

GOOD CHOICES,
GOOD HEALTH



YEAR END OPTIONS 2015

HEALTH


ALEXANDERFORBES
Securing your financial well-being

STELLENBOSCH UNIVERSITY

Most important changes to health-care products for 2015

Option renewal is the one time of the year where you are given the choice to change your medical aid option.

It is a change that will directly influence your and your family's health, so make sure you choose the level of cover that best suits your needs effective from **1 January 2015**.

Take some time to **understand the changes** in your scheme for 2015 so that you have all the information you need to make good choices and enjoy good health.

The different benefits are discussed as follows:

- | | |
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1. MEDICAL SCHEME – DISCOVERY HEALTH

Are you satisfied with your existing medical aid option?

Changing your medical aid option is not compulsory, so if you are satisfied with your current option and believe it will continue to meet your and your family's health needs for the coming year, you are welcome to continue with your chosen option. You will not need to complete any forms for this, but you will want to note any changes for 2015 that may apply to your plan.

Do you want to change your option?

Members who wish to make an option change for 2015 will be given the opportunity to make these changes online via the Human Resources link on the University's website. Members will be able to make these changes online from **12 November 2014 until 14h30 on 5 December 2014**.

HOW TO CHANGE YOUR OPTION FOR 2014 ON THE WEBSITE

- Visit the SU webpage at <http://www.sun.ac.za>
- Click '**For Staff**'
- Choose 'My.Sun'
- Choose '**SUN-e-HR**'
- Enter your '**Username and Password**'

- Click on 'SUN Employee Self Service'
- Click on "Remuneration and Banking"
- At 'External Links' choose 'Medical Aid Choice 2015'
- Click on "Choose Medical Aid for 01 Jan 2015"
- You will only be allowed to structure your medical scheme option

CHOOSE YOUR OPTION FOR 2015 NOW

- The option to select your option will be under Struktureringsvoordele / Structuring Benefits
- When clicking on the down arrow all the options will appear. **Click on your chosen option for 2015**
- Choose Vitality or KeyFit or Vitality & KeyFit (both)
- Once you have made your choice, your MSA and Threshold (if applicable) will automatically appear.

CONFIRM YOUR CHOICE BY CLICKING ON

- Once you have clicked on you will receive an e-mail confirming the option choice that you have made for 2015. If you do not receive an e-mail it means that your choice has not been stored in your package structuring and we request that you send an urgent e-mail to afhealth@sun.ac.za confirming your option choice for 2015.

The closing date for option choices is 5 December 2014 at 14h30, and not any other date that you may see on any of Discovery Health's communications.

What are the key questions I need to ask?

- Were my savings sufficient for this year?
- How much will I need for next year?
- Have I reached my Above-Threshold Benefit as a Priority, Comprehensive or Executive Plan member?
- Do I need comprehensive cover, or is a savings plan more suitable?
- Which option will cover my chronic medicine needs best?

By obtaining a Claims Transaction History (CTH) from Discovery Health (0860 99 88 77), you can review your annual medical aid usage. This will help you to make a good choice regarding your benefit needs for 2015.

Do you need help making the choice?

Your **Alexander Forbes Health consultant, Marie-Louise Du Toit**, will be available to help you make the right choice so you and your family can enjoy good health.

Days and times	Contact details	Address
Monday, Tuesday and Thursday 08h00 to 16h00	Tel: (021) 808 4827 or afhealth@sun.ac.za	Stellenbosch Campus Admin Building Block C Room C1322
Wednesday 08h00 to 13h00	Tel: (021) 938 9013 or afhealth@sun.ac.za	Tygerberg Campus Admin Building Room 1061
Friday 08h00 to 16h00	Tel: (021) 809 3607 or afhealth@sun.ac.za	Alexander Forbes Health Dorp Street Office Stellenbosch

Your Alexander Forbes Health consultant will also host information sessions on the 2015 medical aid options. The dates and times of the member information sessions are:

We would strongly advise that members attend one of the information sessions, as important aspects of the health plans of the Discovery Health Medical Fund will be discussed.

