EDGE

BONSTART
BONSTART PLUS
2025

Bonitas
Medical Aid for South Africa

Bonitas

WHAT YOU PAY

BONSTART

MAIN MEMBER	R1 498
ADULT DEPENDANT	R1 498
CHILD DEPENDANT	R1 498

BONSTART USES A LIST OF **SPECIFIC PRIVATE HOSPITALS** AND LINKED FORMULARY OF CHRONIC MEDICATION.

BONSTART PLUS

MAIN MEMBER	R1 907
ADULT DEPENDANT	R1 813
CHILD DEPENDANT	R840

BONSTART PLUS USES A LIST OF **SPECIFIC PRIVATE HOSPITALS** AND LINKED FORMULARY OF CHRONIC MEDICATION.

DEPENDANTS UP TO AGE 24 YEARS PAY CHILD RATES.

All benefits and limits are per calendar year, unless otherwise stated. Managed Care protocols apply. All benefits are approved by the Council for Medical Schemes. **PMB =** Prescribed Minimum Benefits **DSP =** Designated Service Provider

OUT-OF-HOSPITAL BENEFITS

Please note: When you complete a wellness screening or online wellness questionnaire, you unlock the Benefit Booster which can be used to pay for out-of-hospital expenses first. See page 6 for more information.

	BONSTART	BONSTART PLUS
VIRTUAL CARE GP AND NURSE CONSULTATIONS	Unlimited network GP and Nurse Virtual Care consultations	Unlimited network GP and Nurse Virtual Care consultations
GP CONSULTATIONS	Unlimited network GP consultations Authorisation required after 6th visit	Unlimited network GP consultations Authorisation required after 10th visit
	R125 co-payment per visit 2 non-network GP consultations for emergencies per family	R70 co-payment per visit 2 non-network GP consultations for emergencies per family
EMERGENCY ROOM BENEFIT (NEW) (FOR EMERGENCIES ONLY)	2 emergency consultations per family at a casualty ward or emergency room facility of a hospital Benefit limited to emergencies only	2 emergency consultations per family at a casualty ward or emergency room facility of a hospital Benefit limited to emergencies only
GP-REFERRED ACUTE MEDICINE, X-RAYS AND BLOOD TESTS	Limited to R1 780 per family Subject to the radiology and pathology formulary	Limited to R3 320 per family Subject to the radiology and pathology formulary
	For acute medicine: • A 20% co-payment will apply per script • Avoid a 40% co-payment by using the Bonitas Pharmacy Network • Subject to medicine formulary use	For acute medicine: • A 20% co-payment will apply per script • Avoid a 40% co-payment by using the Bonitas Pharmacy Network • Subject to medicine formulary use
OVER-THE-COUNTER MEDICINE (INCLUDES A LIST OF SPECIFIED SUPPLEMENTS)	Limited to R110 per event Maximum of R545 per family, per year	Limited to R175 per event Maximum of R825 per family, per year
	Avoid a 20% co-payment by using medicine that is on the formulary and completing your wellness screening Avoid a 20% co-payment by using the Bonitas Pharmacy Network	Avoid a 20% co-payment by using medicine that is on the formulary and completing your wellness screening Avoid a 20% co-payment by using the Bonitas Pharmacy Network
SPECIALIST CONSULTATIONS (YOU MUST GET A GP REFERRAL)	Limited to 1 visit per family up to R1 320 Including all acute medicine, basic radiology, specialised radiology and pathology prescribed by the specialist	Limited to 2 visits per family up to R2 380 Including all acute medicine, basic radiology, specialised radiology and pathology prescribed by the specialist
	R265 co-payment per visit Subject to GP referral	R125 co-payment per visit Subject to GP referral
OPTOMETRY	1 eye test per beneficiary at a network provider R110 co-payment	1 eye test per beneficiary at a network provider R110 co-payment
	Limited to R400 at a non-network provider	Limited to R400 at a non-network provider

