

SCHEDULE OF BENEFITS

Benefits and contributions applicable 1 January 2025 to 31 December 2025.



Please read in conjunction with the Information Guide and Rules of the Scheme available at www.profmed.co.za or by calling 0860 679 200.

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WHY PROFMED?

Profmed medical aid scheme offers ten excellent options. You can choose from one of our five Premium options (access to any hospital of your choice, excluding ProSelect) or one of our five Savvy options (hospital network options).

We provide affordable medical cover. Choose a benefit option that suites you or your family and that takes into consideration your personal needs and your financial position.

CONTRIBUTIONS TABLE

SAVVY

MONTHLY INCOME R0 - R7 000

	PRO PINNACLE	PROSECURE PLUS	PROSECURE	PROACTIVE PLUS	PROSELECT
Principal member	R 12 192	R 6 453	R 3 803	R 2 957	R 1 022
Adult dependant	R 11 310	R 5 972	R 3 803	R 2 724	R 1 284
Child	R 3 658	R 2 516	R 1 724	R 1 154	R 782

MONTHLY INCOME R7 001 - R11 000

	PRO PINNACLE	PROSECURE PLUS	PROSECURE	PROACTIVE PLUS	PROSELECT
Principal member	R 12 192	R 6 453	R 3 803	R 2 957	R 1 751
Adult dependant	R 11 310	R 5 972	R 3 803	R 2 724	R 1 926
Child	R 3 658	R 2 516	R 1 724	R 1 154	R 783

MONTHLY INCOME R11 001 +

	PRO PINNACLE	PROSECURE PLUS	PROSECURE	PROACTIVE PLUS	PROSELECT
Principal member	R 12 192	R 6 453	R 5 287	R 2 957	R 2 348
Adult dependant	R 11 310	R 5 972	R 4 895	R 2 724	R 2 170
Child	R 3 658	R 2 516	R 2 065	R 1 154	R 915

PREMIUM

	PRO PINNACLE	PROSECURE PLUS	PROSECURE	PROACTIVE PLUS	PROSELECT
Principal member	R 13 309	R 7 171	R 5 874	R 3 286	R 2 611
Adult dependant	R 12 346	R 6 633	R 5 439	R 3 028	R 2 559
Child	R 3 992	R 2 794	R 2 296	R 1 280	R 1 079

ProSecure, ProSecure Plus and ProPinnacle (Premium and Savvy) options: Only pay for the first 3 child dependants. Additional child dependants will be covered for free.

NOTES:

- Members applying for the rates below R11 000 monthly income must submit proof of gross monthly income from all sources.
- If a member registers his spouse or partner as a dependant, proof of the higher of the member's or spouse's or partner's income from all sources must be provided, i.e. latest three months' bank statements of all bank accounts and a tax directive from SARS. Proof of income must be provided to the Scheme annually by end-February.
- Adult dependant rates apply from age 21. If the dependant is studying and is dependent on the principal member, child rates apply up to age 28. Thereafter, rates will default to adult dependant rates. Proof of dependence, i.e. latest three months' bank statements of all bank accounts, and annual proof of study, i.e. proof of registration from academic institution, must be provided to the Scheme in terms of the above. If proof is not received annually by the Scheme by end-February, rates will default to adult dependant rates. It is the responsibility of the member to submit proof of study and dependence annually by end February, failing which contributions will be amended accordingly, with effect from 1 March.
- Members on the ProSecure, ProSecure Plus and ProPinnacle (Premium and Savvy) options only pay contributions for up to 3 child dependants. Additional child dependants will be covered for free.

GET IN TOUCH



IMPORTANT TELEPHONE NUMBERS

CLIENT SERVICES & CLAIMS

WITHIN RSA: 0860 679 200

OUTSIDE RSA: +27 12 679 4144

CHRONIC DISEASE & MEDICATION AUTHORISATIONS

(TREATING DOCTOR AND PHARMACISTS ONLY)

WITHIN RSA: 0800 132 345

OUTSIDE RSA: +27 11 770 6000

HOSPITAL & SPECIALISED RADIOLOGY AUTHORISATIONS

WITHIN RSA: 0860 776 363

OUTSIDE RSA: +27 12 679 4145

DISEASE MANAGEMENT AUTHORISATIONS

WITHIN RSA: 0860 776 363

OUTSIDE RSA: +27 12 679 4145

DENTAL AUTHORISATIONS

WITHIN RSA: 0860 679 200

OUTSIDE RSA: +27 12 679 4144

TUMS2TOTS

WITHIN RSA: 0860 679 200

INTERNATIONAL TRAVEL EMERGENCY MEDICAL ASSISTANCE

OUTSIDE RSA: +27 11 991 8564

INTERNATIONAL TRAVEL MEDICAL ASSISTANCE ENQUIRIES

WITHIN RSA: 0860 078 245

WHISPA GBV SUPPORT

WITHIN RSA: 0860 944 772



GET IN TOUCH



EMERGENCY TELEPHONE NUMBERS

EMERGENCY MEDICAL ASSISTANCE

WITHIN RSA: 082 911

OUTSIDE RSA: +27 11 991 8564

ASSISTANCE FOR TRAUMA, AND HIV EXPOSURE

WITHIN RSA: 0861 776 363

GBV SUPPORT PROGRAMME

WITHIN RSA: 0860 944 772



IMPORTANT EMAIL ADDRESSES

CLIENT SERVICES & GENERAL

info@profmed.co.za

CLAIMS

claims@profmed.co.za

INTERNATIONAL TRAVEL CLAIMS

internationalclaims@profmed.co.za

TUMS2TOTS ENQUIRIES

info@profmed.co.za

DENTAL AUTHORISATIONS

dental@profmed.co.za

INTERNATIONAL TRAVEL ENQUIRIES

internationalinfo@profmed.co.za

RADIOLOGY ENQUIRIES

verirad@profmed.co.za

WHISPA GBV SUPPORT ENQUIRIES

info@whispa.co.za



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<http://www.linkedin.com/company/profmed>



https://twitter.com/Profmed_SA

WHAT'S WHAT?

DEFINITIONS

MEMBER	The principal member of the Scheme in terms of the rules
BENEFICIARY	The member and any of his/her dependants registered on the Scheme entitled to receive benefits in terms of the rules
FAMILY	The total constitution of a member and his/her dependants registered on the Scheme in terms of the rules
M	Member
M+1	Member plus one dependant
M+2	Member plus two dependants
M+3	Member plus three dependants
MAXIMUM	Maximum benefit payable for a family larger than the family sizes indicated for a particular benefit

AMPLIFIRE

An additional out-of-hospital benefit available to the principal member and beneficiaries who pay adult contributions, at no extra cost.

DESIGNATED SERVICE PROVIDER (DSP) / DESIGNATED SERVICE PROVIDER NETWORK (DSPN)

A healthcare service provider (DSP) or network of healthcare service providers (DSPN) who are designated or contracted by the Scheme to provide diagnosis, services, treatment, medicine or facilities to members in terms of both PMBs and non-PMBs at a negotiated rate. Services obtained from a non-DSP will be reimbursed at the rate negotiated by Profmed with the DSPN.

DAY-TO-DAY LIMIT

Annual overall limit imposed on specific acute, out-of-hospital benefits. Sub-limits on these benefits are subject to availability of funds in the annual overall day-to-day limit. Funds in the annual overall limit can only be accessed through the relevant available sub-limits, where applicable.

DAY PROCEDURE

A procedure undertaken in an acute or day facility setting and does not require the patient to stay overnight.

“OFF-LABEL”

Medication utilised for a condition for which it is not specifically registered.

PRE-AUTHORISATION

Pre-authorisation must be obtained for hospitalisation and certain major medical treatment and procedures. Pre-authorisation is not a guarantee of payment and benefits are paid in accordance with the relevant protocols and Scheme rules, subject to availability of funds. Authorised services or treatment must commence within three months of authorisation, after which the authorisation is no longer valid. Authorisation does not include the fees charged by the attending medical practitioners.

It is the member's responsibility to obtain pre-authorisation, which should be obtained at least seven days prior to the commencement of treatment or services. In case of emergencies that occur after hours or on weekends and public holidays, authorisation must be obtained the next working day.

Profmed does not prescribe the treatment members should undergo, but will only fund treatment in accordance with the Scheme rules and protocols and that is clinically appropriate and evidence based, subject to PMB legislation.

PRESCRIBED MINIMUM BENEFITS (PMBs)

The minimum benefit a scheme is required to cover in respect of the diagnosis and treatment of the 271 conditions, as required by legislation. This Schedule of Benefits is subject to the provisions of the Medical Schemes Act No. 131 of 1998 and Regulations relating to the PMBs. Profmed provides cover for 271 conditions listed in the PMBs as well as the 26 chronic conditions listed in the Chronic Disease List (CDL) in accordance with the provisions of the Act and Regulations.

The 26 prescribed chronic conditions include the following: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus and Ulcerative Colitis. The diagnosis, treatment and care costs of these conditions will be paid in full provided these services are obtained from Profmed's designated service provider networks, where applicable. However, if such services are obtained **voluntarily** from a provider other than a DSP, the member will be liable for the balance of the account or the balance will be deducted from the relevant day-to-day benefit, subject to availability of funds. If the service is **involuntarily** obtained from a provider other than a DSP, the service will be paid in terms of the PMB legislation.

All PMB treatment will be subject to the application of treatment protocols and formularies, which will be more or less restrictive depending on the option chosen by the member. PMB-related claims will be paid from the relevant benefit first. Once the relevant benefit is depleted, it will pay from Scheme risk. Costs in respect of PMBs that exceed the formulary, reference pricing, rules and protocols will be the responsibility of the member.

SADC REGION

The Region known as the Southern African Development Community, namely Angola, Botswana, Comoros, Democratic Republic of the Congo, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, Swaziland, Tanzania (including Zanzibar), Zambia and Zimbabwe.

SINGLE EXIT PRICE

The retail price of medication as determined by legislation.

TARIFF DESCRIPTIONS

Services obtained at a tariff higher than that provided on any given option will be paid at the tariff specific to each option, subject to the PMB legislation.

Profmed Tariff	The Scheme's base tariff, calculated using the 2024 Profmed Tariff plus an average of 4.8% increase.
Negotiated Tariff	Determined by Profmed for particular providers, the various hospital groups and the hospital networks, and specific to each group
Specific Tariff	Consultations and procedures paid at specific Rand values
Optical Tariff	DSPN tariff negotiated by Opticlear with registered optical service providers nationally

DESIGNATED SERVICE PROVIDERS

Members will be required to make use of designated service providers to avoid co-payments on services rendered for the relevant benefits, subject to PMB legislation.

COVID-19 SCREENING CONSULTATIONS	General Practitioners as designated by the Scheme from time-to-time
CHRONIC DIALYSIS	National Renal Care, Life Healthcare (LHC) and Mediclinic
DAY PROCEDURE NETWORK: (APPLICABLE TO PROSECURE PLUS, PROSECURE AND PROACTIVE PLUS ONLY).	Netcare, Mediclinic, National Hospital Network (NHN) facilities, Joint Medical Holdings (JMH), specified Life Healthcare (LHC) hospitals and Day Hospital Association of South Africa (DHASA)
DAY-TO-DAY (PMBs AND NON-PMBs)	No DSPN, subject to rules and protocols
DOMICILIARY (HOME) OXYGEN	Ecomed Medical cc
EMERGENCY MEDICAL TRANSPORT (EMT) (WITHIN RSA)	Netcare 911
ENDOSCOPIC EXAMINATIONS IN AN ACUTE HOSPITAL SETTING: PROSELECT OPTION	ProSelect network hospitals as listed on the website
ENDOSCOPIC EXAMINATIONS IN AN ACUTE HOSPITAL SETTING: SAVVY OPTIONS	Savvy network hospitals as listed on the website
FUNCTIONAL REHABILITATION PROGRAMME	Documentation Based Care (DBC) Back and Neck Programme
HOSPITALISATION: PREMIUM OPTIONS (PMBs AND NON-PMBs)	No DSPN, with the exception of benefits for psychiatric hospitalisation, drug and alcohol rehabilitation and physical rehabilitation, subject to pre-authorisation, rules and protocols
HOSPITALISATION: PROSELECT OPTION (PMBs AND NON-PMBs)	Mediclinic, Life Healthcare (LHC), National Hospital Network (NHN) facilities, Joint Medical Holdings (JMH), Day Hospital Association of South Africa (DHASA), specified Independent hospitals and specified Netcare hospitals with the exception of benefits for psychiatric hospitalisation, drug and alcohol rehabilitation, physical rehabilitation, subject to pre-authorisation, rules and protocols
HOSPITALISATION: SAVVY OPTIONS (PMBs AND NON-PMBs)	Mediclinic, Life Healthcare (LHC), Day Hospital Association of South Africa (DHASA), specified Independent hospitals, Joint Medical Holdings (JMH) and other specified National Hospital Network (NHN) and Netcare hospitals, as listed on the website, with exception of benefits for psychiatric hospitalisation, drug and alcohol rehabilitation, physical rehabilitation, subject to pre-authorisation, rules and protocols
INTERNATIONAL TRAVEL MEDICAL ASSISTANCE	Europ Assistance
PHARMACY	Profmed Pharmacy Network, subject to rules, formulary, reference pricing and protocols
ONCOLOGY	<ul style="list-style-type: none"> • Chemotherapy and biologicals: Dis-Chem Pharmacy and Medipost • PET Scans: Bloch & Partners at Morningside Clinic (applies to greater Johannesburg region only)
ONCOLOGY RISK MANAGEMENT	Icon
OPTOMETRY	Opticlear
POST-NATAL HOME-BASED VISIT	Wellness Health Insurance Pathology Services (W.H.I.P.S)
PREVENTATIVE CARE	Pathology: Ampath, Lancet Laboratories and Pathcare
PSYCHIATRIC HOSPITALISATION	Akeso (Netcare), Crescent Mental Health Services (Mediclinic), Denmar (Mediclinic), participating Joint Medical Holdings (JMH) hospitals and National Hospital Network (NHN) facilities and Life Healthcare (LHC)
REHABILITATION	<ul style="list-style-type: none"> • Alcohol and Drugs: South African National Council on Alcoholism and Drug Dependence (SANCA) • Physical: Life Healthcare
TRAUMA, AND HIV ASSISTANCE PROGRAMME	Lifesense
WHISPA GBV SUPPORT PROGRAMME	Lifesense



THE EXCEPTIONS

SCHEME EXCLUSIONS

Please refer to Annexure C of the Scheme Rules and the Information Guide, which are available on the website, for expenses not covered by the Scheme.