Date		Time	Venue
17 Nov 2014	Tygerberg	09:00 – 10:30 11:00 – 12:30	Lecture room 7, Education Building
18 Nov 2014	JSG Library (General – AFR) JSG Library (General – AFR) JSG Library (General – ENG)	09:00 – 10:30 11:00 – 12:30 14:00 – 15:30	Auditorium
24 Nov 2014	JSG Library (Pensioner – AFR) JSG Library (Pensioner – ENG)	09:00 – 10:30 11:00 – 12:30	Auditorium
25 Nov 2014	USB	10:00 – 12:00	Main Building, Room 212

Members can call the Human Resources Client Service Centre on 021 808 2753 to reserve an appointment with an Alexander Forbes (AF) Health consultant regarding their option choice for 2015.

All information regarding medical aid plans for 2015 will be available on the SU website from 12 November 2014 (<http://www0.sun.ac.za/hr/documents/policies-and-procedures>)

Please note that Alexander Forbes has made every effort to ensure that the information provided in this newsletter is correct, but that this is merely a summary of the benefits and, in the event of a dispute, the Rules of Discovery Health will prevail.

How much will you pay in 2015?

Discovery Health's overall weighted average contribution increase across all the options, effective 1 January 2015, is 9.7%.

Most members, however, will experience an increase of **9.9%**, with the exception of those on the Executive plan, who will experience an increase of **10.9%**. Members on the KeyCare plans, however, may experience a lesser increase as a result of a change in the income brackets. Please refer to the contribution table (total contribution), included as **Annexure A** in your communication pack.

What are the most important benefit changes that will apply to my Scheme and Option in 2015?

Hospitalisation benefits

Deductibles

Please refer to **Annexure B** in the communication pack that provides details on the deductibles and co-payments on hospitalisation and co-payments for certain procedures applicable to the various Discovery Health Plans. Please pay particular attention to these details so that you are familiar with these deductibles and co-payments.

Hospital networks

The **Delta Hospital Network** applies to all **Delta plans for planned admissions**. The Vincent Pallotti Hospital will be included and the LHC Kingsbury and Claremont Hospitals have been removed from the Delta network in the Western Cape. In Gauteng the Genesis Clinic has been added. The Horizon Eye Centre has been added in Free State region.

Members on the Coastal plan must use a hospital in one of the four coastal provinces for planned hospital procedures. If a member chooses **not to make use of a coastal hospital**, Discovery Health will **pay only up to a maximum of 70% of the hospital account** and the member will have to pay in the difference.

KeyCare Core and **KeyCare Plus** members must go to one of the listed **KeyCare Network Hospitals** for planned hospital admissions. **If you do not use these hospitals for planned hospital admissions, you'll need to pay the bill.** The same hospital network list applies to KeyCare Access members in the case of life-threatening admissions and defined trauma events only. The KeyCare Access Hospital Network list applies to KeyCare Access members, but only for childbirth and care for new-borns. Other approved hospital admissions for KeyCare Access members are covered in Discovery's network of state facilities.

Chronic Illness Benefit (CIB)

The **Chronic Illness Benefit** offers cover for a list of chronic conditions as per the member's plan choice, and cover for approved medicine on Discovery Health's medicine list. If a member takes **medicine that falls outside of Discovery Health's medicine list, there is a set monthly amount available to cover medicine costs**, referred to as the **Chronic Drug Amount (CDA)**. **Chronic conditions need to be applied for and approved by Discovery Health** in order for the condition to be covered from the Chronic Illness Benefit. Discovery Health will then pay medicine up to the Discovery Health Medicine Rate, and according to the member's plan choice. The **Chronic Medicine formulary** will be **adapted** in line with annual pricing movements. The **new formulary will apply to all new chronic registrations effective 1 January 2015**. The changes, however, will be implemented only on **1 July 2015 for members currently registered for the Chronic Illness Benefit** in order to allow members sufficient time to consult their medical practitioner.

Members affected by this have three choices

- Consider alternative medication that is on the formulary or below the CDA
- Submit a clinical appeal to have the existing medication covered in full
- Continue to take current medications – paying the higher co-payment

MedXpress

Members making use of **MedXpress**, Discovery's medicine delivery service, are not required to pay any delivery or administration fees. Discovery's qualified service agents can also advise members on the most cost-effective alternatives, which will be charged at the Discovery Health Medicine Rate or less, thus minimising co-payments and dispensing fees. All major pharmacy chains, including Clicks Pharmacies, Dis-Chem and MediRite, as well as over 1 200 community pharmacies, have been contracted to charge Discovery Health members at this rate.

