Co-payments are applicable to the voluntary use of non-DSPs. Referral must be obtained from a Fedhealth Network GP for consultations with Fedhealth Network Specialists. If referral is not obtained, there will be a co-payment on specialist claims paid from the Risk benefit.

**Please note:** Qualification for reimbursement as a PMB is not based solely on the diagnosis (condition), but also on the treatment provided (level of care). This means that although a member's condition may be a PMB condition, the Scheme would only be obliged to fund it in full if the treatment provided was deemed to be PMB level of care.

#### Co-payments on certain procedures

For some treatments and procedures, members must pay an amount out of their own pocket. This is called a co-payment. Co-payments apply to the hospital account and/or certain procedures.

#### Treatment for emergencies

To qualify as an emergency, the condition must be unexpected and require immediate treatment. (This means that if there is no immediate treatment, the condition might result in lasting damage to organs, limbs or other body parts, or even in death). Treatment of an emergency medical condition may take place at any hospital, but once the member's condition has stabilised and they can be safely transferred to a network hospital, the co-payment will apply if they opt not to be transferred.

# Chronic medicine benefit

## Prescribed Minimum Benefit conditions

You have a benefit for the 27 chronic conditions on the Prescribed Minimum Benefit Chronic Disease List (CDL). The benefit covers medication for the list of CDL conditions paid from a formulary and must be obtained from the DSP.

## Chronic Disease Benefit

This benefit covers the conditions on the CDL.

## Chronic Disease List

Conditions on the Chronic Disease List are covered in full, provided members use the Scheme's designated service providers, as well as medicine on the basic formulary. If the DSP or medicine on the formulary are not used, the member will have to pay a 40% co-payment on the cost of the medicine.

## The Medicine Price List

Medication will be covered at the Medicine Price List (MPL) rates up to the limits as specified on the chosen option. MPL is a reference price list that benchmarks each product against generically similar products. It does not restrict the member's choice but limits the amount that the Scheme will refund for each product. The MPL reference price is set at a level to ensure that a number of medicines will be available without any co-payment.

## Chronic conditions on the Chronic Disease List (CDL)

Addison's Disease  
Asthma  
Bipolar Mood Disorder  
Bronchiectasis  
Cardiac Failure  
Cardiomyopathy  
COPD/ Emphysema/ Chronic Bronchitis  
Chronic Renal Disease  
Coronary Artery Disease  
Crohn's Disease  
Diabetes Insipidus  
Diabetes Mellitus Type-1  
Diabetes Mellitus Type-2  
Dysrhythmias  
Epilepsy  
Glaucoma  
Haemophilia  
HIV  
Hyperlipidaemia  
Hypertension  
Hypothyroidism  
Multiple Sclerosis  
Parkinson's Disease  
Rheumatoid Arthritis  
Schizophrenia  
Systemic Lupus Erythematosus  
Ulcerative Colitis

## Obtaining chronic medicine

On **myFED** members must obtain chronic medicine from one of the Scheme's designated service providers. If they don't get their medicine from a DSP, they will have to pay a 40% co-payment. Fedhealth's designated service providers are MediRite, Dis-Chem, Clicks, Pharmacy Direct, Clicks Direct Medicines and Dis-Chem Direct.

Medicine for HIV/ AIDS must be obtained from Pharmacy Direct otherwise a 40% co-payment will apply.

We provide **unlimited** chronic medication cover for PMBs!

# Programmes and wellness initiatives by Fedhealth

These extra benefits are funded from Risk.



## Corporate wellness days

Corporate wellness days provide the opportunity to create awareness, education, prevention, screening and targeted interventions that support positive lifestyle changes. These days are well-received, as it is convenient for Fedhealth members to have these services at their place of work. In addition to the clinical value that can be derived from wellness days, they provide Fedhealth with the opportunity to market the Scheme to clients and potential clients.



## Health Risk Assessments

This benefit aims to identify members who are at risk of developing lifestyle diseases, and either help them prevent the onset through suitable lifestyle interventions, or help them manage their disease with practical advice and utilisation of Scheme benefits. A Health Risk Assessment can be requested at participating pharmacies and BASA registered biokineticists.



## Sisters-on-Site

Fedhealth partnered with SOS Corporate Wellness (Sisters-on-Site) to offer a nursing Sister-on-Site at our members' workplaces. With the employer's influence, we aim to identify and address the organisation's specific areas of concern. By helping members change their behaviour patterns and choose healthier lifestyles, we aim to reduce healthcare expenditure (particularly on day-to-day utilisation), absenteeism, turnover rates, worker's compensation claims and tardiness.



## Weight Management Programme

The Weight Management Programme is an intervention expertly designed for qualifying Fedhealth members with a high BMI and waist circumference. Members participate in a 12-week, biokineticist-led intervention plan that gives them access to a dietician and psychologist with the goal to lose the excess weight and lead healthier, more rewarding lives. Once the programme is completed, ongoing advice and monitoring is available for continued support. Email [weightmanagement@fedhealth.co.za](mailto:weightmanagement@fedhealth.co.za) for more information. This benefit is available every two years.



## GoSmokeFree Smoking Cessation Programme

Fedhealth is encouraging members who smoke to sign up for the GoSmokeFree service that's available at 200 pharmacies countrywide, including Dis-Chem, Clicks, Pick n Pay and independent pharmacies. All smokers have a yearly benefit for the GoSmokeFree programme which is payable from risk benefits. The service comprises a pre-quit assessment and support sessions and features an individual plan to help with smoking cessation. Visit [gosmokefree.co.za](http://gosmokefree.co.za) to find out more about this benefit.



## Aid for AIDS (HIV Management)

Fedhealth offers the Aid for AIDS (AfA) programme to help members who are HIV-positive manage their condition. The benefits of being on the programme (over and above the payment of the necessary medicine and pathology claims), include clinical and emotional support with the utmost confidentiality.

Medicine for HIV/ AIDS must be obtained from Pharmacy Direct otherwise a 40% co-payment will apply.



## Paed IQ

Paed IQ is a 24/7 telephone advisory service available to all parents with children under the age of 14 years. This service aims to support and advise parents on any healthcare related childcare issues. Call **0860 444 128** to access this great service.



