



SIZWE
MEDICAL FUND

Your health in caring hands



Comparative Benefit Guide

2019

WHY SIZWE MEDICAL FUND?

We offer a range of medical aid products to suit every life stage. From hospital cover, network, right up to premium medical products for every need. To assist you in making an informed choice on our various benefit options, have a look at what each option offers.



DISCLAIMER:

This brochure is for information purposes only and does not supersede the rules of the Fund. A full set of rules is available on our website: www.sizwe.co.za

HOSPITAL CARE

Hospital Care allows you to manage your day-to-day healthcare costs through a Medical Savings Account (MSA) giving you extensive medical cover, for those looking for peace of mind in case of hospitalisation. Targeted to fit the young, healthy and the adventurous.

GOMOMO CARE

Gomomo Care is our network option. It offers good value for money and the peace of mind linking you with your own selected quality service providers. This option offers rich benefits and unsurpassed day-to-day benefits that meet your healthcare needs.

PRIMARY CARE

Primary Care offers good value for money with unlimited hospitalisation at any private hospital. This traditional option has generous day-to-day benefits which cover acute medicines, general practitioners, specialists, radiologists, pathologists and more to meet the needs of young families with evolving healthcare needs.

PRIMARY CARE NETWORK OPTION **NEW**

The new Primary Care Network option offers reduced contributions and unlimited hospitalisation through a network of private hospitals at the same level of cover.

For a full list of network hospitals please visit www.sizwe.co.za

AFFORDABLE CARE

Affordable Care offers comprehensive cover with generous chronic and day-to-day benefits. It offers excellent value for growing families and individuals who want the freedom to access affordable healthcare.

AFFORDABLE CARE NETWORK OPTION **NEW**

The new Affordable Care Network option offers reduced contributions with comprehensive cover with generous chronic and day-to-day benefits through a network of private hospitals.

For a full list of network hospitals please visit www.sizwe.co.za

FULL BENEFIT CARE

Full Benefit Care is an executive plan which offers full cover with generous day-to-day benefits, to families and individuals with established healthcare needs and needing access to unlimited private hospitalisation.



IN-HOSPITAL BENEFITS

Comparative Guide	GOMOMO CARE	HOSPITAL CARE	PRIMARY CARE	AFFORDABLE CARE	FULL BENEFIT CARE
In-Hospital Benefits All in-hospital benefits are subject to clinical and case management protocols and PMBs. Payment is effected at the Sizwe reimbursement rate. Unauthorised admissions will incur a co-payment of R1500 unless it is an emergency. A co-payment of R12 000 will apply to voluntary use of a non-network hospital for the Network Options (excluding emergencies).					
TOP UP COVER	No Benefits	No Benefits	No Benefits	No Benefits	Sizwe Tariff + 200%
PRIVATE HOSPITALS & NURSING HOMES Subject to pre-authorisation and case management protocols and PMBs					
ADMISSION	Unlimited at a private hospital	Unlimited at a private hospital	Unlimited at a private hospital	Unlimited at a private hospital	Unlimited at a private hospital
ANNUAL LIMIT	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
CLINICAL LIMITATIONS	Advanced laparoscopic surgery, reconstructive surgery, joint replacements, cardiac surgery including cardiac stents, spinal surgery, breast reconstructive surgery	Advanced laparoscopic surgery, reconstructive surgery, joint replacements, cardiac surgery including cardiac stents, spinal surgery, breast reconstructive surgery	Advanced laparoscopic surgery, reconstructive surgery, joint replacements, cardiac surgery including cardiac stents, spinal surgery, breast reconstructive surgery	Subject to Managed Care Protocols	Subject to Managed Care Protocols
EXCLUSIONS	Refractive surgery including radial keratotomy, breast reduction, breast augmentation, keloids, frail care	Refractive surgery including radial keratotomy, breast reduction, breast augmentation, keloids, frail care	Refractive surgery, breast reduction, breast augmentation, keloids, frail care	Subject to Managed Care Protocols	Subject to Managed Care Protocols
GENERAL PRACTITIONERS AND MEDICAL SPECIALISTS					
REIMBURSEMENT RATE	100% Sizwe Rate for consultations in hospital	100% Sizwe Rate for consultations in hospital	100% Sizwe Rate for consultations in hospital	100% Sizwe Rate for consultations in hospital	100% Sizwe Rate for consultations in hospital
AUXILIARY SERVICES					
REIMBURSEMENT RATE	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
DIETICIAN, SPEECH THERAPY, OCCUPATIONAL THERAPY	Subject to clinical protocols and pre-authorisation	Subject to clinical protocols and pre-authorisation	Subject to clinical protocols and pre-authorisation	Subject to clinical protocols and pre-authorisation	Subject to clinical protocols and pre-authorisation
AMBULANCE SERVICES CONTRACTED EUROP ASSISTANT (TEL: 0860 11 77 99)					

Comparative Guide	GOMOMO CARE	HOSPITAL CARE	PRIMARY CARE	AFFORDABLE CARE	FULL BENEFIT CARE
DENTAL HOSPITALISATION A co-payment of R1500 per hospital admission applies.					
REIMBURSEMENT RATE	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
GENERAL ANAESTHETIC	Subject to pre-authorisation and limited to PMB level of care	Pre-authorisation is required, subject to Managed Care Protocols	Pre-authorisation is required, subject to Managed Care Protocols	Pre-authorisation is required, subject to Managed Care Protocols	Subject to pre-authorisation and not limited to PMB level of care, subject to Managed Care Protocols
CONSCIOUS SEDATION IN ROOMS	Subject to pre-authorisation and limited to PMB level of care	Subject to pre-authorisation and not limited to PMB level or care	Subject to pre-authorisation and Managed Care Protocols	Subject to pre-authorisation and Managed Care Protocols	Subject to pre-authorisation and Managed Care Protocols
LAUGHING GAS IN ROOMS	Subject to pre-authorisation and limited to PMB level of care	Subject to available savings	100% Sizwe Rate subject to Managed Care Protocols	100% Sizwe Rate; subject to Managed Care Protocols	100% Sizwe Rate subject to Managed Care Protocols
PHYSIOTHERAPY					
REIMBURSEMENT RATE	Limited to PMB level of Care	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
MATERNITY Subject to registration on the Sizwe Baby Programme within 24 weeks of falling pregnant.					
REIMBURSEMENT RATE	100% of cost Hospitalisation (public or private hospital), delivery, post-natal services and midwifery	100% of cost Hospitalisation (public or private hospital), delivery, post-natal services and midwifery	100% of cost Hospitalisation (public or private hospital), delivery, post-natal services and midwifery	100% of cost Hospitalisation (public or private hospital), delivery, post-natal services and midwifery	100% of cost Hospitalisation (public or private hospital), delivery, post-natal services and midwifery
ONCOLOGY					
REIMBURSEMENT RATE	100% of cost	100% of cost	100% of cost	100% of cost	100% of cost
ANNUAL LIMIT	Consultation, treatment, medication and materials used in radiotherapy and chemotherapy subject to PMB	Consultation, treatment, medication and materials used in radiotherapy and chemotherapy subject to PMB	Overall limit of R151 690 per family per annum	Overall limit of R331 450 per family per annum	Overall limit of R397 750 per family per annum