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	BONSTART		BONSTART PLUS	
BASIC DENTISTRY	1 dental consultation per beneficiary	R125 co-payment	1 dental consultation per beneficiary	R70 co-payment
	Managed Care protocols apply	1 annual scale and polish treatment per beneficiary	Managed Care protocols apply	1 annual scale and polish treatment per beneficiary
	Fissure sealants are only covered for children under 16 years. Limited to 1 per tooth every 3 years	Fluoride treatments are only covered for children from age 5 and younger than 16 years. Limited to 1 treatment per year	Fissure sealants are only covered for children under 16 years. Limited to 1 per tooth every 3 years	Fluoride treatments are only covered for children from age 5 and younger than 16 years. Limited to 1 treatment per year
GENERAL APPLIANCES (SUCH AS WHEELCHAIRS AND CRUTCHES)	PMB only	Subject to frequency limits as per Managed Care protocols	R6 600 per family	Subject to frequency limits as per Managed Care protocols
IN-ROOM PROCEDURES	Cover for a defined list of approved procedures performed in the specialist's rooms	Pre-authorisation required	Cover for a defined list of approved procedures performed in the specialist's rooms	Pre-authorisation required
PHYSIOTHERAPY	2 consultations per beneficiary for sport-related injuries	R125 co-payment	4 consultations per beneficiary for sport-related injuries	R70 co-payment
	You must get a referral from your network GP or medical specialist		You must get a referral from your network GP or medical specialist	
MENTAL HEALTH CONSULTATIONS (*ALSO SEE CARE PROGRAMMES PAGE 9*)	PMB only		PMB only	
HIV/AIDS (*ALSO SEE CARE PROGRAMMES PAGE 10*)	Unlimited, if you register on the HIV/AIDS programme	Avoid a 30% co-payment by obtaining your chronic medicine from the DSP	Unlimited, if you register on the HIV/AIDS programme	Avoid a 30% co-payment by obtaining your chronic medicine from the DSP

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CHRONIC BENEFITS

BonStart and BonStart Plus cover you for the **28** chronic conditions 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 30% co-payment. Pre-authorisation is required.

BONSTART & BONSTART PLUS

PRESCRIBED MINIMUM BENEFITS COVERED

1.	Addison's Disease
2.	Asthma
3.	Bipolar Mood Disorder
4.	Bronchiectasis
5.	Cardiac Failure
6.	Cardiomyopathy
7.	Chronic Obstructive Pulmonary Disease
8.	Chronic Renal Disease
9.	Coronary Artery Disease

10.	Crohn's Disease
11.	Diabetes Insipidus
12.	Diabetes Type 1
13.	Diabetes Type 2
14.	Dysrhythmias
15.	Epilepsy
16.	Glaucoma
17.	Haemophilia
18.	HIV/AIDS

19.	Hyperlipidaemia
20.	Hypertension
21.	Hypothyroidism
22.	Multiple Sclerosis
23.	Parkinson's Disease
24.	Rheumatoid Arthritis
25.	Schizophrenia
26.	Systemic Lupus Erythematosus
27.	Ulcerative Colitis

ADDITIONAL CONDITION COVERED

28.	Depression (medication up to R160 per beneficiary, per month)

ADDITIONAL BENEFITS

INTERNATIONAL TRAVEL BENEFIT	Up to R2.5 million cover per family for medical emergencies when you travel outside South Africa	Additional benefit for medical quarantine up to R10 000 per beneficiary if tested positive for Covid-19
	You must register for this benefit prior to departure	
AFRICA BENEFIT	In and out-of-hospital treatment covered at 100% of the Bonitas Rate	Subject to authorisation

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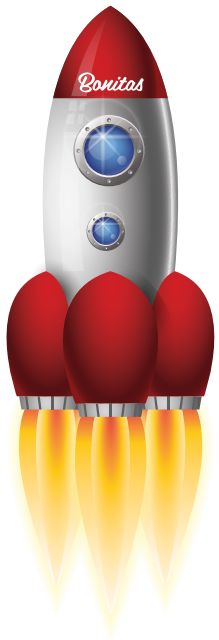
BENEFIT BOOSTER

GET UP TO
R1 160
EXTRA BENEFITS

TO PAY FOR OUT-OF-HOSPITAL CLAIMS



WHAT IS THE BENEFIT BOOSTER?

It's an extra out-of-hospital benefit amount in addition to your day-to-day or savings amount, that you get after completing an online wellness questionnaire and/or wellness screening. Once activated, out-of-hospital claims like GP visits, over-the-counter medicine, X-rays and blood tests will then first pay from the available Benefit Booster amount – helping your day-to-day benefit/savings last longer.

Annual amount available per family

IF YOU ARE ON	YOUR BENEFIT BOOSTER AMOUNT
BonStart	R1 160
BonStart Plus	R1 160

HOW TO ACTIVATE IT

Complete an online wellness questionnaire (on the Bonitas app) or wellness screening (at a participating pharmacy, biokineticist or Bonitas wellness day).

Ts & Cs apply. Child dependants under the age of 21 years can access the Benefit Booster once an adult beneficiary has completed an online wellness questionnaire on the Bonitas app or a wellness screening at a participating pharmacy, biokineticist or Bonitas wellness day.

