

2014 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 171 000 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** 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, but from 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 with out-of-hospital benefits provided by designated network providers only. The options in this category are Pulse1 and Pulse2.

For complete information about these options, please refer to the individual product leaflet or go to www.bestmed.co.za

CDL/non-CDL conditions list

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.

	Beat1♥	Beat2♥	Beat3♥	Beat4♥	Pace1♥	Pace2♥	Pace3♥	Pace4♥	Pulse1♥	Pulse2♥
Reimbursement for CDL	100% of Scheme tariff	100% of Scheme tariff	100% of Scheme tariff	100% of Scheme tariff	100% of Scheme tariff	100% of Scheme tariff	100% of Scheme tariff	100% of Scheme tariff	100% of Scheme tariff	100% of Scheme tariff
Reimbursement for non-CDL	N/A	N/A	85% of Scheme tariff	85% of Scheme tariff	85% of Scheme tariff	85% of Scheme tariff	85% of Scheme tariff	85% of Scheme tariff	N/A	100% of Scheme tariff
Non-formulary co-payment for CDL and non-CDL	35%	35%	35%	30%	35%	30%	25%	20%	35% for non-formulary medicines prescribed by a specialist	25%
No of non-CDL conditions	0	0	5	16	10	31	31	45	N/A	25
CDL 1	Addison's Disease	Addison's Disease	Addison's Disease	Addison's Disease	Addison's Disease	Addison's Disease	Addison's Disease	Addison's Disease	Addison's Disease	Addison's Disease
CDL 2	Asthma	Asthma	Asthma	Asthma	Asthma	Asthma	Asthma	Asthma	Asthma	Asthma
CDL 3	Bipolar Mood Disorder	Bipolar Mood Disorder	Bipolar Mood Disorder	Bipolar Mood Disorder	Bipolar Mood Disorder	Bipolar Mood Disorder	Bipolar Mood Disorder	Bipolar Mood Disorder	Bipolar Mood Disorder	Bipolar Mood Disorder
CDL 4	Bronchiectasis	Bronchiectasis	Bronchiectasis	Bronchiectasis	Bronchiectasis	Bronchiectasis	Bronchiectasis	Bronchiectasis	Bronchiectasis	Bronchiectasis
CDL 5	Cardiomyopathy	Cardiomyopathy	Cardiomyopathy	Cardiomyopathy	Cardiomyopathy	Cardiomyopathy	Cardiomyopathy	Cardiomyopathy	Cardiomyopathy	Cardiomyopathy
CDL 6	Chronic Renal Failure	Chronic Renal Failure	Chronic Renal Failure	Chronic Renal Failure	Chronic Renal Failure	Chronic Renal Failure	Chronic Renal Failure	Chronic Renal Failure	Chronic Renal Failure	Chronic Renal Failure
CDL 7	COPD	COPD	COPD	COPD	COPD	COPD	COPD	COPD	COPD	COPD
CDL 8	Congestive Heart Failure	Congestive Heart Failure	Congestive Heart Failure	Congestive Heart Failure	Congestive Heart Failure	Congestive Heart Failure	Congestive Heart Failure	Congestive Heart Failure	Congestive Heart Failure	Congestive Heart Failure
CDL 9	Coronary Artery Disease	Coronary Artery Disease	Coronary Artery Disease	Coronary Artery Disease	Coronary Artery Disease	Coronary Artery Disease	Coronary Artery Disease	Coronary Artery Disease	Coronary Artery Disease	Coronary Artery Disease
CDL 10	Crohn's Disease	Crohn's Disease	Crohn's Disease	Crohn's Disease	Crohn's Disease	Crohn's Disease	Crohn's Disease	Crohn's Disease	Crohn's Disease	Crohn's Disease
CDL 11	Diabetes Insipidus	Diabetes Insipidus	Diabetes Insipidus	Diabetes Insipidus	Diabetes Insipidus	Diabetes Insipidus	Diabetes Insipidus	Diabetes Insipidus	Diabetes Insipidus	Diabetes Insipidus
CDL 12	Diabetes Mellitus Type 1	Diabetes Mellitus Type 1	Diabetes Mellitus Type 1	Diabetes Mellitus Type 1	Diabetes Mellitus Type 1	Diabetes Mellitus Type 1	Diabetes Mellitus Type 1	Diabetes Mellitus Type 1	Diabetes Mellitus Type 1	Diabetes Mellitus Type 1
CDL 13	Diabetes Mellitus Type 2	Diabetes Mellitus Type 2	Diabetes Mellitus Type 2	Diabetes Mellitus Type 2	Diabetes Mellitus Type 2	Diabetes Mellitus Type 2	Diabetes Mellitus Type 2	Diabetes Mellitus Type 2	Diabetes Mellitus Type 2	Diabetes Mellitus Type 2
CDL 14	Dysrhythmias	Dysrhythmias	Dysrhythmias	Dysrhythmias	Dysrhythmias	Dysrhythmias	Dysrhythmias	Dysrhythmias	Dysrhythmias	Dysrhythmias
CDL 15	Epilepsy	Epilepsy	Epilepsy	Epilepsy	Epilepsy	Epilepsy	Epilepsy	Epilepsy	Epilepsy	Epilepsy
CDL 16	Glaucoma	Glaucoma	Glaucoma	Glaucoma	Glaucoma	Glaucoma	Glaucoma	Glaucoma	Glaucoma	Glaucoma
CDL 17	Haemophilia	Haemophilia	Haemophilia	Haemophilia	Haemophilia	Haemophilia	Haemophilia	Haemophilia	Haemophilia	Haemophilia
CDL 18	HIV/AIDS	HIV/AIDS	HIV/AIDS	HIV/AIDS	HIV/AIDS	HIV/AIDS	HIV/AIDS	HIV/AIDS	HIV/AIDS	HIV/AIDS
CDL 19	Hyperlipidaemia	Hyperlipidaemia	Hyperlipidaemia	Hyperlipidaemia	Hyperlipidaemia	Hyperlipidaemia	Hyperlipidaemia	Hyperlipidaemia	Hyperlipidaemia	Hyperlipidaemia
CDL 20	Hypertension	Hypertension	Hypertension	Hypertension	Hypertension	Hypertension	Hypertension	Hypertension	Hypertension	Hypertension
CDL 21	Hypothyroidism	Hypothyroidism	Hypothyroidism	Hypothyroidism	Hypothyroidism	Hypothyroidism	Hypothyroidism	Hypothyroidism	Hypothyroidism	Hypothyroidism
CDL 22	Multiple Sclerosis	Multiple Sclerosis	Multiple Sclerosis	Multiple Sclerosis	Multiple Sclerosis	Multiple Sclerosis	Multiple Sclerosis	Multiple Sclerosis	Multiple Sclerosis	Multiple Sclerosis
CDL 23	Parkinson's Disease	Parkinson's Disease	Parkinson's Disease	Parkinson's Disease	Parkinson's Disease	Parkinson's Disease	Parkinson's Disease	Parkinson's Disease	Parkinson's Disease	Parkinson's Disease
CDL 24	Rheumatoid Arthritis	Rheumatoid Arthritis	Rheumatoid Arthritis	Rheumatoid Arthritis	Rheumatoid Arthritis	Rheumatoid Arthritis	Rheumatoid Arthritis	Rheumatoid Arthritis	Rheumatoid Arthritis	Rheumatoid Arthritis
CDL 25	Schizophrenia	Schizophrenia	Schizophrenia	Schizophrenia	Schizophrenia	Schizophrenia	Schizophrenia	Schizophrenia	Schizophrenia	Schizophrenia
CDL 26	Systemic Lupus Erythematosus (SLE)	Systemic Lupus Erythematosus (SLE)	Systemic Lupus Erythematosus (SLE)	Systemic Lupus Erythematosus (SLE)	Systemic Lupus Erythematosus (SLE)	Systemic Lupus Erythematosus (SLE)	Systemic Lupus Erythematosus (SLE)	Systemic Lupus Erythematosus (SLE)	Systemic Lupus Erythematosus (SLE)	Systemic Lupus Erythematosus (SLE)
CDL 27	Ulcerative Colitis	Ulcerative Colitis	Ulcerative Colitis	Ulcerative Colitis	Ulcerative Colitis	Ulcerative Colitis	Ulcerative Colitis	Ulcerative Colitis	Ulcerative Colitis	Ulcerative Colitis
non-CDL 1										
non-CDL 2										
non-CDL 3										
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non-CDL 43										
non-CDL 44										
non-CDL 45										