Comparative Guide	GOMOMO CARE	HOSPITAL CARE	PRIMARY CARE	AFFORDABLE CARE	FULL BENEFIT CARE
PROSTHESIS					
REIMBURSEMENT RATE	100% Sizwe rate,	100% Sizwe rate,	100% Sizwe rate,	100% Sizwe rate,	100% Sizwe rate,
	Subject to pre-authorisation and treatment Protocols and PMB	Subject to pre-authorisation and treatment Protocols and PMB	Subject to pre-authorisation, treatment Protocols and PMB	Subject to pre-authorisation, treatment Protocols, and PMB	Subject to pre-authorisation, treatment Protocols and PMB
	External Prosthesis benefit up to R2 670 per family subject to PMB	Maximum of 3 cardiac stents and 2 vascular stents per family per annum	Maximum of 3 cardiac stents and 2 vascular stents per family per annum	Maximum of 3 cardiac stents and 2 vascular stents per family per annum	Maximum of 3 cardiac stents and 2 vascular stents per family per annum
	Subject to an annual limit: R29 630		Annual limit: R 27 010 for both surgical and non-surgical per family. Unless PMB is applicable	Annual limit: R 42 670 for both surgical and non-surgical per family	Annual limit: R 59 430 for both surgical and non-surgical per family. Unless PMB is applicable
RADIOLOGY AND RADIOGRAPHY					
REIMBURSEMENT RATE	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
SPECIALISED RADIOLOGY (MRI/CAT scan/Angiogram) pre-authorisation and Managed Care Protocols	Subject to an overall combined in and out of hospital limit of R7 530 per family per annum	Subject to an overall combined in and out of hospital limit of R26 660 per family per annum	Subject to an overall combined in and out of hospital limit of R19 710 per family	Subject to an overall combined in and out of hospital limit of R29 960 per family per annum	Subject to an overall combined in and out of hospital limit of R39 410 per family per annum
INTERVENTIONAL RADIOLOGY	Limited to PMB level of care	Payable from the hospital benefit, subject to pre-authorisation and Clinical Protocols Co-payments applicable to the following procedures: General Scopes R1 300 Endoscopic (Laparoscopic Surgery) investigations R3 000	Payable from the hospital limit, subject to pre-authorisation and Clinical Protocols	Payable from the hospital benefit, subject to pre-authorisation and Clinical Protocols	Payable from the hospital benefit, subject to pre-authorisation and Clinical Protocols
GENERAL RADIOLOGY	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate

Comparative Guide	GOMOMO CARE	HOSPITAL CARE	PRIMARY CARE	AFFORDABLE CARE	FULL BENEFIT CARE
PATHOLOGY					
REIMBURSEMENT RATE	100% Sizwe Rate Subject to Hospital Benefit Management Programme and Disease Management Programme	100% Sizwe Rate Subject to Hospital Benefit Management Programme and Disease Management Programme	100% Sizwe Rate Subject to Hospital Benefit Management Programme and Disease Management Programme	100% Sizwe Rate Subject to Hospital Benefit Management Programme and Disease Management Programme	100% Sizwe Rate Subject to Hospital Benefit Management Programme and Disease Management Programme
ORGAN TRANSPLANT AND RENAL DIALYSIS					
REIMBURSEMENT RATE	100% of cost	100% of cost	100% of cost	100% of cost	100% of cost
BENEFITS	Subject to Prescribed Minimum Benefits and clinical protocols at DSPs	Subject to Prescribed Minimum Benefits and clinical protocols at DSPs	Subject to Prescribed Minimum Benefits and clinical protocols at DSPs	Subject to Prescribed Minimum Benefits and clinical protocols at DSPs	Subject to Prescribed Minimum Benefits and clinical protocols at DSPs
BLOOD TRANSFUSION & BLOOD REPLACEMENT PRODUCTS					
REIMBURSEMENT RATE	100% of the cost of blood transfusions and blood replacement products, limited to PMBs	100% of the cost of blood transfusions and blood replacement products, limited to PMBs	100% of the cost of blood transfusions and blood replacement products, limited to PMBs	100% of the cost of blood transfusions and blood replacement products, limited to PMBs	100% of the cost of blood transfusions and blood replacement products, limited to PMBs
MENTAL HEALTH					
REIMBURSEMENT RATE	100% Sizwe Rate	No Benefits	No Benefits	No Benefits	No Benefits
PSYCHIATRIC HOSPITALISATION	Offering 4 additional out of hospital visits in lieu of hospitalisation	Offering 4 additional out of hospital visits in lieu of hospitalisation	Offering 4 additional out of hospital visits in lieu of hospitalisation	Offering 4 additional out of hospital visits in lieu of hospitalisation	Offering 4 additional out of hospital visits in lieu of hospitalisation
	Limited to 21 days per beneficiary including psychiatrist consultations and 6 in-hospital clinical psychologists subject to PMBs	Limited to 21 days per beneficiary including psychiatrist consultations and 6 in-hospital clinical psychologists subject to PMBs	Limited to 21 days per beneficiary including psychiatrist consultations and 6 in-hospital clinical psychologists subject to PMBs	Limited to 21 days per beneficiary including psychiatrist consultations and 6 in-hospital clinical psychologists subject to PMBs	Limited to 21 days per beneficiary including psychiatrist consultations and 6 in-hospital clinical psychologists subject to PMBs
ALCOHOLISM, DRUG ADDICTION, NARCOTISM	3 days withdrawal treatment and up to 21 days rehabilitation	3 days withdrawal treatment and up to 21 days rehabilitation	3 days withdrawal treatment and up to 21 days rehabilitation	3 days withdrawal treatment and up to 21 days rehabilitation	3 days withdrawal treatment and up to 21 days rehabilitation



OUT OF HOSPITAL BENEFITS

Comparative Guide	GOMOMO CARE	HOSPITAL CARE	PRIMARY CARE	AFFORDABLE CARE	FULL BENEFIT CARE
Out of Hospital Benefits The following services are covered subject to day-to-day benefits; General Practitioners, Specialists excluding Psychiatrists, Physiotherapists, Radiologists, Pathologists and Acute Medicines.					
OVERALL DAY-TO-DAY LIMIT					
REIMBURSEMENT RATE	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
BENEFIT	100% Sizwe rate, subject to managed care rules, formulary and Clinical Protocols of the DSPs	Introduction of 18% Medical Savings Account	M: R5 990 M +1: R8 870 M +2: R10 380 M +3: R11 870 M +4: R13 380 M +5: R14 880 M +6: R16 370	M: R10 380 M +1: R14 880 M +2: R17 120 M +3: R18 630 M +4: R20 880 M +5: R23 140 M +6: R25 250	M: R17 120 M +1: R23 140 M +2: R26 010 M +3: R29 000 M+4: R32 020 M +5: R35 020 M +6: R38 000
GENERAL PRACTITIONERS Subject to Day-to-Day Limit					
REIMBURSEMENT RATE	100% Sizwe Rate	Subject to available savings	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
VISITS	Benefits for full year subject to selected GP and Network Protocols Out-of-Area limited to 4 GP visits per beneficiary per annum within DSP Network	Subject to available savings	M: 6 M+1: 9 M+2: 12 M+3: 14 M+4: 15 M+5: 16 M+6: 17	M: 7 M+1: 14 M+2: 16 M+3: 18 M+4: 20 M+5: 21 M+6: 22	M: 12 M+1: 20 M+2: 25 M+3: 29 M+4: 30 M+5: 31 M+6: 32
SPECIALISTS General Practitioner referral is mandatory: Subject to Day-to-Day Limit					
REIMBURSEMENT RATE	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
VISITS	Subject to managed care rules, formulary and Clinical Protocols of the DSPs Subject to referral from a GP	Subject to available savings	M: 2 M +1: 6 M +2: 7 M +3: 8 M +4: 9 M +5: 10 M +6: 11	M: 4 M+1: 8 M +2: 9 M+3: 10 M+4: 11 M+5: 12 M+6: 13	M: 7 M+1: 12 M+2: 15 M+3: 16 M+4: 17 M+5: 19 M+6: 20

