

HOSPITAL




**BONESSENTIAL
BONESSENTIAL SELECT
2025**

Bonitas
Medical Aid for South Africa





WHAT YOU PAY

BONESSENTIAL

| | |
|---|---------------|
|  MAIN MEMBER | R2 509 |
|  ADULT DEPENDANT | R1 854 |
|  CHILD DEPENDANT | R811 |

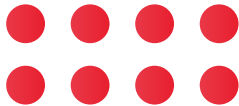
BONESSENTIAL PROVIDES ACCESS TO **ANY PRIVATE HOSPITAL** AND USES A LINKED FORMULARY OF CHRONIC MEDICATION.

BONESSENTIAL SELECT

| | |
|--|---------------|
|  MAIN MEMBER | R2 192 |
|  ADULT DEPENDANT | R1 606 |
|  CHILD DEPENDANT | R723 |

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

YOU ONLY PAY FOR A MAXIMUM OF THREE CHILDREN. DEPENDANTS UP TO AGE 24 YEARS PAY CHILD RATES.



IN-HOSPITAL BENEFITS

This benefit offers cover for major medical events that result in a beneficiary being admitted to hospital. Members have access to cover at a private hospital. Pre-authorisation is required. A co-payment may apply to specific admissions and/or procedures. Managed Care protocols apply.

Please note: On the BonEssential Select option you can avoid a 30% co-payment by using a hospital on the applicable network.

| |
|--|
| SPECIALIST CONSULTATIONS/TREATMENT |
| GP CONSULTATIONS/TREATMENT |
| BLOOD TESTS AND OTHER LABORATORY TESTS |
| X-RAYS AND ULTRASOUNDS |
| MRIs AND CT SCANS (SPECIALISED RADIOLOGY) |
| CATARACT SURGERY |
| ALLIED MEDICAL PROFESSIONALS (SUCH AS DIETICIAN, SPEECH AND OCCUPATIONAL THERAPIST) |
| PHYSIOTHERAPY AND BIOKINETICS |
| INTERNAL AND EXTERNAL PROSTHESES |
| HOSPITALISATION FOR DENTISTRY (GENERAL ANAESTHETIC) |
| MENTAL HEALTH HOSPITALISATION (ALSO SEE CARE PROGRAMMES PAGE 10) |

BONESSENTIAL

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.

| | |
|---|--|
| Unlimited, network specialists covered in full at the Bonitas Rate | Unlimited, non-network specialists paid at 100% of the Bonitas Rate |
| Unlimited, covered at 100% of the Bonitas Rate | |
| Unlimited, covered at 100% of the Bonitas Rate | |
| Unlimited, covered at 100% of the Bonitas Rate | |
| R15 960 per family, in and out-of-hospital | Pre-authorisation required |
| R2 800 co-payment per scan event except for PMB | |
| Avoid a R7 420 co-payment by using the DSP | |
| PMB only | Subject to referral by treating practitioner |
| PMB only | Subject to referral by treating practitioner |
| PMB only | Managed Care protocols apply |
| Pre-authorisation required | Managed Care protocols apply |
| A co-payment of R5 000 per admission applies for the removal of impacted teeth only OR A R2 500 upfront co-payment if the dental treatment is done in a day hospital | General anaesthetic benefit is available for the removal of impacted teeth |
| R38 780 per family | No cover for physiotherapy for mental health admissions |

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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

| |
|--|
| TAKE-HOME MEDICINE |
| PHYSICAL REHABILITATION |
| ALTERNATIVES TO HOSPITAL (HOSPICE, STEP-DOWN FACILITIES) |
| PALLIATIVE CARE (CANCER ONLY) |
| CANCER TREATMENT (SUBJECT TO REGISTRATION ON THE ONCOLOGY MANAGEMENT PROGRAMME – <i>SEE PAGE 10</i>) |
| PET SCANS (SUBJECT TO REGISTRATION ON THE ONCOLOGY MANAGEMENT PROGRAMME) |
| CANCER MEDICINE |
| ORGAN TRANSPLANTS |
| KIDNEY DIALYSIS |
| HIV/AIDS (<i>ALSO SEE CARE PROGRAMMES PAGE 11</i>) |
| DAY SURGERY PROCEDURES (APPLIES TO SELECTED PROCEDURES) |

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| PROCEDURE CO-PAYMENTS (PER EVENT, SUBJECT TO PRE-AUTHORISATION) |
|---|

| BONESSENTIAL | |
|--|---|
| Limited to a 7-day supply up to R470 per hospital stay | |
| R60 900 per family | |
| R20 310 per family | Managed Care protocols apply |
| Unlimited, subject to using the DSP | Including hospice/private nursing, home oxygen, pain management, psychologist and social worker support |
| Unlimited for PMBs at a DSP | Pre-authorisation required |
| Avoid a 30% co-payment by using a DSP | Sublimit of R60 680 per beneficiary for Brachytherapy |
| PMB only | Avoid a 25% co-payment by using a provider on the network |
| Subject to Medicine Price List and preferred product list | Avoid a 20% co-payment by using a DSP |
| PMB only | |
| Unlimited | Avoid a 20% co-payment by using a DSP |
| Unlimited, if you register on the HIV/AIDS programme | Chronic medicine must be obtained from the DSP |
| Avoid a R2 720 co-payment by using a network day hospital | |