2014 CONTRIBUTIONS												
OPTION	Principal Member				Adult Dependant			Child Dependant			Maximum Contribution Child Dependant*	Recognition of a Child Dependant
	Income Level	Risk	Savings	Total	Risk	Savings	Total	Risk	Savings	Total		
Beat1♥	N/A	R955	R0	R955	R742	R0	R742	R402	R0	R402	4	Under 21 unless registered student
Beat2♥	N/A	R955	R196	R1 151	R742	R152	R894	R402	R82	R484	4	Under 21 unless registered student
Beat3♥	N/A	R1 488	R305	R1 793	R1 057	R216	R1 273	R574	R118	R692	4	Under 21 unless registered student
Beat4♥	N/A	R2 124	R531	R2 655	R1 754	R439	R2 193	R526	R131	R657	4	Under 21 unless registered student
Pace1♥	N/A	R1 855	R523	R2 378	R1 302	R367	R1 669	R468	R132	R600	4	Under 21 unless registered student
Pace2♥	N/A	R2 752	R486	R3 238	R2 697	R476	R3 173	R606	R107	R713	4	Under 21 unless registered student
Pace3♥	< R98 500 p.a.	R2 596	R570	R3 166	R2 078	R456	R2 534	R481	R106	R587	4	Under 21 unless registered student
	> R98 501 p.a.	R3 119	R685	R3 804	R2 488	R546	R3 034	R522	R115	R637		
Pace4♥	N/A	R4 276	R132	R4 408	R4 276	R132	R4 408	R1 002	R31	R1033	4	Under 21 unless registered student
Pulse1♥	R0 – R5 500 p.m.	R940	R0	R940	R893	R0	R893	R564	R0	R564	N/A	Under 21 unless registered student
	R5 501 – R8 500 p.m.	R1 128	R0	R1 128	R1 072	R0	R1 072	R677	R0	R677		
	> R8 501 p.m.	R1 354	R0	R1 354	R1 218	R0	R1 218	R677	R0	R677		
Pulse2♥	N/A	R3 243	R0	R3 243	R3 243	R0	R3 243	R771	R0	R771	4	Under 21 unless registered student

