

Accessible Care • Affordable Prices



THEBEMED
MEDICAL AID SCHEME



UNIVERSAL PLAN

Efficiency Discount Option

2018

Private hospital cover
Comprehensive primary care
Choice of designated service provider
Choice of benefits to suit your needs

In Hospital Benefits

All benefits are subject to pre-authorisation and PMB*, please contact 0861 84 32 36

Benefits	Limits 2018
 HOSPITALISATION (Accommodation, medical and surgical procedures, medication, consumables and treating specialist costs) Subject to PMB's	UNLIMITED At contracted facilities and State Hospitals Based on internal and Department of Health protocols 100% of Negotiated Tariff at DSP* Based on the Clinical Outcomes and Tariff Negotiations. The Scheme has the right to channel cases to the most competitive network. Associated Providers treating patients during admissions must contact the Scheme for Authorisation, E.g. Physiotherapy, Dieticians, and Psychologist etc. Failure to do will result in payment for only up to the first 3 days. Subject to internal protocols.
 PLANNED HOSPITAL PROCEDURES Subject to PMB's	R2 000 Co-payment for these planned procedures: Colonoscopy, Cystoscopy, Gastroscopy, Myringotomy, Sigmoidoscopy, Laparoscopy, Arthroscopy, Hysterectomy and Nissen Fundoplication (Reflux Surgery), Spinal Surgery and Joint Replacements E.g. Hip & Knee Subject to PMB's
 MEDICAL RESCUE (Ambulance, Medical Emergency Evacuation Transport to Advisory Services)	100% Negotiated Tariff at DSP* Subject to Pre-authorisation with Preferred Provider Netcare 911
 DELIVERY	UNLIMITED Subject to Protocols Normal & Caesarean Birth in Hospital 100% of Negotiated Tariff. PMB* Based on internal protocols Home Delivery (By Registered Midwife) Limited to R6 000/pregnancy
 NEONATAL CARE	100% of Negotiated Tariff PMB* based on Department of Health protocols Subject to overall annual limit
 MENTAL HEALTH (Psychiatric Treatment including Clinical Psychology) Appropriate referral by GP/Specialist, failing to do so will result in no payment. Subject to Pre-authorisation for In and Out of Hospital, Treatment Plan Submission & Progress Report.	PMB Conditions Only. 100% of Negotiated Tariff Payment up to 3 days for Psychologist charging therapy sessions with or without a Psychiatrist in the same admission, thereafter pre-authorization required with treatment plan and progress report.
 DRUG AND ALCOHOL REHABILITATION (Account will only be paid if the full course of treatment has been completed)	Limited to R10 000/family/year 100% of Negotiated Tariff. PMB* Based on internal protocols Subject to overall annual limit & Contracted Private & Public Facility
 INTERNAL PROSTHESIS Subject to Pre-authorisation	Limited to R25 000/beneficiary/year Subject to overall annual limit & internal protocols, PMB's & scheme guidelines
 EXTERNAL PROSTHESIS Subject to Pre-authorisation	Limited to R10 000/beneficiary/year Subject to overall annual limit & internal protocols, PMB's & scheme guidelines
 STEP DOWN FACILITIES & SUB ACUTE FACILITIES	Subject to pre-authorisation & case management Subject to overall annual limit & internal protocols, PMB's & scheme guidelines

All benefits will be pro-rated for members admitted during the benefit year. All costs payable at 100% of Negotiated Tariff. Subject to Prescribed Minimum Benefits (PMB's).

Out of Hospital Benefits

All benefits are payable at ED Designated Service Provider (DSP)*, Pre-authorisation, and PMB*

Benefits	Limits 2018
 GP CONSULTATIONS (Visits, examinations and tests)	UNLIMITED Member to choose and consult one ED DSP GP as primary provider/beneficiary 100% of Negotiated Tariff at ED DSP* PMB* Based on internal protocols

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Out of Hospital Benefits

All benefits are payable at Designated Service Provider (DSP)*, Pre-authorisation, and PMB*

