



PROFMED

2016

SCHEDULE OF BENEFITS

Applicable 1 January 2016 to 31 December 2016.

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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2016

Contributions

CONTRIBUTION TABLE

Monthly Income R0 - R5 000					
	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
Adult					R581
Adult dependant					R581
Child					R372

Monthly Income R5 001 - R9 000					
	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
Adult			R1 858		R960
Adult dependant			R1 858		R960
Child			R842		R430

Monthly Income R9 001 +					
	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
Adult	R5 316	R3 174	R2 584	R1 451	R1 289
Adult dependant	R4 931	R2 937	R2 392	R1 348	R1 191
Child	R1 330	R1 237	R1 008	R566	R502

Notes:

1. Members applying for the rates below R9 000 monthly income must submit proof of gross monthly income from all sources.
2. Adult dependant rates apply from age 21. Thereafter rates will default to adult dependant rates.
3. 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.
4. Proof of dependence 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 (to activate cover)	0860 679 200	+27 11 541 1225	–
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
Multiply Wellness Programme & Momentous Baby	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

Emergency Telephone Number

	Within and Outside RSA
Emergency medical transport within RSA & SADC Region	+27 11 541 1225
Medical assistance while travelling internationally	
Assistance for trauma and HIV exposure	

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 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. 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 provider (DSP) or network of providers (DSPN) who are contracted by the Scheme to provide services, treatment, medicine or facilities to members in terms of both PMBs and non-PMBs. 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. 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, 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 2015 Profmed Tariff plus 6% 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: R395 for GPs and R600 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
Chronic Dialysis	National Renal Care
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

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.

“ The one who walks alone,
is likely to find himself
in places where no one else has been. ”
Albert Einstein

SCHEDULE OF BENEFITS

ProPinnacle

BENEFIT		
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
1A2	Theatre and recovery room	100% Profmed Negotiated Tariff
1A3	Intensive care and high care (Subject to confirmation every 72 hours)	100% Profmed Negotiated Tariff
1A4	Emergency room visits and facility fees at hospitals that result in hospitalisation	100% Profmed Negotiated Tariff
1B Medicines in Hospital		
1B1	Medicines and materials used in hospital and theatre	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 Paid from acute medicine benefit, subject to the availability of funds
1C General Practitioners (GPs) and Specialists in Hospital		
1C1	Surgery and in-hospital procedures	100% Profmed Premium Tariff
1C2	Visits and consultations by a GP or specialist while hospitalised	100% Profmed Premium 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
1D2	MRI, radio-isotope and CT scans and certain other investigative procedures in hospital <i>Specialist referral only</i> (See Section 5A6) (Subject to pre-authorisation)	100% Profmed Tariff 2 investigations per family in- or out-of-hospital
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
	b) Donor costs PMBs only (Subject to pre-authorisation and protocols)	100% Profmed Negotiated Tariff

ProSecure Plus

ProSecure

ProActive Plus

ProActive

ProSecure Plus		ProSecure		ProActive Plus		ProActive	
100% Profmed Negotiated Tariff in general ward							
100% Profmed Negotiated Tariff				100% Profmed Negotiated Tariff			
100% Profmed Negotiated Tariff				100% Profmed Negotiated Tariff			
100% Profmed Negotiated Tariff				100% Profmed Negotiated Tariff			
100% Profmed Negotiated Tariff							
80% Profmed Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds				No benefit, subject to PMB legislation			
100% Profmed Plus Tariff		100% Profmed Specific Tariff		100% Profmed Plus Tariff		100% Profmed Specific Tariff	
100% Profmed Plus Tariff		100% Profmed Specific Tariff		100% Profmed Plus Tariff		100% Profmed Specific Tariff	
100% Profmed Tariff				100% Profmed Tariff			
100% Profmed Tariff 2 investigations per family in- or out-of-hospital				100% Profmed Tariff 2 investigations per family in-hospital only			
100% Profmed Negotiated Tariff							
100% Profmed Negotiated Tariff				100% Profmed Negotiated Tariff			

