Bestmed Benefit Summary 2019

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Important Contact Details:

CLAIMS

Tel: 086 000 2378
E-mail: service@bestmed.co.za (queries)
claims@bestmed.co.za (claim submissions)

HOSPITAL AUTHORISATION

Tel: 080 022 0106
E-mail: authorisations@bestmed.co.za

CHRONIC MEDICINE

Tel: 086 000 2378
E-mail: medicine@bestmed.co.za
Fax: 012 472 6760

086 000 2378

medicine@bestmed.co.za

012 472 6760

www.bestmed.co.za

@BestmedSocial

www.facebook.com/BestmedMedicalScheme

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	Beat1	Beat2	Beat3	Beat4	Pace1	Pace2	Pace3	Pace4	Pulse1	Pulse2
Benefit Design	Hospital Plan	Hospital Plan with savings	Traditional plan with savings	Hybrid	Annual savings	Annual savings	Traditional option	Traditional with new generation elements	Capitation option	Capitation option
Medical Savings Account	No	Yes (16%)	Yes (16%)	Yes (14%)	Yes (19%)	Yes (14%)	Yes (14%)	Yes (3%)	No	No
Hospital Network	Beat 1 No / Beat 1 N Yes	Beat 2 No / Beat 2 N Yes	Beat 3 No / Beat 3 N Yes	Beat 4 No	No	No	No	No	Yes	Yes
International Travel Cover	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Preventative Care	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Voluntary use of non-DSP hospital	Co-payments of up to R10 750 apply on admission	Co-payments of up to R10 750 apply on admission	Co-payments of up to R10 750 apply on admission						Co-payments of up to R10 750 apply on admission	Co-payments of up to R10 750 apply on admission
Out-of-hospital DSP Network									Bestmed Pulse1 Network	Bestmed Pulse2 Network
Specialist DSP Network									Yes, Bestmed Specialist DSP Network	Yes, Bestmed Specialist DSP Network
IN-HOSPITAL BENEFITS *(Subject to pre-authorisation)*										
Accommodation *(hospital stay)*	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff at a Netcare DSP hospital	100% Scheme tariff at a Netcare DSP hospital
Theatre fees	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff
Take-home medicine	100% Scheme tariff *Limited to 7 day's supply*	100% Scheme tariff *Limited to 7 day's supply*	100% Scheme tariff *Limited to 7 day's supply*	100% Scheme tariff *Limited to 7 day's supply*	100% Scheme tariff *Limited to 7 day's supply*	100% Scheme tariff *Limited to 7 day's supply*	100% Scheme tariff *Limited to 7 day's supply*	100% Scheme tariff *Limited to 7 day's supply*	100% Scheme tariff *Limited to 3 day's supply*	100% Scheme tariff *Limited to 7 day's supply*
Treatment in mental health clinics	100% Scheme tariff *Limited to 21 days per beneficiary*	100% Scheme tariff *Limited to 21 days per beneficiary*	100% Scheme tariff *Limited to 21 days per beneficiary*	100% Scheme tariff *Limited to 21 days per beneficiary*	100% Scheme tariff *Limited to 21 days per beneficiary*	100% Scheme tariff *Limited to 21 days per beneficiary*	100% Scheme tariff *Limited to 21 days per beneficiary*	100% Scheme tariff *Limited to 21 days per beneficiary*	100% Scheme tariff *Limited to 21 days per beneficiary*	100% Scheme tariff *Limited to 21 days per beneficiary*
Treatment of chemical and substance abuse	100% Scheme tariff *Limited to 21 days or R29 240 per beneficiary Subject to network facilities*	100% Scheme tariff *Limited to 21 days or R29 240 per beneficiary Subject to network facilities*	100% Scheme tariff *Limited to 21 days or R29 240 per beneficiary Subject to network facilities*	100% Scheme tariff *Limited to 21 days or R29 240 per beneficiary Subject to network facilities*	100% Scheme tariff *Limited to 21 days or R29 240 per beneficiary Subject to network facilities*	100% Scheme tariff *Limited to 21 days or R29 240 per beneficiary Subject to network facilities*	100% Scheme tariff *Limited to 21 days or R29 240 per beneficiary Subject to network facilities*	100% Scheme tariff *Limited to 21 days or R29 240 per beneficiary Subject to network facilities*	100% Scheme tariff *(Only PMBs)* subject to network facilities	100% Scheme tariff *Limited to 21 days or R29 240 per beneficiary Subject to network facilities*
Consultations and procedures	100% Scheme tariff. DSP specialist network applicable if the discounted network option is chosen	100% Scheme tariff. DSP specialist network applicable if the discounted network option is chosen	100% Scheme tariff. DSP specialist network applicable if the discounted network option is chosen	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.
Surgical procedures and anaesthetics	100% Scheme tariff Day clinics	100% Scheme tariff Day clinics	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff. **Excluded from benefits:** functional nasal surgery, surgery for medical conditions e.g. Epilepsy, Parkinsonism etc and procedures where stimulators are used	100% Scheme tariff
Organ transplants	100% Scheme tariff *(only PMBs)*	100% Scheme tariff *(only PMBs)*	100% Scheme tariff *(only PMBs)*	100% Scheme tariff *(only PMBs)*	100% Scheme tariff *(only PMBs)*	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff *(PMBs only)*	100% Scheme tariff *(PMBs only)*
