



PROFMED

2017

SCHEDULE OF BENEFITS

Version 2

Applicable 1 January 2017 to 31 December 2017.

Please read in conjunction with the Information Guide and Rules of the Scheme available at www.profmed.co.za or by calling 0860 679 200.

*Pursue excellence
and success will follow*

HEALTHCARE FOR PROFESSIONALS

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2017

Contributions

CONTRIBUTION TABLE

| Monthly Income R0 - R5 000 | | | | | |
|----------------------------|-------------|----------------|-----------|----------------|-----------|
| | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
| Adult | | | | | R635 |
| Adult dependant | | | | | R635 |
| Child | | | | | R406 |

| Monthly Income R5 001 - R9 000 | | | | | |
|--------------------------------|-------------|----------------|-----------|----------------|-----------|
| | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
| Adult | | | R2 095 | | R1 049 |
| Adult dependant | | | R2 095 | | R1 049 |
| Child | | | R949 | | R470 |

| Monthly Income R9 001 + | | | | | |
|-------------------------|-------------|----------------|-----------|----------------|-----------|
| | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
| Adult | R6 007 | R3 555 | R2 913 | R1 585 | R1 408 |
| Adult dependant | R5 572 | R3 289 | R2 697 | R1 473 | R1 301 |
| Child | R1 802 | R1 385 | R1 137 | R618 | R548 |

Notes:

- Members applying for the rates below R9 000 monthly income must submit proof of gross monthly income from all sources. If a member registers his spouse or partner as a dependant, proof of the higher of the member's or spouse's or partner's income from all sources must be provided, i.e. latest three months' bank statements of all bank accounts, a tax directive from SARS or the latest tax return. Proof of income must be provided to the Scheme annually by end-February.
- Adult dependant rates apply from age 21.
- If the dependant is studying and is dependent on the principal member, child rates apply up to age 28. Thereafter rates will default to adult dependant rates.
- Proof of dependence, i.e. latest three month's bank statements of all bank accounts, and annual proof of study, i.e. proof of registration from academic institution, must be provided to the Scheme in terms of 3 above. If proof is not received annually by the Scheme by end-February, rates will default to adult dependant rates.

Get in touch

IMPORTANT TELEPHONE NUMBERS

| | Within RSA | Outside RSA | Fax |
|--|--------------|-----------------|-----------------|
| Client Services & Claims (no faxed claims) | 0860 679 200 | +27 12 679 4144 | +27 12 679 4411 |
| Chronic Disease & Medication Authorisations (treating doctor and pharmacists only) | 0800 132 345 | +27 11 770 6000 | – |
| Hospital & Specialised Radiology Authorisations | 0860 776 363 | +27 12 679 4145 | +27 12 679 4438 |
| International Travel Medical Assistance: | | | |
| • For emergency medical assistance | – | +27 11 541 1225 | – |
| • For enquiries | 0860 679 200 | – | – |
| Disease Management Authorisations | 0860 776 363 | +27 12 679 4145 | +27 12 679 4438 |
| Dental Authorisations | 0860 679 200 | +27 12 679 4144 | +27 12 679 4411 |
| Profmed Baby Programme | 0860 776 363 | – | – |
| Multiply Wellness Programme | 0861 886 600 | – | – |

E-mail Us

| | Within and Outside RSA |
|----------------------------------|-----------------------------------|
| Client Services & General | info@profmed.co.za |
| Claims (no faxed claims) | claims@profmed.co.za |
| International Travel Claims | internationalclaims@profmed.co.za |
| International Travel Enquiries | internationalinfo@profmed.co.za |
| Profmed Baby Programme Enquiries | profmedbaby@profmed.co.za |

Emergency Telephone Numbers

| | Within and Outside RSA |
|--|------------------------|
| Emergency medical assistance outside RSA | +27 11 541 1225 |
| Emergency medical assistance within RSA | |
| Assistance for trauma and HIV exposure | 0861 776 363 |

What's what

DEFINITIONS

| | |
|--------------------------|--|
| Member | The principal member of the Scheme in terms of the rules |
| Beneficiary | The member and any of his/her dependants registered on the Scheme entitled to receive benefits in terms of the rules |
| Family | The total constitution of a member and his/her dependants registered on the Scheme in terms of the rules |
| M | Member |
| M+1 | Member plus one dependant |
| M+2 | Member plus two dependants |
| M+3 | Member plus three dependants |
| Maximum | Maximum benefit payable for a family larger than the family sizes indicated for a particular benefit |
| "Off-label" | Medication utilised for a condition for which it is not specifically registered |
| Single Exit Price | The retail price of medication as determined by legislation |

Day-to-day Limit

Annual overall limit imposed on specific acute, out-of-hospital benefits. Sub-limits on these benefits are subject to availability of funds in the annual overall day-to-day limit. Funds in the annual overall limit can only be accessed through the relevant available sub-limits, where applicable.

Prescribed Minimum Benefits (PMBs)

The minimum benefit a scheme is required to cover in respect of the diagnosis and treatment of the 270 conditions, as required by legislation. This Schedule of Benefits is subject to the provisions of the Medical Schemes Act No. 131 of 1998 and Regulations relating to the prescribed minimum benefits. Profmed provides cover for 270 conditions listed in the PMBs as well as the 26 chronic conditions listed in the Chronic Disease List (CDL) in accordance with the provisions of the Act and Regulations.

The 26 prescribed chronic conditions include the following: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidis, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus and Ulcerative Colitis. The diagnosis, treatment and care costs of these conditions will be paid in full provided these services are obtained from Profmed's designated service provider networks, where applicable. However, if such services are obtained **voluntarily** from a provider other than a DSP, the member will be liable for the balance of the account or the balance will be deducted from the relevant day-to-day benefit, subject to availability of funds. If the service is **involuntarily** obtained from a provider other than a DSP, the service will be paid in terms of the PMB legislation.

All PMB treatment will be subject to the application of treatment protocols and formularies, which will be more or less restrictive depending on the option chosen by the member. Costs in respect of PMBs that exceed the formulary, reference pricing, rules and protocols will be the responsibility of the member.

