



Schedule of *Benefits* 2020

*Applicable 1 January 2020 to
31 December 2020.*

Please read in conjunction with the Information Guide and Rules of the Scheme available at www.profmed.co.za or by calling 0860 679 200.



PROFMED

2020



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Contribution Tables

SAVVY

Monthly Income R0 - R5 000					
	ProPinnacle*	ProSecure Plus*	ProSecure*	ProActive Plus	ProActive
Principal member	R7 360	R4 231	R2 494	R1 923	R690
Adult dependant	R6 828	R3 915	R2 494	R1 787	R690
Child	R2 208	R1 649	R1 130	R750	R471

Monthly Income R5 001 - R9 000					
	ProPinnacle*	ProSecure Plus*	ProSecure*	ProActive Plus	ProActive
Principal member	R7 360	R4 231	R2 494	R1 923	R1 218
Adult dependant	R6 828	R3 915	R2 494	R1 787	R1 218
Child	R2 208	R1 649	R1 130	R750	R545

Monthly Income R9 001 +					
	ProPinnacle*	ProSecure Plus*	ProSecure*	ProActive Plus	ProActive
Principal member	R7 360	R4 231	R3 467	R1 923	R1 634
Adult dependant	R6 828	R3 915	R3 210	R1 787	R1 510
Child	R2 208	R1 649	R1 354	R750	R636

PREMIUM

	ProPinnacle*	ProSecure Plus*	ProSecure*	ProActive Plus	ProActive
Principal member	R8 178	R4 702	R3 852	R2 136	R1 816
Adult dependant	R7 586	R4 350	R3 567	R1 986	R1 678
Child	R2 453	R1 832	R1 505	R833	R707

* ProSecure, ProSecure Plus and ProPinnacle (Premium and Savvy) options: Only pay for the first 3 child dependants. Additional child dependants will be covered for free.

Notes:

1. Members applying for the rates below R9 000 monthly income must submit proof of gross monthly income from all sources.
2. If a member registers his spouse or partner as a dependant, proof of the higher of the member's or spouse's or partner's income from all sources must be provided, i.e. latest three months' bank statements of all bank accounts, a tax directive from SARS or the latest tax return. Proof of income must be provided to the Scheme annually by end-February.
3. Adult dependant rates apply from age 21. If the dependant is studying and is dependent on the principal member, child rates apply up to age 28. Thereafter, rates will default to adult dependant rates. Proof of dependence, i.e. latest three month's bank statements of all bank accounts, and annual proof of study, i.e. proof of registration from academic institution, must be provided to the Scheme in terms of 3 above. If proof is not received annually by the Scheme by end-February, rates will default to adult dependant rates. It is the responsibility of the Member to submit proof of study and dependence annually by end February, failing which contributions will be amended accordingly, with effect from 1 March.
4. Members on the ProSecure, ProSecure Plus and ProPinnacle (Premium and Savvy) options only pay contributions for up to 3 child dependants. Additional child dependants will be covered for free.

Get in touch

IMPORTANT TELEPHONE NUMBERS

	Within RSA	Outside RSA	Fax
Client Services & Claims (no faxed claims)	0860 679 200	+27 12 679 4144	–
Chronic Disease & Medication Authorisations (treating doctor and pharmacists only)	0800 132 345	+27 11 770 6000	–
Hospital & Specialised Radiology Authorisations	0860 776 363	+27 12 679 4145	+27 12 679 4438
International Travel Medical Assistance:			
• For emergency medical assistance	–	+27 11 541 1225	–
• For enquiries	0860 679 200	–	–
Disease Management Authorisations	0860 776 363	+27 12 679 4145	+27 12 679 4438
Dental Authorisations	0860 679 200	+27 12 679 4144	+27 12 679 4411
Profmed Baby	0860 776 363	–	–





E-mail Us

Within and Outside RSA	
Client Services & General	info@profmed.co.za
Claims (no faxed claims)	claims@profmed.co.za
International Travel Claims	internationalclaims@profmed.co.za
International Travel Enquiries	internationalinfo@profmed.co.za
Profmed Baby Enquiries	profmedbaby@profmed.co.za

Emergency Telephone Numbers

	Within RSA	Outside RSA
Emergency medical assistance outside RSA	0860 679 200	+27 11 541 1225
Emergency medical assistance within RSA	082 911	–
Assistance for trauma and HIV exposure	0861 776 363	–

Connect With Us

	Facebook http://www.facebook.com/Profmed
	LinkedIn http://www.linkedin.com/company/profmed
	Download the Profmed App from your smartphone store
	Twitter https://twitter.com/Profmed_SA



What's what

DEFINITIONS

Member	The principal member of the Scheme in terms of the rules
Beneficiary	The member and any of his/her dependants registered on the Scheme entitled to receive benefits in terms of the rules
Family	The total constitution of a member and his/her dependants registered on the Scheme in terms of the rules
M	Member
M+1	Member plus one dependant
M+2	Member plus two dependants
M+3	Member plus three dependants
Maximum	Maximum benefit payable for a family larger than the family sizes indicated for a particular benefit
"Off-label"	Medication utilised for a condition for which it is not specifically registered
Single Exit Price	The retail price of medication as determined by legislation

Day-to-day Limit

Annual overall limit imposed on specific acute, out-of-hospital benefits. Sub-limits on these benefits are subject to availability of funds in the annual overall day-to-day limit. Funds in the annual overall limit can only be accessed through the relevant available sub-limits, where applicable.

Prescribed Minimum Benefits (PMBs)

The minimum benefit a scheme is required to cover in respect of the diagnosis and treatment of the 270 conditions, as required by legislation. This Schedule of Benefits is subject to the provisions of the Medical Schemes Act No. 131 of 1998 and Regulations relating to the prescribed minimum benefits. Profmed provides cover for 270 conditions listed in the PMBs as well as the 26 chronic conditions listed in the Chronic Disease List (CDL) in accordance with the provisions of the Act and Regulations.

The 26 prescribed chronic conditions include the following: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus and Ulcerative Colitis. The diagnosis, treatment and care costs of these conditions will be paid in full provided these services are obtained from Profmed's designated service provider networks, where applicable. However, if such services are obtained **voluntarily** from a provider other than a DSP, the member will be liable for the balance of the account or the balance will be deducted from the relevant day-to-day benefit, subject to availability of funds. If the service is **involuntarily** obtained from a provider other than a DSP, the service will be paid in terms of the PMB legislation.

All PMB treatment will be subject to the application of treatment protocols and formularies, which will be more or less restrictive depending on the option chosen by the member. Costs in respect of PMBs that exceed the formulary, reference pricing, rules and protocols will be the responsibility of the member.

Designated Service Provider (DSP)/Designated Service Provider Network (DSPN)

A healthcare service provider (DSP) or network of healthcare service providers (DSPN) who are contracted by the Scheme to provide diagnosis, services, treatment, medicine or facilities to members in terms of both PMBs and non-PMBs at a negotiated rate. Services obtained from a non-DSP will be reimbursed at the rate negotiated by Profmed with the DSPN.

Pre-authorisation

Pre-authorisation must be obtained for hospitalisation and certain major medical treatment and procedures. Pre-authorisation is not a guarantee of payment and benefits are paid in accordance with the relevant protocols and Scheme rules, subject to availability of funds. Authorised services or treatment must commence within three months of authorisation, after which the authorisation is no longer valid. Authorisation does not include the fees charged by the attending medical practitioners.

It is the member's responsibility to obtain pre-authorisation, which should be obtained at least seven days prior to the commencement of treatment or services. In case of emergencies that occur after hours or on weekends and public holidays, authorisation must be obtained the next working day.

Profmed does not prescribe the treatment members should undergo, but will only fund treatment in accordance with the Scheme rules and protocols and that is clinically appropriate and evidence based, subject to PMB legislation.

SADC Region

The region known as the Southern African Development Community, namely Angola, Botswana, Comores, Democratic Republic of the Congo, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, Swaziland, Tanzania (including Zanzibar), Zambia and Zimbabwe.

TARIFF DESCRIPTIONS

Services obtained at a tariff higher than that provided on any given option will be paid at the tariff specific to each option, subject to PMB legislation.

Profmed Tariff	The Scheme's base tariff, calculated using the 2019 Profmed Tariff plus 3.5% increase
Negotiated Tariff	Negotiated by Profmed with particular providers and the various hospital groups and specific to each group
Savvy Tariff	Negotiated by Profmed with the hospital Designated Service Provider Network (DSPN)
Specific Tariff	Consultations and procedures paid at specific Rand values
Optical Tariff	DSPN tariff negotiated by Opticlear with registered optical service providers nationally

DESIGNATED SERVICE PROVIDERS

Members will be required to make use of designated service providers to avoid co-payments on services rendered for the relevant benefits, subject to PMB legislation. The designated service providers apply to both Premium and Savvy options.

Cataract Surgery	Ophthalmic Risk Management (ORM)
Chronic Dialysis	National Renal Care, Life Healthcare
Day-to-day (PMBs and non-PMBs)	No DSPN, subject to rules and protocols
Domiciliary (Home) Oxygen	Ecomed Medical cc
Emergency Medical Transport (within RSA)	Netcare 911
Endoscopic Examinations	Netcare, Life Healthcare, Clinix, National Hospital Network (NHN) and Mediclinic
Hospitalisation: Premium Options (PMBs and non-PMBs)	No DSPN, with the exception of benefits for psychiatric hospitalisation, drug and alcohol rehabilitation, physical rehabilitation and endoscopic examinations, subject to pre-authorisation, rules and protocols
Hospitalisation: Savvy Options (PMBs and non-PMBs)	Mediclinic, Life Healthcare and other specified hospitals, as listed on the website www.profmed.co.za , with exception of benefits for psychiatric hospitalisation, drug and alcohol rehabilitation, physical rehabilitation and endoscopic examinations, subject to pre-authorisation, rules and protocols
International Travel Medical Assistance	International SOS
Medication/Pharmacy	Profmed Pharmacy Network, subject to rules, formulary, reference pricing and protocols
Oncology	<ul style="list-style-type: none"> • Chemotherapy and biologicals: Dis-Chem Pharmacy and Medipost • PET Scans: Bloch & Partners at Morningside Clinic (applies to greater Johannesburg region only) • Radiation: Participating Netcare facilities
Optical	Opticlear
Preventative Care	Pathology: Ampath, Lancet Laboratories and Pathcare
Psychiatric Hospitalisation	Akeso (Netcare), Denmar (Mediclinic), Participating National Hospital Network (NHN) facilities and Life Healthcare
Rehabilitation	<ul style="list-style-type: none"> • Alcohol and Drugs: South African National Council on Alcoholism and Drug Dependence (SANCA) • Physical: Life Healthcare
Trauma and HIV Assistance Programme	Lifesense

The exceptions

SCHEME EXCLUSIONS

Please refer to Annexure C of the Scheme Rules and the Information Guide, which are available on the website, for expenses not covered by the Scheme.

