



# Our benefits

Marketing Brochure 2018



Financial adviser call centre 0800 43 25 84  
Member call centre 0860 11 78 59  
Emergency evacuation 082 911  
Fraud hotline 0800 00 66 72

Email for queries [member@momentumhealth.co.za](mailto:member@momentumhealth.co.za)  
Email for claims [claims@momentumhealth.co.za](mailto:claims@momentumhealth.co.za)

Website [www.momentumhealth.co.za](http://www.momentumhealth.co.za)  
Postal address PO Box 2338 Durban 4000

### **General disclaimers**

This brochure is a marketing aid. On joining the Scheme, all Momentum Health members receive a detailed member brochure.

Note that Momentum Health may specify certain principles relating to the use of your benefits.

Scheme Rules will always take precedence and are available on request.

In terms of the Medical Schemes Act, medical schemes may apply waiting periods and/or late joiner penalties to new members joining the Scheme. If we do apply a waiting period and/or a late joiner penalty to your membership, we will let you know before we activate your cover.



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# Make the right **choice**



## The Benefit Structure

### Ingwe Option

### Access Option

### Impact Option

The Benefit Structure	Ingwe Option	Access Option	Impact Option
<p><b>Major Medical Benefit</b></p> <p>The Major Medical Benefit provides cover for hospitalisation and certain out-of-hospital procedures that can safely be performed in a doctor's room, registered day clinic or out-patient facility, provided treatment is clinically appropriate and has been pre-authorised.</p>	<p>Specialists covered up to <b>100%</b> of Momentum Health Rate</p> <p>Hospital accounts covered in full at negotiated rate</p> <p>Limited to <b>R1 260 000</b> per family per year</p> <p><b>Hospital choice</b> Any hospital, Ingwe Network hospitals* or State hospitals</p>	<p>Specialists covered up to <b>100%</b> of Momentum Health Rate</p> <p>Hospital accounts covered in full at negotiated rate</p> <p>No overall annual limit applies</p> <p><b>Hospital</b> Access Network hospitals*</p>	<p>Specialists covered up to <b>100%</b> of Momentum Health Rate</p> <p>Hospital accounts covered in full at negotiated rate</p> <p>No overall annual limit applies</p> <p><b>Hospital</b> Impact Network hospitals*</p>
<p><b>Chronic Benefit</b></p> <p>The Chronic Benefit covers certain life-threatening conditions that need ongoing treatment. The Chronic Benefit includes cover for the 26 Chronic Disease List (CDL) conditions, which form part of the Prescribed Minimum Benefits (PMBs). Chronic benefits are subject to registration and approval.</p>	<p><b>26 conditions</b> - no annual limit applies</p> <p><b>Chronic Benefit Formulary</b> Network entry-level formulary</p> <p><b>Provider choice</b> Ingwe Primary Care Network providers** or Ingwe Active Primary Care Network providers**</p>	<p><b>26 conditions</b> - no annual limit applies</p> <p><b>Chronic Benefit Formulary</b> Network entry-level formulary</p> <p><b>Provider choice</b> Access Primary Care Network providers**</p>	<p><b>26 conditions</b> - no annual limit applies</p> <p><b>Chronic Benefit Formulary</b> State formulary</p> <p><b>Provider choice</b> State facilities (medical management including doctor, pharmacy, blood tests, x-rays, etc.)</p>
<p><b>Day-to-day Benefit</b></p> <p>This benefit provides for day-to-day medical expenses, such as GP visits, prescribed medication, etc.</p> <p>You have the choice of adding more day-to-day cover through the HealthSaver†.</p>	<p><b>Primary care</b> (such as GP visits, prescribed medicine, etc.)</p> <p><b>Secondary care</b> (Specialist visits)</p> <p><b>Provider choice</b> Ingwe Primary Care Network providers** or Ingwe Active Primary Care Network providers**</p>	<p><b>Primary care</b> (such as GP visits, prescribed medicine, etc.)</p> <p><b>Secondary care</b> (Specialist visits)</p> <p><b>Provider choice</b> Access Primary Care Network providers**</p>	<p><b>Primary care</b> (such as GP visits, prescribed medicine, etc.)</p> <p><b>Secondary care</b> (Specialist visits)</p> <p><b>Provider choice</b> Impact Primary Care Network providers**</p>
<p><b>Health Platform Benefit</b></p> <p>Health Platform Benefits are paid by the Scheme up to a maximum Rand amount per benefit, provided you notify us before using the benefit. On the Ingwe, Access and Impact Options, Health Platform Benefits are only available from your chosen Primary Care Network provider.</p>			

† HealthSaver is a complementary product offered by Momentum

\* View a list of these hospitals on page 26 \*\* View a list of these providers on [www.momentumhealth.co.za](http://www.momentumhealth.co.za)

## Complementary Momentum Products

You can choose to make use of additional products available from Momentum Group (Momentum), a division of MMI Group Limited, to seamlessly enhance your medical aid.

These voluntary complementary products range from a world-class wellness and rewards programme, Multiply, to the innovative HealthReturns solution.

Please note that Momentum is not a medical scheme, and is a separate entity to Momentum Health. You can be a member of Momentum Health without taking any of the complementary products that Momentum offers.

Momentum Health strives to offer you good value for money by combining flexibility with comprehensive cover, because it is important to match your family's healthcare needs. Use the following guide to find the option that best matches your needs. Healthcare expenses involve more than just the cost of your stay in hospital, it could be the cost of chronic medication (like pills to lower high blood pressure), day-to-day expenses (like visiting your GP), and/or emergency care.

The option that you choose will determine how much you will pay, and how much cover you will have for the different types of healthcare expenses. You need to choose the option that best fits both your wallet and your healthcare needs.

### Custom Option

### Incentive Option

### Extender Option

### Summit Option

Associated specialists covered in full  
-----  
Other specialists covered up to **100%** of Momentum Health Rate  
-----  
Hospital accounts covered in full at negotiated rate  
-----  
No overall annual limit applies  
-----  
**R1300** co-payment applies

**Hospital choice**  
Any or Associated hospitals\*

Associated specialists covered in full  
-----  
Other specialists covered up to **200%** of Momentum Health Rate  
-----  
Hospital accounts covered in full at negotiated rate  
-----  
No overall annual limit applies

**Hospital choice**  
Any or Associated hospitals\*

Associated specialists covered in full  
-----  
Other specialists covered up to **200%** of Momentum Health Rate  
-----  
Hospital accounts covered in full at negotiated rate  
-----  
No overall annual limit applies

**Hospital choice**  
Any or Associated hospitals\*

Associated specialists covered in full  
-----  
Other specialists covered up to **300%** of Momentum Health Rate  
-----  
Hospital accounts covered in full at negotiated rate  
-----  
No overall annual limit applies

**Hospital**  
Any hospital

26 conditions - no annual limit applies

**Provider choice**  
Any (Any GP and any pharmacy),  
**Associated\*\*** (Selected preferred GPs and Medipost Courier pharmacy for chronic medication), or  
**State** facilities (medical management including doctor, pharmacy, blood tests, x-rays, etc.)

**Chronic Benefit Formulary**  
Any: Core formulary  
**Associated:** Entry-level formulary  
**State:** State formulary

26 conditions - no annual limit applies.  
-----  
Additional **6** conditions limited to **R9300** per family

**Provider choice**  
Any (Any GP and any pharmacy),  
**Associated\*\*** (Selected preferred GPs and Medipost Courier pharmacy for chronic medication), or  
**State** facilities (medical management including doctor, pharmacy, blood tests, x-rays, etc.)

**Chronic Benefit Formulary**  
Any: Standard formulary  
**Associated:** Entry-level formulary  
**State:** State formulary

26 conditions - no annual limit applies.  
-----  
Additional **36** conditions limited to **R9300** per family

**Chronic Benefit Formulary**  
Any: Extended formulary  
**Associated:** Entry-level formulary  
**State:** State formulary

**Provider choice**  
Any (Any GP and any pharmacy),  
**Associated\*\*** (Selected preferred GPs and Medipost Courier pharmacy for chronic medication), or  
**State** facilities (medical management including doctor, pharmacy, blood tests, x-rays, etc.)

26 conditions - no annual limit applies.  
-----  
Additional **36** conditions accumulate to the overall day-to-day limit of **R23500** per beneficiary

**Chronic Benefit Formulary**  
Comprehensive formulary

**Provider**  
Freedom-of-choice

You may add the HealthSaver+ to provide cover for your day-to-day healthcare needs

**Provider choice**  
Any

Savings **10%** of total contribution

**Provider choice**  
Any, subject to Savings if available

Savings **25%** of total contribution plus Extended Cover

**Provider choice**  
Any or Associated (Members who have chosen Associated as their chronic provider must use an Associated GP for GP consultations)

Paid from risk benefit, subject to overall day-to-day limit of **R23500** per beneficiary.  
-----  
This is a combined limit incorporating both day-to-day cover and cover for the **36** additional chronic conditions.

**Provider choice**  
Freedom-of-choice

The Health Platform encourages health awareness, enhances quality of life and gives peace of mind through preventative care, early detection, a leading maternity programme, management of certain diseases, health education and advice and emergency cover.



#### HealthSaver

Add more cover for medical expenses by choosing to contribute an additional amount that suits your needs and pocket

**momentum**

See Momentum Complementary Product brochure for more information.

# Individual Contributions

P = Principal A = Adult C = Child Child rates apply to dependants younger than 21

On the Ingwe, Access and Impact Options all children are charged for. On the Custom, Incentive, Extender and Summit Options, a maximum of 3 children are charged for

Ingwe Option		Hospital	Chronic	Day-to-day	P	A	C	
Monthly income	<= R675	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R370	R370	R232	
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R370	R370	R232	
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R370	R370	R232	
	R676 - R6 300	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R603	R603	R325	
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R759	R759	R347	
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R986	R986	R370	
	R6 301 - R8500	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R691	R691	R333	
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R965	R965	R361	
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R1 378	R1 378	R417	
	R8 501 - R11 700	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R806	R806	R349	
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R1 344	R1 344	R395	
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R1 877	R1 877	R439	
	R11 701 +	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R1 393	R1 393	R419	
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R1 903	R1 903	R561	
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R2 409	R2 409	R699	
	Access Option		Hospital	Chronic	Day-to-day	P	A	C
	Monthly income	<= R8 500	Access Network	Access Primary Care Network	Access Primary Care Network	R1 900	R1 900	R570
		R8 501 - R11 700	Access Network	Access Primary Care Network	Access Primary Care Network	R2 025	R2 025	R605
R11 701 +		Access Network	Access Primary Care Network	Access Primary Care Network	R2 350	R2 350	R785	
Impact Option		Hospital	Chronic	Day-to-day	P	A	C	
Monthly income	<= R8 500	Impact Network	State	Impact Primary Care Network	R1 140	R1 140	R405	
	R8 501 - R11 700	Impact Network	State	Impact Primary Care Network	R1 305	R1 305	R435	
	R11 701 +	Impact Network	State	Impact Primary Care Network	R2 350	R2 350	R785	
Custom Option		Hospital	Chronic		P	A	C	
	Associated		Any		R1 885	R1 487	R665	
			Associated		R1 750	R1 356	R618	
			State		R1 366	R1 033	R484	
	Any		Any		R2 249	R1 806	R803	
			Associated		R2 074	R1 620	R753	
			State		R1 743	R1 315	R639	

**Incentive** Option

Hospital	Chronic	P	A	C	
Associated	Any	<b>Total contribution</b>	<b>R2 737</b>	<b>R2 202</b>	<b>R1 022</b>
		Risk contribution	R2 463	R1 982	R920
		Savings 10%	R274	R220	R102
		Annual Savings	R3 288	R2 640	R1 224
	Associated	<b>Total contribution</b>	<b>R2 514</b>	<b>R2 000</b>	<b>R956</b>
		Risk contribution	R2 263	R1 800	R860
		Savings 10%	R251	R200	R96
		Annual Savings	R3 012	R2 400	R1 152
	State	<b>Total contribution</b>	<b>R1 834</b>	<b>R1 439</b>	<b>R711</b>
Risk contribution		R1 651	R1 295	R640	
Savings 10%		R183	R144	R71	
Annual Savings		R2 196	R1 728	R852	
Any	Any	<b>Total contribution</b>	<b>R3 052</b>	<b>R2 480</b>	<b>R1 189</b>
		Risk contribution	R2 747	R2 232	R1 070
		Savings 10%	R305	R248	R119
		Annual Savings	R3 660	R2 976	R1 428
	Associated	<b>Total contribution</b>	<b>R2 737</b>	<b>R2 196</b>	<b>R1 076</b>
		Risk contribution	R2 463	R1 976	R968
		Savings 10%	R274	R220	R108
		Annual Savings	R3 288	R2 640	R1 296
	State	<b>Total contribution</b>	<b>R2 249</b>	<b>R1 772</b>	<b>R889</b>
		Risk contribution	R2 024	R1 595	R800
		Savings 10%	R225	R177	R89
		Annual Savings	R2 700	R2 124	R1 068