(All claims are paid at the Bonitas Rate)

All benefits are approved by the Council for Medical Schemes.

MOTHER & CHILD CARE

MATERNITY CARE

NEW

- R195 per month for antenatal vitamins during pregnancy (Paid from available Benefit Booster, subject to formulary)

BONSTART PLUS ONLY

- 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)

CHILDCARE

NEW

- Babyline: 24/7 helpline for medical advice for children under 3 years
- Milestone reminders for children under 3 years
- Online screenings for infant and toddler health
- 2 vision screening tests by an ophthalmologist for premature newborns up to 6 weeks, in or out-of-hospital

BONSTART PLUS ONLY

- Hearing screening for newborns up to 8 weeks, in or out-of-hospital
- Congenital hypothyroidism screening for infants under 1 month old
- Immunisation (including reminders) according to Expanded Programme on Immunisation in South Africa up to the age of 12

MATERNITY PROGRAMME

REGISTER FOR THE MATERNITY PROGRAMME AND GET:

- Access to 24/7 maternity advice line
- Dedicated maternity nurse/midwife to support and advise you throughout your pregnancy
- Access to articles regarding common pregnancy concerns
- Pregnancy education emails and SMSs sent to you weekly
- Online antenatal classes to prepare you for the birth and what to expect when you get home
- Baby bag including baby care essentials

NEW

- Early identification of high-risk pregnancies
- Weekly engagement for high-risk pregnancies
- Post-childbirth follow-up calls
- Online assessments for pregnancy and mental health

All benefits are approved by the Council for Medical Schemes.

BE BETTER BENEFIT

PREVENTATIVE CARE

- 1 HIV test and counselling per beneficiary
- 1 flu vaccine per beneficiary
- 1 mammogram every 2 years, for women over 40
- 1 pap smear every 3 years, or 1 HPV PCR test every 5 years, for women between ages 21 and 65
- 1 stool test for colon cancer, for members between ages 45 and 75
- Dental fissure sealants: 1 per tooth, once every 3 years for beneficiaries under 16
- Covid-19 vaccines and boosters as directed by the National Department of HealthW
- 2 doses of the human papillomavirus (HPV) vaccine for female beneficiaries between ages 9 and 14 (limited to 1 course per lifetime)
- 3 doses of the human papillomavirus (HPV) vaccine for female beneficiaries between ages 15 and 26 (limited to 1 course per lifetime
- Free online hearing screening for beneficiaries aged 18 and over on the Bonitas website

WELLNESS BENEFIT

- 1 wellness screening per beneficiary, aged 21 and over, at a participating pharmacy, biokineticist or a Bonitas wellness day

Wellness screening includes the following tests:

- Blood pressure
- Glucose
- Waist-to-hip ratio
- Cholesterol
- Body Mass Index

CONTRACEPTIVES

- R1 270 for BonStart & R1 540 for BonStart Plus per family (for women aged up to 50)
- You must use a Bonitas Network Pharmacy or Pharmacy Direct, our Designated Service Provider, for pharmacy-dispensed contraceptives
- If you choose not to use a network pharmacy or the Designated Service Provider, a 40% co-payment applies

All benefits are approved by the Council for Medical Schemes.

CARE PROGRAMMES

MENTAL HEALTH

- Available to members who suffer from depression, anxiety, post-traumatic stress disorder and alcohol abuse, limited to R13 850 per beneficiary
- Access to a Care Manager who will work with you, your treating doctor and where appropriate, with other healthcare professionals to assist in improving your condition
- Your Care Manager will help you understand the importance of preventative care and the use of wellness benefits as well as resolve queries related to any other health condition
- Provides educational material on mental health which empowers you to manage your condition
- A digital platform designed to give members easy access to mental health information, community support and expert help
- Primary care support through a GP and assistance to facilitate enrolment on the programme

NEW

FEMALE HEALTH

- Accessible to all female members aged 18 and above
- Guidance, support, and education led by women's healthcare experts
- Early detection of diseases and seamless access to specialised care
- Proactive support in accessing essential healthcare services
- Promotion of preventative healthcare strategies tailored to women's needs
- Online health assessments tailored to female health concerns
- Empowerment of women to actively manage their health

CANCER

- Puts you first, offering emotional and medical support
- Liaises with your doctor to ensure your treatment plan is clinically appropriate to meet your needs
- Access to a social worker for you and your loved ones
- Uses the Bonitas Oncology Medicine Network (20% co-payment applies for use of a non-network provider)
- Matches the treatment plan to your benefits to ensure you have the cover you need
- Uses the Bonitas Oncology Network of specialists

All benefits are approved by the Council for Medical Schemes.