## Diabetes Care

We provide members with diabetes access to a comprehensive programme that is tailored to their needs and other chronic conditions they might have. This includes continued access to a treating doctor, authorised chronic medication, blood and laboratory tests, a Health Coach, online tools and information to empower the member.

Members can call **0860 002 153** or email [diabeticcare@fedhealth.co.za](mailto:diabeticcare@fedhealth.co.za)

# A proactive stance on health: screening benefits

Our myFED option has a benefit for annual flu vaccinations, an annual HIV test and Health Risk Assessments, which include wellness and preventative screenings.

## Screening benefit

This benefit covers the tests and assessments done to help members either prevent illness or address specific conditions they may already have.

Men's Health		
Prostate Specific Antigen (PSA)	Men; ages 45 to 69	1 every year
General		
Flu vaccination	All lives	1 every year
HIV finger prick test	All lives	1 every year
Health risk assessments		
Wellness screening (BMI, blood pressure, finger prick cholesterol & glucose tests)	All lives	1 every year
Preventative screening (waist-to-hip ratio, body fat %, flexibility, posture & fitness)	All lives	1 every year

# What about cancer?

## Oncology Disease Management

Fedhealth supports cancer patients in their time of need, and diagnosed members are encouraged to register on the Fedhealth Oncology Programme by calling **0860 100 572**. This ensures that those with cancer can get access to medication that will help them to remain economically active, with all the support they require to deal with this stressful diagnosis.

We require a clinical summary of each member's case: this must contain the history, ICD-10 codes, the clinical findings of the doctor, as well as the test results confirming the cancer and the specific type of cancer. The proposed treatment plan must be submitted so that the oncology team can approve the appropriate therapy. Our caring agents will guide the member through the process.

Members can access the oncology benefit by obtaining pre-authorization from a staff member within the Oncology Disease Management team. The team comprises a number of highly skilled healthcare professionals who work in conjunction with the treating doctor to ensure that treatment provided is both clinically appropriate and cost-effective. A set of cancer guidelines and protocols are used during the pre-authorization process. These guidelines are continually updated as new products are launched and new treatment protocols established. In addition, our team is supported by a number of oncologists and haematologists from the private, public and academic sectors.

On **myFED**, oncology is covered unlimited at PMB level of care at the designated service provider, ICON, subject to Level 1 treatment protocols. A 40% co-payment applies where a DSP provider is not used.

## Independent Clinical Oncology Network (ICON)

The Scheme has contracted with ICON for the provision of active oncology treatment. ICON is a network of oncologists that includes 75% of all practicing oncologists in South Africa. To find an ICON network specialist, call **0860 002 153**.

## Chemotherapy and associated medicine

Chemotherapy and medicine directly associated with the treatment of cancer will be paid from the oncology benefit, provided a valid authorisation has been obtained. The treating doctor must submit a treatment plan to Oncology Disease Management, [cancerinfo@fedhealth.co.za](mailto:cancerinfo@fedhealth.co.za). Once treatment has been authorised, the member and doctor will receive an authorisation letter. Treatment for conditions not directly related to the treatment of the cancer (e.g. depression) as well as treatment for the long-term conditions that may develop as the result of chemotherapy or radiotherapy, will be funded from an alternative benefit (i.e. the Chronic Disease Benefit or the day-to-day benefit).

Chemotherapy, as well as medicine and consumables directly associated with the treatment of cancer, should be obtained from the Oncology Pharmacy Network and in accordance to the oncology Preferred Product List (PPL) – non-use of these will result in a 25% co-payment.

## Radiotherapy

Radiotherapy will be paid from the oncology benefit, provided a valid authorisation has been obtained. The treating doctor must submit a treatment plan to Oncology Disease Management. Once treatment has been authorised, the member and doctor will be sent an authorisation letter.

## Specialised medication

There is no specialised medication benefit on this option.

## Consultations and visits

Oncologist consultations and hospital visits are paid from the oncology benefit while the member has either an active chemotherapy or radiotherapy authorisation. Hospital visits are pre-authorized at the same time as the authorisation for chemotherapy or radiation treatment. You will receive an authorisation letter detailing the number of visits authorised and the period for which these visits are authorised.

## Pathology

Oncology-related pathology claims are paid from the oncology benefit while the member is receiving treatment (either chemotherapy or radiotherapy), provided that the member has a valid authorisation. A list of appropriate pathology codes has been defined and claims for these services are automatically paid from the oncology benefit (i.e. a separate pre-authorization is not required).

## Radiology

### General radiology

General oncology-related radiology claims are paid from the oncology benefit while the member is receiving treatment (either chemotherapy or radiotherapy), provided that the member has a valid authorisation. A list of appropriate radiology codes has been defined and claims for these services are automatically paid from the oncology benefit (i.e. a separate pre-authorization is not required).

## Specialised radiology

Specialised radiology (e.g. CT scans, MRIs, angiography, radioisotopes) requires a separate pre-authorization. These pre-authorisations must be obtained from the Authorisation Centre. Specialised radiology is paid from Risk. There is no benefit for PET Scans on this option.

## Surgery and hospitalisation

Claims for surgery and hospitalisation will be paid from the in-hospital benefit, provided that the member obtains a valid authorisation from the Authorisation Centre.

## Stoma therapy

Stoma therapy will be paid from Risk. Pre-authorization is not required.

## Private nursing

Private nursing will be paid at cost at PMB level of care.

## Post-active treatment

Post-active refers to the time when the member actually had last active treatment (e.g., hormone therapy, chemotherapy or radiotherapy). "For life" means that the member will remain on the oncology programme as long as the cancer is in remission. Whilst in remission, a list of appropriate consultation, radiology and pathology codes has been defined and claims for these services are automatically paid for life from the oncology benefit. Should the condition regress, the active treatment benefit will be reinstated upon submission of a new treatment plan.

# These benefits show we really care

Giving our members  
more value and support  
when they need it.

## 24-hour Fedhealth Nurse Line

Our professional nurses are always on the other end of the line to provide advice on issues like medical emergencies, symptoms, medication side-effects, stress management and teenage support.

## Paed-IQ

A South African based medical information company that provides information and services to parents and caregivers that enhance the level of care they can offer their children.

## myFED Baby Programme

Free baby goodies, support and advice for all parents-to-be. Pregnant members or dependants receive a Fedhealth baby bag filled with baby product samples, discount vouchers and a baby handbook. They also have access to professional advice when they need it.