BENEFIT LIMITATIONS

Benefit limits are applicable for a benefit year, unless stated otherwise. Claims must be submitted within four months from the date of service, after which they are considered as stale claims and will not be paid. Claims are funded subject to the availability of funds at the time the claim is processed by the Scheme and funds are not reserved for any specific claim.

WHY SAVVY?

By choosing a Savvy option, you can enjoy significant savings on your monthly contributions and still enjoy the same comprehensive benefits offered on the Premium options.

Choosing a Savvy option requires you to make use of a network hospital for hospitalisation. In the event that you are voluntarily admitted to a non-network hospital, you will be responsible for a co-payment.

The Savvy options give you more control over your contributions, without compromising on benefits.

WHY SAVVY?

HOSPITAL & HOSPITAL-RELATED BENEFITS & MAJOR MEDICAL EXPENSES

PREVENTITIVE CARE

CONTRACEPTIVES

CHRONIC MEDICATION CONDITIONS & CHRONIC MEDICATION BENEFIT

DAY-TO-DAY COVER

MATERNITY

INTERNATIONAL TRAVEL MEDICAL ASSISTANCE



SAVVY

Members registered on the Savvy options are required to make use of the Savvy network for hospitalisation, including day procedures. When consulting a medical practitioner, please ensure your treating practitioner consults at, or hospitalises you at a network hospital to avoid a co-payment.

- If a member voluntarily makes use of a **non-network hospital on the Savvy options, the co-payment will be R12 500**. Subject to PMB legislation.
- If a member voluntarily makes use of a **non-network hospital for a specified day procedure on the Savvy options, the co-payment will be R5 000**.

BENEFIT	PRO PINNACLE SAVVY	PRO SECURE PLUS SAVVY	PRO SECURE SAVVY	PRO ACTIVE PLUS SAVVY	PRO SELECT SAVVY
1. HOSPITAL AND HOSPITAL-RELATED BENEFITS AND MAJOR MEDICAL EXPENSES					
1A HOSPITALISATION					
Subject to use of the Savvy network hospitals. Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits.					
1A1 Hospital ward accommodation <i>(Subject to pre-authorisation)</i>	100% Negotiated Tariff in private ward	100% Negotiated Tariff in general ward		100% Negotiated Tariff in general ward	
1A2 Theatre and recovery room	100% Negotiated Tariff				
1A3 Intensive care and high care <i>(Subject to confirmation every 72 hours)</i>	100% Negotiated Tariff				
1A4 Emergency room visits and facility fees at hospitals that result in hospitalisation	100% Negotiated Tariff				
1B MEDICINES IN HOSPITAL					
1B1 Medicines and materials used in hospital and theatre	100% Negotiated Tariff				
1B2 Medicines taken out of hospital on discharge <i>(benefit limited to a 7-day supply)</i> <i>(See Section 5B1)</i> <i>(Subject to use of the Pharmacy DSPN)</i>	80% Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds	80% Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds		80% Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds	Subject to PMB legislation
1C GENERAL PRACTITIONERS (GPs) AND SPECIALISTS IN HOSPITAL					
1C1 Surgery and in-hospital procedures	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff
1C2 Consultations by a GP or specialist while hospitalised	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff
1D RADIOLOGY AND PATHOLOGY IN HOSPITAL					
Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits. Hospitalisation not covered if admission is for the sole purpose of radiology or pathology tests.					
1D1 a) Radiology and pathology while hospitalised <i>(Excluding MRI, radio-isotope, CT and PET scans and certain other investigative procedures)</i>	100% Negotiated Tariff				
b) COVID-19 pathology pre-admission <i>(Tariff code 3979 – molecular (PCR) test)</i> <i>(Subject to qualifying criteria and best practise in terms of NDoH and NICD guidelines)</i> <i>(Refer to Section 5G2 for out-of-hospital testing)</i>	R500 per beneficiary Subject to PMB legislation				

BENEFIT	PROPINNACLE SAVVY	PROSECURE PLUS SAVVY	PROSECURE SAVVY	PROACTIVE PLUS SAVVY	PROSELECT SAVVY
1D2 MRI, radio-isotope and CT scans and certain other investigative procedures while hospitalised Specialist referral required, except for CT scans <i>(Subject to pre-authorisation)</i>	100% Negotiated Tariff in-hospital (80% Negotiated Tariff out-of-hospital. See Section 5A6 for out-of-hospital benefit) 2 per family in- or out-of-hospital	100% Negotiated Tariff in-hospital (80% Negotiated Tariff out-of-hospital. See Section 5A6 for out-of-hospital benefit) 2 per family in- or out-of-hospital		100% Negotiated Tariff in-hospital 2 per family in-hospital only	
1E OTHER MAJOR MEDICAL SERVICES Call 0860 776 363 for authorisation and registration, information on clinical qualifying criteria, and benefits.					
1E1 Transplants Subject to registration on the Disease Management Programme, and PMB legislation. Benefit 1E1(b) below is not available to members who elect to be a donor to a recipient who is not a Profmed member.					
a) Hospitalisation <i>(Subject to pre-authorisation and use of the Savvy DSPN)</i>	100% Negotiated Tariff				
b) Donor costs PMBs only <i>(Subject to pre-authorisation and protocols)</i>	100% Negotiated Tariff				
1E2 Peritoneal dialysis and haemodialysis Chronic dialysis subject to the use of the Chronic Dialysis DSPN. Co-payment applies for the use of a non-DSP. <i>(Subject to pre-authorisation and registration on the Disease Management Programme and PMB legislation)</i>	100% Negotiated Tariff				
1E3 Oncology Subject to the use of the relevant DSPN, where applicable. Co-payment applies for voluntary use of a non-DSP. Benefit includes radiation therapy and/or chemotherapy, radiology, pathology and adjunct treatment, as well as oncology-related consultations, medicine, procedures and investigations for post-treatment monitoring, subject to Profmed protocols, costings and PMB legislation.					
Includes all costs related to treatment, consultations, investigations and drugs, excluding hospitalisation <i>(Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation)</i>	R739 655 per beneficiary Thereafter, subject to PMB legislation	R493 103 per beneficiary Thereafter, subject to PMB legislation		R400 000 per beneficiary Thereafter, subject to PMB legislation	
a) Chemotherapy <i>(Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation)</i>					
i.a) Consultations	300% Profmed Tariff	GPs: R602 Specialists: R882		GPs: R602 Specialists: R882	
i.b) Procedures	300% Profmed Tariff	100% Specific Tariff		100% Specific Tariff	
ii. Chemotherapy drugs Excluding adjunctive treatment <i>(Subject to protocols and use of Oncology pharmacy DSPN. 20% co-payment applies for voluntary use of non-DSPN)</i>	100% Single Exit Price plus dispensing fee				

BENEFIT	PROPINNACLE SAVVY	PROSECURE PLUS SAVVY	PROSECURE SAVVY	PROACTIVE PLUS SAVVY	PROSELECT SAVVY
<p>iii. Biologicals and other specified drugs <i>(Subject to pre-authorization, protocols and use of the Oncology pharmacy DSPN)</i></p>	<p>80% Single Exit Price plus dispensing fee Subject to benefit limit</p>	<p>Subject to PMB legislation</p>		<p>Subject to PMB legislation</p>	
<p>b) Radiation therapy <i>(Subject to pre-authorization and registration on the Oncology Programme and PMB legislation)</i></p>					
<p>i. Consultations</p>	<p>300% Profmed Tariff</p>	<p>Specialists: R882</p>		<p>Specialists: R882</p>	
<p>ii. Radiation therapy and facility fees <i>(Subject to pre-authorization and protocols)</i></p>	<p>100% Negotiated Tariff</p>				
<p>c) PET scans (Positron-Emission Tomography) <i>(Subject to pre-authorization and protocols, and use of Oncology PET Scan DSPN. DSPN applicable within the greater Johannesburg region only)</i></p>	<p>100% Negotiated Tariff</p>				
<p>1E4 Rehabilitation This benefit covers members who have become disabled as a result of acute injuries caused by trauma, infection, surgery, spinal cord injury, brain injury, bleeding or infarction resulting in a stroke. This benefit is only available as an in-patient in a registered rehabilitation facility. Rehabilitation must occur within the benefit year in which the specified injury takes place, or commence directly after discharge from an acute hospitalisation facility or not more than one calendar month after the specified injury is sustained. Benefits are limited to two months' rehabilitation and the availability of benefits, and are subject to case management and Profmed protocols. Admissions covered at authorised service providers only. Subject to use of the Rehabilitation DSPN and PMB legislation. Co-payment applies for voluntary use of a non-DSP.</p>					
<p><i>(Subject to pre-authorization and use of the Rehabilitation DSPN)</i></p>	<p>100% Negotiated Tariff R87 157 per family</p>	<p>100% Negotiated Tariff R57 939 per family</p>		<p>100% Negotiated Tariff R28 970 per family</p>	
<p>1E5 Out-patient care in lieu of hospitalisation</p>					
<p>a) Treatment in a registered sub-acute facility or at home by an appropriately registered practitioner <i>(Subject to pre-authorization and protocols)</i></p>	<p>100% Negotiated Tariff R18 837 per beneficiary</p>	<p>100% Negotiated Tariff R15 900 per beneficiary</p>		<p>100% Negotiated Tariff R13 559 per beneficiary</p>	
<p>b) Wound care Treatment at home, including surgicals, by an appropriately registered practitioner <i>(Subject to pre-authorization and protocols)</i></p>	<p>100% Negotiated Tariff R7 272 per beneficiary</p>	<p>100% Negotiated Tariff R4 315 per beneficiary</p>		<p>100% Negotiated Tariff R3 573 per beneficiary</p>	
<p>1E6 Psychiatric treatment Includes all in- and out-of-hospital psychiatric and clinical psychology consultations, treatment and in-hospital medication, and alcohol and drug rehabilitation. Hospitalisation only available at Psychiatric Hospitalisation DSPN. PMBs are deducted from this benefit, but are not subject to these limits. Co-payment applies for voluntary use of a non-DSP.</p>					
<p>a) In-hospital <i>(Subject to pre-authorization and use of the Psychiatric Hospitalisation DSPN)</i></p>	<p>100% Negotiated Tariff in general ward R43 638 per family Subject to PMB legislation</p>	<p>100% Negotiated Tariff in general ward R29 092 per family Subject to PMB legislation</p>		<p>100% Negotiated Tariff in general ward R21 818 per family Subject to PMB legislation</p>	

BENEFIT	PROPINNACLE SAVVY	PROSECURE PLUS SAVVY	PROSECURE SAVVY	PROACTIVE PLUS SAVVY	PROSELECT SAVVY
b) Out-of-hospital consultations <i>(Subject to PMB legislation)</i>	R7 395 per family Subject to 1E6(a) in-hospital limit	R7 395 per family Subject to 1E6(a) in-hospital limit		R7 395 per family Subject to 1E6(a) in-hospital limit PMBs only	
1E7 Endoscopic examinations In suitably equipped procedure room, subject to protocols and PMB legislation. Co-payment applies for voluntary use of a non-DSP.					
a) Gastroscopy <i>(Subject to pre-authorisation)</i>	100% Negotiated Tariff				
b) Colonoscopy Includes Sigmoidoscopy <i>(Subject to pre-authorisation)</i>	100% Negotiated Tariff				
c) Colonoscopy and gastroscopy Combined procedure <i>(Subject to pre-authorisation)</i>	100% Negotiated Tariff				
1F OTHER MEDICAL SERVICES Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits.					
1F1 Physiotherapy					
a) In-hospital <i>(Subject to pre-authorisation)</i>	100% Profmed Tariff	100% Profmed Tariff		100% Profmed Tariff	
b) Out-of-hospital Post-operative, available up to 6 weeks after related hospital procedure <i>(Subject to pre-authorisation)</i>	100% Profmed Tariff M R3 329 Maximum R5 547 per family	100% Profmed Tariff M R2 465 Maximum R3 944 per family		Subject to PMB legislation	
1F2 Blood transfusions <i>(Subject to pre-authorisation)</i>					
1F3 Emergency medical transport (EMT) Emergencies within the borders of South Africa. Contact 082 911 within RSA. 20% co-payment for voluntary use of a non-DSP, subject to PMB legislation. Non-emergency calls will not be funded.					
<i>(Subject to Profmed protocols and use of the EMT DSPN)</i>	100% of cost				
1F4 Internal surgical devices A fabricated or artificial substitute that is surgically implanted permanently into the body and does not protrude from the body and replaces or assists a diseased or missing part of the body to restore functionality. Subject to PMB legislation.					
a) Major <i>(Subject to pre-authorisation, protocols and management)</i>	100% Negotiated Tariff R56 707 per family				
1F5 Cataract surgery R38 000 per beneficiary, per event (includes the total cost of (a),(b) and (c), below). Subject to pre-authorisation and protocols. Call 0860 776 363 for authorisation, information on clinical qualifying criteria and benefits. Specified day procedures are subject to the use of the DSPN. Use of a non-DSP will result in a co-payment.					
a) Hospitalisation <i>(Subject to pre-authorisation, protocols and management)</i>	100% Negotiated Tariff				
b) Surgeon and anaesthetist fees	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff

BENEFIT

PRO PINNACLE SAVVY

PRO SECURE PLUS SAVVY

PRO SECURE SAVVY

PRO ACTIVE PLUS SAVVY

PRO SELECT SAVVY

c) Intra-ocular lens	R5 362 per beneficiary per eye				
1F6 Functional rehabilitation programme This is a six-week inter-disciplinary programme for treatment of long-term back and neck conditions. This benefit is conservative treatment and only available out-of-hospital. Documentation Based Care (DBC) Back and Neck Programme provides treatment- and cost-effective solutions to patients, improving quality of life. Subject to qualifying criteria, clinical protocols and pre-authorisation. Call 0860 776 363 for authorisation.					
a) Initial assessment <i>(Specified codes as per approved treatment plan)</i>	100% Negotiated Tariff Not subject to day-to-day benefits				
b) Treatment and interim assessment <i>(Specified codes as per approved treatment plan)</i>	100% Negotiated Tariff Not subject to day-to-day benefits				
c) Treatment and outcome assessment <i>(Specified codes as per approved treatment plan)</i>	100% Negotiated Tariff Not subject to day-to-day benefits				
d) Maintenance <i>(Specified codes as per approved treatment plan)</i>	100% Negotiated Tariff Not subject to day-to-day benefits				
1G DENTAL PROCEDURES IN HOSPITAL Subject to pre-authorisation and protocols. Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits. Please see Section 5E for out-of-hospital benefits.					
1G1 Hospitalisation: - Permanent tooth impaction removals - Extensive conservative dental treatment only for children younger than 8 years (24-month benefit) <i>(Subject to pre-authorisation, protocols, management and use of the Savvy DSPN)</i>	100% Negotiated Tariff				
a) Specialist and anaesthetist fees	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff
b) Dentist fees	135% Profmed Tariff	135% Profmed Tariff		135% Profmed Tariff	
1G2 Hospitalisation: - Other <i>(Subject to pre-authorisation, protocols, management and use of the Savvy DSPN)</i>	100% Negotiated Tariff	100% Negotiated Tariff		Subject to PMB legislation	
a) Specialist (excluding dental specialists) and anaesthetist fees	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	Subject to PMB legislation	
b) Dentist and dental specialist fees <i>(Dental specialists include: Practice: 62, 92, 94, 98)</i>	135% Profmed Tariff Subject to Section 5E	135% Profmed Tariff Subject to Section 5E		135% Profmed Tariff	Subject to PMB legislation
1G3 Functional orthognathic surgery Includes all costs related to the admission and procedure, e.g. all medical practitioner fees, hospitalisation, etc. <i>(Subject to pre-authorisation)</i>	R39 447 per family	No benefit		No benefit	

BENEFIT

PRO PINNACLE
SAVVY

PRO SECURE
PLUS SAVVY

PRO SECURE
SAVVY

PRO ACTIVE
PLUS SAVVY

PRO SELECT
SAVVY

2. PREVENTATIVE CARE

Benefits are subject to specific protocols and the use of the Preventative Care DSPN. Co-payment applies for voluntary use of a non-DSP. Please refer to Section 5G3 for benefits in respect of the COVID-19 vaccine.

2A GENERAL HEALTH

2A1 Digital Health Assessments

Available to the principal member and beneficiaries who pay adult dependant contributions.

Assessments to be done via
Profmed WellBeing
(Tariff code: 99972)

1 assessment per beneficiary

2A2 Consultation

Includes a consultation for any one of the Preventative Care benefits
(Tariff codes 0190, 0191, 0192;
Audiology tariff codes 1010, 1011)

GPs: R602

Specialists: R882

100% Profmed Tariff for speech therapists or audiologists

1 consultation per beneficiary, thereafter subject to available day-to-day limit

GPs: R602

Specialists: R882

100% Profmed Tariff for speech therapists or audiologists

1 consultation per beneficiary, thereafter subject to available day-to-day limit

GPs and specialists at GP rate: R602

1 consultation per beneficiary

2A3 Fasting blood sugar test

For late onset diabetes. Males and females 40 years and older. Subject to PMB legislation.

Pathology
(Subject to use of the Preventative Care DSPN)
(Tariff code 4057)

100% Negotiated Tariff
1 per beneficiary

2A4 Fasting lipogram blood test

Males and females 40 years and older. Subject to PMB legislation

Pathology
(Subject to use of the Preventative Care DSPN)
(Tariff code 4025)

100% Negotiated Tariff
1 per beneficiary

2A5 HIV testing

Subject to PMB legislation.

Pathology
(Subject to use of the Preventative Care DSPN)
(Tariff codes 3932, 4614)

100% Negotiated Tariff
1 per beneficiary

2A6 Malaria prophylaxis

Beneficiaries of all ages.

Includes over-the-counter and prescribed medication only

100% Single Exit Price
1 course of treatment per beneficiary
Maximum R460 per beneficiary
MMAP® applies
Not subject to day-to-day benefits

2A7 Tobacco and alcohol counselling, screening and brief intervention

Males and females 18 years and older. Subject to PMB legislation.

Telephonic or face-to-face counselling
(Practice 86: Tariff code 86202,
Practice 14 and 15: Tariff code
0130, 0190, 0191, 0192)

GPs: R602
2 sessions per family
Not subject to day-to-day benefits

BENEFIT

PRO PINNACLE
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PRO SECURE
SAVVY

PRO ACTIVE
PLUS SAVVY

PRO SELECT
SAVVY

2B VACCINES

2B1 Child immunisations
Children 0 to 12 years, per the Department of Health's Childhood Immunisation Schedule.

Vaccine only

100% Single Exit Price plus dispensing fee at Pharmacy DSPN rate

2B2 Human papilloma virus (HPV) vaccine
Females 9 to 27 years of age. Includes initial vaccination and two follow-up booster vaccinations, where applicable.
Subject to PMB legislation.

Vaccine only

100% Single Exit Price plus dispensing fee at Pharmacy DSPN rate

2B3 Influenza vaccine

Vaccine only

100% Single Exit Price plus dispensing fee at Pharmacy DSPN rate
1 vaccination per beneficiary

2B4 Pneumococcal vaccine
Adults 65 years and older, and individuals of all ages who are respiratory compromised or have related chronic diseases. Available every five years.
Subject to PMB legislation.

Vaccine only

100% Single Exit Price plus dispensing fee at Pharmacy DSPN rate

2C WOMEN'S HEALTH

2C1 Bone densitometry
Females 65 years and older. Available every five years. Subject to PMB legislation.

Radiology

(Tariff codes 50120, 64110, 74290,
39173, 3600, 3604, 3612)

100% Profmed Tariff
1 per beneficiary

2C2 Faecal occult blood test
Females 50 years and older. Subject to PMB legislation

Pathology

(Subject to use of the Preventative
Care DSPN)
(Tariff codes 4351, 4352)

100% Negotiated Tariff
1 per beneficiary

2C3 Human papilloma virus (HPV) screening
Females 25 to 65 years. Available every 5 years. Subject to PMB legislation.

Pathology

mRNA test only
(Tariff code HPV5)

100% Negotiated Tariff
1 per beneficiary

2C4 Mammograms
Available annually to Females 40 to 55 years and every two years for females 56 years and older. Females younger than 40 years pre-disposed to breast cancer have access to the benefit, subject to motivation and pre-authorisation. Subject to PMB legislation.

Radiology

(Tariff code 34100, 34101)

100% Profmed Tariff
1 per beneficiary

BENEFIT

PRO PINNACLE
SAVVY

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PLUS SAVVY

PRO SECURE
SAVVY

PRO ACTIVE
PLUS SAVVY

PRO SELECT
SAVVY

2C5 Pap smear or liquid-based cytology
Females 18 years and older. Subject to PMB legislation.
(Tariff code 34100, 34101)

Pathology

(Tariff code 4566 – Pap smear.
Tariff codes 4559 and 4560 –
liquid-based cytology reimbursed
per tariff code 4566. A co-payment
could apply).

100% Negotiated Tariff
1 per beneficiary

2C6 Contraceptives
Funding only applies for contraceptive purposes. Protocols apply.

2C6 Contraceptives
Including oral contraceptives,
patches, injections,
implants and intra-uterine devices.
- Oral contraceptives and patches:
every 20 days
- Injections: 3 to 6-month cycle
Intra-uterine devices and implants:
3 to 5-year cycle

100% Single Exit Price plus dispensing fee at Pharmacy DSPN rate
MMAP® applies
Maximum R2 021 per beneficiary
Not subject to day-to-day limit

2D MEN'S HEALTH

2D1 Bone densitometry
Males 65 years and older. Available every five years. Subject to PMB legislation.

Radiology

(Tariff codes 50120, 64110, 74290,
39173, 3600, 3604, 3612)

100% Profmed Tariff
1 per beneficiary

2D2 Faecal occult blood test
Males 50 years and older. Subject to PMB legislation.

Faecal occult blood test

(Subject to use of the Preventative
Care DSPN)
(Tariff codes 4351, 4352)

100% Negotiated Tariff
1 per beneficiary

2D3 Prostate Specific Antigen (PSA)
Males 40 years and older. Subject to PMB legislation.

Pathology

(Subject to use of the Preventative
Care DSPN)
(Tariff code 4519)

100% Negotiated Tariff
1 per beneficiary

2E CHILDREN'S HEALTH

2E1 Newborn hearing screening
Newborns up to 6 weeks old. Subject to PMB legislation.

Audiology screening

By a registered speech therapist or
audiologist
(Tariff code 1580)

100% Profmed Tariff
1 per beneficiary

BENEFIT

PRO PINNACLE
SAVVY

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PLUS SAVVY

PRO SECURE
SAVVY

PRO ACTIVE
PLUS SAVVY

PRO SELECT
SAVVY

3. AMPLIFIRE

Beneficiaries who meet the relevant qualifying criteria can unlock additional benefits.

The following steps must be followed to unlock the benefits:

1. Download the Profmed App;
2. Conduct a Digital Health Assessment via Profmed WellBeing;
3. If required, complete a physical health assessment;
4. Complete all individual relevant Preventative Care benefits (see Section 2);
5. Where a beneficiary is registered on a Chronic Treatment Care plan, they are required to fully comply with the plan, to unlock benefits.

The benefit is an additional R2 500 cover for out-of-hospital consultations, and is payable once the overall day-to-day benefits in Section 5 have been depleted.

This is available every 24 months to the principal member and beneficiaries who pay adult contributions and is subject to the relevant qualifying criteria.

The amount of R2 500 (includes the total cost of 3A1, 3A2 and 3A3, below).

3A1 a) General Practitioner (GP) and Specialists - Face-to-face consultations	300% Profmed Tariff	GPs: R602 Specialists: R882 <i>Specialist tariff amount may differ depending on the speciality</i>	GPs and specialists at GP rate: R602
b) General Practitioner (GP) and Specialists - Virtual and telephonic consultations	Code 0130: R350 <i>Specialist tariff amount may differ depending on the speciality</i>		
3A2 Conservative dentistry - Includes annual check-ups	135% Profmed Tariff		
3A3 Supplementary services <ul style="list-style-type: none"> • Audiometrists • Biokineticists • Chiropractors • Dieticians • Occupational therapists • Speech therapists • Physiotherapists • Podiatrists 	100% Profmed Tariff		

PROFMED WELLBEING

Members can access a Digital Wellbeing Assessment.

This benefit provides members with access to an array of features to support their mental health journey. This benefit is available on all options and is funded in addition to the Profmed benefits. Benefits include mental wellbeing assessments, mood trackers, journaling, and personalised learning videos. Members who require further support will be prompted to download an additional support App.

Members who are registered for Attention Deficit Hyperactivity Disorder (ADHD)/ Attention Deficit Disorder (ADD), Depression and Bipolar Mood Disorder will have access to additional support services, which includes medicine reminders and adherence monitoring. This is subject to the benefits available per option.

This benefit does not require pre-authorisation and members must register via the Profmed App to access the benefit.

4. CHRONIC MEDICATION CONDITIONS

The formulary and reference pricing will be most restrictive on the ProSelect, ProSelect Savvy, ProActive Plus and ProActive Plus Savvy options and least restrictive on the ProPinnacle options. MMAP[®] applies. The conditions covered on each option are listed below. The Condition Medicine List (CML), including the list of chronic diseases (CDL), is available on the Profmed website at www.profmed.co.za. Subject to the use of the Pharmacy DSPN. Co-payment applies for voluntary use of a non-DSP. Claims from wholesale pharmacies will not be accepted. Call 0860 679 200 for information on clinical qualifying criteria and benefits. Furthermore, where a protocol or a formulary drug preferred by the Scheme has been ineffective or would cause harm to a beneficiary, the Scheme will fund the cost of the appropriate substitution treatment without a penalty to the beneficiary as required by Regulations 15H and 15I of the Act.