Benefits	Limits 2018
 SPECIALIST CONSULTATIONS (Subject to Pre-authorisation and on appropriate referral by GP, failing to do so will result in no payment)	3 visits/family/annum 100% of Negotiated Tariff at DSP* PMB* Based on internal protocols
 CIRCUMCISIONS (In ED DSP General Practitioners rooms only)	Limited to R970/beneficiary 100% of Negotiated Tariff. Internal protocols applicable
 ACUTE MEDICATION (Medication, Injection and Material)	UNLIMITED 100% of Negotiated Tariff at ED DSP* based on generic substitute and Schemes formulary
 PHARMACY ADVISED THERAPY (Over the counter medicines in consultation with pharmacist, restricted to registered Schedule 0, 1 and 2 medicines)	Limited to R100/script Subject to Limit of R280/family/year 100% Cost at Single Exit Price and Regulated Dispensing Fee. Not chargeable with Acute Script on the Same Day.
 CHRONIC MEDICATION (Subject to renewal of prescription every six (6) months)	UNLIMITED Based on internal protocols Subject to Generic substitute and Schemes Formulary PMB* Based on internal protocols
 CONSERVATIVE DENTISTRY (Check-ups, Scaling & Polishing, Fillings and Extractions, Plastic Dentures)	UNLIMITED 100% ThebeMed Dental Rates Based on DENIS* clinical protocols
 OPTOMETRY (Frames, Lenses, Readers, Contact Lenses and Disposable Contact Lenses) Subject to pre-authorisation	1 Pair of frames limited to R600/beneficiary/2 years Contact Lenses limited to R1 120/beneficiary/2 years No Benefit for Contact Lenses if Frames are purchased
 REFRACTION TESTS	1 Test/beneficiary/2 years. 100% of Negotiated Tariff. Managed by PPN*
 DIAGNOSTIC INVESTIGATIONS Pathology & Radiology	Limited to appropriate Referral and Request Form by ED GP & Authorised Specialist, failing to do so will result in no payment of services. 100% of Negotiated Tariff at ED DSP*
 EXTERNAL APPLIANCES Subject to Pre-authorisation (Subject to PMB Conditions Only)	Subject to Pre-authorisations 100% Negotiated Tariff. PMB* based on internal protocols
 THEBE Bambino MATERNITY BENEFITS	2 Ante Natal visits / Pregnancy 2 Sonar's / Pregnancy 100% of Negotiated Tariff at ED DSP*. PMB* Based on internal protocols


All benefits will be pro-rated for members admitted during the benefit year. All costs payable at 100% of Negotiated Tariff. Subject to Prescribed Minimum Benefits (PMB's).

Additional Benefits

myHealth

POWERED BY **phela** WELLNESS

Limited to Appropriate Referral from ED DSP* GP & Authorised Specialist. 100% of Negotiated Tariff (Test To Be Done At ED DSP Pathologist)

Benefits	Limits 2018
 HEALTH ASSIST	Health Risk Assessment Test (Cholesterol, Blood Pressure, Body Mass Index (BMI), Lifestyle assessment) 1 Test/beneficiary/year (over 18 years) 1 Flu Vaccine/beneficiary/year 1 Pap Smear for Females over 18 years/beneficiary/year 1 Mammogram for females over 40 years/beneficiary/2 years 1 Free PSA for males over 40 years/beneficiary/2 years 1 Free Glucose Test over 15 years/beneficiary/ year 1 Colon Cancer Blood Test over 50 years/beneficiary/year. 100% of Negotiated Tariff 2 Dietician Consultations for BMI above 35 and over 12 years/beneficiary/every 6 months limited to R1 200. After consultation of Dietician as required protocols 1 Biokinetic Consultation to provide home exercise programme limited to R300 beneficiary/year Subject to Dietician consultation first and submission of health indicators and outcomes to the Scheme

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Additional Benefits

All benefits are payable at ED Designated Service Provider (DSP)*, Pre-authorisation, and PMB*