Major medical Maxilla-facial surgery strictly related to certain conditions	No benefit (*PMBs only at DSP day hospitals)*	No benefit (*PMBs only at DSP day hospitals)*	100% Scheme tariff. *Limited to R11 718 per family*	100% Scheme tariff. *Limited to R11 933 per family*	100% Scheme tariff. *Limited to R11 825 per family*	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	No Benefit	100% Scheme tariff
Dental and Oral Surgery	No benefit. *(PMBs only at DSP day hospitals)*	PMBs ony at DSP day hospitals. *At day hospitals only for beneficiaries below 7 years and disabled beneficiaries - PULP, extraction and Restorations Limited to R5 000 per family*	Limited to R7 310 per family	Limited to R9 138 per family	Limited to R7 310 per family	Limited to R12 148 per family	Limited to R15 265 per family	Limited to R18 275 per family	No benefit	100% Scheme tariff
Prosthesis: *(Subject to preferred provider, otherwise limits and co-payments apply)*	100% Scheme tariff. *Limited to R71 380 per family*	100% Scheme tariff. *Limited to R71 380 per family*	100% Scheme tariff. *Limited to R72 133 per family*	100% Scheme tariff. *Limited to R88 050 per family*	100% Scheme tariff. *Limited to R81 700 per family*	100% Scheme tariff. *Limited to R104 920 per family*	100% Scheme tariff. *Limited to R105 458 per family*	100% Scheme tariff. *Limited to R121 690 per family*	100% Scheme tariff *Limited to R48 053 per family*	100% Scheme tariff *Limited to R96 213 per family*
Prosthesis - Internal	**Sub Limits per beneficiary:** *- Vascular R28 490 - Pacemaker dual chamber R38 915 - Endovascular and cathether based procedures - no benefit - Spinal R28 490, - Artificial disk - no benefit - Drug eluting stents - DSP products only - Mesh R9 998 - Gynaecology / Urology R8 170 - Lens implants R6 235 per lens per eye - Functional R12 770*	**Sub Limits per beneficiary:** *- Vascular R28 490 - Pacemaker dual chamber R38 915 - Endovascular and cathether based procedures- no benefit - Spinal R28 490, - Artificial disk - no benefit - Drug eluting stents - DSP products only - Mesh R9 998 - Gynaecology / Urology R8 170 - Lens implants R6 235 per lens per eye - Functional R12 770*	**Sub Limits per beneficiary:** *- Vascular R28 595 - Pacemaker dual chamber R38 915 - Endovascular and cathether based procedures - no benefit - Spinal R28 595, - Artificial disk - no benefit - Drug eluting stents - DSP products only - Mesh R10 050 - Gynaecology / Urology R8 300 - Lens implants R6 235 per lens per eye - Functional R12 770*	**Sub Limits per beneficiary:** *- Vascular R30 423 - Pacemaker dual chamber R50 955 - Endovascular and cathether based procedures - no benefit - Spinal R30 423, - Artificial disk - no benefit - Drug eluting stents - DSP products only - Mesh R11 288 - Gynaecology / Urology R8 278 - Lens implants R6 450 per lens per eye - Functional R15 373*	**Limits per beneficiary:** *- Vascular R29 777 - Pacemaker dual chamber R50 848 - Endovascular and cathether based procedures - no benefit - Spinal R29 777, - Artificial disk - no benefit - Drug eluting stents - DSP products only - Mesh R11 180 - Gynaecology / Urology R9 063 - Lens implants R6 128 per lens per eye - Functional R14 674*	**Limits per beneficiary:** *- Vascular R39 345 - Pacemaker dual chamber R56 706 - Spinal including artificial disk R52 600 - Drug eluting stents R17 200 - Mesh R17 200 - Gynaecology / Urology R12 846 - Lens implants R11 030 per lens per eye - Joint Replacements: Hip prosthesis and other major joints R47 246 - Knee prosthesis R54 825 - Minor joints R20 371 - Functional R15 964*	**Limits per beneficiary:** *- Vascular R39 453 - Pacemaker dual chamber R56 706 - Spinal including artificial disk R52 700 - Drug eluting stents R17 200 - Mesh R17 200 - Gynaecology / Urology R12 900 - Lens implants R11 030 per lens per eye - Joint Replacements: Hip prosthesis and other major joints R47 300 - Knee prosthesis R55 094 - Minor joints R20 371 - Functional R17 200*	**Sub Limits per beneficiary:** *- Vascular R45 150 - Pacemaker dual chamber R56 706 - Spinal including artificial disk R60 850 - Drug eluting stents R20 264 - Mesh R17 845 - Gynaecology / Urology R14 728 - Lens implants R16 308 per lens per eye - Joint Replacements: Hip prosthesis and other major joints R54 449 - Knee prosthesis R63 049 - Minor joints R20 264 - Functional R17 845*	**Sub Limits per beneficiary:** *- Vascular R23 811 - Pacemaker dual chamber R38 915 - Endovascular and catheter based procedures - no benefit - Spinal R23 811 - Artificial disk - no benefit - Drug eluting stents - no benefits - Mesh R8708 - Gynaecology / Urology R7 192 - Lens implants R5 000 per lens per eye - Functional R10 213*	**Sub Limits per beneficiary:** *- Vascular R37 195 - Pacemaker dual chamber R50 418 - Spinal R37 195 - Artificial disk R16 340 - Drug eluting stents R16 340 - Mesh R16 340 - Gynaecology / Urology R12 148 - Lens implants R10 428 per lens per eye - Joint Replacements: Hip replacements and other major joints R44 505 - Knee prosthesis R51 976 - Minor joints R19 350 - Functional R15 964*