Designated Service Provider (DSP)/Designated Service Provider Network (DSPN)

A healthcare service provider (DSP) or network of healthcare service providers (DSPN) who are contracted by the Scheme to provide diagnosis, services, treatment, medicine or facilities to members in terms of both PMBs and non-PMBs at a negotiated rate. Services obtained from a non-DSP will be reimbursed at the rate negotiated by Profmed with the DSPN.

Pre-authorisation

Pre-authorisation must be obtained for hospitalisation and certain major medical treatment and procedures. Pre-authorisation is not a guarantee of payment and benefits are paid in accordance with the relevant protocols and Scheme rules, subject to availability of funds. Authorised services or treatment must commence within three months of authorisation, after which the authorisation is no longer valid. Authorisation does not include the fees charged by the attending medical practitioners.

It is the member's responsibility to obtain pre-authorisation, which should be obtained at least seven days prior to the commencement of treatment or services. In case of emergencies that occur after hours or on weekends and public holidays, authorisation must be obtained the next working day.

Profmed does not prescribe the treatment members should undergo but will only fund treatment in accordance with the Scheme rules and protocols and that is clinically appropriate and evidence based, subject to PMB legislation.

SADC Region

The region known as the Southern African Development Community, namely Angola, Botswana, Democratic Republic of the Congo, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, Swaziland, Tanzania (including Zanzibar), Zambia and Zimbabwe.

TARIFF DESCRIPTIONS

Services obtained at a tariff higher than that provided on any given option will be paid at the tariff specific to each option, subject to PMB legislation.

| | |
|---------------------------|---|
| Profmed Tariff | The 2016 Profmed Tariff plus 5% increase |
| Profmed Dental Tariff | 135% of Profmed Tariff for consultations and procedures |
| Profmed Negotiated Tariff | Negotiated by Profmed with particular providers and the various hospital groups and specific to each group |
| Profmed Specific Tariff | <ul style="list-style-type: none">• Consultations: R415 for GPs and R630 for specialists• Procedures: 120% of Profmed Tariff for GPs and specialists |
| Profmed Plus Tariff | 200% of Profmed Tariff paid to GPs and specialists for consultations and procedures |
| Profmed Premium Tariff | 300% of Profmed Tariff paid to GPs and specialists for consultations and procedures |
| Profmed Optical Tariff | DSPN tariff negotiated by Opticlear with registered optical service providers nationally |

DESIGNATED SERVICE PROVIDERS

Members will be required to make use of designated service providers to avoid co-payments on services rendered for the relevant benefits, subject to PMB legislation.

| | |
|--|--|
| Day-to-day (PMBs and non-PMBs) | No DSPN, subject to rules and protocols |
| Hospitalisation | <ul style="list-style-type: none"> • PMBs: No DSPN, with the exception of benefits for psychiatric hospitalisation, drug and alcohol rehabilitation, physical rehabilitation and endoscopic examinations, subject to pre-authorisation, rules and protocols • Non-PMBs: No DSPN, with the exception of benefits for endoscopic examinations, subject to pre-authorisation, rules and protocols |
| Psychiatric Hospitalisation | Participating National Hospital Network (NHN) facilities and Life Healthcare |
| Medication | Profmed Pharmacy Network, subject to rules, formulary, reference pricing and protocols |
| Cataract Surgery | Ophthalmic Management Group (now Ophthalmic Risk Management (ORM)) |
| Chronic Dialysis | National Renal Care, Life Healthcare |
| Oncology | <ul style="list-style-type: none"> • Radiation: Participating Netcare facilities • PET Scans: Bloch & Partners at Morningside Clinic (applies to greater Johannesburg region only) |
| Preventative Care | Pathology: Ampath, Lancet Laboratories and Pathcare |
| Optical | Opticlear |
| Trauma and HIV Assistance Programme | Lifesense |
| Rehabilitation | <ul style="list-style-type: none"> • Alcohol and Drugs: South African National Council on Alcoholism and Drug Dependence (SANCA) • Physical: Life Healthcare |
| Endoscopic Examinations | Netcare, Life Healthcare, Clinix, National Hospital Network (NHN) and Mediclinic |
| Domiciliary (Home) Oxygen | Ecomed Medical cc |
| Emergency Medical Transport (Within RSA) | Netcare 911 |

The exceptions

SCHEME EXCLUSIONS

Please refer to Annexure C of the Scheme Rules and the Information Guide, which are available on the website, for expenses not covered by the Scheme.

BENEFIT LIMITATIONS

Benefit limits are applicable for a benefit year, unless stated otherwise. Claims must be submitted within four months from the date of service, thereafter they are considered as stale claims and will not be paid. Claims are funded, subject to the availability of funds at the time the claim is received by the Scheme and funds are not reserved for any specific claim.

