



2020

**CMAAC**  
FINANCIAL AND COMPLIANCE  
Healthcare solutions... expert care!

**Dr. Pikkie Kok**

(REG. P.A. U.S. 10 DE. 1981)

FINANCIAL & HEALTHCARE ADVISOR

105 Dr. Yusuf Dadoo Ave. (Old Brady Ave.) La Roch / KLERKSDORP 2570  
P.O. Box 10710, KLERKSDORP 2570  
Tel: (010) 435 7400 CELL: 083 236 5081 Fax: 0800522770 / (010) 468 8153  
E-mail: [cmaacw@mmweb.co.za](mailto:cmaacw@mmweb.co.za)

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PRIMARY SELECT

*Bonitas*

Medical Aid for South Africa

## Approximately 15% cheaper using a quality network

### Plus extra benefits for:

-  **General appliances**  
(including moonboot and crutches)
-  **MRIs and CT scans**
-  **Mental health**
-  **Basic dentistry**
-  **Optometry**

### Unlimited **hospital cover**

100% Bonitas Rate

### Unlimited **terminal care benefit**



**Wellness screening plus R1 270 Extender** to use for blood tests, x-rays, programme to stop smoking or consultations with a GP, dietician, biokineticist and physiotherapist

### **R1 610 for contraceptives**



**Chronic medicine for 27 PMB conditions**



### Maternity benefits:

- 6 consultations during pregnancy
- 2 x 2D scans
- 4 consultations with a midwife after delivery (1 of these can be used for a consultation with a lactation specialist)
- Maternity support for pregnant moms



### Childcare benefits:

- Newborn hearing screening
- Thyroid screening for infants under 1 month
- Childhood immunisations according to the Expanded Programme on Immunisation
- 1 Paediatric or GP consultation for children under 1
- 1 GP consultation for children aged 2 - 12
- 24/7 Babyline for advice for children under 3



### Preventative care:

- Flu vaccine
- HIV test
- Mammogram
- Pap smear
- Pneumococcal vaccine
- Prostate screening



### Managed Care programmes:

- Back and neck
- Cancer
- Diabetes
- HIV/AIDS

## What you pay

Main member	<b>R2 065</b>
Adult dependant	<b>R1 615</b>
Child dependant	<b>R657</b>

You only pay for a maximum of three children. Full-time students pay child rates up to age 24 years.

## Out-of-hospital benefits

Out-of-hospital claims will be paid from available day-to-day benefits. There is a separate benefit for GP consultations.

### GP consultations

You must choose 1 GP on our network for each beneficiary. This is your nominated GP for the year. If you do not use your nominated GP, your benefit will be limited to the non-nominated GP consultation benefit as indicated in the table below.

<b>Main member only</b>	R1 900 (R615 of this may be used for non-nominated GP consultations)
<b>Main member + 1 dependant</b>	R3 490 (R1 160 of this may be used for non-nominated GP consultations)
<b>Main member + 2 dependants</b>	R4 130 (R1 320 of this may be used for non-nominated GP consultations)
<b>Main member + 3 dependants</b>	R4 440 (R1 480 of this may be used for non-nominated GP consultations)
<b>Main member + 4 or more dependants</b>	R5 030 (R1 750 of this may be used for non-nominated GP consultations)

### Day-to-day benefits

These benefits provide cover for consultations with your specialist, acute medicine, x-rays, blood tests and other out-of-hospital medical expenses. There is a separate benefit for tests and consultations for PMB treatment plans (excluding GP consultations). Therefore this will not affect your day-to-day benefits.

<b>Main member only</b>	R2 660
<b>Main member + 1 dependant</b>	R4 760
<b>Main member + 2 dependants</b>	R5 590
<b>Main member + 3 dependants</b>	R6 010
<b>Main member + 4 or more dependants</b>	R6 510

<b>Specialist consultations</b>	Paid from available day-to-day benefits You must get a referral from your GP
<b>Blood tests and other laboratory tests</b>	Paid from available day-to-day benefits
<b>X-rays and ultrasounds</b>	Paid from available day-to-day benefits