BENEFIT LIMITATIONS

Benefit limits are applicable for a benefit year, unless stated otherwise. Claims must be submitted within four months from the date of service, after which they are considered as stale claims and will not be paid. Claims are funded subject to the availability of funds at the time the claim is processed by the Scheme and funds are not reserved for any specific claim.

Members registered on the Premium Options may use any hospital of their choice, except where stipulated for specific services/treatment. Refer to the Designated Service Provider Networks (DSPN) on page 7.

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
1. HOSPITAL AND HOSPITAL-RELATED BENEFITS AND MAJOR MEDICAL EXPENSES					
1A Hospitalisation Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits.					
1A1 Hospital ward accommodation (Subject to pre-authorisation)	100% Negotiated Tariff in private ward	100% Negotiated Tariff in general ward		100% Negotiated Tariff in general ward	
1A2 Theatre and recovery room	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1A3 Intensive care and high care (Subject to confirmation every 72 hours)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1A4 Emergency room visits and facility fees at hospitals that result in hospitalisation	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1B Medicines in Hospital					
1B1 Medicines and materials used in hospital and theatre	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1B2 Medicines taken out of hospital on discharge (Benefit limited to a 7-day supply) (See Section 5B1) (Subject to use of the Pharmacy DSPN)	80% Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds	80% Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds		80% Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds	Subject to PMB legislation
1C General Practitioners (GPs) and Specialists in Hospital					
1C1 Surgery and in-hospital procedures	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	200% Profmed Tariff	100% Specific Tariff
1C2 Consultations by a GP or specialist while hospitalised	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	200% Profmed Tariff	100% Specific Tariff
1D Radiology and Pathology in Hospital Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits. Hospitalisation not covered if admission is for the sole purpose of radiology or pathology investigations.					
1D1 Radiology and pathology while hospitalised (Excluding MRI, radio-isotope, CT and PET scans and certain other investigative procedures)	100% Profmed Tariff	100% Profmed Tariff		100% Profmed Tariff	
1D2 MRI, radio-isotope and CT scans and certain other investigative procedures while hospitalised <i>Specialist referral required except for CT scans</i> (Subject to pre-authorisation)	100% Profmed Tariff in-hospital (80% Profmed Tariff out-of-hospital. See section 5A6 for out-of-hospital benefit) 2 investigations per family in- or out-of-hospital	100% Profmed Tariff in-hospital (80% Profmed Tariff out-of-hospital. See section 5A6 for out-of-hospital benefit) 2 investigations per family in- or out-of-hospital		100% Profmed Tariff in-hospital 2 investigations per family in-hospital only	
1E Other Major Medical Services Call 0860 776 363 for authorisation and registration, information on clinical qualifying criteria and benefits.					

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
1E1 Transplants Subject to registration on the Disease Management Programme, and PMB legislation. Benefit 1E1(b) below is not available to members who elect to be a donor to a recipient who is not a Profmed member.					
a) Hospitalisation (Subject to pre-authorisation)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
b) Donor costs PMBs only (Subject to pre-authorisation and protocols)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1E2 Peritoneal dialysis and haemodialysis Chronic dialysis subject to the use of the DSPN Co-payment applies for the use of a non-DSP (Subject to pre-authorisation and registration on the Disease Management Programme and PMB legislation)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1E3 Oncology Subject to the use of the relevant DSPN, where applicable. Co-payment applies for voluntary use of a non-DSP. Benefit includes radiation therapy and/or chemotherapy, radiology, pathology and adjunct treatment, as well as oncology-related consultations, medicine, procedures and investigations for post-treatment monitoring, subject to Profmed protocols, costings and PMB legislation.					
Includes all costs related to treatment, consultations, investigations and drugs, excluding hospitalisation (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation)	R685 523 per beneficiary Thereafter, subject to PMB legislation	R457 015 per beneficiary Thereafter, subject to PMB legislation		R228 508 per beneficiary Thereafter, subject to PMB legislation	
a) Chemotherapy (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation)					
i.a) Consultations	300% Profmed Tariff	GPs: R478 Specialists: R725		GPs: R478 Specialists: R725	
i.b) Procedures	300% Profmed Tariff	100% Specific Tariff		100% Specific Tariff	
ii) Chemotherapy drugs Excluding adjunctive treatment (Subject to protocols and use of Oncology pharmacy DSPN. 20% co-payment applies for voluntary use of non-DSPN)	100% Single Exit Price plus dispensing fee	100% Single Exit Price plus dispensing fee		100% Single Exit Price plus dispensing fee	
iii) Biologicals and other specified drugs (Subject to pre-authorisation, protocols and use of the Oncology pharmacy DSPN)	80% Single Exit Price plus dispensing fee Subject to benefit limit	Subject to PMB legislation		Subject to PMB legislation	
b) Radiation therapy (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation)					
i) Consultations	300% Profmed Tariff	Specialists: R725		Specialists: R725	
ii) Radiation therapy and facility fees (Subject to use of the DSPN)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
c) PET scans (Positron-Emission Tomography) (Subject to pre-authorization and protocols, and use of the DSPN. DSPN applicable within the greater Johannesburg region only)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1E4 Rehabilitation This benefit covers members who have become disabled as a result of acute injuries caused by trauma, infection, surgery, spinal cord injury, brain injury, bleeding or infarction resulting in a stroke. This benefit is only available as an in-patient in a registered rehabilitation facility. Rehabilitation must occur within the benefit year in which the specified injury takes place, or commence directly after discharge from an acute hospitalisation facility or not more than one calendar month after the specified injury is sustained. Benefits are limited to two months' rehabilitation and the availability of benefits, and are subject to case management and Profmed protocols. Admissions covered at authorised service providers only. Subject to use of the DSPN and PMB legislation. Co-payment applies for voluntary use of a non-DSP.					
(Subject to pre-authorization and use of the DSPN)	100% Negotiated Tariff R80 779 per family	100% Negotiated Tariff R53 700 per family		100% Negotiated Tariff R26 850 per family	
1E5 Out-patient care in lieu of hospitalisation a) Treatment in a registered sub-acute facility or at home by an appropriately registered practitioner (Subject to pre-authorization and protocols)					
	100% Negotiated Tariff R17 459 per beneficiary	100% Negotiated Tariff R14 737 per beneficiary		100% Negotiated Tariff R12 567 per beneficiary	
b) Wound care Treatment at home, including surgicals, by an appropriately registered practitioner (Subject to pre-authorization and protocols)					
	100% Negotiated Tariff R6 740 per beneficiary	100% Negotiated Tariff R3 999 per beneficiary		100% Negotiated Tariff R3 312 per beneficiary	
1E6 Psychiatric treatment Includes all in- and out-of-hospital psychiatric and clinical psychology consultations, treatment and in-hospital medication, and alcohol and drug rehabilitation. Hospitalisation only available at DSPN. PMBs are deducted from this benefit, but are not subject to these limits. Co-payment applies for voluntary use of a non-DSP.					
a) In-hospital (Subject to pre-authorization and use of the DSPN)	100% Negotiated Tariff in general ward R40 445 per family, subject to PMB legislation	100% Negotiated Tariff in general ward R26 964 per family, subject to PMB legislation		100% Negotiated Tariff in general ward R20 223 per family, subject to PMB legislation	
b) Out-of-hospital consultations, subject to PMB legislation	R6 855 per family Subject to 1E6(a) in-hospital limit	R6 855 per family Subject to 1E6(a) in-hospital limit		R6 855 per family Subject to 1E6(a) in-hospital limit PMBs only	
1E7 Endoscopic examinations In suitably equipped procedure room, subject to protocols and PMB legislation and use of the DSPN. Co-payment applies for voluntary use of a non-DSP.					
a) Gastroscopy (Subject to pre-authorization and use of the DSPN)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
b) Colonoscopy Includes Sigmoidoscopy (Subject to pre-authorization and use of the DSPN)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
c) Colonoscopy and Gastroscopy Combined procedure (Subject to pre-authorization and use of the DSPN)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
1F Other Medical Services Call 0860 776 363 for authorisation, information on clinical qualifying criteria and benefits.					
1F1 Physiotherapy					
a) In-hospital (Subject to pre-authorisation)	100% Profmed Tariff	100% Profmed Tariff		100% Profmed Tariff	
b) Out-of-hospital Post-operative, available up to 6 weeks after related hospital procedure (Subject to pre-authorisation)	100% Profmed Tariff M R3 086 Maximum R5 142 per family	100% Profmed Tariff M R2 285 Maximum R3 656 per family		Subject to PMB legislation	
1F2 Blood transfusions (Subject to pre-authorisation)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1F3 Emergency medical transport Emergencies within the borders of South Africa. Contact 082 911 within RSA. 20% co-payment for voluntary use of a non-DSP. Non-emergency calls will not be funded.					
(Subject to Profmed protocols and use of DSPN)	100% of cost	100% of cost		100% of cost	
1F4 Internal surgical devices A fabricated or artificial substitute that is surgically implanted permanently into the body and does not protrude from the body and replaces or assists a diseased or missing part of the body to restore functionality. Subject to PMB legislation.					
a) Major (Subject to pre-authorisation, protocols and management)	100% Negotiated Tariff R52 557 per family	100% Negotiated Tariff R52 557 family		100% Negotiated Tariff R52 557 per family	
b) Intraocular lenses Cataract surgery only (Subject to pre-authorisation, protocols and management)	R4 971 per beneficiary per event	R4 971 per beneficiary per event		R4971 per beneficiary per event	
1G Dental Procedures in Hospital Subject to pre-authorisation and protocols. Call 0860 776 363 for authorisation, information on clinical qualifying criteria and benefits. Please see Section 5E for out-of-hospital benefits.					
1G1 Hospitalisation: - Permanent tooth impaction removals - Extensive conservative dental treatment only for children younger than 8 years (24-month benefit) (Subject to pre-authorisation, protocols and management)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
a) Specialist and anaesthetist fees	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	200% Profmed Tariff	100% Specific Tariff
b) Dentist fees	135% Profmed Tariff	135% Profmed Tariff		135% Profmed Tariff	
1G2 Hospitalisation: - Other (Subject to pre-authorisation, protocols and management)	100% Negotiated Tariff	100% Negotiated Tariff		Subject to PMB legislation	
a) Specialist and anaesthetist fees	300% Negotiated Tariff	200% Profmed Tariff	100% Specific Tariff	Subject to PMB legislation	
b) Dentist fees	135% Profmed Tariff Subject to Section 5E	135% Profmed Tariff Subject to Section 5E		135% Profmed Tariff	Subject to PMB legislation

