2020 Benefits & Contribution Adjustments





Adult Vaccination		Limit increased to R380 per family	
Alternatives to Hospitalisation: Physical	Rehabilitation	Limit increased to R63 000 per family	
Alternatives to Hospitalisation: Termina	l Care Benefit	Sub-limit increased to R35 000 per family	
Appliances General, Medical and Surgical		Limit increased to R9 300 per family	
Consultations and Visits Out-of-Hospita (Subject to the use of the SmartCare Nu from Rand one)		Unlimited	
Consultations and Visits Out-of-Hospita General Practitioners (GP) Subject to the use of the SmartCare Vid		1 per family subject to the Overall Annual Limit and thereafter subject to the Personal Savings Account.	
Contraceptive Medication (Birth Control)		Limit increased to R170 per month per female beneficiary	
Dental: Plastic Dentures		Requires pre-authorisation	
Dentistry: Specialised		Limit increased to R11 800 per family	
Hospital Network		Amendments to the Hospital listing	
Maxillo-Facial and Oral Surgery		Limit increased to R18 600 per family	
Medication: Pharmacy Advised Therapy		Script limit increased to R220 per script	
Mental Health: Consultations and Visits - Out-of-Hospital		Limit increased to R4 700 per family	
Mental Health: In-Hospital		Limit increased to R39 300 per family	
Mental Health: Rehabilitation For Substance Abuse		Limit increased to R14 100 per family	
ncology ncology		Limit increased to R315 000 per family	
Oncology: Medication		Limit increased to R210 000 per family	
Oncology: PET Scan		Limit increased to R20 000 per family	
Prosthesis and Devices Internal		Limit increased to R41 700 per family	
Refractive Surgery		Limit increased to R8 800 per family	
Specialised Radiology (In and Out-of-Hospital)		Limit increased to R18 600 per family	
MEDISAVER	Monthly Contribution	n Savings (Included In Contribution)	
Principal Member	R3 462	R519	
Adult Dependant	R2 868	R430	
Child*	R843	R126	

^{*}Contribution rate is applicable to the members first, second and third biological or legally adopted children only, excluding students.



Non-PMB Specialised Radiology including PET and PET-CT scan	10% upfront co-payment
Specialised Drugs for Oncology, non-Oncology and Biological Drugs	20% upfront co-payment
Non-PMB Internal Prosthesis and Devices	25% upfront co-payment
Voluntary use of a non-Medshield Network Hospital	25% upfront co-payment
Voluntary use of a non-Medshield Network Hospital - Mental Health	25% upfront co-payment
Voluntary use of a non-Medshield Network Hospital - Organ, Tissue and Haemopoietic stem cell (Bone marrow) transplant	25% upfront co-payment
Voluntary use of a non-DSP for HIV & AIDS related medication	40% upfront co-payment
Voluntary use of a non-DSP or a non-Medshield Pharmacy Network	40% upfront co-payment
Voluntarily obtained out of formulary medication	40% upfront co-payment
Voluntary use of a non-ICON provider - Oncology	40% upfront co-payment
Voluntary use of a non-DSP provider - Chronic Renal Dialysis	40% upfront co-payment
IN-HOSPITAL PROCEDURAL UPFRONT CO-PAYMENTS	
Endoscopic procedures	R1 500 upfront co-payment
Hernia Repair (except in infants)	R3 000 upfront co-payment
Laparoscopic procedures	R3 500 upfront co-payment
Arthroscopic procedures	R3 500 upfront co-payment
Wisdom Teeth	R3 500 upfront co-payment
Nissen Fundoplication	R5 000 upfront co-payment
Hysterectomy	R5 000 upfront co-payment
Functional Nasal surgery	R5 000 upfront co-payment
Back and Neck surgery	R7 000 upfront 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.