Comparative Guide	GOMOMO CARE	HOSPITAL CARE	PRIMARY CARE	AFFORDABLE CARE	FULL BENEFIT CARE
ACUTE MEDICINES Including Pharmacy and advised Therapy: Subject to Day to Day Limit					
REIMBURSEMENT RATE	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
LIMITS	100% Sizwe rate; subject to Managed Care rules, formulary and Clinical Protocols of DSP. Over the counter medicine limited to R320 per family within the DSP Network	Subject to available savings	M: R1 870 M +1: R3 370 M +2: R3 750 M +3: R4 250 M +4: R4 370 M +5: R4 610 M +6: R4 990	M: R3 610 M +1: R5 500 M +2: R6 500 M +3: R6 990 M +4: R8 000 M +5: R8 250 M +6: R8 500	M: R4 870 M +1: R8 620 M +2: R10 000 M +3: R11 380 M +4: R12 110 M +5: R12 750 M +6: R13 380
RADIOLOGY AND RADIOGRAPHY					
REIMBURSEMENT RATE	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
SPECIALISED RADIOLOGY (MRI/CAT scan/Angiogram) pre-authorisation and Managed Care Protocols	Subject to an overall combined in and out of hospital limit of R7 530 per family per annum	Subject to an overall combined in and out of hospital limit of R26 660 per family per annum	Subject to an overall combined in and out of hospital limit of R19 710 per family per annum	Subject to an overall combined in and out of hospital limit of R29 960 per family per annum	Subject to an overall combined in and out of hospital limit of R39 410 per family per annum
GENERAL RADIOLOGY (Subject to Day to Day Limit)	100% Sizwe Rate	100% Sizwe Rate. General Radiology out of hospital subject to MSA	100% Sizwe Rate Subject to Managed Care Protocols	100% Sizwe Rate Subject to Managed Care Protocols	100% Sizwe Rate Subject to Managed Care Protocols
PATHOLOGY Subject to Day-to-Day Limit					
REIMBURSEMENT RATE	100% Sizwe rate	100% Sizwe rate	100% Sizwe rate	100% Sizwe rate	100% Sizwe rate
	Subject to formulary and Managed Care Protocols	Subject to available savings	Subject to Managed Care Protocols	Paid from day-to-day limit	Paid from day-to-day limit
PHYSIOTHERAPY Subject to Day-to-Day Limit					
REIMBURSEMENT RATE	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
BENEFITS	Paid from day-to-day limit	Subject to available savings	Paid from day-to-day limit	Paid from day-to-day limit	Paid from day-to-day limit

Comparative Guide	GOMOMO CARE	HOSPITAL CARE	PRIMARY CARE	AFFORDABLE CARE	FULL BENEFIT CARE
AUXILIARY SERVICES	Audiologists, Chiropractors, Dieticians, Homeopaths, Occupational Therapists, Podiatrists, Social Workers, Educational Psychologist, Biokineticist and Registered Counsellors.				
BENEFITS	R2 670 per family: subject to PMBs	Subject to available savings	M: R1 070 M+1: R1 720	M: R1 590 M+1 R 2 790	M: R2 920 M+1: R4 920
DENTISTRY Conservative Dentistry: Subject to Dental Management Programme - 0860 109 556					
REIMBURSEMENT RATE	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
LIMIT PER BENEFICIARY Consultations, Oral Hygiene, Fillings	M: R2 920 M+1: R3 370 M+2: R3 660 M+3: R3 960 M+4: R4 230 M+5 R4 530 M+6 R4 970 Subject to Managed Care rules, formulary and Clinical Protocols of the DSPs	Subject to available savings	2 general check-ups annually, once in six months. Motivation may be requested for extensive restorative treatment plans (fillings)	2 general check-ups a year per beneficiary once in six months. Motivation may be requested for extensive restorative treatment plans (fillings)	2 general check-ups a year per beneficiary once in six months. Motivation may be requested for extensive restorative treatment plans (fillings)
EXTRACTIONS	Subject to annual limits	Subject to available savings	Subject to Managed Care Protocols	Subject to Managed Care Protocols	Subject to Managed Care Protocols
ROOT CANAL TREATMENT	Subject to Network provider, Managed Care rules and benefit limit	Subject to available savings	Subject to Managed Care Protocols, excluding wisdom teeth and primary teeth	Subject to Managed Care Protocols, excluding wisdom teeth and primary teeth	Subject to Managed Care Protocols, excluding wisdom teeth and primary teeth
PLASTIC DENTURES	Subject to use of a designated service provider (DSP), pre-authorisation, Managed Care rules and annual limits	Subject to available savings	1 set of plastic dentures, full or partial (an upper and a lower) per beneficiary in a 4-year period	1 set of plastic dentures, full or partial (an upper and a lower) per beneficiary in a 4-year period	1 set of plastic dentures, full or partial (an upper and a lower) per beneficiary in a 4-year period

Comparative Guide	GOMOMO CARE	HOSPITAL CARE	PRIMARY CARE	AFFORDABLE CARE	FULL BENEFIT CARE
SPECIALISED DENTISTRY					
CROWNS	No Benefits	Subject to available savings	No Benefits	1 Crown per family per year	3 Crowns per family per year
ORTHODONTICS	No Benefits	Subject to available savings	No Benefits	Subject to pre-authorisation and Managed Care Protocols. Restricted to beneficiaries between the ages of 9 to 18 years. A 35% co-payment applies	Subject to pre-authorisation and Managed Care Protocols. Restricted to beneficiaries between the ages of 9 to 18 years.
IMPLANTS	No Benefits	Subject to available savings	No Benefits	No Benefits	2 implants up to a maximum of R3 690 per implant per beneficiary over a 5 year period
METAL DENTURES	No Benefits	Subject to available savings	No Benefits	2 partial frames (an upper and a lower) per beneficiary in a 5 year period, limited to 1 family member per annum	2 partial frames (an upper and lower) per beneficiary in a 5 year period, limited to 2 family members per annum
MATERNITY Subject to registration on the maternity management program within 24 weeks of falling pregnant					
REIMBURSEMENT RATES	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
ANTENATAL CONSULTATIONS	Subject to Network Provider, Managed Care rules and benefit limit	9x GP/ Midwife/ Specialists visits with additional 2 Obstetrician visits	9x GP/ Midwife/ Specialists visits with additional 2 Obstetrician visits	9x GP/ Midwife/ Specialists visits with additional 4 Obstetrician visits	9x GP/ Midwife/ Specialists visits with additional 6 Obstetrician visits
PREGNANCY SCANS CONSULTATIONS	2x 2D scans 2x Haemoglobin measurement tests, 1x Blood Group test, 1x VDRL test for Syphilis 1x HIV Elisa test	2x 2D scans 2x Haemoglobin measurement tests 1x Blood Grouping test, 1x VDRL test for Syphilis 2x HIV Elisa tests, 1x Full Blood Count 12x Urine Tests, Vitamins worth R100 paid from day-to-day benefit (once off)	2x 2D scans 2x Haemoglobin measurement tests 1x Blood Grouping test, 1x VDRL test for Syphilis 2x HIV Elisa tests, 1x Full Blood Count 12x Urine Tests, Vitamins worth R100 paid from day-to-day benefit (once off)	2x 2D scans 2x Haemoglobin measurement tests 1x Blood Grouping test, 1x VDRL test for Syphilis 2x HIV Elisa tests, 1x Full Blood Count 12x Urine Tests, Vitamins worth R100 paid from day-to-day benefit (once off)	2x 2D scans 2x Haemoglobin measurement tests 1x Blood Grouping test, 1x VDRL test for Syphilis 2x HIV Elisa tests, 1x Full Blood Count 12x Urine Tests, Vitamins worth R100 paid from day-to-day benefit (once off)

Comparative Guide	GOMOMO CARE	HOSPITAL CARE	PRIMARY CARE	AFFORDABLE CARE	FULL BENEFIT CARE
OPTICAL BENEFITS ACCESSED THROUGH (PPN)					
REIMBURSEMENT RATE	Subject to Network Provider DSP	Subject to available savings	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
BENEFITS	One set of frames, or one pair of contact lenses per beneficiary every 2 years	One set of frames, or one pair of contact lenses per beneficiary every 2 years	One set of frames, or one pair of contact lenses per beneficiary every 2 years	One set of frames, or one pair of contact lenses per beneficiary every 2 years	One set of frames, or one pair of contact lenses per beneficiary every 2 years
LIMIT	M: R1 140 M+1: R1 370 M+2: R1 520 M+3: R2 180	Subject to available savings	Limit per beneficiary	Limit per beneficiary	Limit per beneficiary
CYCLE	Subject to above family limits	Subject to available savings	2 Years	2 Years	2 Years
FRAMES	R520 per beneficiary	Subject to available savings	R550 per beneficiary	R840 per beneficiary	R1 060 per beneficiary
SINGLE FOCUS LENSES	Subject to family limits	Subject to available savings	R185 per lens	R185 per lens	R185 per lens
BI-FOCAL LENSES	Subject to family limits	Subject to available savings	R400 per lens	R400 per lens	R400 per lens
MULTI-FOCAL LENSES	Subject to family limits	Subject to available savings	R400 per lens	R735 per lens	R735 per lens
CONTACT LENSES	Subject to family limits	Subject to available savings	R1 270 per beneficiary	R1 580 per beneficiary	R1 790 per beneficiary
REFRACTIVE SURGERY INCLUDING RADIAL KERATOTOMY					
REIMBURSEMENT RATE	No Benefits	No Benefits	No Benefits	100% Sizwe Rate	100% Sizwe Rate
BENEFITS	No Benefits	No Benefits	No Benefits	R6 660 per family per annum	R18 180 per family per annum
MENTAL HEALTH	Limited to Psychiatrists, Clinical and Counselling Psychologists relating to mental health. Benefit excludes services covered under the auxiliary benefit				
REIMBURSEMENT RATE	100% Sizwe Rate	100% Sizwe Rate subject to PMBs	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
BENEFIT	Limited to PMB level of care	Limited to PMB level of care	Subject to R5 460 per family per annum	Subject to R9 050 per family per annum	Subject to R17 450 per family per annum



CHRONIC BENEFITS



PREVENTATIVE CARE

Comparative Guide	GOMOMO CARE	HOSPITAL CARE	PRIMARY CARE	AFFORDABLE CARE	FULL BENEFIT CARE
Preventative Benefits					
PREVENTATIVE CARE					
REIMBURSEMENT RATE	No Benefits	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
WELLNESS CONSULTATIONS	No Benefits	Subject to available savings	R1 060 per family per annum	R1 550 per family per annum	R1 550 per family per annum
WELLNESS SCREENING TESTS	No Benefits	Limited to R330 per beneficiary per annum incl: Blood sugar, Cholesterol, Blood Pressure, Body Mass Index, HIV Testing	Limited to R270 per beneficiary per annum incl: Blood sugar, Cholesterol, Blood Pressure, Body Mass Index, HIV Testing	Limited to R270 per beneficiary per annum incl: Blood sugar, Cholesterol, Blood Pressure, Body Mass Index, HIV Testing	Limited to R270 per beneficiary per annum incl: Blood sugar, Cholesterol, Blood Pressure, Body Mass Index, HIV Testing
OTHER SCREENING TESTS					
REIMBURSEMENT RATE	No Benefits	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
FAMILY LIMIT	No Benefits	R2 140 per annum	R2 130 per annum	R2 130 per annum	R3 030 per annum
BENEFITS	No Benefits	<p>Mammograms: once in a 2 year cycle for females over 40 years</p> <p>Pap Smear: once in a 2 year cycle for females over 21 years</p> <p>Prostate-Specific Antigen (PSA): once per year for males over 40 years</p>	<p>Mammogram every 2 years for females over 40 years</p> <p>Pap Smear every 2 years for females over 21 years</p> <p>Prostate-Specific Antigen (PSA): once per year for males over 40 years</p>	<p>Mammogram every 2 years for females over 40 years</p> <p>Pap Smear every 2 years for females over 21 years</p> <p>Prostate-Specific Antigen (PSA): once per year for males over 40 years</p>	<p>Mammogram every 2 years for females over 40 years</p> <p>Pap Smear every 2 years for females over 21 years</p> <p>Prostate-Specific Antigen (PSA): once per year for males over 40 years</p>

Comparative Guide	GOMOMO CARE	HOSPITAL CARE	PRIMARY CARE	AFFORDABLE CARE	FULL BENEFIT CARE
VACCINATIONS Subject to annual family limit					
REIMBURSEMENT RATE	No Benefits	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
BENEFITS	Subject to PMB level of care	Flu Vaccine Pneumococcal Vaccine HPV Vaccine Immunistaions for children 6 years and younger subject to family limit	Flu Vaccine Pneumococcal Vaccine HPV Vaccine Immunistaions for children 6 years and younger subject to family limit	Flu Vaccine Pneumococcal Vaccine HPV Vaccine Immunistaions for children 6 years and younger subject to family limit	Flu Vaccine Pneumococcal Vaccine HPV Vaccine Immunistaions for children 6 years and younger subject to family limit
FEMALE CONTRACEPTIVES					
REIMBURSEMENT RATE	No Benefits	Oral Contraceptives subject to Managed Care Protocols and savings	100% Sizwe Rate	100% Sizwe Rate	100% Sizwe Rate
BENEFITS	No Benefits	Subject to available savings limit	R2 760 per family per annum Subject to pre-authorisation and Managed Care Protocols	R2 760 per family per annum Subject to pre-authorisation and Managed Care Protocols	R2 760 per family per annum Subject to pre-authorisation and Managed Care Protocols
OTHER BENEFITS					
APPLIANCES	No Benefits	No Benefits	M: R1 070 M+: R1 720	M: R1 590 M+: R2 790	M: R2 790 M+: R4 640
NON-MOTORISED WHEELCHAIR	No Benefits	Subject to available savings	R1 980 per family Once in every 4 years	R3 320 per family Once in every 4 years	R4 630 per family Once in every 4 years
HEARING AIDS	No Benefits	Subject to available savings	R7 910 per family One unit per beneficiary every 4 years	R12 660 per family One unit per beneficiary every 3 years	R18 990 per family One unit per beneficiary every 3 years
PRIVATE NURSE	No Benefits	No Benefits	R4 790 per family per annum Subject to pre-authorisation	R7 150 per family per annum Subject to pre-authorisation	R9 080 per family per annum Subject to pre-authorisation
CHIROPRACTORS	No Benefits	Subject to available savings	R1 060 per beneficiary per annum subject to pre-authorisation	R1 370 per beneficiary per annum subject to pre-authorisation	R2 110 per beneficiary per annum subject to pre-authorisation

2019 CONTRIBUTIONS

	Income Bracket	Principal Member	Adult Dependant	Child Dependant
HOSPITAL CARE	ALL	R1 955	R1 433	R651
	<i>Linked to an 18% savings</i> Annual savings	R4 224	R3 096	R1 404
GOMOMO CARE	R0 - R7 540	R902	R892	R376
	R7 541 - R8 796	R1 258	R1 258	R456
	R8 797 - R11 309	R1 795	R1 733	R500
	R11 310+	R2 230	R1 820	R533
PRIMARY CARE NEW PRIMARY CARE NETWORK OPTION <i>We count a maximum of three children when we calculate the monthly contributions.</i>	R0 - R9 803	R2 140	R1 668	R638
	R9 804+	R2 395	R1 703	R702
	R0 - R9 803	R2 033	R1 585	R606
	R9 804+	R2 275	R1 618	R667
AFFORDABLE CARE NEW AFFORDABLE CARE NETWORK OPTION <i>We count a maximum of three children when we calculate the monthly contributions.</i>	R0 - R16 833	R3 065	R2 816	R772
	R16 834 - R32 499	R3 188	R2 927	R804
	R32 500+	R3 418	R3 272	R868
	R0 - R16 833	R2 912	R2 675	R733
FULL BENEFIT CARE <i>We count a maximum of three children when we calculate the monthly contributions.</i>	R16 834 - R32 499	R3 029	R2 781	R764
	R32 500+	R3 247	R3 108	R825
	R0 - R32 499	R4 722	R4 290	R964
	R32 500+	R5 273	R4 987	R1 052

DISCLAIMER:

This brochure is for information purposes only and does not supersede the rules of the Fund. A full set of rules is available on our website: www.sizwe.co.za

IMPORTANT CONTACT DETAILS



IMPORTANT CONTACT DETAILS

Hospital Pre-Authorisation, Hospital Benefit Management Programme

Tel: 0860 101 176

Dental Benefit Management - DENIS

Tel: 0860 109 556

Fax: 0866 770 336

Email: sizweenq@denis.co.za

Out Of Hospital/Day-to-day Benefits Network Providers

Uitenhage: INTELIHEALTH AFRICA (UDIPA)

Tel: 041 991 0455

Port Elizabeth: ECIPA

Tel: 041 395 4482

All other areas - ENABLEMED

Tel: 0860 00 24 00

Wellness Programme – Helpline For Asthma, Cardiovascular Disease, Diabetes and Mental Health

Tel: 0860 103 454

Fax: 011 221 5238

Email: wellnessqueries@sizwemedfund.co.za

HIV/AIDS Management Programme

Tel: 0860 103 454

Fax: 011 221 5235 / 56

EUROP Assistance SA, Medical Emergencies, 24-Hour Ambulance Services and Medical Advice

Tel: 0860 117 799

Sizwe Baby Programme

Fax: 011 221 5218

Email: sizwebaby@healthchoices.com

Tip-Offs Anonymous Fraud Line

Tel: 0800 204 702

Fax: 0800 007 788

Email: sizwemedical@tip-offs.com

Chronic Medication Programme

Tel: 0860 103 455 / 011 353 0030

Fax: 011 353 0352 / 0076

Email: chronic@sizwe.co.za

Uitenhage: INTELIHEALTH AFRICA (UDIPA)

Fax: 041 991 1915

Email: admin@udipa.co.za

Port Elizabeth: ECIPA

Fax: 086 680 8855

Email: pbm@providence.co.za

All other areas - ENABLEMED

Fax: 086 666 0228

Email: chronic@enablemed.com

PRESCRIBED MINIMUM BENEFITS (PMBs)

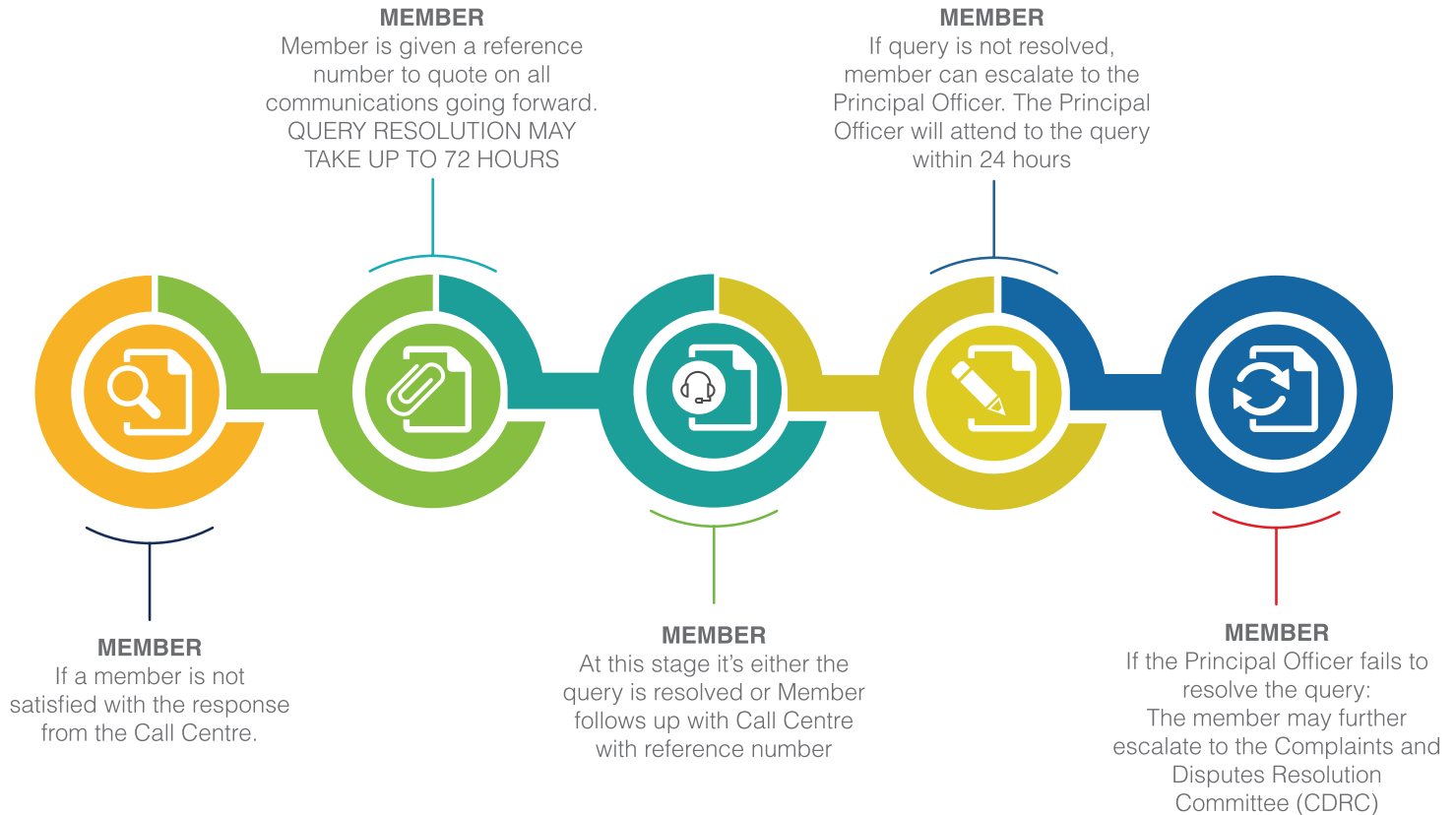


PMBs are not subject to annual benefit limits, except for such limits as may be prescribed in terms of the regulations; Prescribed Minimum Benefits are subject to Pre-authorisation, Minimum Benefit Package, Designated Service Providers and Treatment Protocols.

PRESCRIBED MINIMUM BENEFITS (PMBs)		NON-CDL CHRONIC CONDITIONS COVERED (FOR FULL BENEFIT CARE PLAN)
Addision's disease	Schizophrenia	
Asthma	Systemic Lupus Erythematosus	
Bipolar Moods Disorder	Ulcerative colitis	Alzheimer's Disease
Bronchiectasis	ADDITIONAL NON-CDL CHRONIC CONDITIONS COVERED (FOR AFFORDABLE & FULL BENEFIT CARE PLANS)	Ankylosing Spondylitis
Cardiac failure		Attention Deficit Disorder/ Hyperactivity
Cardiomyopathy		Chronic Urinary Tract Infection
Chronic obstructive pulmonary disease		
Chronic renal disease	Anaemia: Vitamin B12 Deficiency	Cryoglobulinemia
Chronic renal disease	Anti-phospholipid Syndrome	Delusional Disorders
Coronary artery disease	Allegeric Rhinitis	Dermatomyositis
Crohn's disease	Aplastic Anaemia	Enuresis/ Incontinent
Diabetes insipidus	Benign Prostatic Hypertrophy	Gastro Oesophageal Reflux
Diabetes mellitus types 1 & 2	Endocarditis	Hyperthyroidism
Dysrhythmias	Gout	Migraine
Epilepsy	Hypoparathyroidism	Motor Neuron Disease
Glaucoma	Iron Defiency Anaemia	Myasthenia Gravis
Haemophilia	Osteo-arthritis	Osteoporosis
HIV/AIDS	Stroke	Obsessive Compulsive Disorder
Hyperlipidaemia	ADDITIONAL PMBs	Paget's Disease
Hypertension	Major Depression	Pancreatic Insufficiency
Hypothyroidism	HRT (Hormone Replacement Therapy)	Peripheral Vascular Disease
Multiple sclerosis		Psoriasis
Parkinson's disease		Pituitary adenomas
Rheumatoid arthritis		Pulmonary Interstitial Fibrosis

COMPLAINTS ESCALATION PROCESS

At Sizwe Medical Fund, we continuously strive to ensure that our service and communication to you, our valued member is of the highest standard. Occasionally errors do occur and there could be times when you are not satisfied with the service you receive. Please feel free to lodge any queries or complaints and we will attempt to resolve these as quickly and effectively as possible. In our added efforts to improving our communication with you our valued member, the scheme has enhanced the query and escalation process.



Should your query not be resolved, then you have the options outlined to further assist you. Note that the steps above require a reference number that you would be given to you on your initial query. Ensure that you have utilised one of the contact methods above before embarking on the escalation process. Email your query with a reference number to escalations@sizwemedfund.co.za.

IF YOUR QUERY HAS NOT BEEN ATTENDED TO, THEN THE MATTER CAN BE ESCALATED FURTHER TO THE COMPLAINTS AND DISPUTES RESOLUTION COMMITTEE (CDRC), ALL THE ABOVE ACTIONS MUST BE TAKEN BEFORE ESCALATION. CDRC ESCALATIONS TO BE SENT TO PRINCIPAL.OFFICER@SIZWEMEDFUND.CO.ZA

LIST OF LIMITATIONS AND EXCLUSIONS

1. LIMITATIONS AND EXCLUSIONS

The scheme will pay in full, without co-payment or use of deductibles, the diagnosis, treatment and care costs of the prescribed minimum benefits as per regulation 8 of the Act. 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 regulation 15H and 15I of the Act.

The following limitations will apply on all benefit options:

- 1.1 The maximum benefits to which a member and his dependants shall be entitled in any financial year shall be limited as set out in Annexure B.
- 1.2 All new members admitted during the course of a financial year shall be entitled to the benefits set out in Annexure B with the maximum benefits being adjusted in proportion to the period of membership from the admission date to the last day of such financial year.
- 1.3 In cases of illness of a protracted nature, the Board shall have the right to insist upon a member or a dependant of a member consulting any particular specialist the Board may nominate in consultation with the attending practitioner.
- 1.4 Unless otherwise decided by the Board, benefits in respect of medicines obtained on a prescription are limited to one month's supply (or to the nearest unbroken pack) for every such prescription or repeat thereof.
- 1.5 Where the Fund has Designated Service Providers in place, the benefits will be limited in accordance to the rules specified in Annexure B for each of the registered options.

2. BENEFITS EXCLUDED ON ALL BENEFIT OPTIONS, SUBJECT TO PMBS

EXCLUSIONS (all options)

Unless otherwise decided by the Board, the Fund shall not be liable in respect of expenses incurred in connection with any of the following:

- 2.1 The surgical treatment for obesity;
- 2.2 The surgical treatment of infertility unless it is classified as a PMB;
- 2.3 Operations, treatments and procedures for cosmetic purposes or for personal reasons and not directly caused by or related to illness, accident or disease;
- 2.4 Surgical treatment of keloids, unless such keloids are a result of a complication from a PMB condition resulting in functional impairment;
- 2.5 Cosmetic surgery;
- 2.6 Frail care;
- 2.7 Breast reconstructive surgery for Primary Care unless it is classified as a PMB;
- 2.8 Injuries arising from speed contests and speed trials unless it is classified as a PMB;
- 2.9 Such costs that are more than the annual maximum benefit to which a member is entitled in terms of the rules, unless otherwise agreed by the Board;
- 2.10 The purchase of medicines not included in a prescription from a person legally entitled to prescribe, unless otherwise provided for in Annexure B;

2. BENEFITS EXCLUDED ON ALL BENEFIT OPTIONS, SUBJECT TO PMBS

2.11 Unless otherwise provided for in Annexure B, services rendered by:

2.11.1 Any other person not registered with the Health Professions Council of South Africa or with the Chiropractors Homeopaths and Allied Health Services Professions Council of South Africa;

2.11.2 Any person not registered with the South African Nursing Council as a nurse; or

2.11.3 Any person not registered with the South African Dental Technicians Council as a dental technician;

2.11.4 Any place, nursing or similar institution, except a State or provincial hospital, not registered in terms of the applicable legislation as a private hospital, unattached theatre or day clinic and any institution not licensed in terms of the Mental Health Act, 1973, provided that if a member incurs a cost for services rendered outside the Republic of South Africa for which, as per the discretion of the Board a benefit would have been payable if such service had been rendered within the Republic of South Africa such benefit shall be entitled to be granted in accordance with the provisions or Rule 16.5; and

2.11.4 Medical Scientist

- Psychometry and Registered Counselling
- Industrial and Research Psychologist

2.12 Other exclusions

- Anabolic steroids;
- Anti-diarrhoeal micro-organism;
- Anti-malarials for prophylactic use;
- Aphrodisiacs;
- Contact lens preparations;
- Cosmetic preparations, medicated or otherwise;
- Diagnostic monitors and appliances,
- Essential fatty acid preparations and combinations;

- Household remedies or preparations of the type generally promoted to the public to increase consumption;
- Household type bandages and dressings;
- Immune sera and immunoglobulins;
- Medicines used specifically to promote fertility unless classified as a PMB;
- Medicines used specifically to treat alcoholism and addiction, subject to PMBs;
- Minerals (single and combined);
- Musculo-skeletal topical agents;
- Nutritional supplements, including baby foods, and formulas unless it is specially authorised as part of a scheme approved treatment protocol;
- Preparations used specifically to treat and or prevent obesity;
- Preparations to treat smoking dependency;
- Sanitary products (nappies, sanitary pads etc.);
- Items appearing on the Scheme's non-covered items list for hospitals;
- Section 21 products;
- Soaps, shampoos and other applications (medical or non-medicated);
- Stimulant laxatives;
- Surgical appliances and devices for use out of hospital;
- Syringes and needles for use out of hospital (except for use by diabetics and if classified as a PMB);
- Tonics and stimulants;
- Topical acne facial wash preparations;
- Topical sun screening, sun tanning and after sun agents;
- Travel vaccines;
- Treatment not proven safe and effective, such as natural remedies, herbs, and treatment prescribed by non-licensed practitioners etc.;
- Treatment prescribed for indicated use (off label);
- Vaccines, oral and parenteral (except childhood and flu vaccines);
- Vitamins, multivitamins and combinations;
- Voluntary withdrawn products and treatment that might be harmful or unsafe; and
- Acupuncture and Chinese Medicine

- o Naturopath
- o Osteopathy

2.12.1 Holidays for recuperative purposes

- 2.12.2 Travelling expenses incurred by a member Traveling expenses claimed by medical or dental practitioners will be provided for in line with Rule P of the NHRPL.
- 2.12.3 Charges for appointments cancelled or which a member or dependant or a member fails to keep.
- 2.12.4 The use of gold in dentures or the cost of gold as an alternative to non-precious metal in crowns, inlays and bridges, and metal frame on full dentures.
- 2.12.5 The payment of interest on arrear accounts.

3. DENTAL EXCLUSIONS

3.1 Oral Hygiene/Prevention

- 3.1.1 Oral hygiene instruction
- 3.1.2 Oral hygiene evaluation
- 3.1.3 Professionally applied fluoride for beneficiaries 13 years and older
- 3.1.4 Dental bleaching
- 3.1.5 Nutritional and tobacco counselling
- 3.1.6 Cost of prescribed toothpastes, mouthwashes (e.g. Corsodyl) and ointments
- 3.1.7 Fissure sealants on patients 16 years and older

3.2 Fillings/Restorations

- 3.2.1 Fillings to restore teeth damaged due to toothbrush abrasion, attrition, erosion and fluorosis
- 3.2.2 Resin bonding for restorations charged as a separate procedure to the restoration
- 3.2.3 Polishing of restorations
- 3.2.4 Gold foil restorations
- 3.2.5 Ozone therapy

3.3 Root Canal Therapy and Extractions

- 3.3.1 Root canal therapy on primary (milk) teeth
- 3.3.2 Direct and indirect pulp capping procedures
- 3.3.3 Root canal therapy on wisdom teeth (third molars)

3.4 Plastic Dentures/Snoring appliances/Mouth-guards

- 3.4.1 Diagnostic dentures and the associated laboratory costs
- 3.4.2 Snoring appliances and the associated laboratory costs
- 3.4.3 Provisional dentures and associated laboratory costs
- 3.4.4 The clinical fee of dental repairs, denture tooth replacements and the addition of a soft base to new dentures (The laboratory fee will be covered at the Scheme Dental Tariff where managed care protocols apply)
- 3.4.5 The laboratory cost associated with mouth guards (The clinical fee will be covered at the Scheme Dental Tariff where managed care protocols apply)
- 3.4.6 High impact acrylic
- 3.4.7 Cost of gold, precious metal, semi-precious metal and platinum foil
- 3.4.8 Laboratory delivery fees

3.5 Partial Metal Frame Dentures

- 3.5.1 Metal base to full dentures, including the laboratory cost
- 3.5.2 High impact acrylic
- 3.5.3 Cost of gold, precious metal, semi-precious metal and platinum foil
- 3.5.4 Laboratory delivery fees

3.6 Crown and Bridge

- Crown and crown retainers on wisdom teeth (3rd molars)
- Pontics on 2nd molars
- Crown and bridge procedures for cosmetic reasons and the associated laboratory costs
- Crown and bridge procedures where there is no extensive tooth structure loss and associated laboratory costs
- Occlusal rehabilitations and the associated laboratory costs
- Provisional crowns and the associated laboratory costs
- Porcelain veneers and inlays/onlays and the associated laboratory costs
- Emergency crowns that are not placed for immediate protection in tooth injury, and the associated laboratory costs
- Cost of gold, precious metal, semi-precious metal and platinum foil
- Laboratory delivery fees

3.7 Implants

- 3.7.1 Implants on wisdom teeth (3rd molars)
- 3.7.2 Dolder bars and associated abutments on implants including the associated laboratory costs
- 3.7.3 Laboratory delivery fees

3.8 Orthodontics

- 3.8.1 Orthodontic treatment for cosmetic reasons and associated laboratory costs
- 3.8.2 Orthognathic (jaw correction) surgery, other orthodontic related surgery and any related hospital cost including associated laboratory costs.
- 3.8.3 Orthodontic re-treatment and the associated laboratory costs
- 3.8.4 Cost of invisible retainer material
- 3.8.5 Laboratory delivery fees

3.9 Periodontics

- 3.9.1 Surgical periodontics, which includes gingivectomies, periodontal flap surgery, tissue grafting and hemi-section of a tooth
- 3.9.2 Perio chip placement

3.10 Maxillo-Facial Surgery and Oral Pathology

- 3.10.1 Orthognathic (jaw correction) surgery and any related hospital cost, and the associated laboratory costs.
- 3.10.2 Bone augmentations

3.10.4 Cost of bone regeneration material

3.10.5 The auto-transplantation of teeth

3.10.6 Sinus lift procedures

3.10.7 The closure of an oral-antral opening (item code 8909) when claimed during the same visit with impacted teeth (item codes 8941, 8943 and 8945)

3.11 Hospitalisation (general anaesthetic)

3.11.1 Where the reason for admission to hospital is dental fear or anxiety

3.11.2 Multiple hospital admissions

3.11.3 Where the only reason for admission to hospital is to acquire a sterile facility

3.11.4 The cost of dental materials for procedures performed under general anaesthetic

3.11.5 The hospital and anaesthetist claims for the following procedures will not be covered when performed under general anaesthesia:

- Apicectomies
- Dentectomies
- Frenectomies
- Conservative dental treatment (fillings, extractions and root canal therapy) in hospital for adults
- Professional oral hygiene procedures
- Implantology and associated surgical procedures, and
- Surgical tooth exposure for orthodontic reasons

3.12 Additional scheme exclusions

3.12.1 Special reports

3.12.2 Dental testimony, including dentolegal fees

3.12.3 Behaviour management

3.12.4 Intramuscular and subcutaneous injections

3.12.5 Procedures that are defined as unusual circumstances and procedures that are defined as unlisted procedures

3.12.6 Appointments not kept

3.12.7 Treatment plan completed (code 8120)

3.12.8 Electrognathographic recordings, pantographic recordings and other such electronic analyses

3.12.9 Caries susceptibility and microbiological tests

3.12.10 Pulp tests

3.12.11 Cost of mineral trioxide

GLOSSARY

Acute Medicines: Medicines for short-term illnesses and medical problems.

Adult Dependant: A dependant from the age of 21 who is not a full-time student or financially dependent on their parent, and is in receipt of an income more than the state pension. Adult rate will be charged.

AIDS: Acquired Immune Deficiency Syndrome.

Child Dependant: A child dependant is considered an adult dependant and will be billed at an adult rate from the age of 21 unless: The child is between the ages of 21 and 24 years, is a full-time student, in which case a letter must be submitted from an accredited learning institution confirming that they are registered as a full-time student. The child is mentally or physically disabled; The child is still financially dependent on the matter, in which case an affidavit is required.

Chronic Benefit Entry Criteria: Diagnostic tests to confirm a chronic illness, e.g. blood tests or ECG reports, etc.

Chronic Disease List: A list of chronic illnesses that are covered in terms of legislation.

Chronic Medicines: Medicines used to manage conditions as listed on the Sizwe chronic conditions list.

Conservative Dentistry: Simple dental services, such as fillings, tooth removal (extractions) and teeth cleaning.

Consultation: A visit to your doctor, surgeon or other service provider to obtain a diagnosis and/or treatment.

CT and MRI Scans: CT scans, uses X-rays, MRI scans use powerful magnetic fields and radio frequency pulses to produce detailed pictures of organs, soft tissues, bone and other internal body structures.

Day-to-day Benefit: A combined out of hospital benefit which may be used by any registered family member in respect of GPs, Specialists, Acute medicines, Pathology, Radiology and Physiotherapy.

Dental Benefit Management Programme: A behind-the-scenes cost and quality programme managed by Dental Information Systems (Denis).

Designated Service Provider: Providers of medical services with whom Sizwe has negotiated special rates.

Formulary: A list of medicines that will be paid by Sizwe Medical Fund according to the specific chronic illness and option chosen.

Generic: A medicine that has the same ingredients and which works the same as a well-known brand medicine.

HIV: Human Immunodeficiency Virus.

Medical Emergency: An emergency medical condition means the sudden and, at the time, unexpected onset of a health condition that requires immediate medical treatment and/or an operation. If the treatment is not available, the emergency could result in weakened bodily functions, serious and lasting damage to organs, limbs or other body parts, or even death.

MMAP: This refers to the Maximum Medical Aid Price which is the maximum price Sizwe Medical Fund is prepared to pay for specific categories of generic medicine.

Network Options: This is an option with the exact same benefits as its main option; however with reduced contributions due to restrictions placed on members to only use certain healthcare providers or provider groups.

