

2017

BONSAVE

> SWITCH TO MEDICAL AID

Bonitas

> BONSAVE

This savings option offers sufficient savings to use as you choose for medical expenses and extensive hospital cover.

- > Unlimited cover up to 150% in hospital
- > Specialists paid at 150% in hospital
- > No co-payments for CT scans and MRIs
- > Reasonable co-payments for certain in-hospital procedures
- > Additional benefit for take-home medicine after hospital stay
- > Savings plus additional benefit for basic dentistry
- > Cover for up to 6 additional GP consultations after savings are finished
- > 27 PMB chronic conditions covered
- > Childhood illness, infant paediatric and maternity benefits
- > Annual wellness screening and R1 050 for Wellness Extender



**Main
member**

R2 135



**Adult
dependant**

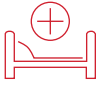
R1 654



**Child
dependant**

R 640

Your 4th and subsequent children will be covered free of charge.



IN-HOSPITAL BENEFITS

Cover for major medical events that result in a beneficiary being admitted into hospital.

Pre-authorisation is required.

We negotiate extensively with hospitals to ensure the best possible value for our members. Members have access to all private hospitals. A 30% co-payment will apply to admissions at specific hospitals. Please call us on **0860 002 108** or log in to www.bonitas.co.za for a list of these hospitals.

GP consultations	Unlimited, covered at 150% of the Bonitas Rate
Specialist consultations	Unlimited, covered at 150% of the Bonitas Rate
Blood tests and other laboratory tests	Unlimited, covered at 100% of the Bonitas Rate
X-rays and ultrasounds	Unlimited, covered at 100% of the Bonitas Rate
MRIs and CT scans (specialised radiology)	R21 000 per family, in and out of hospital Pre-authorisation required
Paramedical/Allied medical professionals (such as physiotherapists, occupational therapists, dieticians and biokineticists)	Unlimited, covered at 100% of the Bonitas Rate Your therapist must get a referral from the doctor treating you in hospital
Internal and external prostheses	PMB only Managed Care protocols apply Pre-authorisation required You must use a preferred supplier
Mental health hospitalisation	R29 000 per family No cover for physiotherapy for mental health admissions You must use a Designated Service Provider
Take-home medicine	R340 per beneficiary, per hospital stay

Physical rehabilitation	R44 650 per family Pre-authorisation required
Alternatives to hospital (hospice, step-down facilities)	R14 900 per family Pre-authorisation required
Cancer treatment	R310 150 per family You must use a preferred provider Pre-authorisation required
Organ transplants	Unlimited Pre-authorisation required
Kidney dialysis	Unlimited You must use the Designated Service Provider Pre-authorisation required
HIV/AIDS	Unlimited, if you register on the HIV/AIDS programme

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

R1 300 co-payment	R3 300 co-payment	R6 500 co-payment
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. Laparoscopic Appendectomy	4. Laparoscopic Radical Prostatectomy
5. Flexible Sigmoidoscopy	5. Percutaneous Radiofrequency Ablations (Percutaneous Rhizotomies)	5. Nissen Fundoplication (Reflux Surgery)
6. Functional Nasal Surgery		
7. Gastrosocopy		
8. Hysteroscopy (not Endometrial Ablation)		
9. Myringotomy		
10. Tonsillectomy and Adenoidectomy		
11. Umbilical Hernia Repair		
12. Varicose Vein Surgery		



OUT-OF-HOSPITAL BENEFITS

These benefits provide cover for consultations with your GP or specialist, acute medicine, x-rays, blood tests and other out-of-hospital medical expenses.

