

HOSPITAL



2027

BONCORE



WHAT YOU PAY

	MAIN MEMBER	R1 368
	ADULT DEPENDANT	R1 368
	CHILD DEPENDANT	R1 368

BONCORE USES A LIST OF **SPECIFIC NETWORKS AND FORMULARIES** (INCLUDING GP, SPECIALIST, HOSPITAL, PATHOLOGY AND PHARMACY)

YOU ONLY PAY FOR A MAXIMUM OF THREE CHILDREN.

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 on the applicable network. Pre-authorisation is required. A co-payment may apply to specific admissions and/or procedures. Managed Care protocols apply.

Please note: On this option you can avoid a R15 310 co-payment by using a hospital on the applicable network.

PRIVATE HOSPITAL CARE	Unlimited at the applicable hospital network	R5 735 co-payment per admission, except for motor vehicle accidents, maternity confinements and PMB emergency treatment
SPECIALIST CONSULTATIONS/TREATMENT	Unlimited, covered at 100% of the Bonitas Rate for BonCore network specialists	Non-network specialists are covered at 70% of the Bonitas Rate
GP CONSULTATIONS/TREATMENT	Unlimited, covered at 100% of the Bonitas Rate for BonCore network GPs	Non-network GPs are covered at 70% of the Bonitas Rate
BLOOD TESTS	PMB only	
BLOOD TRANSFUSIONS	PMB only	
X-RAYS AND ULTRASOUNDS	Unlimited, covered at 100% of the Bonitas Rate	
MRIs AND CT SCANS (SPECIALISED RADIOLOGY)	PMB only	Pre-authorisation required
ALLIED MEDICAL PROFESSIONALS (SUCH AS DIETICIAN, SPEECH AND OCCUPATIONAL THERAPIST)	PMB only	Subject to referral by treating practitioner
PHYSIOTHERAPY, PODIATRY AND BIOKINETICS	PMB only	Subject to referral by treating practitioner
CHILDBIRTH (NATURAL BIRTH)	Unlimited at the applicable hospital network	Avoid a R15 310 co-payment by using a hospital on the applicable network
	Cover for out-of-network specialists and GPs limited to R2 610 per family	Managed Care protocols apply
	Non-network specialists and GPs are covered at 70% of the Bonitas Rate	
CHILDBIRTH (C-SECTION)	Emergency approved PMB C-sections only	
NEONATAL CARE	Limited to R57 450 per family except for PMB	
INTERNAL PROSTHESES	PMB only	Managed Care protocols apply
EXTERNAL PROSTHESES	PMB only	Managed Care protocols apply
DENTISTRY	PMB only, subject to using the DSP	Pre-authorisation required
MODERATE/DEEP SEDATION IN THE ROOMS (IV CONSCIOUS SEDATION)	Managed Care protocols apply	Pre-authorisation required
	Only applicable in lieu of general anaesthetic for the in-hospital PMB dental benefits	
MENTAL HEALTH HOSPITALISATION	PMB only	No cover for physiotherapy for mental health admissions
	Avoid a R15 310 co-payment by using a hospital on the applicable network	

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

TAKE-HOME MEDICINE	Limited to a 7-day supply up to R415 per hospital stay	
PHYSICAL REHABILITATION	PMB only	Pre-authorisation required
ALTERNATIVES TO HOSPITAL (HOSPICE, STEP-DOWN FACILITIES)	PMB only	Pre-authorisation required
PALLIATIVE CARE (CANCER ONLY)	PMB only	Pre-authorisation required
CANCER TREATMENT (SUBJECT TO REGISTRATION ON THE ONCOLOGY MANAGEMENT PROGRAMME – <i>SEE PAGE 10</i>)	Unlimited for PMBs	Pre-authorisation required.
	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	PMB only	Avoid a 20% co-payment by using a DSP
	Subject to Medicine Price List and preferred product list	
ORGAN TRANSPLANTS	PMB only	Pre-authorisation required
	Avoid a 30% co-payment by using a DSP	
KIDNEY DIALYSIS	PMB only	Pre-authorisation required
	Avoid a 30% co-payment by using a DSP	
CATARACT SURGERY	PMB only	Avoid a R10 220 co-payment by using the DSP
HIV/AIDS (<i>ALSO SEE CARE PROGRAMMES PAGE 11</i>)	Unlimited, if you register on the HIV/AIDS programme	Avoid a 30% co-payment by obtaining your chronic medicine from a DSP
DAY SURGERY PROCEDURES (APPLIES TO SELECTED PROCEDURES)	Avoid a R15 310 co-payment by using a network day hospital	