BENEFIT		ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
1G3	Functional orthognathic surgery Includes all costs related to the admission and procedure, e.g. all medical practitioner fees, hospitalisation, etc. (Subject to pre-authorisation)	R36 561 per family	No benefit		No benefit	
2. PREVENTATIVE CARE Benefits are subject to specific protocols and the use of the DSPN. Co-payment applies for voluntary use of non-DSP.						
2.1	Prostate Specific Antigen (PSA) Males 40 years and older. Subject to PMB legislation.					
	Pathology (Subject to use of the DSPN) (Tariff code 4519)	100% Negotiated Tariff 1 investigation per beneficiary	100% Negotiated Tariff 1 investigation per beneficiary		100% Negotiated Tariff 1 investigation per beneficiary	
2.2	Pap smear or liquid-based cytology Females 18 years and older. Subject to PMB legislation.					
	Pathology (Subject to use of the DSPN) (Tariff code 4566 – Pap smear. Tariff codes 4559 and 4560 – liquid-based cytology reimbursed per tariff code 4566. A co-payment could apply)	100% Negotiated Tariff 1 investigation per beneficiary	100% Negotiated Tariff 1 investigation per beneficiary		100% Negotiated Tariff 1 investigation per beneficiary	
2.3	Mammograms Females 40 years and older. Available to females younger than 40 years pre-disposed to breast cancer, subject to motivation. Subject to PMB legislation.					
	Radiology	100% Profmed Tariff 1 investigation per beneficiary	100% Profmed Tariff 1 investigation per beneficiary		100% Profmed Tariff 1 investigation per beneficiary	
2.4	Fasting lipogram blood test Males and females 40 years and older. Subject to PMB legislation.					
	Pathology (Subject to use of the DSPN) (Tariff code 4025)	100% Negotiated Tariff 1 investigation per beneficiary	100% Negotiated Tariff 1 investigation per beneficiary		100% Negotiated Tariff 1 investigation per beneficiary	
2.5	Fasting blood sugar test For late onset diabetes. Males and females 40 years and older. Subject to PMB legislation.					
	Pathology (Subject to use of the DSPN) (Tariff code 4057)	100% Negotiated Tariff 1 investigation per beneficiary	100% Negotiated Tariff 1 investigation per beneficiary		100% Negotiated Tariff 1 investigation per beneficiary	
2.6	Influenza vaccine					
	Vaccine only	100% Single Exit Price plus dispensing fee at DSPN rate 1 vaccination per beneficiary	100% Single Exit Price plus dispensing fee at DSPN rate 1 vaccination per beneficiary		100% Single Exit Price plus dispensing fee at DSPN rate 1 vaccination per beneficiary	
2.7	Human papilloma virus (HPV) vaccine Females 9 to 27 years of age. Includes initial vaccination and two follow-up booster vaccinations, where applicable. Subject to PMB legislation.					
	Vaccine only	100% Single Exit Price plus dispensing fee at DSPN rate	100% Single Exit Price plus dispensing fee at DSPN rate		100% Single Exit Price plus dispensing fee at DSPN rate	

BENEFIT		ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
2.8	<p>Child immunisations Children 0 to 12 years, per the Department of Health's Childhood Immunisation Schedule. Subject to PMB legislation.</p> <p>Vaccine only</p>	100% Single Exit Price plus dispensing fee at DSPN rate	100% Single Exit Price plus dispensing fee at DSPN rate		100% Single Exit Price plus dispensing fee at DSPN rate	
2.9	<p>Pneumococcal vaccine Adults 65 years and older, and individuals of all ages who are respiratory compromised or have related chronic diseases. Subject to PMB legislation.</p> <p>Vaccine only</p>	100% Single Exit Price plus dispensing fee at DSPN rate	100% Single Exit Price plus dispensing fee at DSPN rate		100% Single Exit Price plus dispensing fee at DSPN rate	
2.10	<p>Consultation Includes a consultation for any one of the Preventative Care benefits (Tariff codes 0190, 0191, 0192)</p>	300% Profmed Tariff for GPs and specialists 1 consultation per beneficiary, thereafter subject to available day-to-day limit	GPs: R478 Specialists: R725 1 consultation per beneficiary, thereafter subject to available day-to-day limit		GPs and specialists at GP rate: R478 1 consultation per beneficiary	
3. CONTRACEPTIVES						
Funding only applies for contraceptive purposes. Protocols apply.						
<p>Including oral contraceptives, patches, injections, implants and intra-uterine devices.</p> <ul style="list-style-type: none"> Oral contraceptives and patches: every 20 days Injections: 3 to 6-month cycle Intra-uterine devices and implants: 3 to 5-year cycle 		100% Single Exit Price plus dispensing fee at DSPN rate MMAP [®] applies Maximum R1 874 per beneficiary Not subject to day-to-day limit	100% Single Exit Price plus dispensing fee at DSPN rate MMAP [®] applies Maximum R1 874 per beneficiary Not subject to day-to-day limit		100% Single Exit Price plus dispensing fee at DSPN rate MMAP [®] applies Maximum R1 874 per beneficiary	



4. CHRONIC MEDICATION CONDITIONS

ProPinnacle

58 conditions plus relevant DTPs

CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.

Other: Allergic Rhinitis (in patients with asthma), Alzheimer's Disease, Ankylosing Spondylitis, Benign Prostatic Hypertrophy, Cushing's Syndrome, Cystic Fibrosis, Deep Vein Thrombosis, Gastro-Oesophageal Reflux Disorder, Gout, Hypoparathyroidism, Hyperthyroidism, Major Depressive Disorder, Malabsorption Syndrome, Meniere's Disease, Motor Neuron Disease, Myasthenia Gravis, Obsessive Compulsive Disorder, Oncology Adjunctive Treatment, Osteoarthritis, Osteoporosis, Paget's Disease, Paraplegia & Quadriplegia, Peripheral Vascular Disease, Pituitary Adenomas/Hyperfunction of Pituitary Gland, Post-Organ Transplant (non-DTP), Psoriatic Arthritis, Pulmonary Interstitial Fibrosis, Stroke/Cerebrovascular Accident, Systemic Connective Tissue Disorders, Tuberculosis, Valvular Heart Disease.

Additional: Attention Deficit Hyperactivity Disorder (ADHD) (Children up to the age of 18).

DTPs: Relevant chronic conditions listed in the 270 PMBs, e.g. hormone replacement therapy (Menopause), immuno-suppressive therapy (Post-Organ Transplants).

ProSecure Plus & ProSecure

40 conditions plus relevant DTPs

CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.

Other: Allergic Rhinitis (in patients with asthma), Alzheimer's Disease, Ankylosing Spondylitis, Benign Prostatic Hypertrophy, Major Depressive Disorder, Obsessive Compulsive Disorder, Oncology Adjunctive Treatment, Osteoporosis, Paraplegia & Quadriplegia, Pituitary Adenomas/Hyperfunction of Pituitary Gland, Psoriatic Arthritis, Pulmonary Interstitial Fibrosis, Valvular Heart Disease.

Additional: Attention Deficit Hyperactivity Disorder (ADHD) (Children up to the age of 18).

DTPs: Relevant chronic conditions listed in the 270 PMBs, e.g. hormone replacement therapy (Menopause), immuno-suppressive therapy (Post-Organ Transplants).

ProActive Plus & ProActive

26 conditions plus relevant DTPs

CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.

DTPs: Relevant chronic conditions listed in the 270 PMBs, e.g. hormone replacement therapy (Menopause), immuno-suppressive therapy (Post-Organ Transplants).

BENEFIT

ProPinnacle

ProSecure Plus

ProSecure

ProActive Plus

ProActive

4. CHRONIC MEDICATION BENEFIT

The formulary and reference pricing will be most restrictive on the ProActive options and least restrictive on the ProPinnacle options. MMAP[®] applies. The conditions covered on each option are listed below. The Condition Medicine List (CML), including the list of chronic diseases (CDL), is available on the Profmed website at www.profmed.co.za. Subject to the use of the DSPN. Co-payment applies for voluntary use of a non-DSP. Claims from wholesale pharmacies will not be accepted. Call 0860 679 200 for information on clinical qualifying criteria and benefits. Furthermore, where a protocol or a formulary drug preferred by the Scheme has been ineffective or would cause harm to a beneficiary, the Scheme will fund the cost of the appropriate substitution treatment without a penalty to the beneficiary as required by Regulations 15H and 15I of the Act.

a) CDLs, other chronic conditions and relevant DTPs as listed above. 24-day dispensing cycle applies (Attending doctor or pharmacist to call 0800 132 345 to register condition and authorise medication)	100% Single Exit Price plus dispensing fee 58 conditions covered and relevant DTPs Unlimited, subject to Profmed formulary and reference price	100% Single Exit Price plus dispensing fee 40 conditions covered and relevant DTPs Subject to Profmed formulary and reference price M R17 024 M+1 R27 876 Maximum R38 615 per family	100% Single Exit Price plus dispensing fee Restricted to 26 CDL conditions and relevant DTPs, subject to PMB legislation Subject to Profmed formulary and strict reference price
b) Biologicals and other specified drugs (Subject to pre-authorisation, protocols and use of the pharmacy DSPN)	80% Single Exit Price plus dispensing fee	Subject to PMB legislation	Subject to PMB legislation