SCHEDULE OF BENEFITS

ProPinnacle

BENEFIT	
<p>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)</p>	100% Profmed Negotiated Tariff
<p>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.</p> <p>a) Chemotherapy (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation)</p>	
<p>i) Consultations and facility fees</p>	100% Profmed Premium Tariff
<p>ii) Chemotherapy drugs (Subject to formulary, reference pricing, MMAP® and protocols)</p>	100% Single Exit Price and dispensing fee
<p>b) Radiation therapy (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation)</p>	
<p>i) Consultations</p>	100% Profmed Premium Tariff
<p>ii) Radiation therapy and facility fees (Subject to use of the DSPN)</p>	100% Profmed Negotiated Tariff
<p>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)</p>	100% Profmed Negotiated Tariff
<p>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.</p>	
<p>(Subject to pre-authorisation and use of the DSPN)</p>	100% Profmed Negotiated Tariff R67 416 per family
<p>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)</p>	100% Profmed Negotiated Tariff R14 606 per beneficiary
<p>b) Wound care Treatment at home, including surgicals, by an appropriately registered practitioner (Subject to pre-authorisation and protocols)</p>	100% Profmed Negotiated Tariff R5 618 per beneficiary
<p>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.</p>	
<p>a) In-hospital (Subject to pre-authorisation and use of the DSPN)</p>	100% Profmed Negotiated Tariff R33 708 per family, subject to PMB legislation

ProSecure Plus

ProSecure

ProActive Plus

ProActive

ProSecure Plus	ProSecure	ProActive Plus	ProActive
100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
100% Profmed Specific Tariff		100% Profmed Specific Tariff	
100% Single Exit Price and dispensing fee		100% Single Exit Price and dispensing fee	
100% Profmed Specific Tariff		100% Profmed Specific Tariff	
100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
100% Profmed Negotiated Tariff R44 944 per family		100% Profmed Negotiated Tariff R22 472 per family	
100% Profmed Negotiated Tariff R12 359 per beneficiary		100% Profmed Negotiated Tariff R10 674 per beneficiary	
100% Profmed Negotiated Tariff R3 370 per beneficiary		100% Profmed Negotiated Tariff R2 809 per beneficiary	
100% Profmed Negotiated Tariff R22 472 per family, subject to PMB legislation		100% Profmed Negotiated Tariff R16 854 per family, subject to PMB legislation	

SCHEDULE OF BENEFITS

ProPinnacle

BENEFIT		
	b) Out-of-hospital consultations, subject to PMB legislation	R5 898 per family Subject to 1E6(a) in-hospital limit
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-authorization and use of the DSPN)	100% Profmed Negotiated Tariff
	b) Colonoscopy Includes sigmoidoscopy (Subject to pre-authorization and use of the DSPN)	100% Profmed Negotiated Tariff
	c) Colonoscopy and gastroscopy Combined procedure (Subject to pre-authorization and use of the DSPN)	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-authorization)	100% Profmed Tariff
	b) Out-of-hospital Post-operative, available up to 6 weeks after related hospital procedure (Subject to pre-authorization)	100% Profmed Tariff M R2 584 Maximum R4 346 per family
1F2	Blood transfusions (Subject to pre-authorization)	100% Profmed Negotiated Tariff
1F3	Emergency medical transport Emergencies within the borders of the country of residence. Contact International SOS within RSA on 0861 776 363 ; within SADC Region on +27 11 541 1225 (See Section 7 for International Travel Medical Assistance)	100% of cost Subject to Profmed protocols
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-authorization, protocols and management)	100% Profmed Negotiated Tariff R43 820 per family
	b) Intraocular lenses Cataract surgery only (Subject to pre-authorization, protocols and management)	R4 157 per beneficiary per event
1F5	Cochlear implants Excluding upgrade/replacement of external appliance (Subject to pre-authorization)	100% Profmed Negotiated Tariff R89 888 per family

ProSecure Plus

ProSecure

ProActive Plus

ProActive

ProSecure Plus	ProSecure	ProActive Plus	ProActive
R5 898 per family Subject to 1E6(a) in-hospital limit		R5 898 per family Subject to 1E6(a) in-hospital limit PMBs only	
100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
100% Profmed Tariff		100% Profmed Tariff	
100% Profmed Tariff M R1 966 Maximum R3 095 per family		No benefit, subject to PMB legislation	
100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
100% of cost Subject to Profmed protocols		100% of cost Subject to Profmed protocols	
100% Profmed Negotiated Tariff R43 820 per family		100% Profmed Negotiated Tariff R43 820 per family	
R4 157 per beneficiary per event		R4 157 per beneficiary per event	
100% Profmed Negotiated Tariff R84 270 per family		100% Profmed Negotiated Tariff R56 180 per family	

SCHEDULE OF BENEFITS

ProPinnacle

BENEFIT

1G Dental Procedures in Hospital

Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits. Dental hospitalisation is paid from risk, subject to pre-authorisation and protocols. Dentist and specialist fees in hospital are paid from the available day-to-day dentistry benefit. Anaesthetist fees are paid from risk. Subject to PMB legislation.