Prosthesis - External	No Benefit	No Benefit	No Benefit	Limited to R21 178 per family	Limited to R20 748 per family	Limited to R24 725 per family	Limited to R24 833 per family	Limited to R28 058 per family	No benefit	Limit of R23 220 per family
Exclusions *(In-hospital)* Limits and co-payments applicable. Preferred provider network available	Joint Replacement surgery *(except for PMBs).* PMBs subject to prosthesis limits: Hip replacement and other major joints R29 993 Knee replacement R36 980 Other minor joints R11 503	Joint Replacement surgery *(except for PMBs).* PMBs subject to prosthesis limits: Hip replacement and other major joints R29 993 Knee replacement R36 980 Other minor joints R11 503	Joint Replacement surgery *(except for PMBs).* PMBs subject to prosthesis limits: Hip replacement and other major joints R30 208 Knee replacement R37 378 Other minor joints R11 503	Joint replacement surgery *(except for PMBs).* PMBs subject to prosthesis limits: Hip replacement and other major joints R31 283 Knee replacement R41 560 Other minor joints R12 770	Joint replacement surgery *(except for PMBs).* PMBs subject to prosthesis limits: Hip replacement and other major joints R30 315 Knee replacement R40 313 Other minor joints R12 524	N/A	N/A	N/A	Joint Replacement surgery *(except for PMBs).* PMBs subject to prosthesis limits: Hip replacement and other major joints R24 403 Knee replacement R30 853 Other minor joints R11 556	N/A
Orthopaedic and medical appliances	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff *Limited to R5913 per family*	100% Scheme tariff
Pathology	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff
Radiology	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff
X-rays	100% Scheme tariff *Subject to co-payments*	100% Scheme tariff *Subject to co-payments*	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff
Oncology	PMB Only at DSP	PMB Only at DSP	PMB Only at DSP	PMB Only at DSP	Oncology Programme *PMBs only at DSP*	Oncology Programme. 100% Scheme tariff	Oncology Programme. 100% Scheme tariff	Oncology Programme. 100% Scheme tariff	PMBs only at DSP	Oncology Programme. 100% Scheme tariff
Peritoneal dialysis and haemodialysis	No Benefit. *PMBs only at DSP Providers*	No Benefit. *PMBs only at DSP Providers*	No Benefit. *PMBs only at DSP Providers*	100% Scheme tariff *Subject to pre-authorisation*	No Benefit *PMBs only at DSP Providers*	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	No Benefit. *PMBs only at DSP Providers*	100% Scheme tariff *Only at DSP Providers*
Confinements	100% Scheme tariff	100% Scheme tariff	100% of Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff
Refractive surgery and all types of procedure to improve or stabilize vision, except for cataracts	No Benefit	No Benefit	100% Scheme tariff Subject to pre-authorisation and protocols *Limited to R7 525 per eye*	100% Scheme tariff Subject to pre-authorisation and protocols *Limited to R8 493 per eye*	100% Scheme tariff *Limited to R8 127 per eye*	100% Scheme tariff *Limited to R8 492 per eye*	100% Scheme tariff *Limited to R9 138 per eye*	100% Scheme tariff *Limited to R9 138 per eye*	No Benefit	100% Scheme tariff *Limited to R8 546 per eye*
Supplementary Services	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff	100% of Scheme tariff	100% of Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff
Alternatives to hospitalisation	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff
Emergency evacuation	100% Scheme tariff *Pre-authorised and rendered by ER24*	100% Scheme tariff *Pre-authorised and rendered by ER24*	100% Scheme tariff *Pre-authorised and rendered by ER24*	100% Scheme tariff *Pre-authorised and rendered by ER24*	100% Scheme tariff. *Pre-authorised and rendered by ER24*	100% Scheme tariff. *Pre-authorised and rendered by ER24*	100% Scheme tariff. *Pre-authorised and rendered by ER24*	100% Scheme tariff. *Pre-authorised and rendered by ER24*	100% Scheme tariff *Pre-authorised and rendered by ER24*	100% Scheme tariff *Pre-authorised and rendered by ER24*
Co-payments	Co-payment of R3 440 on all endoscopic investigations and MRI & CT scans if done in a private hospital. Any other facility no co-payment/ R10 750 co-payment for the use of non EDO hospitals	Co-payment of R3 440 on all endoscopic investigations and MRI & CT scans if done in a private hospital. Any other facility no co-payment/ R10 750 co-payment for the use of non EDO hospitals	Co-payment of R3 440 on all endoscopic investigations and MRI & CT scans if done in a private hospital. Any other facility no co-payment/ R10 750 co-payment for the use of non EDO hospitals	N/A	N/A	N/A	N/A	N/A	Co-payments where procedure has been clinically approved: laparoscopic procedures R3 440, prostate procedures R3 440, procedures for prolapse/ incontinence R3 440, arthroscopy other than acute trauma R3 440, endoscopy investigations done primarily in hospital R3 440. Co-payment of up to R10 750 per event for voluntary use of a non-DSP hospital	Co-payment of up to R10 750 per event for voluntary use of a non-DSP hospital
Midwife assisted births	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff

	Beat1	Beat2	Beat3	Beat4	Pace1	Pace2	Pace3	Pace4	Pulse1	Pulse2
OUT-OF-HOSPITAL BENEFITS				Day-to-day benefit M = R11 610 M1+ = R23 220	Day-to-day benefit M = R9 868 M1+ = R19 737	Day-to-day benefit M = R13 932 M1+ = R27 864	Day-to-day benefit M = R17 415 M1+ = R35 991	Day-to-day benefit M = R32 465 M1+ = R52 353		Day-to-day benefit M = R 13 168 M1+ = R 26 176
Non-CDL chronic medicine	No benefit	No benefit	5 conditions. 75% Scheme tariff. Limited to M = R3 118, M1+ = R6 343 Co-payment of 40% for non-formulary medicine.	8 conditions. 85% of Scheme tariff. Limited to M = R6 848, M1+ = R13 696 Co-payment of 30% for non-formulary medicine	7 conditions. 85% Scheme tariff. Limited to M = R6 020, M1+ = R12 040. Co-payment of 35% for non-formulary	18 conditions. 85% Scheme tariff. Limited to M = R8 278 , M1+ = R16 555. Co-payment of 30% for non-formulary	18 conditions. 85% Scheme tariff. Limited to M = R13 352, M1+ = R26 703. Co-payment of 25% for non-formulary medicine	27 conditions. 85% Scheme tariff. Limited to M = R18 006, M1+ = R36 174. Co-payment of 20% for non-formulary medicine	No benefit	16 conditions. 85% of Scheme tariff if prescribed by a NP limited to M = R6 235, M1+ = R12 470). Co-payment of 25% for non-formulary
PMB & CDL chronic medicine	100% Scheme tariff. Co-payment of 40% for non-formulary medicine	100% Scheme tariff. Co-payment of 40% for non-formulary medicine	100% Scheme tariff. Co-payment of 40% for non-formulary medicine.	100% Scheme tariff. Co-payment of 30% for non-formulary medicine	100% Scheme tariff. Co-payment of 35% for non-formulary medicine	100% Scheme tariff. Co-payment of 30% for non-formulary medicine	100% Scheme tariff. Co-payment of 25% for non-formulary medicine	100% Scheme tariff. Co-payment of 20% for non-formulary medicine	Unlimited. *Subject to Provider Network Formulary and subject to MRP.* 100% Scheme tariff. 40% co-payment on non formulary medicine	Unlimited. *Subject to Provider Network Formulary and subject to MRP.* 100% of Scheme tariff. 25% co-payment on non-formulary medicine
Biologicals and other high-cost medicine	No benefit	No benefit	No benefit	No benefit	No benefit	Subject to pre authorisation Limited to R150 400 per beneficiary	Limited to R301 000 per beneficiary	Limited to R445 480 per beneficiary	No benefit	Limited to R141 900 per beneficiary
Acute medicine	No benefit	Savings account subject to MRP	Savings account subject to MRP	Savings first. Limited to M= R2 612, M1+ =R5 278. *Subject to MRP. Subject to day-to-day overall limit*	Savings first. Limited M= R2 129, M1+ =R4 408. *Subject to overall day-to-day limits. Subject to MRP*	Savings first. Limited M= R4 408, M1+ = R8 815. *Subject to overall day-to-day limits. Subject to MRP*	Savings first Limited to M = R1 398 M1+ = R3 440 *Subject to overall day-to-day limits. Subject to MRP*	Limited M=R8063, M1+ =R12 524. *Subject to MRP 10% co-payment. Subject to day-to-day overall limit*	Subject to Provider Network Formulary and subject to MRP. 100% Scheme tariff	Subject to Provider Network Formulary and subject to MRP Limited M=R4139, M1+ =R8 385. 100% Scheme Tariff. *(Subject to day-to-day overall limit)*
Over-the-counter	No benefit	Savings account	Savings account	Savings account. *Limited to R550 or self-payment gap member must choose option*	Savings account. *Limited to R550 or self-payment gap member must choose option*	Savings account. *Limited to R550 or self-payment gap member must choose option*	Savings account. *Limited to R550 or self-payment gap member must choose option*	Savings account	Subject to Provider Network Formulary *Limited to R350 per family*	Limited to R550 per family
Optometry capitation: PPN benefits	N/A	Paid from savings	Every 24 months: Consultation 1 per beneficiary at network provider **OR** R300 at non network provider, Frame = R825 at network provider **OR** R550 at non-network povider **AND** 100% of cost of standard lenses at network provider **OR** Rand value at non-network provider Single vision lenses = R175 **OR** Bifocal lenses = R410, **OR** Multifocal lenses = R710, Contact lenses = R1 435	Every 24 months: Consultation 1 per beneficiary at network provider **OR** R300 at non network provider, Frame = R825 at network provider **OR** R550 at non-network povider **AND** 100% of cost of standard lenses at network provider **OR** Rand value at non-network provider Single vision lenses = R175 **OR** Bifocal lenses = R410, **OR** Multifocal lenses = R710, Contact lenses = R1 435	Every 24 months: Consultation 1 per beneficiary at network provider **OR** R300 at non network provider, Frame = R825 at network provider **OR** R550 at non-network povider **AND** 100% of cost of standard lenses at network provider **OR** Rand value at non-network provider Single vision lenses = R175 **OR** Bifocal lenses = R410, **OR** Multifocal lenses = R710, Contact lenses = R1 435	Every 24 months: Consultation 1 per beneficiary at network provider **OR** R300 at non network provider, Frame = R825 at network provider **OR** R550 at non-network povider **AND** 100% of cost of standard lenses at network provider **OR** Rand value at non-network provider Single vision lenses = R175 **OR** Bifocal lenses = R410, **OR** Multifocal lenses = R710, Contact lenses = R1 435	Every 24 months: Consultation 1 per beneficiary at network provider **OR** R300 at non network provider, Frame = R825 at network provider **OR** R550 at non-network povider **AND** 100% of cost of standard lenses at network provider **OR** Rand value at non-network provider Single vision lenses = R175 **OR** Bifocal lenses = R410 **OR** Multifocal lenses = R710, Contact lenses = R1435	Consultation = Only PPN Providers. Frame = R225 at network provider **AND** 100% of cost of standard lenses at network provider only	Every 24 months: Consultation 1 per beneficiary at network provider or R300 at non network provider Frame = R825 at network provider or R550 at non-network povider **AND** 100% of cost of standard lenses at network provider **OR** Rand value at non-network provider Single vision lenses = R175 **OR** Bifocal lenses = R410 **OR** Multifocal lenses = R710 Contact lenses = R1 435