PROPINNACLE SAVVY

58 conditions plus relevant DTPs

CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.

Other: Allergic Rhinitis (in patients with asthma), Alzheimer's Disease, Ankylosing Spondylitis, Benign Prostatic Hypertrophy, Cushing's Syndrome, Cystic Fibrosis, Deep Vein Thrombosis, Gastro-Oesophageal Reflux Disorder, Gout, Hypoparathyroidism, Hyperthyroidism, Major Depressive Disorder, Malabsorption Syndrome, Meniere's Disease, Motor Neuron Disease, Myasthenia Gravis, Obsessive Compulsive Disorder, Oncology Adjunctive Treatment, Osteoarthritis, Osteoporosis, Paget's Disease, Paraplegia & Quadriplegia, Peripheral Vascular Disease, Pituitary Adenomas/Hyperfunction of Pituitary Gland, Post-Organ Transplant (non-DTP), Psoriatic Arthritis, Pulmonary Interstitial Fibrosis, Stroke/Cerebrovascular Accident, Systemic Connective Tissue Disorders, Tuberculosis, Valvular Heart Disease.

Additional: Attention Deficit Hyperactivity Disorder (ADHD) (Children up to age 18).

DTPs: Relevant chronic conditions listed in the 271 PMBs, e.g. hormone replacement therapy (Menopause), immuno-suppressive therapy (Post-Organ Transplants).

PROSECURE PLUS SAVVY & PROSECURE SAVVY

39 conditions plus relevant DTPs

CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.

Other: Allergic Rhinitis (in patients with asthma), Alzheimer's Disease, Ankylosing Spondylitis, Benign Prostatic Hypertrophy, Major Depressive Disorder, Obsessive Compulsive Disorder, Oncology Adjunctive Treatment, Osteoporosis, Paraplegia & Quadriplegia, Pituitary Adenomas/Hyperfunction of Pituitary Gland, Psoriatic Arthritis, Valvular Heart Disease.

Additional: Attention Deficit Hyperactivity Disorder (ADHD) (Children up to age 18).

DTPs: Relevant chronic conditions listed in the 271 PMBs, e.g. hormone replacement therapy (Menopause), immuno-suppressive therapy (Post-Organ Transplants).

PROACTIVE PLUS SAVVY & PROSELECT SAVVY

26 conditions plus relevant DTPs

CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.

DTPs: Relevant chronic conditions listed in the 271 PMBs, e.g. hormone replacement therapy (Menopause), immuno-suppressive therapy (Post-Organ Transplants).

BENEFIT

	PRO PINNACLE SAVVY	PRO SECURE PLUS SAVVY	PRO SECURE SAVVY	PRO ACTIVE PLUS SAVVY	PRO SELECT SAVVY
a) CDLs, other chronic conditions and relevant DTPs as listed above 24-day dispensing cycle applies <i>(Attending doctor or pharmacist to call 0800 132 345 to register condition and authorise medication)</i>	100% Single Exit Price plus dispensing fee 58 conditions covered and relevant DTPs Unlimited, subject to Profmed formulary and reference price	100% Single Exit Price plus dispensing fee 39 conditions covered and relevant DTPs Subject to Profmed formulary and reference price M R18 367 M+1 R30 077 Maximum R41 663 per family		100% Single Exit Price plus dispensing fee Restricted to 26 CDL conditions and relevant DTPs, subject to PMB legislation Subject to Profmed formulary and strict reference price	
b) Biologicals and other specified drugs <i>(Subject to pre- authorisation, protocols and use of the Pharmacy DSPN)</i>	80% Single Exit Price plus dispensing fee		Subject to PMB legislation	Subject to PMB legislation	

5. DAY-TO-DAY COVER

All sub-limits for out-of-hospital benefits set out in this Section, and benefits subject to the day-to-day limit in other Sections of this Schedule, are subject to the availability of the annual overall day-to-day limit, subject to PMB legislation.

Annual overall day-to-day limit Available only through relevant available day-to-day sub-limits, where applicable	M R20 203 M+1 R29 830 Maximum R38 820 per family	M R12 588 M+1 R19 146 Maximum R24 647 per family	M R4 548 M+1 R6 452 Maximum R8 039 per family	See Section 5E. Subject to PMB legislation
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5A GENERAL PRACTITIONERS (GPs) AND SPECIALISTS

5A1 a) Face-to-face consultations	300% Profmed Tariff Subject to day-to-day limit	GPs: R602 Specialists: R882 Specialist tariff amount may differ depending on the speciality Subject to day-to-day limit	GPs and specialists at GP rate: R602 Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
b) Virtual and telephonic consultations	3 consultations per beneficiary Code 0130: R350 Specialist tariff amount may differ depending on the speciality Subject to day-to-day limit, and PMB legislation	3 consultations per beneficiary Code 0130: R350 Specialist tariff amount may differ depending on the speciality Subject to day-to-day limit, and PMB legislation	3 consultations per beneficiary Code 0130: R350 Specialist tariff amount may differ depending on the speciality Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5A2 Non-hospital procedures in doctor's rooms	300% Profmed Tariff Subject to day-to-day limit	100% Specific Tariff Subject to day-to-day limit	100% Specific Tariff at GP rate Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5A3 Psychiatric consultations <i>(out-of-hospital) (See Section 1E6)</i>	300% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit	GPs: R602 Specialists: R882 Paid from Psychiatric benefit Not subject to day-to-day limit	PMBs paid from Psychiatric 1E6 benefit, subject to PMB legislation	
5A4 Clinical psychology <i>(out-of-hospital) (See Section 1E6)</i>	100% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit	100% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit	PMBs paid from Psychiatric 1E6 benefit, subject to PMB legislation	
5A5 Radiology and pathology <i>(Excluding MRI and CT scans)</i>	80% Negotiated Tariff Subject to day-to-day limit	80% Negotiated Tariff Subject to day-to-day limit	80% Negotiated Tariff Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation

BENEFIT

	PRO PINNACLE SAVVY	PRO SECURE PLUS SAVVY	PRO SECURE SAVVY	PRO ACTIVE PLUS SAVVY	PRO SELECT SAVVY
5A6 MRI, radio-isotope and CT scans Specialist referral required, except for CT scans <i>(Subject to pre-authorization. Call 0860 776 363 for authorisation and protocols)</i>	80% Negotiated Tariff out-of-hospital (100% Negotiated Tariff in-hospital. See Section 1D2 for in-hospital benefit) 2 per family in- or out-of-hospital Not subject to day-to-day limit	80% Negotiated Tariff out-of-hospital (100% Negotiated Tariff in-hospital. See Section 1D2 for in-hospital benefit) 2 per family in- or out-of-hospital Subject to day-to-day limit out-of-hospital		80% Negotiated Tariff R6 180 per family Not subject to day-to-day limit	Subject to PMB legislation
5A7 Emergency room visits and facility fees at hospitals that do not result in hospitalisation <i>(Subject to the use of the Savvy DSPN, subject to PMB legislation)</i>	100% Negotiated Tariff Subject to day-to-day limit	100% Negotiated Tariff Subject to day-to-day limit		100% Negotiated Tariff Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5A8 Cataract surgery Subject to pre-authorization and protocols. Call 0860 776 363 for authorisation, information on clinical qualifying criteria and benefits.					
a) Surgeon and anaesthetist fees	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff
b) Intra-ocular lens	R5 362 per beneficiary per eye				
5B ACUTE MEDICATION					
5B1 Prescribed acute medication Subject to use of the Pharmacy DSPN. Co-payment applies for voluntary use of a non-DSP. Wholesale pharmacy claims will not be accepted. <i>(Certain medication on repeat script will be funded from this benefit. Call 0860 679 200 for more information)</i>	80% Single Exit Price plus dispensing fee M R11 318 M+1 R15 126 M+2 R16 184 M+3 R17 877 Maximum R21 156 per family MMAP [®] applies Subject to day-to-day limit	80% Single Exit Price plus dispensing fee M R4 125 M+1 R6 135 M+2 R6 769 M+3 R7 086 Maximum R7 616 per family MMAP [®] applies Subject to day-to-day limit		80% Single Exit Price plus dispensing fee M R739 M+1 R1 058 Maximum R1 375 per family MMAP [®] applies Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5B2 Over-the-counter medication <i>(See Section 5B1)</i>	80% of cost R2 221 per family Subject to acute medication and day-to-day limits	80% of cost R1 797 per family Subject to acute medication and day-to-day limits		80% of cost Subject to acute medication and day-to-day limits	No benefit
5C SUPPLEMENTARY BENEFITS					
5C1 a) External prostheses and appliances <ul style="list-style-type: none"> Includes insulin pumps, home oxygen therapy and stoma bags Insulin pumps: 1 every 48 months Home oxygen: subject to use of the DSPN. Co-payment applies for voluntary use of a non-DSP Hearing aids: 1 pair every 24 months <i>(Subject to protocols and pre-authorization. Call 0860 776 363 for authorisation and protocols)</i>	100% Negotiated Tariff R23 694 per family Additional for Hearing aids only: R7 510 Not subject to day-to-day limit	100% Negotiated Tariff R15 761 per family Additional for Hearing aids only: R4 548 Not subject to day-to-day limit		Subject to PMB legislation	

BENEFIT

	PROPINNACLE SAVVY	PROSECURE PLUS SAVVY	PROSECURE SAVVY	PROACTIVE PLUS SAVVY	PROSELECT SAVVY
b) Other: Includes orthopaedic braces, wheel chairs, walking frames and crutches	100% Negotiated Tariff R5 923 per family Subject to day-to-day limit	100% Negotiated Tariff R4 231 per family Subject to day-to-day limit		Subject to PMB legislation	
5C2 Supplementary services • Audiometrists • Biokineticists • Chiropractors • Dieticians • Occupational therapists • Speech therapists • Physiotherapists • Podiatrists	100% Profmed Tariff M R3 278 Maximum R5 711 per family Subject to day-to-day limit, and PMB legislation	100% Profmed Tariff M R3 067 Maximum R5 077 per family Subject to day-to-day limit, and PMB legislation		Subject to PMB legislation	
5C3 Alternative health practitioners Including homeopaths and homeopathic medication. Practitioners must be registered with The Allied Health Professions Council	80% of cost R2 855 per family R846 per family sub-limit for homeopathic medication Subject to day-to-day limit	No benefit		No benefit	

5D OPTOMETRY SERVICES

Benefits are subject to protocols and are applied over a 24-month period. Lenses are limited to contact lenses OR Spectacle lenses. Please consult your service provider regarding the use of non-generic and specialist lenses and coatings to avoid incurring a co-payment.

5D1 Eye examinations	100% Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation	100% Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation	100% Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5D2 Spectacles a) Lenses (generic) Single vision, bi-focal and varifocal	100% Optical Tariff 24-month benefit Subject to day-to-day limit	100% Optical Tariff 24-month benefit Subject to day-to-day limit	No benefit	
b) Extras	100% Optical Tariff for generic hard-coating and generic plastic anti-reflex coating 24-month benefit Subject to day-to-day limit	100% Optical Tariff for generic hard-coating 24-month benefit Subject to day-to-day limit	No benefit	
c) Frames	R1 480 per beneficiary 24-month benefit Subject to day-to-day limit	R1 058 per beneficiary 24-month benefit Subject to day-to-day limit	No benefit	
5D3 Contact lenses (clear)	R3 491 per beneficiary 24-month benefit Subject to day-to-day limit	R2 116 per beneficiary 24-month benefit Subject to day-to-day limit	No benefit	
5D4 Refractive eye surgery Includes all costs related to the admission and procedure, all medical practitioner fees, hospitalisation, etc. <i>(Subject to protocols and pre-authorization. Call 0860 776 363 for authorisation and protocols)</i>	R4 019 per beneficiary Not subject to day-to-day limit	No benefit	No benefit	

BENEFIT

PRO PINNACLE SAVVY

PRO SECURE PLUS SAVVY

PRO SECURE SAVVY

PRO ACTIVE PLUS SAVVY

PRO SELECT SAVVY

5E DENTISTRY

Benefits are subject to protocols and management. (See Section 1G for dentist and specialist fees in-hospital)

<ul style="list-style-type: none"> - Conservative dentistry (includes annual check-ups, restorations, extractions, root canal treatment, dentures) - Advanced dentistry (includes crowns, bridges, implants, orthodontics) <p>Orthodontics available only up to age 18. (Orthodontics and implants subject to pre- authorisation. Call 0860 679 200 for authorisation and protocols)</p>	<p>135% Profmed Tariff R7 722 per beneficiary Maximum R15 444 per family Not subject to day-to-day limit</p>	<p>135% Profmed Tariff R6 558 per beneficiary Maximum R13 222 per family Not subject to day-to-day limit</p>	<p>135% Profmed Tariff Subject to day-to-day limit</p>	<p>135% Profmed Tariff R739 per beneficiary Maximum R1 903 per family</p>
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5F TRAUMA, AND HIV ASSISTANCE PROGRAMME

Benefit covers trauma, and HIV exposure as a result of crime, e.g. assault or rape, and HIV exposure resulting from crime and occupational injuries, e.g. needle-stick injury. Where relevant, victims will be accompanied by an appropriate, qualified professional to identity parades and court appearances for emotional support. Call 0861 776 363 for 24-hour assistance. Benefits are subject to the use of the Trauma and HIV DSP. Co-payment applies for voluntary use of a non-DSP. Subject to case management and protocols.