*Specific cases covered subject to pre-authorisation: Extensive conservative dental treatment in children 8 years and younger – 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

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)

R30 750 per family

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.

a) Consultation
(ICD-10 codes: Z29.8 or Z13.9)

100% Profmed Premium Tariff for GPs and specialists
1 consultation per beneficiary

b) Pathology
(Subject to use of the DSPN)
(Tariff code 4519)

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.

a) Consultation
(ICD-10 codes: Z12.4 or Z01.4)

100% Profmed Premium Tariff for GPs and specialists
1 consultation per beneficiary

b) 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

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.

a) Consultation

100% Profmed Premium Tariff for GPs and specialists
1 consultation per beneficiary
Subject to available day-to-day limit

b) Radiology

100% Profmed Tariff
1 investigation per beneficiary

2.4 Fasting lipogram blood test
Males and females 40 years and older. Subject to PMB legislation.

a) Consultation

100% Profmed Premium Tariff for GPs and specialists
1 consultation per beneficiary
Subject to available day-to-day limit

ProSecure Plus

ProSecure

ProActive Plus

ProActive

ProSecure Plus	ProSecure	ProActive Plus	ProActive
100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff *Specific cases only	
No benefit		No benefit	
100% Profmed Specific Tariff for GPs (R395) and specialists (R600) 1 consultation per beneficiary		100% Profmed Specific Tariff at GP rate (R395) 1 consultation per beneficiary	
100% Profmed Negotiated Tariff 1 investigation per beneficiary		100% Profmed Negotiated Tariff 1 investigation per beneficiary	
100% Profmed Specific Tariff for GPs (R395) and specialists (R600) 1 consultation per beneficiary		100% Profmed Specific Tariff at GP rate (R395) 1 consultation per beneficiary	
100% Profmed Negotiated Tariff 1 investigation per beneficiary		100% Profmed Negotiated Tariff 1 investigation per beneficiary	
100% Profmed Specific Tariff for GPs (R395) and specialists (R600) 1 consultation per beneficiary Subject to available day-to-day limit		No benefit, subject to PMB legislation	
100% Profmed Tariff 1 investigation per beneficiary		100% Profmed Tariff 1 investigation per beneficiary	
100% Profmed Specific Tariff for GPs (R395) and specialists (R600) 1 consultation per beneficiary Subject to available day-to-day limit		No benefit, subject to PMB legislation	

SCHEDULE OF BENEFITS

ProPinnacle

BENEFIT		ProPinnacle
	b) Pathology (Subject to use of the DSPN) (Tariff code 4025)	100% Profmed Negotiated Tariff 1 investigation per beneficiary
2.5	Fasting blood sugar test For late onset diabetes. Males and females 40 years and older. Subject to PMB legislation.	
	a) Consultation	100% Profmed Premium Tariff for GPs and specialists 1 consultation per beneficiary Subject to available day-to-day limit
	b) Pathology (Subject to use of the DSPN) (Tariff code 4057)	100% Profmed Negotiated Tariff 1 investigation per beneficiary
2.6	Influenza vaccine	
	a) Consultation	100% Profmed Premium Tariff for GPs and specialists 1 consultation per beneficiary Subject to available day-to-day limit
	b) Vaccine only	R68 per beneficiary 1 vaccination per beneficiary
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.	
	a) Consultation	100% Profmed Premium Tariff for GPs and specialists Subject to available day-to-day limit
	b) Vaccine only	100% Single Exit Price and dispensing fee at DSPN rate
2.8	Child immunisations Children 0 to 6 years, per the Department of Health's Childhood Immunisation Schedule. Subject to PMB legislation.	
	a) Consultation	100% Profmed Premium Tariff for GPs and specialists Subject to available day-to-day limit
	b) Vaccine only	100% Single Exit Price and dispensing fee at DSPN rate
2.9	Pneumococcal vaccine Adults 65 years and older and individuals of all ages who are respiratory or immuno-compromised. Subject to PMB legislation.	
	a) Consultation	100% Profmed Premium Tariff for GPs and specialists 1 consultation per beneficiary Subject to available day-to-day limit
	b) Vaccine only	100% Single Exit Price and dispensing fee at DSPN rate
3.	Contraceptives Funding only applies for contraceptive purposes. Protocols apply.	
	Including oral contraceptives, patches, injections, implants and intra-uterine devices. <ul style="list-style-type: none"> • Oral and patches: every 20 days • Injections: 3 to 6 month cycle • Intra-uterine devices and implants: 3 to 5 year cycle 	R120 per beneficiary per month Maximum R1 560 per beneficiary Not subject to day-to-day limit