CARE PROGRAMMES

HOSPITAL-AT-HOME

- Care for any acute condition deemed appropriate by your treating provider i.e., pneumonia, Covid-19
- An alternative to general ward admission and stepdown facilities, allowing you to receive quality, safe healthcare in the comfort of your home
- Remote patient monitoring including 24/7 vital signs monitoring from our clinical command centre, continuous virtual visits and clinical support, continuous care from a doctor, short-term oxygen (as prescribed) and emergency ambulance services
- Our hospital setup at home also includes remote patient monitoring, daily visits, laboratory services, blood tests, wound dressings, medication/fluids via a drip, allied healthcare services and physiotherapy (as prescribed)
- A team of trained healthcare professionals, including skilled nurses, that will bring all the essential elements of hospital care to your home
- A transitional care programme to minimise re-admissions
- Hospital-at-Home is subject to pre-authorisation

HIV/AIDS

- Provides you with appropriate treatment and tools to live your best life
- Offers HIV-related consultations to visit your doctor to monitor your clinical status
- Offers access to telephonic support from doctors
- Covers medicine to treat HIV (including drugs to prevent mother-to-child transmission and infection after sexual assault or needle-stick injury)
- Covers regular blood tests to monitor disease progression, response to therapy and to detect possible side-effects of treatment
- Offers 1 annual pap smear for members who had a positive cytology test
- Gives ongoing patient support via a team of trained and experienced counsellors
- Treatment and prevention of opportunistic infections such as pneumonia, TB and flu
- Helps in finding a registered counsellor for face-to-face emotional support

IN-HOSPITAL BENEFITS

This benefit offers cover for major medical events that result in a beneficiary being admitted to hospital. Members have access to the applicable hospital network. Pre-authorisation is required. Managed Care protocols apply.

Please note: On these options you can avoid a R12 680 co-payment by using a hospital on the applicable network.

	BONSTART		BONSTART PLUS	
PRIVATE HOSPITAL CARE	Unlimited at the applicable hospital network	R1 780 co-payment per admission, except for PMB emergencies	Unlimited at the applicable hospital network	R1 190 co-payment per admission, except for PMB emergencies
GP CONSULTATIONS	Unlimited, covered at 100% of the Bonitas Rate		Unlimited, covered at 100% of the Bonitas Rate	
SPECIALIST CONSULTATIONS	Unlimited, covered at 100% of the Bonitas Rate		Unlimited, covered at 100% of the Bonitas Rate	
BLOOD TESTS	R30 880 per family except for PMB		Unlimited, covered at 100% of the Bonitas Rate	
BLOOD TRANSFUSIONS	R22 430 per family except for PMB		Unlimited, covered at 100% of the Bonitas Rate	
X-RAYS AND ULTRASOUNDS	Unlimited, covered at 100% of the Bonitas Rate		Unlimited, covered at 100% of the Bonitas Rate	
MRIs AND CT SCANS (SPECIALISED RADIOLOGY)	R14 090 per family	Pre-authorisation required	R19 130 per family	Pre-authorisation required
	R2 800 co-payment per scan event except for PMB		R2 240 co-payment per scan event except for PMB	
ALLIED MEDICAL PROFESSIONALS (SUCH AS DIETICIAN, SPEECH AND OCCUPATIONAL THERAPIST)	PMB only	Subject to referral by treating practitioner	PMB only	Subject to referral by treating practitioner
PHYSIOTHERAPY AND BIOKINETICS	PMB only	Subject to referral by treating practitioner	PMB only	Subject to referral by treating practitioner
CHILDBIRTH	Unlimited at the applicable hospital network	Avoid a R12 680 co-payment by using a hospital on the applicable network	Unlimited at the applicable hospital network	Avoid a R12 680 co-payment by using a hospital on the applicable network
	Emergency approved C-sections only	Managed Care protocols apply	Emergency approved C-sections only	Managed Care protocols apply
NEONATAL CARE	Limited to R55 080 per family except for PMB		Limited to R55 080 per family except for PMB	
INTERNAL PROSTHESES	PMB only	Managed Care protocols apply	R19 130 per family (no cover for joint replacement except for PMB)	
			Managed Care protocols apply	Pre-authorisation required
EXTERNAL PROSTHESES	PMB only		PMB only	
MENTAL HEALTH HOSPITALISATION (*ALSO SEE CARE PROGRAMMES PAGE 9*)	PMB only	No cover for physiotherapy for mental health admissions	PMB only	No cover for physiotherapy for mental health admissions
	Avoid a R12 680 co-payment by using a hospital on the applicable network		Avoid a R12 680 co-payment by using a hospital on the applicable network	
TAKE-HOME MEDICINE	Limited to a 7-day supply up to R465 per hospital stay		Limited to a 7-day supply up to R465 per hospital stay	
PHYSICAL REHABILITATION	R60 210 per family	Pre-authorisation required	R60 210 per family	Pre-authorisation required

