



Beat

Comparative  
Guide  
2015

bestMed

Better living. Better life.

# Beat

## Why Choose Bestmed?

After achieving the benchmark of celebrating our 50th anniversary in 2014, Bestmed is still raising the bar in the medical aid industry to the point where we have grown our membership to reach the fifth overall position countrywide. Going forward Bestmed is also focused on serving our members with the legendary Bestmed touch.

As a self-administered scheme, Bestmed now has more than 92 000 principal members and provides healthcare benefits to more than 193 000 lives. With our extensive experience and exceptional expertise, we can negotiate with our service providers to offer our members benefits and services that are, Rand-for-Rand, the best value compared to other large open medical schemes.

## The Right Fit

Bestmed recognises that members' healthcare needs will vary depending on age, marital status and different responsibilities and priorities. To address our members' desire for choice and flexibility, we've designed ten healthcare options which are structured differently to suit various healthcare needs. So, whether you essentially want to cover hospital costs or require a more comprehensive offering, covering all healthcare requirements, we have an option for you.

Our Beat, Pace and Pulse product offerings have been designed based on engagements and conversations with members over our many years of experience. After listening intently to their concerns, our healthcare experts have translated these insights into benefit options that are easy to understand and cater for all needs.

## Focused on Wellness

Your continued health and wellbeing is our primary concern. That is why we encourage all of our members to live a more preventive, meaningful and productive life through our wellness programme known as Health Check. We are here to assist you to become a better version of yourself through choosing a healthier lifestyle.

Our wellness philosophy is based on five basic pillars. We encourage our members to:

**Be Active:** Incorporate exercise as part of your daily routine to promote positive changes.

**Be Safe:** Make responsible lifestyle choices to prevent adverse consequences.

**Be Nutri-Wise:** Balanced nutrition is important to maintain a healthy body and mind.

**Be Happy:** Create and maintain a balance between work, life and home.

**Be Fin-Wise:** Making informed financial decisions in life will ensure financial independence.

## The Corporate Partnership

For Bestmed, healthcare is based on sound partnerships. So, the way we engage with our corporate clients aims to establish and maintain long-term personal relationships, built on mutual trust and integrity, provide affordable, excellent healthcare solutions, be accessible and provide personalised advice to all members and be flexible so processes are easy to follow.

In line with this vision, Bestmed has adopted a three-pronged approach in order to deliver on its promise, which includes Corporate Wellness, a Client Service Programme, as well as Administration. Bestmed advisors are responsible for implementing these service programmes at employer organisations. Today, Bestmed services over 140 employer organisations, including large corporate businesses, South Africa's biggest universities and a variety of parastatals.



# Method of Scheme Benefit Payment

Beat1	Beat2	Beat3	Beat4
In-hospital services are paid from the Scheme risk and out-of-hospital services will be for the member's own account. Some preventative care services are available from the Scheme risk benefit.	In-hospital services are paid from the Scheme risk and out-of-hospital services will be for the member's own account. Some preventative care services are available from the Scheme risk benefit. Some day-to-day benefits are paid from the savings account.	In-hospital services are paid from the Scheme risk. Some day-to-day benefits are paid from the Scheme risk and other services will be paid from the Savings account. Some preventative care services are available from the Scheme risk benefit.	In-hospital services are paid from the Scheme risk. Some out-of-hospital services are paid from the annual savings first and, once depleted, will be paid from the Scheme risk. Some preventative care services are available from the Scheme risk benefit.

## In-Hospital Benefits

As from 2015, the Beat range offers a NEW network option.

- Bestmed will offer members a choice of network hospitals for the in-hospital benefits on the Beat range.
  - Membership cards will indicate that the specific Beat option includes a Network option.
  - The contributions for the Network option will be lower than that payable for the non-network benefit option (please refer to the Contributions table on page 7).
  - Should a member voluntarily choose not to make use of a hospital forming part of a hospital network for the Beat Network benefit option, a maximum co-payment of R5 000 shall apply to the voluntary use of a non-designated service provider.
  - All other benefits and limits remain the same.
- Note: Benefits mentioned below may be subject to pre-authorization and clinical protocols.

