

Overall Annual Limit	No overall annual limit	
CATEGORY	BENEFIT	LIMIT PER CATEGORY
IN HOSPITAL BENEFITS		
Hospitalisation	Accommodation and Theatres Medication: Acute To take out Alternative to Hospitalisation Alcoholism, Drug Dependency and Mental Health at 100% of Pro Sano tariffs.	Subject to pre-authorisation and referral protocols. A co-payment of R500 per hospital admission will be payable in the event of a hospital admission following a specialist visit which was not referred by a GP. For endoscopic procedures that are normally performed in the specialist's rooms, if performed in-hospital a R500 co-payment will apply. Unlimited. 7 days supply. R13 850 per family subject to pre-authorisation. Accommodation at a registered facility and subject to DSP, managed care protocols and PMB requirements. Mental Health, 21 days in-patient care or 15 contacts out patient care, per beneficiary. Non-PMB care limited to R7 000 per family per annum.
Specialists and General Practitioners services in the hospital or clinic. Excluding services in the Emergency rooms of Private hospitals.	Consultations & Visits in hospital At 100% of Pro Sano tariffs Maternity: Delivery At 100% of Pro Sano tariffs Operations and Procedures At 100% of Pro Sano tariffs	Subject to authorisation and referral protocols. Unlimited subject to pre-authorisation. Subject to pre-authorisation and GP referral protocols.
Maxillofacial & Oral Surgery	At 100% of Pro Sano tariffs	Subject to pre-authorisation and dental management protocols.
Dental Procedures	At 100% of Pro Sano Dental tariff	Subject to pre-authorisation and dental management protocols.
Physiotherapy & Bio Kinetics	At 100% of Pro Sano tariffs	Subject to pre-authorisation and managed care protocols. M R1 100 M+1+ R2 200 In & out of hospital.
Pathology	At 100% of Pro Sano tariffs	Subject to management protocols. Limited to R5 000 per family per annum.
Radiology	At 100% of Pro Sano tariffs At 100% of Pro Sano tariffs for MRI, CAT, Isotopes & Angiography	R3,300 limit per family per annum. Subject to pre-authorisation and clinical protocols. R13 500 per family for specialised radiology and a separate limit of R9 500 per family for angiography. In & out of hospital.
Medical & Surgical Appliances	At 100% of cost	R2 300 per family per annum in & out of hospital.
Oxygen & Home Ventilation	At 100% of cost	Subject to pre-authorisation.
Blood & Blood Products	At 100% of cost	Subject to pre-authorisation.
Prostheses	At 100% of cost Internal (Excluding drug eluting stents) External Cochlear Implants and Hearing aids.	Subject to pre-authorisation and prosthetic benefit limits. Subject to an annual limit of R40 000 per family per annum. R4 620 per beneficiary per annum. Subject to : Cochlear implants - R110 000 per family per annum and Hearing aids R11 000 per family per three year cycle.
Renal Dialysis	At 100% of Pro Sano tariffs	Subject to pre-authorisation, PMB and managed care protocols.
HIV and AIDS		Subject to pre-authorisation, PMB and managed care protocols.
Organ Transplants	At 100% of Pro Sano tariffs	Subject to pre-authorisation, PMB and managed care protocols.
Oncology	At 100% of Pro Sano tariffs	Subject to PMB's, pre-authorisation, case management and DSP. Non-PMB care limited to R80 000 per family per annum.
Ambulance Services	At 100% of cost	Subject to DSP pre-authorisation and protocols.

OUT OF HOSPITAL BENEFITS		
CATEGORY	BENEFIT	LIMIT PER CATEGORY
General Practitioner	Consultations at 100% of Pro Sano tariffs	Consultations are payable from the savings accounts. By using a Pro Sano designated doctor, R120 of the consultation fee will be paid from the risk benefit and only the balance of the consultation fee will be paid from the savings benefit.
Specialists	Consultations at 100% of Pro Sano tariffs	Specialist visits must be authorised. If authorised, R120 will be paid from the risk benefit and the balance from savings.
Alternative Healthcare Practitioners	At 100% of Pro Sano tariffs	Paid from available savings benefit.
Procedures and Tests	At 100% of Pro Sano tariffs	Single member R3 500 and Family R5 700.
Maternity	At 100% of Pro Sano tariffs Ante-natal consultations Post-natal consultations Ultrasound scans	10 ante-natal consultations per pregnancy. 2 post-natal consultations with midwife per pregnancy. 2 x 2D scans per pregnancy.
Alcoholism, Drug Dependency and Mental Health	At 100% of Pro Sano tariffs	Refer to hospitalisation.
Pathology	At 100% of Pro Sano tariffs	Subject to DSP management programme. Single member R2 200 and Family R3 300.
Radiology	At 100% of Pro Sano tariffs for general radiology.	Subject to DSP management programme. Single member R2 200 and Family R3 300.
Dental Procedures	At 100% of Pro Sano Dental Tariff.	Subject to Dental management programme. Basic dentistry R3 250 per family per annum. Specialised dentistry R4 050 per family per annum.
Optical	At 100% of Pro Sano tariffs Eye test Single vision lenses Bifocal lenses Multifocal lenses Frames Contact lens materials in lieu of frames and lenses	Comprehensive cover per beneficiary, every two years and subject to managed care protocols. R330 R180 R495 R750 R650 R1 350
Remedial Therapies	At 100% of Pro Sano tariffs for Homeopaths, Dieticians, Chiropractitioners and other registered supplementary service providers	Paid from available savings benefit.
Occupational, Speech Therapy and Audiology	At 100% of Pro Sano tariffs	Limited to: M R2 060, M+1 R3 150, M+2 R3 630, M+3 R3 880 and M4+ R4 120
Screening benefit	At 100% of Pro Sano tariffs	One blood pressure, blood glucose and cholesterol screening test per beneficiary per annum.
Medicines	At SEP plus negotiated dispensing fee Acute and over the counter medicines Chronic, including consultation fee upon first registration	Paid from available savings benefit. As per PMB's and selected list of chronic conditions and formulary: M- R7,800, M1+ R15,400 Further limited to R7,800 per beneficiary. 30% co-payment on voluntary use of all non-formulary medicines.

Please Note:
SEP = Single Exit Price
MSA = Medical Savings Account
PMB = Prescribed Minimum Benefits
DSP = Designated Service Provider
GP = General Practitioner
DGPs = Designated General Practitioners

	RISK	MSA	TOTAL CONTRIBUTION	ANNUAL MEDICAL SAVINGS
Member	R1 857	R207	R2 064	R2 484
Adult	R1 596	R177	R1 773	R2 124
Child (max 2)	R456	R54	R510	R648