5F1 Counselling

<p>a) Telephonic counselling</p>	<p>100% Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Not subject to day-to-day limit</p>
<p>b) Face-to-face counselling</p>	<p>100% Negotiated Tariff Up to 4 sessions per incident Thereafter, subject to PMB legislation Not subject to day-to-day limit</p>
<p>5F2 HIV post-exposure management 2 doctor's consultations, 30 days' PEP medication, pathology and 3 – 6 months' HIV exposure management</p>	<p>100% Negotiated Tariff 1 course of treatment per beneficiary per incident at DSP Subject to PMB legislation Not subject to day-to-day limit</p>

5G COVID-19 SCREENING AND TESTING

To qualify for this benefit, members must have consulted a GP. Funding for consultations is for either one face-to-face or one virtual/ telephonic consultation with the COVID-19 DSPN. Pathology is covered if the necessary screening criteria are met and provided the testing is not considered routine. Refer to Section 1D1(b) for hospital pre-admission testing. All benefits are subject to PMB legislation.

<p>5G1 a) Face-to-face consultations (Subject to the use of the COVID-19 DSPN, as designated by Profmed from time-to-time. Voluntary use of a non-DSP will result in a 25% co-payment)</p>	<p>1 Consultation per beneficiary Additional consultations subject to PMB legislation GPs only: R602 Subject to day-to-day limit, and PMB legislation</p>	<p>1 Consultation per beneficiary Additional consultations subject to PMB legislation GPs only: R602 Subject to day-to-day limit, and PMB legislation</p>	<p>1 Consultation per beneficiary Additional consultations subject to PMB legislation GPs only: R602 Subject to day-to-day limit, and PMB legislation</p>	<p>Subject to PMB legislation</p>
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BENEFIT

	PROPINNACLE SAVVY	PROSECURE PLUS SAVVY	PROSECURE SAVVY	PROACTIVE PLUS SAVVY	PROSELECT SAVVY
b) Virtual and telephonic consultations <i>(Subject to use of the COVID-19 DSPN, as designated by Profmed from time-to-time. Voluntary use of a non-DSP will result in a 25% co-payment)</i>	1 Consultation per beneficiary Additional consultations subject to PMB legislation GPs only: Code: 0130: R350 Subject to day-to-day limit, and PMB legislation	1 Consultation per beneficiary Additional consultations subject to PMB legislation GPs only: Code: 0130: R350 Subject to day-to-day limit, and PMB legislation		1 Consultation per beneficiary Additional consultations subject to PMB legislation GPs only: Code: 0130: R350 Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5G2 Pathology Tariff code 3979 – molecular (PCR) test <i>(Subject to qualifying criteria and best practise in terms of NDoH and NICD guidelines. Refer to Section 1D1(b) for hospital pre-admission testing)</i>	1 pathology test per beneficiary Additional tests subject to PMB legislation R500 per beneficiary Subject to day-to-day limit, and PMB legislation	1 pathology test per beneficiary Additional tests subject to PMB legislation R500 per beneficiary Subject to day-to-day limit, and PMB legislation		1 pathology test per beneficiary Additional tests subject to PMB legislation R500 per beneficiary Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5G3 COVID-19 vaccine As per legislation. Subject to use of vaccination site as accredited by the Department of Health (DoH). Subject to PMB legislation.					
a) Vaccine only	100% of cost As determined by DoH/ Single Exit Price 1 vaccine per beneficiary				
b) Fee to administer vaccine	100% of cost As determined by DoH				
5H GENDER-BASED VIOLENCE SUPPORT PROGRAMME Provides emotional and psychological support in the event of violence or abuse experienced by persons of any gender. Cover includes telephonic and face-to-face counselling. Legal counselling and assistance are provided but is at the cost of the beneficiary. Call 0860 944 772 for 24-hour assistance. Benefits are subject to the use of the WHISPA DSP. Co-payment applies for voluntary use of a non-DSP. Subject to case management and protocols.					
5H Counselling					
a) Telephonic counselling	100% Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Not subject to day-to-day limit				
b) Face-to-face counselling	100% Negotiated Tariff Up to 4 sessions per incident Thereafter, subject to PMB legislation Not subject to day-to-day limit				

BENEFIT

PRO PINNACLE
SAVVY

PRO SECURE
PLUS SAVVY

PRO SECURE
SAVVY

PRO ACTIVE
PLUS SAVVY

PRO SELECT
SAVVY

6 MATERNITY

Call 0860 776 363 where pre-authorisation is required and for more information on clinical qualifying criteria, and benefits. Subject to PMB legislation.

Tums2Tots: Baby and Toddler programme available to expectant mothers and mothers with babies, and toddlers up to 3 years.

Health-on-Line on 082 911: Telephonic emergency and non-emergency medical advice, during pregnancy and once baby is born.

6A DAY-TO-DAY COVER

Members on the ProSecure Plus, ProSecure and ProActive Plus options are required to register on the Maternity programme to access the relevant benefits.

Benefit Code	Benefit Description	PRO PINNACLE SAVVY	PRO SECURE PLUS SAVVY	PRO SECURE SAVVY	PRO ACTIVE PLUS SAVVY	PRO SELECT SAVVY
6A1	Ultra-sound scans (<i>ante-natal</i>)	100% Profmed Tariff 2 scans per pregnancy Subject to day-to-day limit	100% Profmed Tariff 2 scans per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	100% Profmed Tariff 2 2D scans per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	100% Profmed Tariff 2 2D scans per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	Subject to PMB legislation
6A2	Ante-/post-natal consultations by medical practitioner	300% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit	GPs: R602 Specialists: R882 13 visits per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	GPs and specialists at GP rate: R602 6 visits per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	GPs and specialists at GP rate: R602 6 visits per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	Subject to PMB legislation
6A3	Ante-/post-natal consultations by registered midwife	300% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit	Consultations: R882 13 visits per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	Consultations: R602 6 visits per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	Consultations: R602 6 visits per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	Subject to PMB legislation
6A4	General Practitioner or Paediatrician consultations	300% Profmed Tariff Subject to day-to-day limit	GPs: R602 Specialists: R882 Specialist tariff amount may differ depending on the speciality Subject to day-to-day limit	GPs and specialists at GP rate: R602 2 visits only Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	GPs and specialists at GP rate: R602 2 visits only Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	Subject to PMB legislation

BENEFIT

PRO PINNACLE SAVVY

PRO SECURE PLUS SAVVY

PRO SECURE SAVVY

PRO ACTIVE PLUS SAVVY

PRO SELECT SAVVY

6A5 Pathology <i>(Tariff codes 4188, 3764, 3765 and 3709)</i>	80% Negotiated Tariff Subject to day-to-day limit	80% Negotiated Tariff Subject to day-to-day limit	100% Negotiated Tariff Not subject to day-to-day limit, and PMB legislation (Subject to registration on the Maternity programme, pre-authorisation and protocols)	Subject to PMB legislation
6A6 Lactation consultation At a registered service provider Available up to 6 months post-delivery <i>(Subject to registration on the Maternity programme, pre-authorisation and protocols)</i>	100% Profmed Tariff 1 visit per pregnancy Subject to day-to-day limit	100% Profmed Tariff 1 visit per pregnancy Not subject to day-to-day limit	Subject to PMB legislation	
6A7 Nutrition consultation At a registered service provider Available up to 6 months post-delivery <i>(Subject to registration on the Maternity programme, pre-authorisation and protocols)</i>	100% Profmed Tariff 1 visit per pregnancy Subject to day-to-day limit	100% Profmed Tariff 1 visit per pregnancy Not subject to day-to-day limit	Subject to PMB legislation	
6A8 Nuchal Translucency Non-Invasive Pre-Natal Test (NIPT) <i>(Subject to registration on the Maternity programme, pre-authorisation and protocols)</i>	100% Profmed Tariff 1 per pregnancy Subject to day-to-day limit and PMB legislation	100% Profmed Tariff 1 per pregnancy Not subject to day-to-day limit Subject to PMB legislation	Subject to PMB legislation	
6A9 Out-patient visits to hospital/clinic e.g. tococardiography	80% Profmed Tariff Subject to day-to-day limit	80% Profmed Tariff Subject to day-to-day limit	Subject to PMB legislation	
6A10 Ante-natal exercises by registered healthcare practitioner	80% Profmed Tariff R1 163 per family Subject to day-to-day limit	No benefit	No benefit	
6A11 Prescribed medication during pregnancy	80% Single Exit Price plus dispensing fee Subject to Section 5B1	80% Single Exit Price plus dispensing fee Subject to Section 5B1	80% Single Exit Price plus dispensing fee Subject to Section 5B1	Subject to PMB legislation
6A12 Post-natal home-based visit A post-birth 6-week visit by a registered nurse to assess baby's progress, provide support to parents and administer the 6-week immunisation. The 6-week nurse visit in outlying areas is subject to the availability of nurses. Available to newborns- born onto and registered on the Scheme. An appointment will be scheduled once the baby is born. Call 0860 679 200 to schedule an appointment. Subject to use of the Post-Natal Home-Based Care DSPN and registration on the Tums2Tots Baby and Toddler programme.				
a) Visit	100% Negotiated Tariff Not subject to day-to-day benefit			
b) Immunisations Immunisations done at 6 weeks, per the Department of Health's Childhood Immunisation Schedule	100% Single Exit Price plus dispensing fee at DSPN rate Subject to Section 2B1			

BENEFIT

PRO PINNACLE SAVVY

PRO SECURE PLUS SAVVY

PRO SECURE SAVVY

PRO ACTIVE PLUS SAVVY

PRO SELECT SAVVY

6B HOSPITALISATION

Subject to use of the Savvy DSPN. Call 0860 776 363 where pre-authorisation is required and for more information on clinical qualifying criteria, and benefits. Subject to PMB Legislation.

6B1 In-patient hospitalisation (ante-natal) (Subject to pre-authorisation)	100% Negotiated Tariff in private ward	100% Negotiated Tariff in general ward		100% Negotiated Tariff in general ward	
6B2 Delivery fee by GP or specialist	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff
6B3 Delivery fee by registered midwife	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff
6B4 Labour ward	100% Negotiated Tariff				
6B5 Ward accommodation (post-delivery): Normal delivery – 3 days Caesarean section – 4 days	100% Negotiated Tariff in private ward	100% Negotiated Tariff in private ward	100% Negotiated Tariff in general ward	100% Negotiated Tariff in general ward	
6B6 Theatre and recovery room	100% Negotiated Tariff				
6B7 Other medical practitioner services, e.g. pathology and radiology while in hospital	100% Profmed Tariff				
6B8 Consultations while in hospital	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff
6B9 Home nursing (post-natal) 48-hour benefit in the event of a home delivery or if discharged from a birthing unit within 24 hours after delivery (Subject to pre-authorisation)	Subject to Section 1E5(a) of this Schedule				
6B10 Neonatal ICU Neonate must be registered as a dependant on Profmed (Subject to pre-authorisation)	100% Negotiated Tariff				

7. INTERNATIONAL TRAVEL MEDICAL ASSISTANCE

This benefit covers members in South Africa for medical emergencies while travelling outside the borders of South Africa. Cover is available up to 150 days from date of departure, per journey. Members who reside in the SADC region do not have access to the emergency evacuation cover to South Africa, however, if they are on an international journey, they do have access to the International Travel Medical Assistance Benefit. Consult the International Travel Medical Assistance Benefit Document available on the website for the benefits, restrictions, exclusions and claims process. For medical assistance while travelling, it is necessary to call the DSPN, Europ Assistance, on +27 11 991 8564 prior to receiving treatment to avoid a co-payment. The Information Guide contains more information on the claims process and details of this benefit, or call 0860 679 200. Subject to case management and protocols.

a) In- and out-of-hospital emergency medical expenses (Benefits subject to protocols and pre-authorisation. Call +27 11 991 8564)	R8 million per beneficiary per journey	R5 million per beneficiary per journey	R2.5 million per beneficiary per journey		
b) Out-of-hospital Claims exceeding R2 000 must be pre-authorised Subject to Section 7(a) (Benefits subject to protocols and pre-authorisation. Call +27 11 991 8564)	R10 000 out-of-hospital limit, per beneficiary, per journey R2 000 excess per beneficiary per journey on out-of-hospital expenses Out-of-hospital benefits only available if the claim relates to day-to-day benefits available on this option Spectacles or contact lenses limited to R3 300, subject to the R2 000 excess	R10 000 out-of-hospital limit, per beneficiary, per journey R2 000 excess per beneficiary per journey on out-of-hospital expenses Out-of-hospital benefits only available if the claim relates to day-to-day benefits available on this option. Spectacles or contact lenses limited to R3 300, subject to the R2 000 excess	No benefit for out-of-hospital expenses		

These benefits are subject to ratification by the Council for Medical Schemes. This published Schedule is subject to the rules approved by the Board of Trustees and in the event of a dispute the approved rules of the Scheme will prevail. All benefits are subject to the PMB legislation. The rules contained in the Schedule of Benefits will prevail.

WHY PREMIUM?

By choosing a Premium option, you can enjoy comprehensive benefits. You have the flexibility of using any hospital of your choice for hospitalisation and treatment, (excluding ProSelect) where you are required to make use of a designated network of hospitals to avoid a co-payment.

WHY PREMIUM?

HOSPITAL &
HOSPITAL-RELATED
BENEFITS & MAJOR
MEDICAL EXPENSES

PREVENTITIVE
CARE

CONTRACEPTIVES

CHRONIC MEDICATION
CONDITIONS
& CHRONIC
MEDICATION BENEFIT

DAY-TO-DAY
COVER

MATERNITY

INTERNATIONAL
TRAVEL MEDICAL
ASSISTANCE



PREMIUM

Members registered on the Premium options (excluding ProSelect) may use any hospital of their choice, except where stipulated for specific services/treatment. Refer to the Designated Service Provider Networks (DSPN) on page 7.