GP and Specialist Consultations	N/A	Savings account For EDO options GP and Specialist visits only at Bestmed DSP network rates	Savings account For EDO options GP and Specialist visits only at Bestmed DSP network rates	Savings first Limited to M=R2 956, M1+ =R5 268. *Subject to day-to-day overall limit*	Savings first Limited M=R2 032, M1+ =R4085. *Subject to day-to-day overall limit*	Limited M=R3 978, M1+ =R8 063. *Subject to day-to-day overall limit*	Savings first. 100% Scheme tariff. M= R3 978, M1+ = R8 063. *Subject to overall day-to-day benefits*	Limited M=R5 106, M1+ =R8 278. *Subject to day-to-day overall limit*	Subject to Bestmed Pulse1 GP Network. Unlimited GP visits. Specialist consultation must be referred and pre-approved only at Bestmed Specialist DSP network. Limited M=R1 075, M1+ = R1 613 Out-of-network GP visits limit of R1 290 per family per year	Unlimited GP visits at Bestmed GP Network providers. Specialist consultations must be referred and approved by NP. Limited M=R2 903, M1+ =R5 590. *(Subject to day-to-day overall limit).* Out of Network GP visits per family limited to R1 398 as approved by NP
Basic and Specialised Dentistry	N/A	Orthodontics are subject to pre-authorisation. Basic dentistry Preventative benefit or savings account Specialised dentristry - Savings account	Orthodontics are subject to pre-authorisation. Basic dentistry - Preventative benefit or savings account. Specialised dentristry - Savings account	Orthodontics are subject to pre-authorisation. Savings first Limited to M = R5 115, M1+ = R10 274. *Subject to day-to-day overall limit*	Orthodontics are subject to pre-authorisation. Savings first. Limited M=R3 740, M1+ =R7 590 (Subject to day-to-day overall limit)	Orthodontics are subject to pre-authorisation. Savings first. Limited M=R6270, M1+ =R12 540. Subject to day-to-day overall limit	Orthodontics are subject to pre-authorisation. Savings first. 100% Scheme tariff. Limited M=R6 756, M1+ =R12 595. Subject to overall day-to-day benefits	Orthodontics are subject to pre-authorisation. Limited M=R11 275, M1+ =R19 030. (Subject to day-to-day overall limit)	Basic dentistry: Subject to Bestmed Pulse Dental Network Specialised dentistry: No benefit	Specialised dentistry inclusive of dentures are subject to pre-authorisation. Limited to M=R6 611, M1+ = R8 385. *(Subject to day-to-day overall limit)*
Medical apparatus and appliances	N/A	Savings account	Savings account	Savings first. 100% Scheme tariff limited to R10 428 per family. *Subject to day-to-day overall limit*	Savings First. 100% Scheme tariff Limited to R10 428 per family. *Subject to day-to-day overall limit and hearing aid every 24 months*	Savings first. 100% Scheme tariff Limited to R9 460 per family. Subject to overall day-to-day limits	Savings first. 100% Scheme tariff Limited to R9 460 per family. Subject to overall day-to-day benefits	100% Scheme tariff Limited to R9 460 per family Subject to overall day-to-day limits	No benefit	Limited to R9 353 per family
Wheel chairs	N/A	Savings Account	Savings Account	Savings first. 100% Scheme tariff limited to R10 428 per family. Subject to day-to-day overall limit for hearing aids or wheel chairs	Subject to medical apparatus and appliance limits	Limit of R12 793 per family per 48 months	Limit of R12 793 per family per 48 months.	Limit of R12 793 per family per 48 months	No benefit	Limit on wheel chairs = R12 040 per family.
Hearing aids	N/A	Savings Account	Savings Account		Subject to medical apparatus and appliance limits	Limit of R26 069 per beneficiary per 24 months	Limit of R29 348 per beneficiary per 24 months	Limit of R32 680 per beneficiary per 24 months	No benefit	Subject to DSP. Limit on hearing aids = R26 015 per beneficiary per 24 months
Supplementary Services	N/A	Savings Account	Savings Account	Savings first. Limited to M = R4 515, M1+ = R9 170. Subject to day-to-day overall limit	Savings first. Limited M = R3 988, M1+ = R8 278. Subject to day-to-day overall limit	Savings first. Limited M = R5 000, M1+ = R10 051. Subject to day-to-day overall limit	Savings first. Limited M = R2 430, M1+ = R5 106. *Subject to day-to-day overall limit*	Limited M = R5 106, M1+ = R10 051. *Subject to day to day overall limit*	No benefit	Limited M=R3 870, M1+ = R7 686. *Subject to day to day overall limit*
Wound care benefit: Including dressings and negative pressure wound therapy (NPWT) treatment and nursing services	100% Scheme tariff. *Limited to R3 193 per family*	100% Scheme tariff. *Limited to R3 193 per family*	100% Scheme tariff. *Limited to R3 193 per family*	Savings first. 100% Scheme tariff. Limited to R4 515 per family. *Subject to day-to-day overal limit*	Savings first. Limited to R3 279 per family. *Subject to overall day-to-day limits.*	Savings first. Limited to R6 235 per family. *Subject to overall day-to-day limit*	Savings first. Limited to R9 675 per family. *Subject to day-to-day limits*	Limited to R12 470 per family. *Subject to overall day-to-day limits*	No benefit	Limited to R9 030 per family
Pathology and Radiology	N/A	Savings Account	Savings Account	Savings first Limited to M=R2956, M1+ =R6 020. *Subject to day-to-day overall limit*	Savings first. Limited M=R2 956, M1+ =R5 913. *Subject to day-to-day overall limit*	Savings first. Limited M = R2 956 M1+ = R5 913. *Subject to day-to-day overall limit*	Savings first. M = R3 225, M1+ = R6 396. *Subject to day-to-day overall limits*	Limited M=R5 106, M1+ = R10 051. *Subject to day-to-day overall limit*	Subject to Provider Network	Subject to NP protocols and tariff list. Pre authorisation required. *Subject to day-to-day overall limit*