**Extender** Option

Hospital	Chronic	P	A	C	
Associated	Any	<b>Total contribution</b>	<b>R5 113</b>	<b>R4 081</b>	<b>R1 535</b>
		Risk contribution	R3 835	R3 061	R1 151
		Savings 25%	R1 278	R1 020	R384
		Annual Savings	R15 336	R12 240	R4 608
		Threshold	R18 700	R16 200	R5 600
	Associated	<b>Total contribution</b>	<b>R4 715</b>	<b>R3 761</b>	<b>R1 415</b>
		Risk contribution	R3 536	R2 821	R1 061
		Savings 25%	R1 179	R940	R354
		Annual Savings	R14 148	R11 280	R4 248
		Threshold	R18 700	R16 200	R5 600
	State	<b>Total contribution</b>	<b>R4 129</b>	<b>R3 104</b>	<b>R1 239</b>
		Risk contribution	R3 097	R2 328	R929
Savings 25%		R1 032	R776	R310	
Annual Savings		R12 384	R9 312	R3 720	
Threshold		R18 700	R16 200	R5 600	
Any	Any	<b>Total contribution</b>	<b>R5 816</b>	<b>R4 640</b>	<b>R1 745</b>
		Risk contribution	R4 362	R3 480	R1 309
		Savings 25%	R1 454	R1 160	R436
		Annual Savings	R17 448	R13 920	R5 232
	Associated	<b>Total contribution</b>	<b>R5 232</b>	<b>R4 177</b>	<b>R1 569</b>
		Risk contribution	R3 924	R3 133	R1 177
		Savings 25%	R1 308	R1 044	R392
		Annual Savings	R15 696	R12 528	R4 704
	State	<b>Total contribution</b>	<b>R4 723</b>	<b>R3 843</b>	<b>R1 416</b>
		Risk contribution	R3 542	R2 882	R1 062
		Savings 25%	R1 181	R961	R354
		Annual Savings	R14 172	R11 532	R4 248
Threshold	R18 700	R16 200	R5 600		

**Summit** Option

Hospital	Chronic	Day-to-day	P	A	C
Any	Freedom-of-choice	Freedom-of-choice	R8 342	R6 672	R1 916

# Ingwe Option Overview

The Ingwe Option provides affordable access to entry-level cover.

You have cover for **hospitalisation** up to R1 260 000 for your family per year. For your hospitalisation cover, you can choose to use either Any hospital, the Ingwe Network of private hospitals (see page 26 for this list), or State hospitals for an even lower monthly contribution.

For **chronic treatment** and **day-to-day benefits**, such as GP visits or prescribed medicine, depending on your provider choice, you need to consult Ingwe Primary Care Network providers or Ingwe Active Primary Care Network providers. If you choose Any hospital, please note that you may only use GPs on the Ingwe Active Primary Care Network for your chronic and day-to-day benefits.

The **Health Platform** benefit provides cover for a range of preventative care benefits available from your chosen network provider.

If you need more day-to-day cover, you can choose to make use of the **HealthSaver+**. HealthSaver is a complementary product offered by Momentum that lets you save for medical expenses.



Choose your <b>monthly income</b>	Choose your <b>providers</b>			Choose your <b>family composition</b>					
	<b>Hospital</b>	<b>Chronic</b>	<b>Day-to-day</b>						
<= R675	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R370	R740	R602	R972	R1 204	R1 436
	Ingwe Network			R370	R740	R602	R972	R1 204	R1 436
	Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R370	R740	R602	R972	R1 204	R1 436
R676 - R6 300	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R603	R1 206	R928	R1 531	R1 856	R2 181
	Ingwe Network			R759	R1 518	R1 106	R1 865	R2 212	R2 559
	Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R986	R1 972	R1 356	R2 342	R2 712	R3 082
R6 301 - R8500	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R691	R1 382	R1 024	R1 715	R2 048	R2 381
	Ingwe Network			R965	R1 930	R1 326	R2 291	R2 652	R3 013
	Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R1 378	R2 756	R1 795	R3 173	R3 590	R4 007
R8 501 - R11 700	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R806	R1 612	R1 155	R1 961	R2 310	R2 659
	Ingwe Network			R1 344	R2 688	R1 739	R3 083	R3 478	R3 873
	Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R1 877	R3 754	R2 316	R4 193	R4 632	R5 071
R11 701 +	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R1 393	R2 786	R1 812	R3 205	R3 624	R4 043
	Ingwe Network			R1 903	R3 806	R2 464	R4 367	R4 928	R5 489
	Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R2 409	R4 818	R3 108	R5 517	R6 216	R6 915

All children are charged for



Major Medical Benefit	
Benefit	Specialists covered up to 100% of Momentum Health Rate Hospital accounts are covered in full at the rate agreed upon with the hospital group Limited to R1 260 000 per family per year
Provider	Any hospital, Ingwe Network hospitals or State hospitals
<b>General rule applicable to Major Medical Benefits</b>	You need to phone for authorisation before making use of your Major Medical Benefits. For some conditions like cancer you will need to register on a Disease Management Programme. Momentum Health will pay benefits in line with the Scheme Rules and the clinical protocols that the Scheme has established for the treatment of each condition
High and intensive care	10 days per admission
Renal dialysis and Oncology	Limited to Prescribed Minimum Benefits at State facilities
Organ transplants	Limited to Prescribed Minimum Benefits at State facilities
In-hospital dental and oral benefits	Not covered. Maxillo-facial trauma covered at State facilities, limited to Prescribed Minimum Benefits
Maternity confinements (limit for hospital account only) Caesarean sections: Only emergency caesareans are covered	R27 200 per uncomplicated delivery R39 900 per complicated delivery
Neonatal intensive care	R57 200 per confinement
Medical and surgical appliances in-hospital (such as support stockings, knee and back braces etc.)	R4 900 per family
Prosthesis - internal (incl. knee and hip replacements, permanent pacemakers etc.)	Limited to Prescribed Minimum Benefits at State facilities
Prosthesis - external (such as artificial arms or legs etc.)	Limited to Prescribed Minimum Benefits at State facilities
MRI and CT scans	Limited to Prescribed Minimum Benefits at State facilities
Mental health - incl. psychiatry and psychology - drug and alcohol rehabilitation	Limited to Prescribed Minimum Benefits at State facilities, 21-day sub-limit applies to drug and alcohol rehabilitation
Take-home medicine	7 days' supply
Medical rehabilitation and step-down facilities	R11 900 per beneficiary
Private nursing and Hospice	Not covered
Immune deficiency related to HIV Anti-retroviral treatment HIV related admissions	At your chosen network provider R31 900 per family R34 000 per family
Chronic Benefit	
Provider	Ingwe Primary Care Network or Ingwe Active Primary Care Network
Cover	26 conditions, according to Chronic Disease List in Prescribed Minimum Benefits
<b>General rule applicable to Chronic Benefits</b>	Benefits are only available from the Ingwe Primary Care Network or Ingwe Active Primary Care Network, and are subject to a list of medicine, referred to as a Network entry-level formulary
Day-to-day Benefit	
Provider	Ingwe Primary Care Network or Ingwe Active Primary Care Network
Savings	Not applicable. You can choose to add the HealthSaver*
<b>General rule applicable to Day-to-day Benefits</b>	Benefits are only available from the Ingwe Primary Care Network or Ingwe Active Primary Care Network, and are subject to the rules and provisions set by the network, commonly referred to as protocols. This benefit is also subject to the network's list of applicable tariff codes
Acupuncture, Homeopathy, Naturopathy, Herbology, Audiology, Occupational and Speech therapy, Chiropractors, Dieticians, Biokinetics, Orthoptists, Osteopathy, Audiometry, Chiropody and Podiatry	Limited to Prescribed Minimum Benefits at State facilities
Mental health (incl. psychiatry and psychology)	Limited to Prescribed Minimum Benefits at State facilities
Dentistry - basic (such as extractions or fillings)	Examinations, fillings and x-rays as per the list of tariff codes. One dental consultation is covered per year per beneficiary. You need to call us for pre-authorisation if you have more than 4 fillings or 4 extractions
Dentistry - specialised (such as bridges or crowns)	Not covered
External medical and surgical appliances (incl. hearing aids, wheelchairs etc.)	Not covered
General practitioners	There is no limit to the number of times you may visit your Primary Care Network GP. However, please note all visits from the 11th visit onwards must be pre-authorised
Out-of-network GP, casualty or after-hours visits	1 visit per beneficiary per year, subject to authorisation (you need to authorise within 72 hours of the consultation, otherwise a 30% co-payment will apply) Maximum of 2 visits per family per year, R100 co-payment per visit applies
Specialists	2 visits per family per year. Covered at 100% of Momentum Health Rate with a R100 co-payment per visit. Subject to referral by your Ingwe Primary Care Network or Ingwe Active Primary Care Network provider and pre-authorisation
Physiotherapy	Included in the specialist limit
Optical and optometry (excl. contact lenses and refractive eye surgery)	1 eye test and 1 pair of clear standard or bi-focal lenses with standard frame as per formulary per beneficiary every 2 years. Spectacles will only be granted if your refraction measurement is more than 0.5
Pathology - basic (such as blood sugar or cholesterol tests)	Specific list of pathology tests covered
Radiology - basic (such as X-rays)	Specific list of black and white x-rays covered
MRI and CT scans	Limited to Prescribed Minimum Benefits at State facilities
Prescribed medication	Subject to a list of medicine, referred to as a prescribed formulary
Over-the-counter medication	Not covered

— This table represents a summary of the benefits for 2018

— Chronic and Day-to-day Benefits are only available from the Ingwe Primary Care Network or the Ingwe Active Primary Care Network

— If you choose Ingwe Network hospitals as your preferred provider for Major Medical Benefits and do not use this provider, you will have a co-payment of 30% on the hospital account and Momentum Health will be responsible for 70% of the negotiated tariff

— If you choose State hospitals as your preferred provider for the Major Medical Benefit and do not use this provider, a co-payment will apply. This co-payment will be the difference in the cost between State facility charges and the amount charged by the provider you use

— The sub-limits specified apply per year. Should you not join in January, your sub-limits will be adjusted pro-rata (this means it will be adjusted in line with the number of months left in the year)

+ HealthSaver is a complementary product offered by Momentum

## Access Option Overview

The Access Option provides cover for **hospitalisation** at the Access Network of private hospitals (see page 26 for this list). There is no overall annual limit for hospitalisation.

For **chronic treatment**, and **day-to-day** benefits, such as GP visits or prescribed medicine, you need to consult Access Primary Care Network providers.

The **Health Platform** benefit provides cover for a range of preventative care benefits available from your Access Primary Care Network provider.

If you need more day-to-day cover, you can choose to make use of the **HealthSaver+**. HealthSaver is a complementary product offered by Momentum that lets you save for medical expenses.



Choose your <b>monthly income</b>	Your <b>providers</b>			Choose your <b>family composition</b>					
	Hospital	Chronic	Day-to-day						
<= R8 500	Access Network	Access Primary Care Network	Access Primary Care Network	R1 900	R3 800	R2 470	R4 370	R4 940	R5 510
R8 501 - R11 700	Access Network	Access Primary Care Network	Access Primary Care Network	R2 025	R4 050	R2 630	R4 655	R5 260	R5 865
R11 701 +	Access Network	Access Primary Care Network	Access Primary Care Network	R2 350	R4 700	R3 135	R5 485	R6 270	R7 055

All children are charged for

## Impact Option Overview

The Impact Option provides cover for **hospitalisation** at the Impact Network of private hospitals (see page 26 for this list). There is no overall annual limit for hospitalisation.