- **From 2015** members using **MedXpress** will be able to **select in-store pick-up for their chronic and acute medicines from Dis-Chem, Clicks and MediRite pharmacies**. The in-store option can be selected through the member app or by calling the call centre. Designated stores where orders can be picked up can be found by calling the call centre or on www.discovery.co.za
- **MedXpress** will become **the designated service provider for chronic medicines on the Core plans** (Classic, Essential and Coastal) with effect **from 1 July 2015** for existing registered chronic members. **Newly diagnosed members** on the Core plans will need to use **MedXpress** from **1 January 2015**. A **20% co-payment** will apply otherwise.

Day-to-Day Benefits

Members registered on Core plans do not have access to day-to-day benefits. The KeyCare Plus and KeyCare Access options offer defined unlimited benefits through network providers. All other options provide day-to-day cover through the Medical Savings Account, Insured Network Benefit and Above-Threshold Benefit (where applicable).

Medical Savings Account (MSA)

- Day-to-day expenses are initially paid from the MSA
- The funds in the MSA is available upfront to the member and dependants
- The funds in the MSA will be pro-rated, in line with the joining date, if the member or dependant joins during the year
- The member will have to pay back to Discovery any portion of the MSA that has been used, but not paid for as yet, should he/she or a dependant resign during the year. This will be handled as back pay
- All unused funds are carried over to the following year
- The allocated amount will be based on the member's plan and family size and the percentage allocation is based on a stipulated percentage of the total contribution, which remains unchanged for 2015:
 - Executive, Coastal – 25% of total contribution
 - Classic – 25% of total contribution (except Classic Comprehensive Zero MSA, which has no MSA)
 - Essential – 15% of total contribution

Insured Network Benefit (INB)

- The **Insured Network Benefit** extends certain day-to-day benefits for members once the funds in their Medical Savings Account are depleted or/and during the self-payment gap, where applicable. The benefits can only be accessed through Discovery network providers and consist of: GP Consultations, Pathology (blood tests),

Acute Medication and a new Maternity and External Medical Items benefit, depending on your plan choice.

- The **Insured Network Benefit** for 2015 remains largely unchanged, with the exception of the **removal of MediRite as the preferred provider for pathology.**

Threshold levels

Threshold levels are indicated in **Annexure A.**

KeyCare

The income band structure of KeyCare Plus has been adjusted as follows for 2015:

	2014	2015	Rational for adjustment
Income bands	R 0 – R 6 650	R0 – R360 *	A lower contribution for individuals without access to state grants or any other form of income.
		R361 – R7 050	The income bands have been restructured to allow contribution relief to employees earning less than R10 000 per month.
	R 6 651 – R8 800	R7 051 – R10 000	
	R8 801+	R10 001+	

*Discovery Health have adjusted the income bands on the Keycare Plus options. The change will result in more affordable solutions for members who want to register their children in their own capacity.

New benefits for 2015

Netcells Biosciences – additional cryogenic benefits

Since 2014, all members had access to a predetermined discount of 25% on **umbilical cord blood and tissue stem cell banking through Netcells Biosciences.** As from **1 January 2015**, members can also **save up to 25% on semen testing and preservation.** For more information you can visit the Netcells website at <http://www.netcells.co.za>

Personal Health Programmes

Members with **diabetes, hypertension, hyperlipidaemia and chronic heart conditions** will be able to access a personal health programme through a network of Premier Practice GPs by the beginning of February 2015. The programme will guide members on what to do to improve their health. The Premier Practice GP will track and monitor the members’ progress throughout the programme in real time by viewing the members’ health metrics, such as fitness and blood glucose levels, weight management, nutrition and medicine intake. Members will also be able to monitor their own progress at any time, through relevant alerts, and will also earn Vitality points and unlock additional rewards. **(Vitality membership is not required for this benefit.)**

Benefits therefore include **enrolment with a Premier Practice GP** (an accredited GP practice, which is subject to professional peer review; Registered with HealthID); **Access to online lifestyle programmes** (provide reminders for Medicine compliance, GP consultations, Pathology tests, Dietician visits, Physical activity, Dashboard to monitor progress); **Additional risk benefits from DHMS** (prescribed by a Premier Practice GP: Dietician consultations and Biokineticist consultations); **Earning additional Vitality points** (additional points for Enrolment, Review, Compliance, Completion).