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ALTERNATIVES TO HOSPITAL (HOSPICE, STEP-DOWN FACILITIES)	R17 340 per family	Pre-authorisation required	R20 090 per family	Pre-authorisation required
	Managed Care protocols apply		Managed Care protocols apply	
PALLIATIVE CARE (CANCER ONLY)	Unlimited, subject to using the DSP	Managed Care protocols apply	Unlimited, subject to using the DSP	Managed Care protocols apply
	Includes hospice/private nursing, home oxygen, pain management, psychologist and social worker support		Includes hospice/private nursing, home oxygen, pain management, psychologist and social worker support	
CATARACT SURGERY	Avoid a R7 130 co-payment by using the DSP		Avoid a R7 130 co-payment by using the DSP	
DENTISTRY	PMB only		PMB only	
CANCER TREATMENT (SUBJECT TO REGISTRATION ON THE ONCOLOGY MANAGEMENT PROGRAMME – *SEE PAGE 9*)	Unlimited for PMBs	Pre-authorisation required	Unlimited for PMBs	Pre-authorisation required
	Avoid a 30% co-payment by using a DSP		Avoid a 30% co-payment by using a DSP	
PET SCANS (SUBJECT TO REGISTRATION ON THE ONCOLOGY MANAGEMENT PROGRAMME)	PMB only		Avoid a 25% co-payment by using a provider on the network	
CANCER MEDICINE	Subject to Medicine Price List and preferred product list	Avoid a 20% co-payment by using a DSP	Subject to Medicine Price List and preferred product list	Avoid a 20% co-payment by using a DSP
ORGAN TRANSPLANTS	PMB only	Pre-authorisation required	PMB only	Pre-authorisation required
	Avoid a 30% co-payment by using a DSP		Avoid a 30% co-payment by using a DSP	
KIDNEY DIALYSIS	PMB only	Pre-authorisation required	PMB only	Pre-authorisation required
	Avoid a 30% co-payment by using a DSP		Avoid a 30% co-payment by using a DSP	
HIV/AIDS (*ALSO SEE CARE PROGRAMMES PAGE 10*)	Unlimited, if you register on the HIV/AIDS programme	Avoid a 30% co-payment by obtaining your chronic medicine from the DSP	Unlimited, if you register on the HIV/AIDS programme	Avoid a 30% co-payment by obtaining your chronic medicine from the DSP
DAY SURGERY PROCEDURES (APPLIES TO SELECTED PROCEDURES)	Avoid a R12 680 co-payment by using a network day hospital		Avoid a R12 680 co-payment by using a network day hospital	

PROCEDURE CO-PAYMENTS (SUBJECT TO PRE-AUTHORISATION)	R3 040 co-payment (Applies in addition to non-network hospital co-payment)	
	1. Arthroscopy (when done as part of a surgical procedure)	
	2. Laparoscopic Hysterectomy	
SURGICAL PROCEDURES THAT ARE NOT COVERED	Back and neck surgery	Joint replacement surgery
	Correction of Hallux Valgus	Functional nasal surgery
	Varicose vein surgery	Oesophageal reflux and hernia repair surgery
	Non-cancerous breast conditions	Gastroscopies, colonoscopies and all other endoscopies
	Nail disorders	Knee and shoulder surgery
	Skin disorders, including benign growths and lipomas	In-hospital dental surgery
	Healthcare services for which admission to hospital is not necessary	

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NOTES

Bonitas

MAKE THE MOST OF YOUR **BONITAS MEMBERSHIP** WITH THE **MEMBER INFORMATION HUB** ON OUR WEBSITE!

We know that medical aid can be confusing at times,but we've made it easy for you to quickly access essential medical aid information. And there is no need to log in, just info at the click of a button, like:

- How to get your claims paid quickly
- Effortlessly getting hospital authorisations
- Registering your chronic medicine
- Accessing our maternity programme
- Getting more benefits with the Benefit Booster
- Going for a free wellness screening
- And much more…

You can also make use of the new "Quick find" search function on our website to quickly find answers to frequently asked medical aid-related questions!

TO JOIN SPEAK TO YOUR **FINANCIAL ADVISOR**, OR VISIT **BONITAS.CO.ZA**

Bonitas WhatsApp 060 070 2491
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