SCHEDULE OF BENEFITS

| BENEFIT | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
|---|---|---|------------------------------|---|------------------------------|
| 1. Hospital and Hospital-related Benefits and Major Medical Expenses | | | | | |
| 1A Hospitalisation Call 0860 776 363 for authorisation, information on clinical qualifying criteria and benefits. | | | | | |
| 1A1 Private, government and provincial hospital ward accommodation (Subject to pre-authorisation) | 100% Profmed Negotiated Tariff in private ward | 100% Profmed Negotiated Tariff in general ward | | 100% Profmed Negotiated Tariff in general ward | |
| 1A2 Theatre and recovery room | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| 1A3 Intensive care and high care (Subject to confirmation every 72 hours) | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| 1A4 Emergency room visits and facility fees at hospitals that result in hospitalisation | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| 1B Medicines in Hospital | | | | | |
| 1B1 Medicines and materials used in hospital and theatre | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| 1B2 Medicines taken out of hospital on discharge (Benefit limited to a 7-day supply) (See Section 5B1) | 80% Profmed Negotiated Tariff at DSPN Paid from acute medicine benefit, subject to the availability of funds | 80% Profmed Negotiated Tariff at DSPN Paid from acute medicine benefit, subject to the availability of funds | | No benefit, subject to PMB legislation | |
| 1C General Practitioners (GPs) and Specialists in Hospital | | | | | |
| 1C1 Surgery and in-hospital procedures | 100% Profmed Premium Tariff | 100% Profmed Plus Tariff | 100% Profmed Specific Tariff | 100% Profmed Plus Tariff | 100% Profmed Specific Tariff |
| 1C2 Visits and consultations by a GP or specialist while hospitalised | 100% Profmed Premium Tariff | 100% Profmed Plus Tariff | 100% Profmed Specific Tariff | 100% Profmed Plus Tariff | 100% Profmed Specific Tariff |
| 1D Radiology and Pathology in Hospital Call 0860 776 363 for authorisation, information on clinical qualifying criteria and benefits. Hospitalisation not covered if admission is for the sole purpose of radiology or pathology investigations. | | | | | |
| 1D1 Radiology and pathology while hospitalised (Excluding MRI, radio-isotope, CT and PET scans and certain other investigative procedures) | 100% Profmed Tariff | 100% Profmed Tariff | | 100% Profmed Tariff | |
| 1D2 MRI, radio-isotope and CT scans and certain other investigative procedures while hospitalised <i>Specialist referral required, except for CT scans</i> (See Section 5A6) (Subject to pre-authorisation) | 100% Profmed Tariff 2 investigations per family in- or out-of-hospital | 100% Profmed Tariff 2 investigations per family in- or out-of-hospital | | 100% Profmed Tariff 2 investigations per family in-hospital only | |
| 1E Other Major Medical Services Call 0860 776 363 for authorisation and registration, information on clinical qualifying criteria and benefits. | | | | | |
| 1E1 Transplants Subject to registration on the Disease Management Programme, and PMB legislation. Benefit 1E1(b) below is not available to members who elect to be a donor to a recipient who is not a Profmed member. | | | | | |
| a) Hospitalisation (Subject to pre-authorisation) | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| b) Donor costs PMBs only (Subject to pre-authorisation and protocols) | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |

SCHEDULE OF BENEFITS

| BENEFIT | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
|--|--|--|-----------|--|-----------|
| 1E2 Peritoneal dialysis and haemodialysis Chronic dialysis subject to the use of the DSPN. Co-payment applies for the use of a non-DSP. (Subject to pre-authorisation and registration on the Disease Management Programme and PMB legislation) | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| 1E3 Oncology Subject to the use of the relevant DSPN, where applicable. Co-payment applies for voluntary use of a non-DSP. Benefit includes radiation therapy and/or chemotherapy, radiology, pathology and adjunct treatment, as well as oncology-related consultations, medicine, procedures and investigations for post-treatment monitoring, subject to Profmed protocols, costings and PMB legislation. | | | | | |
| Includes all costs related to treatment, consultations, investigations and drugs, excluding hospitalisation (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation) | R600 000 per beneficiary Thereafter, subject to PMB legislation | R400 000 per beneficiary Thereafter, subject to PMB legislation | | R200 000 per beneficiary Thereafter, subject to PMB legislation | |
| a) Chemotherapy (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation) | | | | | |
| i) Consultations and facility fees | 100% Profmed Premium Tariff | 100% Profmed Specific Tariff | | 100% Profmed Specific Tariff | |
| ii) Chemotherapy drugs Excluding Biologics and other specified drugs (See Section 1E3 (d)) (Subject to formulary, reference pricing, MMAP® and protocols) | 100% Single Exit Price and dispensing fee | 100% Single Exit Price and dispensing fee | | 100% Single Exit Price and dispensing fee | |
| b) Radiation therapy (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation) | | | | | |
| i) Consultations | 100% Profmed Premium Tariff | 100% Profmed Specific Tariff | | 100% Profmed Specific Tariff | |
| ii) Radiation therapy and facility fees (Subject to use of the DSPN) | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| c) PET scans (Positron-Emission Tomography) (Subject to pre-authorisation and protocols, and use of the DSPN. DSPN applicable within the greater Johannesburg region only) | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| d) Biologics and other specified drugs Per the Oncology Biologics and Other Specified Drugs List (available at www.profmed.co.za) | Subject to benefit limit 80% Single Exit Price and dispensing fee Subject to PMB legislation | No benefit, subject to PMB legislation | | No benefit, subject to PMB legislation | |
| 1E4 Rehabilitation This benefit covers members who have become disabled as a result of acute injuries caused by trauma, infection, surgery, spinal cord injury, brain injury, bleeding or infarction resulting in a stroke. This benefit is only available as an in-patient in a registered rehabilitation facility. Rehabilitation must occur within the benefit year in which the specified injury takes place, or commence directly after discharge from an acute hospitalisation facility or not more than one calendar month after the specified injury is sustained. Benefits are limited to two months' rehabilitation and the availability of benefits, and are subject to case management and Profmed protocols. Admissions covered at authorised service providers only. Subject to use of the DSPN and PMB legislation. Co-payment applies for voluntary use of a non-DSP. | | | | | |
| (Subject to pre-authorisation and use of the DSPN) | 100% Profmed Negotiated Tariff R70 700 per family | 100% Profmed Negotiated Tariff R47 000 per family | | 100% Profmed Negotiated Tariff R23 500 per family | |