<b>Acute medicine</b>	Paid from available day-to-day benefits Formulary and Bonitas Pharmacy Network applies 20% co-payment for non-network or non-formulary use
<b>Paramedical/Allied medical professionals</b> (such as physiotherapists, occupational therapists, dieticians and biokineticists)	Paid from available day-to-day benefits
<b>Over-the-counter medicine</b>	R500 per beneficiary R1 460 per family Paid from available day-to-day benefits Formulary and Bonitas Pharmacy Network applies 20% co-payment for non-network or non-formulary use

**The following are paid from your unlimited overall annual benefit (and not from your day-to-day benefits, so you get more value for money):**

<b>MRIs and CT scans</b> (specialised radiology)	R13 260 per family, in and out-of-hospital Pre-authorization required
<b>Mental health consultations</b>	R9 560 per family In and out-of-hospital consultations (included in the mental health hospitalisation benefit) Cover for educational psychologists for beneficiaries up to the age of 21 years
<b>General medical appliances</b> (such as wheelchairs and crutches)	R7 030 per family An additional R6 680 per family will apply should Stoma Care and CPAP machines exceed the general medical appliances limit You must use a preferred supplier
<b>Optometry</b>	R4 710 per family, once every 2 years (based on the date of your previous claim) Each beneficiary can choose glasses or contact lenses

<b>Eye tests</b>	1 per beneficiary, at a network provider <b>OR</b> R325 per beneficiary, at a non-network provider
<b>Single vision lenses (Clear) or</b>	100% towards the cost of lenses at network rates R185 per lens, per beneficiary, out of network
<b>Bifocal lenses (Clear) or</b>	100% towards the cost of lenses at network rates R420 per lens, per beneficiary, out of network
<b>Multifocal lenses (Clear)</b>	100% towards the cost of lenses at network rates R745 per lens, per beneficiary, out of network
<b>Frames</b>	R525 per beneficiary at a network provider R368 per beneficiary at a non-network provider
<b>Contact lenses</b>	R1 295 per beneficiary (included in the family limit)
<b>Basic dentistry</b>	Covered at the Bonitas Dental Tariff You must use a provider on the DENIS network
<b>Consultations</b>	2 annual check-ups per beneficiary (once every 6 months)
<b>X-rays: Intra-oral</b>	Managed Care protocols apply
<b>X-rays: Extra-oral</b>	1 per beneficiary, every 3 years
<b>Oral hygiene</b>	2 annual scale and polish treatments per beneficiary (once every 6 months) Fissure sealants are only covered for children under 16 years Fluoride treatments are only covered for children from age 5 and younger than 16 years
<b>Fillings</b>	Benefit for fillings is granted once per tooth, every 2 years Benefit for re-treatment of a tooth is subject to Managed Care protocols A treatment plan and x-rays may be required for multiple fillings

<b>Root canal therapy and extractions</b>	Managed Care protocols apply Benefit for root canal includes all teeth except primary teeth and permanent molars
<b>Plastic dentures and associated laboratory costs</b>	1 set of plastic dentures (an upper and a lower) per beneficiary, once every 4 years Pre-authorisation required
<b>Maxillo-facial surgery and oral pathology</b>	
<b>Surgery in the dental chair</b>	Managed Care protocols apply
<b>Hospitalisation</b> (general anaesthetic)	A co-payment of R3 500 per hospital admission and admission protocols apply General anaesthetic is only available to children under the age of 5 for extensive dental treatment once per lifetime General anaesthetic benefit is available for the removal of impacted teeth Managed Care protocols apply Pre-authorisation required
<b>Laughing gas in dental rooms</b>	Managed Care protocols apply
<b>IV conscious sedation in rooms</b>	Limited to extensive dental treatment Managed Care protocols apply Pre-authorisation required

## Additional benefits

We believe in giving you more value. The following benefits are in addition to your day-to-day and other benefits.