Benefits	Limits 2018
 <p>YOUTH ASSIST</p>	<p>2 Free sessions for beneficiaries 12-17 years/beneficiary/year at registered social worker or psychologist. Limited to RI 200/beneficiary. 100% of Negotiated Tariff.</p> <p>Thebemed cares about the social ills such as drug and alcohol abuse, teenage pregnancies and induced abortions that impacts the youth in our communities, and designed a programme that will assist in moderating these challenges.</p> <p>Thebemed's youth programme is aimed at influencing young people's attitudes and behaviours with a view to creating conditions for positive social change. The objective of the programme is to empower the youth with tools to resolve conflicts, make informed decisions and solve problems that impact their health. programme is to empower the youth with tools to resolve conflicts, make informed decisions and solve problems that impact their health.</p>
 <p>HIV ASSIST HIV Testing & Counselling</p>	<p>1 Free HIV test/beneficiary/year. Pre and post counselling provided.</p>
 <p>CHRONIC DISEASE Disease Management Basket of Care</p>	<p>Thebemed offers its members specific case programmes to help manage various chronic diseases. The Disease Management Programme includes: Healthcare advice and support, education and assistance to comply with the treatment protocol for your conditions.</p>
 <p>TELEPHONIC SUPPORT 08002BWELL (0800 229 355)</p> <p>Trauma Counselling</p> <p>Short Term Counselling (Relationship counselling, Family counselling, Health advice, Stress, Lifestyle coaching)</p>	<p>Unlimited. Trauma 24 hours a day/ 7 days a week</p> <p>Unlimited. Monday – Friday : 08h00 to 16h00</p>
 <p>MYPLAN2BWELL www.thebemed.co.za/myhealth.</p> <ul style="list-style-type: none"> • Rate your health • Choose your goal & register for e-coaching • Personalise your meal • Design your fitness plan • Track your results 	<p>1 Membership/beneficiary/year. Over 18 years. Subject to online registration.</p>

UNIVERSAL PLAN CONTRIBUTION RATES

2018 RATES PER MEMBER PER MONTH

INCOME CATEGORY	MEMBER 	ADULT DEPENDENT 	*CHILD DEPENDENT 
0 - R500	R370	R370	R370
R501 - R2 500	R943	R838	R468
R2 501 - R7 500	R1 011	R898	R502
R7 501+	R1 169	R1 004	R549

* Maximum 2 children per family charged

All benefits will be pro-rated for members admitted during the benefit year. All costs payable at 100% of Negotiated Tariff.

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Your Shield for Health

THEBE
Bambino



This program assists Thebemed's mothers in waiting by providing advice and benefits.

100% of Negotiated Tariff

HOSPITAL CONFINEMENT

PMB* based on internal protocols

HOME DELIVERY

Limited to R6 000 / pregnancy (By registered Midwife)

MATERNITY SONARS

Limited to 2 Sonar's per pregnancy.

MATERNITY VISITS

2 Antenatal visits per pregnancy

HOW TO REGISTER:

0861 84 32 36 | callcentre@thebemed.co.za | www.thebemed.co.za

At 7 months, you will receive a free maternity bag containing mother and baby essentials to get you started on your journey to motherhood. Subject to registration on Thebe Bambino Programme to qualify for free maternity bag.



myHealth

POWERED BY

phela
WELLNESS

Thebemed cares and wants you to be healthy and well!

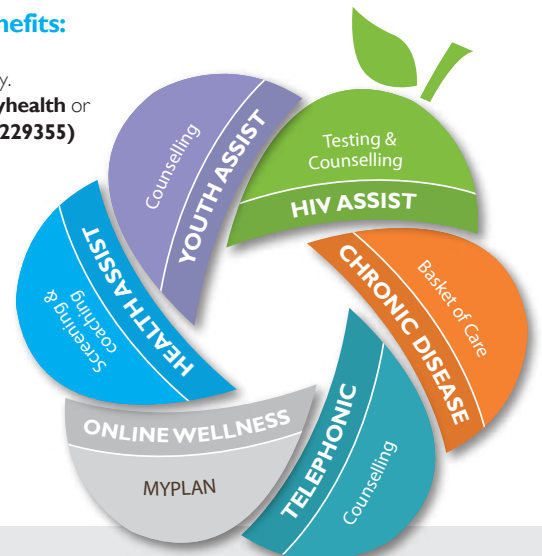
myHealth is designed to identify and inform you of potential health risks when you complete your annual health screening at a wellness day, your nominated doctor or pharmacy clinic.

A basket of care is provided through the myHealth disease management programme to support and educate you should you be diagnosed with a chronic condition.

How you live now has a big impact on your quality of life in the future. Our goal is to support you with motivation, coaching, advice, resources and tools that will help you achieve your goals.

Enjoy your world of benefits:

REGISTER NOW. It's fast and easy.
Visit www.thebemed.co.za/myhealth or
call us on **08002BWELL (0800229355)**



EDUCATE

IDENTIFY

DIAGNOSE

TREAT

SUPPORT

0861 84 32 36 | callcentre@thebemed.co.za | www.thebemed.co.za

THEBEMED
MEDICAL AID SCHEME

Your Shield for Health

Why Choose Thebemed Medical Aid?