	Main member	Adult dependant	Child dependant
Savings	R4 104	R3 180	R1 236

GP consultations	Paid from available savings
Specialist consultations	Paid from available savings You must get a referral from your GP
Acute medicine and over-the-counter medicine	Paid from available savings
X-rays and ultrasounds	Paid from available savings
MRIs and CT scans (specialised radiology)	R21 000 per family, in and out of hospital Pre-authorization required
Blood tests and other laboratory tests	Paid from available savings
Mental health consultations	R14 300 per family In and out-of-hospital consultations (included in the mental health hospitalisation benefit) No cover for educational psychologists for beneficiaries older than 21 years
Paramedical/Allied medical professionals (such as physiotherapists, occupational therapists, dieticians and biokineticists)	Paid from available savings
General medical appliances (such as wheelchairs and crutches)	R6 200 per family Stoma care and CPAP machines may exceed the general medical appliances limit by R5 900 per family Foot orthotics paid from available savings You must use a preferred supplier
Optometry	Paid from available savings
Basic dentistry	Covered at the Bonitas Dental Tariff
Consultations	2 annual check-ups per beneficiary (once every 6 months)

X-rays: Intra-oral	Managed Care protocols apply
X-rays: Extra-oral	1 per beneficiary, every 3 years Additional benefits may be considered if specialised dental treatment is required
Oral hygiene	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
Fillings	Benefit for fillings is granted once per tooth, in 365 days 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
Root canal therapy and extractions	Benefit for root canal includes all teeth except primary teeth and permanent molars Managed Care protocols apply
Plastic dentures and associated laboratory costs	1 set of plastic dentures (an upper and a lower) per beneficiary, once every 4 years
Specialised dentistry	No benefit
Maxillo-facial surgery and oral pathology	
Surgery in the dental chair	Managed Care protocols apply
Hospitalisation (general anaesthetic)	A co-payment of R3 000 per hospital admission and admission protocols apply General anaesthetic is only available to children under the age of 5 for extensive dental treatment General anaesthetic benefit is available for the removal of impacted teeth Managed Care protocols apply Pre-authorisation required
Laughing gas in dental rooms	Managed Care protocols apply

IV conscious sedation in rooms	Limited to extensive dental treatment Managed Care protocols apply Pre-authorisation required
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CHRONIC BENEFITS

BonSave ensures that you are covered for the 27 Prescribed Minimum Benefits listed below on the applicable formulary. Pre-authorisation is required. If you choose not to use the Designated Service Provider 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



SUPPLEMENTARY BENEFITS

We believe in giving you more value. These additional benefits will not affect your other benefit limits or savings.

Additional GP consultations	If you use all your savings for the year, your family will still get a maximum of 6 GP consultations (limited to 3 per beneficiary) paid at the Bonitas Rate
Maternity care	
Per pregnancy	<p>6 antenatal consultations with a gynaecologist, GP or midwife</p> <p>2 2D ultrasound scans</p> <p>R1 100 for antenatal classes</p> <p>1 amniocentesis</p> <p>4 consultations with a midwife after delivery</p> <p>A Bonitas baby bag (you must register for this after obtaining pre-authorisation for the delivery)</p>
Babyline	
For children under 3 years	Access to telephone helpline for 24/7 medical advice, including weekends and holidays
Infant paediatric benefit	
Children under 1 year	2 consultations with a paediatrician
Children between ages 1 and 2	1 consultation with a paediatrician
Childhood illness benefit	
Children between ages 2 and 12	1 GP consultation
Preventative care	
General health	<p>1 HIV test per beneficiary</p> <p>1 flu vaccine per beneficiary</p>
Women's health	1 pap smear every 3 years, for women between ages 21 and 65
Elderly health	<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>

Wellness benefits	
Wellness screening	<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"> • Blood pressure • Glucose • Cholesterol • Body mass index • Waist-to-hip ratio
Wellness Extender	<p>R1 050 per family</p> <p>Each beneficiary must complete a wellness screening and register for this benefit. You may then choose from the following additional benefits:</p> <ul style="list-style-type: none"> • GP consultation(s) • Biokineticist consultation(s) • Dietician consultation(s) • Physiotherapy consultation(s) • A programme to stop smoking <p>All claims are paid at the Bonitas Rate</p>

Bonitas

 0860 002 108

 www.bonitas.co.za

 Bonitas Medical Fund

 @BonitasMedical

 **SWITCH TO MEDICAL AID**

Please note: Please note: Product rules, limits, terms and conditions apply. Where there is a discrepancy between the content provided in this brochure, the website and the Scheme Rules, the Scheme Rules will prevail. The Scheme Rules are available on request. Benefits are approved by the Council for Medical Schemes.CMS01-02FEB2017.

Report fraud on the Whistleblower Hotline
0800 112 811