Members registered on the ProSelect option are required to make use of the ProSelect network for Hospitalisation, including day procedures. When consulting a medical practitioner, please ensure your treating practitioner consults at, or hospitalises you at a network hospital to avoid a co-payment.

- If a member voluntarily makes use of a **non-network hospital on the ProSelect option, the co-payment will be R12 500**. Subject to PMB legislation.
- If a member voluntarily makes **use of a non-network hospital for a specified day procedure on the ProSelect option, the co-payment will be R5 000**.
- Specified day procedures on the **ProSecure Plus, ProSecure, ProActive Plus options ONLY, are subject to the use of the Day Procedure network. Use of a non-network hospital will result in a co-payment of R5 000**.

BENEFIT

PRO PINNACLE

PRO SECURE PLUS

PRO SECURE

PRO ACTIVE PLUS

PRO SELECT (NETWORK OPTION)

1. HOSPITAL AND HOSPITAL-RELATED BENEFITS AND MAJOR MEDICAL EXPENSES

1A HOSPITALISATION

Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits. ProSelect is subject to the use of designated network hospitals as listed at www.profmed.co.za.

1A1 Hospital ward accommodation <i>(Subject to pre-authorisation)</i>	100% Negotiated Tariff in private ward	100% Negotiated Tariff in general ward	100% Negotiated Tariff in general ward	
1A2 Theatre and recovery room	100% Negotiated Tariff			
1A3 Intensive care and high care <i>(Subject to confirmation every 72 hours)</i>	100% Negotiated Tariff			
1A4 Emergency room visits and facility fees at hospitals that result in hospitalisation	100% Negotiated Tariff			

1B MEDICINES IN HOSPITAL

1B1 Medicines and materials used in hospital and theatre	100% Negotiated Tariff			
1B2 Medicines taken out of hospital on discharge <i>(Benefit limited to a 7-day supply) (See Section 5B1) (Subject to use of the Pharmacy DSPN)</i>	80% Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds	80% Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds	80% Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds	Subject to PMB legislation

1C GENERAL PRACTITIONERS (GPs) AND SPECIALISTS IN HOSPITAL

1C1 Surgery and in-hospital procedures	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff
1C2 Consultations by a GP or specialist while hospitalised	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff

1D RADIOLOGY AND PATHOLOGY IN HOSPITAL

Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits. Hospitalisation not covered if admission is for the sole purpose of radiology or pathology tests.

1D1 Radiology and pathology while hospitalised	100% Negotiated Tariff			
a) Radiology and pathology while hospitalised <i>(Excluding MRI, radio-isotope, CT and PET scans and certain other investigative procedures)</i>	100% Negotiated Tariff			

PREMIUM BENEFIT

	PRO PINNACLE	PRO SECURE PLUS	PRO SECURE	PRO ACTIVE PLUS	PRO SELECT (NETWORK OPTION)
<p>b) COVID-19 pathology pre-admission (Tariff code 3979 – molecular (PCR) test) (Subject to qualifying criteria and best practise in terms of NDoH and NICD guidelines) (Refer to Section 5G2 for out-of-hospital testing)</p>	<p>R500 per beneficiary Subject to PMB legislation</p>				
<p>1D2 MRI, radio-isotope and CT scans and certain other investigative procedures while hospitalised Specialist referral required except for CT scans (Subject to pre-authorisation)</p>	<p>100% Negotiated Tariff in-hospital (80% Negotiated Tariff out-of-hospital. See section 5A6 for out-of-hospital benefit) 2 per family in- or out-of-hospital</p>	<p>100% Negotiated Tariff in-hospital (80% Negotiated Tariff out-of-hospital. See section 5A6 for out-of-hospital benefit) 2 per family in- or out-of-hospital</p>	<p>100% Negotiated Tariff in-hospital 2 per family in-hospital only</p>		
<p>1E OTHER MAJOR MEDICAL SERVICES Call 0860 776 363 for authorisation and registration, information on clinical qualifying criteria, and benefits.</p>					
<p>1E1 Transplants Subject to registration on the Disease Management Programme, and PMB legislation. Benefit 1E1(b) below is not available to members who elect to be a donor to a recipient who is not a Profmed member.</p>					
<p>a) Hospitalisation (Subject to pre-authorisation)</p>	100% Negotiated Tariff	100% Negotiated Tariff	100% Negotiated Tariff	100% Negotiated Tariff	100% Negotiated Tariff (Subject to use of ProSelect DSPN)
<p>b) Donor costs PMBs only (Subject to pre-authorisation and protocols)</p>	100% Negotiated Tariff	100% Negotiated Tariff	100% Negotiated Tariff	100% Negotiated Tariff	100% Negotiated Tariff (Subject to use of ProSelect DSPN)
<p>1E2 Peritoneal dialysis and haemodialysis Chronic dialysis subject to use of the Chronic Dialysis DSPN Co-payment applies for the use of a non-DSP (Subject to pre-authorisation and registration on the Disease Management Programme and PMB legislation)</p>	100% Negotiated Tariff	100% Negotiated Tariff	100% Negotiated Tariff	100% Negotiated Tariff	100% Negotiated Tariff (Subject to use of ProSelect DSPN for hospitalisation)
<p>1E3 Oncology Subject to the use of the relevant DSPN, where applicable. Co-payment applies for voluntary use of a non-DSP. Benefit includes radiation therapy and/or chemotherapy, radiology, pathology and adjunct treatment, as well as oncology-related consultations, medicine, procedures and investigations for post-treatment monitoring, subject to Profmed protocols, costings and PMB legislation.</p>					
<p>Includes all costs related to treatment, consultations, investigations and drugs, excluding hospitalisation (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation)</p>	R739 655 per beneficiary Thereafter, subject to PMB legislation	R493 103 per beneficiary Thereafter, subject to PMB legislation	R400 000 per beneficiary Thereafter, subject to PMB legislation		
<p>a) Chemotherapy (Subject to pre-authorisation and registration on the Oncology Programme and PMB legislation)</p>					
<p>i.a) Consultations</p>	300% Profmed Tariff	GPs: R602 Specialists: R882	GPs: R602 Specialists: R882		
<p>i.b) Procedures</p>	300% Profmed Tariff	100% Specific Tariff	100% Specific Tariff		

PREMIUM BENEFIT

	PRO PINNACLE	PRO SECURE PLUS	PRO SECURE	PRO ACTIVE PLUS	PRO SELECT (NETWORK OPTION)
ii) Chemotherapy drugs Excluding adjunctive treatment <i>(Subject to protocols and use of Oncology pharmacy DSPN. 20% co-payment applies for voluntary use of non-DSPN)</i>	100% Single Exit Price plus dispensing fee				
iii) Biologicals and other specified drugs <i>(Subject to pre-authorization, protocols and use of the Oncology pharmacy DSPN)</i>	80% Single Exit Price plus dispensing fee Subject to benefit limit	Subject to PMB legislation		Subject to PMB legislation	
b) Radiation therapy <i>(Subject to pre-authorization and registration on the Oncology Programme and PMB legislation)</i>					
i) Consultations	300% Profmed Tariff	Specialists: R882		Specialists: R882	
ii) Radiation therapy and facility fees <i>(Subject to pre-authorization and protocols)</i>	100% Negotiated Tariff				
c) PET scans (Positron-Emission Tomography) <i>(Subject to pre-authorization and protocols, and use of the Oncology PET Scan DSPN DSPN applicable within the greater Johannesburg region only)</i>	100% Negotiated Tariff				
1E4 Rehabilitation					
<p>This benefit covers members who have become disabled as a result of acute injuries caused by trauma, infection, surgery, spinal cord injury, brain injury, bleeding or infarction resulting in a stroke. This benefit is only available as an in-patient in a registered rehabilitation facility. Rehabilitation must occur within the benefit year in which the specified injury takes place, or commence directly after discharge from an acute hospitalisation facility, or not more than one calendar month after the specified injury is sustained. Benefits are limited to two months' rehabilitation and the availability of benefits, and are subject to case management and Profmed protocols. Admissions covered at authorised service providers only. Subject to use of the Rehabilitation DSPN and PMB legislation. Co-payment applies for voluntary use of a non-DSP.</p>					
<i>(Subject to pre-authorization and use of the Rehabilitation DSPN)</i>	100% Negotiated Tariff R87 157 per family	100% Negotiated Tariff R57 939 per family		100% Negotiated Tariff R28 970 per family	
1E5 Out-patient care in lieu of hospitalisation	100% Negotiated Tariff R18 837 per beneficiary	100% Negotiated Tariff R15 900 per beneficiary		100% Negotiated Tariff R13 559 per beneficiary	
a) Treatment in a registered sub-acute facility or at home by an appropriately registered practitioner <i>(Subject to pre-authorization and protocols)</i>					
b) Wound care Treatment at home, including surgicals, by an appropriately registered practitioner <i>(Subject to pre-authorization and protocols)</i>	100% Negotiated Tariff R7 272 per beneficiary	100% Negotiated Tariff R4 315 per beneficiary		100% Negotiated Tariff R3 573 per beneficiary	
1E6 Psychiatric treatment					
<p>Includes all in- and out-of-hospital psychiatric and clinical psychology consultations, treatment and in-hospital medication, and alcohol and drug rehabilitation. Hospitalisation only available at Psychiatric Hospitalisation DSPN. PMBs are deducted from this benefit, but are not subject to these limits. Co-payment applies for voluntary use of a non-DSP.</p>					
a) In-hospital <i>(Subject to pre-authorization and use of the Psychiatric Hospitalisation DSPN)</i>	100% Negotiated Tariff in general ward R43 638 per family, subject to PMB legislation	100% Negotiated Tariff in general ward R29 092 per family, subject to PMB legislation		100% Negotiated Tariff in general ward R21 818 per family, subject to PMB legislation	

PREMIUM

BENEFIT

	PRO PINNACLE	PRO SECURE PLUS	PRO SECURE	PRO ACTIVE PLUS	PRO SELECT (NETWORK OPTION)
b) Out-of-hospital consultations, subject to PMB legislation	R7 395 per family Subject to 1E6(a) in-hospital limit	R7 395 per family Subject to 1E6(a) in-hospital limit		R7 395 per family Subject to 1E6(a) in-hospital limit PMBs only	
1E7 Endoscopic examinations In suitably equipped procedure room, subject to protocols and PMB legislation.					
a) Gastroscopy (Subject to pre-authorisation)	100% Negotiated Tariff				
b) Colonoscopy Includes Sigmoidoscopy (Subject to pre-authorisation)	100% Negotiated Tariff				
c) Colonoscopy and Gastroscopy Combined procedure (Subject to pre-authorisation)	100% Negotiated Tariff				
1F OTHER MEDICAL SERVICES Call 0860 776 363 for authorisation, information on clinical qualifying criteria and benefits.					
1F1 Physiotherapy					
a) In-hospital (Subject to pre-authorisation)	100% Profmed Tariff				
b) Out-of-hospital Post-operative, available up to 6 weeks after related hospital procedure (Subject to pre-authorisation)	100% Profmed Tariff M R3 329 Maximum R5 547 per family	100% Profmed Tariff M R2 465 Maximum R3 944 per family		Subject to PMB legislation	
1F2 Blood transfusions (Subject to pre-authorisation)	100% Negotiated Tariff				
1F3 Emergency medical transport (EMT) Emergencies within the borders of South Africa. Contact 082 911 within RSA. 20% co-payment for voluntary use of a non-DSP, subject to PMB legislation.					
Non-emergency calls will not be funded. (Subject to Profmed protocol and use of the EMT DSPN)	100% of cost				
1F4 Internal surgical devices A fabricated or artificial substitute that is surgically implanted permanently into the body and does not protrude from the body and replaces or assists a diseased or missing part of the body to restore functionality. Subject to PMB legislation. Specified day procedures on the relevant options are subject to the use of the DSPN. Use of a non-DSP will result in a co-payment.					
a) Major (Subject to pre-authorisation, protocols and management)	100% Negotiated Tariff R56 707 per family				
1F5 Cataract surgery R38 000 per beneficiary, per event (includes the total cost of (a),(b) and (c), below). Subject to pre-authorisation and protocols. Call 0860 776 363 for authorisation, information on clinical qualifying criteria and benefits. Specified day procedures are subject to the use of the DSPN. Use of a non-DSP will result in a co-payment.					
a) Hospitalisation (Subject to pre-authorisation, protocols and management)	100% Negotiated Tariff				
b) Surgeon and anaesthetist fees	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff
c) Intra-ocular lens	R5 362 per beneficiary per eye				

PREMIUM

BENEFIT

PRO PINNACLE

PRO SECURE PLUS

PRO SECURE

PRO ACTIVE PLUS

PRO SELECT (NETWORK OPTION)

1F6 Functional rehabilitation programme

This is a six-week inter-disciplinary programme for treatment of long-term back and neck conditions. This benefit is conservative treatment and only available out-of-hospital. Documentation Based Care (DBC) Back and Neck Programme provides treatment- and cost-effective solutions to patients, improving quality of life. Subject to qualifying criteria, clinical protocols and pre-authorisation. Call 0860 776 363 for authorisation.

