

Overall Annual Limit	Subject to overall annual limit of R750 000 per family	
CATEGORY	BENEFIT	LIMIT PER CATEGORY
<b>IN HOSPITAL BENEFITS</b>		
Hospitalisation At Pro Sano Tariffs	Accommodation and Theatres	Subject to pre-authorisation and referral protocols. R500 co-payment on non-PMB elective procedures. An additional co-payment of R500 per hospital admission will also 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.
	Consultations & Visits At Pro Sano tariffs	Subject to pre-authorisation and referral protocols.
	Medication: To take out	7 days supply.
	Alternative to Hospitalisation	R6 000 per family subject to pre-authorisation.
Maternity: Delivery	At 100% of Pro Sano tariffs	Subject to pre-authorisation.
Mental Health & Alcoholism & Drug Dependency	At 100% of Pro Sano tariffs	21 days in-patient care or 15 contacts out patient care per beneficiary per annum at a registered facility and subject to DSP, managed care protocols and PMB requirements. Non-PMB care limited to R5 000 per family per annum.
Operations and Procedures	At 100% of Pro Sano tariffs	Subject to pre-authorisation and referral protocol.
Maxillofacial & Oral Surgery	At 100% of Pro Sano tariffs	Subject to pre-authorisation and dental management protocols pre-authorisation and referral protocols.
Physiotherapy & Bio Kinetics	At 100% of Pro Sano tariffs	Subject to pre-authorisation and managed care protocols M R1 000 M+1 R1 200 M+2 R1 400 M3+ R1 700 In & out of hospital.
Pathology	At 100% of Pro Sano tariffs in hospital	Subject to DSP management protocols R3 300 per family per annum.
Radiology	At 100% of Pro Sano tariffs for General Radiology in hospital	Subject to DSP management protocols R2 750 per family per annum.
Specialised Radiology	MRI, CAT, Isotopes & Angiography	Subject to pre-authorisation and clinical protocols. R8 500 per family for specialised radiology and a separate limit of R9 000 per family for angiography, in & out of hospital.
Medical & Surgical Appliances	At 100% of cost	Refer to Supplementary Health Services.
Oxygen & Home Ventilation	At 100% of cost	Subject to pre-authorisation and PMB.
Prostheses	At 100% of cost	Subject to pre-authorisation and prosthetic benefit limits.
	Internal	Overall limit of R25 000, including joint replacement but excluding drug eluting stents, per family.
	External	R3 500 per family per annum.
	Hearing Aids	Included in the external prosthesis benefit.
Renal Dialysis	At 100% of Pro Sano tariffs	Subject to pre-authorisation, PMB and managed care protocols.
HIV and AIDS	At 100% of Pro Sano tariffs	Subject to pre-authorisation, PMB and managed care protocols.
Organ Transplants	At 100% of Pro Sano tariffs	Unlimited subject to pre-authorisation and PMB's.
Oncology	At 100% of Pro Sano tariffs	Subject to PBM's, pre-authorisation, case management and DSP. Non-PMB care shall be limited to R60 000 per family per annum.
Ambulance Services	At 100% of cost	Subject to DSP, pre-authorisation and protocols.

OUT OF HOSPITAL BENEFITS	Subject to overall annual limit of R18 000 per family	
CATEGORY	BENEFIT	LIMIT PER CATEGORY
General Practitioner	At 100% of Pro Sano tariffs for Consultations, visits and SEP for medicines	<b>For Pro Sano DGPs:</b> The following combined limits are available at Pro Sano tariff for GPs, specialists & medicines for Pro Sano accredited GPs. M0 - R2 900 M1 - R3 800 M2+ R4 800 M3+ R5 800 <b>For non-Pro Sano DGPs:</b> A co-payment of R100 is payable for each consultation for non-Pro Sano DGPs - subject to above limits.
Specialists	At 100% of Pro Sano tariffs for Consultations, visits and SEP for medicines	<b>Designated General Practitioner referrals:</b> The above combined limits are available at Pro Sano tariff for specialists & medicines where a member is referred by a Pro Sano DGP. <b>Unauthorised referrals:</b> A co-payment of R100 is payable for each consultation where there is no referral by the GP - subject to above limits.
Procedures and Tests	At 100% of Pro Sano tariffs	M R1 600 M+1+ R2 500
Maternity	At 100% of Pro Sano tariffs for Ante-natal Consultations	10 ante-natal consultations per pregnancy.
	Post-natal Consultations	2 post-natal consultations with midwife per pregnancy.
	Ultrasound Scans	2 x 2D Scans per pregnancy.
Mental Health & Alcoholism & Drug Dependency	At 100% of Pro Sano tariffs	Refer to hospitalisation.
Radiology and Pathology	Subject to DSP management protocols. At 100% of Pro Sano tariffs out of hospital.	M R1 100 M+1 R1 600
Basic Dentistry	At 100% of Pro Sano Dental tariffs	Subject to pre-authorisation and managed care protocols. M R1 200 M+1 R1 400 M+2 R1 600 M3+ R2 000
	Specialised	Included in Basic Dentistry.
Optical	At 100% of Pro Sano tariffs	Comprehensive cover per beneficiary, every two years and subject to managed care protocols.
	Eye test	R330
	Single vision lenses	R180
	Bifocal lenses	R495
	Multifocal lenses	R750
	Frames	R500
	Contact lens materials in lieu of frames and lenses	R1 050
Supplementary Health Services: Audiologist, Chiropractor etc.	At 100% of Pro Sano tariffs	R1 200 per family.
Screening Benefit	At 100% Pro Sano tariffs	One blood pressure, blood glucose and cholesterol screening test per beneficiary per annum by a GP, registered nurse or pharmacist.
Medicines	At 100% of the lower of SEP or Pro Sano tariff for Acute & Over the Counter	Refer to General/Specialist benefit.
	Chronic Medication plus Consultation	As per PMB's and subject to pre-authorisation & formulary. 30% co-payment on all voluntary use of non-formulary medicines.

**Please Note:**  
PMB = Prescribed Minimum Benefits  
DSP = Designated Service Provider  
GP = General Practitioner  
DGPs = Designated General Practitioners

MEMBER	ADULT	CHILD
R1 329	R894	R321