Following these telephonic sessions, we can also put the member in touch with a psychologist for one-on-one sessions at a reduced rate, should they need it (These one-on-one sessions will be for the member's own account). Plus, we'll send the member useful communications about financial, legal and trauma advice. This life coaching/ lifestyle wellness service is run by a care centre and is available, night or day, via the telephone, email, SMS and a call-back facility.

## Emergency transport/ response

Through our partner Europ Assistance, we provide all members with emergency transport.

## MediTaxi

MediTaxi is a medical taxi service available to Fedhealth members who've had hospital authorisations in Cape Town, Johannesburg, Pretoria and Durban. Members can access the 24/7 MediTaxi benefit to take them to follow-up doctor's appointments, if they've

undergone an authorised operation or medical treatment that prevents them from driving. Limited to two return trips per member/ beneficiary per annum.

## SOS Call Me

Fedhealth's user-friendly call back service free to all Fedhealth members and their dependants. Members can select three options on the service: 1. Emergency Medical Services (EMS), 2. Nurse Line and 3. MediTaxi.

## Child rates for financially dependent children up to the age of 27

Fedhealth charges child rates for financially dependent children up to the age of 27. This means that student dependants pay rates applicable to children, as long as they're unmarried and not earning more than the maximum social pension.

## Only pay for three children

The Scheme only charges for three child dependants, the fourth and subsequent children are covered for free.

# myFED additional benefits



### myFED Baby Programme

We offer a free maternity programme for pregnant members and beneficiaries offering support, advice and a handy baby bag.



### Paed-IQ

Paed-IQ is a telephonic paediatric advice line for members with children up to the age of fourteen.



### Postnatal midwifery benefit

We give members four consultations with a midwife in- and out-of-hospital per pregnancy.



### Infant hearing screening benefit

We provide newborns with one test with an audiologist up to the Fedhealth Rate.



### Take-home medicine benefit

We cover take-home medicine following a hospital visit up to the MPL. This is limited to seven days' medication per hospital event.



### Trauma treatment at a casualty ward

We cover trauma treatment at a casualty ward whether the member is admitted or not, unlimited up to the Fedhealth Rate. A co-payment of R630 per visit for non-PMBs applies.



### Female contraception benefit

Certain oral and injectable contraceptives for female members are paid from Risk.



### Fedhealth Nurse Line

Members can access our 24-hour toll-free line manned by professional nurses for their medical and related queries.



### Emergency transport/ response

We provide emergency transport through Europ Assistance to assist our members in an emergency situation.



### Comprehensive managed care programmes

We offer various programmes for members with specific healthcare needs.



### MediTaxi

A transport service for members who need follow-up medical visits following a hospital authorisation.



### SOS Call Me

A USSD call-back service that enables Fedhealth members to access Emergency Medical Services (EMS), the Fedhealth Nurse Line or MediTaxi.



### Child rates for financially dependent children up to the age of 27

Provided they're unmarried and don't earn more than the maximum social pension.



### Only pay for three children

Fedhealth covers fourth and subsequent children for free.

# myFED in-hospital benefit

## In-hospital benefit

This benefit covers all treatments and procedures that have to be done in a hospital and that are covered by the myFED option.

Benefit	All limits are per family per year unless otherwise specified
<b>Overall annual limit (OAL)</b>	No overall annual limit
<b>Hospitalisation costs: accommodation in a general ward, high care ward and intensive care unit, theatre fees, medicine, material and hospital apparatus.</b>	Unlimited at Fedhealth Network Hospitals and Day Clinics. R12 500 co-payment on voluntary use of non-network hospitals and R2 000 co-payment on voluntary use of non-network Day Clinics will apply
<b>Healthcare professional tariff (HPT)</b>	Unlimited
<b>Fedhealth Network GPs and Specialists</b>	Covered in full
<b>Non-network GPs and Specialists</b>	Covered up to the Fedhealth Rate. Limited to R2 400 per beneficiary per year
<b>Other healthcare professionals</b>	Up to the Fedhealth Rate
<b>Prescribed Minimum Benefits (PMB)</b>	To have the treatment for PMB conditions covered in full, you will have to use Fedhealth Network GPs and Specialists. Should you choose not to make use of network providers, the Scheme will only refund treatment up to the Fedhealth Rate for non-network GPs and specialists. You will have a shortfall should the healthcare professional charge more
<b>Alternatives to hospitalisation: sub-acute facilities and rehabilitation facilities. Does not include Hospice</b>	Unlimited at cost at PMB level of care
<b>Ambulance services</b>	Unlimited with Europ Assistance
<b>Appliances, external accessories, orthotics</b>	Unlimited at cost at PMB level of care
<b>Blood, blood equivalents and blood products</b>	Unlimited
<b>Immune deficiency related to HIV infection</b>	Unlimited at cost at PMB level of care
Hospitalisation	
Related pathology	
Anti-retroviral & related medication	
<b>Maternity</b>	Unlimited at cost at PMB level of care. Elective Caesarean sections subject to a R12 500 co-payment

# myFED in-hospital benefit

Benefit	All limits are per family per year unless otherwise specified
<b>Oncology:</b> oncologists, haematologists and credentialed medical practitioners, consultations, visits, treatment and materials used in radiotherapy and chemotherapy	Covered up to PMB level of care at designated service provider* and paid from Level 1 treatment protocols. A 40% co-payment applies where a DSP provider is not used  Chemotherapy, as well as medicine and consumables directly associated with the treatment of cancer, should be obtained from the Oncology Pharmacy Network and in accordance to the oncology Preferred Product List (PPL) - non-use of these will result in a 25% co-payment.
<b>Organ, tissue and haemopoietic stem cell (bone marrow) transplantation and immuno-suppressive medication:</b> Haemopoietic stem cell (bone marrow) transplantation, Immuno-suppressive medication, post transplantation biopsies and scans, radiology and pathology	Unlimited at cost at PMB level of care
<b>Pathology and medical technology</b>	Unlimited
<b>Physiotherapy</b>	Unlimited at cost at PMB level of care
<b>Prostheses and devices</b>	
Internal and external	Unlimited at cost at PMB level of care
<b>Psychiatric services</b>	R9 400
<b>Radiology</b>	
General	Unlimited
Specialised radiology	R14 470 per beneficiary, subject to an overall limit of R29 200 per family per year
<b>Renal dialysis (chronic):</b> Haemodialysis and peritoneal dialysis, radiology and pathology. Consultations, visits, all services, materials and medicines associated with the cost of renal dialysis	Unlimited at cost at PMB level of care at designated service provider. A 40% co-payment applies where a DSP provider is not used
<b>Take-home medicines</b>	Up to the MPL. Limited to 7 days' medication per hospital event

\*Designated Service Provider (DSP) is ICON - Independent Clinical Oncology Network

MPL - Medicine Price List

FR - Fedhealth Rate

# myFED chronic disease benefit

## Chronic disease benefit

Cover for conditions that require long-term medication or can be life-threatening.