SCHEDULE OF BENEFITS

| BENEFIT | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
|---|--|--|-----------|--|-----------|
| 1E5 Out-patient care in lieu of hospitalisation a) Treatment in a registered sub-acute facility or at home by an appropriately registered practitioner (Subject to pre-authorisation and protocols) | 100% Profmed Negotiated Tariff R15 300 per beneficiary | 100% Profmed Negotiated Tariff R12 900 per beneficiary | | 100% Profmed Negotiated Tariff R11 000 per beneficiary | |
| b) Wound care Treatment at home, including surgicals, by an appropriately registered practitioner (Subject to pre-authorisation and protocols) | 100% Profmed Negotiated Tariff R5 900 per beneficiary | 100% Profmed Negotiated Tariff R3 500 per beneficiary | | 100% Profmed Negotiated Tariff R2 900 per beneficiary | |
| 1E6 Psychiatric treatment Includes all in- and out-of-hospital psychiatric and clinical psychology consultations, treatment and in-hospital medication, and alcohol and drug rehabilitation. Hospitalisation only available at DSPN. PMBs are deducted from this benefit but are not subject to these limits. Co-payment applies for voluntary use of a non-DSP. | | | | | |
| a) In-hospital (Subject to pre-authorisation and use of the DSPN) | 100% Profmed Negotiated Tariff R35 400 per family, subject to PMB legislation | 100% Profmed Negotiated Tariff R23 600 per family, subject to PMB legislation | | 100% Profmed Negotiated Tariff R17 700 per family, subject to PMB legislation | |
| b) Out-of-hospital consultations, subject to PMB legislation | R6 000 per family Subject to 1E6(a) in-hospital limit | R6 000 per family Subject to 1E6(a) in-hospital limit | | R6 000 per family Subject to 1E6(a) in-hospital limit PMBs only | |
| 1E7 Endoscopic examinations In suitably equipped procedure room, subject to protocols and PMB legislation and use of the DSPN. Co-payment applies for voluntary use of a non-DSP. | | | | | |
| a) Gastroscopy (Subject to pre-authorisation and use of the DSPN) | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| b) Colonoscopy Includes Sigmoidoscopy (Subject to pre-authorisation and use of the DSPN) | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| c) Colonoscopy and Gastroscopy Combined procedure (Subject to pre-authorisation and use of the DSPN) | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| 1F Other Medical Services Call 0860 776 363 for authorisation, information on clinical qualifying criteria and benefits. | | | | | |
| 1F1 Physiotherapy | | | | | |
| a) In-hospital (Subject to pre-authorisation) | 100% Profmed Tariff | 100% Profmed Tariff | | 100% Profmed Tariff | |
| b) Out-of-hospital Post-operative, available up to 6 weeks after related hospital procedure (Subject to pre-authorisation) | 100% Profmed Tariff M R2 700 Maximum R4 500 per family | 100% Profmed Tariff M R2 000 Maximum R3 200 per family | | No benefit, subject to PMB legislation | |
| 1F2 Blood transfusions (Subject to pre-authorisation) | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| 1F3 Emergency medical transport. Emergencies within the borders of South Africa and within the country of residence in the SADC Region. Contact 0861 776 363 within RSA; +27 11 541 1225 within SADC Region. (See Section 7 for International Travel Medical Assistance.) (Subject to Profmed protocols and use of DSPN) | 100% of cost | 100% of cost | | 100% of cost | |

SCHEDULE OF BENEFITS

| BENEFIT | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
|--|---|---|------------------------------|---|------------------------------|
| 1F4 Internal surgical devices A fabricated or artificial substitute that is surgically implanted permanently into the body and does not protrude from the body and replaces or assists a diseased or missing part of the body to restore functionality. Subject to PMB legislation. | | | | | |
| a) Major (Subject to pre-authorisation, protocols and management) | 100% Profmed Negotiated Tariff R46 000 per family | 100% Profmed Negotiated Tariff R46 000 per family | | 100% Profmed Negotiated Tariff R46 000 per family | |
| b) Intraocular lenses Cataract surgery only (Subject to pre-authorisation, protocols and management) | R4 350 per beneficiary per event | R4 350 per beneficiary per event | | R4 350 per beneficiary per event | |
| 1F5 Cochlear implants Excluding upgrade/ replacement of external appliance (Subject to pre-authorisation) | 100% Profmed Negotiated Tariff R94 000 per family | 100% Profmed Negotiated Tariff R88 000 per family | | 100% Profmed Negotiated Tariff R58 000 per family | |
| 1G Dental Procedures in Hospital Call 0860 776 363 for authorisation, information on clinical qualifying criteria and benefits. Dental hospitalisation, dentist, specialist and anaesthetist fees for permanent tooth impaction removals are paid from risk, subject to pre-authorisation and protocols. Dentist fees in hospital for other authorised procedures are paid from the available day-to-day dentistry benefit and anaesthetist fees are paid from risk. Subject to PMB legislation. | | | | | |
| *Specific cases covered subject to pre-authorisation: Extensive conservative dental treatment in children younger than 8 years – 24-month benefit; Permanent tooth impaction removal. | | | | | |
| 1G1 In-hospital dentistry Including conservative and advanced dentistry (Subject to pre-authorisation, protocols and management) | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff *Specific cases only | |
| a) Specialist and anaesthetist fees | 100% Profmed Premium Tariff | 100% Profmed Plus Tariff | 100% Profmed Specific Tariff | 100% Profmed Plus Tariff | 100% Profmed Specific Tariff |
| b) Dentist fees | 100% Profmed Dental Tariff | 100% Profmed Dental Tariff | | 100% Profmed Dental Tariff | |
| 1G2 Functional orthognathic surgery Includes all costs related to the admission and procedure, e.g. all medical practitioner fees, hospitalisation, etc. (Subject to pre-authorisation) | R32 000 per family | No benefit | | No benefit | |
| 2. Preventative Care Benefits are subject to specific protocols and the use of the DSPN. Co-payment applies for voluntary use of non-DSP. | | | | | |
| 2.1 Prostate Specific Antigen (PSA) Males 40 years and older. Subject to PMB legislation. | | | | | |
| Pathology (Subject to use of the DSPN) (Tariff code 4519) | 100% Profmed Negotiated Tariff 1 investigation per beneficiary | 100% Profmed Negotiated Tariff 1 investigation per beneficiary | | 100% Profmed Negotiated Tariff 1 investigation per beneficiary | |
| 2.2 Pap smear or liquid-based cytology Females 18 years and older. Subject to PMB legislation. | | | | | |
| Pathology (Subject to use of the DSPN) (Tariff code 4566 – Pap smear. Tariff codes 4559 and 4560 – liquid-based cytology reimbursed per tariff code 4566) | 100% Profmed Negotiated Tariff 1 investigation per beneficiary | 100% Profmed Negotiated Tariff 1 investigation per beneficiary | | 100% Profmed Negotiated Tariff 1 investigation per beneficiary | |
| 2.3 Mammograms Females 40 years and older. Available to females younger than 40 years pre-disposed to breast cancer, subject to motivation. Subject to PMB legislation. | | | | | |
| Radiology | 100% Profmed Tariff 1 investigation per beneficiary | 100% Profmed Tariff 1 investigation per beneficiary | | 100% Profmed Tariff 1 investigation per beneficiary | |

