

# necesse 2018



**medihelp**  
medical scheme

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## General disclaimer

This brochure is intended for marketing purposes and contains only a summary of Medihelp's benefits. On joining Medihelp, members receive a member guide with detailed information. In case of a dispute, the registered Rules of Medihelp apply, which are available on request.

The information in this brochure is subject to approval by the Council for Medical Schemes.

The content of this brochure may change from time to time. Please refer to Medihelp's website for an updated brochure or consult Medihelp's Rules for the latest information.

We encourage you to seek financial advice about your healthcare cover by speaking to your financial adviser.

# why medihelp

With a value-driven mindset we focus on fulfilling your health and wellness needs and customise our products and services to ensure an individualised experience when interacting with the Scheme in terms of the following four key areas:

- Products • Services • Value • Engagement



## A SOUND HEALTHCARE PARTNER



**112 YEARS'** experience in the medical schemes industry



As a **SELF-ADMINISTERED** medical scheme Medihelp maintains complete control and tightly manages all administration costs



### LARGE AND RELIABLE

Medihelp is one of the five largest open medical schemes in South Africa



**CLAIMS PAYMENT ABILITY** is guaranteed with our AA- rating awarded by Global Credit Rating



### CONSISTENCY

Medihelp's average beneficiary age of 37 years provides a healthy risk pool to contribute to sustainability



### OUR SOLVENCY LEVEL

Medihelp consistently maintains a solvency level well above the industry requirement

## SERVICE AND ENGAGEMENT

Our members' and advisers' service experience is measured at the point of engagement through voice-of-the-customer research, allowing for constant feedback.

**190 634** written enquiries

**600 262** calls answered

**12 539** mobile app users

**38 438** social media followers

**4 734** average hospital admissions per month

**2 869 878** claims processed

**1 062 793** web visits per year



**Call centre**  
60 helpful consultants to assist you



**Secured website**  
An online hub with all your Medihelp service functionalities



**mySOS emergency**  
This app ensures that you and your loved ones can be located in an emergency



**Educational videos**  
Effortless empowerment on relevant topics



**Member app**  
With an electronic membership card and instant benefit verification

## PRODUCT

A tailor-made option to suit your lifestyle and health profile.



### Full cover

- 270 prescribed minimum benefits
- 26 chronic conditions



**No overall limit**  
for hospital cover



**Unlimited cover**  
for trauma and emergencies



**Additional benefits**  
A menu of separate additional pregnancy and preventive care benefits



**A national network** of private healthcare providers



### Kids are grown up

- Child dependant rates apply until they are 21 years old
- Ask your adviser about the option specifically for full-time students



An **individualised**, free wellness programme provides relevant health support and value during every life stage

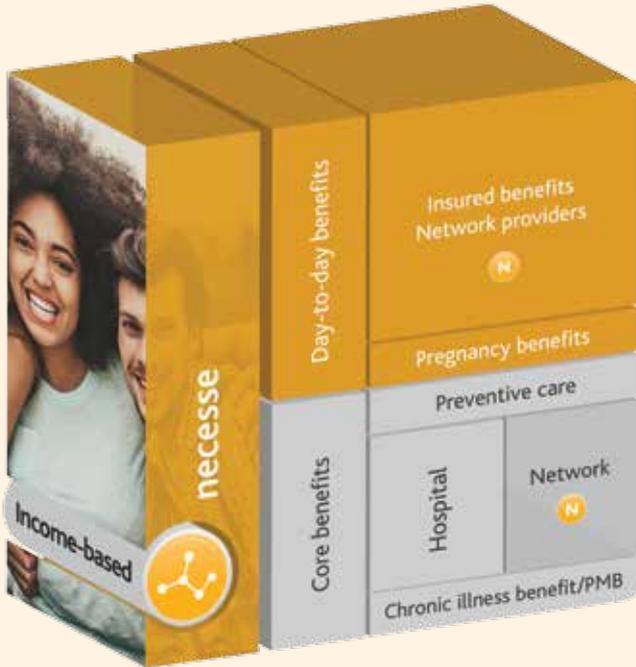


Join **Medihelp MultiSport** for runners, walkers and cyclists and get access to club gear at a discount and free participation in Medihelp promotional events



# Necessé

An income-based option that provides quality private cover through an extensive network of private hospitals and healthcare providers for your medical expenses incurred in and out of hospital. Necessé is an affordable healthcare solution for students and corporates alike.



Essential cover for chronic illnesses on the Chronic Diseases List and 270 listed PMB conditions



Comprehensive hospital cover in the Necessé hospital network



Cover for medical emergencies



Cover for specialised radiology



Cover for preventive care health assessment tests



Children pay child dependant rates until they are 21 years old

## contributions

The contributions in this table are based on a family's composition. Late-joiner penalties or employer subsidies have not been taken into consideration. Please ask your accredited adviser for a more detailed quotation based on your information.

	Gross monthly income				
	Full-time students R0 – R400	R401 – R5 000	R5 001 – R7 000	R7 001 – R11 000	R11 001 and more
Principal member	R474	R1 512	R1 578	R1 782	R2 076
Dependant	R474	R1 194	R1 260	R1 386	R1 620
Child dependant < 21 years	R474	R648	R708	R780	R900
	R948	R2 706	R2 838	R3 168	R3 696
	R948	R2 160	R2 286	R2 562	R2 976
	R1 422	R2 808	R2 994	R3 342	R3 876
	R1 422	R3 354	R3 546	R3 948	R4 596
	R1 896	R4 002	R4 254	R4 728	R5 496

# additional insured benefits

Additional insured benefits which give you access to pregnancy, screening and preventive care benefits as well as a back treatment programme.



