

2017

HOSPITAL STANDARD

> **SWITCH** TO MEDICAL AID

Bonitas



HOSPITAL STANDARD

This hospital plan offers extensive hospital benefits with some value-added benefits.

- > Unlimited cover up to 100% in hospital
- > Network specialists paid in full in hospital
- > Additional benefit for take-home medicine after hospital stay
- > Reasonable co-payments for certain in-hospital procedures
- > 27 PMB chronic conditions covered
- > Childhood illness, infant paediatric and maternity benefits
- > Generous preventative care benefits
- > Annual wellness screening and R1 050 for Wellness Extender



**Main
member**

R1 665



**Adult
dependant**

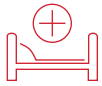
R1 404



**Child
dependant**

R 633

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 100% of the Bonitas Rate
Specialist consultations	Unlimited, network specialists covered in full Unlimited, non-network specialists paid at 100% 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)	R23 500 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 prosthesis	R39 800 per family Managed Care protocols apply Pre-authorisation required You must use a preferred supplier No benefit for joint replacements, unless PMB

Hospitalisation for basic dentistry (general anaesthetic)	General anaesthetic is only available to children under the age of 5 years for extensive dental treatment General anaesthetic benefits are available for the removal of impacted teeth R3 000 co-payment for hospital admissions Managed Care protocols apply Pre-authorisation required
IV conscious sedation in rooms	Limited to extensive dental treatment Managed Care protocols apply Pre-authorisation required
External prosthesis	PMB only Managed Care protocols apply Pre-authorisation required You must use a preferred supplier
Mental health hospitalisation	R29 000 per family Physiotherapy will be excluded for all mental health admissions You must use a Designated Service Provider
Take-home medicine	R420 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, at a preferred provider Pre-authorisation required
HIV/AIDS	Unlimited, if you register on the HIV/AIDS programme



CHRONIC BENEFITS

Hospital Standard 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

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. Laparoscopic Pyeloplasty
3. Cystoscopy	3. Laparoscopic Hysterectomy	3. Laparoscopic Radical Prostatectomy
4. Facet Joint Injections	4. Laparoscopic Appendectomy	4. Nissen Fundoplication (Reflux Surgery)
5. Flexible Sigmoidoscopy	5. Percutaneous Radiofrequency Ablations (Percutaneous Rhizotomies)	
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		



SUPPLEMENTARY BENEFITS

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

Maternity care	
Per pregnancy	6 antenatal consultations with a gynaecologist, GP or midwife
	2 2D ultrasound scans
	1 amniocentesis
	4 consultations with a midwife after delivery
A Bonitas baby bag (you must register for this after obtaining pre-authorisation for the delivery)	
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 per beneficiary
Preventative care	
General health	1 HIV test per beneficiary
	1 flu vaccine per beneficiary
Women's health	1 mammogram every 2 years, for women between ages 40 and 74
	1 pap smear every 3 years, for women between ages 21 and 65
Elderly health	1 pneumococcal vaccine every 5 years, for members aged 65 and over
	1 stool test for colon cancer, for members between ages 50 and 75

Wellness benefits	
Wellness screening	1 wellness screening per beneficiary at a participating pharmacy, biokineticist or a Bonitas wellness day
	Wellness screening includes the following tests: <ul style="list-style-type: none"> • Blood pressure • Glucose • Cholesterol • Body mass index • Waist-to-hip ratio
Wellness Extender	R1 050 per family
	Each beneficiary must complete a wellness screening and register for this benefit. You may then choose from the following additional benefits: <ul style="list-style-type: none"> • GP consultation(s) • Biokineticist consultation(s) • Dietician consultation(s) • Physiotherapy consultation(s) • A programme to stop smoking
All claims are paid at the Bonitas Rate	

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