PROCEDURE CO-PAYMENTS (SUBJECT TO PRE-AUTHORISATION)	R5 790 co-payment (Applies in addition to non-network hospital co-payment)	
	1. Arthroscopy (When done as part of a surgical procedure)	2. Laparoscopy Hysterectomy
SURGICAL PROCEDURES THAT ARE NOT COVERED (EXCEPT FOR PMB LEVEL OF CARE)	Back and neck treatment or surgery	Joint replacement surgery
	Bunion surgery	Functional nasal surgery
	Varicose vein surgery	Investigations and diagnostic workups
	Surgery for oesophageal reflux and hiatus hernia	Oesophageal reflux and hernia repair surgery
	Non-cancerous breast conditions	Endoscopic surgery
	Nail disorders	Laparoscopic surgery except for laparoscopic sterilisation
	Knee and shoulder surgery	Skin disorders, including benign growths and lipomas
	In-hospital dental surgery	Refractive surgery
	Healthcare services for which admission to hospital is not necessary.	

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OUT-OF-HOSPITAL BENEFITS

These benefits provide cover for GP consultations and other out-of-hospital medical expenses. Remember to complete all your required actions to unlock the full potential of your Benefit Booster. See page 8 for more information.

VIRTUAL GP CONSULTATIONS	Unlimited virtual GP consultations	
GP CONSULTATIONS	3 GP consultations per beneficiary (including 2 non-network GP consultations paid at the Bonitas Rate)	
SPECIALIST CONSULTATIONS	PMB only, subject to GP referral	
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
	If it is not classified as an emergency, it will be paid from the available GP consultation benefit	
ACUTE MEDICINE, OVER-THE-COUNTER MEDICINE, X-RAYS AND BLOOD TESTS	Paid from available Benefit Booster, then PMB only	Acute medicine subject to formulary
ALLIED MEDICAL PROFESSIONALS (SUCH AS DIETICIAN, SPEECH AND OCCUPATIONAL THERAPIST)	Paid from available Benefit Booster, then PMB only	
OPTOMETRY	Paid from available Benefit Booster, then PMB only	
BASIC DENTISTRY	Paid from available Benefit Booster, then PMB only	
PHYSIOTHERAPY	Paid from available Benefit Booster, then PMB only	
MENTAL HEALTH CONSULTATIONS	PMB only	
IN-ROOM PROCEDURES (MANAGED CARE PROTOCOLS APPLY)	Cover for a defined list of approved procedures performed in the doctor's room	Pre-authorisation required

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CHRONIC BENEFITS

BonCore covers you for the **28** chronic conditions listed below on the applicable formulary. You must use a DSP to get your medicine. If you choose not to use a DSP or if you choose to use medicine that is not on the formulary, you will have to pay a 30% co-payment. Pre-authorisation required.

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 R170 per beneficiary, per month)
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ADDITIONAL BENEFITS

INTERNATIONAL TRAVEL BENEFIT	Up to R1.5 million cover per family for medical emergencies when you travel outside South Africa	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
R2 000

IN EXTRA BENEFITS

TO PAY FOR OUT-OF-HOSPITAL CLAIMS



WHAT IS THE BENEFIT BOOSTER?

It's an additional benefit amount that can be used to pay for eligible out-of-hospital claims once activated.

WHAT DOES IT COVER?

Once activated, out-of-hospital claims like GP visits, acute and over-the-counter medicine, blood tests, X-rays and more, will first pay from the available Benefit Booster amount, helping your savings or day-to-day benefits last longer.