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
5. DAY-TO-DAY COVER All sub-limits for out-of-hospital benefits set out in this Section, and benefits subject to the day-to-day limit in other Sections of this Schedule, are subject to the availability of the annual overall day-to-day limit, subject to PMB legislation.					
Annual overall day-to-day limit Available only through relevant available day-to-day sub-limits, where applicable	M R18 281 M+1 R27 077 Maximum R35 190 per family	M R11 425 M+1 R17 367 Maximum R22 394 per family		M R3 081 M+1 R4 622 Maximum R6 008 per family	See Section 5E Subject to PMB legislation
5A General Practitioners (GPs) and Specialists					
5A1 Consultations	300% Profmed Tariff Subject to day-to-day limit	GPs: R478 Specialists: R725 Subject to day-to-day limit		GPs and specialists at GP rate: R478 Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5A2 Non-hospital procedures in doctor's rooms	300% Profmed Tariff Subject to day-to-day limit	100% Specific Tariff Subject to day-to-day limit		100% Specific Tariff at GP rate Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5A3 Psychiatric consultations (out-of-hospital) (See Section 1E6)	300% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit	GPs: R478 Specialists: R725 Paid from Psychiatric benefit Not subject to day-to-day limit		PMBs paid from Psychiatric 1E6 benefit Subject to PMB legislation	
5A4 Clinical psychology (out-of-hospital) (See Section 1E6)	100% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit	100% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit		PMBs paid from Psychiatric 1E6 benefit Subject to PMB legislation	
5A5 Radiology and pathology (Excluding MRI and CT scans)	80% Profmed Tariff Subject to day-to-day limit	80% Profmed Tariff Subject to day-to-day limit		80% Profmed Tariff Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5A6 MRI, radio-isotope and CT scans Specialist referral required, except for CT scans (Subject to pre-authorisation. Call 0860 776 363 for authorisation and protocols)	80% Profmed Tariff out-of-hospital (100% Profmed Tariff in-hospital. See Section 1D2 for in-hospital benefit) 2 investigations per family in- or out-of-hospital Not subject to day-to-day limit	80% Profmed Tariff out-of-hospital (100% Profmed Tariff in-hospital. See Section 1D2 for in-hospital benefit) 2 investigations per family in- or out-of-hospital Subject to day-to-day limit out-of-hospital		Subject to PMB legislation	
5A7 Emergency room visits and facility fees at hospitals that do not result in hospitalisation	100% Negotiated Tariff Subject to day-to-day limit	100% Negotiated Tariff Subject to day-to-day limit		100% Negotiated Tariff Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
5B Acute Medication					
5B1 Prescribed acute medication Subject to use of the pharmacy DSPN. Co-payment applies for voluntary use of a non-DSP. Wholesale pharmacy claims will not be accepted. (Certain medication on repeat script will be funded from this benefit. Call 0860 679 200 for more information)	80% Single Exit Price plus dispensing fee M R10 282 M+1 R13 710 M+2 R14 624 M+3 R16 224 Maximum R19 195 per family MMAP® applies Subject to day-to-day limit	80% Single Exit Price plus dispensing fee M R3 713 M+1 R5 558 M+2 R6 135 M+3 R6 363 Maximum R6 855 per family MMAP® applies Subject to day-to-day limit		80% Single Exit Price plus dispensing fee M R616 M+1 R924 Maximum R1 202 per family MMAP® applies Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5B2 Over-the-counter medication (See Section 5B1)	80% of cost R1 942 per family Subject to acute medication and day-to-day limits	80% of cost R1 565 per family Subject to acute medication and day-to-day limits		80% of cost Subject to acute medication and day-to-day limits	No benefit
5C Supplementary Benefits					
5C1 a) External prostheses and appliances Includes insulin pumps, home oxygen therapy and stoma bags. <ul style="list-style-type: none"> • Insulin pumps: 1 every 48 months • Home oxygen: subject to use of the DSPN. Co-payment applies for voluntary use of a non-DSP • Hearing aids: 1 pair every 24 months (Subject to protocols and pre-authorisation. Call 0860 776 363 for authorisation and protocols)	100% Negotiated Tariff R21 480 per family Additional for Hearing aids only: R4 056 Not subject to day-to-day limit	100% Negotiated Tariff R14 281 per family Additional for Hearing aids only: R6 740 Not subject to day-to-day limit		Subject to PMB legislation	
b) Other: Includes orthopaedic braces wheel chairs, walking frames and crutches	100% Negotiated Tariff R5 255 per family Subject to day-to-day limit	100% Negotiated Tariff R3 770 per family Subject to day-to-day limit		Subject to PMB legislation	
5C2 Supplementary services <ul style="list-style-type: none"> • Audiometrists • Biokineticists • Chiropractors • Dieticians • Occupational therapists • Speech therapists • Physiotherapists • Podiatrists 	100% Profmed Tariff M R2 970 Maximum R5 141 per family Subject to day-to-day limit, and PMB legislation	100% Profmed Tariff M R2 742 Maximum R4 570 per family Subject to day-to-day limit, and PMB legislation		Subject to PMB legislation	
5C3 Alternative health practitioners Including homeopaths and homeopathic medication. Practitioners must be registered with The Allied Health Professions Council	80% of cost R2 513 per family R765 per family sub-limit for homeopathic medication Subject to day-to-day limit	No benefit		No benefit	

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
5D Optical Services Benefits are subject to protocols and are applied over a 24-month period. Lenses are limited to contact lenses OR spectacle lenses.					
5D1 Eye examinations	100% Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation	100% Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation		100% Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5D2 Spectacles a) Lenses (generic) Single vision, bi-focal and varifocal	100% Optical Tariff 24-month benefit Subject to day-to-day limit	100% Optical Tariff 24-month benefit Subject to day-to-day limit		No benefit	
b) Extras	100% Optical Tariff for generic hard-coating and generic plastic anti-reflex coating 24-month benefit Subject to day-to-day limit	100% Optical Tariff for generic hard-coating 24-month benefit Subject to day-to-day limit		No benefit	
c) Frames	R1 280 per beneficiary 24-month benefit Subject to day-to-day limit	R930 per beneficiary 24-month benefit Subject to day-to-day limit		No benefit	
5D3 Contact lenses (clear)	R3 142 per beneficiary 24-month benefit Subject to day-to-day limit	R1 841 per beneficiary 24-month benefit Subject to day-to-day limit		No benefit	
5D4 Refractive eye surgery Includes all costs related to the admission and procedure, all medical practitioner fees, hospitalisation, etc. (Subject to protocols and pre-authorisation. Call 0860 776 363 for authorisation and protocols)	R3 570 per beneficiary Not subject to day-to-day limit	No benefit		No benefit	
5E Dentistry Benefits are subject to protocols and management. (See Section 1G for dentist and specialist fees in-hospital)					
- Conservative dentistry (includes annual check-ups, restorations, extractions, root canal treatment, dentures) - Advanced dentistry (includes crowns, bridges, implants, orthodontics) Orthodontics available only up to age 18. (Orthodontics and implants subject to pre-authorisation. Call 0860 679 200 for authorisation and protocols)	135% Profmed Tariff R6 992 per beneficiary Maximum R13 985 per family Not subject to day-to-day limit	135% Profmed Tariff R5 952 per beneficiary Maximum R11 997 per family Not subject to day-to-day limit		135% Profmed Tariff Subject to day-to-day limit	135% Profmed Tariff R600 per beneficiary Maximum R1 714 per family

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
5F Trauma and HIV Assistance Programme Benefit covers trauma and HIV exposure as a result of crime, e.g. assault or rape, and HIV exposure resulting from crime and occupational injuries, e.g. needle-stick injury. Where relevant, victims will be accompanied by an appropriate, qualified professional to identity parades and court appearances for emotional support. Call 0861 776 363 for 24-hour assistance. Benefits are subject to the use of the DSP. Co-payment applies for voluntary use of a non-DSP. Subject to case management and protocols.					
5F1 Counselling					
a) Telephonic counselling	100% Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Not subject to day-to-day limit	100% Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Not subject to day-to-day limit		100% Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Not subject to day-to-day limit	
b) Face-to-face counselling	100% Negotiated Tariff Up to four sessions per incident Thereafter, subject to PMB legislation Not subject to day-to-day limit	100% Negotiated Tariff Up to four sessions per incident Thereafter, subject to PMB legislation Not subject to day-to-day limit		100% Negotiated Tariff Up to four sessions per incident Thereafter, subject to PMB legislation	
5F2 HIV post-exposure management 2 doctor's consultations, 30 days' PEP medication, pathology and 3 - 6 months' HIV exposure management	100% Negotiated Tariff 1 course of treatment per beneficiary per incident at DSP Subject to PMB legislation Not subject to day-to-day limit	100% Negotiated Tariff 1 course of treatment per beneficiary per incident at DSP Subject to PMB legislation Not subject to day-to-day limit		100% Negotiated Tariff 1 course of treatment per beneficiary per incident at DSP Subject to PMB legislation	
6. MATERNITY Call 0860 776 363 where pre-authorisation is required and for more information on clinical qualifying criteria and benefits. Subject to PMB legislation. Profmed Baby: Expectant mothers can download the Profmed App to access the Profmed Baby programme. Health-on-Line on 082 911: Telephone emergency and non-emergency medical advice, during pregnancy and once baby is born.					
6A Day-to-day Cover Members on the ProSecure Plus and ProSecure options are required to register on the Maternity programme to access the relevant benefits.					
6A1 Ultra-sound scans (ante-natal)	100% Profmed Tariff 2 scans per pregnancy Subject to day-to-day limit	100% Profmed Tariff 2 scans per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)		Subject to PMB legislation	
6A2 Consultations Ante-/post-natal consultations by a medical practitioner	300% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit	GPs: R478 Specialists: R725 13 visits per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)		GPs and Specialists at GP rate: R478 Subject to day-to-day benefit and PMB legislation	Subject to PMB legislation
6A3 Consultations Ante-/post-natal consultations by a registered midwife	300% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit	Consultations: R725 13 visits per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)		Consultations: R478 Subject to day-to-day benefit and PMB legislation	Subject to PMB legislation