	Beat1	Beat2	Beat3	Beat4
<b>Accommodation (hospital stay) and theatre fees</b>			100% Scheme tariff.	
<b>Take-home medicine</b>		100% Scheme tariff. Limited to 7 days' medicine.		
<b>Treatment in mental health clinics</b>		100% Scheme tariff. Limited to 21 days per beneficiary.		
<b>Treatment of chemical and substance abuse</b>	100% Scheme tariff. Limited to 21 days or R20 400 per beneficiary.		100% Scheme tariff. Limited to 21 days or R20 600 per beneficiary.	
<b>Consultations and procedures</b>		100% Scheme tariff. DSP specialist network applicable if the discounted network option is chosen.		
<b>Surgical procedures and anaesthetics</b>		100% Scheme tariff.		
<b>Organ transplants</b>		100% Scheme tariff. (Only PMBs). Subject to pre-authorization and protocols.		
<b>Dentistry: Maxillo-facial surgery strictly related to certain conditions</b>	100% Scheme tariff. Limited to R9 600 per family.	100% Scheme tariff. Limited to R9 700 per family.		100% Scheme tariff. Limited to R9 800 per family.
<b>Prosthesis (Subject to preferred provider, otherwise limits and co-payments apply)</b>	100% Scheme tariff. Limited to R56 900 per family.	100% Scheme tariff. Limited to R57 500 per family.		100% Scheme tariff. Limited to R70 200 per family.
<b>Prosthesis - Internal</b>	Sub-limits per beneficiary: <ul style="list-style-type: none"> <li>Vascular R21 600</li> <li>Pacemaker (dual chamber) R29 600</li> <li>Endovascular - no benefit</li> <li>Spinal R21 600</li> <li>Artificial disk - no benefit</li> <li>Drug-eluting stents - no benefit</li> <li>Mesh R7 600</li> <li>Gynaecology/ Urology R6 200</li> <li>Lens implants R4 800 per lens</li> </ul>	Sub-limits per beneficiary: <ul style="list-style-type: none"> <li>Vascular R21 800</li> <li>Pacemaker (dual chamber) R29 600</li> <li>Endovascular - no benefit</li> <li>Spinal R21 800</li> <li>Artificial disk - no benefit</li> <li>Drug-eluting stents - no benefit</li> <li>Mesh R7 600</li> <li>Gynaecology/ Urology R6 300</li> <li>Lens implants R4 900 per lens</li> </ul>		Sub-limits per beneficiary: <ul style="list-style-type: none"> <li>Vascular R23 100</li> <li>Pacemaker (dual chamber) R38 700</li> <li>Endovascular - no benefit</li> <li>Spinal R23 100</li> <li>Artificial disk - no benefit</li> <li>Drug-eluting stents R13 000</li> <li>Mesh R8 500</li> <li>Gynaecology/ Urology R6 300</li> <li>Lens implants R4 900 per lens</li> <li>Joint replacements: <ul style="list-style-type: none"> <li>Hip replacement and other major joints R23 800</li> <li>Knee replacement R31 600</li> <li>Minor joints R9 700</li> </ul> </li> </ul>
<b>Prosthesis - External</b>	Limited to R13 800 per family.	Limited to R13 900 per family.		Limited to R16 900 per family.
<b>Exclusions (Prosthesis limit subject to preferred provider, otherwise limits and co-payments apply)</b>	Joint replacement surgery. (Except for PMBs). PMBs subject to prosthesis limits: <ul style="list-style-type: none"> <li>Hip replacement and other major joints R22 800</li> <li>Knee replacement R28 100</li> <li>Minor joints R9 600</li> </ul>	Joint replacement surgery. (Except for PMBs). PMBs subject to prosthesis limits: <ul style="list-style-type: none"> <li>Hip replacement and other major joints R23 000</li> <li>Knee replacement R28 400</li> <li>Minor joints R9 700</li> </ul>		Not available.

## In-Hospital Benefits (continued)

	Beat1	Beat2	Beat3	Beat4
Orthopaedic and medical appliances			100% Scheme tariff.	
Pathology			100% Scheme tariff.	
Diagnostic imaging			100% Scheme tariff.	
Specialised diagnostic imaging			100% Scheme tariff.	
Oncology		Oncology Programme. 100% Scheme tariff.		
Peritoneal dialysis and haemodialysis			100% Scheme tariff.	
Confinements			100% Scheme tariff.	
Midwife-assisted births			100% Scheme tariff.	
Supplementary services			100% Scheme tariff.	
Alternatives to hospitalisation			100% Scheme tariff.	
Emergency evacuation			100% Scheme tariff. Pre-authorized and rendered by ER24.	
Co-payments		Co-payment of R2 400 on all endoscopic investigations if done in private hospital. Any other facility, no co-payment.		Not applicable.

## Out-of-Hospital Benefits

Note: Benefits mentioned below may be subject to pre-authorization and clinical protocols.