SCHEDULE OF BENEFITS

| BENEFIT | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
|--|--|--|-----------|---|-----------|
| <p>2.4 Fasting lipogram blood test Males and females 40 years and older. Subject to PMB legislation.</p> <p>Pathology (Subject to use of the DSPN) (Tariff code 4025)</p> | 100% Profmed Negotiated Tariff 1 investigation per beneficiary | 100% Profmed Negotiated Tariff 1 investigation per beneficiary | | 100% Profmed Negotiated Tariff 1 investigation per beneficiary | |
| <p>2.5 Fasting blood sugar test For late onset diabetes. Males and females 40 years and older. Subject to PMB legislation.</p> <p>Pathology (Subject to use of the DSPN) (Tariff code 4057)</p> | 100% Profmed Negotiated Tariff 1 investigation per beneficiary | 100% Profmed Negotiated Tariff 1 investigation per beneficiary | | 100% Profmed Negotiated Tariff 1 investigation per beneficiary | |
| <p>2.6 Influenza vaccine Vaccine only</p> | 100% Single Exit Price and dispensing fee at DSPN rate 1 vaccination per beneficiary | 100% Single Exit Price and dispensing fee at DSPN rate 1 vaccination per beneficiary | | 100% Single Exit Price and dispensing fee at DSPN rate 1 vaccination per beneficiary | |
| <p>2.7 Human papilloma virus (HPV) vaccine Females 9 to 27 years of age. Includes initial vaccination and two follow-up booster vaccinations, where applicable. Subject to PMB legislation.</p> <p>Vaccine only</p> | 100% Single Exit Price and dispensing fee at DSPN rate | 100% Single Exit Price and dispensing fee at DSPN rate | | 100% Single Exit Price and dispensing fee at DSPN rate | |
| <p>2.8 Child immunisations Children 0 to 6 years, per the Department of Health's Childhood Immunisation Schedule. Subject to PMB legislation.</p> <p>Vaccine only</p> | 100% Single Exit Price and dispensing fee at DSPN rate | 100% Single Exit Price and dispensing fee at DSPN rate | | 100% Single Exit Price and dispensing fee at DSPN rate | |
| <p>2.9 Pneumococcal vaccine Adults 65 years and older and individuals of all ages who are respiratory or immuno-compromised. Subject to PMB legislation.</p> <p>Vaccine only</p> | 100% Single Exit Price and dispensing fee at DSPN rate | 100% Single Exit Price and dispensing fee at DSPN rate | | 100% Single Exit Price and dispensing fee at DSPN rate | |
| <p>2.10 Consultation Includes any consultation in relation to the Preventative Care benefit</p> | 100% Profmed Premium Tariff for GPs and specialists 1 consultation per beneficiary, thereafter subject to available day-to-day limit | 100% Profmed Specific Tariff for GPs (R415) and specialists (R630) 1 consultation per beneficiary, thereafter subject to available day-to-day limit | | 100% Profmed Specific Tariff at GP rate (R415) 1 consultation per beneficiary, thereafter subject to PMB legislation | |
| <p>3. Contraceptives Funding only applies for contraceptive purposes. Protocols apply.</p> | | | | | |
| <p>Including oral contraceptives, patches, injections, implants and intra-uterine devices.</p> <ul style="list-style-type: none"> • Oral contraceptives and patches: every 20 days • Injections: 3 to 6 month cycle • Intra-uterine devices and implants: 3 to 5 year cycle | 100% Single Exit Price and dispensing fee at DSPN rate MMAP® applies Maximum R1 640 per beneficiary Not subject to day-to-day limit | 100% Single Exit Price and dispensing fee at DSPN rate MMAP® applies Maximum R1 640 per beneficiary Not subject to day-to-day limit | | 100% Single Exit Price and dispensing fee at DSPN rate MMAP® applies Maximum R1 640 per beneficiary | |

SCHEDULE OF BENEFITS

4. Chronic Medication Conditions

ProPinnacle

57 conditions plus relevant DTPs

CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.

Other: Allergic Rhinitis (in patients with asthma), Alzheimer's Disease, Ankylosing Spondylitis, Benign Prostatic Hypertrophy, Cushing's Syndrome, Cystic Fibrosis, Deep Vein Thrombosis, Gastro-Oesophageal Reflux Disorder, Gout, Hypoparathyroidism, Hyperthyroidism, Major Depressive Disorder, Malabsorption Syndrome, Meniere's Disease, Motor Neuron Disease, Myasthenia Gravis, Obsessive Compulsive Disorder, Oncology Adjunctive Treatment, Osteoarthritis, Osteoporosis, Paget's Disease, Paraplegia & Quadriplegia, Peripheral Vascular Disease, Pituitary Adenomas/Hyperfunction of Pituitary Gland, Post-Organ Transplant (non-DTP), Psoriatic Arthritis, Pulmonary Interstitial Fibrosis, Stroke/Cerebrovascular Accident, Systemic Connective Tissue Disorders, Tuberculosis, Valvular Heart Disease.

DTPs: Relevant chronic conditions listed in the 270 PMBs, e.g. hormone replacement therapy (Menopause), immuno-suppressive therapy (Post-Organ Transplants).

ProSecure Plus & ProSecure

39 conditions plus relevant DTPs

CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.