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
6A4 Lactation consultation At a registered service provider <i>Available up to 6 months post-delivery</i> (Subject to registration on the Maternity programme, pre-authorisation and protocols)	100% Profmed Tariff 1 visit per pregnancy Subject to day-to-day limit	100% Profmed Tariff 1 visit per pregnancy Not subject to day-to-day limit		Subject to PMB legislation	
6A5 Nutrition consultation At a registered service provider <i>Available up to 6 months post-delivery</i> (Subject to registration on the Maternity programme, pre-authorisation and protocols)	100% Profmed Tariff 1 visit per pregnancy Subject to day-to-day limit	100% Profmed Tariff 1 visit per pregnancy Not subject to day-to-day limit		Subject to PMB legislation	
6A6 Nuchal Translucency Non-Invasive Pre-Natal Test (NIPT) (Subject to registration on the Maternity programme, pre-authorisation and protocols)	100% Profmed Tariff 1 investigation per pregnancy Subject to day-to-day limit, and PMB legislation	100% Profmed Tariff 1 visit per pregnancy Not subject to day-to-day limit. Subject to PMB legislation		Subject to PMB legislation	
6A7 Out-patient visits to hospital/ clinic for investigations, e.g. tococardiography	80% Profmed Tariff Subject to day-to-day limit	80% Profmed Tariff Subject to day-to-day limit		Subject to PMB legislation	
6A8 Ante-natal exercises by registered healthcare practitioner	80% Profmed Tariff R1 027 per family Subject to day-to-day limit	No benefit		No benefit	
6A9 Prescribed medication during pregnancy	80% Single Exit Price plus dispensing fee Subject to 5B1	80% Single Exit Price plus dispensing fee Subject to 5B1		80% Single Exit Price plus dispensing fee Subject to 5B1	Subject to PMB legislation
6B Hospitalisation Call 0800 776 363 where pre-authorisation is required and for more information on clinical qualifying criteria, and benefits. Subject to PMB legislation.					
6B1 In-patient hospitalisation (ante-natal) (Subject to pre-authorisation)	100% Negotiated Tariff in private ward	100% Negotiated Tariff in general ward		100% Negotiated Tariff in general ward	
6B2 Delivery fee by GP or specialist	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	200% Profmed Tariff	100% Specific Tariff
6B3 Delivery fee by registered midwife	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	200% Profmed Tariff	100% Specific Tariff
6B4 Labour ward	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
6B5 Ward accommodation (post-delivery): Normal delivery – 3 days Caesarean section – 4 days	100% Negotiated Tariff in private ward	100% Negotiated Tariff in private ward	100% Negotiated Tariff in general ward	100% Negotiated Tariff in general ward	
6B6 Theatre and recovery room	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
6B7 Other medical practitioner services, e.g. pathology and radiology while in hospital	100% Profmed Tariff	100% Profmed Tariff		100% Profmed Tariff	
6B8 Consultations while in hospital	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	200% Profmed Tariff	100% Specific Tariff

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
6B9 Home nursing (post-natal) 48-hour benefit in the event of a home delivery or if discharged from a birthing unit within 24 hours after delivery (Subject to pre-authorisation)	Subject to Section 1E5(a) of this Schedule	Subject to Section 1E5(a) of this Schedule		Subject to Section 1E5(a) of this Schedule	
6B10 Neonatal ICU Neonate must be registered as a dependant on Profmed (Subject to pre-authorisation)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	

7. INTERNATIONAL TRAVEL MEDICAL ASSISTANCE
 This benefit covers members for medical emergencies while travelling internationally. Members who live outside South Africa in the SADC Region are covered under this benefit when travelling outside the borders of their country of residence, except to South Africa where option-specific benefits apply. Consult the International Travel Medical Assistance Benefit Document available on the website for the benefits, restrictions, exclusions and claims process.
 For medical assistance while travelling, it is necessary to call International SOS on +27 11 541 1225 prior to receiving treatment to avoid a co-payment. The Information Guide contains more information on the claims process and details of this benefit, or call 0860 679 200. Subject to case management and protocols.

In- and out-of-hospital emergency medical expenses Out-of-hospital expenses exceeding R1 500 and hospitalisation must be pre-authorised. (Benefits subject to protocols and pre-authorisation. Call +27 11 541 1225)	R6 million per beneficiary per journey R1 500 excess per beneficiary per journey on out-of-hospital expenses. Out-of-hospital benefits only available if the claim relates to day-to-day benefits available on this option Spectacles or contact lenses limited to R3 300, subject to the R1 500 excess	R6 million per beneficiary per journey R1 500 excess per beneficiary per journey on out-of-hospital expenses. Out-of-hospital benefits only available if the claim relates to day-to-day benefits available on this option Spectacles or contact lenses limited to R3 300, subject to the R1 500 excess	R6 million per beneficiary per journey No benefit for out-of-hospital expenses
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Members registered on the Savvy Options are required to make use of the Designated Service Provider Network (DSPN) for hospitalisation. When consulting a medical practitioner, please ensure your treating practitioner consults at, or hospitalises you at a network hospital in order to avoid a co-payment. **(Voluntary use of a non-DSPN hospital will result in a co-payment of R10 000 per admission).** Subject to PMB legislation.

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
1. HOSPITAL AND HOSPITAL-RELATED BENEFITS AND MAJOR MEDICAL EXPENSES					
1A Hospitalisation Subject to use of the DSPN. Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits.					
1A1 Hospital ward accommodation (Subject to pre-authorisation)	100% Savvy Tariff in private ward	100% Savvy Tariff in general ward		100% Savvy Tariff in general ward	
1A2 Theatre and recovery room	100% Savvy Tariff	100% Savvy Tariff		100% Savvy Tariff	
1A3 Intensive care and high care (Subject to confirmation every 72 hours)	100% Savvy Tariff	100% Savvy Tariff		100% Savvy Tariff	
1A4 Emergency room visits and facility fees at hospitals that result in hospitalisation	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1B Medicines in Hospital					
1B1 Medicines and materials used in hospital and theatre	100% Savvy Tariff	100% Savvy Tariff		100% Savvy Tariff	
1B2 Medicines taken out of hospital on discharge (benefit limited to a 7-day supply) (See Section 5B1) (Subject to use of the pharmacy DSPN)	80% Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds	80% Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds		80% Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds	Subject to PMB legislation
1C General Practitioners (GPs) and Specialists in Hospital					
1C1 Surgery and in-hospital procedures	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	200% Profmed Tariff	100% Specific Tariff
1C2 Consultations by a GP or specialist while hospitalised	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	200% Profmed Tariff	100% Specific Tariff
1D Radiology and Pathology in Hospital Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits. Hospitalisation not covered if admission is for the sole purpose of radiology or pathology investigations.					
1D1 Radiology and pathology while hospitalised (Excluding MRI, radio-isotope, CT and PET scans and certain other investigative procedures)	100% Profmed Tariff	100% Profmed Tariff		100% Profmed Tariff	
1D2 MRI, radio-isotope and CT scans and certain other investigative procedures while hospitalised Specialist referral required, except for CT scans (Subject to pre-authorisation)	100% Profmed Tariff in-hospital (80% Profmed Tariff out-of-hospital. See Section 5A6 for out-of-hospital benefit) 2 investigations per family in- or out-of-hospital	100% Profmed Tariff in-hospital (80% Profmed Tariff out-of-hospital. See Section 5A6 for out-of-hospital benefit) 2 investigations per family in- or out-of-hospital		100% Profmed Tariff in-hospital 2 investigations per family in-hospital only	

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
1E Other Major Medical Services Call 0860 776 363 for authorisation and registration, information on clinical qualifying criteria, and benefits.					
1E1 Transplants Subject to registration on the Disease Management Programme, and PMB legislation. Benefit 1E1(b) below is not available to members who elect to be a donor to a recipient who is not a Profmed member.					
a) Hospitalisation (Subject to pre-authorisation and use of the DSPN)	100% Savvy Tariff	100% Savvy Tariff		100% Savvy Tariff	
b) Donor costs PMBs only (Subject to pre-authorisation and protocols)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1E2 Peritoneal dialysis and haemodialysis Chronic dialysis subject to the use of the DSPN. Co-payment applies for the use of a non-DSP. (Subject to pre-authorisation and registration on the Disease Management Programme and PMB legislation)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1E3 Oncology Subject to the use of the relevant DSPN, where applicable. Co-payment applies for voluntary use of a non-DSP. Benefit includes radiation therapy and/or chemotherapy, radiology, pathology and adjunct treatment, as well as oncology-related consultations, medicine, procedures and investigations for post-treatment monitoring, subject to Profmed protocols, costings and PMB legislation.					
Includes all costs related to treatment, consultations, investigations and drugs, excluding hospitalisation (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation)	R685 523 per beneficiary Thereafter, subject to PMB legislation	R457 015 per beneficiary Thereafter, subject to PMB legislation		R228 508 per beneficiary Thereafter, subject to PMB legislation	
a) Chemotherapy (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation)					
i.a) Consultations	300% Profmed Tariff	GPs: R478 Specialists: R725		GPs: R478 Specialists: R725	
i.b) Procedures	300% Profmed Tariff	100% Specific Tariff		100% Specific Tariff	
ii. Chemotherapy drugs Excluding adjunctive treatment (Subject to protocols and use of Oncology pharmacy DSPN. 20% co-payment applies for voluntary use of non-DSPN)	100% Single Exit Price plus dispensing fee	100% Single Exit Price plus dispensing fee		100% Single Exit Price plus dispensing fee	
iii. Biologicals and other specified drugs (Subject to pre-authorisation, protocols and use of the Oncology pharmacy DSPN)	80% Single Exit Price plus dispensing fee Subject to benefit limit	Subject to PMB legislation		Subject to PMB legislation	

