

## 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 beforehand.

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

### PRIMARY BENEFITS

NO PRE-AUTHORISATION REQUIRED • SCHEME RATES APPLY



#### **GENERAL PRACTITIONER &** SPECIALIST VISITS (SUBJECT TO FAMILY BENEFITS)

- Consultations
- » Minor procedures in the doctors' rooms



#### **OPTOMETRY** (STAND-ALONE BENEFIT)

- Cover of R3 400 per beneficiary every 24 months
- Eye test
- Frames/lenses per beneficiary every 24 months



### MALE HEALTH

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



### **FEMALE HEALTH**

- Oral contraceptives limited to R170 per registered female per month
- Pap smear
- Mammogram
- HPV vaccine (from the age of 9 years)
- Laparoscopic sterilisation



#### MEDICATION (SUBJECT TO FAMILY BENEFITS)

- Prescribed: acute medication as
- Prescribed: chronic medication unlimited (Subject to 27 CDL PMB conditions as well as selective Hormone Replacement Therapy (HRT) and Disease Management Programme registration)
- Members will be liable for the difference in price between the formulary product and own choice product, except in the case for PMB's

#### ADDITIONAL CHRONIC MEDICATION (FORMULARY)

- Scripted: 9 additional chronic conditions subject to available funds in the family benefit and Disease Management Programme registration
  - Severe acne
  - Anaemia
  - Severe eczema
  - Endometriosis
  - Gastro-oesophageal reflux disease (GORD)
  - Sjorgen syndrome
  - Celiac disease
  - Tay-sachs disease
  - RP isomerise deficiency



### **OVER THE COUNTER MEDICATION** (STAND-ALONE BENEFIT)

Cover of R190 per event, per beneficiary. Maximum of R2 280 per beneficiary per year



#### **DENTAL CARE** (SUBJECT TO FAMILY BENEFITS)

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



#### **PREVENTION & SCREENINGS** (SUBJECT TO FAMILY BENEFITS)

Benefits available from selected pharmacies:

- HIV test
- Glucose test
- Lipogram test
- Breast exam
- Childhood vaccines



### **MATERNITY CARE PLAN**

A basket of services consisting of these additional benefits will be made available to the expectant mother upon registering on the plan.

- 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
- The expectant mother must register on the maternity care plan to receive these additional benefits

Benefits will be apportioned according to the stage of the pregnancy at the time of registration.

### FAMILY BENEFIT BREAKDOWN

















### **MAIN MEMBER**

Main member

### MAIN MEMBER + **ADULT DEPENDANT**

MAIN MEMBER + ADULT DEPENDANT + CHILD DEPENDANT x 1

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

R29 160

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

R11 280 R20 280 R24 720 R33 600 Child dependant x 1 TOTAL FAMILY BENEFIT Main member Adult dependant Child dependant x 2 Child dependant x 3 M R11 280 R11 280 M + AR11 280 R9 000 R20 280 R24 720 M + A + 1CR9 000 R4 440 R11 280 R11 280 R4 440 M + A + 2CR9 000 R29 160 R4 440 R4 440 R4 440 R4 440 M + A + 3CR11 280 R9 000 R33 600 1C Child dependant x 1 Child dependant x 2 Child dependant x 3

\* Please note that the Scheme Rules supersede information contained in this document. Our Scheme rules can be obtained on www.umvuzohealth.co.za

Adult dependant

### SECONDARY BENEFITS

NO PRE-AUTHORISATION REQUIRED • SCHEME RATES APPLY • STAND-ALONE BENEFITS



#### SUPPLEMENTARY BENEFITS

- » R10 500 per family per year
- Occupational therapy
- Dieticians
- Speech therapy & audiology
- Physiotherapy, chiropractors and biokinetics
- Podiatry
- Psychology
- Homeopathy
- Nurse visits covered up to R155 per visit and R75 for dispensed medicines or consumables.
- Social and community workers



### 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

It is important to call only Netcare 911 for emergency medical services



### APPLIANCES (ORTHOPAEDIC/SURGICAL/MEDICAL)

- » R11 800 per family per year
  - Back/leg/arm/neck support
  - Crutches after surgery
  - · Surgical footwear post surgery
  - Respiratory oxygen, diabetic-and stoma aids continually essential for the medical treatment.