Maternity Benefits	N/A	Savings Account	HRA completion required 100% Scheme tariff 9 x antenatal consultations at either GP/Gyne/Midwife 1x 2D ultrasound nuchal translucency scan at 10-12 weeks at gyne 1x 2D ultrasound scan at 20-24 weeks at gyne 1x 2D ultrasound scan first trimester at radiologist 1x 2D ultrasound scan second trimester at radiologist antenatal iron supplements (9 fills), antenatal folic acid (9 fills) 1x post-natal consultation at GP/Gyne/Midwife	HRA completion required 100% Scheme tariff 9 x antenatal consultations at either GP/Gyne/Midwife 1x 2D ultrasound nuchal translucency scan at 10-12 weeks at gyne 1x 2D ultrasound scan at 20-24 weeks at gyne 1x 2D ultrasound scan first trimester at radiologist 1x 2D ultrasound scan second trimester at radiologist antenatal iron supplements (9 fills), antenatal folic acid (9 fills) 1x post-natal consultation at GP/Gyne/Midwife 100% Scheme tariff Limited to R15 373 per family	HRA completion required 100% Scheme tariff 9 x antenatal consultations at either GP/Gyne/Midwife 1x 2D ultrasound nuchal translucency scan at 10-12 weeks at gyne 1x 2D ultrasound scan at 20-24 weeks at gyne 1x 2D ultrasound scan first trimester at radiologist 1x 2D ultrasound scan second trimester at radiologist antenatal iron supplements (9 fills), antenatal folic acid (9 fills) 1x post-natal consultation at GP/Gyne/Midwife	HRA completion required 100% Scheme tariff. 9 x antenatal consultations at either GP/Gyne/Midwife, 1x 2D ultrasound nuchal translucency scan at 10-12 weeks at gyne, 1x 2D ultrasound scan at 20-24 weeks at gyne, 1x 2D ultrasound scan first trimester at radiologist, 1x 2D ultrasound scan second trimester at radiologist, antenatal iron supplements (9 fills), antenatal folic acid (9 fills), 1x post-natal consultation at GP/Gyne-/Midwife	HRA completion required 100% Scheme tariff. 9 x antenatal consultations at either GP/Gyne/Midwife, 1x 2D ultrasound nuchal translucency scan at 10-12 weeks at gyne, 1x 2D ultrasound scan at 20-24 weeks at gyne, 1x 2D ultrasound scan first trimester at radiologist, 1x 2D ultrasound scan second trimester at radiologist, antenatal iron supplements (9 fills), antenatal folic acid (9 fills), 1x post-natal consultation at GP/Gyne-/Midwife	HRA completion required 100% Scheme tariff. 9 x antenatal consultations at either GP/Gyne/Midwife, 1x 2D ultrasound nuchal translucency scan at 10-12 weeks at gyne, 1x 2D ultrasound scan at 20-24 weeks at gyne, 1x 2D ultrasound scan first trimester at radiologist, 1x 2D ultrasound scan second trimester at radiologist, antenatal iron supplements (9 fills), antenatal folic acid (9 fills), 1x post-natal consultation at GP/Gyne-/Midwife	HRA completion required 100% Scheme tariff at network provider only. 9 x antenatal consultations at either GP/Gyne/Midwife, 1x 2D ultrasound nuchal translucency scan at 10-12 weeks at gyne, 1x 2D ultrasound scan at 20-24 weeks at gyne, 1x 2D ultrasound scan first trimester at radiologist, 1x 2D ultrasound scan second trimester at radiologist antenatal iron supplements (9 fills), antenatal folic acid (9 fills), 1x post-natal consultation at GP/Gyne-/Midwife	HRA completion required 100% Scheme tariff. 9 x antenatal consultations at either GP/Gyne/Midwife, 1x 2D ultrasound nuchal translucency scan at 10-12 weeks at gyne, 1x 2D ultrasound scan at 20-24 weeks at gyne, 1x 2D ultrasound scan first trimester at radiologist, 1x 2D ultrasound scan second trimester at radiologist, antenatal iron supplements (9 fills), antenatal folic acid (9 fills), 1x post-natal consultation at GP/Gyne-/Midwife
MRI & CT scans	100% Scheme tariff R4 837 per family	100% Scheme tariff R4 837 per family	100% Scheme tariff Limited to R10 160 per family	100% Scheme tariff Limited to R15 373 per family	100% of Scheme tariff Limited to R13 223 per family	Subject to pre-authorisation. MRI/CT scans: Maximum of three scans per beneficiary PET scan: One scan per beneficiary	Subject to pre-authorisation. MRI/CT scans: Maximum of three scans per beneficiary PET scan: One scan per beneficiary	Subject to pre-authorisation MRI/CT scans: Maximum of three scans per beneficiary PET scan: One scan per beneficiary	No benefit	Subject to pre-authorisation. MRI/CT scans: Maximum of three scans per beneficiary PET scan: One scan per beneficiary
Rehabilitation services after trauma	N/a	Savings Account	Savings Account	Vested Savings	Vested Savings	100% Scheme tariff	100% Scheme tariff	100% Scheme tariff	No benefit	NA
Oncology	Oncology Programme PMB's only at DSP	Oncology Programme PMB's only at DSP	Oncology Programme PMB's only at DSP	Oncology Programme PMB's only at DSP	Oncology Programme PMB's only at DSP	Oncology Programme. 100% Scheme tariff	Oncology Programme. 100% Scheme tariff	Oncology Programme. 100% Scheme tariff	Oncology Programme PMB's only at DSP	Oncology Programme. 100% Scheme tariff
Preventative Care Benefits	Flu vaccines, *Pnuemonia programme, Female contraceptives - R2 097 pfpa, *DBC programme, *HPV vaccinations, *Pap smear - ages 18 and above, every 24 months	Flu vaccines , Paediatric immunizations, *Pnuemonia programme, Female contraceptives - R2 097 pfpa, *DBC programme, *HPV vaccinations, *Pap smear - ages 18 and above, every 24 months, Preventative Dentistry *(Including gloves and sterile equipment)*	Flu vaccines, *Pnuemonia programme, Paediatric immunizations, Female contraceptives - R2 097 pfpa, *DBC programme, Preventative Dentistry (Incl gloves and sterile equip) *Pap smear, * HPV vaccinations, *Pap smear - ages 18 and above, every 24 months	Flu vaccines, *Pnuemonia programme, Paediatric immunizations, Female contraceptives - R2 097 pfpa, *DBC programme, Preventative Dentistry *(incl gloves and sterile equipment),* HIB titre, *Mammogram, *HPV vaccinations, PSA Screening for age 50 years and older every 24 months, *Pap smear - ages 18 and above, every 24 months	Flu vaccines , *Pnuemonia vaccines Paediatric