For your **chronic** script, medication and treatment, you need to use State facilities.

For **day-to-day** benefits, such as GP visits or prescribed medicine, you need to consult Impact Primary Care Network providers.

The **Health Platform** benefit provides cover for a range of preventative care benefits available from your Impact Primary Care Network provider.

If you need more day-to-day cover, you can choose to make use of the **HealthSaver+**. HealthSaver is a complementary product offered by Momentum that lets you save for medical expenses.



Choose your <b>monthly income</b>	Your <b>providers</b>			Choose your <b>family composition</b>					
	Hospital	Chronic	Day-to-day						
<= R8 500	Impact Network	State	Impact Primary Care Network	R1 140	R2 280	R1 545	R2 685	R3 090	R3 495
R8 501 - R11 700	Impact Network	State	Impact Primary Care Network	R1 305	R2 610	R1 740	R3 045	R3 480	R3 915
R11 701 +	Impact Network	State	Impact Primary Care Network	R2 350	R4 700	R3 135	R5 485	R6 270	R7 055

All children are charged for

## Major Medical Benefit

Benefit	Specialists covered up to 100% of Momentum Health Rate Hospital accounts are covered in full at the rate agreed upon with the hospital group No overall annual limit applies
Provider	Access and Impact Network hospitals
<b>General rule applicable to Major Medical Benefits</b>	You need to phone for authorisation before making use of your Major Medical Benefits. For some conditions, like cancer, you will need to register on a Disease Management Programme. Momentum Health will pay benefits in line with the Scheme Rules and the clinical protocols that the Scheme has established for the treatment of each condition
High and intensive care	12 days per admission
Renal dialysis and Oncology	Limited to Prescribed Minimum Benefits at State facilities
Organ transplants	Limited to Prescribed Minimum Benefits at State facilities
In-hospital dental and oral benefits	Not covered. Maxillo-facial trauma covered at State facilities, limited to Prescribed Minimum Benefits
Maternity confinements	No annual limit applies
Neonatal intensive care	No annual limit applies
Medical and surgical appliances in-hospital (such as support stockings, knee and back braces etc.)	R5 950 per family
Prosthesis - internal (incl. knee and hip replacements, permanent pacemakers, etc.)	Intraocular lenses: R4 800 per beneficiary per event, maximum 2 events per year Other internal prostheses: R33 200 per beneficiary per event, maximum 2 events per year
Prosthesis - external (such as artificial arms or legs etc.)	Limited to Prescribed Minimum Benefits at State facilities
MRI and CT scans	Limited to Prescribed Minimum Benefits at State facilities
Mental health - incl. psychiatry and psychology - drug and alcohol rehabilitation	R17 050 per beneficiary, 21-day sub-limit applies to drug and alcohol rehabilitation, subject to treatment at preferred provider
Take-home medicine	7 days' supply
Medical rehabilitation, private nursing, Hospice and step-down facilities	R45 900 per family
Immune deficiency related to HIV Anti-retroviral treatment HIV related admissions	At your chosen network provider R31 900 per family R34 400 per family

## Chronic Benefit

Provider	Access Option: Primary Care Network Impact Option: State facilities
Cover	26 conditions, according to Chronic Disease List in Prescribed Minimum Benefits
<b>General rule applicable to Chronic Benefits</b>	Access Option: Benefits are only available from the Access Primary Care Network, and are subject to a list of medicine, referred to as a Network entry-level formulary Impact Option: Benefits are only available from State facilities, subject to the State formulary

## Day-to-day Benefit

Provider	Access or Impact Primary Care Network
Savings	Not applicable. You can choose to add the HealthSaver <sup>+</sup>
<b>General rule applicable to Day-to-day Benefits</b>	Benefits are only available from the Access or Impact Primary Care Network, and are subject to the rules and provisions set by this network, commonly referred to as protocols. This benefit is also subject to the network's list of applicable tariff codes
Acupuncture, Homeopathy, Naturopathy, Herbology, Audiology, Occupational and Speech therapy, Chiropractors, Dieticians, Biokinetics, Orthoptists, Osteopathy, Audiometry, Chiropody, Physiotherapy and Podiatry	Limited to Prescribed Minimum Benefits at State facilities
Mental health (incl. psychiatry and psychology)	Subject to Specialist limit
Dentistry - basic (such as extractions or fillings)	Examinations, fillings and x-rays as per the list of tariff codes. One dental consultation is covered per year per beneficiary. You need to call us for pre-authorisation if you have more than 4 fillings or 4 extractions
Dentistry - specialised (such as bridges or crowns)	Not covered
External medical and surgical appliances (incl. hearing aids, wheelchairs etc.)	Not covered
General practitioners	10 visits per beneficiary. From the 11 <sup>th</sup> visit onwards, you need to obtain authorisation and a R70 co-payment applies
Out-of-network GP, casualty or after-hours visits	1 visit per beneficiary per year, subject to authorisation (you need to authorise within 72 hours of the consultation, otherwise a 30% co-payment will apply) Maximum of 2 visits per family per year, with a R100 co-payment per visit
Specialists	3 visits per beneficiary, maximum of 5 visits per family. Covered at 100% of Momentum Health Rate, subject to referral by your Access or Impact Primary Care Network provider and pre-authorisation.
Optical and optometry (excl. contact lenses and refractive eye surgery)	1 eye test and 1 pair of clear standard or bi-focal lenses with standard frame as per formulary per beneficiary every 2 years. Spectacles will only be granted if your refraction measurement is more than 0.5
Pathology - basic (such as blood sugar or cholesterol tests)	Specific list of pathology tests covered
Radiology - basic (such as X-rays)	Specific list of black and white x-rays covered
MRI and CT scans	Limited to Prescribed Minimum Benefits at State facilities
Prescribed medication	Subject to a list of medicine, referred to as a prescribed formulary
Over-the-counter medication	Not covered

— This table represents a summary of the benefits for 2018

— On the Access Option, Chronic and Day-to-day Benefits are only available from the Access Primary Care Network

— On the Impact Option, Chronic Benefits are only available from State facilities and Day-to-day Benefits are only available from the Impact Primary Care Network

— If you do not use Access and Impact Network hospitals for Major Medical Benefits, you will have a co-payment of 30% on the hospital account and Momentum Health will be responsible for 70% of the negotiated tariff

— The sub-limits specified apply per year. Should you not join in January, your sub-limits will be adjusted pro-rata (this means it will be adjusted in line with the number of months left in the year)

+ HealthSaver is a complementary product offered by Momentum

# Custom Option Overview

The Custom Option provides cover for **hospitalisation** at private hospitals. There is no overall annual limit for hospitalisation. You can choose to have access to any hospital or you can choose to receive a discount on your contribution by selecting to use a specific list of private hospitals (referred to as Associated hospitals, see page 26 for this list).

For **chronic treatment**, you can choose to have access to any GP for your chronic scripts and any pharmacy for your chronic medication. Or you can choose to receive a discount on your monthly contribution by selecting to use a list of Associated GPs for your chronic script and Medipost courier pharmacy for your chronic medication. Alternatively, you can choose to use State facilities for your chronic script, medication and treatment to obtain the maximum contribution discount.

The **Health Platform** Benefit provides cover for a range of benefits, such as preventative screening tests, certain check-ups and more.

If you need cover for other day-to-day expenses like GP visits or prescribed medicine, you can choose to make use of the **HealthSaver+**. HealthSaver+ is a complementary product offered by Momentum that lets you save for medical expenses.

There is a co-payment for Major Medical Benefits, except in the case of motor vehicle accidents, maternity confinements and emergency treatment.



Choose your <b>providers</b>		Choose your <b>family composition</b>					
Hospital	Chronic	1	2	3	4	5	6
Associated	Any	R1 885	R3 372	R2 550	R4 037	R4 702	R5 367
	Associated	R1 750	R3 106	R2 368	R3 724	R4 342	R4 960
	State	R1 366	R2 399	R1 850	R2 883	R3 367	R3 851
Any	Any	R2 249	R4 055	R3 052	R4 858	R5 661	R6 464
	Associated	R2 074	R3 694	R2 827	R4 447	R5 200	R5 953
	State	R1 743	R3 058	R2 382	R3 697	R4 336	R4 975

Maximum of 3 children charged for

## Major Medical Benefit

Benefit	Associated specialists covered in full Other specialists covered up to 100% of Momentum Health Rate Hospital accounts are covered in full at the rate agreed upon with the hospital group No overall annual limit applies
Provider	Any or Associated hospitals
Co-payment	R1 300 per authorisation, except for motor vehicle accidents, maternity confinements and emergency treatment*. An additional co-payment may apply per authorisation for specialist referral procedures - see page 22
<b>General rule applicable to Major Medical Benefits</b>	You need to phone for authorisation before making use of your Major Medical Benefits. For some conditions, like cancer, you will need to register on a Disease Management Programme. Momentum Health will pay benefits in line with the Scheme Rules and the clinical protocols that the Scheme has established for the treatment of each condition
High and intensive care	No annual limit applies
Casualty or after-hours visits	Subject to HealthSaver* if available
Renal dialysis**	No annual limit applies
Oncology***	R300 000 per beneficiary per year, thereafter a 20% co-payment applies. The Momentum Health medicine rate applies to chemotherapy and adjuvant medication
Organ transplants (recipient)	No annual limit applies
Organ transplants (donor) Only covered when recipient is a member of the Scheme	R18 600 cadaver costs R37 700 live donor costs (incl. transportation)
In-hospital dental and oral benefits Limited to maxillo-facial surgery (excluding implants), impacted wisdom teeth and general anaesthesia for children under 7	Hospital and anaesthetist accounts paid from Major Medical Benefit, subject to R1 300 co-payment per authorisation. Dental, dental specialist and maxillo-facial surgeon accounts paid from HealthSaver* if available
Maternity confinements	No annual limit applies
Neonatal intensive care	No annual limit applies
MRI and CT scans (in- and out-of-hospital)	No annual limit applies, subject to R2 150 co-payment per scan and pre-authorisation
Medical and surgical appliances in-hospital (such as support stockings, knee and back braces etc.)	R5 950 per family
Prosthesis - internal (incl. knee and hip replacements, permanent pacemakers etc.)	Intraocular lenses: R5 050 per beneficiary per event, maximum 2 events per year Other internal prostheses: R44 400 per beneficiary per event, maximum 2 events per year
Prosthesis - external (such as artificial arms or legs etc.)	R21 500 per family
Mental health - incl. psychiatry and psychology - drug and alcohol rehabilitation	R33 900 per beneficiary, 21-day sub-limit applies to drug and alcohol rehabilitation, subject to treatment at preferred provider
Take-home medicine	7 days' supply
Medical rehabilitation, private nursing, Hospice and step-down facilities	R46 400 per family
Immune deficiency related to HIV Anti-retroviral treatment HIV related admissions	At your chosen network provider No annual limit applies R65 900 per family

## Chronic Benefit

Provider	Any, Associated or State
Cover	26 conditions, according to Chronic Disease List in Prescribed Minimum Benefits.
<b>General rule applicable to Chronic Benefits</b>	Benefits are subject to registration on the Chronic Management Programme and approval by the Scheme

## Day-to-day Benefit

Provider	Any
Savings	Not applicable. You can choose to add the HealthSaver*
<b>General rule applicable to Day-to-day Benefits</b>	Benefits are subject to HealthSaver* if available (see Momentum Complementary Product brochure for more details on HealthSaver)
Acupuncture, Homeopathy, Naturopathy, Herbology, Audiology, Occupational and Speech therapy, Chiropractors, Dieticians, Biokinetics, Orthoptists, Osteopathy, Audiometry, Chiropody, Physiotherapy and Podiatry	Subject to HealthSaver* if available
Mental health (incl. psychiatry and psychology)	Subject to HealthSaver* if available
Dentistry - basic (such as extractions or fillings)	Subject to HealthSaver* if available
Dentistry - specialised (such as bridges or crowns)	Subject to HealthSaver* if available
External medical and surgical appliances (incl. hearing aids, glucometers, blood pressure monitors, wheelchairs etc.)	Subject to HealthSaver* if available
General practitioners	Subject to HealthSaver* if available
Specialists	Subject to HealthSaver* if available
Optical and optometry (incl. contact lenses and refractive eye surgery)	Subject to HealthSaver* if available
Pathology (such as blood sugar or cholesterol tests)	Subject to HealthSaver* if available
Radiology (such as X-rays)	Subject to HealthSaver* if available
MRI and CT scans	Covered from Major Medical Benefit, subject to R2 150 co-payment per scan and pre-authorisation
Prescribed medication	Subject to HealthSaver* if available
Over-the-counter medication	Subject to HealthSaver* if available

— This table represents a summary of the benefits for 2018

— If you choose Associated hospitals as your preferred provider for Major Medical Benefits, and do not use this provider, you will have a co-payment of 30% on the hospital account. Momentum Health will be responsible for 70% of the negotiated tariff

— The sub-limits specified apply per year. Should you not join in January, your sub-limits will be adjusted pro-rata (this means it will be adjusted in line with the number of months left in the year)

\* See glossary on page 28 for the definition of emergency treatment

\*\* Beneficiaries who have selected State as their chronic provider need to make use of State facilities for renal dialysis

\*\*\* Newly diagnosed beneficiaries who have selected State as their chronic provider must obtain their oncology treatment from an oncologist authorised by the Scheme

+ HealthSaver is a complementary product offered by Momentum

# Incentive Option Overview

The Incentive Option provides cover for hospitalisation at private hospitals. There is no overall annual limit for **hospitalisation**. You can choose to have access to any hospital, or you can choose to receive a discount on your contribution by selecting to use a specific list of private hospitals (referred to as Associated hospitals, see page 26 for this list).