*You only pay for a maximum of four children. All other children join as beneficiaries on the Scheme free of charge. This is not applicable to Pulse1.

Why choose Bestmed?

Bestmed celebrates its 50 year anniversary in 2014. It is a celebration of 50 years of raising the bar in the medical aid industry, 50 years of growing the Scheme's membership to reach fifth position in the industry, and 50 years of serving our members with the legendary Bestmed Touch.

A self-administered scheme, Bestmed now has more than 88 000 principal members and provides healthcare benefits to more than 171 000 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 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.

We are here to assist you to become a better version of yourself through choosing a healthier lifestyle.

Our wellness philosophy is based on the four basic pillars. We encourage our members to simply:

- Be Active:** Incorporate exercise as part of your daily schedule to ensure positive change.
- 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:** Try to make informed financial decisions and reduce your debt as much as possible.

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 and Actuarial Services. 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.

bestMed
Better living Better life.

2014
Comparative Guide

50 years

Contact Details

General
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Website: www.bestmed.co.za
Facebook: www.facebook.com/BestmedMedicalScheme
Twitter: @BestmedSocial

Walk-in facility

Block A, Glenfield Office Park
361 Oberon Avenue
Faerie Glen, Pretoria, 0081, RSA

Postal address

PO Box 2292, Arcadia, Pretoria, 0001, RSA

ER24 and international travel cover

Tel: 084 124

Hospital authorisation

Tel: 0800 22 0105
E-mail: authorisations@bestmed.co.za

Chronic medicine
Tel: 086 000 2378
E-mail: medicine@bestmed.co.za
Fax: 012 472 6760

Claims

Tel: 086 000 2378
E-mail: services@bestmed.co.za (queries)
claims@bestmed.co.za (claim submissions)

Bestmed Hotline, operated by KPMG

Should you be aware of any fraudulent, corrupt or unethical practices involving Bestmed or their staff, please report this anonymously to KPMG.

Hotline: 0801 11 0210 toll-free from any Telkom line
Hotfax: 0800 200 795
Hotmail: fraud@kpmg.co.za
Postal: KPMG Hotpost1, at BNT 371, PO Box 14671, Sinoville 0129