Other: Allergic Rhinitis (in patients with asthma), Alzheimer's Disease, Ankylosing Spondylitis, Benign Prostatic Hypertrophy, Major Depressive Disorder, Obsessive Compulsive Disorder, Oncology Adjunctive Treatment, Osteoporosis, Paraplegia & Quadriplegia, Pituitary Adenomas/Hyperfunction of Pituitary Gland, Psoriatic Arthritis, Pulmonary Interstitial Fibrosis, Valvular Heart Disease.

DTPs: Relevant chronic conditions listed in the 270 PMBs, e.g. hormone replacement therapy (Menopause), immuno-suppressive therapy (Post-Organ Transplants).

ProActive Plus & ProActive

26 conditions plus relevant DTPs

CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.

DTPs: Relevant chronic conditions listed in the 270 PMBs, e.g. hormone replacement therapy (Menopause), immuno-suppressive therapy (Post-Organ Transplants).

BENEFIT

ProPinnacle

ProSecure Plus

ProSecure

ProActive Plus

ProActive

4. Chronic Medication Benefit

The formulary and reference pricing will be most restrictive on the ProActive options and least restrictive on the ProPinnacle option. MMAP[®] applies. The conditions covered on each option are listed below. The Condition Medicine List (CML), including the list of chronic diseases (CDL), is available on the Profmed website at www.profmed.co.za. Subject to the use of the DSPN. Co-payment applies for voluntary use of a non-DSP. Claims from wholesale pharmacies will not be accepted. Call 0860 679 200 for information on clinical qualifying criteria and benefits. Furthermore, where a protocol or a formulary drug preferred by the Scheme has been ineffective or would cause harm to a beneficiary, the Scheme will fund the cost of the appropriate substitution treatment without a penalty to the beneficiary as required by Regulations 15H and 15I of the Act.

CDLs, other chronic conditions and relevant DTPs as listed above. 24-day dispensing cycle applies (Attending doctor or pharmacist to call 0800 132 345 to register condition and authorise medication)

100% Single Exit Price and dispensing fee
57 conditions covered and relevant DTPs
Unlimited, subject to Profmed formulary and reference price

100% Single Exit Price and dispensing fee
39 conditions covered and relevant DTPs
Subject to Profmed formulary and reference price
M R14 900
M+1 R24 400
Maximum R33 800 per family

100% Single Exit Price and dispensing fee
Restricted to 26 CDL conditions and relevant DTPs, subject to PMB legislation
Subject to Profmed formulary and strict reference price

SCHEDULE OF BENEFITS

| BENEFIT | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
|---|---|---|-----------|---|-----------|
| 5. Day-to-day Cover All sub-limits for out-of-hospital benefits set out in this section, and benefits subject to the day-to-day limit in other sections of this Schedule, are subject to the availability of the annual overall day-to-day limit, subject to PMB legislation. | | | | | |
| Annual overall day-to-day limit Available only through relevant available day-to-day sub-limits, where applicable | M R16 000 M+1 R23 700 Maximum R30 800 per family | M R10 000 M+1 R15 200 Maximum R19 600 per family | | Dentistry only: M R525 Maximum R1 500 per family (See Section 5E) Other: No benefit, subject to PMB legislation | |
| 5A General Practitioners (GPs) and Specialists | | | | | |
| 5A1 Visits and consultations | 100% Profmed Premium Tariff Subject to day-to-day limit | 100% Profmed Specific Tariff Subject to day-to-day limit | | No benefit, subject to PMB legislation | |
| 5A2 Non-hospital procedures in doctor's rooms | 100% Profmed Premium Tariff Subject to day-to-day limit | 100% Profmed Specific Tariff Subject to day-to-day limit | | No benefit, subject to PMB legislation | |
| 5A3 Psychiatric consultations (out-of-hospital) (See Section 1E6) | 100% Profmed Premium Tariff Paid from Psychiatric benefit Not subject to day-to-day limit | 100% Profmed Specific Tariff Paid from Psychiatric benefit Not subject to day-to-day limit | | No benefit. PMBs paid from Psychiatric 1E6 benefit Subject to PMB legislation | |
| 5A4 Clinical psychology (out-of-hospital) (See Section 1E6) | 100% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit | 100% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit | | No benefit. PMBs paid from Psychiatric 1E6 benefit, subject to PMB legislation | |
| 5A5 Radiology and pathology (Excluding MRI and CT scans) | 80% Profmed Tariff Subject to day-to-day limit | 80% Profmed Tariff Subject to day-to-day limit | | No benefit, subject to PMB legislation | |
| 5A6 MRI, radio-isotope and CT scans <i>Specialist referral required, except for CT scans</i> (See Section 1D2) (Subject to pre-authorisation. Call 0860 776 363 for authorisation and protocols) | 80% Profmed Tariff 2 investigations per family in- or out-of-hospital Not subject to day-to-day limit | 80% Profmed Tariff 2 investigations per family in- or out-of-hospital Subject to day-to-day limit out-of-hospital | | No benefit, subject to PMB legislation | |
| 5A7 Emergency room visits and facility fees at hospitals that do not result in hospitalisation | 100% Profmed Negotiated Tariff Subject to day-to-day limit | 100% Profmed Negotiated Tariff Subject to day-to-day limit | | No benefit, subject to PMB legislation | |
| 5B Acute Medication | | | | | |
| 5B1 Prescribed acute medication Subject to use of DSPN. Co-payment applies for voluntary use of a non-DSP. Wholesale pharmacy claims will not be accepted. (Certain medication on repeat script will be funded from this benefit. Call 0860 679 200 for more information) | 80% Single Exit Price and dispensing fee M R9 000 M+1 R12 000 M+2 R12 800 M+3 R14 200 Maximum R16 800 per family MMAP® applies Subject to day-to-day limit | 80% Single Exit Price and dispensing fee M R3 250 M+1 R4 865 M+2 R5 370 M+3 R5 570 Maximum R6 000 per family MMAP® applies Subject to day-to-day limit | | No benefit, subject to PMB legislation | |
| 5B2 Over-the-counter medication (See Section 5B1) | 80% of cost R1 700 per family Subject to acute medication and day-to-day limit | 80% of cost R1 370 per family Subject to acute medication and day-to-day limit | | No benefit | |