For **chronic treatment**, you can choose to have access to any GP for your chronic scripts and any pharmacy for your chronic medication. Or you can choose to receive a further discount on your monthly contribution by selecting to use a list of Associated GPs for your chronic script and Medipost courier pharmacy for your chronic medication. Alternatively, you can choose to use State facilities for your chronic script and medication to obtain the maximum contribution discount.

The **Health Platform Benefit** provides cover for a range of benefits, such as preventative screening tests, certain check-ups and more.

10% of your contribution goes to a dedicated Personal Medical **Savings** Account to cover your other day-to-day expenses.

If you need more day-to-day cover, you can choose to make use of the **HealthSaver+**. HealthSaver+ is a complementary product offered by Momentum that lets you save for medical expenses.



Choose your <b>providers</b>		Choose your <b>family composition</b>					
Hospital	Chronic						
Associated	Any	R2 737	R4 939	R3 759	R5 961	R6 983	R8 005
	Associated	R2 514	R4 514	R3 470	R5 470	R6 426	R7 382
	State	R1 834	R3 273	R2 545	R3 984	R4 695	R5 406
Any	Any	R3 052	R5 532	R4 241	R6 721	R7 910	R9 099
	Associated	R2 737	R4 933	R3 813	R6 009	R7 085	R8 161
	State	R2 249	R4 021	R3 138	R4 910	R5 799	R6 688

Maximum of 3 children charged for

## Major Medical Benefit

Benefit	Associated specialists covered in full Other specialists covered up to 200% of Momentum Health Rate Hospital accounts are covered in full at the rate agreed upon with the hospital group No overall annual limit applies
Provider	Any or Associated hospitals
Co-payment	Co-payments may apply for specialist referral procedures - see page 22
<b>General rule applicable to Major Medical Benefits</b>	You need to phone for authorisation before making use of your Major Medical Benefits. For some conditions, like cancer, you will need to register on a Disease Management Programme. Momentum Health will pay benefits in line with the Scheme Rules and the clinical protocols that the Scheme has established for the treatment of each condition
High and intensive care	No annual limit applies
Casualty or after-hours visits	Subject to Savings
Renal dialysis*	No annual limit applies
Oncology**	R400 000 per beneficiary per year, thereafter a 20% co-payment applies. The Momentum Health medicine rate applies to chemotherapy and adjuvant medication
Organ transplants (recipient)	No annual limit applies
Organ transplants (donor) Only covered when recipient is a member of the Scheme	R18 600 cadaver costs R37 700 live donor costs (incl. transportation)
In-hospital dental and oral benefits Limited to maxillo-facial surgery (excluding implants), impacted wisdom teeth and general anaesthesia for children under 7	Hospital and anaesthetist accounts paid from Major Medical Benefit, subject to R1 650 co-payment per authorisation. Dental, dental specialist and maxillo-facial surgeon accounts paid from Savings, if available
Maternity confinements	No annual limit applies
Neonatal intensive care	No annual limit applies
MRI and CT scans (in- and out-of-hospital)	No annual limit applies, subject to R2 150 co-payment per scan and pre-authorisation
Medical and surgical appliances in-hospital (such as support stockings, knee and back braces etc.)	R5 950 per family
Prosthesis – internal (incl. knee and hip replacements, permanent pacemakers etc.)	Cochlear implants: R152 400 per beneficiary, maximum 1 event per year Intraocular lenses: R6 500 per beneficiary per event, maximum 2 events per year Other internal prostheses: R46 400 per beneficiary per event, maximum 2 events per year
Prosthesis - external (such as artificial arms or legs etc.)	R21 500 per family
Mental health - incl. psychiatry and psychology - drug and alcohol rehabilitation	R34 400 per beneficiary, 21-day sub-limit applies to drug and alcohol rehabilitation, subject to treatment at preferred provider
Take-home medicine	7 days' supply
Trauma benefit	Covers certain day-to-day claims that form part of the recovery following specific traumatic events, such as near drowning, poisoning, severe allergic reaction and external and internal head injuries. Appropriate treatment related to the event is covered as per authorisation
Medical rehabilitation, private nursing, Hospice and step-down facilities	R46 400 per family
Immune deficiency related to HIV Anti-retroviral treatment HIV related admissions	At your chosen network provider No annual limit applies R65 900 per family

## Chronic Benefit

Provider	Any, Associated or State
Cover	Cover for 32 conditions: 26 conditions, according to Chronic Disease List in Prescribed Minimum Benefits - no annual limit applies 6 additional conditions - limited to R9 300 per family per year
<b>General rule applicable to Chronic Benefits</b>	Benefits are subject to registration on the Chronic Management Programme and approval by the Scheme

## Day-to-day Benefit

Provider	Any
Savings	Fixed at 10% of total contribution
<b>General rule applicable to Day-to-day Benefits</b>	Benefits are subject to available Savings, claims are paid at cost with no sub-limits
Acupuncture, Homeopathy, Naturopathy, Herbology, Audiology, Occupational and Speech therapy, Chiropractors, Dieticians, Biokinetics, Orthoptists, Osteopathy, Audiometry, Chiropody, Physiotherapy and Podiatry	Subject to Savings, if available
Mental health (incl. psychiatry and psychology)	Subject to Savings, if available
Dentistry - basic (such as extractions or fillings)	Subject to Savings, if available
Dentistry - specialised (such as bridges or crowns)	Subject to Savings, if available
External medical and surgical appliances (incl. hearing aids, glucometers, blood pressure monitors, wheelchairs etc.)	Subject to Savings, if available
General practitioners	Subject to Savings, if available
Specialists	Subject to Savings, if available
Optical and optometry (incl. contact lenses and refractive eye surgery)	Subject to Savings, if available
Pathology (such as blood sugar or cholesterol tests)	Subject to Savings, if available
Radiology (such as X-rays)	Subject to Savings, if available
MRI and CT scans	Covered from Major Medical Benefit, subject to R2 150 co-payment per scan and pre-authorisation
Prescribed medication	Subject to Savings, if available
Over-the-counter medication	Subject to Savings, if available

— This table represents a summary of the benefits for 2018

— If you choose Associated hospitals as your preferred provider for Major Medical Benefits, and do not use this provider, you will have a co-payment of 30% on the hospital account. Momentum Health will be responsible for 70% of the negotiated tariff

— The sub-limits specified apply per year. Should you not join in January, your sub-limits will be adjusted pro-rata (this means it will be adjusted in line with the number of months left in the year)

\* Beneficiaries who have selected State as their chronic provider need to make use of State facilities for renal dialysis

\*\* Newly diagnosed beneficiaries who have selected State as their chronic provider must obtain their oncology treatment from an oncologist authorised by the Scheme

## Extender Option Overview

The Extender Option provides cover for hospitalisation at private hospitals. There is no overall annual limit for **hospitalisation**. You can choose to have access to any hospital, or you can choose to receive a discount on your contribution by selecting to use a specific list of private hospitals (referred to as Associated hospitals, see page 26 for this list). For **chronic treatment**, you can choose to have access to any GP for your chronic scripts and any pharmacy for your chronic medication. Or you can choose to receive a further discount on your monthly contribution by selecting to use a list of Associated GPs for your chronic script and Medipost courier pharmacy for your chronic medication. Alternatively, you can choose to use State facilities for your chronic script and medication to obtain the maximum contribution discount.



25% of your contribution is available in a Personal Medical **Savings** Account to cover day-to-day expenses. If this component is not enough to cover your annual day-to-day expenses, you will also have access to the **Extended Cover** benefit which provides further cover for day-to-day benefits once your day-to-day claims have reached the Threshold (a pre-determined amount that is based on your family size).

You can choose to make use of the **HealthSaver+** for additional day-to-day expenses and to pay for out-of-pocket expenses before your Extended Cover is activated. HealthSaver+ is a complementary product offered by Momentum that lets you save for medical expenses.

The **Health Platform** Benefit provides cover for a range of benefits, such as preventative screening tests, certain check-ups and more.

Choose your <b>providers</b>		Choose your <b>family composition</b>					
<b>Hospital</b>	<b>Chronic</b>						
Associated	Any	R5 113	R9 194	R6 648	R10 729	R12 264	R13 799
	Associated	R4 715	R8 476	R6 130	R9 891	R11 306	R12 721
	State	R4 129	R7 233	R5 368	R8 472	R9 711	R10 950
Any	Any	R5 816	R10 456	R7 561	R12 201	R13 946	R15 691
	Associated	R5 232	R9 409	R6 801	R10 978	R12 547	R14 116
	State	R4 723	R8 566	R6 139	R9 982	R11 398	R12 814

Maximum of 3 children charged for



## Major Medical Benefit

Benefit	Associated specialists covered in full Other specialists covered up to 200% of Momentum Health Rate Hospital accounts are covered in full at the rate agreed upon with the hospital group No overall annual limit applies
Provider	Any or Associated hospitals
Co-payment	Co-payments may apply for specialist referral procedures - see page 22
<b>General rule applicable to Major Medical Benefits</b>	You need to phone for authorisation before making use of your Major Medical Benefits. For some conditions, like cancer, you will need to register on a Disease Management Programme. Momentum Health will pay benefits in line with the Scheme Rules and the clinical protocols that the Scheme has established for the treatment of each condition
High and intensive care	No annual limit applies
Casualty or after-hours visits	Subject to Day-to-day Benefit
Renal dialysis*	No annual limit applies
Oncology**	R500 000 per beneficiary per year, thereafter a 20% co-payment applies. The Momentum Health medicine rate applies to chemotherapy and adjuvant medication
Organ transplants (recipient)	No annual limit applies
Organ transplants (donor) Only covered when recipient is a member of the Scheme	R18 600 cadaver costs R37 700 live donor costs (incl. transportation)
In-hospital dental and oral benefits Limited to maxillo-facial surgery (excluding implants), impacted wisdom teeth and general anaesthesia for children under 7	Hospital and anaesthetist accounts paid from Major Medical Benefit, subject to R1 650 co-payment per authorisation. Dental, dental specialist and maxillo-facial surgeon accounts paid from Day-to-day Benefit and accumulate towards limit
Maternity confinements	No annual limit applies
MRI and CT scans (in- and out-of-hospital)	No annual limit applies, subject to R2 150 co-payment per scan and pre-authorisation
Medical and surgical appliances in-hospital (such as support stockings, knee and back braces etc.)	R6 300 per family
Prosthesis - internal (incl. knee and hip replacements, permanent pacemakers etc.)	Cochlear implants: R166 000 per beneficiary, maximum 1 event per year Intraocular lenses: R6 500 per beneficiary per event, maximum 2 events per year Other internal prostheses: R62 800 per beneficiary per event, maximum 2 events per year
Prosthesis - external (such as artificial arms or legs etc.)	R21 800 per family
Mental health - incl. psychiatry and psychology - drug and alcohol rehabilitation	R34 400 per beneficiary, 21-day sub-limit applies to drug and alcohol rehabilitation, subject to treatment at preferred provider
Take-home medicine	7 days' supply
Trauma benefit	Covers certain day-to-day claims that form part of the recovery following specific traumatic events, such as near drowning, poisoning, severe allergic reaction and external and internal head injuries. Appropriate treatment related to the event is covered as per authorisation
Medical rehabilitation, private nursing, Hospice and step-down facilities	R47 900 per family
Immune deficiency related to HIV Anti-retroviral treatment HIV related admissions	At your chosen network provider No annual limit applies R65 900 per family