	Beat1♥	Beat2♥	Beat3♥	Beat4♥	Pace1♥	Pace2♥	Pace3♥	Pace4♥	Pulse1♥	Pulse2♥
IN-HOSPITAL BENEFITS (All benefits below are subject to pre-authorisation and clinical protocols)										
Accommodation (hospital stay) and theatre fees	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff at a Netcare DSP hospital.
Take home medicine	100% Scheme tariff. Limited to 7 days medicine.	100% Scheme tariff. Limited to 7 days medicine.	100% Scheme tariff. Limited to 7 days medicine.	100% Scheme tariff. Limited to 7 days medicine.	100% Scheme tariff. Limited to 7 days medicine.	100% Scheme tariff. Limited to 7 days medicine.	100% Scheme tariff. Limited to 7 days medicine.	100% Scheme tariff. Limited to 7 days medicine.	100% Scheme tariff. Limited to 7 days medicine.	100% Scheme tariff. Limited to 7 days medicine.
Treatment in mental health clinics	100% Scheme tariff. Limited to 21 days per beneficiary.	100% Scheme tariff. Limited to 21 days per beneficiary.	100% Scheme tariff. Limited to 21 days per beneficiary.	100% Scheme tariff. Limited to 21 days per beneficiary.	100% Scheme tariff. Limited to 21 days per beneficiary.	100% Scheme tariff. Limited to 21 days per beneficiary.	100% Scheme tariff. Limited to 21 days per beneficiary.	100% Scheme tariff. Limited to 21 days per beneficiary.	100% Scheme tariff. Limited to 21 days per beneficiary.	100% Scheme tariff. Limited to 21 days per beneficiary.
Treatment of chemical and substance abuse	100% Scheme tariff. Limited to 21 days or R18 600 per beneficiary.	100% Scheme tariff. Limited to 21 days or R18 600 per beneficiary.	100% Scheme tariff. Limited to 21 days or R18 600 per beneficiary.	100% Scheme tariff. Limited to 21 days or R18 600 per beneficiary.	100% Scheme tariff. Limited to 21 days or R18 700 per beneficiary.	100% Scheme tariff. Limited to 21 days or R19 700 per beneficiary.	100% Scheme tariff. Limited to 21 days or R19 700 per beneficiary.	100% Scheme tariff. Limited to 21 days or R19 700 per beneficiary.	100% Scheme tariff. Limited to 21 days or R20 400 per beneficiary.	100% Scheme tariff. Limited to 21 days or R17 500 per beneficiary.
Consultations and procedures	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.
Surgical procedures and anaesthetics	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff. Excluded from benefits: functional nasal surgery, surgery for medical conditions e.g. Epilepsy, Parkinsonism etc and procedures where stimulators are used.
Organ transplants	100% Scheme tariff. (Only PMBs).	100% Scheme tariff. (Only PMBs).	100% Scheme tariff. (Only PMBs).	100% Scheme tariff. (Only PMBs).	100% Scheme tariff. (Only PMBs).	100% Scheme tariff. (Only PMBs).	100% Scheme tariff. (Only PMBs).	100% Scheme tariff. (Only PMBs).	100% Scheme tariff. (Only PMBs).	100% Scheme tariff.
Dentistry: Maxillo-facial surgery strictly related to certain conditions	100% Scheme tariff. Limited to R8 800 per family.	100% Scheme tariff. Limited to R8 800 per family.	100% Scheme tariff. Limited to R8 800 per family.	100% Scheme tariff. Limited to R8 800 per family.	100% Scheme tariff. Limited to R9 000 per family.	100% Scheme tariff. Limited to R9 000 per family.	100% Scheme tariff. Limited to R9 000 per family.	100% Scheme tariff. Limited to R9 000 per family.	100% Scheme tariff. Limited to R9 000 per family.	No benefit.
Prosthesis (Subject to preferred provider, else limits and co-payments apply)	100% of cost. Limited to R52 000 per family.	100% of cost. Limited to R52 000 per family.	100% of cost. Limited to R52 000 per family.	100% of cost. Limited to R52 000 per family.	100% of cost. Limited to R63 800 per family.	100% of cost. Limited to R76 700 per family.	100% of cost. Limited to R76 700 per family.	100% of cost. Limited to R76 700 per family.	100% of cost. Limited to R88 200 per family.	100% of cost. Limited to R93 000 per family.
Prosthesis - Internal	Sub-limits per beneficiary: • Vascular R19 700 • Endovascular - no benefit • Spinal R19 700 • Artificial disk (single level based) - no benefit • Drug eluting stents - no benefit • Mesh R6 900 • Gynaecology / Urology R5 700 • Lens implants R4 400 per lens	Sub-limits per beneficiary: • Vascular R19 700 • Endovascular - no benefit • Spinal R19 700 • Artificial disk (single level based) - no benefit • Drug eluting stents - no benefit • Mesh R6 900 • Gynaecology / Urology R5 700 • Lens implants R4 400 per lens	Sub-limits per beneficiary: • Vascular R19 700 • Endovascular - no benefit • Spinal R19 700 • Artificial disk (single level based) - no benefit • Drug eluting stents - no benefit • Mesh R6 900 • Gynaecology / Urology R5 700 • Lens implants R4 400 per lens	Sub-limits per beneficiary: • Vascular R20 900 • Endovascular - no benefit • Spinal R20 900 • Artificial disk (single level based) - no benefit • Drug eluting stents - no benefit • Mesh R7 700 • Gynaecology / Urology R5 700 • Lens implants R4 400 per lens • Joint replacements: - Hip replacement and other major joints R21 500 - Knee replacement R28 600 - Other minor joints R8 800	Sub-limits per beneficiary: • Vascular R21 000 • Endovascular - no benefit • Spinal R21 000 • Artificial disk (single level based) - no benefit • Drug eluting stents - no benefit • Mesh R7 700 • Gynaecology / Urology R5 700 • Lens implants R4 400 per lens • Joint replacements: - Hip replacement and other major joints R21 500 - Knee prosthesis R38 300 - Other minor joints R14 200	Sub-limits per