	Beat1	Beat2	Beat3	Beat4
Day-to-day benefits		Not available.		M = R9 700, M1+ = R19 300.
GP and Specialist consultations	No benefit.	Savings account.		Savings first. Limited to M = R2 400, M1+ = R4 200. (Subject to day-to-day overall limit)
Basic and specialised dentistry	No benefit.	Basic: According to preventative benefit or Savings account. Specialised: Savings account.		Savings first. Limited to M = R4 000, M1+ = R8 000. (Subject to day-to-day overall limit)
Medical aids, apparatus and appliances	No benefit.	Savings account.		100% Scheme tariff limited to R8 500 per family.
Supplementary services	No benefit.	Savings account.		Savings first. Limited to M = R3 600, M1+ = R7 300. (Subject to day-to-day overall limit)
Wound care benefit (incl. dressings and negative pressure wound therapy (NPWT) treatment and related nursing services - out-of-hospital)		Limited to R2 500 per family.		Limited to R3 600 per family.
PPN (Capitation provider) benefits	No benefit.	Savings account.	<ul style="list-style-type: none"> <li>■ Consultation R290</li> <li>■ Frame R500 AND               <ul style="list-style-type: none"> <li>- Single-vision lenses R150 OR</li> <li>- Bifocal lenses R325 OR</li> <li>- Multifocal lenses R600</li> </ul> </li> <li>■ Contact lenses R1 000</li> </ul>	<ul style="list-style-type: none"> <li>■ Consultation R290</li> <li>■ Frame R500 AND               <ul style="list-style-type: none"> <li>- Single-vision lenses R150 OR</li> <li>- Bifocal lenses R325 OR</li> <li>- Multifocal lenses R600</li> </ul> </li> <li>■ Contact lenses R1 210</li> </ul>
Diagnostic imaging and Pathology	No benefit.	Savings account.		Savings first. Limited to M = R2 400, M1+ = R4 900. (Subject to day-to-day overall limit)
Specialised diagnostic imaging	No benefit.	Savings account.	100% Scheme tariff. Limited to R8 100 per family.	100% Scheme tariff. Limited to R12 200 per family.
Oncology			Oncology Programme. 100% Scheme tariff.	
Maternity benefits	No benefit.	Savings account.	2 sonars and up to 12 antenatal consultations.	
Rehabilitation services after trauma	No benefit.		Savings account.	

## Medicine

Note: Benefits mentioned below may be subject to pre-authorisation, clinical protocols, formularies, funding guidelines and the Mediscor Reference Price (MRP).

	Beat1	Beat2	Beat3	Beat4
<b>CDL chronic medicine</b>	100% Scheme tariff. Co-payment of 35% for non-formulary medicine.			100% Scheme tariff. Co-payment of 30% for non-formulary medicine.
<b>Non-CDL chronic medicine</b>	No benefit.		5 conditions. 85% Scheme tariff. Limited to M = R2 600, M1+ = R5 300. Co-payment of 35% for non-formulary medicine.	16 conditions. 85% Scheme tariff. Limited to M = R7 200, M1+ = R14 300. Co-payment of 30% for non-formulary medicine.
<b>Biologicals and other high-cost medicine</b>	No benefit.			
<b>Acute medicine</b>	No benefit.	Savings account.		Savings first. Limited to M = R2 200, M1+ = R4 400. (Subject to day-to-day overall limit)
<b>Over-the-counter (OTC) medicine</b>	No benefit.	Savings account.		

Did you know that you can make your benefits last longer?

Simply ask your doctor to prescribe generic medicines where possible.



The Beat range offers flexible hospital benefits with limited savings to pay for out-of-hospital expenses on some options.

## Preventative Care Benefits

Note: Benefits mentioned below may be subject to pre-authorisation, clinical protocols, formularies, funding guidelines and the Mediscor Reference Price (MRP).

	Beat1	Beat2	Beat3	Beat4
<b>Preventative care</b>	<ul style="list-style-type: none"> <li>Flu vaccines</li> <li>Pneumonia vaccines</li> <li>Paediatric immunisations</li> <li>Female contraceptives - R1 500 per family</li> <li>DBC Programme</li> <li>Biometric screenings</li> </ul>	<ul style="list-style-type: none"> <li>Flu vaccines</li> <li>Pneumonia vaccines</li> <li>Paediatric immunisations</li> <li>Female contraceptives - R1 500 per family</li> <li>DBC Programme</li> <li>Preventative dentistry (incl. gloves and sterile equipment)</li> <li>Biometric screenings</li> </ul>	<ul style="list-style-type: none"> <li>Flu vaccines</li> <li>Pneumonia vaccines</li> <li>Paediatric immunisations</li> <li>Female contraceptives - R1 500 per family</li> <li>DBC Programme</li> <li>Preventative dentistry (incl. gloves and sterile equipment)</li> <li>PAP smear</li> <li>Biometric screenings</li> </ul>	<ul style="list-style-type: none"> <li>Flu vaccines</li> <li>Pneumonia vaccines</li> <li>Paediatric immunisations</li> <li>Female contraceptives - R1 500 per family</li> <li>DBC Programme</li> <li>Preventative dentistry (incl. gloves and sterile equipment)</li> <li>PAP smear</li> <li>HIB titre</li> <li>Mammogram</li> <li>HPV vaccinations</li> <li>Biometric screenings</li> <li>One dietician counselling session per family</li> </ul>