Description	Benefit
<b>PREGNANCY BENEFITS</b> <ul style="list-style-type: none"> <li>Gynaecologist consultations (subject to referral by a Necesses network GP and pre-authorisation)</li> </ul>	2 per beneficiary per year
<ul style="list-style-type: none"> <li>2D sonars</li> </ul>	2 per beneficiary per year
<b>SCREENING BENEFITS</b> A Necesses network general practitioner must request the services and benefits are paid from the available day-to-day benefits	1 pathology test per beneficiary per year
<ul style="list-style-type: none"> <li>Pap smear (item code 4566)</li> </ul>	
<ul style="list-style-type: none"> <li>Prostate test (PSA level) &gt; 40 years (item code 4519)</li> </ul>	
<ul style="list-style-type: none"> <li>Mammogram for females &gt; 40 years (item codes 3605/39175/34100/34101)</li> </ul>	1 radiology exam per female beneficiary per year
<ul style="list-style-type: none"> <li>Bone mineral density test (BMD) for females &gt; 50 years (item codes 3604/50120)</li> </ul>	1 pathology test per beneficiary per year
<ul style="list-style-type: none"> <li>HIV (item codes 3932/4614)</li> </ul>	1 pathology test per beneficiary per year
<ul style="list-style-type: none"> <li>Blood glucose (item code 4057)</li> <li>Total cholesterol (item code 4027)</li> </ul>	1 pathology test per beneficiary per year
<b>IMMUNISATIONS</b> A Necesses network general practitioner must request the services and benefits are paid from the available day-to-day benefits	1 per beneficiary per year
<ul style="list-style-type: none"> <li>Flu vaccine</li> <li>Tetanus vaccine</li> </ul>	
<b>BACK TREATMENT AT A DBC FACILITY</b> Subject to protocols and pre-authorisation	1 programme per beneficiary per year

## essential cover

We offer 100% cover for 270 conditions and the following 26 chronic diseases treated by designated service providers and networks according to treatment protocols:

1. Addison's disease	11. Diabetes insipidus	20. Hypothyroidism
2. Asthma	12. Diabetes mellitus type 1	21. Multiple sclerosis
3. Bipolar mood disorder	13. Diabetes mellitus type 2	22. Parkinson's disease
4. Bronchiectasis	14. Dysrhythmia	23. Rheumatoid arthritis
5. Cardiac failure	15. Epilepsy	24. Schizophrenia
6. Cardiomyopathy	16. Glaucoma	25. Systemic lupus erythematosus (SLE)
7. Chronic obstructive pulmonary disease (COPD)	17. Haemophilia A and B	26. Ulcerative colitis
8. Chronic renal disease	18. Hyperlipidaemia	
9. Coronary artery disease	19. Hypertension	
10. Crohn's disease		

# added value

HealthPrint is a free online health and wellness programme that integrates fully with Medihelp's system.



By joining HealthPrint via Medihelp's website you get access to the following:

 your health profile and claims information

 your activity tracker data

 your screening test results

 a functionality to volunteer and update your health profile data

As a HealthPrint user you also get access to health information, lifestyle-specific programmes and value such as:



## Wellness enhancement programmes

You can enrol for programmes designed to improve your health and ensure your wellness, including a programme for members with a BMI of 30 and higher.



## A pregnancy and baby programme

This programme will assist you on your journey to becoming a mommy by supporting you with relevant information and delivering value at specific milestones, including during the pregnancy, after giving birth, in the toddler phase and on their fourth and sixth birthday, up to school-going age.



## Medihelp MultiSport

All avid walkers, runners and cyclists who are serious about following a healthy, active lifestyle can join Medihelp MultiSport. Membership is open to anyone, no matter where you reside in South Africa or whether you're a member of Medihelp or not.

The annual membership fee is only R250 and you get the following:

- A starter pack
- A monthly newsletter
- An open invitation to visit the MultiSport gazebo at selected events
- Free entry to Medihelp-sponsored sporting events
- 50% discount on Medihelp-branded cycling and running gear

## ▶ How to join HealthPrint

- 1 Visit [www.medihelp.co.za](http://www.medihelp.co.za)
- 2 Go to Login | Register
- 3 Choose HealthPrint
- 4 Choose Register to join HealthPrint

# core benefits

Core benefits include major medical benefits such as hospitalisation, emergency benefits and home care as an alternative to hospitalisation.

## Trauma

Description	Benefit
<b>BENEFITS FOR TRAUMA THAT NECESSITATES HOSPITALISATION IN THE CASE OF:</b> <ul style="list-style-type: none"> <li>• Motor vehicle accidents</li> <li>• Stab wounds</li> <li>• Gunshot wounds</li> <li>• Head trauma</li> <li>• Burns</li> <li>• Near drowning</li> </ul> Subject to authorisation, PMB protocols and case management	100% of the cost Unlimited
<b>POST-EXPOSURE PROPHYLAXIS</b>	

## Essential cover

Description	Benefit
<b>DIAGNOSIS, TREATMENT AND CARE COSTS OF 270 PMB AND 26 CHRONIC CONDITIONS ON THE CHRONIC DISEASES LIST (CDL)</b> Subject to protocols, pre-authorisation and DSPs	100% of the cost Unlimited
<b>ONCOLOGY*</b> Subject to pre-authorisation, DSP, protocols and registration on the Medihelp Oncology Management Programme <ul style="list-style-type: none"> <li>• Radiotherapy</li> <li>• Brachytherapy</li> <li>• Chemotherapy and associated adjuvant medicine (medicine subject to the MORP)</li> <li>• Bone marrow/stem cell transplants (subject to PMB legislation)</li> </ul>	100% of the cost
<b>HIV/AIDS (PMB ONLY)</b> <ul style="list-style-type: none"> <li>• Antiretroviral therapy and treatment by a DSP (Dis-Chem Direct)</li> </ul>	100% of the cost
<b>RENAL DIALYSIS (PMB ONLY)</b> Subject to pre-authorisation and clinical protocols In and out of hospital <ul style="list-style-type: none"> <li>• Acute dialysis</li> <li>• Chronic/peritoneal dialysis</li> </ul>	100% of the cost
<b>PSYCHIATRIC TREATMENT OF A MENTAL HEALTH CONDITION (PMB ONLY)</b> Subject to pre-authorisation, and services must be rendered in an approved network hospital/facility and must be requested by a Necesses network GP or a specialist on referral by a network GP <ul style="list-style-type: none"> <li>• Professional services rendered by a psychiatrist in and out of hospital</li> <li>• General ward accommodation</li> <li>• Medicine supplied during the period of treatment in the facility</li> <li>• Outpatient consultations</li> </ul>	100% of the cost
<b>MAXILLOFACIAL SURGERY DUE TO TRAUMA-RELATED INJURIES (PMB ONLY)</b> Subject to pre-authorisation and clinical protocols	100% of the cost

CDL – Chronic Diseases List  
 DSP – Designated service provider  
 GP – General practitioner

MORP – Medihelp Oncology Reference Price  
 PMB – Prescribed minimum benefits

\* See explanation of terms for more information.