<b>Contraceptives</b>	
<b>For women aged up to 50</b>	R1 610 per family You must use the Designated Service Provider for pharmacy-dispensed contraceptives
<b>Maternity care</b>	
<b>Per pregnancy</b>	6 antenatal consultations with a gynaecologist, GP or midwife 2 2D ultrasound scans 1 amniocentesis 4 consultations with a midwife after delivery (1 of these can be used for a consultation with a lactation specialist) Maternity support for pregnant moms
<b>Childcare</b>	
<b>Hearing screening</b>	For newborns, in or out-of-hospital
<b>Congenital hypothyroidism screening</b>	For infants under 1 month old
<b>Babyline</b>	24/7 helpline for medical advice for children under 3 years
<b>Paediatrician or GP consultations</b>	1 consultation per child under 1 year 1 consultation per child between ages 1 and 2
<b>GP consultations</b>	1 consultation per child between ages 2 and 12
<b>Immunisations</b>	According to Expanded Programme on Immunisation in South Africa
<b>Preventative care</b>	
<b>General health</b>	1 HIV test per beneficiary 1 flu vaccine per beneficiary
<b>Women's health</b>	1 mammogram every 2 years, for women over 40 1 pap smear every 3 years, for women between ages 21 and 65
<b>Men's health</b>	1 prostate screening antigen test for men between ages 45 and 69, who are considered to be at high risk for prostate cancer

<b>Elderly health</b>	<p>1 pneumococcal vaccine every 5 years, for members aged 65 and over</p> <p>1 stool test for colon cancer, for members between ages 50 and 75</p>
<b>Wellness benefits</b>	
<b>Wellness screening</b>	<p>1 wellness screening per beneficiary at a participating pharmacy, biokineticist or a Bonitas wellness day</p> <p>Wellness screening includes the following tests:</p> <ul style="list-style-type: none"> <li>• Blood pressure</li> <li>• Glucose</li> <li>• Cholesterol</li> <li>• Body mass index</li> <li>• Waist-to-hip ratio</li> </ul>
<b>Wellness extender</b>	<p>R1 270 per family which can be used for:</p> <ul style="list-style-type: none"> <li>• GP consultations only</li> <li>• Biokineticist consultations and treatment</li> <li>• Dietician consultations and treatment</li> <li>• Physiotherapist consultations and treatment</li> <li>• A programme to stop smoking</li> <li>• X-rays as per formulary</li> <li>• Blood tests as per formulary</li> </ul> <p>Available after completing a wellness screening</p> <p>Child dependants can access the wellness extender once an adult beneficiary has completed a wellness screening</p>
<b>International travel benefit</b>	
<b>Per trip</b>	<p>Cover for medical emergencies when you travel outside South Africa</p> <p>You must register for this benefit</p>



## Chronic benefits

Primary Select ensures that you are covered for the 27 Prescribed Minimum Benefits listed below on the applicable formulary. You must use Pharmacy Direct, our Designated Service Provider, to get your medicine. If you choose not to use Pharmacy Direct or if you choose to use medicine that is not on the formulary, you will have to pay a 40% co-payment.

### Prescribed Minimum Benefits covered

1. Addison's Disease	10. Crohn's Disease	19. Hyperlipidaemia
2. Asthma	11. Diabetes Insipidus	20. Hypertension
3. Bipolar Mood Disorder	12. Diabetes Type 1	21. Hypothyroidism
4. Bronchiectasis	13. Diabetes Type 2	22. Multiple Sclerosis
5. Cardiac Failure	14. Dysrhythmias	23. Parkinson's Disease
6. Cardiomyopathy	15. Epilepsy	24. Rheumatoid Arthritis
7. Chronic Obstructive Pulmonary Disease	16. Glaucoma	25. Schizophrenia
8. Chronic Renal Disease	17. Haemophilia	26. Systemic Lupus Erythematosus
9. Coronary Artery Disease	18. HIV/AIDS	27. Ulcerative Colitis

## Managed Care programmes

We offer a range of Managed Care programmes to support you and help put you on the path to good health. These programmes empower you to manage your condition effectively in the most clinically-proven way, ensuring your benefits last longer.

You will need to register to join these programmes.

<p><b>Back and neck</b></p>	<p>Helps manage severe back and neck pain          Offers a personalised treatment plan for up to 6 weeks          Includes assistance from doctors, physiotherapists and biokineticists          Gives access to a home care plan to maintain long-term results          We cover the full cost of the programme so it won't impact your savings or day-to-day benefits          Highly effective and low-risk, with an excellent success rate          Uses the DBC network</p>
<p><b>Cancer</b></p>	<p>Puts you first, offering emotional and medical support          Delivers cost-effective care of the highest quality          Liaises with your doctor to ensure your treatment plan is clinically appropriate to meet your needs          Matches the treatment plan to your benefits to ensure you have the cover you need          Access to a social worker for you and your loved ones          Uses the ICON network of oncology specialists          Uses the Bonitas Oncology Medicine Network (20% co-payment applies for use of a non-network provider)</p>
<p><b>Diabetes management</b></p>	<p>Empowers you to make the right decisions to stay healthy          Offers a personalised care plan for your specific needs          Provides cover for the tests required for the management of diabetes as well as other chronic conditions          Helps you track the results of the required tests          Offers access to diabetes doctors, dieticians and podiatrists          Helps you better understand your condition through diabetes education          Gives access to a dedicated Health Coach to answer any questions you may have</p>