## Chronic Benefit

Provider	Any, Associated or State
Cover	Cover for 62 conditions: 26 conditions, according to Chronic Disease List in Prescribed Minimum Benefits - no annual limit applies 36 additional conditions - limited to R9 300 per family per year
<b>General rule applicable to Chronic Benefits</b>	Benefits are subject to registration on the Chronic Management Programme and approval by the Scheme

## Day-to-day Benefit

Provider	Any or Associated (Members who have chosen Associated as their chronic provider must use an Associated GP for GP consultations)
Savings	Fixed at 25% of total contribution
<b>General rule applicable to Day-to-day Benefits</b> Annual Threshold levels: Member: R18 700 Per adult dependant: R16 200 Per child: R5 600 (max. 3 children)	25% of your contribution is available to cover day-to-day expenses. This is known as Savings. If this component is not enough to cover your annual day-to-day expenses, you will have a self-funding gap to pay out of your own pocket, up to the Threshold determined by your family size. Once you have reached this Threshold, your claims will be paid by the Scheme from Extended Cover. Claims add up to the Threshold and are paid from Extended Cover at the Momentum Health Rate subject to the sub-limits specified below. The sub-limits apply before and after the Threshold is reached
Acupuncture, Homeopathy, Naturopathy, Herbology, Audiology, Occupational and Speech therapy, Chiropractors, Dieticians, Biokinetics, Orthoptists, Osteopathy, Audiometry, Chiropody, Physiotherapy and Podiatry	Unlimited within the provisions of the General Rule mentioned above
Mental health (incl. psychiatry and psychology)	R18 000 per family
Dentistry - basic (such as extractions or fillings)	Unlimited within the provisions of the General Rule mentioned above
Dentistry - specialised (such as bridges or crowns)	R12 200 per beneficiary, R31 900 per family Both in-and out-of-hospital dental specialist accounts accumulate towards the limit
External medical and surgical appliances (incl. hearing aids, glucometers, blood pressure monitors, wheelchairs etc.)	R22 200 per family R6 700 sub-limit per family for hearing aids
General practitioners	Depending on the chronic provider selected Any or State provider: Unlimited within the provisions of the General Rule mentioned above Associated providers: 100% of Momentum Health Rate for Associated GPs 70% of Momentum Health Rate for non-Associated GPs
Specialists	Unlimited within the provisions of the General Rule mentioned above
Optical and optometry (incl. contact lenses and refractive eye surgery)	Overall limit of R3 750 per beneficiary Frame sub-limit of R2 050
Pathology (such as blood sugar or cholesterol tests)	Unlimited within the provisions of the General Rule mentioned above
Radiology (such as X-rays)	Unlimited within the provisions of the General Rule mentioned above
MRI and CT scans	Covered from Major Medical Benefit, subject to R2 150 co-payment per scan and pre-authorisation
Prescribed medication	R15 900 per beneficiary, R30 000 per family
Over-the-counter medication (including prescribed vitamins and homeopathic medicine)	Subject to Savings (does not accumulate to Threshold)

— This table represents a summary of the benefits for 2018

— If you choose Associated hospitals as your preferred provider for Major Medical Benefits, and do not use this provider, you will have a co-payment of 30% on the hospital account. Momentum Health will be responsible for 70% of the negotiated tariff

— The sub-limits specified apply per year. Should you not join in January, your sub-limits will be adjusted pro-rata (this means it will be adjusted in line with the number of months left in the year)

\* Beneficiaries who have selected State as their chronic provider need to make use of State facilities for renal dialysis

\*\* Newly diagnosed beneficiaries who have selected State as their chronic provider must obtain their oncology treatment from an oncologist authorised by the Scheme

# Summit Option Overview

The Summit Option provides cover for **hospitalisation** at any hospital. There is no overall annual limit for hospitalisation. Extensive **day-to-day** and **chronic benefits** are available from any provider.

Should you wish, you can choose to use the **HealthSaver+** to increase your day-to-day cover even further. HealthSaver+ is a complementary product offered by Momentum that lets you save for medical expenses.

The **Health Platform** Benefit provides cover for a range of benefits, such as preventative screening tests, certain check-ups and more.



Your providers			Choose your family composition					
<b>Hospital</b>	<b>Chronic</b>	<b>Day-to-day</b>						
Any	Freedom-of-choice	Freedom-of-choice	R8 342	R15 014	R10 258	R16 930	R18 846	R20 762

Maximum of 3 children charged for



## Major Medical Benefit

Benefit	Associated specialists covered in full Other specialists covered up to 300% of Momentum Health Rate Hospital accounts are covered in full at the rate agreed upon with the hospital group No overall annual limit applies
Provider	Any hospital
<b>General rule applicable to Major Medical Benefits</b>	You need to phone for authorisation before making use of your Major Medical Benefits. For some conditions, like cancer, you will need to register on a Disease Management Programme. Momentum Health will pay benefits in line with the Scheme Rules and the clinical protocols that the Scheme has established for the treatment of each condition
High and intensive care	No annual limit applies
Casualty or after-hours visits	Subject to Day-to-day Benefit
Renal dialysis	No annual limit applies
Oncology	No annual limit applies
Organ transplants (recipient)	No annual limit applies
Organ transplants (donor) Only covered when recipient is a member of the Scheme	R18 600 cadaver costs R37 700 live donor costs (incl. transportation)
In-hospital dental and oral benefits Limited to maxillo-facial surgery (excluding implants), impacted wisdom teeth and general anaesthesia for children under 7	Hospital and anaesthetist accounts paid from Major Medical Benefit. Dental, dental specialist and maxillo-facial surgeon accounts paid from Day-to-day Benefit and accumulate towards overall day-to-day limit of R23 500 per beneficiary
Maternity confinements	No annual limit applies
Neonatal intensive care	No annual limit applies
MRI and CT scans (in- and out-of-hospital)	No annual limit applies, subject to R2 150 co-payment per scan and pre-authorisation
Medical and surgical appliances in-hospital (such as, support stockings, knee and back braces etc.)	R6 300 per family
Prosthesis – internal (incl. knee and hip replacements, permanent pacemakers etc.)	Cochlear implants: R166 000 per beneficiary, maximum 1 event per year Intraocular lenses: R6 500 per beneficiary per event, maximum 2 events per year Other internal prostheses: R62 800 per beneficiary per event, maximum 2 events per year
Prosthesis – external (such as artificial arms or legs etc.)	R21 800 per family
Mental health - incl. psychiatry and psychology - drug and alcohol rehabilitation	R34 400 per beneficiary, 21-day sub-limit applies to drug and alcohol rehabilitation, subject to treatment at preferred provider
Take-home medicine	7 days' supply
Trauma benefit	Covers certain day-to-day claims that form part of the recovery following specific traumatic events, such as near drowning, poisoning, severe allergic reaction and external and internal head injuries. Appropriate treatment related to the event is covered as per authorisation
Medical rehabilitation, private nursing, Hospice and step-down facilities	R47 900 per family
Immune deficiency related to HIV Anti-retroviral treatment HIV related admissions	At any provider No annual limit applies R65 900 per family

## Chronic Benefit

Provider	You can use any provider of your choice
Cover	Cover for 62 conditions 26 conditions according to Chronic Disease List in Prescribed Minimum Benefits - no annual limit applies 36 additional conditions - accumulate to overall day-to-day limit of R23 500 per beneficiary. This is a combined limit incorporating both day-to-day cover and cover for the 36 additional conditions
<b>General rule applicable to Chronic Benefits</b>	Benefits are subject to registration on the Chronic Management Programme and approval by the Scheme

## Day-to-day Benefit

Provider	You can use any provider of your choice
Savings	Not applicable. You can add the HealthSaver*
<b>General rule applicable to Day-to-day Benefits</b>	Benefits are paid at 100% of the Momentum Health Rate, subject to the annual sub-limits specified below and an overall day-to-day limit of R23 500 per beneficiary
Acupuncture, Homeopathy, Naturopathy, Herbology, Audiology, Occupational and Speech therapy, Chiropractors, Dieticians, Biokinetics, Orthoptists, Osteopathy, Audiometry, Chiropody, Physiotherapy and Podiatry	R6 700 per family. Subject to overall annual day-to-day limit of R23 500 per beneficiary
Mental health (incl. psychiatry and psychology)	R20 200 per family. Subject to overall annual day-to-day limit of R23 500 per beneficiary
Dentistry – basic (such as extractions or fillings)	Subject to overall annual day-to-day limit of R23 500 per beneficiary
Dentistry – specialised (such as bridges or crowns)	R14 200 per beneficiary, R33 900 per family. Subject to overall annual day-to-day limit of R23 500 per beneficiary. Both in- and out-of-hospital dental specialist accounts accumulate towards the limit
External medical and surgical appliances (incl. hearing aids, glucometers, blood pressure monitors, wheelchairs etc.)	R27 300 per family, R15 900 sub-limit for hearing aids. Subject to overall annual day-to-day limit of R23 500 per beneficiary
General practitioners	Subject to overall annual day-to-day limit of R23 500 per beneficiary
Specialists	Subject to overall annual day-to-day limit of R23 500 per beneficiary
Optical and optometry (incl. contact lenses and refractive eye surgery)	Overall limit of R4 100 per beneficiary. Frame sub-limit of R2 100 Subject to overall annual day-to-day limit of R23 500 per beneficiary
Pathology (such as blood sugar or cholesterol tests)	Subject to overall annual day-to-day limit of R23 500 per beneficiary
Radiology (such as X-rays)	Subject to overall annual day-to-day limit of R23 500 per beneficiary
MRI and CT scans	Covered from Major Medical Benefit, subject to R2 150 co-payment per scan and pre-authorisation
Prescribed medication	R18 400 per beneficiary, R30 100 per family. Subject to overall annual day-to-day limit of R23 500 per beneficiary
Over-the-counter medication (including prescribed vitamins and homeopathic medicine)	Not covered

— This table represents a summary of the benefits for 2018

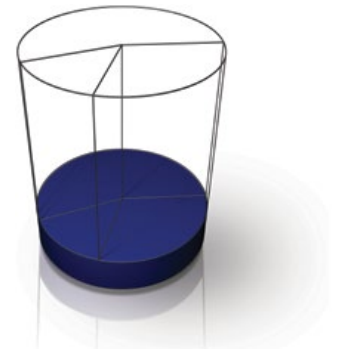
— The sub-limits specified apply per year. Should you not join in January, your sub-limits will be adjusted pro-rata (this means it will be adjusted in line with the number of months left in the year)

+ HealthSaver is a complementary product offered by Momentum

# Health Platform Benefit

Health Platform Benefits are paid by the Scheme up to a maximum Rand amount per benefit, **provided you notify us before using the benefit.** You can pre-notify by contacting the member call centre on 0860 11 78 59, logging on to [www.momentumhealth.co.za](http://www.momentumhealth.co.za) or via the Momentum app.

On the Ingwe, Access and Impact Options, Health Platform Benefits are only available from your chosen Primary Care Network provider.