Description	Benefit
<b>PROSTHESES (PMB ONLY)</b> Subject to pre-authorisation, clinical and PMB protocols The member is liable for the difference in cost should PMB prostheses not be obtained from the DSP <ul style="list-style-type: none"> <li>Internally implanted prosthesis               <ul style="list-style-type: none"> <li>EVARS prosthesis</li> <li>Vascular/cardiac prosthesis</li> <li>Health-essential functional prosthesis                   <ul style="list-style-type: none"> <li>Intra-ocular lenses</li> </ul> </li> <li>Prosthesis with reconstructive or restorative surgery</li> </ul> </li> <li>External breast prostheses (in and out of hospital) (PMB and non-PMB)</li> </ul>	100% of the cost
<b>MEDICAL, SURGICAL AND ORTHOPAEDIC APPLIANCES</b> Services in and out of hospital prescribed by a medical doctor <ul style="list-style-type: none"> <li>CPAP apparatus</li> </ul>	100% of the cost R9 000 per family per year
<b>ORGAN TRANSPLANTS (PMB ONLY)</b> Subject to pre-authorisation and clinical protocols <ul style="list-style-type: none"> <li>Cornea implants (PMB)</li> </ul>	100% of the cost Unlimited
	100% of the cost R26 100 per case per year

## Emergency medical services (EMS)

Description	Benefit
<b>EMERGENCY TRANSPORT SERVICES</b> Provided and pre-authorised by Netcare 911 Transport by road or air within the borders of South Africa Subject to pre-authorisation and protocols	100% of the MT
<b>24-HOUR HELPLINE AND TRAUMA COUNSELLING (Netcare 911)</b>	Phone 082 911
<b>EMERGENCY UNITS AND NON-NETWORK CONSULTATIONS</b> <ul style="list-style-type: none"> <li>PMB-related emergencies (see definition in "explanation of terms")</li> <li>Outpatient emergency unit services and non-network consultations</li> <li>Medicine and services rendered by a non-network medical doctor</li> </ul>	100% of the MT
<ul style="list-style-type: none"> <li>Pathology requested by a medical doctor Pathology codes and DSP (Lancet/PathCare) apply</li> </ul>	80% of the MT M = R1 000 per year M + = R2 050 per year
<ul style="list-style-type: none"> <li>Facility fee and radiology</li> </ul>	100% of the MT
	This benefit is not covered by this option

## Hospitalisation and other core benefits

Description	Benefit
<b>HOSPITALISATION IN A NETWORK HOSPITAL</b> Subject to pre-authorisation, case management and clinical protocols <ul style="list-style-type: none"> <li>Intensive care and high-care wards</li> <li>Ward accommodation</li> <li>Theatre fees</li> <li>Ward medicine</li> <li>Consultations, surgery and anaesthesia</li> </ul>	100% of the MT Unlimited
<b>APPLICABLE PRESCRIPTION MEDICINE DISPENSED AND CHARGED BY THE HOSPITAL ON DISCHARGE FROM HOSPITAL (TTO)</b> (Excluding PMB chronic medicine)	100% of the MT R330 per admission
<b>OCCUPATIONAL THERAPY</b> In hospital	100% of the MT
<b>PHYSIOTHERAPY</b> In hospital, only on referral by the attending medical doctor	R8 950 per family per year

CPAP – Continuous positive airway pressure

TTO – To take out (medicine)

M – Member

PMB – Prescribed minimum benefits

MT – Medihelp tariff paid by Medihelp for benefits that can include a contracted tariff or the single exit price

DSP – Designated service provider

EVARS – Endovascular aortic replacement surgery

# core benefits

Description	Benefit
<b>STANDARD RADIOLOGY, PATHOLOGY AND MEDICAL TECHNOLOGIST SERVICES</b> In hospital Interventional procedures performed by a radiologist, including material Pathology codes and DSP (Lancet/PathCare) apply	100% of the MT R27 700 per family per year
<b>SPECIALISED RADIOLOGY</b> In and out of hospital Only services requested by a specialist on referral by a network GP and subject to clinical protocols <ul style="list-style-type: none"> <li>• MRI and CT imaging (subject to pre-authorisation)</li> <li>• Angiography</li> </ul>	100% of the MT R15 000 per family per year
<b>OXYGEN</b> In hospital	100% of the MT
<b>CLINICAL TECHNOLOGIST SERVICES</b> In hospital	100% of the MT R20 200 per family per year
<b>DENTAL PROCEDURES UNDER GENERAL ANAESTHESIA</b> In a network hospital and prescribed by a dentist in the DSP network Subject to pre-authorisation and the DSP's managed care protocols	100% of the MT Only PMB services and extensive dental treatment for children younger than 5 years – once per lifetime
<b>CONFINEMENT (childbirth)</b> Subject to pre-authorisation and clinical protocols <b>Non-PMB cases</b> <ul style="list-style-type: none"> <li>• Hospitalisation</li> <li>• Midwifery and confinement/delivery</li> <li>• Gynaecologist and anaesthetist services</li> <li>• Post-natal services</li> </ul>	100% of the MT R23 900 per confinement for an elective caesarean section
<b>PMB cases</b> Services rendered by a specialist in the Necesses specialist network, on referral by a Necesses network GP <ul style="list-style-type: none"> <li>• Hospitalisation</li> <li>• Midwifery and confinement/delivery</li> <li>• Gynaecologist and anaesthetist services</li> <li>• Post-natal services</li> </ul>	100% of the cost Unlimited
<b>HOME DELIVERY</b> Subject to pre-authorisation and clinical protocols <ul style="list-style-type: none"> <li>• Professional nursing fees</li> <li>• Equipment</li> <li>• Material and medicine</li> </ul>	100% of the MT R11 900 per event
<b>SUB-ACUTE CARE AND PRIVATE NURSING SERVICES AS AN ALTERNATIVE TO HOSPITALISATION</b> Subject to pre-authorisation, and services prescribed by a medical doctor (excluding general day-to-day care)	100% of the MT R20 200 per family per year
<b>APPENDECTOMY</b> Subject to pre-authorisation <ul style="list-style-type: none"> <li>• Conventional procedure</li> </ul>	100% of the MT Unlimited
<ul style="list-style-type: none"> <li>• Laparoscopic procedure</li> </ul>	100% of the MT Hospitalisation: R15 800 per beneficiary
<b>PROSTATECTOMY</b> Subject to pre-authorisation <ul style="list-style-type: none"> <li>• Conventional or laparoscopic procedure</li> </ul>	100% of the MT Unlimited
<ul style="list-style-type: none"> <li>• Robotic assisted laparoscopic procedure</li> </ul>	100% of the MT Hospitalisation: R100 400 per beneficiary