Disclaimer on exclusions: General and option-specific exclusions apply. Please refer to [www.bestmed.co.za](http://www.bestmed.co.za) for more detail.

## Chronic Conditions List (CDL & non-CDL)

The Chronic Disease List (CDL) provides cover for the 27 listed chronic conditions for which medical schemes must cover the diagnosis, medical management and medicines as published by the Council for Medical Schemes. Non-CDL chronic conditions are those additional conditions that Bestmed provides chronic medicine cover for. Authorisation for CDL and non-CDL chronic medicines is subject to clinical

funding guidelines and protocols, formularies and Designated Service Providers (DSPs) where applicable. Below is the list of CDL and non-CDL conditions that Bestmed covers on the various benefit options.

Note: Benefits mentioned below may be subject to pre-authorisation, clinical protocols, formularies, funding guidelines and the Mediscor Reference Price (MRP).

	Beat1	Beat2	Beat3	Beat4
Reimbursement for CDL			100% Scheme tariff	
Reimbursement for non-CDL	No benefit			85% Scheme tariff
Non-formulary co-payment		35%		30%
No. of non-CDL conditions covered	0		5	16
CDL 1			Addison's Disease	
CDL 2			Asthma	
CDL 3			Bipolar Mood Disorder	
CDL 4			Bronchiectasis	
CDL 5			Cardiomyopathy	
CDL 6			Chronic Renal Failure	
CDL 7			Chronic Obstructive Pulmonary Disease (COPD)	
CDL 8			Congestive Heart Failure	
CDL 9			Coronary Artery Disease	
CDL 10			Crohn's Disease	
CDL 11			Diabetes Insipidus	
CDL 12			Diabetes Mellitus Type 1	
CDL 13			Diabetes Mellitus Type 2	
CDL 14			Dysrhythmia	
CDL 15			Epilepsy	
CDL 16			Glaucoma	
CDL 17			Haemophilia	
CDL 18			HIV/AIDS	
CDL 19			Hyperlipidaemia	
CDL 20			Hypertension	
CDL 21			Hypothyroidism	
CDL 22			Multiple Sclerosis	
CDL 23			Parkinson's Disease	
CDL 24			Rheumatoid Arthritis	
CDL 25			Schizophrenia	
CDL 26			Systemic Lupus Erythematosus (SLE)	
CDL 27			Ulcerative Colitis	
non-CDL 1				Acne - Severe
non-CDL 2				Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder (ADD/ADHD)
non-CDL 3				Allergic Rhinitis
non-CDL 4				Eczema
non-CDL 5				Migraine Prophylaxis
non-CDL 6				Gout Prophylaxis
non-CDL 7				Endometriosis
non-CDL 8				Major Depression
non-CDL 9				Chronic Anaemia
non-CDL 10				Polycystic Ovarian Disease
non-CDL 11				Graves' Disease
non-CDL 12				Obsessive Compulsive Disorder
non-CDL 13				Stroke
non-CDL 14				Paraplegia/Quadriplegia (Medication to treat)
non-CDL 15				Pulmonary Embolism
non-CDL 16				Female Menopause

## BestBaby Programme

With so many things to juggle, the BestBaby programme is created to help moms and dads through the entire pregnancy without missing a beat. At Bestmed we want you to enjoy this entire experience.

Registering on this programme will give you the following support and benefits:

- A 24-hour professional medical advice line.
- Weekly e-mails packed with convenient information about your pregnancy, your baby's development, how to deal with unpleasant pregnancy symptoms and useful tips.
- Dads won't be left out as they will also receive e-mails every second week to inform them about the baby's development and Mom's progress.

- To make sure your pregnancy starts right you will receive a welcome pack containing an informative pregnancy book to guide you through the stages and discount vouchers for various baby items. Mom and Dad can also expect a pregnancy health pack, via Fastmail, within the first month of registration.
- In your second month after registration, we will send you a beautiful baby bag, to your door, packed with products to use after baby's birth. Moms-to-be can expect their bag to contain wonderful products.