beneficiary: • Vascular R27 400 • Spinal R27 400 • Artificial disk (single level based) R12 000 • Drug eluting stents R12 000 • Mesh R12 000 • Gynaecology / Urology R9 000 • Lens implants R7 700 per lens • Joint replacements: - Hip replacement and other major joints R32 900 - Knee prosthesis R38 300 - Other minor joints R14 200	Sub-limits per beneficiary: • Vascular R27 400 • Spinal R27 400 • Artificial disk (single level based) R12 000 • Drug eluting stents R12 000 • Mesh R12 000 • Gynaecology / Urology R9 000 • Lens implants R7 700 per lens • Joint replacements: - Hip replacement and other major joints R32 900 - Knee prosthesis R38 300 - Other minor joints R14 200	Sub-limits per beneficiary: • Vascular R31 200 • Spinal R31 200 • Artificial disk (single level based) R14 000 • Drug eluting stents R14 000 • Mesh R12 400 • Gynaecology / Urology R10 200 • Lens implants R11 300 per lens • Joint replacements: - Hip replacement and other major joints R37 600 - Knee prosthesis R43 500 - Other minor joints R14 000	Sub-limits per beneficiary: • Vascular R16 500 • Endovascular - no benefit • Spinal R16 500 • Artificial disk (single level based) R11 300 • Drug eluting stents - no benefit • Mesh R6 000 • Gynaecology / Urology R5 000 • Lens implants R3 500 per lens	Sub-limits per beneficiary: • Vascular R25 800 • Spinal R25 800 • Artificial disk (single level based) R11 300 • Drug eluting stents R11 300 • Mesh R11 300 • Gynaecology / Urology R8 400 • Lens implants R7 200 per lens • Joint replacements: - Hip replacement and other major joints R30 900 - Knee prosthesis R36 100 - Other minor joints R13 400
Prosthesis - external	R12 600 per family.	R12 600 per family.	R12 600 per family.	R15 900 per family.	R15 400 per family.	R18 100 per family.	R18 100 per family.	R20 400 per family.	No benefit.	R17 000 per family.
Orthopaedic and medical appliances	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% of cost. Limited to R4 300 per family.	100% Scheme tariff.
Pathology	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.
Diagnostic imaging	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.
Specialised diagnostic imaging	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.
Oncology	Oncology Programme. 100% Scheme tariff.	Oncology Programme. 100% Scheme tariff.	Oncology Programme. 100% Scheme tariff.	Oncology Programme. 100% Scheme tariff.	Oncology Programme. 100% Scheme tariff.	Oncology Programme. 100% Scheme tariff.	Oncology Programme. 100% Scheme tariff.	Oncology Programme. 100% Scheme tariff.	Oncology Programme. 100% Scheme tariff.	Oncology Programme. 100% Scheme tariff.
Peritoneal dialysis and haemodialysis	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.
Confinements	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.
Midwife assisted births	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.
Supplementary services	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.
Alternatives to hospitalisation	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.	100% Scheme tariff.
Emergency evacuation	100% of cost. Rendered and pre-authorised by ER24.	100% of cost. Rendered and pre-authorised by ER24.	100% of cost. Rendered and pre-authorised by ER24.	100% of cost. Rendered and pre-authorised by ER24.	100% of cost. Rendered and pre-authorised by ER24.	100% of cost. Rendered and pre-authorised by ER24.	100% of cost. Rendered and pre-authorised by ER24.	100% of cost. Rendered and pre-authorised by ER24.	100% of cost. Rendered and pre-authorised by ER24.	100% of cost. Rendered and pre-authorised by ER24.
Exclusions (Prosthesis limit subject to preferred provider, else limits and co-payments apply)	Joint replacement surgery. (except for PMBs) PMBs subject to prosthesis limits: • Hip replacement and other major joints R20 800 • Knee replacement R25 700 • Other minor joints R8 800	Joint replacement surgery. (except for PMBs) PMBs subject to prosthesis limits: • Hip replacement and other major joints R20 800 • Knee replacement R25 700 • Other minor joints R8 800	Joint replacement surgery. (except for PMBs) PMBs subject to prosthesis limits: • Hip replacement and other major joints R20 800 • Knee replacement R25 700 • Other minor joints R8 800	N/A	Joint replacement surgery. (except for PMBs) PMBs subject to prosthesis limits: • Hip replacement and other major joints R21 500 • Knee replacement R28 600 • Other minor joints R8 800	N/A	N/A	N/A	N/A	Joint replacement surgery. (except for PMBs) PMBs subject to prosthesis limits: • Hip replacement and other major joints R17 000 • Knee replacement R21 500 • Other minor joints R8 000
Co-payments	Co-payment of R2 200 on all endoscopic investigations. If done in Doctor rooms (out-of-hospital) no co-payment.	Co-payment of R2 200 on all endoscopic investigations. If done in Doctor rooms (out-of-hospital) no co-payment.	Co-payment of R2 200 on all endoscopic investigations. If done in Doctor rooms (out-of-hospital) no co-payment.	N/A	N/A	N/A	N/A	N/A	Co-payments where procedure has been clinically approved. R2 500 on all laparoscopic procedures, R2 500 on prostate procedures, R2 500 on procedures for prolapse/incontinence, R2 500 on arthroscopy other than acute trauma, R2 000 on endoscopy investigations done primarily in hospital. Co-payment of up to R5 000 per event for voluntary use of a non-DSP hospital.	Co-payment of up to R5 000 per event for voluntary use of a non-DSP hospital.