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
b) Radiation therapy (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation)					
i. Consultations	300% Profmed Tariff	Specialists: R725		Specialists: R725	
ii. Radiation therapy and facility fees (Subject to use of the DSPN)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
c) PET scans (Positron-Emission Tomography) (Subject to pre-authorisation and protocols, and use of the DSPN. DSPN applicable within the greater Johannesburg region only)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1E4 Rehabilitation This benefit covers members who have become disabled as a result of acute injuries caused by trauma, infection, surgery, spinal cord injury, brain injury, bleeding or infarction resulting in a stroke. This benefit is only available as an in-patient in a registered rehabilitation facility. Rehabilitation must occur within the benefit year in which the specified injury takes place, or commence directly after discharge from an acute hospitalisation facility or not more than one calendar month after the specified injury is sustained. Benefits are limited to two months' rehabilitation and the availability of benefits, and are subject to case management and Profmed protocols. Admissions covered at authorised service providers only. Subject to use of the DSPN and PMB legislation. Co-payment applies for voluntary use of a non-DSP.					
(Subject to pre-authorisation and use of the DSPN)	100% Negotiated Tariff R80 779 per family	100% Negotiated Tariff R53 700 per family		100% Negotiated Tariff R26 850 per family	
1E5 Out-patient care in lieu of hospitalisation					
a) Treatment in a registered sub- acute facility or at home by an appropriately registered practitioner (Subject to pre-authorisation and protocols)	100% Negotiated Tariff R17 459 per beneficiary	100% Negotiated Tariff R14 737 per beneficiary		100% Negotiated Tariff R12 567 per beneficiary	
b) Wound care Treatment at home, including surgicals, by an appropriately registered practitioner (Subject to pre-authorisation and protocols)	100% Negotiated Tariff R6 740 per beneficiary	100% Negotiated Tariff R3 999 per beneficiary		100% Negotiated Tariff R3 312 per beneficiary	
1E6 Psychiatric treatment Includes all in- and out-of-hospital psychiatric and clinical psychology consultations, treatment and in-hospital medication, and alcohol and drug rehabilitation. Hospitalisation only available at DSPN. PMBs are deducted from this benefit, but are not subject to these limits. Co-payment applies for voluntary use of a non-DSP.					
a) In-hospital (Subject to pre-authorisation and use of the DSPN)	100% Negotiated Tariff in general ward R40 445 per family Subject to PMB legislation	100% Negotiated Tariff in general ward R26 964 per family Subject to PMB legislation		100% Negotiated Tariff in general ward R20 223 per family Subject to PMB legislation	
b) Out-of-hospital consultations Subject to PMB legislation	R6 855 per family Subject to 1E6(a) in-hospital limit	R6 855 per family Subject to 1E6(a) in-hospital limit		R6 855 per family Subject to 1E6(a) in-hospital limit PMBs only	
1E7 Endoscopic examinations In suitably equipped procedure room, subject to protocols and PMB legislation and use of the DSPN. Co-payment applies for voluntary use of a non-DSP.					

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
a) Gastroscopy (Subject to pre-authorisation and use of the DSPN)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
b) Colonoscopy Includes Sigmoidoscopy (Subject to pre-authorisation and use of the DSPN)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
c) Colonoscopy and gastroscopy Combined procedure (Subject to pre-authorisation and use of the DSPN)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1F Other Medical Services Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits.					
1F1 Physiotherapy					
a) In-hospital (Subject to pre-authorisation)	100% Profmed Tariff	100% Profmed Tariff		100% Profmed Tariff	
b) Out-of-hospital Post-operative, available up to 6 weeks after related hospital procedure (Subject to pre-authorisation)	100% Profmed Tariff M R3 086 Maximum R5 142 per family	100% Profmed Tariff M R2 285 Maximum R3 656 per family		Subject to PMB legislation	
1F2 Blood transfusions (Subject to pre-authorisation)	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	
1F3 Emergency medical transport Emergencies within the borders of South Africa. Contact 082 911 within RSA. 20% co-payment for voluntary use of a non-DSP, subject to PMB legislation. Non-emergency calls will not be funded.					
(Subject to Profmed protocols and use of the DSPN)	100% of cost	100% of cost		100% of cost	
1F4 Internal surgical devices A fabricated or artificial substitute that is surgically implanted permanently into the body and does not protrude from the body and replaces or assists a diseased or missing part of the body to restore functionality. Subject to PMB legislation.					
a) Major (Subject to pre-authorisation, protocols and management)	100% Negotiated Tariff R52 557 per family	100% Negotiated Tariff R52 557 per family		100% Negotiated Tariff R52 557 per family	
b) Intraocular lenses Cataract surgery only (Subject to pre-authorisation, protocols and management)	R4 971 per beneficiary per event	R4 971 per beneficiary per event		R4 971 per beneficiary per event	
1G Dental Procedures in Hospital Subject to pre-authorisation and protocols. Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits. Please see Section 5E for out-of-hospital benefits.					
1G1 Hospitalisation: - Permanent tooth impaction removals - Extensive conservative dental treatment only for children younger than 8 years (24-month benefit) (Subject to pre-authorisation, protocols, management and use of the DSPN)	100% Savvy Tariff	100% Savvy Tariff		100% Savvy Tariff	

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
a) Specialist and anaesthetist fees	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	200% Profmed Tariff	100% Specific Tariff
b) Dentist fees	135% Profmed Tariff	135% Profmed Tariff		135% Profmed Tariff	
1G2 Hospitalisation: - Other (Subject to pre-authorisation, protocols, management and use of the DSPN)	100% Savvy Tariff	100% Savvy Tariff		Subject to PMB legislation	
a) Specialist and anaesthetist fees	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	Subject to PMB legislation	
b) Dentist fees	135% Profmed Tariff Subject to Section 5E	135% Profmed Tariff Subject to Section 5E		135% Profmed Tariff	Subject to PMB legislation
1G3 Functional orthognathic surgery Includes all costs related to the admission and procedure, e.g. all medical practitioner fees, hospitalisation, etc. (Subject to pre-authorisation)	R36 561 per family	No benefit		No benefit	

2. PREVENTATIVE CARE

Benefits are subject to specific protocols and the use of the DSPN. Co-payment applies for voluntary use of a non-DSP.

2.1 Prostate Specific Antigen (PSA)

Males 40 years and older. Subject to PMB legislation.

Pathology (Subject to use of the DSPN) (Tariff code 4519)	100% Negotiated Tariff 1 investigation per beneficiary	100% Negotiated Tariff 1 investigation per beneficiary	100% Negotiated Tariff 1 investigation per beneficiary
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2.2 Pap smear or liquid-based cytology

Females 18 years and older. Subject to PMB legislation.

Pathology (Subject to use of the DSPN) (Tariff code 4566 – Pap smear. Tariff codes 4559 and 4560 – liquid-based cytology reimbursed per tariff code 4566 a co-payment could apply)	100% Negotiated Tariff 1 investigation per beneficiary	100% Negotiated Tariff 1 investigation per beneficiary	100% Negotiated Tariff 1 investigation per beneficiary
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2.3 Mammograms

Females 40 years and older. Available to females younger than 40 years pre-disposed to breast cancer, subject to motivation.
Subject to PMB legislation.

Radiology	100% Profmed Tariff 1 investigation per beneficiary	100% Profmed Tariff 1 investigation per beneficiary	100% Profmed Tariff 1 investigation per beneficiary
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2.4 Fasting lipogram blood test

Males and females 40 years and older. Subject to PMB legislation.

Pathology (Subject to use of the DSPN) (Tariff code 4025)	100% Negotiated Tariff 1 investigation per beneficiary	100% Negotiated Tariff 1 investigation per beneficiary	100% Negotiated Tariff 1 investigation per beneficiary
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2.5 Fasting blood sugar test

For late onset diabetes. Males and females 40 years and older. Subject to PMB legislation.

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
Pathology (Subject to use of the DSPN) (Tariff code 4057)	100% Negotiated Tariff 1 investigation per beneficiary	100% Negotiated Tariff 1 investigation per beneficiary		100% Negotiated Tariff 1 investigation per beneficiary	
2.6 Influenza vaccine					
Vaccine only	100% Single Exit Price plus dispensing fee at DSPN rate 1 vaccination per beneficiary	100% Single Exit Price plus dispensing fee at DSPN rate 1 vaccination per beneficiary		100% Single Exit Price plus dispensing fee at DSPN rate 1 vaccination per beneficiary	
2.7 Human papilloma virus (HPV) vaccine Females 9 to 27 years of age. Includes initial vaccination and two follow-up booster vaccinations, where applicable. Subject to PMB legislation.					
Vaccine only	100% Single Exit Price plus dispensing fee at DSPN rate	100% Single Exit Price plus dispensing fee at DSPN rate		100% Single Exit Price plus dispensing fee at DSPN rate	
2.8 Child immunisations Children 0 to 12 years, per the Department of Health's Childhood Immunisation Schedule. Subject to PMB legislation.					
Vaccine only	100% Single Exit Price plus dispensing fee at DSPN rate	100% Single Exit Price plus dispensing fee at DSPN rate		100% Single Exit Price plus dispensing fee at DSPN rate	
2.9 Pneumococcal vaccine Adults 65 years and older, and individuals of all ages who are respiratory compromised or have related chronic diseases. Subject to PMB legislation.					
Vaccine only	100% Single Exit Price plus dispensing fee at DSPN rate	100% Single Exit Price plus dispensing fee at DSPN rate		100% Single Exit Price plus dispensing fee at DSPN rate	
2.10 Consultation Includes a consultation for any one of the Preventative Care benefits (Tariff codes 0190, 0191, 0192)	300% Profmed Tariff for GPs and specialists 1 consultation per beneficiary, thereafter subject to available day-to-day limit	GPs: R478 Specialists: R725 1 consultation per beneficiary, thereafter subject to available day-to-day limit		GPs and specialists at GP rate: R478 1 consultation per beneficiary	
3. CONTRACEPTIVES Funding only applies for contraceptive purposes. Protocols apply.					
Contraceptives Including oral contraceptives, patches, injections, implants and intra-uterine devices. • Oral contraceptives and patches: every 20 days • Injections: 3 to 6-month cycle • Intra-uterine devices and implants: 3 to 5-year cycle	100% Single Exit Price plus dispensing fee at DSPN rate MMAP® applies Maximum R1 874 per beneficiary Not subject to day-to-day limit	100% Single Exit Price plus dispensing fee at DSPN rate MMAP® applies Maximum R1 874 per beneficiary Not subject to day-to-day limit		100% Single Exit Price plus dispensing fee at DSPN rate MMAP® applies Maximum R1 874 per beneficiary	
4. CHRONIC MEDICATION					