immunisations, Female contraceptives - R2 097 per family, *DBC programme, Preventative Dentistry *(incl gloves and sterile equipment),* HIB titre, *Mammogram, *Pap smear, *HPV vaccinations, *Pap smear - ages 18 and above, every 24 months	Flu vaccines , *Pnuemonia vaccines Paediatric immunisations, Female contraceptives - R2 097 per family, *DBC programme, Preventative Dentistry *(incl gloves and sterile equipment),* HIB titre, *Mammogram, *Pap smear, *HPV vaccinations, *Pap smear - ages 18 and above, every 24 months	Flu vaccines,* Pneumonia vaccines, Paediatric immunisations,female contraceptives - R2 097 per family, *PSA Screening for age 50 years and older every 24 months, *DBC programme, Preventative Dentistry *(Incl gloves and sterile equipment),* HIB titre,*Mammogram,*Pap smear, Bone Densitometry *HPV vaccinations, *Pap smear - ages 18 and above, every 24 months	Flu vaccines, *Pnuemonia vaccines, Paediatric immunisations,Female contraceptives - R2 097 per family, *PSA Screening for age 50 years and older every 24 months, *DBC programme, Preventative Dentistry *(incl gloves and sterile equipment),* HIB titre,*Mammogram,*Pap smear, Bone Densitometry, *HPV vaccinations, *Pap smear - ages 18 and above, every 24 months	*Pnuemonia vaccines, Paediatric immunisations, Flu vaccine, *HPV vaccinations, *Contraceptives R2 097 per family	Flu vaccines , *Pnuemonia vaccines, Paediatric immunisations, *DBC programme, *Contraceptives R2 097 per family
Wellness Programme Preventative Care Benefits	*Biometric Screenings at contracted pharmacy or onsite at employer, *Fitness Assesment at contracted BASA biokeneticist - 1 pbpa (ages older than 13), *Family dietician assesment - 1pfpa *Occupational Health assesement - 1 pbpa (ages 3-12), *Baby Growth assesment at contracted nurse - 3pbpa (ages 0 mnth - 3 years), 3X dietician consultations pbpa (ages 18+) pre-approval required 3x biokineticist consultations pfpa pre-approval required	*Biometric Screenings at contracted pharmacy or onsite at employer, *Fitness Assesment at contracted BASA, biokeneticist - 1 pbpa (ages older than 13), *Family dietician assesment - 1pfpa, *Occupational Health assesement - 1 pbpa (ages 3-12), *Baby Growth assesment at contracted nurse - 3pbpa (ages 0 mnth - 3 years), 3X dietician consultations pbpa (ages 18+) pre-approval required 3x biokineticist consultations pfpa pre-approval required	*Biometric Screenings at contracted pharmacy or onsite at employer, *Fitness Assesment at contracted BASA biokeneticist - 1 pbpa (ages older than 13), *Family dietician assesment - 1pfpa *Occupational Health assesement - 1 pbpa (ages 3-12), *Baby Growth assesment at contracted nurse - 3pbpa (ages 0 mnth - 3 years), 3X dietician consultations pbpa (ages 18+) pre-approval required 3x biokineticist consultations pfpa pre-approval required	*Biometric Screenings at contracted pharmacy or onsite at employer, *Fitness Assesment at contracted BASA biokeneticist - 1 pbpa (ages older than 13), *Family dietician assesment - 1pfpa *Occupational Health assesement - 1 pbpa (ages 3-12), *Baby Growth assesment at contracted nurse - 3pbpa (ages 0 mnth - 3 years), 3X dietician consultations pbpa (ages 18+) pre-approval required 3x biokineticist consultations pfpa pre-approval required	*Biometric Screenings at contracted pharmacy or onsite at employer, *Fitness Assesment at contracted BASA biokeneticist - 1 pbpa (ages older than 13), *Family dietician assesment - 1pfpa *Occupational Health assesement - 1 pbpa (ages 3-12), *Baby Growth assesment at contracted nurse - 3pbpa (ages 0 mnth - 3 years), 3X dietician consultations pbpa (ages 18+) pre-approval required 3x biokineticist consultations pfpa pre-approval required	*Biometric Screenings at contracted pharmacy or onsite at employer, *Fitness Assesment at contracted BASA biokeneticist - 1 pbpa (ages older than 13), *Family dietician assesment - 1pfpa *Occupational Health assesement - 1 pbpa (ages 3-12), *Baby Growth assesment at contracted nurse - 3pbpa (ages 0 mnth - 3 years), 3X dietician consultations pbpa (ages 18+) pre-approval required 3x biokineticist consultations pfpa pre-approval required	*Biometric Screenings at contracted pharmacy or onsite at employer, *Fitness Assesment at contracted BASA biokeneticist - 1 pbpa (ages older than 13), *Family dietician assesment - 1pfpa *Occupational Health assesement - 1 pbpa (ages 3-12), *Baby Growth assesment at contracted nurse - 3pbpa (ages 0 mnth - 3 years), 3X dietician consultations pbpa (ages 18+) pre-approval required 3x biokineticist consultations pfpa pre-approval required	*Biometric Screenings at contracted pharmacy or onsite at employer, *Fitness Assesment at contracted BASA biokeneticist - 1 pbpa (ages older than 13), *Family dietician assesment - 1pfpa *Occupational Health assesement - 1 pbpa (ages 3-12), *Baby Growth assesment at contracted nurse - 3pbpa (ages 0 mnth - 3 years), 3X dietician consultations pbpa (ages 18+) pre-approval required 3x biokineticist consultations pfpa pre-approval required	*Biometric Screenings at contracted pharmacy or onsite at employer, *Fitness Assesment at contracted BASA biokeneticist - 1 pbpa (ages older than 13), *Family dietician assesment - 1 pfpa, *Occupational Health assesement - 1 pbpa (ages 3-12), *Baby Growth assesment at contracted nurse - 3pbpa (ages 0 mnth - 3 years), 3X dietician consultations pbpa (ages 18+) pre-approval required 3x biokineticist consultations pbpa pre-approval required	*Biometric Screenings at contracted pharmacy or onsite at employer *Fitness Assesment at contracted BASA biokeneticist - 1 pbpa (ages older than 13), *Family dietician assesment - 1pfpa *Occupational Health assesement - 1 pbpa (ages 3-12), *Baby Growth assesment at contracted nurse - 3pbpa (ages 0 mnth - 3 years), 3X dietician consultations pbpa (ages 18+) pre-approval required 3x biokineticist consultations pbpa, pre-approval required

