

# 2020 Benefits & Contribution Adjustments



MediCore

Alternatives to Hospitalisation: Physical Rehabilitation	Limit increased to <b>R38 300</b> per family
Alternatives to Hospitalisation: Terminal Care Benefit	Sub-limit increased to <b>R35 200</b> per family
Consultations and Visits Out-of-Hospital: Private Nurse Practitioners (Subject to the use of the SmartCare Nurse Network compulsory from Rand one)	<b>Unlimited</b>
Consultations and Visits Out-of-Hospital: Nurse-led Videomed GP Practitioners (Subject to the use of the SmartCare Videomed GP Network)	<b>1</b> per family subject to the Overall Annual Limited and thereafter no benefit
Contraceptive Medication (Birth Control)	Limit increased to <b>R170</b> per month per female beneficiary
Hospital Network	Subject to the use of the Compact Hospital Network
Maxillo-Facial and Oral Surgery	Limit increased to <b>R11 550</b> per family
Mental Health: In Hospital	Limit increased to <b>R33 400</b> per family
Prosthesis and Devices Internal	Limit increased to <b>R32 100</b> per family
Specialised Radiology (In and Out-of-Hospital)	<b>R9 000</b> per family - <b>10% upfront co-payment</b> for non-PMB
<b>MEDICORE</b>	<b>Monthly Contribution</b>
Principal Member	<b>R2 610</b>
Adult Dependant	<b>R2 208</b>
Child*	<b>R603</b>

\*Contribution rate is applicable to the member's first, second and third biological or legally adopted children only, excluding students.



**MEDSHIELD**  
medical scheme

## THE FOLLOWING SERVICES WILL ATTRACT UPFRONT CO-PAYMENTS:

Non-PMB Specialised Radiology	<b>10% upfront</b> co-payment
Non-PMB Internal Prosthesis and Devices	<b>25% upfront</b> co-payment
Voluntary use of a non-Medshield Network Hospital	<b>25% upfront</b> co-payment
Voluntary use of a non-Medshield Network Hospital - Organ, Tissue and Haemopoietic stem cell (Bone marrow) transplant	<b>25% upfront</b> co-payment
Voluntary use of a non-Medshield Network Hospital - Mental Health	<b>25% upfront</b> co-payment
Voluntary use of a non-DSP for HIV & AIDS related medication	<b>40% upfront</b> co-payment
Voluntary use of a non-DSP or a non-Medshield Pharmacy Network	<b>40% upfront</b> co-payment
Voluntarily obtained out of formulary medication	<b>40% upfront</b> co-payment
Voluntary use of a non-ICON provider - Oncology	<b>40% upfront</b> co-payment
Voluntary use of a non-DSP provider - Chronic Renal Dialysis	<b>40% upfront</b> co-payment

## IN-HOSPITAL PROCEDURAL UPFRONT CO-PAYMENTS

Endoscopic procedures	<b>R2 000 upfront</b> co-payment
Hernia Repair (except in infants)	<b>R3 000 upfront</b> co-payment
Laparoscopic procedures	<b>R4 000 upfront</b> co-payment
Arthroscopic procedures	<b>R4 000 upfront</b> co-payment
Nissen Fundoplication	<b>R5 000 upfront</b> co-payment
Hysterectomy	<b>R5 000 upfront</b> co-payment
Functional Nasal surgery	<b>R5 000 upfront</b> co-payment
Back and Neck surgery	<b>R8 000 upfront</b> co-payment

**Please note:** Failure to obtain an authorisation prior to hospital admission or surgery and/or treatment (except for an emergency), will attract a 20% penalty, in addition to the above co-payments.

The Medshield Specialist Network list shall be as designated in writing by the Scheme from time to time.

Medshield Medical Scheme Rule 16.2 indicates that a member is entitled to change from one benefit option to another provided that the change is made with effect 1 January of any financial year, therefore mid-year option changes are not permitted.