CT – Computerised tomography  
 DSP – Designated service provider  
 MRI – Magnetic resonance imaging

MT – Medihelp tariff paid by Medihelp for benefits that can include a contracted tariff or the single exit price  
 PMB – Prescribed minimum benefits

# day-to-day benefits

Description	Benefit
<b>GP SERVICES WITHIN THE NECESSE NETWORK</b> <ul style="list-style-type: none"> <li>• Consultations</li> <li>• Medical and surgical services as well as anaesthesia</li> <li>• Material and discretionary medicine used during services</li> </ul>	100% of the MT 9 consultations per beneficiary per year
<b>PREGNANCY</b> <ul style="list-style-type: none"> <li>• Pre- and post-natal care provided by a Necesses network GP</li> </ul>	
<ul style="list-style-type: none"> <li>• Midwife services provided by a registered nursing practitioner for pre- and post-natal care, subject to pre-authorisation</li> </ul>	100% of the MT Unlimited
<b>SPECIALIST CARE</b> Subject to referral by a Necesses network GP and pre-authorisation, which includes one follow-up consultation: <ul style="list-style-type: none"> <li>• Specialist consultations</li> <li>• Surgical and non-surgical procedures</li> <li>• Diagnostic endoscopic procedures performed in the specialist's rooms</li> <li>• Pathology (at Lancet/PathCare) requested by a specialist</li> <li>• Interventional procedures performed by radiologists</li> <li>• Acute medicine administered or dispensed by a specialist</li> <li>• Acute medicine prescribed by a specialist and obtained from a network pharmacy</li> </ul>	100% of the MT M = R2 950 per year M+ = R4 100 per year
<ul style="list-style-type: none"> <li>• Authorised PMB chronic medicine prescribed by a specialist on referral by a Necesses network GP – subject to pre-authorisation and obtained from a network pharmacy</li> </ul>	100% according to the Necesses PMB formulary
<b>MEDICINE</b> <ul style="list-style-type: none"> <li>• Acute medicine               <ul style="list-style-type: none"> <li>• Dispensed by a dispensing Necesses network GP (included in the consultation fee)</li> </ul> </li> </ul>	100% of the MT
<ul style="list-style-type: none"> <li>• Formulary medicine obtained from a network pharmacy and prescribed by a Necesses network GP or a dentist in the DSP network</li> </ul>	100% of the MMAP according to the Necesses acute medicine/dental formularies
<ul style="list-style-type: none"> <li>• Self-medication obtained from a network pharmacy</li> </ul>	100% of the MMAP R100 per event R270 per beneficiary per year
<ul style="list-style-type: none"> <li>• Authorised PMB chronic medicine obtained from a network pharmacy                Subject to pre-authorisation, protocols and formulary</li> </ul>	100% of the MHRP according to the Necesses PMB chronic medicine formulary Unlimited
<b>PHYSIOTHERAPY AND OCCUPATIONAL THERAPY</b> Out of hospital Must be requested by a Necesses network GP	100% of the MT M = R1 900 per year M+ = R2 950 per year
<b>OXYGEN</b> Out of hospital Prescribed by a medical doctor and subject to pre-authorisation and clinical protocols	100% of the MT
<b>STANDARD RADIOLOGY (X-RAYS)</b> Subject to Scheme-approved codes and referred by a Necesses network GP <ul style="list-style-type: none"> <li>• Black and white X-rays and soft-tissue ultrasound scans only as per the Scheme's clinical protocols</li> </ul>	100% of the MT

DSP – Designated service provider  
 MMAP – Maximum Medical Aid Price  
 MHRP – Medihelp Reference Price  
 M – Member

MT – Medihelp tariff paid by Medihelp for benefits which can include a contracted tariff or the single exit price  
 GP – General practitioner  
 PMB – Prescribed minimum benefits