Discovery HomeCare

Discovery HomeCare is a home-based health-care service that offers care in the comfort of the member’s own home. The benefit will be available to all DH members, although it initially will be rolled out only in Gauteng from 1 January 2015. The service will be subject to clinical criteria. These services include:

Postnatal care	<ul style="list-style-type: none"> • Available to mothers who agree to be discharged one day early from hospital • Includes three home visits or one home visit and two night nurse visits • Payable from the risk benefits
Palliative care	<ul style="list-style-type: none"> • End-of-life, palliative care offered in partnership with the Hospice Palliative Care Association • Benefits paid from the compassionate care benefit up to the plan benefit limit
Home IV infusions	<ul style="list-style-type: none"> • Home IV infusion setup and administration of antimicrobials, biologics, IV iron and immunoglobulins for stable patients • Benefits paid from risk in lieu of hospitalisation, no limit applies
Respite care	<ul style="list-style-type: none"> • Provision of short-term care services, including temporary relief for caregivers looking

	<p>after members' health-care needs</p> <ul style="list-style-type: none"> • Benefits paid for by members
Wound care	<ul style="list-style-type: none"> • Includes cover for venous ulcers, diabetic foot ulcers and pressure sores and other moderate to severe wounds for stable patients • Cover for dressing, drainage, irrigation, suture removal and vac therapy • Benefits paid from risk in lieu of hospitalisation, no limit applies

Access to services: Treating doctor and Qualified HomeCare Consultant. More information is available on www.discovery.co.za

HealthyCare

In 2015, **MedSaver** and **ChroniCare** benefits will be combined to give all members access to an enhanced catalogue of preventive care items at both **Clicks** and **Dis-Chem**. There also has been a change in the structure of the benefit for 2015. **Members will only receive a discount of 10% upon registration for the benefit.** This benefit can be **increased to 25% for Vitality members** who have completed all the required **Vitality Check screening tests**. **ChroniCare** currently is only available to registered chronic members. From 2015 ALL Discovery Health members will have access to the benefit. The 25%, however, is conditional on the activation and completion of all the required **Vitality Check screening tests**.

The Discovery HealthyCare catalogue provides members with savings on:

- Baby-care items
- Dental-care items
- Eye-care items
- Foot-care items
- Over-the-counter medicine (schedule 1 & 2)
- A selection of monitoring devices and specialised foods to manage your chronic condition
- Emergency care
- Self-care items
- Sun-care items
- Clinic nursing services
- Wearable health and fitness devices

Members can visit www.discovery.co.za for more detailed information.

Discovery Health on Call

From 20 February 2015: Members will be able to use the Discovery **member app** to book a virtual consultation with their chosen family doctor or another appointed doctor, 24 hours a day, seven days a week.

From 20 March 2015: Members will be able to book their doctor's appointment via the member app for selected practices. The member app can be used to **cancel or change appointments** already made if changes are made **24 hours before the appointment**.

These virtual consultations are paid from the members' available day-to-day benefits on the Executive, Comprehensive, Priority and Saver Series; members participating in Core and KeyCare plans will have to pay for these consultations themselves. Discovery Health will embark on an enrolment process to sign up existing network GPs to this programme, as members can only consult with GPs to whom they have given **HEALTHID consent**. In the event that the selected doctor is not available, members will be able to book a consultation with the 24/7 Health on Call GP, if the preferred GP has consented and is available. The cost of this service in 2015 will be R250 per consultation and R600 per consultation for an extended face-to-face consultation (applicable to members with certain health conditions).

Health and fitness devices

Members will be able to claim up to R750 of the cost of the wearable device from their day-to-day benefits, with the amount claimed accumulating at 100% to threshold (if applicable). This benefit will be available for one device per beneficiary (over the age of 18) per year on the Saver, Priority, Comprehensive and Executive plans from selected/participating Dis-Chem and Clicks stores. Vitality members will also qualify for up to 25% cash back on selected devices, namely Garmin, Fitbug, JAWBONE, POLAR, Fitbit and iHealth Scale. The full list of devices that can be purchased under this benefit will be available on www.discovery.co.za. Discovery Health members with Vitality membership will also qualify for up to 25% cash back through the HealthyCare benefit.

