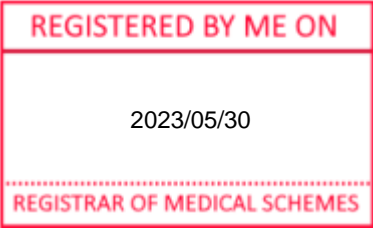


PARA GRAPH	BENEFIT (EXCEPT FOR PMBs)	STANDARD	STANDARD SELECT	CONDITIONS/REMARKS SUBJECT TO PMB
D1.6	Phytotherapy	Limited to and included in D1.	Limited to and included in D1.	
D2	AMBULANCE SERVICES (See B3)	100% of cost if authorised by the preferred provider.	100% of cost if authorised by the preferred provider.	Subject to the contracted provider. Non-authorisation will result in non-payment except for PMBs.
D3	APPLIANCES, EXTERNAL ACCESSORIES AND ORTHOTICS (See B3)			Diabetic accessories and appliances (with the exception of glucometers) to be pre-authorized and claimed from the chronic medicine benefit (D11.3). Recommend use of preferred supplier and subject to frequency limits as per managed care protocols. The benefit excludes consultations/fittings, which are subject to D17.2.
D3.1	In and Out of Hospital			
D3.1.1	General medical and surgical appliances, including wheelchairs and repairs, and large orthopaedic appliances	<ul style="list-style-type: none"> Limited to and included in the Day-to-Day benefit. Recommend use of preferred supplier. 	<ul style="list-style-type: none"> Limited to and included in the Day-to-Day benefit. Recommend use of preferred supplier. 	Hiring or buying medical or surgical aids as prescribed by a medical practitioner.
D3.1.2	Hearing Aids and repairs	<ul style="list-style-type: none"> Limited to R8 250 per device (maximum of two per family) over a three year cycle. A 25% co-payment will apply to devices obtained from a non-DSP 	<ul style="list-style-type: none"> Limited to R8 250 per device (maximum of two per family) over a three year cycle. A 25% co-payment will apply to devices obtained from a non-DSP. 	Hearing aids and repairs are subject to the relevant managed healthcare programme and to its prior authorisation. Subject to the Audiology Benefit Management Programme.
D3.1.3	CPAP Apparatus for sleep apnoea	R7 630 per family, unless PMB.	R7 630 per family, unless PMB.	CPAP Machines are subject to the relevant managed healthcare programme and to its prior authorisation.
D3.1.4	Stoma Products	Limited to and included in D3.1.3 and thereafter funded from OAL, if PMB.	Limited to and included in D3.1.3 and thereafter funded from OAL, if PMB.	

PARA GRAPH	BENEFIT (EXCEPT FOR PMBs)	STANDARD	STANDARD SELECT	CONDITIONS/REMARKS SUBJECT TO PMB
D17	PARAMEDICAL SERVICES (ALLIED MEDICAL PROFESSIONS) (See B2 and B3)			
D17.1	In hospital	<ul style="list-style-type: none"> Limited to and included in D1, unless PMB. 100% of the Bonitas Tariff. 	<ul style="list-style-type: none"> Limited to and included in D1, unless PMB. 100% of the Bonitas Tariff. 	Subject to referral by the treating practitioner.
D17.1.1	Dietetics	Limited to and included in D1.	Limited to and included in D1.	
D17.1.2	Occupational Therapy	Limited to and included in D1.	Limited to and included in D1.	
D17.1.3	Speech Therapy	Limited to and included in D1.	Limited to and included in D1.	
D17.2	Out of hospital	<ul style="list-style-type: none"> Limited to and included in D1. 100% of the Bonitas Tariff. 	<ul style="list-style-type: none"> Limited to and included in D1. 100% of the Bonitas Tariff. 	Out of hospital paramedical services, as specified in the aPMB care templates, will only accrue to the Day-to-Day benefits once the aPMB entitlements are depleted.
D17.2.1	Audiology	<ul style="list-style-type: none"> Non-network: Limited to and included in D1. Network: All tests and consultations limited to the Audiology Benefit Management Programme (ABM). 	<ul style="list-style-type: none"> Non-network: Limited to and included in D1. Network: All tests and consultations limited to the Audiology Benefit Management Programme (ABM). 	Subject to the Audiology Benefit Management Programme
D17.2.2	Chiropractics	Limited to and included in D1.	Limited to and included in D1.	This benefit excludes X-rays performed by chiropractors.
D17.2.3	Dietetics	Limited to and included in D1.	Limited to and included in D1.	
D17.2.4	Genetic counselling	Limited to and included in D1.	Limited to and included in D1.	
D17.2.5	Hearing aid acoustics	<ul style="list-style-type: none"> Non-network: Limited to and included in D1. Network: All tests and consultations limited to the Audiology Benefit Management Programme (ABM). 	<ul style="list-style-type: none"> Non-network: Limited to and included in D1. Network: All tests and consultations limited to the Audiology Benefit Management Programme (ABM). 	Subject to the Audiology Benefit Management Programme
D17.2.6	Occupational therapy	Limited to and included in D1.	Limited to and included in D1.	
D17.2.7	Orthoptics	Limited to and included in D1..	Limited to and included in D1.	
D17.2.8	Orthotists and Prosthetists	Limited to and included in D1.	Limited to and included in D1.	