UNLIMITED GP CONSULTATIONS AND PRIVATE HOSPITALISATION

- Free choice of DSP network doctors
- Unlimited hospitalisation at contracted facilities

myHealth WELLNESS PROGRAMME ON ALL OPTIONS

- Counselling
- HIV testing
- Health risk assessment
- Health advisor
- MyPlan- online wellness programme
- Basket of care for chronic conditions

ONSITE SUPPORT THROUGH SERVICING CONSULTANTS

- Education and training
- Member induction
- Resolution of queries coach

**R55
FREE
AIRTIME**



FREE AIRTIME

Upon signing up with Thebemed Medical Aid, you will receive a sim card. This provides easy communication with consultants and you receive R55 airtime monthly.

THEBEMED
Bambino



BAMBINO PROGRAMME

Register on the Maternity Programme and at 7 months and you will receive a free maternity bag. The bag contains mother and baby essentials to get you started on your journey to motherhood. Maternity benefits include:

- 2 Antenatal visits per pregnancy and
- 2 Sonars per pregnancy

**5
Good
reasons
to join...**

For more information regarding this cover, contact us
+27 11 544 8000 | email to: info@thebemed.co.za

ABBREVIATIONS

BHF	- Board of Healthcare Funders
BMI	- Body Mass Index
DSP	- Designated Service Provider
NON-DSP	- Service Providers that fall outside of the DSP List
CO-PAYMENT	- Payment that needs to be made to service providers that are not on the DSP* list, including certain planned hospital procedures and services to specialists not referred
CDL	- Chronic Disease List
DENIS	- Dental Information Systems
GP	- General Practitioner
ICD10	- International Statistical Classification of Disease and Related Health Problems
PMB	- Prescribed Minimum Benefits
PPN	- Preferred Provider Negotiators
SEP	- Single Exit Price
THEBE BAMBINO PROGRAMME	- Thebemed's Maternity Programme
VCT	- Voluntary Counselling and Treatment

CHRONIC DISEASE LISTINGS

Chronic medication for the following disease listing is considered as Prescribed Minimum Benefits (PMBs)*.

- Addison's Disease
- Asthma
- Bipolar Mood Disorder
- Bronchiectasis
- Cardiac Failure
- Cardiomyopathy
- Chronic Renal Disease
- Chronic Obstructive Pulmonary Disease
- Coronary Artery Disease
- Crohn's Disease
- Diabetes Insipidus
- Diabetes Mellitus Type I
- Diabetes Mellitus Type II
- Dysrhythmias
- Epilepsy
- Glaucoma
- Haemophilia
- HIV / AIDS

CHOOSING YOUR DESIGNATED SERVICE PROVIDER (DSP*)



There are a number of ways this choice can be made:

1. The simplest way is for the member to call Thebemed Call Centre, where an agent will then guide the member through the options and register a DSP* for the member.
2. Members can also log onto www.thebemed.mobi and follow the "Providers" then the "Designated Provider" link to select a DSP*.
3. Where the member has a family doctor, they can call the Call Centre and provide Thebemed with the doctor's name and contact details. If the doctor is not on the Thebemed network, we will contact the doctor in an attempt to contract them into the Thebemed Doctor network.

VITAL INFORMATION

CLAIMS MANAGEMENT

Thebemed strives to pay all valid claims timeously. It is therefore important to ensure that Thebemed receives every claim as soon as possible after the consultation. In most instances the provider will forward the claim to the Scheme. We suggest that you confirm with your provider at the time of consultation how the claim will be submitted. Please note it is the member's responsibility to ensure that the claims are submitted to and received by the Scheme within 120 days of the consultation.

Please ensure that all claims from providers have the following information, so that payment of claims can be made:

- Medical Aid number
- Member names
- Patient name
- Date of birth
- Dependant number
- Doctor practice number
- Diagnosis and procedure name
- ICD 10 Code
- Reference or account number
- Tariff Code and amount charged
- Referring Provider practice name and practice number
- If accounts have been paid by the member

EXCLUSIONS

Subject to the provisions of Regulation 8 of the act, the Scheme shall pay in full, without co-payment or use of deductibles, the diagnosis, treatment and care costs of the prescribed minimum benefit conditions, as defined in Regulation 7 of the Act.