Limit	Unlimited cover for conditions on the Chronic Disease List (CDL)
<b>Formulary</b>	Basic formulary
<b>Designated Service Provider</b>	MediRite, Clicks, Dis-Chem, Pharmacy Direct, Dis-Chem Direct and Clicks Direct Medicines
<b>HIV/ AIDS Medicine benefit</b>	Medicine for HIV/ AIDS must be obtained from Pharmacy Direct otherwise a 40% co-payment will apply.



# myFED day-to-day benefits

## Day-to-day benefits

An out-of-hospital benefit funded by the Scheme to give members more value.

Benefit	Limit
<b>General Practitioners</b>	No overall annual limit
<b>Contracted</b>	Unlimited at nominated myFED contracted GP, subject to protocols and utilisation monitoring after 10 visits per beneficiary per year. Each beneficiary can nominate up to 2 myFED contracted GPs. Limited to two mental health consultations per beneficiary per year. Up to 2 myFED contracted GP consultations per beneficiary for non-nominated GPs allowed per year (referred to as out-of-area)
<b>Not contracted</b>	Up to 2 GP consultations per beneficiary for non-contracted GPs allowed per year (referred to as out-of-area)
<b>Specialists</b>	
<b>Fedhealth Network Specialists</b>	2 specialist consultations up to R1 900 per family per year. Must be referred by contracted GP. If a referral is not obtained, a 40% co-payment will apply
<b>Non-network Specialists</b>	No benefit
<b>Dentistry basic:</b> removal of teeth and roots and suturing of traumatic wounds. Oral medical procedures: diagnosis and treatment of oral and associated conditions, plastic dentures and dental technician's fees for all such dentistry	Subject to a contracted list of dentists and limited to a list of approved procedures, dental tariff codes and protocols. Plastic dentures limited to one set per beneficiary every two years
<b>Female contraception</b>	Oral and injectable contraceptives paid from acute formulary
<b>Mental health</b>	See GP benefit. Limited to 2 mental health consultations per beneficiary at a nominated myFED contracted GP
<b>Optometry</b>	Paid from ISO Leso Network Optometrists. Frame to the value of R220 or R220 off any other frame. 1 pair of single vision clear CR39 lenses or 1 pair of bifocal clear CR39 lenses. 1 comprehensive consultation. This benefit is available in a two-year benefit cycle per beneficiary
<b>Over-the-counter medication</b>	No benefit
<b>Maternity</b>	Ultrasound as per radiology benefit
<b>Pathology</b>	Unlimited subject to basic protocols and limited list of tests and procedures. Must be referred by contracted medical practitioner
<b>Prescribed medication</b>	
Dispensing GP	Unlimited at dispensing contracted GP
Non-dispensing medical practitioner (e.g. Fedhealth Network Specialists, GPs and Dentists)	Unlimited, subject to acute formulary for all medical practitioners
<b>Physiotherapy</b>	No benefit
<b>Radiology</b>	
General	Unlimited, subject to basic protocols and a limited list of tests and procedures. Must be referred by contracted medical practitioner
Specialised	No benefit
<b>Trauma treatment at a casualty ward</b>	Unlimited up to the Fedhealth Rate. A co-payment of R630 per visit for non-PMBs applies.

# myFED procedure codes

All Fedhealth members on the myFED option must use healthcare professionals who are part of the myFED network and any additional treatment required must be referred by a myFED network doctor. The following treatments/ procedures are covered in full on the myFED option and the healthcare professional must ensure that the correct tariff code is used on all claims in order to be reimbursed.

## List of procedures included in standard fixed fee consultation rate

TARIFF CODE	DESCRIPTION
0201	Cost of material in treatment
0316-0317	Fine needle aspiration/ Aspiration of cyst or tumour
1136	Nebulisation (in rooms)
1186-1192	Flow volume test
3304	All other physical treatments

## Fixed GP codes payable

TARIFF CODE	DESCRIPTION
0190-0192	GP visit (dispensing)
0190-0192	GP visit (non-dispensing)
0300	Stitching of wound (additional code for setting sterile tray)
0307 / 0308	Excision and repair
0255	Drainage of abscess and avulsion of nail
0259	Removal of foreign body
0887	Limb cast
0202	Setting of sterile tray
0210	Collecting blood specimen
0206-0207	Intravenous treatment
0222-0223	Intralesional injection into areas of pathology
0233-0237	Biopsy
0241-0243	Treatment of benign skin lesion by chemo-cryotherapy
0244	Repair of nail bed
0245-0246	Removal of benign lesion by curetting
1037	Diathermy to nose or pharynx
1228-1234	ECG/ Multi-stage treadmill test
2129-2131	Electrodesiccation
2271-2272	Removal of tag or polyp or benign lesions
2316-2318	Destruction of condylomata
2399-2404	Biopsy/ Wedge biopsy
3171	Excision of Meibomian cyst
3287	Spinal joint and ligament injection