**HIV/AIDS**

Provides you with appropriate treatment and tools to live a normal life  
Covers medicine to treat HIV (including drugs to prevent mother-to-child transmission and infection after sexual assault or needle-stick injury)  
Treatment and prevention of opportunistic infections such as pneumonia, TB and flu  
Covers regular blood tests to monitor disease progression, response to therapy and to detect possible side-effects of treatment  
Offers HIV-related consultations to visit your doctor to monitor your clinical status  
Gives ongoing patient support via a team of trained and experienced counsellors  
Offers access to telephonic support from doctors  
Helps in finding a registered counsellor for emotional support

## In-hospital benefits

This benefit offers cover for major medical events that result in a beneficiary being admitted to hospital. We negotiate extensively with private hospitals to ensure the best possible value for our members.

Pre-authorisation is required.

**Please note:** You must use a hospital on the Primary Select network or you will have to pay a 30% co-payment.

<b>Specialist consultations/treatment</b>	Unlimited, network specialists covered in full at the Bonitas Rate Unlimited, non-network specialists paid at 100% of the Bonitas Rate
<b>GP consultations/treatment</b>	Unlimited, covered at 100% of the Bonitas Rate
<b>Blood tests and other laboratory tests</b>	Unlimited, covered at 100% of the Bonitas Rate
<b>X-rays and ultrasounds</b>	Unlimited, covered at 100% of the Bonitas Rate
<b>MRIs and CT scans</b> (specialised radiology)	R13 260 per family, in and out-of-hospital Pre-authorisation required
<b>Paramedical/Allied medical professionals</b> (such as physiotherapists, occupational therapists, dieticians and biokineticists)	Paid from available day-to-day benefits (except for PMB)
<b>Internal prosthesis</b>	R32 130 per family (excluding joint replacement prosthesis) Managed Care protocols apply You must use a preferred supplier
<b>Mental health hospitalisation</b>	R15 830 per family No cover for physiotherapy for mental health admissions You must use a Designated Service Provider
<b>Take-home medicine</b>	R390 per beneficiary, per hospital stay
<b>Physical rehabilitation</b>	R50 600 per family
<b>Alternatives to hospital</b> (hospice, step-down facilities)	R16 880 per family

<b>Terminal care</b>	Unlimited Including hospice/private nursing, home oxygen, pain management, psychologist and social worker support
<b>Cancer treatment</b>	R165 500 per family You must use a preferred provider Sublimit of R44 220 per beneficiary for Brachytherapy
<b>Organ transplants</b>	PMB only
<b>Kidney dialysis</b>	Unlimited You must use a Designated Service Provider, or a 20% co-payment will apply
<b>HIV/AIDS</b>	Unlimited, if you register on the HIV/AIDS programme Chronic medicine must be obtained from Pharmacy Direct

### A co-payment will apply to the following procedures in hospital:

<b>R1 520 co-payment</b>	<b>R3 850 co-payment</b>	<b>R7 580 co-payment</b>
1. Colonoscopy	1. Arthroscopy	1. Back Surgery including Spinal Fusion
2. Conservative Back Treatment	2. Diagnostic Laparoscopy	2. Joint Replacements
3. Cystoscopy	3. Laparoscopic Hysterectomy	3. Laparoscopic Pyeloplasty
4. Facet Joint Injections	4. Percutaneous Radiofrequency Ablations (Percutaneous Rhizotomies)	4. Laparoscopic Radical Prostatectomy
5. Flexible Sigmoidoscopy		5. Nissen Fundoplication (Reflux Surgery)
6. Functional Nasal Surgery		
7. Gastroscopy		
8. Hysteroscopy (not Endometrial Ablation)		
9. Myringotomy		
10. Tonsillectomy and Adenoidectomy		
11. Umbilical Hernia Repair		
12. Varicose Vein Surgery		







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