1. Treatment or operations for cosmetic purposes including Blepharoplasties, Genioplasties, Rhinoplasties, Otoplasties, removal of tattoos, Labial frenectomies for patients over the age of 8 years old, etc.
2. Treatment for obesity including Liposuction, tummy tuck, Bariatric surgery, etc.
3. Cosmetic breast reduction and reconstruction, refractive surgery and human growth hormones
4. Treatment for infertility or artificial insemination limited to Prescribed Minimum Benefits in State Hospitals
5. Holidays for recuperative purposes
6. Services rendered by persons not registered with a recognised body in South Africa constituted in terms of in terms of any law
7. Purchase of medicines and proprietary preparations, including but limited to:
 - Bandages and aids
 - Nutritional / food supplements including patented baby foods and special formulae
 - Acne treatment including Roaccutane and Diane, refer to Scheme
 - Contraceptives available from state institutions
 - Toning and slimming products
 - Domestic and biochemical remedies
 - Vitamins except when prescribed for prenatal conditions, children under 12 years. Including people living with HIV/AIDS and registered on the programme
 - Aphrodisiacs
 - All soaps and shampoo (medicated or otherwise)
 - Anabolic steroids
 - Contact lenses preparations
 - Medicines and preparations advertised to the public and readily available without prescription, except where indicated in relevant benefit option
8. Examinations for insurance, visas, employment, school camps and similar purposes
9. Services rendered during any waiting periods that are imposed on the member or any dependant joining the scheme
10. Travel costs other than in an ambulance for emergency service to hospital only
11. Appointments not kept and fees for writing prescriptions
12. Telephonic consultations including after-hours consultation / fees except in emergency situations
13. Non-PMB claims resulting from war, invasion, act of foreign enemy, hostilities, warlike operations (whether war be declared or not) civil war, rebellion, revolution, insurrection, military or usurped power, wherever a member has been participating
14. Convalescent or recuperative homes or clinics for the aged and chronically ill including frail care
15. Loss of libido, including Viagra and Caverject
16. Acupuncture, reflexology and aromatherapy
17. Ante- and Postnatal exercise, except under PMB's
18. Osseo-integrated tooth implants
19. X-rays performed by anyone other than a registered Radiologist, Radiographer, Registered Radiographer Assistant or Dentist
20. Benefits in respect of the cost of medical expenses incurred whilst overseas are subject to approval by the Board of Trustees, if approved, cover will be at the applicable South African tariff
21. Complications arising from procedures or / and condition which is a scheme exclusion
22. Revision of scars Keloid removal except for burns and functional impairment
23. All expenses incurred due to elective Caesarean surgery not covered by the Scheme
24. Purchase or hire of medical, surgical or other appliances or devices not provided for in the rules or protocols or not scientifically proven, including appliances to treat headaches, autopsies, back rests and chair seats, beds and mattresses, blood pressure monitors, electronic tooth brushes, humidifiers, pain relieving machines (e.g. TENS and APS), etc.
25. Erythropoietin unless pre-authorized
26. Gender re-alignment
27. Uvulopalatopharyngoplasty
28. Hyperbaric oxygen treatment except for PMB's
29. Exclusions listed under "Dental Benefit Exclusions Summary", available on request from the Scheme
30. Positron Emission Tomography (PET) scans where applicable
31. Blood collections from medical practitioners and specialists
32. Alternative Health Practitioners (Osteopathy; Registered Counsellors; Reflexology; Phytotherapy; Therapeutic massage therapy)
33. 3D and 4D Maternity scans
34. MRI scans ordered by a general practitioner, unless there is no reasonable access to a specialist
35. X-rays performed by chiropractors
36. Chiropractor and Podiatry benefits in hospital
37. Sleep therapy
38. Bilateral gynaecomastia
39. Stethoscopes and sphygmomanometers (blood pressure monitors)
40. CT colonography (virtual colonoscopy) for screening
41. MDCT Coronary Angiography for screening
42. Epilation – treatment for hair removal
43. Facet joint injections and percutaneous radiofrequency ablations

Preferred Service providers

Emergency Service for Netcare 911:

082 911 and 0860 638 2273

Optical authorisation for PPN:

0861 10 35 29

Dental authorisation for DENIS:

0860 10 49 33



PROUDLY ADMINISTERED BY
THEBE YA BOPHELO
ADMINISTRATORS

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Thebemed is administered by Thebe Ya Bophelo Administrators, a division of the Thebe Investment Corporation, one of South Africa's leading empowerment companies

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