Dental codes payable (Dentists and Dental Therapists)		
CODE	CODE DESCRIPTION	LIMITATIONS
8101	Consultation	2 per beneficiary per year
8104	Examination for a specific problem not requiring full mouth examination	1 per beneficiary per year
8107/8112	Intra oral radiographs, per film	Maximum of two per beneficiary per year
8159	Scaling and polishing	2 per beneficiary per year
8161	Topical application of fluoride	Between the ages of 3-12 years. 2 per beneficiary per year
8163	Fissure sealant, per tooth	Patients younger than 14; maximum of 8 per year; 2 per quadrant
8341	Amalgam one surface	Any four amalgam fillings per beneficiary per year
8342	Amalgam two surfaces	
8343	Amalgam three surfaces	
8344	Amalgam four and more surfaces	
8351	Resin restoration, one surface anterior	Any four resin fillings per beneficiary per year (anterior)
8352	Resin restoration, two surface anterior	
8353	Resin restoration, three surface anterior	
8354	Resin restoration, four and more surfaces	
8367	Resin restoration, one surface posterior	
8368	Resin restoration, two surface posterior	
8369	Resin restoration, three surface posterior	Any four resin fillings per beneficiary per year (posterior)
8370	Resin restoration, four and more surfaces	
8307	Amputation of pulp (pulpotomy)	Only on primary teeth
8132	Root canal therapy - gross pulpal debridement	1 per beneficiary per year
8201	Extraction, single tooth. Code 8201 is charged for the first extraction in a quadrant	Any 4 non-surgical extractions per beneficiary per year
8202	Extraction, each add tooth. Code 8202 is charged for each additional extraction in the same quadrant	
8937	Surgical removal of tooth	Quantity limit of 4, restricted to posterior permanent teeth
8935	Treatment of septic socket	1 per beneficiary per year
8109	Infection control / barrier techniques. Code 8109 includes the provision by the dentist of new rubber gloves, masks, etc for each patient	4 per year, 2 per visit
8110	Sterilised instrumentation	2 per year, 1 per visit
8145	Local anaesthetic	2 per year, 1 per visit
8231	Complete dentures - maxillary and mandibular	1 (one) set of dentures allowed per beneficiary per 24 months ONLY members and beneficiaries over the age of 21 years No metal base to complete or partial dentures allowed
8232	Complete dentures - maxillary or mandibular	
8233	Partial denture (resin base) - one tooth	
8234	Partial denture (resin base) - two teeth	
8235	Partial denture (resin base) - three teeth	
8236	Partial denture (resin base) - four teeth	
8237	Partial denture (resin base) - five teeth	
8238	Partial denture (resin base) - six teeth	
8239	Partial denture (resin base) - seven teeth	
8240	Partial denture (resin base) - eight teeth	
8241	Partial denture (resin base) - nine teeth and more	
8259	Rebase complete or partial dentures (Lab)	
8269	Repair denture	
8263	Reline complete or partial dentures (chair side)	
8271	Add tooth to existing partial dentures	
8273	Impression to repair / addition	
8140	Fee for treatment at a venue	Only if clinically indicated & authorised

Radiology codes payable	
TARIFF CODE	DESCRIPTION
<b>Skull and Brain</b>	
10100	X-ray of the skull
<b>Facial bones and nasal bones</b>	
11100	X-ray of the facial bones
11120	X-ray of the nasal bones
<b>Orbits, lachrymal glands and tear ducts</b>	
12100	X-ray orbits
<b>Paranasal sinuses</b>	
13100	X-ray of the paranasal sinuses, single view
13110	X-ray of the paranasal sinuses, two or more views
<b>Mandible, teeth and maxilla</b>	
14100	X-ray of the mandible
14130	X-ray of the teeth single quadrant
14140	X-ray of the teeth more than one quadrant
14150	X-ray of the teeth full mouth
15100	X-ray tempero-mandibular joint, left
15110	X-ray tempero-mandibular joint, right
16100	X-ray of the mastoids, unilateral
16110	X-ray of the mastoids, bilateral
<b>Thorax</b>	
30100	X-ray of the chest, single view
30110	X-ray of the chest two views, PA and lateral
30150	X-ray of the ribs
<b>Abdomen and Pelvis</b>	
40100	X-ray of the abdomen
40105	X-ray of the abdomen supine and erect, or decubitus
40110	X-ray of the abdomen multiple views including chest Skeleton: Spinal column - per region, e.g. cervical, sacral, lumbar coccygeal, one region thoracic
50100	X-ray of the spine scoliosis view AP only
<b>Cervical</b>	
51110	X-ray of the cervical spine, one or two views
<b>Thoracic</b>	
52100	X-ray of the thoracic spine, one or two views
<b>Lumbar</b>	
53110	X-ray of the lumbar spine, one or two views
54100	X-ray of the sacrum and coccyx
54110	X-ray of the sacro-iliac joints
<b>Pelvis</b>	
55100	X-ray of the pelvis
56120	X-ray pelvis and hips
<b>Hips</b>	
56100	X-ray of the left hip
56110	X-ray of the right hip
<b>Shoulder</b>	
61100	X-ray of the left clavicle
61105	X-ray of the right clavicle
61110	X-ray of the left scapula
61115	X-ray of the right scapula
61120	X-ray of the left acromio-clavicular joint
61125	X-ray of the right acromio-clavicular joint
61130	X-ray of the left shoulder
61135	X-ray of the right shoulder

Radiology codes payable (continued)	
TARIFF CODE	DESCRIPTION
<b>Humerus</b>	
62100	X-ray of the left humerus
62105	X-ray of the right humerus
<b>Elbow</b>	
63100	X-ray of the left elbow
63105	X-ray of the right elbow
<b>Forearm</b>	
64100	X-ray of the left forearm
64105	X-ray of the right forearm
<b>Hand and Wrist</b>	
65100	X-ray of the left hand
65105	X-ray of the right hand
65120	X-ray of a finger
65130	X-ray of the left wrist
65135	X-ray of the right wrist
65140	X-ray of the left scaphoid
65145	X-ray of the right scaphoid
<b>Lower Leg</b>	
73100	X-ray of the left lower leg
73105	X-ray of the right lower leg
<b>Ankle and Foot</b>	
74100	X-ray of the left ankle
74105	X-ray of the right ankle
74120	X-ray of the left foot
74125	X-ray of the right foot
74130	X-ray of the left calcaneus
74135	X-ray of the right calcaneus
74140	X-ray of both feet - standing - single view
74145	X-ray of a toe
<b>Femur</b>	
71100	X-ray of the left femur
71105	X-ray of the right femur
72100	X-ray of the left knee one or two views
72105	X-ray of the right knee one or two views
72120	X-ray of the left knee including patella
72125	X-ray of the right knee including patella
72140	X-ray of left patella
72145	X-ray of right patella
72150	X-ray both knees standing - single view
74150	X-ray of the sesamoid bones one or both sides
<b>Ultrasound Abdomen and Pelvis</b>	
41200	Ultrasound study of the upper abdomen
40210	Ultrasound study of the whole abdomen including the pelvis
43200	Ultrasound study of the pelvis trans abdominal
43250	Ultrasound study of the pregnant uterus, first trimester
43270	Ultrasound study of the pregnant uterus, third trimester, first visit
43273	Ultrasound study of the pregnant uterus, third trimester, follow-up visit