ProSecure Plus	ProSecure	ProActive Plus	ProActive
100% Profmed Negotiated Tariff 1 investigation per beneficiary		100% Profmed Negotiated Tariff 1 investigation per beneficiary	
100% Profmed Specific Tariff for GPs (R395) and specialists (R600) 1 consultation per beneficiary Subject to available day-to-day limit		No benefit, subject to PMB legislation	
100% Profmed Negotiated Tariff 1 investigation per beneficiary		100% Profmed Negotiated Tariff 1 investigation per beneficiary	
100% Profmed Specific Tariff for GPs (R395) and specialists (R600) 1 consultation per beneficiary Subject to available day-to-day limit		No benefit	
R68 per beneficiary 1 vaccination per beneficiary		R68 per beneficiary 1 vaccination per beneficiary	
100% Profmed Specific Tariff for GPs (R395) and specialists (R600) Subject to available day-to-day limit		No benefit, subject to PMB legislation	
100% Single Exit Price and dispensing fee at DSPN rate		100% Single Exit Price and dispensing fee at DSPN rate	
100% Profmed Specific Tariff for GPs (R395) and specialists (R600) Subject to available day-to-day limit		No benefit, subject to PMB legislation	
100% Single Exit Price and dispensing fee at DSPN rate		100% Single Exit Price and dispensing fee at DSPN rate	
100% Profmed Specific Tariff for GPs (R395) and specialists (R600) 1 consultation per beneficiary Subject to available day-to-day limit		No benefit	
100% Single Exit Price and dispensing fee at DSPN rate		100% Single Exit Price and dispensing fee at DSPN rate	
R120 per beneficiary per month Maximum R1 560 per beneficiary Not subject to day-to-day limit		R120 per beneficiary per month Maximum R1 560 per beneficiary	

SCHEDULE OF BENEFITS

ProPinnacle

BENEFIT

4. Chronic Medication

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.

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), immunosuppressive therapy (Post-Organ Transplants).

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

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	R15 240
M+1	R22 578
Maximum	R29 351 per family

5A General Practitioners (GPs) and Specialists

5A1 Visits and consultations

100% Profmed Premium Tariff
Subject to day-to-day limit

5A2 Non-hospital procedures in doctor's rooms

100% Profmed Premium Tariff
Subject to day-to-day limit

5A3 Psychiatric consultations (out-of-hospital)
(See Section 1E6)

100% Profmed Premium Tariff
Paid from Psychiatric benefit
Not subject to day-to-day limit

ProSecure Plus

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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), immunosuppressive therapy (Post-Organ Transplants).

100% Single Exit Price and dispensing fee
39 conditions covered and relevant DTPs
Subject to Profmed formulary and reference price
M R14 270
M+1 R23 174
Maximum R32 156 per family

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), immunosuppressive therapy (Post-Organ Transplants).