#### **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 R11 600 per family per year
  - Radiology (X-rays and ultrasounds)
  - Pathology (blood tests)

### **HOSPITAL BENEFITS**

UNLIMITED • PRE-AUTHORISATION REQUIRED • SCHEME RATES APPLY • ACCESS TO ALL HOSPITAL GROUPS



### **HOSPITAL ADMISSION**

- » All admissions to hospital must be pre-authorised
- » In the case of a proven, life threatening emergency, admission will automatically be granted for an initial period of 24 hours



#### **GENERAL**

- » Consultations (GPs and specialists)
- » Treatment
- » Surgical procedures and operations
- » Non-surgical procedures
- » Anaesthesia for surgical procedures
- Medication administered during a hospital stay
- » Hospital apparatus



#### ACCOMMODATION

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



### INTERNAL MEDICAL AND SURGICAL PROSTHESES

- » Vascular prosthesis (valve replacements, pacemakers, stents and grafts) R45 800
- » Functional items and recuperative prosthesis (K-wires, plates, screws, lenses and slings) R16 300
- » Joint replacements R45 800
- » Major musculoskeletal prosthesis spinal procedures R27 400



### **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



### INVESTIGATIONS

- » Radiology (X-rays)
- Pathology (blood tests)
- » Non-oncology radiotherapy » Medical technology(mammogram)



**SCANS** 

### (IN & OUT OF HOSPITAL)

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



### **MENTAL HEALTH**

- » Subject to PMB's
- Hospital based mental health management has up to 3 weeks cover per year or
- » 15 outpatient psychotherapy contacts per year



### **EMERGENCIES**

- » Unlimited cover provided the emergency episode meets the requirements of an emergency medical condition
- » Authorisation for the visit must be obtained within 24 hours



### ONCOLOGY (CANCER)

- » Members are encouraged to register with the Cancer Management Programme
- » A total treatment plan benefit will be allocated based on Scheme treatment guidelines. Treatment must be obtained at Designated service providers (DSP's) and will be funded at negotiated tariffs according to the treatment protocols

### KINDLY NOTE

- Penalties may apply if authorisation is obtained after treatment.
- The claim may not be paid if pre-authorisation is not obtained.

### DISEASE MANAGEMENT



#### **ACTIVE DISEASE MANAGEMENT PROGRAMMES**

- » Our disease management programmes are structured treatment plans that aim to help our members diagnosed with chronic conditions better manage their disease, maintain and improve quality of life.
- » The main aim of our programmes is to reduce the symptoms associated with a chronic disease and keep them from getting worse. Through these programmes we also aim to improve cooperation between the various specialists and institutions that provide care for our members, such as family and specialist doctors, hospitals and rehabilitation centers. This is meant to ensure that the individual treatment steps are well coordinated.

### We cover treatment and medication for the following 27 CDL PMB conditions:

- » Chronic renal disease
- » Addison's disease
- » Asthma
- » Bronchiectasis
- » Cardiac failure
- » Cardiomyopathy
- » Chronic obstructive pulmonary disorder
- » Coronary artery disease
- » Crohn's disease
- » Diabetes insipidus
- » Diabetes mellitus types 1 & 2
- » Dysrhythmias
- » Epilepsy
- » Bipolar mood disorder
- » Hypothyroidism

- » Hypertension
- » HIV
- » Glaucoma
- » Haemophilia
- » Ulcerative colitis
- » Systemic lupus erythematosus
- » Schizophrenia
- » Rheumatoid arthritis
- » Parkinson's disease
- » Hyperlipidaemia
- » Multiple sclerosis

We encourage all our members living with a chronic condition to register on the relevant disease management programme to benefit from this coordinated care, personalised attention and ongoing support.