Pathology codes payable	
TARIFF CODE	DESCRIPTION
<b>CHEMISTRY</b>	
<b>Cardia/ Muscle</b>	
4152	CK-MB: Mass determination: Quantitative (Automated)
4161	Troponin isoforms: Each
<b>Diabetes</b>	
4057	Glucose: Quantitative
4064	HbA1C
<b>Inflammation/ Immune</b>	
3947	C-reactive protein
<b>Lipids</b>	
4027	Cholesterol total
4026	LDL cholesterol
4028	HDL cholesterol
4147	Triglyceride
4132	Creatinine Kinase (CK)
<b>Liver/ Pancreas</b>	
3999	Albumin
4001	Alkaline phosphatase
4006	Amylase
4009	Bilirubin: Total
4010	Bilirubin: Conjugated
4117	Protein: Total
4130	Aspartate aminotransferase (AST)
4131	Alanine aminotransferase (ALT)
4133	Lactate dehydrogenase (LD)
4134	Gamma glutamyl transferase (GGT)
<b>Renal/ Electrolytes / Bone</b>	
4017	Calcium: Spectrophotometric
4032	Creatinine
4086	Lactate
4094	Magnesium: Spectrophotometric
4109	Phosphate
4113	Potassium
4114	Sodium
4155	Uric acid
4151	Urea
<b>HAEMATOLOGY</b>	
3709	Antiglobulin test (Coombs' or trypsinized red cells)
3716	Mean cell volume
3739	Erythrocyte count
3743	Erythrocyte sedimentation rate
3755	Full blood count (including items 3739, 3762, 3783, 3785, 3791)
3762	Haemoglobin estimation
3764	Grouping: A B and O antigens
3765	Grouping: Rh antigen
3783	Leucocyte differential count
3785	Leucocyte total count
3791	Packed cell volume: haematocrit
3797	Platelet count
3805	Prothrombin index
3809	Reticulocyte count
3865	Parasites in blood smear
4071	Iron

Pathology codes payable (continued)	
TARIFF CODE	DESCRIPTION
<b>HAEMATOLOGY (CONTINUED)</b>	
4144	Transferrin
4491	Vitamin B12
4528	Ferritin
4533	Folic acid
<b>ENDOCRINE - REPRODUCTIVE</b>	
4450	HCG: Monoclonal immunological: Qualitative
4537	Prolactin
<b>Endocrine - Thyroid</b>	
4482	Free thyroxin (FT4)
4507	Thyrotropin (TSH)
<b>Other Endocrine</b>	
4519	Prostate specific antigen
<b>SEROLOGY</b>	
<b>Auto immune</b>	
3934	Auto antibodies by labelled antibodies: FOR ANF ONLY
3939	Agglutination test per antigen
4155	Uric acid
4182	Quantitative protein estimation: Nephelometer or Turbidometric method: FOR RHEUMATOID FACTOR ONLY
<b>Hepatitis tests</b>	
4531	Hepatitis: Per antigen or antibody
4531	Acute Hepatitis A (IgM)
4531	Chronic Hepatitis A (IgG)
4531	Acute Hepatitis B (BsAG)
4531	Hepatitis B: carrier/ immunity (BsAB)
<b>HIV tests</b>	
3816	T and B-cells EAC markers (limited to ONE marker only for CD4/8 counts)
3932	Antibodies to human immunodeficiency virus (HIV): ELISA
3974	Qualitative PCR (only for children < age 6 months)
4429	Quantitative PCR (DNA/RNA)
<b>CYTOLOGY</b>	
4566	Vaginal or cervical smears, each
<b>HISTOLOGY</b>	
4567	Histology per sample
<b>G.MISCELLANEOUS</b>	
4352	Faecal occult blood test (FOB)
<b>MICROBIOLOGY</b>	
<b>MCS</b>	
3909	Anaerobe culture: Limited procedure
3901	Fungal culture
3918	Mycoplasma culture: Comprehensive
4401	Cell count
4188	Urine dipstick, per stick (irrespective of the number of tests on stick)
3928	Antimicrobial substances
3893	Bacteriological culture: Miscellaneous
3867	Miscellaneous (body fluids, urine, exudate, fungi, puss, scrapings, etc.)
3922	Viable cell count
3879	Campylobacter in stool: Fastidious culture
3895	Bacteriological culture: Fastidious organisms
3928	Antimicrobial substances
3887	Antibiotic susceptibility test: Per organism
3924	Biochemical identification of bacterium: Extended
3869	Faeces (including parasites)

Pathology codes payable (continued)	
TARIFF CODE	DESCRIPTION
<b>MCS (continued)</b>	
3868	Fungus identification
3881	Mycobacteria
3901	Fungal culture
3868	Fungus identification
<b>AFB fluorochrome auramine (ZN) only</b>	
3885	Cytochemical stain
3881	Antigen detection with monoclonal antibodies
<b>TB culture</b>	
3881	Antigen detection with monoclonal antibodies
4433	Bacteriological DNA identification (LCR)
3916	Radiometric tuberculosis culture
3867	Miscellaneous (body fluids, urine, exudate, fungi, puss, scrapings, etc.)
3895	Bacteriological culture: Fastidious organisms
<b>TB sensitivity</b>	
3887	Antibiotic susceptibility test: Per organism
3974	Polymerase chain reaction
<b>Parasites</b>	
3869	Faeces (including parasites)
3883	Concentration techniques for parasites
3865	Parasites in blood smear
<b>Bilharzia micro</b>	
3980	Bilharzia Ag Serum/Urine
3867	Miscellaneous (body fluids, urine, exudate, fungi, puss, scrapings, etc.)
3946	IgM: Specific antibody titer: ELISA/EMIT: Per Ag
3883	Concentration techniques for parasites

## Optometry

### Use the ISO LESO network

Frame to the value of R220 or R220 off any other frame. 1 pair of single vision clear CR39 lenses or 1 pair of bifocal clear CR39 lenses. 1 comprehensive consultation. This benefit is available per beneficiary in a 2-year benefit cycle.