International second opinion services – Cleveland Clinic

From 1 January 2015, the scheme will fund 50% of the cost of the second opinion service from Cleveland Clinic (international health-care experts) where a second opinion is requested by the member's treating specialist for life-threatening and life-changing conditions. It will be available on all Discovery Health plans, excluding KeyCare:

- \$545 without pathology analysis

- \$745 with pathology analysis

2. VITALITY – DISCOVERY HEALTH

Vitality HealthyLiving benefit

Members will qualify for 10% cash back at all participating shops/pharmacies. Cash-back percentages increase up to 25% with their preferred partner as members do online assessments and physical health checks to learn more about their health.

10%	15%	25%
HealthyFood	Online nutrition assessment	Body composition assessment
HealthyCare	Vitality age	Vitality health check
HealthyGear	Online fitness assessment	Vitality fitness assessment

HealthyLiving Miles Multiplier

Discovery Card holders can multiply Discovery Miles earned on their card spend at HealthyLiving partner stores by up to 10 times, based on their Vitality status.

Blue	Bronze	Silver	Gold	Diamond
1 x	2 x	3 x	5 x	10x

HealthyCare

Members can get up to 25% cash back at Dis-Chem and Clicks pharmacies, and the products and services for 2015 have been extended significantly, as outlined earlier in this document.

HealthyGear

Members can get up to 25% cash back at Sportsmans Warehouse and Totalsports. Items included are a selected range of footwear, apparel, sport equipment, fitness devices and exercise equipment.

Vitality Baby – 1000 Days

The 1000-day journey is separated into three parts, namely: 270 days (9 months of pregnancy) + 365 days (birth to 12 months) + 365 days (12 to 24 months). Vitality Baby gives members access to:

- Assessments and check-ups
- Information and support
- Vitality points
- Rewards

Big Concerts

Vitality members have access to Big Concert events through exclusive access tickets.

Builders Warehouse

The contract with Builders Warehouse will end 31 December 2014 due to Walmart ownership.

Team Vitality

Members can get up to 50% cash back on all races on the Team Vitality calendar. A membership fee of R300 for running and R600 for cycling (including the relevant licence fees) will be applicable.

Vitality Fit

Members can get up to 25% cash back at premier specialised fitness partners, such as SWEAT 1000, Crossfit, Adventure boot camp for women.

3. GAP COVER – ADMED OPTION 4

Guardrisk Insurance will no longer offer AdmedAdd+ as from 31 December 2014. The new product, with better benefits, will add value for members. All members on the existing AdmedAdd+ option automatically will be moved to **Admed Option 4** on 1 January 2015.

Gap cover products are short-term insurance policies that cover the difference between the provider's rates (e.g. anaesthetists, surgeons, other specialists and GPs) and the product's tariff, for procedures done in hospital and that are subject to certain limits.

Even on your scheme's more comprehensive options, you may still experience some gaps between the rate the

scheme pays and the amount the service provider charges.

The gap cover contribution will increase from R87 in 2014 to R94 per family per month as of 1 January 2015.

The differences in products is briefly set out below:

	AdmedAdd+	Option 4
Cover	5 x Admed tariff	5 x the Scheme Tariff
Premium	R87 per family per month	R94 per family per month
Co-payments	Yes, cover for certain co-payments and deductibles in hospital of R20 000 Co-payments for MRI/CT/PET scans on an out-patient basis	Yes, unlimited cover for certain co-payments and deductibles in hospital Co-payments for MRI/CT/PET scans on an out-patient basis
Policy Limit	R250 000 per person and R2 500 000 per family	Unlimited benefits
Additional benefits	<ul style="list-style-type: none"> - Personal accident cover - Cancer benefit of R10 000 for breast and prostate cancer - Oncology benefit - Payments for shortfalls or gaps regarding prescribed minimum benefits (PMBs) 	<ul style="list-style-type: none"> - Personal accident cover of R25 000 for all members - Cancer benefit of R25 000 for first diagnosis of any cancer - Oncology benefit of R250 000 per dependant if scheme tariff is reached and where 20% co-payment is required - In-hospital sublimit benefit of R30 000 for internal prosthesis - Payments for shortfalls or gaps regarding prescribed minimum benefits (PMBs) - Digital doctor

4. OCSACARE

The Ocsacare premium for 2015 has been increased by 5.7% to R238 per month. The product offers basic day-to-day medical provision for the employee only, with no hospital cover. This product does not cover any dependants.