| R1 940 co-payment | R4 930 co-payment | R9 130 co-payment |
|--|--|--|
| <ol style="list-style-type: none"> Colonoscopy Conservative Back Treatment Cystoscopy Facet Joint Injections Flexible Sigmoidoscopy Functional Nasal Surgery Gastroscopy Hysteroscopy (not Endometrial Ablation) Myringotomy Tonsillectomy and Adenoidectomy Umbilical Hernia Repair Varicose Vein Surgery | <ol style="list-style-type: none"> Arthroscopy Diagnostic Laparoscopy Laparoscopic Hysterectomy Percutaneous Radiofrequency Ablations (Percutaneous Rhizotomies) | <ol style="list-style-type: none"> Laparoscopic Pyeloplasty Laparoscopic Radical Prostatectomy Nissen Fundoplication (Reflux Surgery) |

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| Avoid a R5 440 co-payment by using a network day hospital | |

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CHRONIC BENEFITS

BonEssential and BonEssential Select 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.

BONESSENTIAL

&

BONESSENTIAL SELECT

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) |
|-----|---|

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OUT-OF-HOSPITAL BENEFITS

These benefits provide cover for emergency room consultations and other out-of-hospital medical expenses. 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. See page 7 for more information.

| BONESSENTIAL | | & BONESSENTIAL SELECT | |
|--|--|-------------------------------------|--|
| EMERGENCY ROOM BENEFIT (FOR EMERGENCIES ONLY) | 2 emergency consultations per family at a casualty ward or emergency room facility of a hospital | Benefit limited to emergencies only | |
| IN-ROOM PROCEDURES | Cover for a defined list of approved procedures performed in the specialist's rooms | Pre-authorisation required | |

ADDITIONAL BENEFITS

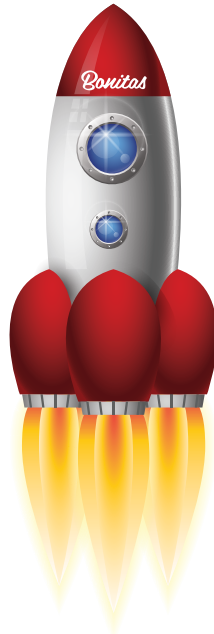
| BONESSENTIAL | | & BONESSENTIAL SELECT | |
|------------------------------|--|-----------------------|---|
| INTERNATIONAL TRAVEL BENEFIT | Up to R2.5 million cover per family for medical emergencies when you travel outside South Africa | | Additional benefit for medical quarantine up to R10 000 per 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 |

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

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 |
|----------------------------|-----------------------------|
| BonEssential | R1 160 |
| BonEssential Select | 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)



MOTHER & CHILD CARE



MATERNITY CARE

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

NEW



CHILDCARE

- Hearing screening for newborns up to 8 weeks, in or out-of-hospital
- Congenital hypothyroidism screening for infants under 1 month old
- Babyline: 24/7 helpline for medical advice for children under 3 years
- 1 GP consultation per child between ages 2 and 12
- **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**

NEW



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

NEW





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 prostate screening antigen test for men between ages 55 and 69
- 1 pneumococcal vaccine every 5 years, for members aged 65 and over
- 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 years
- Covid-19 vaccines and boosters as directed by the National Department of Health
- 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
- Cholesterol
- Glucose
- Body Mass Index
- Waist-to-hip ratio



CONTRACEPTIVES

- R1 580 per family (for women aged up to 50)
- You must use Pharmacy Direct, our Designated Service Provider for pharmacy-dispensed contraceptives
- If you choose not to use the Designated Service Provider, a 40% co-payment applies

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

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

DIABETES MANAGEMENT



- Empowers you to make the right decisions to stay healthy
- Provides cover for the tests required for the management of diabetes as well as other chronic conditions
- Offers access to diabetes doctors, dieticians and podiatrists
- Gives access to a dedicated Health Coach to answer any questions you may have
- Offers a personalised care plan for your specific needs
- Provides education to help you understand your condition better
- Includes two consultations with a Diabetes Nurse Educator to provide specialised diabetes care (NEW)

BACK AND NECK



- Assessment of back and neck pain to determine the level of care required before surgery to give you the best outcome
- Offers a personalised treatment plan for up to 6 weeks
- Includes treatment from doctors, back and neck physiotherapists and/or biokineticists
- Gives access to a home care plan to maintain long-term results and helps manage severe back and neck pain
- Highly effective and low-risk, with an excellent success rate
- We cover the cost of the programme, excluding X-rays
- Uses the DBC network

CARE PROGRAMMES



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



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



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



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](https://www.bonitas.co.za)**

 **Bonitas WhatsApp 060 070 2491**

 **[bonitas.co.za/member](https://www.bonitas.co.za/member)**

 **www.bonitas.co.za**

 **Bonitas Member App**

 **Bonitas Medical Fund**

 **@BonitasMedical**