Medisave Essential



2025 Benefits & Contributions

Your selected General Practitioner (GP) is the "manager" of all your healthcare requirements. All benefits are paid up to the MEDIMED Scheme Tariff.

IN-HOSPITAL BENEFITS AND MAJOR MEDICAL EXPENSES

Hospitalisation		
	SUBJECT TO PRE	
HOSPITAL LIMIT	Unlimited 100% at preferred providers 80% at non-preferred providers	
ALTERNATIVES TO HOSPITALISATION e.g. Step down services Compassionate care (R20,000 per beneficiary)	R6,000 per beneficiary	
AUXILIARY SERVICES e.g. Physiotherapy, dietician	R2,000 per beneficiary	
IN-HOSPITAL DENTISTRY Includes hospitalisation and all other in-hospital providers' costs	R10,000 per family Limited to impacted wisdom teeth and children under 12 years	
EMERGENCY AND AMBULANCE SERVICES	Unlimited Preferred provider ER24 24 hour contact number 084 124	
GP & SPECIALIST SERVICES	Unlimited	
PATHOLOGY	Unlimited	

authorisation.				
INTERNAL PROSTHESIS EXTERNAL PROSTHESIS PRE-AUTHORISATION REQUIRED	R20,000 per family R3,000 per family			
PRESCRIBED MINIMUM BENEFITS	Unlimited at DSP			
PSYCHIATRIC HOSPITALISATION PRE-AUTHORISATION REQUIRED Includes hospitalisation and all other in-hospital providers' costs	R4,000 per beneficiary			
BASIC RADIOLOGY	Unlimited			
SPECIALISED RADIOLOGY PRE-AUTHORISATION REQUIRED In and out of hospital	Overall maximum of R10,000 per beneficiary, R15,000 per family			
DELIVERY (In and out of hospital)	In Hospital Obstetrician/Gynaecologist funded at 200% of Medimed Scheme Tariff.			
	Home Delivery Registered Midwife funded at 100% of Medimed Scheme Tariff. Limited to R12,000 per pregnancy *subject to non-admission/hospitilisation. (*R1 200 will be paid if there is admission/hospitalization).			

Major Medical Expenses

	Paid at 100% of the MEDIMED Schem	ne Tariff. SUBJECT TO PRE-AUTHORISATION	l
DIALYSIS	R50,000 per family	ONCOLOGY AND RADIATION THERAPY	
ORGAN TRANSPLANTS	Combined limit with Dialysis and Oncology	HIV and AIDS	_ \

ONCOLOGY AND RADIATION THERAPY	Combined limit with Dialysis Authorised through ICON
HIV and AIDS	Unlimited

Chronic Medication

SUBJECT TO PRE-AUTHORISATION

CHRONIC DISEASE LIST CONDITIONS

100% up to the momTYB Chronic Drug Amount (CDA) Medication strictly in accordance with a medication formulary

DAY TO DAY BENEFITS

Referrals

You need a referral from your selected GP for all specialist visits, pathology (blood tests), radiology (x-rays), physiotherapy, psychology visits, etc. Please verify with the Customer Care Team if you are unsure. Please be advised that a referral is provided by your selected GP whenever it is medically appropriate.

Out of Hospital Expenses

ACUTE MEDICATION	Unlimited - prescribed by or dispensed from selected GP Medication is paid in accordance with a medication formulary. This is to assist your selected GP in cost-effectively managing your condition.	
ACUTE MEDICATION NOT ON THE FORMULARY	If there is a generic equivalent on the formulary, the Scheme will pay the maximum of the formulary generic alternative and the member will be liable for the difference. If there is no generic equivalent, the member will be liable for the full amount.	
BASIC AND SPECIALISED DENTISTRY	R3,200 per beneficiary up to a maximum of R5,500 per family One set of plastic dentures every two years	
GP CONSULTATIONS	Unlimited cover from your selected GP Additional R500 per family for casualty	
MATERNITY BENEFIT Beneficiaries who register on the MEDIMED	3 Pre-natal visits only 2 2D scans I Paediatrician visit	