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

M R9 707
M+1 R14 452
Maximum R18 627 per family

No benefit, subject to PMB legislation

100% Profmed Specific Tariff
Subject to day-to-day limit

No benefit, subject to PMB legislation

100% Profmed Specific Tariff
Subject to day-to-day limit

No benefit, subject to PMB legislation

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

SCHEDULE OF BENEFITS

ProPinnacle

BENEFIT		
5A4	Clinical psychology (out-of-hospital) (See Section 1E6)	100% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit
5A5	Radiology and pathology (Excluding MRI and CT scans)	80% Profmed Tariff Subject to day-to-day limit
5A6	MRI, radio-isotope and CT scans Specialist referral only (See Section 1D2) (Subject to pre-authorization. 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
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
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 R8 617 M+1 R11 578 M+2 R12 218 M+3 R13 505 Maximum R16 079 per family MMAP® applies Subject to day-to-day limit
5B2	Over-the-counter medication (See Section 5B1)	80% of cost R1 623 per family Subject to acute medication and day-to-day limit
5C Supplementary Benefits		
5C1	a) External prostheses and appliances Includes insulin pumps, hearing aids, home oxygen therapy and stoma bags. • 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-authorization. Call 0860 776 363 for authorisation and protocols)	100% Profmed Negotiated Tariff R17 977 per family Hearing aids only: Additional R3 370 per family Not subject to day-to-day limit
	b) Other Includes orthopaedic braces, wheel chairs, walking frames and crutches	100% Profmed Negotiated Tariff R4 404 per family Subject to day-to-day limit
5C2	Supplementary services • Audiometrists • Biokineticists • Chiropractors • Dieticians • Occupational therapists • Speech therapists • Physiotherapists • Podiatrists	100% Profmed Tariff M R2 500 Maximum R4 310 per family Subject to day-to-day limit, and 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 022 per family R640 per family sub-limit for homeopathic medication Subject to day-to-day limit

ProSecure Plus	ProSecure	ProActive Plus	ProActive
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	
80% Profmed Tariff Subject to day-to-day limit		No benefit, subject to PMB legislation	
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	
100% Profmed Negotiated Tariff Subject to day-to-day limit		No benefit, subject to PMB legislation	
80% Single Exit Price and dispensing fee M R3 095 M+1 R4 634 M+2 R5 112 M+3 R5 303 Maximum R5 730 per family MMAP® applies Subject to day-to-day limit		No benefit, subject to PMB legislation	
80% of cost R1 309 per family Subject to acute medication and day-to-day limit		No benefit	
100% Profmed Negotiated Tariff R11 910 per family Hearing aids only: Additional R5 618 per family Not subject to day-to-day limit		No benefit, subject to PMB legislation	
100% Profmed Negotiated Tariff R3 180 per family Subject to day-to-day limit		No benefit, subject to PMB legislation	
100% Profmed Tariff M R2 286 Maximum R3 820 per family Subject to day-to-day limit, and PMB legislation		No benefit, subject to PMB legislation	
No benefit		No benefit	

SCHEDULE OF BENEFITS

ProPinnacle

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
5D2	Spectacles	
	a) Lenses (generic) Single vision, bi-focal and varifocal	100% Profmed Optical Tariff 24-month benefit Subject to day-to-day limit
	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
	c) Frames	R1 072 per beneficiary 24-month benefit Subject to day-to-day limit
5D3	Contact lenses (clear)	R2 618 per beneficiary 24-month benefit Subject to day-to-day limit
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)	R2 977 per beneficiary Not subject to day-to-day limit
5E Dentistry Benefits are subject to protocols and management. Dentist and specialist fees in-hospital are paid from the available day-to-day dentistry limits.		
	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 R5 830 per beneficiary Maximum R11 660 per family Not subject to day-to-day limit
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 011 541 1225 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
	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

ProSecure Plus

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ProSecure Plus	ProSecure	ProActive Plus	ProActive
100% Profmed Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation		No benefit, subject to PMB legislation	
100% Profmed Optical Tariff 24-month benefit Subject to day-to-day limit		No benefit	
100% Profmed Optical Tariff for generic hard-coating 24-month benefit Subject to day-to-day limit		No benefit	
R774 per beneficiary 24-month benefit Subject to day-to-day limit		No benefit	
R1 539 per beneficiary 24-month benefit Subject to day-to-day limit		No benefit	
No benefit		No benefit	
100% Profmed Dental Tariff R4 960 per beneficiary Maximum R9 910 per family Not subject to day-to-day limit		100% Profmed Dental Tariff R500 per beneficiary Maximum R1 500 per family	
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	
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	

