

2022 Benefits & Contribution Adjustments



BENEFIT DESCRIPTION

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| Alternatives to Hospitalisation | Limit increased to R42 710 per family |
| Alternatives to Hospitalisation: Terminal Care Benefit | Sub-limit increased to R39 240 per family |
| Contraception: Medication (Birth Control) | Limit increased to R190 per month per female beneficiary with 13 scripts per annum |
| Maxillo-Facial and Oral Surgery | Limit increased to R12 900 per family |
| Medication: Discharge from Hospital - TTO | Limit increased to R370 per admission |
| Mental Health: In- and Out-of-Hospital | Limit increased to R37 240 per family |
| Physiotherapy: In Hospital | Limit increased to R2 800 per beneficiary |
| Oncology: Breast Reconstruction | Limit increased to R89 200 per family |
| Prosthesis and Devices: Internal | Limit increased to R35 770 per family |
| Prosthesis and Devices: Internal - Hips and Knees | Sub-limit increased to R33 660 per beneficiary |
| Specialised Radiology (In- and Out-of-Hospital) | Limit increased to R10 050 per family |

MEDICORE

MONTHLY CONTRIBUTION

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|------------------|---------------|
| Principal Member | R2 961 |
| Adult Dependant | R2 505 |
| Child* | R684 |

*Contribution rate is applicable to the members first, second and third biological or legally adopted children only, excluding students.



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MEDSHIELD
medical scheme

THE FOLLOWING SERVICES WILL ATTRACT UPFRONT CO-PAYMENTS:

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|---|------------------------|
| Specialised Radiology Non-PMB | 10% upfront co-payment |
| Internal Prosthesis and Devices Non-PMB | 25% upfront co-payment |
| Voluntary use of a non-Medshield Network Hospital | 25% upfront co-payment |
| Voluntary use of a non-Compact Network Hospital - Organ, Tissue and Haemopoietic stem cell (Bone marrow) transplant | 25% upfront co-payment |
| Voluntary use of a non-Medshield Network Hospital - Mental Health | 25% upfront co-payment |
| Voluntary use of a non-DSP for HIV & AIDS related medication | 40% upfront co-payment |
| Voluntary use of a non-DSP or a non-Medshield Pharmacy Network | 40% upfront co-payment |
| Voluntarily obtained out of formulary medication | 40% upfront co-payment |
| Voluntary use of a non-ICON provider - Oncology | 40% upfront co-payment |
| Voluntary use of a non-DSP provider - Chronic Renal Dialysis | 40% upfront co-payment |

In-Hospital Procedural upfront co-payments for non-PMB

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|-----------------------------------|---------------------------|
| Endoscopic procedures | R2 000 upfront co-payment |
| Hernia Repair (except in infants) | R3 000 upfront co-payment |
| Laparoscopic procedures | R4 000 upfront co-payment |
| Arthroscopic procedures | R4 000 upfront co-payment |
| Nissen Fundoplication | R5 000 upfront co-payment |
| Hysterectomy | R5 000 upfront co-payment |
| Functional Nasal surgery | R5 000 upfront co-payment |
| Back and Neck surgery | R8 000 upfront co-payment |

Please note:

Failure to obtain an authorisation prior to hospital admission or surgery and/or treatment (except for an emergency), will attract a 20% penalty, in addition to the above co-payments.

**No co-payment applicable In-Hospital for children 8 years and younger.*

The Medshield Specialist Network list shall be as designated in writing by the Scheme from time to time.

Medshield Medical Scheme Rules indicate that a member is entitled to change from one benefit option to another provided that the change is made with effect 1 January of any financial year, therefore mid-year option changes are not permitted.