\* Please note that you may only register in the programme after 12 weeks of pregnancy.



You can save money by obtaining pre-authorisation for planned, in-hospital medical procedures in advance.

Midwife-assisted births are covered at 100% of Scheme tariff on all Beat options.

## 2015 Healthcare Offering

We are a Scheme managed by members for members and will never compromise on quality service to you. We always strive to exceed your expectations.

Bestmed provides great healthcare benefits to more than 193 000 beneficiaries through our ten unique and flexible benefit options. With us you get the best when it comes to accessing quality healthcare.

The **Beat range**, which is covered in this comparative guide, offers flexible hospital benefits on all Beat options with limited savings to pay for out-of-hospital expenses on some options such as Beat2 and Beat3 but extensive out-of-hospital cover on Beat4.

The **Pace range** offers more comprehensive hospital benefits, Scheme benefits and additional savings benefits to cover extensive out-of-hospital expenses. The options in this category are Pace1, Pace2, Pace3 and Pace4.

The **Pulse range** offers full hospital benefits and out-of-hospital benefits which are both provided by designated network providers only. The options in this category are Pulse1 and Pulse2.

For complete information about all these options, please refer to the individual product leaflets or go to [www.bestmed.co.za](http://www.bestmed.co.za).

## Contributions

	Non-network (NN)/ Network (N)	Beat1		Beat2		Beat3		Beat4	
		NN	N	NN	N	NN	N	NN	N
PRINCIPAL MEMBER	Risk	R1 046	R941	R1 055	R950	R1 629	R1 466	R2 347	R2 112
	Savings	R0	R0	R232	R208	R334	R300	R587	R528
	<b>Total</b>	<b>R1 046</b>	<b>R941</b>	<b>R1 287</b>	<b>R1 158</b>	<b>R1 963</b>	<b>R1 766</b>	<b>R2 934</b>	<b>R2 640</b>
ADULT DEPENDANT	Risk	R812	R731	R820	R738	R1 157	R1 042	R1 938	R1 744
	Savings	R0	R0	R180	R162	R237	R213	R485	R436
	<b>Total</b>	<b>R812</b>	<b>R731</b>	<b>R1 000</b>	<b>R900</b>	<b>R1 394</b>	<b>R1 255</b>	<b>R2 423</b>	<b>R2 180</b>
CHILD DEPENDANT	Risk	R440	R396	R444	R400	R629	R566	R581	R523
	Savings	R0	R0	R98	R88	R129	R116	R145	R131
	<b>Total</b>	<b>R440</b>	<b>R396</b>	<b>R542</b>	<b>R488</b>	<b>R758</b>	<b>R682</b>	<b>R726</b>	<b>R654</b>
<b>Maximum Contribution Child Dependents*</b>		4							
<b>Recognition of a Child Dependiant</b>		Under 21, unless a registered student.							

\* You only pay for a maximum of four children. All other children join as beneficiaries of the Scheme free of charge.


### Abbreviations

CDL = Chronic Disease List; DBC = Documentation Based Care (back rehabilitation programme); DSP = Designated Service Provider; GP = General Practitioner or Doctor; HPV = Human Papilloma Virus; M = Member; M1+ = Member and family; MRP = Mediscor Reference Price; PMB = Prescribed Minimum Benefits; PPN = Preferred Provider Negotiators.

## Contact Details

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'QUOTE' to  
**41631**  
and we'll call  
you back

### WALK-IN FACILITY

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### ER24 AND INTERNATIONAL TRAVEL COVER

Tel: 084 124

### HOSPITAL AUTHORISATION

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E-mail: [authorisations@bestmed.co.za](mailto:authorisations@bestmed.co.za)

### CHRONIC MEDICINE

Tel: 086 000 2378  
E-mail: [medicine@bestmed.co.za](mailto:medicine@bestmed.co.za)  
Fax: 012 472 6760

### CLAIMS

Tel: 086 000 2378  
E-mail: [service@bestmed.co.za](mailto:service@bestmed.co.za) (queries)  
[claims@bestmed.co.za](mailto:claims@bestmed.co.za) (claim submissions)

### BESTBABY

Register by phoning 0861 111 936 or e-mail your medical aid number to [info@babyhealth.co.za](mailto:info@babyhealth.co.za)

### BESTMED HOTLINE, OPERATED BY KPMG

Should you be aware of any fraudulent, corrupt or unethical practices involving Bestmed members, service providers or employees, please report this anonymously to KPMG.

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