a) Initial assessment <i>(Specified codes as per approved treatment plan)</i>	100% Negotiated Tariff Not subject to day-to-day benefit
b) Treatment and interim assessment <i>(Specified codes as per approved treatment plan)</i>	100% Negotiated Tariff Not subject to day-to-day benefit
c) Treatment and outcome assessment <i>(Specified codes as per approved treatment plan)</i>	100% Negotiated Tariff Not subject to day-to-day benefit
d) Maintenance <i>(Specified codes as per approved treatment plan)</i>	100% Negotiated Tariff Not subject to day-to-day benefit

1G DENTAL PROCEDURES IN HOSPITAL

Subject to pre-authorisation and protocols. Call 0860 776 363 for authorisation, information on clinical qualifying criteria and benefits. Please see Section 5E for out-of-hospital benefits. Specified day procedures are subject to the use of the DSPN. **Use of a non-DSP will result in a co-payment of R5 000.**

1G1 Hospitalisation: - Permanent tooth impaction removals - Extensive conservative dental treatment only for children younger than 8 years (24-month benefit) <i>(Subject to pre-authorisation, protocols and management)</i>	100% Negotiated Tariff	100% Negotiated Tariff <i>(Subject to use of the Day Procedure network)</i>	100% Negotiated Tariff <i>(Subject to the use of the Day Procedure network)</i>	100% Negotiated Tariff <i>(Subject to use of the ProSelect DSPN)</i>
a) Specialist and anaesthetist fees	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff 100% Specific Tariff
b) Dentist fees	135% Profmed Tariff	135% Profmed Tariff		135% Profmed Tariff
1G2 Hospitalisation: - Other <i>(Subject to pre-authorisation, protocols and management)</i>	100% Negotiated Tariff	100% Negotiated Tariff <i>(Subject to use of the Day Procedure network)</i>	Subject to PMB legislation <i>(Subject to use of the Day Procedure network)</i>	Subject to PMB legislation <i>(Subject to use of the ProSelect DSPN)</i>
a) Specialist (excluding dental specialist) and anaesthetist fees	300% Negotiated Tariff	200% Profmed Tariff	100% Specific Tariff	Subject to PMB legislation
b) Dentist and dental specialist fees (Dental specialists include: Practice: 62, 92, 94, 98)	135% Profmed Tariff Subject to Section 5E	135% Profmed Tariff Subject to Section 5E		135% Profmed Tariff Subject to PMB legislation
1G3 Functional orthognathic surgery Includes all costs related to the admission and procedure, e.g. all medical practitioner fees, hospitalisation, etc. <i>(Subject to pre-authorisation)</i>	R39 447 per family	No benefit		No benefit

2. PREVENTATIVE CARE

Benefits are subject to specific protocols and the use of the Preventative Care DSPN. Co-payment applies for voluntary use of a non-DSP. Please refer to Section 5G3 for benefits in respect of the COVID-19 vaccine.

2A GENERAL HEALTH

2A1 Digital Health Assessments

Available to the principal member and beneficiaries who pay adult contributions.

Assessments to be done via Profmed WellBeing
Tariff code: 99972)

1 assessment per beneficiary

2A2 Consultation

Includes a consultation for any one of the Preventative Care benefits (Tariff codes 0190, 0191, 0192; Audiology tariff codes 1010, 1011)

GPs: R602

Specialists: R882

100% Profmed Tariff for speech therapists or audiologists

1 consultation per beneficiary, thereafter subject to available day-to-day limit

GPs: R602

Specialists: R882

100% Profmed Tariff for speech therapists or audiologists

1 consultation per beneficiary, thereafter subject to available day-to-day limit

GPs and specialists at GP rate: R602

1 consultation per beneficiary

2A3 Fasting blood sugar test

For late onset diabetes. Males and females 40 years and older. Subject to PMB legislation..

Pathology

(Subject to use of the Preventative Care DSPN)
(Tariff code 4057)

100% Negotiated Tariff
1 per beneficiary

2A4 Fasting lipogram blood test

Males and females 40 years and older. Subject to PMB legislation.

Pathology

(Subject to use of the Preventative Care DSPN)
(Tariff code 4025)

100% Negotiated Tariff
1 per beneficiary

2A5 HIV testing

Subject to PMB legislation.

Pathology

(Subject to use of the Preventative Care DSPN)
(Tariff codes 3932, 4614)

100% Negotiated Tariff
1 per beneficiary

2A6 Malaria prophylaxis

Beneficiaries of all ages.

Includes over-the-counter and prescribed medication only

100% Single Exit Price
1 course of treatment per beneficiary
Maximum R460 per beneficiary
MMAP® applies
Not subject to day-to-day benefits

2A7 Tobacco and alcohol counselling, screening and brief intervention

Males and females 18 years and older.

Telephonic or face-to-face counselling

(Practice 86: Tariff code 86202, Practice 14 and 15: Tariff code 0130, 0190, 0191, 0192)

GPs: R602
2 sessions per family
Not subject to day-to-day benefits

2B VACCINES

2B1 Child immunisations

Children 0 to 12 years, per the Department of Health's Childhood Immunisation Schedule.

PREMIUM

BENEFIT

PRO PINNACLE

PRO SECURE
PLUS

PRO SECURE

PRO ACTIVE
PLUS

PRO SELECT
(NETWORK OPTION)

Vaccine only

100% Single Exit Price plus dispensing fee at Pharmacy DSPN rate

2B2 Human papilloma virus (HPV) vaccine

Females 9 to 27 years of age. Includes initial vaccination and two follow-up booster vaccinations, where applicable. Subject to PMB legislation.

Vaccine only

100% Single Exit Price plus dispensing fee at Pharmacy DSPN rate

2B3 Influenza vaccine

Vaccine only

100% Single Exit Price plus dispensing fee at Pharmacy DSPN rate
1 vaccination per beneficiary

2B4 Pneumococcal vaccine

Adults 65 years and older, and individuals of all ages who are respiratory compromised or have related chronic diseases. Available every five years. Subject to PMB legislation.

Vaccine only

100% Single Exit Price plus dispensing fee at Pharmacy DSPN rate

2C WOMEN'S HEALTH

2C1 Bone densitometry

Females 65 years and older. Available every five years. Subject to PMB legislation.

Radiology

(Tariff codes 50120, 64110, 74290,
39173, 3600, 3604, 3612)

100% Profmed Tariff
1 per beneficiary

2C2 Faecal occult blood test

Females 50 years and older. Subject to PMB legislation

Pathology

(Subject to use of the Preventative
Care DSPN)
(Tariff codes 4351, 4352)

100% Negotiated Tariff
1 per beneficiary

2C3 Human papilloma virus (HPV) screening

Females 25 to 65 years. Available every 5 years. Subject to PMB legislation.

Pathology

mRNA test only
(Tariff code HPV5)

100% Negotiated Tariff
1 per beneficiary

2C4 Mammograms

Available annually to Females 40 to 55 years and every two years for females 56 years and older. Females younger than 40 years pre-disposed to breast cancer have access to the benefit, subject to motivation and pre-authorisation. Subject to PMB legislation.

Radiology

(Tariff code 34100 and 34101)

100% Profmed Tariff
1 per beneficiary

2C5 Pap smear or liquid-based cytology

Females 18 years and older. Subject to PMB legislation.

Pathology

(Subject to use of the Preventative
Care DSPN)
(Tariff code 4566 – Pap smear.
Tariff codes 4559 and 4560 –
liquid-based cytology reimbursed per
tariff code 4566. A co-payment could
apply).

100% Negotiated Tariff
1 per beneficiary

2C6 Contraceptives

Funding only applies for contraceptive purposes. Protocols apply.

PREMIUM

BENEFIT

PROPINNACLE

PROSECURE PLUS

PROSECURE

PROACTIVE PLUS

PROSELECT (NETWORK OPTION)

Contraceptives

Including oral contraceptives, patches, injections, implants and intra-uterine devices.

- Oral contraceptives and patches: every 20 days
- Injections: 3 to 6-month cycle
- Intra-uterine devices and implants: 3 to 5-year cycle

100% Single Exit Price plus dispensing fee at Pharmacy DSPN rate
MMAP® applies
Maximum R2 021 per beneficiary
Not subject to day-to-day limit

2D MEN'S HEALTH

2D1 Bone densitometry

Males 65 years and older. Available every five years. Subject to PMB legislation.

Radiology

(Tariff codes 50120, 64110, 74290, 39173, 3600, 3604, 3612)

100% Profmed Tariff
1 per beneficiary

2D2 Faecal occult blood test

Males 50 years and older. Subject to PMB legislation.

Pathology

(Subject to use of the Preventative Care DSPN)
(Tariff codes 4351, 4352)

100% Negotiated Tariff
1 per beneficiary

2D3 Prostate Specific Antigen (PSA)

Males 40 years and older. Subject to PMB legislation.

Pathology

(Subject to use of the Preventative Care DSPN)
(Tariff code 4519)

100% Negotiated Tariff
1 per beneficiary

2E CHILDREN'S HEALTH

2E1 Newborn hearing screening

Newborns up to 6 weeks old. Subject to PMB legislation.

Audiology screening

By a registered speech therapist or audiologist
(Tariff code 1580)

100% Profmed Tariff
1 per beneficiary

3. AMPLFIRE

Beneficiaries who meet the relevant qualifying criteria can unlock additional benefits.

The following steps must be followed to unlock the benefits:

1. Download the Profmed App;
2. Conduct a Digital Health Assessment via Profmed WellBeing;
3. If required, complete a physical health assessment;
4. Complete all individual relevant Preventative Care benefits (see Section 2);
5. Where a beneficiary is registered on a Chronic Treatment Care plan, they are required to fully comply with the plan, to unlock benefits.

PREMIUM

BENEFIT

PROPINNACLE

PROSECURE PLUS

PROSECURE

PROACTIVE PLUS

PROSELECT (NETWORK OPTION)

The benefit is an additional R2 500 cover for out-of-hospital consultations, and is payable once the overall day-to-day benefits in Section 5 have been depleted.

This is available every 24 months to the principal member and beneficiaries who pay adult contributions and is subject to the relevant qualifying criteria.

The amount of R2 500 (includes the total cost of 3A1, 3A2 and 3A3, below).

<p>3A1 a) General Practitioner (GP) and Specialists - Face-to-face consultations</p>	<p>300% Profmed Tariff</p>	<p>GPs: R602 Specialists: R882 <i>Specialist tariff amount may differ depending on the speciality</i></p>	<p>GPs and specialists at GP rate: R602</p>
<p>b) General Practitioner (GP) and Specialists - Virtual and telephonic consultations</p>	<p>Code 0130: R350 <i>Specialist tariff amount may differ depending on the speciality</i></p>		
<p>3A2 Conservative dentistry -Includes annual check-ups</p>	<p>135% Profmed Tariff</p>		
<p>3A3 Supplementary services</p> <ul style="list-style-type: none"> • Audiometrists • Biokineticists • Chiropractors • Dieticians • Occupational therapists • Speech therapists • Physiotherapists • Podiatrists 	<p>100% Profmed Tariff</p>		

PROFMED WELLBEING

Members can access a Digital Wellbeing Assessment.

This benefit provides members with access to an array of features to support their mental health journey. This benefit is available on all options and is funded in addition to the Profmed benefits. Benefits include mental wellbeing assessments, mood trackers, journalling, and personalised learning videos. Members who require further support will be prompted to download an additional support App.

Members who are registered for Attention Deficit Hyperactivity Disorder (ADHD)/ Attention Deficit Disorder (ADD), Depression and Bipolar Mood Disorder will have access to additional support services, which includes medicine reminders and adherence monitoring. This is subject to the benefits available per option.

This benefit does not require pre-authorisation and members must register via the Profmed App to access the benefit.

4. CHRONIC MEDICATION CONDITIONS

The formulary and reference pricing will be most restrictive on the ProSelect, ProSelect Savvy, ProActive Plus and ProActive Plus Savvy options and least restrictive on the ProPinnacle options. MMAP® applies. The conditions covered on each option are listed below. The Condition Medicine List (CML), including the list of chronic diseases (CDL), is available on the Profmed website at www.profmed.co.za. Subject to the use of the Pharmacy DSPN. Co-payment applies for voluntary use of a non-DSP. Claims from wholesale pharmacies will not be accepted. Call 0860 679 200 for information on clinical qualifying criteria, and benefits. Furthermore, where a protocol or a formulary drug preferred by the Scheme has been ineffective or would cause harm to a beneficiary, the Scheme will fund the cost of the appropriate substitution treatment without a penalty to the beneficiary as required by Regulations 15H and 15I of the Act.