Benefit	Who?	How often?						
			Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
<b>Early detection tests</b>								
<b>Health Assessment</b> (pre-notification not required): Blood pressure test, Cholesterol and Blood sugar (finger prick tests), height, weight and waist circumference	All principal members and adult beneficiaries	Once a year	●	●	●	●	●	●
Dental consultation (incl. sterile tray and gloves)	All beneficiaries	Once a year	●	●	●	●	●	●
Pap smear (pathologist)	Women 15 and older	Once a year	●	●	●	●	●	●
Pap smear consultation (GP)	Women 15 and older	Once a year	●	●				
Pap smear consultation (GP* or gynaecologist)	Women 15 and older	Once a year			●	●	●	●
Mammogram	Women 38 and older	Once every 2 years			●	●	●	●
DEXA bone density scan (radiologist, GP* or specialist)	Beneficiaries 50 and older	Once every 3 years			●	●	●	●
General physical examination (GP* consultation)	Beneficiaries 21 to 29	Once every 5 years	●	●	●	●	●	●
	Beneficiaries 30 to 59	Once every 3 years	●	●	●	●	●	●
	Beneficiaries 60 to 69	Once every 2 years	●	●	●	●	●	●
	Beneficiaries 70 and older	Once a year	●	●	●	●	●	●
Prostate specific antigen (pathologist)	Men 40 to 49	Once every 5 years	●	●	●	●	●	●
	Men 50 to 59	Once every 3 years	●	●	●	●	●	●
	Men 60 to 69	Once every 2 years	●	●	●	●	●	●
	Men 70 and older	Once a year	●	●	●	●	●	●
Cholesterol test (pathologist)**	Principal members and adult beneficiaries	Once a year	●	●	●	●	●	●
Blood sugar test (pathologist)***	Principal members and adult beneficiaries	Once a year	●	●	●	●	●	●
Glaucoma test	Beneficiaries 40 to 49	Once every 2 years			●	●	●	●
	Beneficiaries 50 and older	Once a year			●	●	●	●
HIV test (pathologist)	Beneficiaries 15 and older	Once every 5 years	●	●	●	●	●	●
<b>Preventative care</b>								
Baby immunisations (On Ingwe, Access and Impact, available at nearest State baby clinic)	Children up to age 6	As required by the Department of Health	●	●	●	●	●	●
Flu vaccines	Children between 6 months and 5 years	Once a year	●	●	●	●	●	●
	High-risk beneficiaries under 18		●	●	●	●	●	●
	Beneficiaries 65 and older		●	●	●	●	●	●
	High-risk beneficiaries		●	●	●	●	●	●
Tetanus diphtheria injection	All beneficiaries	As needed	●	●	●	●	●	●
Pneumococcal vaccine	Beneficiaries 60 and older	Once a year			●	●	●	●
	High-risk beneficiaries				●	●	●	●



Benefit	Who?	How often?	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit	
<b>Maternity programme (subject to registration on the Maternity Management Programme between 8 and 20 weeks of pregnancy)</b>									
Antenatal visits (Midwives, GP* or gynaecologist)	Women registered on the programme	4 visits	●	●					
	Women registered on the programme	12 visits			●	●	●	●	
Online antenatal and postnatal classes	Women registered on the programme	18-month subscription				●	●	●	
Online video consultation with lactation specialist	Women registered on the programme	Initial consultation				●			
		Initial consultation plus follow up					●	●	
Urine tests (dipstick)	Women registered on the programme	Included in antenatal visits	●	●	●	●	●	●	
Pathology tests	Women registered on the programme	1 test				●	●	●	
Full blood count, blood group, rhesus, platelet count, rubella antibody, creatinine, glucose strip test, antiglobin test						●	●	●	
Haemaglobin estimation			2 tests				●	●	●
Urinalysis			13 tests				●	●	●
Urine tests (microscopic exams, antibiotic susceptibility and culture)		As indicated				●	●	●	
Scans	Women registered on the programme	2 growth scans	●	●					
	Women registered on the programme	2 pregnancy scans			●	●	●	●	
Paediatrician visits	Babies up to 12 months registered on the programme	2 visits in baby's first year			●	●	●	●	
<b>Disease management programmes</b>									
Diabetes, Hypertension, HIV/Aids, Oncology, Drug and alcohol rehabilitation, Chronic renal failure, Organ transplants, Cholesterol	All beneficiaries registered on the appropriate programme	As needed	●	●	●	●	●	●	
<b>Health line</b>									
24-hour emergency health advice	All beneficiaries	As needed	●	●	●	●	●	●	
<b>Emergency evacuation</b>									
Emergency evacuation in South Africa by Netcare 911	All beneficiaries	In an emergency	●	●	●	●	●	●	
International evacuation by ISOS	All beneficiaries	In an emergency		●	●	●	●	●	
<b>International emergency cover by ISOS</b>									
Ingwe: Not covered Access and Impact: R3.38 million Custom: R7.66 million Incentive: R8 million Extender: R8.22 million Summit: R9.01 million	This benefit includes R15 500 for emergency optometry, R15 500 for emergency dentistry and R765 000 terrorism cover, on all options, except Ingwe. A R1 550 co-payment applies per out-patient claim	Per beneficiary per 90-day journey	In an emergency						
				●	●	●	●	●	

**Please note**

- \* On the Custom, Incentive and Extender Options, if you choose Associated as your chronic provider, a 30% co-payment will apply if you do not use an Associated GP for the GP consultations
- \*\* The cholesterol test is covered if Health Assessment results indicate a total cholesterol of 6 mmol/L and above
- \*\*\* The blood sugar test is covered if Health Assessment results indicate blood sugar levels are 11 mmol/L and above



# Specialised Procedures/Treatment

The following list is a guideline of the procedures/treatment covered on the various benefit options and paid from the Major Medical Benefit, irrespective of whether the procedure/treatment is performed in- or out-of-hospital.

Pre-authorisation is required regardless of where the procedure/treatment is performed. It is important to note that this is not the complete list of all procedures/treatment covered by the Scheme. Should you need clarity on whether a procedure/treatment is covered, please contact pre-authorisation to confirm.

<b>Cardiovascular</b>	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
24-hour halter ECG			●	●	●	●
Blood transfusions			●	●	●	●
Carotid angiograms			●	●	●	●
Coronary angiogram			●	●	●	●
Coronary angioplasty			●	●	●	●
Plasmapheresis			●	●	●	●
<b>ENT</b>	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
Antroscopies			●	●	●	●
Direct laryngoscopy			●	●	●	●
Grommets	●	●	●	●	●	●
Myringotomy	●	●	●	●	●	●
Nasal cautery	●	●	●	●	●	●
Nasal scans and surgery			●	●	●	●
Functional nasal and sinus surgery			●	●	●	●
Tonsillectomy	●	●	●	●	●	●
<b>General surgery</b>	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
Biopsy of breast lump	●	●	●	●	●	●
Drainage of subcutaneous abscess	●	●	●	●	●	●
Removal of extensive skin lesions	●	●	●	●	●	●
Laparoscopy			●	●	●	●
Lymph node biopsy	●	●	●	●	●	●
Nail surgery			●	●	●	●
Open hernia repairs	●	●	●	●	●	●
Superficial foreign body removal	●	●	●	●	●	●
<b>Gastro-Intestinal</b>	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
Colonoscopy			●	●	●	●
ERCP			●	●	●	●
Gastroscopies			●	●	●	●
Oesophagoscopy			●	●	●	●
Sigmoidoscopy			●	●	●	●
<b>Gynaecology</b>	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
Cervical laser ablation			●	●	●	●
Colposcopy	●	●	●	●	●	●
Cone biopsy	●	●	●	●	●	●
Dilatation and curettage	●	●	●	●	●	●
Hysteroscopy			●	●	●	●
Incision and drainage of Bartholin's cyst	●	●	●	●	●	●
Marsupialisation of Bartholin's cyst	●	●	●	●	●	●
Tubal ligation	●	●	●	●	●	●
<b>Neurology</b>	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
48-hour halter EEG			●	●	●	●
Electro-convulsive therapy			●	●	●	●
Hyperbaric oxygen treatment for decompression sickness			●	●	●	●
Myelogram			●	●	●	●
<b>Obstetrics</b>	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
Amniocentesis			●	●	●	●
Childbirth in non-hospital	●	●	●	●	●	●
<b>Oncology</b>	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
Chemotherapy (On Ingwe, Access and Impact Options: limited to Prescribed Minimum Benefits at State facilities)	●	●	●	●	●	●
Hyperbaric oxygen for radiation necrosis			●	●	●	●
Radiotherapy (On Ingwe, Access and Impact Options: limited to Prescribed Minimum Benefits at State facilities)	●	●	●	●	●	●

Ophthalmology	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
Cataract removal			●	●	●	●
Meibomian cyst excision	●	●	●	●	●	●
Pterygium removal			●	●	●	●
Trabeculectomy			●	●	●	●
Orthopaedic	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
Arthroscopy			●	●	●	●
Bunionectomy			●	●	●	●
Carpal tunnel release	●	●	●	●	●	●
Ganglion surgery	●	●	●	●	●	●
Renal	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
Dialysis (On Ingwe, Access and Impact Options: limited to Prescribed Minimum Benefits at State facilities)	●	●	●	●	●	●
Respiratory	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
Bronchography			●	●	●	●
Bronchoscopy			●	●	●	●
Urology	Ingwe	Access & Impact	Custom	Incentive	Extender	Summit
Cystoscopy			●	●	●	●
Prostate biopsy	●	●	●	●	●	●
Vasectomy	●	●	●	●	●	●

**Please note**

- The costs of anaesthetists for gastroscopies and colonoscopies are covered up to R450 on Custom, up to R900 on Incentive and Extender, and up to R1 100 on Summit (subject to pre-authorization). For all other procedures, the cost of anaesthetists, if any, are covered if clinically appropriate
- The Specialised Procedures/Treatment listed attract a co-payment of R1 300 per authorisation on the Custom Option. This co-payment may vary for some of the procedures, as per the table on page 22
- Some of the Specialised Procedures/Treatment listed could attract a co-payment on the Incentive and Extender Options, as illustrated on page 22



# Specialist Referral Procedure Co-payments

## Custom Option

Procedure/treatment	If performed out-of-hospital	If performed in-hospital
Arthroscopies, Back and neck surgery, Carpal tunnel release, Functional nasal and sinus procedures, Joint replacements, Laparoscopies	Can only be performed in-hospital	Paid by Scheme Custom Option standard co-payment of R1 300* per authorisation applies
Gastrosopies, Nail surgery, Cystoscopies, Colonoscopies, Sigmoidoscopies, Removing of extensive skin lesions	Paid by Scheme Custom Option standard co-payment reduces to R550* per authorisation	
Conservative back and neck treatment, Treatment of diseases of the conjunctiva, Treatment of headache, Removing of minor skin lesions, Treatment of adult influenza, Treatment of adult respiratory tract infections	Paid from HealthSaver* if available (No co-payment applies)	

\* An additional R750 co-payment will apply if you do not obtain an appropriate GP referral (i.e. Any GP for members who choose Any or State chronic provider, or Associated GP for members who choose Associated chronic provider)

+ HealthSaver is a complementary product offered by Momentum

## Incentive and Extender Options

Procedure/treatment	If performed out-of-hospital	If performed in-hospital
Arthroscopies, Back and neck surgery, Carpal tunnel release, Functional nasal and sinus procedures, Joint replacements, Laparoscopies	Can only be performed in-hospital	Paid by Scheme R1 300* co-payment per authorisation applies
Gastrosopies, Nail surgery, Cystoscopies, Colonoscopies, Sigmoidoscopies, Removing of extensive skin lesions	Paid by Scheme R0* co-payment	
Conservative back and neck treatment, Treatment of diseases of the conjunctiva, Treatment of headache, Removing of minor skin lesions, Treatment of adult influenza, Treatment of adult respiratory tract infections	Paid from available day-to-day benefits (No co-payment applies)	

\* An additional R750 co-payment will apply if you do not obtain an appropriate GP referral (i.e. Any GP for members who choose Any or State chronic provider, or Associated GP for members who choose Associated chronic provider)





# Chronic Benefit

## Members on the Ingwe and Access Options

Benefits are only available from your chosen Ingwe or Access Primary Care Network providers and are subject to a Network entry-level formulary for medicine. Chronic medication is delivered via Medipost courier pharmacy.

## Members on the Impact Option

You need to choose one of the designated State facilities to get your chronic prescription and medication, subject to the State formulary and medical management (including doctor, pharmacy, blood tests, x-rays etc.).