MONTHLY CONTRIBUTION	Beat1		Beat2		Beat3		Beat4	Pace1	Pace2	Pace3	Pace4	Pulse1			Pulse2
Income Level												R0 - R5 500 pm	R5 501 - R8 500	> R8 501 pm	
	Beat 1	Beat 1N	Beat 2	Beat 2N	Beat 3	Beat 3N									
Principal Member - Risk amount	R1 485	R1 335	R1 524	R1 372	R2 312	R2 081	R3 700	R2 923	R4 395	R5 046	R7110	R1 493	R1 793	R2 152	R5 298
Principal Member - Savings amount	R0	R0	R290	R261	R440	R396	R602	R686	R716	R822	R220	R0	R0	R0	R0
Principal Member - Total monthly contribution	R1 485	R1 335	R1 814	R1 633	R2 752	R2 477	R4 302	R3 609	R5 111	R5 868	R7330	R1 493	R 1 793	R2152	R5 298
Adult Dependant - Risk amount	R1 152	R1 038	R1 184	R1 065	R1 643	R1 479	R3 056	R2 053	R4 310	R4 062	R7110	R1 419	R1 704	R1937	R5 298
Adult Dependant - Savings amount	R0	R0	R225	R203	R313	R282	R497	R481	R702	R661	R220	R0	R0	R0	R0
Adult Dependant - Total monthly contribution	R1 152	R1 038	R1 409	R1 268	R1 956	R1 761	R3 553	R2 534	R5 012	R4 723	R7330	R1 419	R1 704	R1937	R5 298
Child Dependant - Risk amount	R624	R562	R642	R577	R893	R804	R915	R738	R969	R868	R1 665	R898	R1 076	R1076	R1 259
Child Dependant - Savings amount	R0	R0	R122	R110	R170	R153	R149	R173	R158	R141	R52	R0	R0	R0	R0
Child Dependant- Total monthly contribution	R624	R562	R764	R687	R1 063	R957	R1 064	R911	R1 127	R1 009	R1 717	R898	R1 076	R1076	R1 259
Maximum Contributing Child Dependants	4		4		4		4	4	4	4	4	NA			4
Recognition of a child dependant	Under 21 unless registered student		Under 21 unless registered student		Under 21 unless registered student		Under 21 unless registered student	Under 21 unless registered student	Under 21 unless registered student	Under 21 unless registered student	Under 21 unless registered student	Under 21 unless registered student			Under 21 unless registered student