How to activate your Benefit Booster



Simply complete the necessary health actions required by your plan to activate your Benefit Booster.

Action 1: Join B Value and complete your wellness screening

Register for B Value and complete your wellness screening at a Bonitas wellness day or an HRA preferred pharmacy. You can use the Provider Locator on our website to find a participating pharmacy near you.

Action 2: Complete a mental health assessment or get a flu vaccine during flu season

Complete an online mental health assessment through the Bonitas Member App or Member Zone, or get a flu vaccine during April and May.

IF YOU ARE ON	Maximum amount per beneficiary		MAXIMUM AMOUNT PER FAMILY	LEVEL 1	LEVEL 2
	ADULT	CHILD			
BonCore	R1 000	R500	R2 000	R500	R500

Ts & Cs apply. Child dependants under the age of 21 years can access the Benefit Booster once all adult beneficiaries have completed the 2 required actions. All claims are paid at the Bonitas Rate.

WE ADVISE YOU TO MAKE USE OF NETWORK PROVIDERS AND MEDICINE ON THE BONITAS FORMULARY TO AVOID CO-PAYMENTS

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BE BETTER BENEFIT



PREVENTATIVE CARE

- 1 HIV test and counselling per beneficiary
- 1 flu vaccine per beneficiary
- 1 pap smear every 3 years, or 1 HPV PCR test every 5 years, for women between ages 21 and 65
- 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 or a Bonitas wellness day
- 1 network GP confirmation consultation per eligible beneficiary, within 14 business days of completing the wellness screening, to discuss the results, assess health risks and determine the appropriate next steps



Wellness screening includes the following tests:

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

Remember to complete all your required actions to unlock the full potential of your Benefit Booster (See page 7).



CONTRACEPTIVES

- Paid from available Benefit Booster

CARE Programmes

Our range of Care Programmes is designed to support you at every stage of your health journey and help put you on the path to better health. From chronic conditions and diabetes to oncology and female health, these programmes provide the support, guidance and interventions you need to manage your health and get the best possible care.

Because when it comes to your health, early detection and timely intervention can make all the difference – helping to improve health outcomes, enhance quality of life and make your benefits last.

ONCOLOGY / CANCER



This programme offers you a range of valuable resources and support throughout your cancer journey.

HOSPITAL-AT-HOME



This alternative to general ward admission provides safe, quality care for appropriate acute medical conditions, in the comfort of your own home.

LIVE LEAN

NEW



This programme aims to assist identified and enrolled members to lose excess weight and lead healthier, more rewarding lives.

MENTAL HEALTH



This programme aims to improve your quality of life and empowers you to manage your mental health condition more effectively.

CARE

Programmes

OCULAR HEALTH

NEW



This programme promotes early detection and intervention for conditions such as diabetic retinopathy, glaucoma, cataracts and age-related macular degeneration. It provides access to appropriate care and support to help protect your vision and improve your overall eye health.

FEMALE HEALTH



This programme is accessible to all female members aged 18 and above, with an emphasis on preventative care and early detection of female-specific health issues.

MATERNITY PROGRAMME



This programme offers support to expecting mothers through targeted assistance during each trimester, pregnancy education, a 24/7 maternity health advice line and more.

HIV/AIDS



This confidential programme is designed to help individuals with HIV/AIDS live longer, more productive lives and equip them with the treatment and care needed to lead fulfilled lives.

NOTES

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**VALUE
AND WELLBEING**

FREE AND EXCLUSIVE
TO BONITAS MEMBERS.

Make your wellness journey more rewarding. Earn rewards for healthy actions, access exclusive partner benefits and track your wellness – all in one place.

Register now at: www.bonitas.co.za/b-value

HEALTH



Supports your physical and mental wellbeing so you can always B well.

FINANCIAL



Focuses on your financial wellbeing – helping you save more, stress less and B savvy.

VOUCHERS



Rewards you for prioritising your health, because good habits should B valued.

INSIGHT



Provides access to essential health information to help you take charge of your health and B informed.

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

GET SUPPORT



076 172 3151



Bonitas Medical Fund



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Bonitas Member App