SCHEDULE OF BENEFITS

| BENEFIT | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
|---|---|--|-----------|--|-----------|
| 5C Supplementary Benefits | | | | | |
| 5C1 a) External prostheses and appliances Includes insulin pumps, hearing aids, home oxygen therapy and stoma bags. <ul style="list-style-type: none"> Hearing aids: 1 pair every 24 months Insulin pumps: 1 every 48 months Home oxygen: subject to use of the DSPN. Co-payment applies for voluntary use of a non-DSP (Subject to protocols and pre-authorisation. Call 0860 776 363 for authorisation and protocols) | 100% Profmed Negotiated Tariff R18 800 per family Hearing aids only: Additional R3 550 per family Not subject to day-to-day limit | 100% Profmed Negotiated Tariff R12 500 per family Hearing aids only: Additional R5 900 per family Not subject to day-to-day limit | | No benefit, subject to PMB legislation | |
| b) Other Includes orthopaedic braces, wheel chairs, walking frames and crutches | 100% Profmed Negotiated Tariff R4 600 per family Subject to day-to-day limit | 100% Profmed Negotiated Tariff R3 300 per family Subject to day-to-day limit | | No benefit, subject to PMB legislation | |
| 5C2 Supplementary services <ul style="list-style-type: none"> Audiometrists Biokineticists Chiropractors Dieticians Occupational therapists Speech therapists Physiotherapists Podiatrists | 100% Profmed Tariff M R2 600 Maximum R4 500 per family Subject to day-to-day limit, and PMB legislation | 100% Profmed Tariff M R2 400 Maximum R4 000 per family Subject to day-to-day limit, and PMB legislation | | No benefit, subject to PMB legislation | |
| 5C3 Alternative health practitioners Including homeopaths and homeopathic medication. Practitioners must be registered with The Allied Health Professions Council | 80% of cost R2 200 per family R670 per family sub-limit for homeopathic medication Subject to day-to-day limit | No benefit | | No benefit | |
| 5D Optical Services Benefits are subject to protocols and are applied over a 24-month period. Lenses are limited to contact lenses OR spectacle lenses. | | | | | |
| 5D1 Eye examinations | 100% Profmed Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation | 100% Profmed Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation | | No benefit, subject to PMB legislation | |
| 5D2 Spectacles a) Lenses (generic) Single vision, bi-focal and varifocal | 100% Profmed Optical Tariff 24-month benefit Subject to day-to-day limit | 100% Profmed Optical Tariff 24-month benefit Subject to day-to-day limit | | No benefit | |
| b) Extras | 100% Profmed Optical Tariff for generic hard-coating and generic plastic anti-reflex coating 24-month benefit Subject to day-to-day limit | 100% Profmed Optical Tariff for generic hard-coating 24-month benefit Subject to day-to-day limit | | No benefit | |
| c) Frames | R1 120 per beneficiary 24-month benefit Subject to day-to-day limit | R815 per beneficiary 24-month benefit Subject to day-to-day limit | | No benefit | |

SCHEDULE OF BENEFITS

| BENEFIT | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
|--|--|--|-----------|---|-----------|
| 5D3 Contact lenses (clear) | R2 750 per beneficiary 24-month benefit Subject to day-to-day limit | R1 615 per beneficiary 24-month benefit Subject to day-to-day limit | | No benefit | |
| 5D4 Refractive eye surgery Includes all costs related to the admission and procedure, all medical practitioner fees, hospitalisation, etc. (Subject to protocols and pre-authorisation. Call 0860 776 363 for authorisation and protocols) | R3 125 per beneficiary Not subject to day-to-day limit | No benefit | | No benefit | |
| 5E Dentistry Benefits are subject to protocols and management. (See Section 1G for dentist and specialist fees in-hospital) | | | | | |
| Conservative and advanced dentistry Orthodontics available only up to age 18. (Orthodontics and implants subject to pre-authorisation. Call 0860 679 200 for authorisation and protocols) | 100% Profmed Dental Tariff R6 120 per beneficiary Maximum R12 240 per family Not subject to day-to-day limit | 100% Profmed Dental Tariff R5 210 per beneficiary Maximum R10 500 per family Not subject to day-to-day limit | | 100% Profmed Dental Tariff R525 per beneficiary Maximum R1 500 per family (See Section 5) | |
| 5F Trauma and HIV Assistance Programme Benefit covers trauma and HIV exposure as a result of crime, e.g. assault or rape, and HIV exposure resulting from crime and occupational injuries, e.g. needle-stick injury. Where relevant, victims will be accompanied by an appropriate, qualified professional to identity parades and court appearances for emotional support. Call 0861 776 363 for 24-hour assistance. Benefits are subject to the use of the DSP. Co-payment applies for voluntary use of a non-DSP. Subject to case management and protocols. | | | | | |
| 5F1 Counselling a) Telephonic counselling | 100% Profmed Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Not subject to day-to-day limit | 100% Profmed Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Not subject to day-to-day limit | | 100% Profmed Negotiated Tariff Appropriate number of sessions as determined by the designated case manager | |
| b) Face-to-face counselling | 100% Profmed Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Thereafter, paid from Psychiatric (1E6) benefit and subject to PMB legislation Not subject to day-to-day limit | 100% Profmed Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Thereafter, paid from Psychiatric (1E6) benefit and subject to PMB legislation Not subject to day-to-day limit | | 100% Profmed Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Thereafter, paid from Psychiatric (1E6) benefit and subject to PMB legislation | |
| 5F2 HIV post-exposure management 2 doctor's consultations, 30 days' PEP medication, pathology and 3 - 6 months' HIV exposure management | 100% Profmed Negotiated Tariff 1 course of treatment per beneficiary per incident at DSP Subject to PMB legislation Not subject to day-to-day limit | 100% Profmed Negotiated Tariff 1 course of treatment per beneficiary per incident at DSP Subject to PMB legislation Not subject to day-to-day limit | | 100% Profmed Negotiated Tariff 1 course of treatment per beneficiary per incident at DSP Subject to PMB legislation | |