# day-to-day benefits

Description	Benefit
<b>PATHOLOGY</b> Subject to a list of pathology codes and tests only, done by Lancet/PathCare on request of a medical doctor	100% of the MT
<b>OPTOMETRY</b> Benefits are subject to pre-authorisation by PPN <ul style="list-style-type: none"> <li>Optometric examinations 1 composite consultation, including refraction test, tonometry and visual field test</li> </ul>	100% of the MT 1 composite examination per beneficiary per 24-month cycle
<ul style="list-style-type: none"> <li>Spectacles or contact lenses Benefits are limited to either spectacles or contact lenses:               <ul style="list-style-type: none"> <li>Spectacles                   <ul style="list-style-type: none"> <li>Frames and/or lens enhancements</li> </ul> </li> <li>Lenses (one pair of standard clear Aquity lenses)</li> </ul> </li> </ul>	R200 per beneficiary per 24-month cycle  Single vision or bifocal or multifocal (paid at the cost of bifocal lenses) lenses per beneficiary per 24-month cycle
<ul style="list-style-type: none"> <li>Contact lenses</li> </ul>	R450 per beneficiary per 24-month cycle
<b>DENTAL SERVICES</b> Subject to DSP's managed care protocols and services rendered by a dentist in the DSP network <p>Conservative services</p> <ul style="list-style-type: none"> <li>Routine check-ups</li> <li>Fillings (X-rays and treatment plans may be requested for multiple fillings)</li> </ul>	100% of the MT 1 per beneficiary per year  100% of the MT 4 fillings per beneficiary, 1 filling per tooth in 365 days Amalgam fillings (item codes 8341/8342/8343/8344) and resin restorations in anterior teeth (item codes 8351/8352/8353/8354)
<ul style="list-style-type: none"> <li>Oral hygiene Only children younger than 16 years               <ul style="list-style-type: none"> <li>1 fluoride treatment per beneficiary per year for children from &gt; 5 and &lt; 16 years</li> <li>Fissure sealants</li> </ul> </li> </ul>	100% of the MT 1 polish (item code 8155) or 1 scale and polish (item code 8159) treatment per year
<ul style="list-style-type: none"> <li>Tooth extractions</li> </ul>	100% of the MT
<ul style="list-style-type: none"> <li>Root canal treatment in the dentist's chair</li> </ul>	100% of the MT 2 teeth per beneficiary per year
<ul style="list-style-type: none"> <li>Plastic dentures, including associated laboratory costs</li> </ul>	80% of the MT 1 set (upper and lower jaw) per family (21 years and older) in a 2-year period
<ul style="list-style-type: none"> <li>Laughing gas (in the dentist's chair)</li> </ul>	100% of the MT
<ul style="list-style-type: none"> <li>Dental procedures under conscious sedation in the dentist's chair (sedation cost), subject to pre-authorisation</li> </ul>	100% of the MT Extensive dental treatment only
<ul style="list-style-type: none"> <li>X-rays               <ul style="list-style-type: none"> <li>Intra-oral</li> <li>Extra-oral</li> </ul> </li> </ul>	100% of the MT 4 per beneficiary per year  100% of the MT 1 per beneficiary in a 3-year period
<ul style="list-style-type: none"> <li>Medicine Only formulary medicine obtained from a network pharmacy and prescribed by a dentist in the DSP network</li> </ul>	100% of the MMAP according to the acute medicine/dental formularies

MMAP – Maximum Medical Aid Price

MT – Medihelp tariff paid by Medihelp for benefits that can include a contracted tariff or the single exit price

PPN – Preferred Provider Negotiators

DSP – Designated service provider



Visiting the Necesses network service providers, following the correct pre-authorisation process, and using the Necesses formularies are just some of the ways in which you can manage or reduce out-of-pocket medical expenses.

## Pre-authorisation, formularies and referrals are important

100% of the Medihelp tariff will apply if the following services or procedures are pre-authorised and/or patients are referred by a Necesses network general practitioner, protocols are followed and DSPs are used:

### Pre-authorisation

- All planned hospital admissions in a Necesses network hospital (protocols and case management apply)
- Oxygen for out-of-hospital use (protocols and case management apply)
- Extensive dental treatment under general anaesthesia for children younger than 5 years – once per lifetime (DSP's managed care protocols and PMB apply)
- Dental procedures under conscious sedation in the dentist's chair (extensive dental treatment only)
- Midwife services, pre-and post-natal care
- Specialist care, subject to referral by a Necesses network GP
- Oncology at ICON (PMB)
- PMB chronic medicine

Should these services not be pre-authorised or the correct procedures not be followed, an 80% benefit will apply or you may be responsible for the account.

### Emergency transport services

Emergency transport services (Netcare 911) by road and air in the RSA must be pre-authorised to qualify for the applicable benefit. If not pre-authorised, a 50% benefit will apply, except in the case of emergency medical conditions.

### Formularies (acute, dental and PMB medicine)

100% of the MT will apply when using the Necesses formularies. If you deviate from the Necesses formularies, you will be responsible for the payment.

### Pathology and radiology lists

100% of the MT according to the Medihelp-approved list of codes, as well as for services rendered by the DSP (Lancet/PathCare) in the case of pathology. If you receive services not included on the lists or do not use Lancet or PathCare, you will be responsible for payment.

### Referrals

100% of the MT will apply if you are referred to a specialist by your Necesses network GP. If you are not referred an 80% benefit will apply.

## Use of network hospitals

100% of the MT will apply when using network hospitals. Should you choose not to use a network hospital a 65% benefit will be applicable for non-network hospital visits.

PMB – Prescribed minimum benefits  
DSP – Designated service provider  
ICON – Independent Clinical Oncology Network

MT – Medihelp tariff paid by Medihelp for benefits which can include a contracted tariff or the single exit price

# supporting information



## Necesse private hospital network

You have access to **124 private hospitals and day clinics** countrywide. Before you select the Necesse option, please ensure that there is a network hospital near you that will provide in your specific healthcare needs.

### Specialist network

Certain specialists only admit patients to the hospital where they have their consultation rooms, so you'll have to make sure that the specialists you need are at these network hospitals. A specialist network for PMB services applies for the Necesse option, so ensure that you use their services to prevent deductibles.



Our website lists all the network hospitals and specialists. Visit [www.medihelp.co.za](http://www.medihelp.co.za).



Dial \*120\*6364# on your cell phone, or download our **Medihelp member app**, which is available on these devices:



### Limpopo

City/town	Name	Practice No
Bela Bela	St Vincent's Hospital	5706548
Lephalale	Marapong Private Hospital	5708125
Makhado	Zoutpansberg Private Hospital	253871
Polokwane	Mediclinic Limpopo	5808189
Polokwane	Mediclinic Limpopo Day Clinic	0603120
Thabazimbi	Mediclinic Thabazimbi	5709202
Tzaneen	Mediclinic Tzaneen	132454