## Contributions

Highest household income per month	Member	Adult Dependant	Child Dependant*
1 - 6 251	R1 128	R985	R543
6 252 - 10 219	R1 430	R1 242	R699
10 220 - 12 622	R2 005	R1 750	R769
12 623 - 14 426	R2 547	R2 100	R996
> 14 427+	R3 455	R3 147	R1 317

\*Up to a maximum of three children

# myFED network hospital lists

Please note that this list may change/expand during the year. Please contact the [Fedhealth Customer Contact Centre on 0860 002 153](#) or refer to the website for the latest myFED Network Hospital list.

HOSPITAL NAME	PROVINCE	TOWN
Cuyler Hospital	Eastern Cape	Uitenhage
Greenacres Hospital	Eastern Cape	Greenacres
Life Beacon Bay Hospital	Eastern Cape	East London
Life St James Hospital	Eastern Cape	East London
Matatiele Private Hospital	Eastern Cape	Matatiele
Mthatha Private Hospital	Eastern Cape	Mthatha
Nurture Queenstown	Eastern Cape	Queenstown
Bram Fischer International Airport Hospital	Free State	Bloemfontein
Cairnhall Hospital	Free State	Universitas
Emoyamed Hospital	Free State	Bloemfontein
Harrismith Private Hospital	Free State	Harrismith
Kroon Hospital	Free State	Kroonstad
Pelonomi Private Hospital	Free State	Heidedal
RH Matjhabeng Private Hospital	Free State	Welkom
Riemland Clinic	Free State	Frankfort
St Helena Hospital	Free State	Welkom
Universitas Private Hospital	Free State	Universitas
Vaalpark Hospital	Free State	Sasolburg
Akasia Hospital	Gauteng	Akasia
Arwyp Medical Centre	Gauteng	Kempton Park
Botshilu Private Hospital	Gauteng	Soshanguve
Bougainville Hospital	Gauteng	Daspoort
Clinix Botshelong - Empilweni Private Hospital	Gauteng	Vosloorus
Clinix Dr SK Matseke Memorial Hospital	Gauteng	Diepkloof
Clinix Naledi - Nkanyezi Private Hospital	Gauteng	Sebokeng
Clinix Solomon Stix Morewa Memorial Hospital	Gauteng	Selby Park
Clinix Tshepo - Themba Private Hospital	Gauteng	Dobsonville
Clinton Hospital	Gauteng	Alberton
Cormed Clinic	Gauteng	Vanderbijlpark
Fochville Hospital	Gauteng	Fochville
Garden City Hospital	Gauteng	Mayfair West
Jakaranda Hospital	Gauteng	Muckleneuk
Krugersdorp Hospital	Gauteng	Krugersdorp
Lakeview Hospital	Gauteng	Benoni
Lenmed Health Ahmed Kathrada Private Hospital	Gauteng	Lenasia

# myFED network hospital lists

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HOSPITAL NAME	PROVINCE	TOWN
Lenmed Health Daxina Private Hospital	Gauteng	Lenasia South
Lenmed Health Randfontein Private Hospital	Gauteng	Randfontein
Lenmed Health Zamokuhle Private Hospital	Gauteng	Tembisa
Linksfield Hospital	Gauteng	Linksfield West
Linkwood Hospital	Gauteng	Linksfield West
Linmed Hospital	Gauteng	Benoni
Louis Pasteur Private Hospital	Gauteng	Pretoria
Midvaal Private Hospital	Gauteng	Vereeniging
Milpark Hospital	Gauteng	Parktown West
Montana Hospital	Gauteng	Montana Park
Moot Algemene Hospital	Gauteng	Rietfontein
Mulbarton Hospital	Gauteng	Mulbarton
N17 Hospital	Gauteng	Springs
Olivedale Hospital	Gauteng	Olivedale
Park Lane Hospital	Gauteng	Parktown
Pinehaven Hospital	Gauteng	Krugersdorp
Pretoria East Hospital	Gauteng	Moreleta Park
Rosebank Hospital	Gauteng	Rosebank
Sunward Park Hospital	Gauteng	Boksburg
Union Hospital	Gauteng	Alberton
Unitas Hospital	Gauteng	Centurion
The Fountain Private Hospital	Gauteng	Carletonville
Waterfall City Hospital	Gauteng	Midrand
Zuid-Afrikaans Hospital	Gauteng	Muckleneuk
Abaqulusi Private Hospital	KwaZulu-Natal	Vryheid
Ahmed Al-Kadi Private Hospital	KwaZulu-Natal	Mayville
Alberlito Hospital	KwaZulu-Natal	Ballito
Ethekwini Hospital And Heart Centre	KwaZulu-Natal	Newlands East
Hibiscus Hospital	KwaZulu-Natal	Port Shepstone
Hillcrest Private Hospital	KwaZulu-Natal	Hillcrest
Kingsway Hospital	KwaZulu-Natal	Amanzimtoti
Kokstad Private Hospital	KwaZulu-Natal	Kokstad
Kwadukuza Private Hospital	KwaZulu-Natal	Stanger
Lenmed Health La Verna Private Hospital	KwaZulu-Natal	Ladysmith
Lenmed Health Shifa Private Hospital	KwaZulu-Natal	Sydenham