OUT-OF-HOSPITAL BENEFITS

Day-to-day limits	N/A	N/A	N/A	M = R8 800, M1+ = R17 500.	M = R7 600, M1+ = R15 200.	M = R10 500, M1+ = R21 500.	N/A	M = R24 700, M1+ = R39 800.	N/A	M = R1 000, M1+ = R20 000.
GP and Specialist consultations	N/A	Savings account.	Savings account.	Savings first. Limited M = R2 200, M1+ = R3 800. (Subject to day-to-day overall limit)	Limited M = R1 500, M1+ = R3 100. (Subject to day-to-day overall limit)	Limited M = R2 900, M1+ = R5 900. (Subject to day-to-day overall limit)	Savings first. M = R2 400, M1+ = R7 000.	Limited M = R3 700, M1+ = R6 000. (Subject to day-to-day overall limit)	Subject to Provider Network. Unlimited GP visits. Three specialist visits, R1 000 per visit per family (Bestmed approval and tariff), pre-authorisation and referral by NP required. Out-of-network visits with a GP limited to R1 000 per family per year.	Unlimited GP visits. Specialist consultations within the Specialist network must be referred and approved by NP. Limited M = R2 000, M1+ = R4 000. (Subject to day-to-day overall limit). Two out of Network GP visits per family limited to R1 000 per year as approved by NP.
Basic and specialised dentistry	N/A	Basic: According to preventative benefit or Savings account. Specialised: Savings account.	Basic: According to preventative benefit or Savings account. Specialised: Savings account.	Savings first. Limited M = R3 300, M1+ = R6 600. (Subject to day-to-day overall limit)	Limited M = R2 500, M1+ = R5 000. (Subject to day-to-day overall limit)	Limited M = R4 100, M1+ = R8 300. (Subject to day-to-day overall limit)	Basic: Subject to Savings account. Specialised: Savings first. 100% of Scheme tariff, orthodontics are subject to pre-authorisation, limited to M = R4 400, M1+ = R7 600.	Limited M = R7 300, M1+ = R12 400. (Subject to day-to-day overall limit)	Basic: Subject to Provider Network. Specialised: No benefit.	Basic: According to NP tariff list (Subject to day-to-day overall limit). Specialised: 100% of Scheme tariff, subject to pre-authorisation and day-to-day benefit. Limited to M = R4 400, M1+ = R5 600.
Medical aids, apparatus and appliances	N/A	Savings account.	Savings account.	100% of cost limited to R7 700 per family. (Subject to day-to-day overall limit)	100% of cost limited to R7 700 per family. (Subject to day-to-day overall limit)	Limited to R18 200 per family. Sub-limit on wheel chairs = R9 300 per family per 48 months. Sub-limit on hearing aids = R19 700 per family.	Limited to R20 300 per family. Sub-limit on wheel chairs = R9 300 per family per 48 months. Sub-limit on hearing aids = R19 700 per family.	Limited to R22 000 per family. Sub-limit on wheel chairs = R9 100 per family per 48 months. Sub-limit on hearing aids = R21 500 per family.	Subject to Provider Network.	Limited to R17 000 per family. Sub-limit on wheel chairs = R8 800 per family. Sub-limit on hearing aids = R16 500 per family.
Supplementary services	N/A	Savings account.	Savings account.	Savings first. Limited M = R3 300, M1+ = R6 600. (Subject to day-to-day overall limit)	Limited M = R3 000, M1+ = R6 100. (Subject to day-to-day overall limit)	Limited M = R3 700, M1+ = R7 300. (Subject to day-to-day overall limit)	Savings account.	Limited M = R3 700, M1+ = R7 300. (Subject to day-to-day overall limit)	No benefit.	Limited M = R2 800, M1+ = R5 600. (Subject to day-to-day overall limit)
Wound care benefit (incl. dressings and NPWT treatment/UAC therapy) and related nursing services - out of Hospital	Limited to R2 300 per family.	Limited to R2 300 per family.	Limited to R2 300 per family.	Limited to R3 300 per family. (Subject to day-to-day overall limit)	Limited to R2 400 per family. (Subject to day-to-day overall limit)	Limited to R4 600 per family. (Subject to day-to-day overall limit)	Limited to R7 000 per family.	Limited to R9 100 per family. (Subject to day-to-day overall limit)	Subject to Provider Network.	Limited to R6 600 per family.
Optometry services, frames and other (lenses)	N/A	Savings account.	PPN: • Consultation • Single vision • Bifocal lenses • Multifocal lenses • Frame R500 • Contact lenses R1 210	PPN: • Consultation • Single vision • Bifocal lenses • Multifocal lenses • Frame R500 • Contact lenses R1 210	PPN: • Consultation • Single vision • Bifocal lenses • Multifocal lenses • Frame R150 • Contact lenses R450	PPN: • Consultation • Single vision • Bifocal lenses • Multifocal lenses • Frame R500 • Contact lenses R1 210	PPN: • Consultation • Single vision • Bifocal lenses • Multifocal lenses • Frame R500 • Contact lenses R1 210	Limited M = R3 700, M1+ = R7 300. (Subject to day-to-day overall limit)	Subject to CareCross protocols.	Subject to Optical Management Programme. Limited M = R2 800, M1+ = R4 400. (Subject to day-to-day overall limit)
Diagnostic imaging and pathology	N/A	Savings account.	Savings account.	Savings first. Limited M = R2 200, M1+ = R4 400. (Subject to day-to-day overall limit)	Limited M = R2 200, M1+ = R4 400. (Subject to day-to-day overall limit)	Limited M = R2 200, M1+ = R4 400. (Subject to day-to-day overall limit)	Savings first. M = R2 400, M1+ = R4 700.	Limited M = R3 700, M1+ = R7 300. (Subject to day-to-day overall limit)	Subject to Provider Network.	Subject to NP protocols and tariff list. Pre-authorisation required. (Subject to day-to-day overall limit)
Maternity benefits	N/A	Savings account.	2 sonars and up to 12 antenatal consultations.	2 sonars and up to 12 antenatal consultations.	2 sonars and up to 12 antenatal consultations. (subject to day-to-day overall limit)	Combined limit included in GP and Specialist benefits.	Combined limit included in GP and Specialist benefits.	Combined limit included in GP and Specialist benefits.	Subject to Provider Network.	Combined limit included in GP and Specialist benefits.
Specialised diagnostic imaging	N/A	Savings account.	100% Scheme tariff. Limited to R7 400 per family.	100% Scheme tariff. Limited to R11 000 per family.	100% Scheme tariff. Limited to R9900 per family.	Subject to pre-authorisation. MRI/CT scans: Maximum of three scans per beneficiary. PET scan: One scan per beneficiary. 100% Scheme tariff.	Subject to pre-authorisation. MRI/CT scans: Maximum of three scans per beneficiary. PET scan: One scan per beneficiary. 100% Scheme tariff.	Subject to pre-authorisation. MRI/CT scans: Maximum of three scans per beneficiary. PET scan: One scan per beneficiary. 100% Scheme tariff.	No benefit.	Subject to pre-authorisation. MRI/CT scans: Maximum of three scans per beneficiary. PET scan: One scan per beneficiary. N/A
Rehabilitation services after trauma	N/A	Savings account.	Savings account.	Savings account.	Bonus account.				No benefit.	