OPTOMETRY	2 year benefit per beneficiary for either contact lenses or glasses Benefit through PPN 086 110 3529	
OPTOMETRIC EXAMINATION	100% of cost in network or R380 at a non- network provider	
FRAMES AND PRESCRIPTION LENSES	R330 for frames and R215 for single vision lenses and R460 for Bifocal and for Base Multifocal	
CONTACT LENSES	R845 per beneficiary Multifocal lenses paid up to the value of Bifocal lenses	
PATHOLOGY AND BASIC RADIOLOGY	Unlimited upon referral from your selected GP	
SECOND OPINION BENEFIT	2 consultations per family from another provider of the same doctor group and medication in accordance with the formulary	
SPECIALIST CONSULTATIONS AND PROCEDURES	R3,000 per beneficiary up to a maximum of R6,000 per family. Subject to referral from your selected GP	

Important Numbers

Pharmacy Benefit Mgmt.:

Wellbeing Team:

maternity programme will receive the

Customer Care Team: 0861 777 660 Clinical Pre-Authorisation: 041 395 4481

following additional Benefits paid at 100% of the Medimed Scheme Tariff:

info@medimed.co.za specauth@medimed.co.za hospauth@medimed.co.za 041 395 4482 chronic@medimed.co.za 086 010 3228 wellbeing@medimed.co.za

I maternity bag per pregnancy Antenatal vitamins (R100 per month for 9 months payable from Acute Benefit)

Claims Team: Membership Team: Escalations: ER24 (Ambulance Services): WhatsApp:

claims@medimed.co.za membership@medimed.co.za escalations@medimed.co.za 084 124 0861 777 660



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MEDICAL SAVINGS ACCOUNT

MEDIMED provides an additional benefit to members on the Medisave Essential option by providing a Medical Savings Account of 10% of annual contributions received.

Annual Medical Savinas Account Amounts*

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	М	M+C	M+S	M+S+C	M+S+2C	
R0 to R11,000	R2,100	R2,748	R4,200	R4,848	R5,496	
RII,001 to RI7,000	R2,436	R3,156	R4,872	R5,592	R6,312	
R17,001 to R23,000	R2,976	R3,756	R5,952	R6,732	R7,512	
R23,001 plus	R3,516	R4,332	R7,032	R7,848	R8,664	

^{*}Annual Medical Savings Account amounts as a % of total contributions calculated on membership for the full year (12 months as from 1 January). M= Member; S= Spouse, C= Child dependant

Benefits Paid from the Available Medical Savings Account

CASUALTY CONSULTATIONS	Subject to Medical Savings Account		OVER-THE-COUNTER	R130 per prescription up to a
OUT OF TOWN GP	Limited to 6 consultations per beneficiary		MEDICATION	maximum of R500 per family
CONSULTATIONS AND ACUTE MEDICATION			APPLIANCES PRE-AUTHORISATION REQUIRED	Subject to Medical Savings Account
PRESCRIPTIONS FROM COMPANY	R300 per family		AUXILIARY BENEFITS	Subject to Medical Savings Account

Access to After-Hours Facilities (Casualty) at Private Hospitals

The after-hours facilities at private hospitals (including the preferred provider hospitals) are not affiliated to the Medisave Essential option. You must at all times consult with your selected GP, unless you have an emergency, in which case you may consult with any other GP in the relevant GP group. An emergency refers to any life-threatening situation where immediate medical intervention is required.

If you are not happy with your Selected GP

You can complete a grievance form, which you can obtain from the MEDIMED Customer Care team. The complaint will be investigated and feedback will be provided to you. You may also change your GP twice a year.

Please be advised that you can only change from one GP group to another (e.g. from PEGP to ECIPA) at the beginning of the year.

Contact Details

ECIPA AND PEGP Customer Care: 0861 777 660 Email: info@medimed.co.za

Complaints and Disputes

Members should inform the Scheme at info@medimed.co.za or the scheme's administrator, escalations@medimed.co.za in writing of any complaints or disputes. Members may also report any dispute with the Scheme to the Council for Medical Schemes at: share call 0861 123 267. Email: complaints@medicalschemes.com, www.medicalschemes.com or at their postal address: Private Bag X34, Hatfield, 0028.

Contributions

Income category	Adult	Child
R0 to R11,000	R1,750	R540
RII,001 to RI7,000	R2,030	R600
R17,001 to R23,000	R2,480	R650
R23,001 plus	R2,930	R680

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A member of: