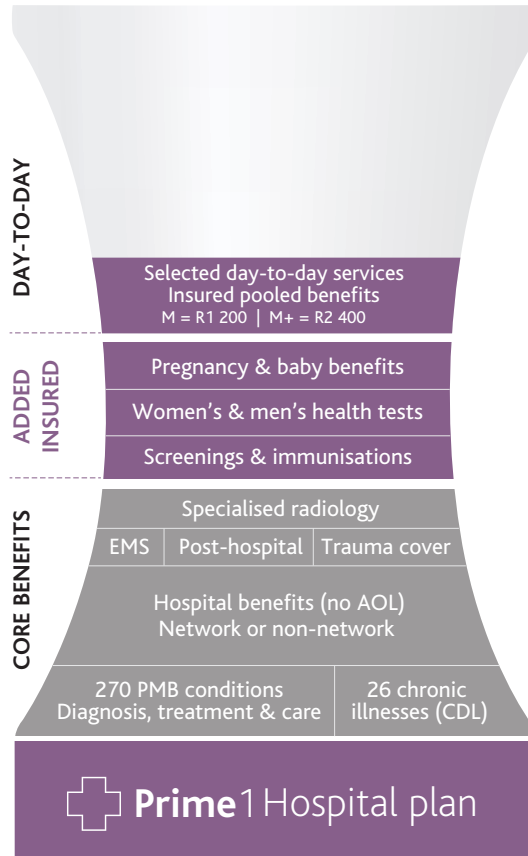





# Prime1 Hospital plan

This hospital plan is ideal if you are healthy and want access to private healthcare at an affordable price. You get cover for hospital admissions at any private facility, minor day-to-day medical expenses and extensive added insured benefits such as screenings, pregnancy and baby consultations, as well as immunisations. Save 22% in monthly contributions when choosing a network of 119 quality private hospitals as an alternative.



## Monthly contributions

You only pay for two children younger than 18 years, after which child dependant rates will apply from the beginning of the year following the year in which they turn 18, until they are 26 years old.

	Network	Non-network
Principal member 	R1 626	R2 082
Dependant 	R1 338	R1 716
Child dependant <26 years 	R492	R630

The monthly contribution does not take any employer subsidy into account

## Day-to-day benefits



### Insured day-to-day benefits

GP and specialist consultations, physiotherapy, acute medicine and self-medication, including visits to emergency units

Member = R1 200 per year

Member+ = R2 400 per year



### Medicine

#### PMB chronic medicine

Non-network option – 100% of the MHRP

Network option – 100% of the MHRP (DSP and formulary apply)



### Dentistry

DRC network applies

100% of the MT for dental procedures under conscious sedation in the dentist's chair (sedation cost) for the removal of impacted teeth only (3rd molars)

Dentist's account – item codes apply



### HealthPrint

Medihelp members get free access to this online health and wellness programme designed to add value based on their health profile through programmes such as a pregnancy and baby programme and discounts at selected partners.



### External prostheses and medical appliances

In and out of hospital

- Benefit per family per 3-year cycle:
  - Artificial eyes – R4 700
  - Speech and hearing aids – R4 700
  - Wheelchairs – R4 700
  - Artificial limbs – R4 700
- CPAP apparatus – R9 700 per beneficiary per 24-month cycle

#### Important:

This is only a summary of the available benefits. Please consult the registered Medihelp Rules for more information and details of services that are excluded from benefits. In case of a dispute, the Rules of Medihelp will apply (subject to approval by the Council for Medical Schemes).

- Certain added insured benefits are not available if you have been registered for a PMB condition as the treatment is no longer considered as preventive care and may be linked to a specific age/gender/item code. Benefits are paid at 100% of the MT.
- Doctors' consultations are paid from available day-to-day benefits.
- Subject to pre-authorisation and/or protocols.
- Generic medicine = 100% of MMAP | Original medicine - no generic available = 80% of MT | Choose original medicine – generic is available = 70% of MMAP

## Added insured benefits



### Women's health

- A mammogram for women 40 years and older (per 2-year cycle)
- A pap smear (per 3-year cycle)



### Enhanced maternity benefits

- Pregnancy and baby programme
- 12 ante- & postnatal consultations
- Two 2D ultrasound scans per family



### Child benefits

- Two additional GP or specialist visits (babies under 1 year)
- Standard child immunisations for children younger than 7 years



### Over 50s

- One bone mineral density test for women over 50 years
- A Pneumovax vaccine in a 5-year cycle per person over 55 years
- An FOBT test for people over 50 years



### Men's health

- A prostate test (PSA level) for men 40 years and older



### Routine screening and immunisation

- A combo test (blood glucose, cholesterol, BMI & blood pressure measurement)/individual blood glucose or cholesterol test
- HIV testing
- A tetanus vaccine
- A flu vaccination
- Two HPV vaccinations for girls and boys between 10-14 years or three between 15-26 years



### Supporting wellness

- One dietician consultation per registered HealthPrint member if a BMI test result indicates a BMI higher than 30
- Back treatment at a Document Based Care facility
- Chronic Care programme

## Core benefits



### Chronic illness/PMB

100% of the cost for 270 PMB and 26 chronic conditions (DSPs, formulary, networks, protocols and pre-authorisation apply)



### Emergency transport

Netcare 911

#### In country of residence

RSA, Lesotho, Swaziland, Mozambique, Namibia & Botswana – unlimited

#### Outside country of residence

Transport by road R2 050 and by air R13 700 per case



### Hospitalisation

100% of the MT

Non-network: any hospital

Network: 119 network hospitals



### Post-hospital care

R1 800 per member and R2 500 per family per year for speech therapy, occupational therapy and physiotherapy for up to 30 days after discharge



### Specialised radiology

In and out of hospital

- MRI and CT imaging – 100% of the MT Unlimited (see deductibles)
- Angiography – 100% of the MT Unlimited



### Oncology

In and out of hospital

- PMB – 100% of the MT
- Non-PMB – R210 800 per family per year



### Confinement (childbirth)

- In hospital – 100% of the MT
- Home delivery – R13 000 per event



### Psychiatric treatment

R19 300 per beneficiary per year (maximum R29 300 per family per year)



### Organ transplants

100% of the cost

Cornea implants – R28 800 per implant



### Prostheses benefits

- Health-essential functional prosthesis: R23 000
  - Hip, knee and shoulder replacements (non-PMB): Acute injuries where replacement is the only treatment option – Hospitalisation: 100% of the MT Prosthesis: Health-essential functional prosthesis benefit applies (wear and tear: no benefits)
- Intra-ocular lenses – R4 150 per lens, 2 lenses per beneficiary per year, health essential functional prosthesis benefit applies
- EVARS prosthesis – R34 600
- Vascular/cardiac prosthesis – R34 600
- Prosthesis with reconstructive or restorative surgery and external breast prostheses (in and out of hospital) – R4 250 per family per year



### Other core benefits

Renal dialysis, oxygen, prostatectomy, hospice, sub-acute care and private nursing services as an alternative to hospitalisation

#### Procedure-specific deductibles (payable by the member)

- **Spinal column surgery** – R11 600 per admission
- **Endoscopic procedures** – gastroscopy, colonoscopy, arthroscopy and sigmoidoscopy In a day clinic – R2 100, in hospital – R3 200
- **Specialised radiology** – R1 650 per examination
- **Dental procedures under general anaesthesia during hospitalisation** Removal of impacted teeth (3rd molars, item codes apply on dentist's account) and extensive dental treatment for children <5 years (dentist's account for member's account) – R3 300 per admission

AOL-Overall annual limit | BMI-Body mass index | CDL-Chronic Diseases List | CPAP-Continuous positive airway pressure | CT-Computerised tomography | DRC-Dental Risk Company | DSP-Designated service provider | EMS-Emergency medical services | EVARS-Endovascular aortic replacement surgery | FOBT-Faecal occult blood test | GP-General practitioner | HPV-Human papilloma virus | MHRP-Medihelp Reference Price | MMAP-Maximum Medical Aid Price | MRI-Magnetic resonance imaging | MT-Medihelp tariff paid by Medihelp for benefits which can include a contracted tariff or the single exit price | PMB-Prescribed minimum benefits

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Medihelp is an authorised financial services provider (FSP No 15738)