### KwaZulu-Natal

City/town	Name	Practice No
Amanzimtoti	Kingsway Hospital	5808200
Ballito	Alberlito Hospital	250562
Durban	Chatsmed Garden Hospital	5808219
Durban	Bluff Medical & Dental Centre	7700687
Durban	St Augustine's Hospital	5802563
Durban	Pinetown Medicross Theatre	7700954
Durban	Parklands Hospital	5802466
Empangeni	Empangeni Garden Clinic	5708494
Howick	Mediclinic Howick	122092
Kokstad	Kokstad Private Hospital	174602
Margate	Margate Private Hospital	5808529
Newcastle	Mediclinic Newcastle	5808871
Nongoma	Nongoma Private Hospital	147362
Pietermaritzburg	Mediclinic Pietermaritzburg	5808073
Pinetown	Malvern Medical & Dental Centre	7700695
Pongola	Pongola Hospital	5707803
Port Shepstone	Hibiscus Hospital	5808901
Richards Bay	The Bay Hospital	5808472
Shelly Beach	Shelly Beach Day Clinic	380059
Tongaat	Victoria Hospital	5708567
Umhlanga	Umhlanga Hospital	5808936

### Free State

City/town	Name	Practice No
Bethlehem	Mediclinic Hoogland	5808707
Bloemfontein	Mediclinic Bloemfontein	5808154
Kroonstad	Koinonia Theatre (Dr LJ van Wyk) <i>(dental procedures only)</i>	7600658
Kroonstad	Kroon Hospital	5808383
Welkom	Mediclinic Welkom	5808758

### Mpumalanga

City/town	Name	Practice No
Barberton	Mediclinic Barberton	5709148
eMalahleni	eMalahleni Private Hospital	413615
eMalahleni	eMalahleni Day Hospital	7700520
Ermelo	Mediclinic Ermelo	5808863
Middelburg	Middelburg Private Hospital	5808243
Nelspruit	Mediclinic Nelspruit	5808340
Secunda	Mediclinic Secunda	540110
Trichardt	Mediclinic Highveld	5807956

### North West

City/town	Name	Practice No
Brits	Mediclinic Brits	5808723
Klerksdorp	Wilmed Park Private Hospital	5808812
Klerksdorp	Sunningdale Hospital	5706696
Marikana	Andrew Saffy Memorial Hospital	78468
Potchefstroom	Mediclinic Potchefstroom	5808057
Rustenburg	Peglerae Hospital	5808359
Rustenburg	Ferncrest Hospital	5808391
Vryburg	Vryburg Private Hospital	5808553

## Gauteng

City/town	Name	Practice No
Alberton	Clinton Clinic	5708877
Alberton	Union Hospital	5804981
Benoni	Lakeview Hospital (dental procedures only)	5709121
Benoni	Linmed Hospital	5808588
Boksburg	Boksburg Medical & Dental Centre (dental procedures only)	7700741
Boksburg	Sunward Park Hospital	5808227
Bronkhorstspuit	Bronkhorstspuit Hospital	5808561
Heidelberg	Suikerbosrand Clinic (maternity & neonatal only)	5808987
Johannesburg	Garden City Clinic (maternity & neonatal only)	5805988
Johannesburg	Mediclinic Morningside	5807824
Johannesburg	Mediclinic Sandton	5805139
Johannesburg	Mulbarton Hospital	5808278
Johannesburg	Parklane Clinic (maternity & neonatal only)	5803004
Johannesburg	Rand Clinic	5804620
Johannesburg	Wits University Donald Gordon Medical Centre	5806682
Kempton Park	Birchmed Surgical Centre (dental procedures only)	7700504
Krugersdorp	Krugersdorp Private Hospital	5808111
Krugersdorp	Protea Clinic	7700369
Krugersdorp	Pinehaven Hospital	604968
Midrand	Netcare Waterfall City Hospital	426024
Midstream	Mediclinic Midstream	0579068
Pretoria	Akasia Hospital	5808618
Pretoria	Bougainville Private Hospital	5808952
Pretoria	Life Groenkloof Hospital (oncology only)	5804043
Pretoria	Mediclinic Gynaecological Hospital	5703638
Pretoria	Mediclinic Heart Hospital	5808634
Pretoria	Mediclinic Kloof	120928
Pretoria	Mediclinic Legae	5808499
Pretoria	Mediclinic Medforum	5807867
Pretoria	Mediclinic Muelmed	5808065
Pretoria	Montana Private Hospital	5809002
Pretoria	Medkin Clinic (dental procedures only)	7700121
Pretoria	Pretoria North Day Clinic (dental procedures only)	7700156
Soweto/Lenasia	Lenmed Clinic	5808324
Soweto/Lenasia	Lenmed Daxina Private Hospital	490296
Springs	East Rand N17 Private Hospital	5809029
Vanderbijlpark	Mediclinic Emfuleni	5808375
Vanderbijlpark	PJ Schutte Theatre Unit (dental procedures only)	7600534
Vereeniging	Mediclinic Vereeniging	5808081

## Northern Cape

City/town	Name	Practice No
Kathu	Lenmed Health Kathu Private Hospital	580619
Kimberley	Mediclinic Kimberley	5808049
Upington	Mediclinic Upington	5808804

## Western Cape

City/town	Name	Practice No
Atlantis	Wesfleur Private Clinic	7700814
Cape Town	Christiaan Barnard Memorial Hospital (paediatric cardiology only)	5807778
Cape Town	Mediclinic Cape Gate	366714
Cape Town	Mediclinic Cape Town	5808995
Cape Town	Mediclinic Constantiaberg	5807999
Cape Town	Mediclinic Durbanville	5808766
Cape Town	Mediclinic Durbanville Day Hospital	592781
Cape Town	Mediclinic Louis Leipoldt	5806860
Cape Town	Mediclinic Milnerton	5808669
Cape Town	Mediclinic Panorama	5807913
Cape Town	Melomed Gatesville	5808103
Ceres	Ceres Private Hospital	5709032
George	Mediclinic Geneva	5709059
George	Mediclinic George	5807905
Hermanus	Mediclinic Hermanus	5709091
Knysna	Knysna Private Hospital	5808960
Mossel Bay	Bayview Hospital	5808790
Oudtshoorn	Mediclinic Klein Karoo	5808928
Paarl	Mediclinic Paarl	5808251
Plettenberg Bay	Mediclinic Plettenberg Bay	283207
Somerset West	Mediclinic Vergelegen	5808030
Stellenbosch	Mediclinic Stellenbosch	5808405
Strand	Mediclinic Strand	5709075
Vredenburg	West Coast Private Hospital	5808979
Worcester	Mediclinic Worcester	5808006

## Eastern Cape

City/town	Name	Practice No
East London	Life Beacon Bay Hospital	357669
Grahamstown	Settlers Hospital	348090
Humansdorp	Isivivana Private Hospital (maternity & neonatal only)	168386
Port Alfred	Port Alfred Hospital	328871
Port Elizabeth	Greenacres Hospital	5807875
Port Elizabeth	Medical Forum Theatre	7700873
Queenstown	Life Queenstown Private Hospital	5709156
Uitenhage	Cuyler Clinic	5808642

Medihelp may change the information contained in this document from time to time and will publish any changes on our website at [www.medihelp.co.za](http://www.medihelp.co.za).