SCHEDULE OF BENEFITS

| BENEFIT | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
|--|---|---|--|--|------------------------------|
| 6. Maternity Call 0860 776 363 where pre-authorisation is required and for more information on clinical qualifying criteria and benefits. Subject to PMB legislation. Expectant mothers can contact 0860 776 363 to access the Profmed Baby Programme. | | | | | |
| 6A Day-to-day Cover | | | | | |
| 6A1 Ultra-sound scans (ante-natal) | 100% Profmed Tariff 2 scans per pregnancy Subject to day-to-day limit | 100% Profmed Tariff 2 scans per pregnancy Subject to day-to-day limit | | No benefit, subject to PMB legislation | |
| 6A2 Consultations Ante-/post-natal consultations by a medical practitioner | 100% Profmed Premium Tariff 13 visits per pregnancy Subject to day-to-day limit | 100% Profmed Specific Tariff 13 visits per pregnancy Subject to day-to-day limit | | No benefit, subject to PMB legislation | |
| 6A3 Consultations Ante-/post-natal consultations by a registered midwife | 100% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit | 100% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit | | No benefit, subject to PMB legislation | |
| 6A4 Out-patient visits to hospital/clinic for investigations, e.g. tococardiography | 80% Profmed Tariff Subject to day-to-day limit | 80% Profmed Tariff Subject to day-to-day limit | | No benefit, subject to PMB legislation | |
| 6A5 Ante-natal exercises by registered healthcare practitioner | 80% Profmed Tariff R900 per family Subject to day-to-day limit | No benefit | | No benefit | |
| 6A6 Prescribed medication during pregnancy (See Section 5B1) | 80% Single Exit Price and dispensing fee Paid from acute medication limit, subject to the availability of funds Subject to day-to-day limit | 80% Single Exit Price and dispensing fee Paid from acute medication limit, subject to the availability of funds Subject to day-to-day limit | | No benefit, subject to PMB legislation | |
| 6B Hospitalisation | | | | | |
| 6B1 In-patient hospitalisation (ante-natal) (Subject to pre-authorisation) | 100% Profmed Negotiated Tariff in private ward | 100% Profmed Negotiated Tariff in general ward | | 100% Profmed Negotiated Tariff in general ward | |
| 6B2 Delivery fee by GP or specialist | 100% Profmed Premium Tariff | 100% Profmed Plus Tariff | 100% Profmed Specific Tariff | 100% Profmed Plus Tariff | 100% Profmed Specific Tariff |
| 6B3 Delivery fee by registered midwife | 100% Profmed Tariff | 100% Profmed Tariff | | 100% Profmed Tariff | |
| 6B4 Labour ward | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| 6B5 Ward accommodation (post-delivery): Normal delivery – 3 days Caesarean section – 4 days | 100% Profmed Negotiated Tariff in private ward | 100% Profmed Negotiated Tariff in private ward | 100% Profmed Negotiated Tariff in general ward | 100% Profmed Negotiated Tariff in general ward | |
| 6B6 Theatre and recovery room | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |
| 6B7 Other medical practitioner services, e.g. pathology and radiology while in hospital | 100% Profmed Tariff | 100% Profmed Tariff | | 100% Profmed Tariff | |
| 6B8 Consultations while in hospital | 100% Profmed Premium Tariff | 100% Profmed Plus Tariff | 100% Profmed Specific Tariff | 100% Profmed Plus Tariff | 100% Profmed Specific Tariff |
| 6B9 Home nursing (post-natal) 48-hour benefit in the event of a home delivery or if discharged from a birthing unit within 24 hours after delivery (Subject to pre-authorisation) | Subject to Section 1E5(a) of this Schedule | Subject to Section 1E5(a) of this Schedule | | Subject to Section 1E5(a) of this Schedule | |
| 6B10 Neonatal care Neonate must be registered as a dependant on Profmed (Subject to pre-authorisation) | 100% Profmed Negotiated Tariff | 100% Profmed Negotiated Tariff | | 100% Profmed Negotiated Tariff | |

SCHEDULE OF BENEFITS

| BENEFIT | ProPinnacle | ProSecure Plus | ProSecure | ProActive Plus | ProActive |
|--|---|--|-----------|--|-----------|
| <p>7. International Travel Medical Assistance This benefit covers members for medical emergencies while travelling internationally. Members who live outside South Africa in the SADC Region are covered under this benefit when travelling outside the borders of their country of residence, except to South Africa where option-specific benefits apply. Consult the International Travel Medical Assistance Benefit Document available on the website for the benefits, restrictions, exclusions and claims process.</p> <p>For medical assistance while travelling, it is necessary to call International SOS on +27 11 541 1225 prior to receiving treatment to avoid a co-payment. The Information Guide contains more information on the claims process and details of this benefit, or call 0860 679 200. Subject to case management and protocols.</p> | | | | | |
| <p>In- and out-of-hospital emergency medical expenses Out-of-hospital expenses exceeding R1 000 and hospitalisation must be pre-authorised. (Benefits subject to protocols and pre-authorisation. Call +27 11 541 1225)</p> | <p>R6 million per beneficiary per journey R1 000 excess per beneficiary per journey on out-of-hospital expenses. Out-of-hospital benefits only available if the claim relates to day-to-day benefits available on this option Spectacles or contact lenses limited to R3 000, subject to the R1 000 excess</p> | <p>R6 million per beneficiary per journey R1 000 excess per beneficiary per journey on out-of-hospital expenses. Out-of-hospital benefits only available if the claim relates to day-to-day benefits available on this option Spectacles or contact lenses limited to R3 000, subject to the R1 000 excess</p> | | <p>R6 million per beneficiary per journey No benefit for out-of-hospital expenses</p> | |

Contributions and benefits are subject to ratification by the Council for Medical Schemes.

This published Schedule is subject to the rules approved by the Board of Trustees and in the event of a dispute the approved rules of the Scheme will prevail.

All benefits are subject to the PMB legislation.

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HEALTHCARE FOR PROFESSIONALS

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11/2016