## Members on the Custom, Incentive and Extender Options

The chronic provider you have chosen determines how you get your chronic prescription and medication, as follows:

- Any:  
You may get your chronic prescription and medication from any provider, subject to your option specific formulary. If you choose to get your medication from the preferred list of medicines, and within the generic reference price if applicable, you will not have a co-payment. If you choose to get your medication from outside the formulary (i.e. non-preferred items), a co-payment is payable. A dispensing fee co-payment may also be payable when using pharmacies not contracted to Momentum Health. Contracted pharmacies include Clicks, Dis-Chem and Medipost (view the full list on [www.momentumhealth.co.za](http://www.momentumhealth.co.za)).

- Associated:  
You must get your chronic prescription from an Associated GP and your chronic medication from Medipost, subject to an entry-level formulary.  
If you choose to:
  - get your medication from outside the formulary, a co-payment of the cost difference between the selected item and the formulary price is payable;
  - obtain your chronic prescription from a non-Associated GP, the Scheme will only pay 50% of the Momentum Health Rate for the consultation;
  - get your chronic medication from a pharmacy other than Medipost, Momentum Health will only pay 50% of the formulary price for the medicine.
- State:  
You need to choose one of the designated State facilities to get your chronic prescription and medication, subject to the State formulary and medical management (including doctor, pharmacy, blood tests, x-rays etc.).

## Members on the Summit Option

You have the freedom of choice to get your chronic prescription and medication from any provider, subject to a comprehensive formulary. If you choose to get your medication from outside the formulary, a co-payment of the cost difference between the selected item and the formulary price is payable.



## Chronic conditions covered

Chronic benefits are subject to registration and approval.

The following 26 Chronic Disease List conditions are covered on the Ingwe, Access, Impact, Custom, Incentive, Extender and Summit Options:

- Addison's disease
- Asthma
- Bipolar mood disorder
- Bronchiectasis
- Cardiac dysrhythmias
- Cardiac failure
- Cardiomyopathy
- Chronic obstructive pulmonary disease
- Chronic renal disease
- Coronary artery disease
- Crohn's disease (excl. biologicals such as Revellex\*)
- Diabetes insipidus
- Diabetes mellitus Type 1
- Diabetes mellitus Type 2
- Epilepsy
- Glaucoma
- Haemophilia
- Hyperlipidaemia
- Hypertension
- Hypothyroidism
- Multiple sclerosis (excl. biologicals such as Avonex\*, subject to protocols)
- Parkinson's disease
- Rheumatoid arthritis (excl. biologicals such as Revellex and Enbrel\*)
- Schizophrenia
- Systemic lupus erythematosus
- Ulcerative colitis

On the Incentive Option, an additional 6 conditions are covered, subject to a limit of R9 300 per family per year:

- Acne
- ADHD (Attention Deficit Hyperactivity Disorder)
- Allergic rhinitis
- Eczema
- Pemphigus
- Psoriasis

On the Extender Option, an additional 36 conditions are covered, subject to a limit of R9 300 per family per year. On the Summit Option, the additional 36 conditions covered accumulate to the overall day-to-day limit of R23 500 per beneficiary per year:

- Acne
- ADHD (Attention Deficit Hyperactivity Disorder)
- Allergic rhinitis
- Ankylosing spondylitis
- Aplastic anaemia
- Benign prostatic hypertrophy
- Cushing's disease
- Cystic fibrosis
- Dermatomyositis
- Eczema
- Gout
- Hypoparathyroidism
- Immunosuppression therapy for transplants
- Major depression
- Menopause
- Motor neuron disease
- Muscular dystrophy and other inherited myopathies
- Myasthenia gravis
- Narcolepsy
- Obsessive compulsive disorder
- Oncology - ancillary treatment
- Osteopenia
- Osteoporosis
- Other seizure disorders
- Paraplegia/Quadriplegia
- Pemphigus
- Pituitary microadenomas
- Post-traumatic stress syndrome
- Psoriasis
- Scleroderma
- Stroke
- Systemic sclerosis
- Thromboangiitis obliterans
- Thrombocytopenic purpura
- Unipolar disorder
- Valvular heart disease

\* These are examples of medication not covered

# Exclusions

## Prescribed Minimum Benefits

Notwithstanding the limitations and exclusions set out below, beneficiaries shall be entitled to the Prescribed Minimum Benefits.

## Benefits Excluded

General exclusions mentioned in this paragraph are not affected by any specific exclusions. Unless otherwise decided by the Scheme (and with the express exception of medicine or treatment approved and authorised in terms of any health management programme contracted to the Scheme), expenses incurred in connection with any of the following will not be paid by the Scheme, but may be claimed from Savings:

1. All costs incurred during waiting periods and for conditions which existed at the date of application for membership of the Scheme but were not disclosed;
2. All costs that exceed the annual maximum allowed for the particular category as set out in Annexure B of the Scheme Rules, for the benefit to which the beneficiary is entitled in terms of the Scheme Rules;
3. Injuries or conditions sustained during willful participation in a riot, civil commotion, war, invasion, terrorist activity or rebellion;
4. Professional speed contests or professional speed trials (professional defined as where the beneficiary's main form of income is derived from partaking in these contests);
5. Health care provider not registered with the recognised professional body constituted in terms of an Act of parliament;
6. Holidays for recuperative purposes, whether deemed medically necessary or not, including headache and stress relief clinics;
7. All costs for treatment if the efficacy and safety of such treatment cannot be proved;
8. All costs for operations, medicine, treatments and procedures for cosmetic purposes or for personal reasons and not directly caused by or related to illness, accident or disease. This includes the costs of treatment or surgery related to transsexual procedures;
9. Obesity;
10. Costs for attempted suicide that exceed the Prescribed Minimum Benefits limits;
11. Breast reduction and breast augmentation, gynaecomastia, otoplasty and blepharoplasty;
12. Medication not registered by the Medicine Control Council;
13. Costs for services rendered by any institution, nursing home or similar institution not registered in terms of any law (except a State facility/hospital);
14. Gum guards and gold used in dentures;
15. Frail care;
16. Travelling expenses, excluding benefits covered by Emergency rescue and International cover;
17. All costs, which in the opinion of the Medical Assessor are not medically necessary or appropriate to meet the health care needs of the patient;
18. Appointments which a beneficiary fails to keep;
19. Circumcision, unless clinically indicated, and any contraceptive measures or devices;
20. Reversal of Vasectomies or tubal ligation (sterilisation);
21. Injuries resulting from narcotism or alcohol abuse except for the Prescribed Minimum Benefits;
22. Infertility treatment that is included as Prescribed Minimum Benefits will be covered in State facilities subject to paragraph 4 of Annexure D of the Scheme Rules;
23. The cost of injury and any other related costs as a result of scuba diving to depths below 40 metres and cave diving.

# Hospitals

Members on the **Ingwe Option** can choose between **Any hospital, Ingwe Network hospitals** or **State hospitals**

Members on the **Access and Impact Options** need to use **Access and Impact Network hospitals**

Members on the **Custom, Incentive and Extender Options** can choose between **Any** or **Associated hospitals**

Eastern Cape		Ingwe	Access & Impact	Associated
Life Beacon Bay Hospital	Beacon Bay - East London	●	●	●
Isivivana Private Hospital	Humansdorp	●	●	●
East London Private Hospital	East London	●	●	●
Settlers Private Hospital	Grahamstown	●	●	●
Greenacres Hospital	Greenacres - Port Elizabeth	●	●	●
New Mercantile Hospital	Korsten - Port Elizabeth	●	●	●
Port Alfred Hospital	Port Alfred	●	●	●
Hunterscraig Psychiatric Hospital	Port Elizabeth	●	●	●
St Georges Hospital	Port Elizabeth	●	●	●
Queenstown Private Hospital	Queenstown	●	●	●
St. Dominic's Hospital	Southernwood - East London	●	●	●
St James Operating Theatres	Southernwood - East London	●	●	●
St Marks Clinic	Southernwood - East London	●	●	●
Cuyler Hospital	Uitenhage	●	●	●
St Mary's Private Hospital	Umtata	●	●	●

Free State		Ingwe	Access & Impact	Associated
Hoogland Mediclinic	Bethlehem	●	●	●
Bloemfontein Eye Hospital	Bloemfontein	●	●	●
Pasteur Hospital	Bloemfontein	●	●	●
Pelonomi Private Hospital	Bloemfontein	●	●	●
Rosepark Hospital	Fichardt - Bloemfontein	●	●	●
Welkom Mediclinic	Welkom	●	●	●
Bloemfontein Mediclinic	Bloemfontein	●	●	●
Universitas Private Hospital	Bloemfontein	●	●	●
Kroon Hospital	Kroonstad	●	●	●
Vaalpark Medical Centre	Sasolburg	●	●	●

Gauteng		Ingwe	Access & Impact	Associated
Clinton Hospital	Alberton	●	●	●
Union Hospital	Alberton	●	●	●
Femina Clinic	Arcadia - Pretoria	●	●	●
Muelmed Hospital	Arcadia - Pretoria	●	●	●
Pretoria Heart Hospital	Arcadia - Pretoria	●	●	●
Netcare Rehabilitation Hospital	Auckland Park - Johannesburg	●	●	●
Bedford Gardens Private Hospital	Bedfordview - Johannesburg	●	●	●
Glynnview Hospital	Benoni	●	●	●
The Glynnwood	Benoni	●	●	●
Linmed Hospital	Benoni	●	●	●
Rand Clinic	Berea - Johannesburg	●	●	●
Birchmed Day Clinic	Birchleigh - Johannesburg	●	●	●
Sunward Park Hospital	Boksburg	●	●	●
Dalview Clinic	Brakpan	●	●	●
Brooklyn Surgical Centre	Brooklyn - Pretoria	●	●	●
Sandton Mediclinic	Bryanston - Johannesburg	●	●	●
Unitas Hospital	Centurion	●	●	●
Mayo Clinic	Constantia Kloof - Johannesburg	●	●	●
Bougainville Private Hospital	Daspoort - Pretoria	●	●	●
Wilgers Hospital	Die Wilgers - Pretoria	●	●	●

Gauteng (continued)		Ingwe	Access & Impact	Associated
Kloof Hospital	Erasmuskloof - Pretoria	●	●	●
Faerie Glen Hospital	Faerie Glen - Pretoria	●	●	●
Flora Clinic	Florida - Johannesburg	●	●	●
Fourways Hospital	Fourways	●	●	●
Groenkloof Hospital	Groenkloof - Pretoria	●	●	●
Suikerbosrand Clinic	Heidelberg	●	●	●
Medgate Day Clinic	Helderkruijn - Johannesburg	●	●	●
Bagleyston Day Clinic	Highlands - Johannesburg	●	●	●
Park Lane Clinic	Houghton - Johannesburg	●	●	●
Akasia Clinic	Karen Park - Pretoria	●	●	●
Arwyp Medical Centre	Kempton Park	●	●	●
New Kensington Clinic	Kensington - Johannesburg	●	●	●
Bellstreet Hospital	Krugersdorp	●	●	●
Krugersdorp Private Hospital	Krugersdorp	●	●	●
Pinehaven Private Hospital	Krugersdorp	●	●	●
Protea Clinic	Krugersdorp	●	●	●
Lenmed Clinic Limited	Lenasia	●	●	●
Eugene Marais Hospital	Les Marais - Pretoria	●	●	●
Linksfeld Park Clinic	Linksfeld - Johannesburg	●	●	●
Legae Private Clinic	Mabopane - Pretoria	●	●	●
Garden City Clinic	Mayfair - Johannesburg	●	●	●
Carstenhof Clinic	Midrand	●	●	●
Waterfall City Hospital	Midrand	●	●	●
Montana Private Hospital	Montana Park - Pretoria	●	●	●
Pretoria East Private Hospital	Moreleta Park - Pretoria	●	●	●
Morningside Mediclinic	Morningside - Johannesburg	●	●	●
Jakaranda Hospital	Muckleneuck - Pretoria	●	●	●
Mulbarton Hospital	Mulbarton	●	●	●
Riverfield Lodge	Nietgedacht - Johannesburg	●	●	●
Rosewood Clinic	Orange Grove - Johannesburg	●	●	●
The Donald Gordon	Parktown - Johannesburg	●	●	●
Brenthurst Clinic	Parktown - Johannesburg	●	●	●
Milpark Hospital	Parktown - Johannesburg	●	●	●
Pretoria North Surgical Centre	Pretoria North	●	●	●
Roseacres Clinic	Primrose - Johannesburg	●	●	●
Olivedale Clinic	Randburg - Johannesburg	●	●	●
Robinson Hospital	Randfontein	●	●	●
Moot General Hospital	Rietfontein - Pretoria	●	●	●
Constantia Clinic	Roodepoort	●	●	●
Wilgeheuwel Hospital	Roodepoort	●	●	●
Rosebank Clinic	Rosebank - Johannesburg	●	●	●
Genesis Clinic	Saxonwold - Johannesburg	●	●	●
Clinix Tshepo	Soweto - Johannesburg	●	●	●
Springs Parkland Clinic	Springs	●	●	●
N17 Private Hospital	Springs	●	●	●
St Mary's Womens Clinic	Springs	●	●	●
Sunninghill Hospital	Sunninghill - Johannesburg	●	●	●
Medforum Hospital	Sunnyside - Pretoria	●	●	●
Pretoria Gynaecology Hospital	Sunnyside - Pretoria	●	●	●
Ermfuleni Mediclinic	Vanderbijlpark	●	●	●
Vereeniging Mediclinic	Vereeniging	●	●	●
Clinix Naledi	Vereeniging	●	●	●