# myFED network hospital lists

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HOSPITAL NAME	PROVINCE	TOWN
Margate Hospital	KwaZulu-Natal	Margate
Parklands Hospital	KwaZulu-Natal	Overport
St Anne's Hospital	KwaZulu-Natal	Pietermaritzburg
St Augustine's Hospital	KwaZulu-Natal	Berea
The Bay Hospital	KwaZulu-Natal	Richards Bay
Mediclinic Lephalale	Limpopo	Lephalale
Pholoso Hospital	Limpopo	Savannah
Quality Care Private Hospital	Limpopo	Louis Trichardt
St Vincents Hospital	Limpopo	Bela-Bela
Zoutpansberg Private Hospital	Limpopo	Louis Trichardt
Emalaheni Private Hospital	Mpumalanga	Witbank
Kiaat Private Hospital	Mpumalanga	Nelspruit
Lowveld Hospital	Mpumalanga	Nelspruit
Mediclinic Highveld	Mpumalanga	Trichardt
Mediclinic Ermelo	Mpumalanga	Ermelo
Life Midmed Hospital	Mpumalanga	Middelburg
Nelspruit Surgiclinic Private Hospital	Mpumalanga	Nelspruit
RH Phodoclinic	Mpumalanga	Barberton
Clinix Itokolle - Victoria Private Hospital	North West	Mafikeng
Ferncrest Hospital	North West	Tlhabane
Mooimed Private Hospital	North West	Potchefstroom
Sunningdale Hospital	North West	Klerksdorp
Vryburg Private Hospital	North West	Vryburg
Wilmed Park Private Hospital	North West	Klerksdorp
Jane Keyser Clinic	Northern Cape	Hartswater
Lenmed Health Kathu Private Hospital	Northern Cape	Kathu
Lenmed Royal Hospital and Heart	Northern Cape	Kimberley
Mediclinic Upington	Northern Cape	Upington
Bellville Medical Centre	Western Cape	Bellville
Blaauwberg Hospital	Western Cape	Sunningdale
Busamed Paardevlei Private Hospital	Western Cape	Paardevlei
Ceres Hospital	Western Cape	Ceres
Christiaan Barnard Memorial Hospital	Western Cape	Foreshore
Gatesville Medical Centre	Western Cape	Gatesville
Kuils River Hospital	Western Cape	Kuils River

# myFED network hospital lists

Please note that this list may change/expand during the year. Please contact the [Fedhealth Customer Contact Centre on 0860 002 153](#) or refer to the website for the latest **myFED** Network Hospital list.

HOSPITAL NAME	PROVINCE	TOWN
Life Bay View Hospital	Western Cape	Mossel Bay
Life West Coast Private Hospital	Western Cape	Vredenburg
Mediclinic Hermanus	Western Cape	Hermanus
Mediclinic Worcester	Western Cape	Worcester
Mitchell's Plain Medical Centre	Western Cape	Mitchell's Plain
N1 City Hospital	Western Cape	N1 City
Rondebosch Medical Centre	Western Cape	Rondebosch
Tokai Medical Centre	Western Cape	Tokai

HOSPITAL NAME	COUNTRY	TOWN
Wilies Hospital	Lesotho	Maseru
Maseru Private Hospital	Lesotho	Maseru

# Contact details

## Medscheme Client Service Centres

For personal assistance, visit one of the following Medscheme Client Service Centres.

These branches are open Monday to Friday 07h30 – 17h00  
Saturday 08h00 – 13h00.

### Bloemfontein

Medical Suites 4 and 5, First Floor, Middestad Mall, Corner West Burger and Charles Streets

### Cape Town

Shop 6, 9 Long Street Cnr Long and Waterkant Streets, Cape Town

### Durban

Ground Floor, 102 Stephen Dlamini Road, Musgrave, Durban

### Port Elizabeth

1st Floor, Block 6, Greenacres Office Park, 2nd Avenue, Newton Park

### Pretoria

Nedbank Plaza, Ground Floor, Shop 17, 631 Steve Biko Street, Arcadia

### Roodepoort

Shop 21 & 22, Flora Centre, Cnr Ontdekkers and Conrad Roads, Florida North, Roodepoort

### Vereeniging

Ground Floor, 36 Merriman Avenue

### Contact us

Fedhealth Customer Contact Centre

Monday to Thursday 08h30 – 17h00

Friday 09h00 – 17h00

Tel: 0860 002 153

WhatsApp: 060 070 2479

Email: member@fedhealth.co.za

Claim submission: claims@fedhealth.co.za

Web: www.fedhealth.co.za

Postal address: Private Bag X3045, Randburg 2125



## Hospital Authorisation Centre

Monday to Thursday 08h30 – 17h00

Friday 09h00 – 17h00

Tel: 0860 002 153

Email: authorisations@fedhealth.co.za

Web: www.fedhealth.co.za

## Ambulance Services

Europ Assistance

Tel: 0860 333 432

## Aid for AIDS

Monday to Friday 08h00 – 17h00

Tel: 0860 100 646

Fax: 0800 600 773

Email: afa@afadm.co.za

Web: www.aidforaids.co.za

SMS (call me): 083 410 9078

## Chronic Medicine Management

Monday to Thursday 08h30 – 17h00

Friday 09h00 – 17h00

Tel: 0860 002 153

Email: cmm@fedhealth.co.za

Postal address: P O Box 38632 Pinelands  
7430

## Disease Management

Monday to Friday 08h00 – 16h30

Tel: 0860 002 153

Email: dm@fedhealth.co.za

## Fedhealth myFED Baby

Monday to Friday 08h00 – 17h00

Tel: 0861 116 016

Email: info@babyhealth.co.za

Web: www.babyhealth.co.za

## Fedhealth Paed-IQ

Tel: 0860 444 128

## Fraud Hotline

Tel: 0800 112 811

## MVA Third Party Recovery Department

Monday to Friday 07h00 – 15h00

Tel: 012 431 9718

## MediTaxi

Dial \*130\*3272\*31#

## Oncology Disease Management

Monday to Friday 08h00 – 16h00

Tel: 0860 100 572

Fax: 021 466 2303

Email: cancerinfo@fedhealth.co.za

Postal address: P O Box 38632, Pinelands,  
7430

## SOS Call Me

Dial \*130\*3272\*31#

## MediVault Activations and transfers USSD

\*134\*999\*memberno#

## Designated Service Provider Pharmacies

### Clicks

Tel: 0860 254 257

To locate a store, go to: www.clicks.co.za and select Store Locator

### Dis-Chem

Care-Line: 0860 347 243

To locate a store, go to: www.dischem.co.za and select Store Locator

### MediRite Pharmacy

Tel: 0800 222 617

To locate a store, go to: www.medirite.co.za and select Store Locator

### Pharmacy Direct

Monday to Friday 07h30 – 17h00

Tel: 0860 027 800

Fax: 0866 114 000/ 1/ 2/ 3/ 4

Email: care@pharmacydirect.co.za

Web: www.pharmacydirect.co.za

SMS (call me): 083 690 8934

### Clicks Direct Medicines

Call us on 0861 444 405

Email your chronic prescription to directmedicines@dirmed.co.za'

### Dis-Chem Direct Courier

Tel: 011 589 2788

Email: direct.documents@dischem.co.za