SCHEDULE OF BENEFITS

BENEFIT		ProPinnacle
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
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 Multiply on 0861 886 600 to access the Momentous Baby programme on full Multiply.		
6A Day-to-day Cover		
6A1	Ultra-sound scans (ante-natal)	100% Profmed Tariff 2 scans per pregnancy Subject to day-to-day limit
6A2	Consultations Ante-/post-natal consultations by a medical practitioner	100% Profmed Premium Tariff 13 visits per pregnancy Subject to day-to-day limit
6A3	Consultations Ante-/post-natal consultations by a registered midwife	100% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit
6A4	Out-patient visits to hospital/clinic for investigations, e.g. tococardiography	80% Profmed Tariff Subject to day-to-day limit
6A5	Ante-natal exercises by registered healthcare practitioner	80% Profmed Tariff R850 per family Subject to day-to-day limit
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
6B Hospitalisation		
6B1	In-patient hospitalisation (ante-natal) (Subject to pre-authorisation)	100% Profmed Negotiated Tariff in private ward
6B2	Delivery fee by GP or specialist	100% Profmed Premium Tariff
6B3	Delivery fee by registered midwife	100% Profmed Tariff
6B4	Labour ward	100% Profmed Negotiated Tariff
6B5	Ward accommodation (post-delivery): Normal delivery – 3 days Caesarean section – 4 days	100% Profmed Negotiated Tariff in private ward
6B6	Theatre and recovery room	100% Profmed Negotiated Tariff
6B7	Other medical practitioner services, e.g. pathology and radiology while in hospital	100% Profmed Tariff
6B8	Consultations while in hospital	100% Profmed Premium Tariff

ProSecure Plus

ProSecure

ProActive Plus

ProActive

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
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100% Profmed Tariff 2 scans per pregnancy Subject to day-to-day limit	No benefit, subject to PMB legislation
100% Profmed Specific Tariff 13 visits per pregnancy Subject to day-to-day limit	No benefit, subject to PMB legislation
100% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit	No benefit, subject to PMB legislation
80% Profmed Tariff Subject to day-to-day limit	No benefit, subject to PMB legislation
No benefit	No benefit
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

100% Profmed Negotiated Tariff in general ward	100% Profmed Negotiated Tariff in general ward
100% Profmed Plus Tariff	100% Profmed Plus Tariff
100% Profmed Specific Tariff	100% Profmed Specific Tariff
100% Profmed Tariff	100% Profmed Tariff
100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff
100% Profmed Negotiated Tariff in private ward	100% Profmed Negotiated Tariff in general ward
100% Profmed Negotiated Tariff in general ward	100% Profmed Negotiated Tariff in general ward
100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff
100% Profmed Tariff	100% Profmed Tariff
100% Profmed Plus Tariff	100% Profmed Plus Tariff
100% Profmed Specific Tariff	100% Profmed Specific Tariff

SCHEDULE OF BENEFITS

BENEFIT		ProPinnacle
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
6B10	Neonatal care Neonate must be registered as a dependant on Profmed (Subject to pre-authorisation)	100% Profmed Negotiated Tariff
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 in South Africa where option-specific benefits apply. Cover is available for a maximum travel period of 90 days per journey but is not available during a general waiting period. Conditions that are excluded in terms of a condition-specific waiting period and elective treatment are not covered.		
	In- and out-of-hospital emergency medical expenses Out-of-hospital expenses exceeding R1 000 and hospitalisation must be pre-authorised. (Treatment subject to protocols and pre-authorisation. Cover must be activated prior to departure. Call 011 541 1225 for authorisation and protocols)	R3 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

ProSecure Plus	ProSecure	ProActive Plus	ProActive
Subject to Section 1E5(a) of this Schedule		Subject to Section 1E5(a) of this Schedule	
100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	

RSA and SADC Region residents must call +27 11 541 1225 prior to departure to authorise travel cover. For medical assistance while travelling, it is necessary to call International SOS on +27 11 541 1225 prior to receiving treatment. In the event of an emergency, please contact International SOS as soon as possible after the emergency has occurred. The Information Guide contains more information on the claims process and details of this benefit, or call +27 11 541 1225. Subject to case management and protocols.

R3 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

R3 million per beneficiary per journey
 No benefit for out-of-hospital expenses

*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.

FSP No. 43918. E&OE.

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HEALTHCARE FOR PROFESSIONALS

PROFMED