# our healthcare partners

## Essential information about our healthcare partners

We partner with preferred providers and networks to give you access to affordable, quality care.



### Dental Risk Company (DRC)

Dental Risk Company (DRC) specialises in offering effective dental managed care solutions and provides Medihelp's dental benefits in partnership with 2 200 dentists across South Africa. Necesses members must obtain services in the DRC network. In certain cases (particularly for specialised dentistry), benefits are subject to prior approval by DRC. Benefits are managed by DRC and granted in accordance with DRC protocols.



### Medihelp Preferred Pharmacy Network

Medihelp's Preferred Pharmacy Network consists of more than 1 700 pharmacies who offer Medihelp members the most cost-effective professional fee structure for prescribed medicine. This means that members who visit network pharmacies will not have to pay any excess amounts for higher professional fees which non-network pharmacies charge to dispense medicine items.



### Halocare & Dis-Chem Direct

Halocare is the managed healthcare partner for HIV/Aids-related services and post-exposure prophylaxis while Dis-Chem Direct is the designated service provider (DSP) for HIV/Aids medicine.



### PPN

The Preferred Provider Negotiators (PPN) provide Medihelp's optical benefits in partnership with more than 2 000 optometrists across South Africa. Medihelp members may visit any optometrist and benefits are paid according to PPN tariffs.



### Specialist network

A specialist network effectively manages any specialist care that you may require, especially for PMB services, while reducing your out-of-pocket expenses. A specific specialist network also ensures streamlined care between the specialist and the network hospital. Find a Necesses network specialist by visiting [www.medihelp.co.za](http://www.medihelp.co.za).



### Netcare 911

Netcare 911 is our partner in providing emergency medical services, including emergency medical transport, emergency assistance and trauma counselling.



### ICON

ICON is the Independent Clinical Oncology Network to which more than 80% of the country's oncologists belong. They provide the highest quality cancer care through a countrywide footprint of high-tech chemotherapy and radiotherapy facilities. ICON is Medihelp's designated service provider for oncology treatment.



### DBC

Medihelp's back treatment programme is offered in co-operation with Document-Based Care (DBC). Each programme is developed by a multidisciplinary medical team according to the individual's clinical profile.

# explanation of terms

**Chronic medicine** is medicine used for the long-term treatment (three months or longer) of a chronic condition, and which meets the following requirements:

- It must be used to prevent and/or treat a serious medical condition;
- It must be used for an uninterrupted period of three months or longer;
- It must be used to sustain life, to delay the progress of a disease, and to repair natural physiology;
- It must be registered in South Africa for the treatment of the medical condition for which it is prescribed; and
- It must be the accepted treatment according to local and international treatment protocols and algorithms.

**Cost** means the cost of PMB services, payable in full by Medihelp if the services are registered with Medihelp as qualifying for PMB and rendered by DSPs according to accepted PMB treatment protocols.

A **cycle** means the stated length of the benefit cycle commencing on the date of the first service and thereafter calculated from the date of each subsequent service.

**Deductibles** are the difference between the cover provided by Medihelp and the cost/tariff charged for the medical service, and are payable directly to the service provider. Members must make payments in the following cases:

- When doctors and other providers of medical services charge fees which exceed Medihelp's tariffs, the member is responsible for paying the difference between the amount charged and the amount which Medihelp pays;
- When Medihelp's benefit allocation is not 100% or where the cost exceeds the limit available for the service; and
- When the member chooses not to obtain services from a designated service provider (e.g. the ICON network in the case of oncology) or when a pre-determined deductible is applicable to a specific benefit.

An **emergency medical condition** means any sudden and unexpected onset of a health condition that requires immediate medical or surgical treatment, where failure to provide such treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part, or would place the person's life in serious jeopardy. An emergency medical condition must be certified as such by a medical practitioner. Emergencies qualify for PMB and must therefore also be registered for PMB (see also "PMB").

**EVARS** prosthesis means endovascular aortic replacement surgery and is considered when the patient suffers from an aortic aneurysm with an accompanying risk for anaesthesia.

**Hospital benefits** refer to benefits for services rendered by a hospital during a patient's stay in hospital. Services include ward accommodation and ward medicine, standard radiology and pathology, physiotherapy and other supplementary services rendered during hospitalisation. Hospital benefits are subject to pre-authorisation and an 80% benefit will be applicable to the hospital account if the admission is not pre-authorised. A 65% benefit will be applicable to voluntary admissions to a non-network hospital. Emergency admissions must be registered on the first workday following the admission (see also "emergency medical condition").

The **Maximum Medical Aid Price (MMAP)** is the reference price used by Medihelp to determine benefits for acute and chronic medicine. The MMAP is the average price of all the available generic equivalents for an ethical patented medicine item.

The **Medihelp Reference Price (MHRP)** is applicable to all pre-authorised PMB chronic medicine. The price is determined according to the most cost-effective treatment based on evidence-based principles. The MHRP will differ for the different benefit options and is subject to change (e.g. when new generic equivalents are introduced to the market). Please visit Medihelp's website at [www.medihelp.co.za](http://www.medihelp.co.za) for the latest MHRP. Members are advised to consult their doctor when using PMB chronic medicine to make sure they use medicine on the MHRP where possible and so prevent or reduce payments.