REGISTERED BY ME ON

2023/05/30

REGISTRAR OF MEDICAL SCHEMES

PARA GRAPH	BENEFIT (EXCEPT FOR PMBs)	STANDARD	STANDARD SELECT	CONDITIONS/REMARKS SUBJECT TO PMB
D24.6	Children's health Hypothyroidism Infant Hearing Screening Human Papilloma Virus (HPV) Vaccine	<ul style="list-style-type: none"> 1 TSH Test Age <1 month One infant hearing screening test for newborns up to 8 weeks, in or out of hospital, performed by an audiologist or speech therapist. Limited to two doses for girls aged between 9 – 14years. 	<ul style="list-style-type: none"> 1 TSH Test Age <1 month One infant hearing screening test for newborns up to 8 weeks, in or out of hospital, performed by an audiologist or speech therapist. Limited to two doses for girls aged between 9 – 14years. 	<div style="border: 2px solid red; padding: 10px; text-align: center;"> <p>REGISTERED BY ME ON</p> <p>2023/05/30</p> <p>.....</p> <p>REGISTRAR OF MEDICAL SCHEMES</p> </div>
	Extended Program on Immunisation (EPI)	<ul style="list-style-type: none"> Various Vaccinations including the administration fee of the nurse practitioner for children up to the age of 12 years. 	<ul style="list-style-type: none"> Various Vaccinations including the administration fee of the nurse practitioner for children up to the age of 12 years. 	As per State EPI protocols.
D24.7	Pertussis Booster Vaccine (Whooping Cough)	<ul style="list-style-type: none"> One booster vaccine per beneficiary between the ages of 07 and 64 years, every 10 years. 	<ul style="list-style-type: none"> One booster vaccine per beneficiary between the ages of 07 and 64 years, every 10 years. 	
D24.8	Hearing Loss Preventative Screening	<ul style="list-style-type: none"> Unlimited digital pre-screening for potential hearing loss subject to the Audiology Benefit Management programme 	<ul style="list-style-type: none"> Unlimited digital pre-screening for potential hearing loss subject to the Audiology Benefit Management programme 	Screening options as available on the website and all other digital platforms offered by the Fund.
D25	INTERNATIONAL TRAVEL BENEFIT Leisure travel:	<ul style="list-style-type: none"> For medical emergencies when travelling outside the borders of South Africa. <ul style="list-style-type: none"> 90 days excluding USA - R5 million per Member, R10 million for Member and Dependants 45 days including USA – Maximum cover 	<ul style="list-style-type: none"> For medical emergencies when travelling outside the borders of South Africa. <ul style="list-style-type: none"> 90 days excluding USA - R5 million per Member, R10 million for Member and Dependants 45 days including USA – Maximum cover 	Subject to authorisation, prior to departure. <ul style="list-style-type: none"> The three months' age limit will not apply. Additional benefits for Covid-19: <ul style="list-style-type: none"> additional costs for compulsory medical quarantine limited to R1 000 per day to a maximum of R10 000 for accommodation and PCR testing up to R1 000.