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
ProPinnacle	<p>58 conditions plus relevant DTPs</p> <p>CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.</p> <p>Other: Allergic Rhinitis (in patients with asthma), Alzheimer's Disease, Ankylosing Spondylitis, Benign Prostatic Hypertrophy, Cushing's Syndrome, Cystic Fibrosis, Deep Vein Thrombosis, Gastro-Oesophageal Reflux Disorder, Gout, Hypoparathyroidism, Hyperthyroidism, Major Depressive Disorder, Malabsorption Syndrome, Meniere's Disease, Motor Neuron Disease, Myasthenia Gravis, Obsessive Compulsive Disorder, Oncology Adjunctive Treatment, Osteoarthritis, Osteoporosis, Paget's Disease, Paraplegia & Quadriplegia, Peripheral Vascular Disease, Pituitary Adenomas/Hyperfunction of Pituitary Gland, Post-Organ Transplant (non-DTP), Psoriatic Arthritis, Pulmonary Interstitial Fibrosis, Stroke/Cerebrovascular Accident, Systemic Connective Tissue Disorders, Tuberculosis, Valvular Heart Disease.</p> <p>Additional: Attention Deficit Hyperactivity Disorder (ADHD) (Children up to age 18)</p> <p>DTPs: Relevant chronic conditions listed in the 270 PMBs, e.g. hormone replacement therapy (Menopause), immuno-suppressive therapy (Post-Organ Transplants).</p>				
ProSecure Plus & ProSecure	<p>40 conditions plus relevant DTPs</p> <p>CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.</p> <p>Other: Allergic Rhinitis (in patients with asthma), Alzheimer's Disease, Ankylosing Spondylitis, Benign Prostatic Hypertrophy, Major Depressive Disorder, Obsessive Compulsive Disorder, Oncology Adjunctive Treatment, Osteoporosis, Paraplegia & Quadriplegia, Pituitary Adenomas/Hyperfunction of Pituitary Gland, Psoriatic Arthritis, Pulmonary Interstitial Fibrosis, Valvular Heart Disease.</p> <p>Additional: Attention Deficit Hyperactivity Disorder (ADHD) (Children up to age 18)</p> <p>DTPs: Relevant chronic conditions listed in the 270 PMBs, e.g. hormone replacement therapy (Menopause), immuno-suppressive therapy (Post-Organ Transplants).</p>				
ProActive Plus & ProActive	<p>26 conditions plus relevant DTPs</p> <p>CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.</p> <p>DTPs: Relevant chronic conditions listed in the 270 PMBs, e.g. hormone replacement therapy (Menopause), immuno-suppressive therapy (Post-Organ Transplants).</p>				

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
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4. CHRONIC MEDICATION BENEFIT

The formulary and reference pricing will be most restrictive on the ProActive options and least restrictive on the ProPinnacle options. MMAP® applies. The conditions covered on each option are listed below. The Condition Medicine List (CML), including the list of chronic diseases (CDL), is available on the Profmed website at www.profmed.co.za. Subject to the use of the DSPN. Co-payment applies for voluntary use of a non-DSP. Claims from wholesale pharmacies will not be accepted. Call 0860 679 200 for information on clinical qualifying criteria and benefits. Furthermore, where a protocol or a formulary drug preferred by the Scheme has been ineffective or would cause harm to a beneficiary, the Scheme will fund the cost of the appropriate substitution treatment without a penalty to the beneficiary as required by Regulations 15H and 15I of the Act.

a) CDLs, other chronic conditions and relevant DTPs as listed above 24-day dispensing cycle applies (Attending doctor or pharmacist to call 0800 132 345 to register condition and authorise medication)	<p>100% Single Exit Price plus dispensing fee</p> <p>58 conditions covered and relevant DTPs</p> <p>Unlimited, subject to Profmed formulary and reference price</p>	<p>100% Single Exit Price plus dispensing fee</p> <p>40 conditions covered and relevant DTPs</p> <p>Subject to Profmed formulary and reference price</p> <p>M R17 024</p> <p>M+1 R27 876</p> <p>Maximum R38 615 per family</p>	<p>100% Single Exit Price plus dispensing fee</p> <p>Restricted to 26 CDL conditions and relevant DTPs, subject to PMB legislation</p> <p>Subject to Profmed formulary and strict reference price</p>
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BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
b) Biologicals and other specified drugs (Subject to pre-authorisation, protocols and use of the pharmacy DSPN)	80% Single Exit Price plus dispensing fee	Subject to PMB legislation		Subject to PMB legislation	
5. DAY-TO-DAY COVER All sub-limits for out-of-hospital benefits set out in this Section, and benefits subject to the day-to-day limit in other Sections of this Schedule, are subject to the availability of the annual overall day-to-day limit, subject to PMB legislation.					
Annual overall day-to-day limit Available only through relevant available day-to-day sub-limits, where applicable	M R18 281 M+1 R27 077 Maximum R35 190 per family	M R11 425 M+1 R17 367 Maximum R22 394 per family		M R3 081 M+1 R4 622 Maximum R6 008 per family	See Section 5E. Subject to PMB legislation
5A General Practitioners (GPs) and Specialists					
5A1 Consultations	300% Profmed Tariff Subject to day-to-day limit	GPs: R478 Specialists: R725 Subject to day-to-day limit		GPs and specialists at GP rate: R478 Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5A2 Non-hospital procedures in doctor's rooms	300% Profmed Tariff Subject to day-to-day limit	100% Specific Tariff Subject to day-to-day limit		100% Specific Tariff at GP rate Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5A3 Psychiatric consultations (out-of-hospital) (See Section 1E6)	300% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit	GPs: R478 Specialists: R725 Paid from Psychiatric benefit Not subject to day-to-day limit		PMBs paid from Psychiatric 1E6 benefit, subject to PMB legislation	
5A4 Clinical psychology (out-of-hospital) (See Section 1E6)	100% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit	100% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit		PMBs paid from Psychiatric 1E6 benefit, subject to PMB legislation	
5A5 Radiology and pathology (Excluding MRI and CT scans)	80% Profmed Tariff Subject to day-to-day limit	80% Profmed Tariff Subject to day-to-day limit		80% Profmed Tariff Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5A6 MRI, radio-isotope and CT scans Specialist referral required, except for CT scans (Subject to pre-authorisation. Call 0860 776 363 for authorisation and protocols)	80% Profmed Tariff out-of-hospital (100% Profmed Tariff in-hospital See Section 1D2 for in-hospital benefit) 2 investigations per family in- or out-of-hospital	80% Profmed Tariff out-of-hospital (100% Profmed Tariff in-hospital See Section 1D2 for in-hospital benefit) 2 investigations per family in- or out-of-hospital Subject to day-to-day limit		Subject to PMB legislation	

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
5A7 Emergency room visits and facility fees at hospitals that do not result in hospitalisation (Subject to the use of the DSPN, subject to PMB legislation)	100% Savvy Tariff Subject to day-to-day limit	100% Savvy Tariff Subject to day-to-day limit		100% Savvy Tariff Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5B Acute Medication					
5B1 Prescribed acute medication Subject to use of the pharmacy DSPN. Co-payment applies for voluntary use of a non-DSP. Wholesale pharmacy claims will not be accepted. (Certain medication on repeat script will be funded from this benefit. Call 0860 679 200 for more information)	80% Single Exit Price plus dispensing fee M R10 282 M+1 R13 710 M+2 R14 624 M+3 R16 224 Maximum R19 195 per family MMAP® applies Subject to day-to-day limit	80% Single Exit Price plus dispensing fee M R3 713 M+1 R5 558 M+2 R6 135 M+3 R6 363 Maximum R6 855 per family MMAP® applies Subject to day-to-day limit		80% Single Exit Price plus dispensing fee M R616 M+1 R924 Maximum R1 202 per family MMAP® applies Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5B2 Over-the-counter medication (See Section 5B1)	80% of cost R1 942 per family Subject to acute medication and day-to-day limits	80% of cost R1 565 per family Subject to acute medication and day-to-day limits		80% of cost Subject to acute medication and day-to-day limits	No benefit
5C Supplementary Benefits					
5C1 a) External prostheses and appliances Includes insulin pumps, home oxygen therapy and stoma bags. • Insulin pumps: 1 every 48 months • Home oxygen: subject to use of the DSPN. Co-payment applies for voluntary use of a non-DSP • Hearing aids: 1 pair every 24 months (Subject to protocols and pre-authorisation. Call 0860 776 363 for authorisation and protocols)	100% Negotiated Tariff R21 480 per family Additional for Hearing aids only: R4 056 Not subject to day-to-day limit	100% Negotiated Tariff R14 281 per family Additional for Hearing aids only: R6 740 Not subject to day-to-day limit		Subject to PMB legislation	
b) Other: Includes orthopaedic braces, wheel chairs, walking frames and crutches	100% Negotiated Tariff R5 255 per family Subject to day-to-day limit	100% Negotiated Tariff R3 770 per family Subject to day-to-day limit		Subject to PMB legislation	
5C2 Supplementary services • Audiometrists • Biokineticists • Chiropractors • Dieticians • Occupational therapists • Speech therapists • Physiotherapists • Podiatrists	100% Profmed Tariff M R2 970 Maximum R5 141 per family Subject to day-to-day limit, and PMB legislation	100% Profmed Tariff M R2 742 Maximum R4 570 per family Subject to day-to-day limit, and PMB legislation		Subject to PMB legislation	