Closing

Our **SERVE** model drives the way we at Alexander Forbes do business. We strive to deliver **Simple** and **Expert innovative solutions** that **build long-lasting Relationships** founded on the **Value of trust** – all this in the service of **Enriching people's lives** by providing them with **impactful service**.

As an **Alexander Forbes Health** client you can be assured of our steadfast commitment to help you make good choices and enjoy good health in 2015.



To keep your finger on the pulse of the medical scheme industry you can follow us on Twitter at https://twitter.com/AF_Health

For some very useful Vitality tips you can follow Alex at https://twitter.com/Alex_vitaliTIPS

Yours in Health
Alexander Forbes Health

Get more information here:

Browsing the website
www.discovery.co.za

Brochure sent by Discovery Health

National walk-in centres

Alexander Forbes generic web site
www.afhealth.co.za/discoveryhealth

Stellenbosch – (021) 809 3777 or
clientspecialist@forbes.co.za

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Annexure A: 2015 Discovery Health Total Contributions

TOTAL MEDICAL SCHEME CONTRIBUTION 2015

Series	Plan	Principal Member	Adult Dependant*	Child Dependant*
Executive	Executive	R 4 547	R 4 547	R 863
Comprehensive	Classic Comprehensive	R 3 696	R 3 496	R 737
	Classic Delta Comprehensive	R 3 329	R 3 149	R 662
	Classic Comprehensive Zero MSA	R 2 772	R 2 622	R 553
	Essential Comprehensive	R 3 105	R 2 936	R 625
	Essential Delta Comprehensive	R 2 796	R 2 642	R 561
Priority	Classic Priority	R 2 478	R 1 950	R 992
	Essential Priority	R 2 130	R 1 672	R 850
Saver	Classic Saver	R 2 172	R 1 710	R 869
	Classic Delta Saver	R 1 734	R 1 368	R 697
	Essential Saver	R 1 725	R 1 294	R 690
	Essential Delta Saver	R 1 378	R 1 036	R 552
	Coastal Saver	R 1 710	R 1 282	R 688
Core	Classic Core	R 1 617	R 1 272	R 646
	Classic Delta Core	R 1 294	R 1 018	R 517
	Essential Core	R 1 389	R 1 040	R 557
	Essential Delta Core	R 1 110	R 833	R 445
	Coastal Core	R 1 195	R 896	R 477
KeyCare	KeyCare Plus (R10 001+)	R 1 592	R 1 592	R 426
	KeyCare Plus (R7051 - R10 000)	R 1 069	R 1 069	R 300
	KeyCare Plus(R361 - R7 050)	R 764	R 764	R 276
	KeyCare Plus (R0 - R360)	R 330	R 330	R 330
	KeyCare Access (R10 001+)	R 1 556	R 1 556	R 420
	KeyCare Access (R7 051 - R10 000)	R 1 036	R 1 036	R 292
	KeyCare Access (R4 401 - R7 050)	R 718	R 718	R 258
	KeyCare Access (R0 - R4 400)	R 538	R 538	R 235
	KeyCare Core (R10 001+)	R 1 176	R 1 176	R 265
	KeyCare Core (R7 051 - R10 000)	R 762	R 762	R 187

*Contributions are charged up to a maximum of 3 children; Dependants 21 years + are considered adult dependants.

2015 VITALITY & KEYFIT CONTRIBUTIONS

Family Size:	Single Member	Member with one dependant	Member with two or more dependants
Vitality	R 185	R 219	R 249
KeyFIT	R 40	R 49	R 60
Vitality & KeyFIT	R 199	R 239	R 275