MEDICINE

(All benefits below are subject to pre-authorisation, formularies, funding guidelines and MRP/MMAP)										
Non-CDL chronic	N/A	Savings account.	5 conditions. 85% of Scheme tariff. Limited to M = R2 400, M1+ = R4 800. Co-payment of 35% for non-formulary medicine.	16 conditions. 85% of Scheme tariff. Limited to M = R6 500, M1+ = R12 900. Co-payment of 30% for non-formulary medicine.	10 conditions. 85% of Scheme tariff. Limited to M = R5 300, M1+ = R11 600. Co-payment of 35% for non-formulary medicine.	31 conditions. 85% of Scheme tariff. Limited to M = R8 800, M1+ = R16 600. Co-payment of 20% for non-formulary medicine.	31 conditions. 85% of Scheme tariff. Limited to M = R2 800, M1+ = R5 600. Co-payment of 25% for non-formulary medicine.	45 conditions. 85% of Scheme tariff. Limited to M = R17 200, M1+ = R34 400. Co-payment of 20% for non-formulary medicine.	No benefit.	25 conditions. 100% of Scheme tariff, if prescribed by a NP. Limited to M = R5 000, M1+ = R12 000. Co-payment of 25% for non-formulary medicine.
CDL chronic	100% of Scheme tariff. Co-payment of 35% for non-formulary medicine.	100% Scheme tariff. Co-payment of 35% for non-formulary medicine.	100% of Scheme tariff. Co-payment of 35% for non-formulary medicine.	100% of Scheme tariff. Co-payment of 30% for non-formulary medicine.	100% Scheme tariff. Co-payment of 35% for non-formulary medicine.	100% Scheme tariff. Co-payment of 30% for non-formulary medicine.	100% Scheme tariff. Co-payment of 25% for non-formulary medicine.	100% Scheme tariff. Co-payment of 20% for non-formulary medicine.	Unlimited. Subject to Provider Network. Formulary and reference price. Co-payment of 35% for non-formulary medicines prescribed by a specialist.	100% Scheme tariff. Co-payment of 25% for non-formulary medicine.
Biological	N/A	No benefit.	No benefit.	No benefit.	No benefit.	Limited to R110 000 per beneficiary.	Limited to R219 000 per beneficiary.	Limited to R322 500 per beneficiary.	No benefit.	Limited to R103 000 per beneficiary.
Acute	N/A	Savings account.	Savings account.	Savings first. Limited M = R2 000, M1+ = R4 000. (Subject to day-to-day overall limit)	Limited M = R1 700, M1+ = R3 400. (Subject to day-to-day overall limit)	Limited M = R3 400, M1+ = R6 800. (Subject to day-to-day overall limit)	Savings first. Once depleted then limited to M = R880, M1+ = R2 300.	Limited M = R5 800, M1+ = R9 100. (10% co-payment) (Subject to day-to-day overall limit)	Unlimited as prescribed by NP.	Subject to Provider Network. Limited M = R3 200, M1+ = R6 400. (Subject to day-to-day overall limit)
Over-the-counter (OTC)	N/A	Savings account.	Savings account.	Savings account.	Limited to R550 per family. (Subject to day-to-day acute medicine limit)	Limited to R1 100 per family. (Subject to day-to-day acute medicine limit and bonus account)	Savings account.	Limited to R1 100 per family. (Subject to day-to-day acute medicine limit)	Limited to 3 events per beneficiary or 5 per family. DSP Pharmacy CareCross OTC formulary.	Limited to R1 000 per family. (Subject to day-to-day acute medicine limit)