Occupational therapy: Mental or physical activity designed to help you recover from an injury or a disease.

Oncology: Is a branch of medicine that deals with the prevention, diagnosis, and treatment of cancer.

Pharmacy Advised Therapy (PAT): Medicine recommended by your pharmacist and which falls within the self-medication category.

Pre-authorisation: Obtaining permission from Sizwe Medical Fund before receiving treatment.

Preferred Provider: A provider recommended by Sizwe Medical Fund that offers cost-effective treatment to members.

Prescribed Minimum Benefits (PMBs): The Registrar of Medical Schemes requires all medical schemes to offer a number of minimum benefits to all its members.

Reference Pricing: This refers to a medicine cost control mechanism used by schemes and assists schemes to manage the high costs of medicines. Members are given a formulary list of medicines that are paid for by the Scheme. Where a member chooses a medicine off the formulary, the reference price refers to the co-payment between the cost of the formulary medicine and the non-formulary medicine.

Rehabilitation: Treatment to help you get back to a normal life following injury or disease.

SAOPA Rates: The tariff charged by the South African Orthoptic and Prosthetic Association.

Sizwe Rates: The rate negotiated by Sizwe Medical Fund with groups of providers.

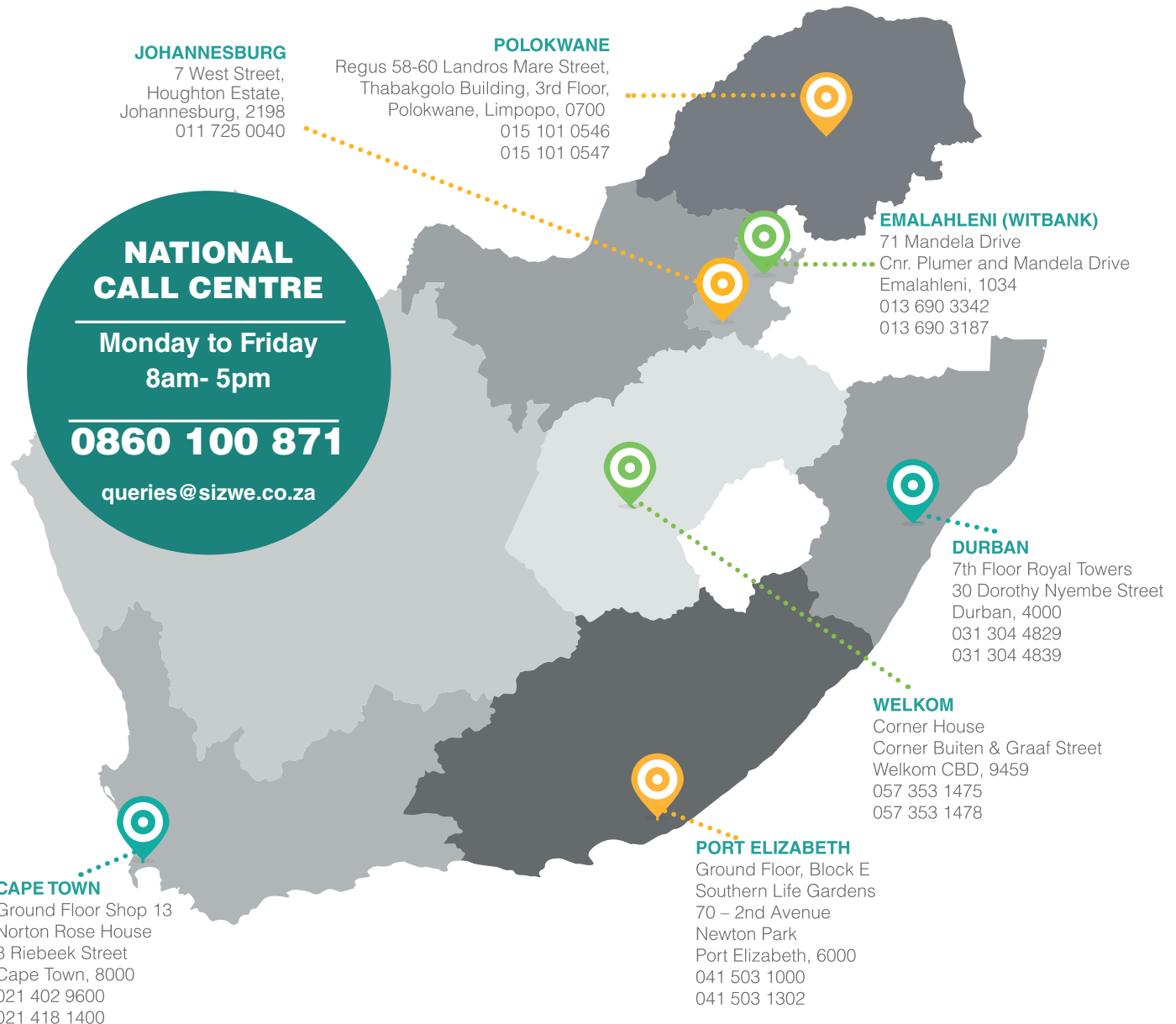
Specialised Dentistry: Reconstructive surgery providing, for example, caps, crowns and bridges. This typically requires the services of a dental technician.

Top-up cover: When in hospital, it is the difference between Sizwe rates and the amount charged by practitioners. Top-up cover pays up to 200% over the Sizwe rate. Top-up cover comes into effect immediately when you are admitted to hospital. Only available on the Full Benefit care option and must be claimed within three months of hospitalisation.

Treatment Protocols: The rules and processes that are followed for treating a specific condition.

UPFS Rates: Uniform Patient Fee Schedule - the tariffs charged by public hospitals.

CONTACT DETAILS





YOUR WELLNESS | SORTED

Zest Rewards is the exclusive loyalty program for all Sizwe Medical Fund Members. With Zest Rewards, you have a basket of unique assistance services that you can use every day and save money.

**Join the program that
offers you more!**

www.zestrewards.co.za

Our practical assistance includes Debt Assist, Legal Assist and Emergency Home Assist services for our members and their families. Zest Rewards Program is committed to providing real value to its members every day.



ASSISTANCE SERVICES



HOME EMERGENCY ASSIST

All Emergency Home Assist including electrical, plumbing and locksmiths services including call out fees and labour for 1st hour free of charge to the client.



LEGAL ASSIST

Legal Aid Assistance with qualified lawyers for all members including perusal of documents and advice and consultations. Limited to 30 minutes per consultation.



DEBT ASSIST

Credit report review/Debt counselling/Mediation services/ Voluntary debt review/Administration order assist and reduction of monthly payments in terms of the NCR regulations.



WILLS AND TRUST

Assist with drafting, safekeeping of wills, Interpretation of wills and assistance in finalising a will and estate administration.



BAIL PROTECT

Maximum amount of bail per incident is R3 000. An attorney will get to Police station within 4 hours.



SOS ASSIST

GPS location based service for emergency notifications to programmed numbers, hospitals, chemists and doctors including a TrackMe Service.

GYM MEMBERSHIP

Zest Members Qualify For Discounted Gym Membership Fees At Planet Fitness & Affiliated Gyms with over 250 branches nationwide.



DISCOUNT PARTNERS

Nationwide Discounts, retail partners including Shoprite and Checkers.



MONTHLY FEE

Exclusive to Sizwe Medical Fund members at a low low price. Additional members R20 per person.



TO SIGN UP

SIMPLY CALL OUR CALL CENTRE ON 0860 937 800 OR SMS "ACTIVE" TO 49212





SIZWE
MEDICAL FUND

Your health in caring hands



Comparative Benefit Guide

Sizwe Medical Fund is regulated by the Council for Medical Schemes.
Sizwe Medical Fund number 1486, administered by
Sechaba Medical Solutions (Pty) Ltd;
registration number 1978/001109/07,
An accredited administration and managed care service provider.