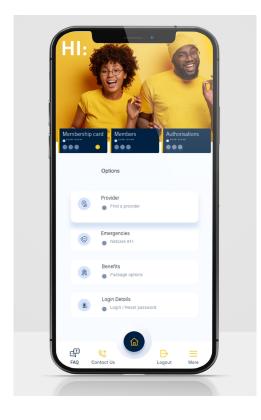
All Prescribed Minimum benefits (PMB) are covered according to Scheme rules, protocols and formularies.

## **CONSIDERING JOINING UMVUZO HEALTH?**

We would love to have you join us on the Umvuzo Health journey. For the last 18 years, we have been looking after the health of members and their families just like you. We have a national footprint, with members in every province in South Africa. This means, no matter where in the country you are, you and your family will have access health services.

Our benefits are especially designed to meet your ever-changing healthcare needs. We take care to offer our members comprehensive health cover on all levels, to minimize the need for you to pay any additional costs from your own pockets. We have put processes in place to ensure that your experience with Umvuzo Health is a pleasant one. We offer our members 24-hour support call centre line to ensure we are accessible to you whenever there is a need. We also bring our client service support directly to your workplace, when you need face-to-face interaction.

We pride ourselves in our excellent claims' payment track record. We pay claims directly with healthcare service providers to ensure our members are not out of pocket.



When you are ready to join Umvuzo Health or would like more information, you can simply contact us through the various platforms as listed at the back of this brochure.

Once you have completed the application form and selected the Option that best suits your needs, kindly hand it in at your HR/broker office. The HR/broker office will complete all the necessary administrative requirements and send your application form to us.

Once you are a member, you will receive an SMS from us with your membership number. While you wait for your physical card to arrive, you can download the Umvuzo Health Mobile App and have access to your digital membership card right away, that you can use at healthcare providers.

The Mobile App puts the power in your hands to manage your medical aid in the palm of your hand. Through the Mobile App, you can do the following:

- Digital membership card
- View your statements
- View your claims history
- Submit claims
- Request authorisation
- View your remaining benefits
- Download your tax certificate

Do not hesitate to call on us for any further information you may need to make an informed decision about your medical aid.

We look forward to welcome you to Umvuzo Health!

# WHAT IS THE **MONTHLY** COST?



PER MAIN MEMBER

R2 920.00



PER ADULT DEPENDANT

R2 745.00



PER CHILD DEPENDANT

R963.00

### **MONTHLY CONTRIBUTIONS**

SINGLE MEMBER



CONTRIBUTION R2 920.00

**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

24/7/365 Authorisation Call Centre: 0861 083 084

Medical emergency services (Netcare 911): 24-hour Pre-authorisation Call Centre: Hospital and Specialist Please Call Me: Preauthorisation email address: Chronic Disease registration: Maternity Care Plan registration:

082 911 0861 083 084 060 070 2352 auth@rxhealth.co.za chronic@rxhealth.co.za maternity@rxhealth.co.za

www.umvuzohealth.co.za

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

- » Call us on **0861 083 084**
- » E-mail: auth@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 REQUESTING PRE-AUTHORISATION

To ensure there are no delays to your request, please ensure you have on hand the following:

- » Your membership number,
- » The referral letter from the doctor,
- ICD 10 code (in other words the diagnosis code),
- » The name and practice number of your referring doctor,
- » The name and practice number of the specialist to whom you are referred, and
- » Any other related documents as may be required.

Once your request has been processed and approved, you will then be sent your authorisation number on your mobile by SMS and email where applicable. Administrative and Client services are attended to during business hours from:

### MONDAYS TO FRIDAYS

08:00 - 17:30 **SATURDAYS** 08:00 - 13:00

### 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)

 Client Service Call Centre:
 0861 083 084

 Client Service Please Call Me:
 060 070 2095

 WhatsApp:
 060 070 2094

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

### **COUNCIL FOR MEDICAL SCHEMES**

Fel: 0861 123 267
E-mail: support@medicalschemes.com
complaints@medicalschemes.com

Website: www.medicalschemes.com



Find us on Facebook: Umvuzo Health