PREVENTATIVE CARE BENEFITS

Preventative benefits	Flu vaccines, Pneumonia Programme, Paediatric immunisations, Female contraceptives - R1 400 pfpa, DBC Programme, Biometric screenings	Flu vaccines, Pneumonia Programme, Paediatric immunisations, Female contraceptives - R1 400 pfpa, DBC Programme, Biometric screenings, Preventative dentistry (incl. gloves and sterile equip)	Flu vaccines, Pneumonia Programme, Paediatric immunisations, Female contraceptives - R1 400 pfpa, DBC Programme, Biometric screenings, Preventative dentistry (incl. gloves and sterile equip), Pap smear	Flu vaccines, Pneumonia Programme, Paediatric immunisations, Female contraceptives - R1 400 pfpa, DBC Programme, Biometric screenings, Preventative dentistry (incl. gloves and sterile equip), Pap smear, Hib titre, Mammogram, HPV vaccinations	Flu vaccines, Pneumonia Programme, Paediatric immunisations, Female contraceptives - R1 400 pfpa, DBC Programme, Biometric screenings, Preventative dentistry (incl. gloves and sterile equip), Pap smear, Hib titre, Mammogram, PSA, HPV vaccinations	Flu vaccines, Pneumonia Programme, Paediatric immunisations, Female contraceptives - R1 400 pfpa, DBC Programme, Biometric screenings, Preventative dentistry (incl. gloves and sterile equip), Pap smear, Hib titre, Mammogram, PSA, HPV vaccinations	Flu vaccines, Pneumonia Programme, Paediatric immunisations, Female contraceptives - R1 400 pfpa, DBC Programme, Biometric screenings, Preventative dentistry (incl. gloves and sterile equip), Pap smear, Hib titre, Mammogram, PSA, HPV vaccinations, Bone densitometry	Flu vaccines, Pneumonia Programme, Paediatric immunisations, Female contraceptives - R1 400 pfpa, DBC Programme, Biometric screenings, Preventative dentistry (incl. gloves and sterile equip), Pap smear, Hib titre, Mammogram, PSA, HPV vaccinations, Bone densitometry	Flu vaccine via NP, Pneumonia Programme, Paediatric immunisations, Biometric screenings	Flu vaccine via NP, Pneumonia Programme, Paediatric immunisations, DBC Programme, Biometric screenings
Method of Scheme benefit payment	In-hospital services are paid from Scheme risk and out-of-hospital services will be paid from the member's own account. Preventative care available from Scheme risk.	In-hospital services are paid from Scheme risk and out-of-hospital services will be paid from the Savings account. Preventative care available from Scheme risk.	In-hospital services are paid from Scheme risk and others will be paid from the Savings account. Preventative care available from Scheme risk.	In-hospital services are paid from Scheme risk. Some out-of-hospital services are paid from the annual savings first and once depleted will pay from Scheme risk. Preventative care available from Scheme risk.	In-hospital services are paid from Scheme risk. Out-of-hospital services are paid from the monthly savings first and once depleted will pay from Scheme risk. Preventative care available from Scheme risk.	In-hospital services are paid from Scheme risk. Out-of-hospital services are paid from the monthly savings first and once depleted will pay from Scheme risk. Preventative care available from Scheme risk.	In-hospital services are paid from Scheme risk. Some out-of-hospital services are paid from the annual savings first and once depleted will pay from Scheme risk.	In-hospital services are paid from Scheme risk. Some out-of-hospital services are paid from the annual savings first and once depleted will pay from Scheme risk.	In-hospital services, out-of-hospital services and preventative care are paid from Scheme risk.	In-hospital services are paid from Scheme risk. The NP, CareCross, receives a capitation fee to pay all out-of-hospital services. Preventative care available from Scheme risk.

Disclaimer on exclusions: General and option specific exclusions apply. Please refer to www.bestmed.co.za for more detail.

Abbreviations:

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; MMAP = Maximum Medical Aid Price; MRI/CT scans = Magnetic Resonance Imaging/Computed Tomography scans; MRP = Medisor Reference Price; NP = Network Provider; PET scan = Positron Emission Tomography scan; PMB = Prescribed Minimum Benefits; PPN = Preferred Provider Negotiators; PSA = Prostate Specific Antigen.