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
5C3 Alternative health practitioners Including homeopaths and homeopathic medication. Practitioners must be registered with The Allied Health Professions Council	80% of cost R2 513 per family R765 per family sub-limit for homeopathic medication Subject to day-to-day limit	No benefit		No benefit	
5D Optical Services Benefits are subject to protocols and are applied over a 24-month period. Lenses are limited to contact lenses OR Spectacle lenses.					
5D1 Eye examinations	100% Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation	100% Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation		100% Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5D2 Spectacles a) Lenses (generic) Single vision, bi-focal and varifocal	100% Optical Tariff 24-month benefit Subject to day-to-day limit	100% Optical Tariff 24-month benefit Subject to day-to-day limit		No benefit	
b) Extras	100% Optical Tariff for generic hard-coating and generic plastic anti-reflex coating 24-month benefit Subject to day-to-day limit	100% Optical Tariff for generic hard-coating 24-month benefit Subject to day-to-day limit		No benefit	
c) Frames	R1 280 per beneficiary 24-month benefit Subject to day-to-day limit	R930 per beneficiary 24-month benefit Subject to day-to-day limit		No benefit	
5D3 Contact lenses (clear)	R3 142 per beneficiary 24-month benefit Subject to day-to-day limit	R1 841 per beneficiary 24-month benefit Subject to day-to-day limit		No benefit	
5D4 Refractive eye surgery Includes all costs related to the admission and procedure, all medical practitioner fees, hospitalisation, etc. (Subject to protocols and pre-authorisation. Call 0860 776 363 for authorisation and protocols)	R3 570 per beneficiary Not subject to day-to-day limit	No benefit		No benefit	
5E Dentistry Benefits are subject to protocols and management. (See Section 1G for dentist and specialist fees in-hospital)					
<ul style="list-style-type: none"> - Conservative dentistry (includes annual check-ups, restorations, extractions, root canal treatment, dentures) - Advanced dentistry (includes crowns, bridges, implants, orthodontics) Orthodontics available only up to age 18. (Orthodontics and implants subject to pre-authorisation. Call 0860 679 200 for authorisation)	135% Profmed Tariff R6 992 per beneficiary Maximum R13 985 per family Not subject to day-to-day limit	135% Profmed Tariff R5 952 per beneficiary Maximum R11 997 per family Not subject to day-to-day limit		135% Profmed Tariff Subject to day-to-day limit	135% Profmed Tariff R600 per beneficiary Maximum R1 714 per family

BENEFIT		ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
5F Trauma and HIV Assistance Programme Benefit covers trauma and HIV exposure as a result of crime, e.g. assault or rape, and HIV exposure resulting from crime and occupational injuries, e.g. needle-stick injury. Where relevant, victims will be accompanied by an appropriate, qualified professional to identity parades and court appearances for emotional support. Call 0861 776 363 for 24-hour assistance. Benefits are subject to the use of the DSP. Co-payment applies for voluntary use of a non-DSP. Subject to case management and protocols.						
5F1 Counselling						
a) Telephonic counselling	100% Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Not subject to day-to-day limit	100% Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Not subject to day-to-day limit	100% Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Not subject to day-to-day limit	100% Negotiated Tariff Appropriate number of sessions as determined by the designated case manager		
b) Face-to-face counselling	100% Negotiated Tariff Up to four sessions per incident Thereafter, subject to PMB legislation Not subject to day-to-day limit	100% Negotiated Tariff Up to four sessions per incident Thereafter, subject to PMB legislation Not subject to day-to-day limit	100% Negotiated Tariff Up to four sessions per incident Thereafter, subject to PMB legislation Not subject to day-to-day limit	100% Negotiated Tariff Up to four sessions per incident Thereafter, subject to PMB legislation		
5F2 HIV post-exposure management 2 doctor's consultations, 30 days' PEP medication, pathology and 3 – 6 months' HIV exposure management	100% Negotiated Tariff 1 course of treatment per beneficiary per incident at DSP Subject to PMB legislation Not subject to day-to-day limit	100% Negotiated Tariff 1 course of treatment per beneficiary per incident at DSP Subject to PMB legislation Not subject to day-to-day limit	100% Negotiated Tariff 1 course of treatment per beneficiary per incident at DSP Subject to PMB legislation Not subject to day-to-day limit	100% Negotiated Tariff 1 course of treatment per beneficiary per incident at DSP Subject to PMB legislation		
6 MATERNITY Call 0860 776 363 where pre-authorisation is required and for more information on clinical qualifying criteria, and benefits. Subject to PMB legislation.						
Profmed Baby: Expectant mothers can download the Profmed App to access the Profmed Baby programme. Health-on-Line on 082 911: Telephone emergency and non-emergency medical advice, during pregnancy and once baby is born.						
6A Day-to-Day Cover Members on the ProSecure Plus and ProSecure options are required to register on the Maternity programme to access the relevant benefits.						
6A1 Ultra-sound scans (ante-natal)	100% Profmed Tariff 2 scans per pregnancy Subject to day-to-day limit	100% Profmed Tariff 2 scans per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	100% Profmed Tariff 2 scans per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	Subject to PMB legislation		
6A2 Ante-/post-natal consultations by medical practitioner	300% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit	GPs: R478 Specialists: R725 13 visits per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	GPs: R478 Specialists: R725 13 visits per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	GPs and specialists at GP rate: R478 Subject to day-to-day limit and PMB legislation	Subject to PMB legislation	

BENEFIT	ProPinnacle	ProSecure Plus		ProActive Plus	ProActive
6A3 b) Ante-/post-natal consultations by registered midwife	300% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit	Consultations: R725 13 visits per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)		Consultations: R478 Subject to day-to-day limit and PMB legislation	Subject to PMB legislation
6A4 Lactation consultation At a registered service provider Available up to 6 months post-delivery (Subject to registration on the Maternity programme, pre-authorisation and protocols)	100% Profmed Tariff 1 visit per pregnancy Subject to day-to-day limit	100% Profmed Tariff 1 visit per pregnancy Not subject to day-to-day limit		Subject to PMB legislation	
6A5 Nutrition consultation At a registered service provider Available up to 6 months post-delivery (Subject to registration on the Maternity programme, pre-authorisation and protocols)	100% Profmed Tariff 1 visit per pregnancy Subject to day-to-day limit	100% Profmed Tariff 1 visit per pregnancy Not subject to day-to-day limit		Subject to PMB legislation	
6A6 Nuchal Translucency Non-Invasive Pre-Natal Test (NIPT) (Subject to registration on the Maternity programme, pre-authorisation and protocols)	100% Profmed Tariff 1 investigation per pregnancy Subject to day-to-day limit and PMB legislation	100% Profmed Tariff 1 investigation per pregnancy Not subject to day-to-day limit Subject to PMB legislation		Subject to PMB legislation	
6A7 Out-patient visits to hospital/ clinic for investigations, e.g. tococardiography	80% Profmed Tariff Subject to day-to-day limit	80% Profmed Tariff Subject to day-to-day limit		Subject to PMB legislation	
6A8 Ante-natal exercises by registered healthcare practitioner	80% Profmed Tariff R1 027 per family Subject to day-to-day limit	No benefit		No benefit	
6A9 Prescribed medication during pregnancy	80% Single Exit Price plus dispensing fee Subject to Section 5B1	80% Single Exit Price plus dispensing fee Subject to Section 5B1		80% Single Exit Price plus dispensing fee Subject to Section 5B1	Subject to PMB legislation
6B Hospitalisation Subject to use of the DSPN. Call 0800 776 363 where pre-authorisation is required and for more information on clinical qualifying criteria, and benefits. Subject to PMB Legislation.					
6B1 In-patient hospitalisation (ante-natal) (Subject to pre-authorisation)	100% Savvy Tariff in private ward	100% Savvy Tariff in general ward		100% Savvy Tariff in general ward	
6B2 Delivery fee by GP or specialist	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	200% Profmed Tariff	100% Specific Tariff
6B3 Delivery fee by registered midwife	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	200% Profmed Tariff	100% Specific Tariff
6B4 Labour ward	100% Savvy Tariff	100% Savvy Tariff		100% Savvy Tariff	

BENEFIT	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
6B5 Ward accommodation (post-delivery): Normal delivery – 3 days Caesarean section – 4 days	100% Savvy Tariff in private ward	100% Savvy Tariff in private ward	100% Savvy Tariff in general ward	100% Savvy Tariff in general ward	
6B6 Theatre and recovery room	100% Savvy Tariff	100% Savvy Tariff		100% Savvy Tariff	
6B7 Other medical practitioner services, e.g. pathology and radiology while in hospital	100% Profmed Tariff	100% Profmed Tariff		100% Profmed Tariff	
6B8 Consultations while in hospital	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	200% Profmed Tariff	100% Specific Tariff
6B9 Home nursing (post-natal) 48-hour benefit in the event of a home delivery or if discharged from a birthing unit within 24 hours after delivery (Subject to pre-authorisation)	Subject to Section 1E5(a) of this Schedule	Subject to Section 1E5(a) of this Schedule		Subject to Section 1E5(a) of this Schedule	
6B10 Neonatal ICU Neonate must be registered as a dependant on Profmed (Subject to pre-authorisation)	100% Savvy Tariff	100% Savvy Tariff		100% Savvy Tariff	
7 INTERNATIONAL TRAVEL MEDICAL ASSISTANCE					
This benefit covers members for medical emergencies while travelling internationally. Members who live outside South Africa in the SADC Region are covered under this benefit when travelling outside the borders of their country of residence, except to South Africa where option-specific benefits apply. Consult the International Travel Medical Assistance Benefit Document available on the website for the benefits, restrictions, exclusions and claims process. For medical assistance while travelling, it is necessary to call International SOS on +27 11 541 1225 prior to receiving treatment to avoid a co-payment. The Information Guide contains more information on the claims process and details of this benefit, or call 0860 679 200. Subject to case management and protocols.					
In- and out-of-hospital emergency medical expenses Out-of-hospital expenses exceeding R1500 and hospitalisation must be pre-authorised (Benefits subject to protocols and pre-authorisation. Call +27 11 541 1225)	R6 million per beneficiary per journey R1 500 excess per beneficiary per journey on out-of-hospital expenses. Out-of-hospital benefits only available if the claim relates to day-to-day benefits available on this option Spectacles or contact lenses limited to R3 300, subject to the R1 500 excess	R6 million per beneficiary per journey R1 500 excess per beneficiary per journey on out-of-hospital expenses. Out-of-hospital benefits only available if the claim relates to day-to-day benefits available on this option Spectacles or contact lenses limited to R3 300, subject to the R1 500 excess		R6 million per beneficiary per journey No benefit for out-of-hospital expenses	

These benefits are subject to ratification by the Council for Medical Schemes. This published Schedule is subject to the rules approved by the Board of Trustees and in the event of a dispute the approved rules of the Scheme will prevail. All benefits are subject to the PMB legislation. The rules contained in the Schedule of Benefits will prevail.

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