

DAY-TO-DAY BENEFITS

SUBJECT TO SAVINGS, AFB, SPG AND ATB

All benefits are paid at 100% of the Scheme rate unless otherwise specified.

	Benefits paid from available funds in savings and AFB where no sub-limits are applicable	Sub-limits while savings and AFB funds are available	Above Threshold Benefits and sub-limits (All sub-limits are subject to the overall ATB limits)
GP consultations, procedures and materials	✓		Unlimited, not subject to ATB limits
Specialist consultations, procedures and materials Paid at 100% of the Scheme rate A referral from a GP is required before seeking treatment from a specialist, failure which will result in a 30% co-payment on the specialist account and all related accounts.	✓		R3 980 per family
Acute medicines Prescription medicines- Schedule 3 and higher A 25% co-payment is applicable on non-generic products. MMAP (Maximum Medical Aid Price) applies to medicines where a generic product is available and might result in a co-payment	✓		R3 090 per family
Over the counter medicine (OTC) and homeopathic medicine and sport supplements with NAPPI code		R200 per event, R880 per beneficiary per year and R1 320 per family per year	No above threshold benefit
Basic radiology Including black and white X-rays and ultrasound	✓		R3 070 per family. Combined limit with Pathology
Specialised radiology MRI, CT, High resolution CT and PET scans			The first R2 250 is payable from savings, AFB and SPG with accumulation to threshold, except for PMBs, thereafter unlimited from in-hospital benefit
Pathology	✓		R3 070 per family. Combined limit with Radiology
Dentistry Conservative and restorative Specialised dentistry Dentures, crowns, bridgework, metal fillings and inlays, orthodontics, prosthodontics, periodontics, Osseo integrated implants including the cost of the appliances and prosthesis, maxillofacial and oral surgery	✓		Unlimited, not subject to ATB limits
Optometry Consultations Lenses, contact lenses and disposable lenses Frames		Two tests per beneficiary per year R3 700 per beneficiary per year R1 540 per beneficiary per year, included in lenses limit	No above threshold benefit No above threshold benefit No above threshold benefit
Auxiliary services Including audiologist, chiropractors, dietitians, homeopaths (consultations), naturopaths (consultations), speech and occupational therapists, chiropody/ podiatry, social workers, physiotherapy and biokineticists		R7 000 per family combined limit in-and-out of hospital	No above threshold benefit
Mental Health - Clinical psychologists		R2 320 per family	No above threshold benefit
Mental Health - Psychiatry		R9 940 per family	No above threshold benefit
Oxygen home ventilation	✓		No above threshold benefit
Private nursing homes	✓	60 days	No above threshold benefit
Ante-natal classes and a lactation consultation post confinement with a midwife		12 ante-natal classes, limited to R1 300 per pregnancy	No above threshold benefit
Surgical and medical appliances Wheelchairs, crutches, glucometers, hearing aids, artificial eyes and external fixators and wearable devices (subject to NAPPI code) and sub-limit of R3 000 per family per year		Full list of appliances with sub-limits are available on www.compcare.co.za	No above threshold benefit

HOSPITAL BENEFITS/MAJOR MEDICAL EXPENSES

IMPORTANT NOTICE - PRE-AUTHORISATION REQUIRED – PROTOCOLS APPLY

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BENEFIT	LIMIT	WHAT TO DO	TAKE NOTE
Hospitalisation: Cover in any private hospital	Unlimited	Phone for pre-authorisation 48 hours before an elective procedure, otherwise you will incur a R2 000 co-payment for no pre-authorisation or R1 000 co-payment for late authorisation. The scheme must be notified of emergency hospitalisation within 1 working day after the admission, otherwise a co-payment of R500 will apply	Specified elective procedures may have a co-payment (excluding PMBs), please refer to our website www.compcare.co.za for a list of co-payments and exclusions
Hospital related accounts including: GP visits, specialists, radiology, surgical procedures and blood transfusions	Unlimited	Pre-authorisation required	Paid at 100% of scheme rate
Medicine in hospital	Unlimited	Pre-authorisation required	Non-PMB medicine is subject to reference pricing
Medicine upon discharge (TTO)	7 days supply		
Pathology	Unlimited	Pre-authorisation required	Paid at 100% of scheme rate
Auxillary services in hospital: physiotherapy, psychology, etc.	R7 000 per family per year combined limit in-and-out of hospital	Pre-authorisation required	To be recommended by the treating medical practitioner
Surgical prostheses (sub-limits apply)	R40 000 per family per year	Pre-authorisation required	Full list of prostheses with sub-limits are available on www.compcare.co.za
Specialised Radiology including MRI, CT scans and high resolution PET scans	Unlimited	Pre-authorisation required	The first R2 250 of the specialised radiology account will be paid from the member's savings. Pre-authorisation is required for all MRI and CT Scans. High resolution CT Scans/PET Scans are subject to special medical motivation and also requires pre-authorisation. There is no benefit for unauthorised scans, except for PMBs. No benefits are available for screening or investigative purposes
Basic Radiology	Unlimited	Pre-authorisation required	Paid at 100% of scheme rate