**Medihelp tariff** refers to the tariff paid by Medihelp for different medical services, and can include for example the contracted tariff for services agreed with certain groups of service providers such as hospitals, the Medihelp Dental Tariff for dental services, and the single exit price for acute medicine. The various tariffs are defined in the Rules of Medihelp.

**Network benefit options** offer benefits to members in collaboration with a service provider network. Members must make use of the network to qualify for benefits and prevent deductibles. Visit [www.medihelp.co.za](http://www.medihelp.co.za) to see which providers form part of the Necesses network.

**Oncology:** 98% of all oncology cases qualify for prescribed minimum benefits (PMB), which Medihelp will cover at 100% of the cost in accordance with the protocols as set out in the Regulations published under the Act, provided that oncology is rendered by oncologists within the Independent Clinical Oncology Network (ICON). All oncology treatments will be evaluated on an individual basis according to ICON's protocols and must adhere to ICON's oncology treatment programmes. Medihelp covers PMB bone marrow/stem cell transplants subject to the applicable PMB legislation. Oncology received outside ICON or that deviates from the protocols is subject to deductibles.

**Period** refers to the specific duration described per benefit, e.g. dentistry, or the date of enrolment as a beneficiary.

**Protocols** are clinical guidelines compiled by experts in the field of a specific medical condition for the treatment of that condition based on best practice principles.

**Prescribed minimum benefits (PMB)** are paid for 26 chronic conditions on the CDL and 270 diagnoses with their treatments as published in the Regulations of the Medical Schemes Act 131 of 1998. In terms of these Regulations, medical schemes are compelled to grant benefits for the diagnosis, treatment and care costs of any of these conditions as well as emergency medical conditions (that meet the published definition) without imposing any limits. PMB are subject to pre-authorisation, protocols, and the utilisation of designated service providers, where applicable, e.g. the ICON network for cancer treatment.

## summary of exclusions

A complete list of all services excluded from benefits is available in Medihelp's Rules. The following are examples of what we consider to be excluded from benefits:

- Services which are not mentioned in the Rules as well as services which in the opinion of the Board of Trustees, are not aimed at the generally accepted medical treatment of an actual or a suspected medical condition or handicap, which is harmful or threatening to necessary bodily functions (the process of ageing is not considered to be a suspected medical condition or handicap).
- Travelling and accommodation/lodging costs, including meals as well as administration costs of a beneficiary and/or service provider.
- Operations, treatments and procedures of own choice, for cosmetic purposes, and for the treatment of obesity, with the exception of the treatment of obesity which is motivated by a medical specialist as life-threatening and approved beforehand by Medihelp.
- Costs exceeding the Medihelp tariff for a service or the maximum benefit to which a member is entitled, subject to PMB.
- Appointments not kept.
- Treatment of infertility, other than that stipulated in the Regulations to the Medical Schemes Act, 1998.
- Treatment of alcoholism and drug abuse as well as services rendered by institutions which are registered in terms of the Prevention of and Treatment for Substance Abuse Act 70 of 2008 or other institutions whose services are of a similar nature, other than stipulated in the Regulations to the Medical Schemes Act, 1998.
- The cost of transport with an ambulance/emergency vehicle from a hospital/other institution to a residence/medical doctor if the visit does not pertain to a hospital admission.
- Emergency room facility fees.
- In-hospital physiotherapy services not referred by the attending medical doctor.

Please also refer to Medihelp's Rules for the medical conditions, procedures and services, appliances, medicines, consumables and other products that are excluded from benefits.

# contact us

## Medihelp

### Medihelp Customer Care centre

Tel: 086 0100 678

Fax: 012 336 9540

enquiries@medihelp.co.za

www.medihelp.co.za

### Application forms (new business)

newbusiness@medihelp.co.za

### Membership enquiries

membership@medihelp.co.za

### E-services

Access the secured site for members via

[www.medihelp.co.za](http://www.medihelp.co.za)

Download the member app from iStore/

Google Play store

### Submission of claims

claims@medihelp.co.za

Fax: 012 336 9556

### Subscription enquiries

subscription@medihelp.co.za

### Hospital admissions (All hospital admissions must be pre-authorised)

Electronic pre-authorisations: [www.medihelp.co.za](http://www.medihelp.co.za)  
(secured site for members)

Tel: 086 0200 678

Fax: 012 336 9535

hospitalauth@medihelp.co.za

### PMB chronic medicine and more than 30 days' medicine supply

Tel: 086 0100 678

Fax: 012 334 2466 (chronic and PMB medicine)

Fax: 012 334 2425 (more than 30 days' supply)

medicineapp@medihelp.co.za

### Prescribed minimum benefits (PMB)

Tel: 086 0100 678

Fax: 086 0064 762

enquiries@medihelp.co.za

### MRI and CT scans

Tel: 086 0200 678

### Oncology

Tel: 086 0100 678

Fax: 086 0064 762

oncology@medihelp.co.za

### Private nursing, hospice and sub-acute care facilities

Tel: 086 0100 678

Fax: 012 336 9523

hmanagement@medihelp.co.za

### Chronic renal dialysis & oxygen administered at home

Tel: 086 0100 678

Fax: 012 336 9540

preauth@medihelp.co.za

### Medihelp fraudline

Tel: 012 334 2428

Fax: 012 336 9538

fraud@medihelp.co.za

## Partners

### Netcare 911

Tel: 082 911

### HIV/Aids programme & post-exposure prophylaxis (PEP) Disease management programme

Halocare

Tel: 086 014 3258

Emergencies: 071 786 4520

Fax: 086 570 2523

medihelp@halocare.co.za

### Medicine

Dis-Chem Direct

Tel: 011 589 2788

Fax: 086 641 8311

direct@dischem.co.za

### DRC (Dental services)

Tel: 012 741 5143

Fax: 086 687 1285

medihelp@dentalrisk.com

www.dentalrisk.com

### PPN (Optometry)

Tel: 086 1103 529 or 086 1101 477

info@ppn.co.za

www.ppn.co.za

## Council for Medical Schemes

Tel: 086 1123 267

complaints@medicalschemes.com

www.medicalschemes.com





086 0100 678  
www.medihelp.co.za

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



**medihelp**  
medical scheme