Members on the **Ingwe Option** can choose between **Any hospital, Ingwe Network hospitals** or **State hospitals**

Members on the **Access and Impact Options** need to use **Access and Impact Network hospitals**

Members on the **Custom, Incentive and Extender Options** can choose between **Any** or **Associated hospitals**

Kwazulu-Natal		Ingwe	Access & Impact	Associated
Kingsway Hospital	Amanzimtoti		●	
Alberlito Hospital	Ballito		●	
Entabeni Hospital	Berea - Durban	●		●
Chatsmed Garden Hospital	Chatsworth - Durban	●		●
City Hospital	Durban	●		●
Durdoc Clinic	Durban	●		●
Maxwell Clinic	Durban	●		●
St Augustines Hospital	Durban		●	
Empangeni Garden Clinic	Empangeni	●	●	●
Hillcrest Private Hospital	Hillcrest - Durban			●
Hilton Private Hospital	Hilton - Pietermaritzburg			●
Howick Private Hospital	Howick			●
Isipingo Hospital	Isipingo	●		●
La Verna Hospital	Ladysmith	●		
Margate Private Hospital	Margate	●	●	●
Newcastle Private Hospital	Newcastle	●	●	●
Parklands Hospital	Overport - Durban		●	
Mount Edgecombe Hospital	Phoenix - Durban	●		●
Midlands Medical Centre	Pietermaritzburg	●		●
Pietermaritzburg Mediclinic	Pietermaritzburg			●
St Annes Hospital	Pietermaritzburg		●	
The Crompton Hospital	Pinetown	●	●	●
Hibiscus Hospital	Port Shepstone	●		●
The Bay Hospital	Richards Bay		●	●
Victoria Hospital	Tongaat			●
Umlhanga Hospital	Umlhanga		●	
Westville Hospital	Westville - Durban	●		●

### Limpopo

Limpopo		Ingwe	Access & Impact	Associated
Lephalale Mediclinic	Lephalale			●
Limpopo Mediclinic	Polokwane	●	●	●
Pholoso Private Hospital	Polokwane		●	
Tzaneen Private Hospital	Tzaneen	●	●	●
Thabazimbi Mediclinic	Thabazimbi	●	●	●

### Mpumalanga

Mpumalanga		Ingwe	Access & Impact	Associated
Barberton Mediclinic	Barberton		●	●
Bronkhorstspuit Hospital	Bronkhorstspuit	●	●	●
Cosmos Hospital	Emalaheni (Witbank)	●	●	●
Ermelo Mediclinic	Ermelo	●	●	●
Kiaat Private Hospital	Mbombela (Nelspruit)	●		●
Lowveld Hospital	Mbombela (Nelspruit)		●	●
Nelspruit Mediclinic	Mbombela (Nelspruit)	●		●
Midmed Hospital	Middelburg	●	●	●
Piet Retief Hospital	Piet Retief			●
Secunda Mediclinic	Secunda	●	●	●
Highveld Mediclinic	Trichardt	●	●	●

### North West

North West		Ingwe	Access & Impact	Associated
Brits Mediclinic	Brits		●	●
Anncron Clinic	Klerksdorp	●	●	●
Victoria Private Hospital	Mafikeng	●		●
Potchefstroom Mediclinic	Potchefstroom	●	●	●
Ferncrest Hospital	Rustenburg		●	●
Peglerae Hospital	Rustenburg	●		●
Vryburg Private Hospital	Vryburg	●		●

### Northern Cape

Northern Cape		Ingwe	Access & Impact	Associated
Kathu Private Hospital	Kathu	●		●
Kimberley Mediclinic	Kimberley	●	●	●
Upington Mediclinic	Upington		●	●

### Western Cape

Western Cape		Ingwe	Access & Impact	Associated
Bellville Medical Centre	Bellville - Cape Town	●	●	●
Louis Leipoldt Mediclinic	Bellville - Cape Town			●
Netcare Blaauwberg Hospital	Blaauwberg		●	
Cape Gate Mediclinic	Brackenfell			●
Christiaan Barnard Memorial Hospital	Cape Town		●	
Peninsula Eye Hospital	Claremont - Cape Town	●		●
Kingsbury Hospital	Claremont - Cape Town	●		●
Durbanville Mediclinic	Durbanville - Cape Town			●
Gatesville Medical Centre	Gatesville - Cape Town	●	●	●
Geneva Clinic	George	●	●	●
George Mediclinic	George	●	●	●
N1 City Hospital	Goodwood - Cape Town		●	
Hermanus Mediclinic	Hermanus		●	●
Knysna Private Hospital	Knysna	●	●	●
Kuils River Private Hospital	Kuils River		●	
UCT Private Academic Hospital	Mowbray		●	
Milnerton Mediclinic	Milnerton - Cape Town			●
Mitchells Plain Medical Centre	Mitchells Plain - Cape Town	●	●	●
Bayview Hospital	Mossel Bay	●	●	●
Cape Town Mediclinic	Oranjezicht - Cape Town			●
Klein Karoo Mediclinic	Oudtshoorn		●	●
Paarl Mediclinic	Paarl		●	●
Panorama Mediclinic	Panorama - Cape Town			●
Vincent Pallotti Hospital	Pinelands - Cape Town	●		●
Plettenberg Bay Mediclinic	Plettenberg Bay			●
Constantiaberg Mediclinic	Plumstead		●	●
Sport Science Orthopaedic Surgical Day Centre	Rondebosch			●
Vergelegen Mediclinic	Somers West		●	●
Stellenbosch Mediclinic	Stellenbosch	●		●
Strand Mediclinic	Strand			●
West Coast Private Hospital	Vredenburg	●	●	●
Worcester Mediclinic	Worcester		●	●

These hospital lists are subject to change. Visit [www.momentumhealth.co.za](http://www.momentumhealth.co.za) for the latest information.

# Glossary

- Emergency medical condition** means the sudden and, at the time, unexpected onset of a health condition that requires immediate medical or surgical treatment, where failure to provide medical or surgical 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.
- Prescribed Minimum Benefits (PMBs)** is a list of benefits for which all medical schemes in South Africa have to provide cover in terms of the Medical Schemes Act No 131 of 1998.
- Momentum Health Rate (MHR):** Every year Momentum Health negotiates with hospitals, GPs, specialists, pathologists, radiologists and dentists to determine the amount we will pay per treatment. For all other providers, the amount we pay is set on an annual basis. These amounts are called the Momentum Health Rate (MHR).
- Chronic Disease List (CDL)** is a list of 26 chronic conditions for which all medical schemes in South Africa have to provide cover in terms of the Medical Schemes Act No 131 of 1998.
- Provider definitions:**
  - Network providers:** Momentum Health has agreements in place with certain providers of healthcare services. On the Ingwe, Access and Impact Options, the Scheme relies on a network of providers for chronic and day-to-day benefits, namely Ingwe, Access or Impact Primary Care Network providers.
  - Associated providers, e.g. hospitals, GPs and specialists:** These are providers that Momentum Health has negotiated agreements with. By choosing to use the Associated hospitals and GPs, you can pay a lower contribution. However, if you then do not use these providers a co-payment will apply.
  - Ingwe Network hospitals:** Members on the Ingwe Option can choose to use Ingwe Network hospitals. These are private hospitals which Momentum Health has agreements in place with – see page 26 for the list of hospitals.
  - Access and Impact Network hospitals:** Members on the Access and Impact Options must make use of Access and Impact Network hospitals. These are private hospitals which Momentum Health has agreements in place with – see page 26 for the list of hospitals.
  - State:** State hospitals are public facilities. You can receive a discount on your contribution by selecting State as your hospital provider on the Ingwe Option. On the Custom, Incentive and Extender Options, you can also save on your contribution by choosing State as your Chronic Benefit provider.
  - Freedom-of-choice:** Members on the Summit Option can get their day-to-day and chronic treatment from any provider and can use any hospital.
  - Preferred Providers:** Momentum Health has agreements in place with certain providers of healthcare services, which members need to use for specific benefits.
- Formulary:** A formulary is a list of medicines covered on your option, from which a doctor can prescribe the appropriate medication for your chronic condition.
- Clinical protocol:** Momentum Health uses appropriate treatment principles, called clinical protocols, to determine and manage benefits for specific conditions. The Scheme's network providers also apply their own clinical protocols to the benefits they offer our members.
- Clinically appropriate:** Treatment that is in line with the clinical protocols (see definition above) for your condition.
- Out-patient facility:** A treatment centre where medical procedures can be done without the patient being admitted to hospital.
- Pre-authorisation:** Pre-authorisation is when you call us to let us know that you are about to receive medical treatment. The Scheme will confirm whether you are covered for the expected treatment, and at what rate your option covers such treatment. You will receive a pre-authorisation number which you need to provide to the doctor. While pre-authorisation is not a guarantee that your treatment will be covered, it gives you the peace of mind that benefits will be paid in line with Scheme Rules, your option and membership status.
- Pre-notification:** Pre-notification is when you call us to let us know that you are about to use a Health Platform benefit, such as your annual dentistry check-up.
- Sub-limit:** A sub-limit is a limit that applies in addition to the overall limit on a specific benefit. For example, your option might provide you with an annual limit on your optical benefit, within which a sub-limit for frames applies.
- Out-of-hospital procedures:** These are procedures that are not performed in a hospital. For example, they could be performed in your doctor's rooms or out-patient facility.
- Threshold:** On the Extender Option, there is a Threshold for day-to-day claims. It is a fixed Rand amount set by the Scheme in line with your family size. Once your day-to-day claims add up to this level, your claims will be paid by the Scheme from Extended Cover.
- Extended Cover:** On the Extender Option, your day-to-day claims are paid by the Scheme from Extended Cover, once you have reached the Threshold level.
- Generic reference pricing:** Generic reference pricing is the maximum rand value that Momentum Health will pay for a medicine from a group of similar medicines. Generic medicines are available at a substantially lower cost, despite having the same active ingredient as their non-generic alternatives. Should you wish to use the non-generic medicine, you will be liable for the difference in price between the non-generic medicine and the generic reference price.



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#### Momentum Health



Financial adviser call centre 0800 43 25 84  
Member call centre 0860 11 78 59  
Emergency evacuation 082 911  
Fraud hotline 0800 00 66 72



201 uMhlanga Ridge Boulevard Cornubia 4339



PO Box 2338 Durban 4000 South Africa



Email for queries [member@momentumhealth.co.za](mailto:member@momentumhealth.co.za)  
Email for claims [claims@momentumhealth.co.za](mailto:claims@momentumhealth.co.za)



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

#### Council for Medical Schemes



Customer Care Centre 0861 123 267



[information@medicalschemes.com](mailto:information@medicalschemes.com)



[www.medicalschemes.com](http://www.medicalschemes.com)