2015 MEDICAL SAVINGS ACCOUNT ALLOCATIONS (MSA)

Series	Plan	Principal Member		Adult Dependant		Child Dependant*	
		Annual	Monthly*	Annual	Monthly**	Annual	Monthly*
Executive	Executive	R 13 644	R 1 137	R 13 644	R 1 137	R 2 580	R 215
Comprehensive	Classic	R 11 088	R 924	R 10 488	R 874	R 2 208	R 184
	Classic Delta	R 9 984	R 832	R 9 444	R 787	R 1 980	R 165
	Essential	R 5 580	R 465	R 5 280	R 440	R 1 116	R 93
	Essential Delta	R 5 028	R 419	R 4 752	R 396	R 1 008	R 84
Priority	Classic	R 7 428	R 619	R 5 844	R 487	R 2 976	R 248
	Essential	R 3 828	R 319	R 3 000	R 250	R 1 524	R 127
Saver	Classic	R 6 516	R 543	R 5 124	R 427	R 2 604	R 217
	Classic Delta	R 5 196	R 433	R 4 104	R 342	R 2 088	R 174
	Essential	R 3 096	R 258	R 2 328	R 194	R 1 236	R 103
	Essential Delta	R 2 472	R 206	R 1 860	R 155	R 984	R 82
	Coastal	R 5 124	R 427	R 3 840	R 320	R 2 064	R 172

* A maximum of three children are counted when calculating the Annual MSA allocation

**Where applicable, the monthly MSA allocation is included in the total monthly contribution listed on Page 1

2015 ANNUAL THRESHOLD LEVELS

Plan:	Executive Plan	Comprehensive Plans
Principal member	R 13 640	R 12 590
Per adult	R 13 640	R 12 590
Per child*	R 2 550	R 2 380

* A maximum of three children are counted when calculating the Annual Threshold

Priority Plans:	Annual Threshold	Above Threshold Limit
Principal member	R 10 980	R 9 340
Per adult	R 8 250	R 6 650
Per child*	R 3 590	R 3 210

* A maximum of three children are counted when calculating the Annual Threshold and Above Threshold Limit

LATE JOINER PENALTIES

Please note these rates are the standard Discovery Health rates and do not take into account any late joiner penalties (LJP) that may be applied to an applicant or to the adult dependant of an applicant older than age 35. Depending on the number of years they have not belonged to a registered South African medical scheme, an additional penalty (a percentage of the contribution), may be added to the member's monthly contribution, as shown in the following table:

Penalty bands	Maximum penalty
1 – 4 years	0,05 x contributions
5 – 14 years	0,25 x contributions
15 – 24 years	0,50 x contributions
25+ years	0,75 x contributions

The LJP is calculated as follows: $A = B \text{ minus } (35 + C)$

Where:

A = the number of years in the first column; B = the age of the applicant at the time of application; C = the number of years of credible cover

Annexure B: 2015 Discovery Health Deductibles

PRIORITY SERIES: CO-PAYMENTS ON HOSPITALISATION

Members participating on **Priority plans** should note that the **predetermined Payment by the Member** for in-hospital procedures will still apply in 2015. Members need to pay an amount upfront to the hospital when the member is admitted for one of the following procedures:

CO-PAYMENT ON HOSPITALISATION	PROCEDURE LIST
R 2 350	Conservative back and neck treatment; Myringotomy (grommets); Tonsillectomy; Adenoidectomy
R 3 150	Colonoscopy; Sigmoidoscopy; Proctoscopy; Gastroscopy; Cystoscopy
R 5 650	Arthroscopy; Functional Nasal Procedures; Hysterectomy (except for pre-operatively diagnosed cancer); Laparoscopy; Hysteroscopy; Endometrial ablation
R 11 550	Nissan fundoplication (reflux surgery); Spinal surgery (back and neck); Joint replacements

If the procedure can be done out of hospital, for example in the doctor's rooms, and the member does not go to hospital, the member will not have to make any payment. It is recommended that members contact Discovery Health directly on 0860 100 694 prior to the procedure to confirm their benefits.

DELTA PLAN DEDUCTIBLES

Delta plan members should note that a **R5 950** payment will apply if you do not use the **Delta Hospital Network** for planned procedures.

IN-HOSPITAL and DAY CLINIC DENTISTRY TREATMENT CO-PAYMENTS

Deductibles also apply to **in-hospital dentistry treatment** on the Discovery Health plans as listed below:

	Hospital	Day Clinic
Members younger than 13	R 1 700	R 800
Members older than 13	R 4 400	R 2 850

ALL routine conservative dentistry, such as preventative treatments, simple fillings and root canal treatments, whether done in or out of hospital or in a day clinic, **is covered from your available Medical Savings on the Saver plans**. On the **Priority, Comprehensive and Executive plans** these services are covered **from your available Medical Savings or your own pocket while you are in your Self-payment Gap**. Once your claims have accumulated to your Annual Threshold level, **these services** are covered through the **Above-threshold Benefit**.