<p>PROPINNACLE</p>	<p>58 conditions plus relevant DTPs</p> <p>CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.</p> <p>Other: Allergic Rhinitis (<i>in patients with asthma</i>), Alzheimer's Disease, Ankylosing Spondylitis, Benign Prostatic Hypertrophy, Cushing's Syndrome, Cystic Fibrosis, Deep Vein Thrombosis, Gastro-Oesophageal Reflux Disorder, Gout, Hypoparathyroidism, Hyperthyroidism, Major Depressive Disorder, Malabsorption Syndrome, Meniere's Disease, Motor Neuron Disease, Myasthenia Gravis, Obsessive Compulsive Disorder, Oncology Adjunctive Treatment, Osteoarthritis, Osteoporosis, Paget's Disease, Paraplegia & Quadriplegia, Peripheral Vascular Disease, Pituitary Adenomas/Hyperfunction of Pituitary Gland, Post-Organ Transplant (non-DTP), Psoriatic Arthritis, Pulmonary Interstitial Fibrosis, Stroke/Cerebrovascular Accident, Systemic Connective Tissue Disorders, Tuberculosis, Valvular Heart Disease.</p> <p>Additional: Attention Deficit Hyperactivity Disorder (ADHD) (<i>Children up to the age of 18</i>).</p> <p>DTPs: Relevant chronic conditions listed in the 271 PMBs, e.g. hormone replacement therapy (<i>Menopause</i>), immunosuppressive therapy (<i>Post-Organ Transplants</i>).</p>
<p>PROSECURE PLUS & PROSECURE</p>	<p>39 conditions plus relevant DTPs</p> <p>CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.</p> <p>Other: Allergic Rhinitis (<i>in patients with asthma</i>), Alzheimer's Disease, Ankylosing Spondylitis, Benign Prostatic Hypertrophy, Major Depressive Disorder, Obsessive Compulsive Disorder, Oncology Adjunctive Treatment, Osteoporosis, Paraplegia & Quadriplegia, Pituitary Adenomas/Hyperfunction of Pituitary Gland, Psoriatic Arthritis, Valvular Heart Disease.</p> <p>Additional: Attention Deficit Hyperactivity Disorder (ADHD) (<i>Children up to the age of 18</i>).</p> <p>DTPs: Relevant chronic conditions listed in the 271 PMBs, e.g. hormone replacement therapy (<i>Menopause</i>), immunosuppressive therapy (<i>Post-Organ Transplants</i>).</p>
<p>PROACTIVE PLUS & PROSELECT</p>	<p>26 conditions plus relevant DTPs</p> <p>CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Types 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis.</p> <p>DTPs: Relevant chronic conditions listed in the 271 PMBs, e.g. hormone replacement therapy (<i>Menopause</i>), immunosuppressive therapy (<i>Post-Organ Transplants</i>).</p>

a) CDLs, other chronic conditions and relevant DTPs as listed above. 24-day dispensing cycle applies (*Attending doctor or pharmacist to call 0800 132 345 to register condition and authorise medication*)

100% Single Exit Price plus dispensing fee
58 conditions covered and relevant DTPs
Unlimited, subject to Profmed formulary and reference price

100% Single Exit Price plus dispensing fee
39 conditions covered and relevant DTPs
Subject to Profmed formulary and reference price
M R18 367
M+1 R30 077
Maximum R41 663 per family

100% Single Exit Price plus dispensing fee
Restricted to 26 CDL conditions and relevant DTPs, subject to PMB legislation
Subject to Profmed formulary and strict reference price

b) Biologicals and other specified drugs
(*Subject to pre-authorisation, protocols and use of the Pharmacy DSPN*)

80% Single Exit Price plus dispensing fee

Subject to PMB legislation

Subject to PMB legislation

PREMIUM

BENEFIT

PRO PINNACLE

PRO SECURE PLUS

PRO SECURE

PRO ACTIVE PLUS

PRO SELECT (NETWORK OPTION)

5. DAY-TO-DAY COVER

All sub-limits for out-of-hospital benefits set out in this Section, and benefits subject to the day-to-day limit in other Sections of this Schedule, are subject to the availability of the annual overall day-to-day limit, subject to PMB legislation.

Annual overall day-to-day limit Available only through relevant available day-to-day sub-limits, where applicable	M R20 203	M R12 588	M R4 548	See Section 5E Subject to PMB legislation
	M+1 R29 830	M+1 R19 146	M+1 R6 452	
	Maximum R38 820 per family	Maximum R24 647 per family	Maximum R8 039 per family	

5A GENERAL PRACTITIONERS (GPs) AND SPECIALISTS

5A1 a) Face-to-face consultations	300% Profmed Tariff Subject to day-to-day limit	GPs: R602 Specialists: R882 Specialist Tariff amount may differ depending on the speciality Subject to day-to-day limit	GPs and specialists at GP rate: R602 Subject to day-to- day limit, and PMB legislation	Subject to PMB legislation
b) Virtual and telephonic consultations	3 consultations per beneficiary Code 0130: R350 Specialist tariff amount may differ depending on the speciality Subject to day-to-day limit, and PMB legislation	3 consultations per beneficiary Code 0130: R350 Specialist tariff amount may differ depending on the speciality Subject to day-to-day limit, and PMB legislation	3 consultations per beneficiary Code 0130: R350 Specialist tariff amount may differ depending on the speciality Subject to day-to- day limit, and PMB legislation	Subject to PMB legislation
5A2 Non-hospital procedures in doctor's rooms	300% Profmed Tariff Subject to day-to-day limit	100% Specific Tariff Subject to day-to-day limit	100% Specific Tariff at GP rate Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5A3 Psychiatric consultations (out-of-hospital) (See Section 1E6)	300% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit	GPs: R602 Specialists: R882 Paid from Psychiatric benefit Not subject to day-to-day limit	PMBs paid from Psychiatric 1E6 benefit Subject to PMB legislation	
5A4 Clinical psychology (out-of-hospital) (See Section 1E6)	100% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit	100% Profmed Tariff Paid from Psychiatric benefit Not subject to day-to-day limit	PMBs paid from Psychiatric 1E6 benefit Subject to PMB legislation	
5A5 Radiology and pathology (Excluding MRI and CT scans)	80% Negotiated Tariff Subject to day-to-day limit	80% Negotiated Tariff Subject to day-to-day limit	80% Negotiated Tariff Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5A6 MRI, radio-isotope and CT scans Specialist referral required, except for CT scans (Subject to pre-authorization. Call 0860 776 363 for authorisation and protocols)	80% Negotiated Tariff out-of-hospital (100% Negotiated Tariff in-hospital. See Section 1D2 for in-hospital benefit) 2 per family in- or out-of-hospital Not subject to day-to-day limit	80% Negotiated Tariff out-of-hospital (100% Negotiated Tariff in-hospital. See Section 1D2 for in-hospital benefit) 2 per family in- or out-of-hospital Subject to day-to-day limit out-of-hospital	80% Negotiated Tariff R6 180 per family Not subject to day-to-day limit	Subject to PMB legislation
5A7 Emergency room visits and facility fees at hospitals that do not result in hospitalisation	100% Negotiated Tariff Subject to day-to-day limit	100% Negotiated Tariff Subject to day-to-day limit	100% Negotiated Tariff Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation

PREMIUM

BENEFIT

PRO PINNACLE

PRO SECURE PLUS

PRO SECURE

PRO ACTIVE PLUS

PRO SELECT (NETWORK OPTION)

5A8 Cataract surgery

Subject to pre-authorisation and protocols. Call 0860 776 363 for authorisation, information on clinical qualifying criteria and benefits.

a) Surgeon and anaesthetist fees

300% Profmed Tariff

200% Profmed Tariff

100% Specific Tariff

175% Profmed Tariff

100% Specific Tariff

b) Intra-ocular lens

R5 362 per beneficiary per eye

5B ACUTE MEDICATION

5B1 Prescribed acute medication

Subject to use of the Pharmacy DSPN. Co-payment applies for voluntary use of a non-DSP.

Wholesale pharmacy claims will not be accepted.

(Certain medication on repeat script will be funded from this benefit. Call 0860 679 200 for more information)

80% Single Exit Price plus dispensing fee
M R11 318
M+1 R15 126
M+2 R16 184
M+3 R17 877
Maximum R21 156 per family
MMAP® applies
Subject to day-to-day limit

80% Single Exit Price plus dispensing fee
M R4 125
M+1 R6 135
M+2 R6 769
M+3 R7 086
Maximum R7 616 per family
MMAP® applies
Subject to day-to-day limit

80% Single Exit Price plus dispensing fee
M R7 39
M+1 R1 058
Maximum R1 375 per family
MMAP® applies
Subject to day-to-day limit, and PMB legislation

Subject to PMB legislation

5B2 Over-the-counter medication

(See Section 5B1)

80% of cost
R2 221 per family
Subject to acute medication and day-to-day limits

80% of cost
R1 797 per family
Subject to acute medication and day-to-day limits

80% of cost
Subject to acute medication and day-to-day limits

No benefit

5C SUPPLEMENTARY BENEFITS

5C1 a) External prostheses and appliances

Includes insulin pumps, home oxygen therapy and stoma bags.

- Insulin pumps: 1 every 48 months
- Home oxygen: subject to use of the DSPN. Co-payment applies for voluntary use of a non-DSP
- Hearing aids: 1 pair every 24 months

(Subject to protocols and pre-authorisation. Call 0860 776 363 for authorisation and protocols)

100% Negotiated Tariff
R23 694 per family
Additional for Hearing aids only: R7 510
Not subject to day-to-day limit

100% Negotiated Tariff
R15 761 per family
Additional for Hearing aids only: R4 548
Not subject to day-to-day limit

Subject to PMB legislation

b) Other:

Includes orthopaedic braces wheel chairs, walking frames and crutches

100% Negotiated Tariff
R5 923 per family
Subject to day-to-day limit

100% Negotiated Tariff
R4 231 per family
Subject to day-to-day limit

Subject to PMB legislation

5C2 Supplementary services

- Audiometrists
- Biokineticists
- Chiropractors
- Dieticians
- Occupational therapists
- Speech therapists
- Physiotherapists
- Podiatrists

100% Profmed Tariff
M R3 278
Maximum R5 711 per family
Subject to day-to-day limit, and PMB legislation

100% Profmed Tariff
M R3 067
Maximum R5 077 per family
Subject to day-to-day limit, and PMB legislation

Subject to PMB legislation

5C3 Alternative health practitioners

Including homeopaths and homeopathic medication. Practitioners must be registered with The Allied

Health Professions Council

80% of cost
R2 855 per family
R846 per family sub-limit for homeopathic medication
Subject to day-to-day limit

No benefit

No benefit

PREMIUM

BENEFIT

PRO PINNACLE

PRO SECURE PLUS

PRO SECURE

PRO ACTIVE PLUS

PRO SELECT (NETWORK OPTION)

5D OPTOMETRY SERVICES

Benefits are subject to protocols and are applied over a 24-month period. Lenses are limited to contact lenses OR spectacle lenses. Please consult your service provider regarding the use of non-generic and specialised lenses and coatings to avoid incurring a co-payment.

5D1 Eye examinations	100% Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation	100% Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation	100% Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation	Subject to PMB legislation
5D2 Spectacles				
a) Lenses (generic) Single vision, bi-focal and varifocal	100% Optical Tariff 24-month benefit Subject to day-to-day limit	100% Optical Tariff 24-month benefit Subject to day-to-day limit	No benefit	
b) Extras	100% Optical Tariff for generic hard-coating and generic plastic anti-reflex coating 24-month benefit Subject to day-to-day limit	100% Optical Tariff for generic hard-coating 24-month benefit Subject to day-to-day limit	No benefit	
c) Frames	R1 480 per beneficiary 24-month benefit Subject to day-to-day limit	R1 058 per beneficiary 24-month benefit Subject to day-to-day limit	No benefit	
5D3 Contact lenses (clear)	R3 491 per beneficiary 24-month benefit Subject to day-to-day limit	R2 116 per beneficiary 24-month benefit Subject to day-to-day limit	No benefit	
5D4 Refractive eye surgery Includes all costs related to the admission and procedure, all medical practitioner fees, hospitalisation, etc. (Subject to protocols and pre-authorization. Call 0860 776 363 for authorisation and protocols)	R4 019 per beneficiary Not subject to day-to-day limit	No benefit	No benefit	

5E DENTISTRY

Benefits are subject to protocols and management. (See Section 1G for dentist and specialist fees in-hospital)

- Conservative dentistry (includes annual check-ups, restorations, extractions, root canal treatment, dentures) - Advanced dentistry (includes crowns, bridges, implants, orthodontics) Orthodontics available only up to age 18. (Orthodontics and implants subject to pre-authorization. Call 0860 679 200 for authorisation and protocols)	135% Profmed Tariff R7 722 per beneficiary Maximum R15 444 per family Not subject to day-to-day limit	135% Profmed Tariff R6 558 per beneficiary Maximum R13 222 per family Not subject to day-to-day limit	135% Profmed Tariff Subject to day-to-day limit	135% Profmed Tariff R739 per beneficiary Maximum R1 903 per family
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5F TRAUMA, AND HIV ASSISTANCE PROGRAMME

Benefit covers trauma and HIV exposure as a result of crime, e.g. assault or rape, and HIV exposure resulting from crime and occupational injuries, e.g. needle-stick injury. Where relevant, victims will be accompanied by an appropriate, qualified professional to identity parades and court appearances for emotional support. Call 0861 776 363 for 24-hour assistance. Benefits are subject to the use of the Trauma and HIV DSP. Co-payment applies for voluntary use of a non-DSP. Subject to case management and protocols.

5F1 Counselling

<p>a) Telephonic counselling</p>	<p>100% Negotiated Tariff Appropriate number of sessions as determined by the designated case manager Not subject to day-to-day limit</p>
<p>b) Face-to-face counselling</p>	<p>100% Negotiated Tariff Up to 4 sessions per incident Thereafter, subject to PMB legislation Not subject to day-to-day limit</p>
<p>5F2 HIV post-exposure management 2 doctor's consultations, 30 days' PEP medication, pathology and 3 - 6 months' HIV exposure management</p>	<p>100% Negotiated Tariff 1 course of treatment per beneficiary per incident at DSP Subject to PMB legislation Not subject to day-to-day limit</p>

5G COVID-19 SCREENING AND TESTING

To qualify for this benefit, members must have consulted a GP. Funding for consultations is for either one face-to-face or one virtual/ telephonic consultation with the COVID-19 DSPN. Pathology is covered if the necessary screening criteria are met and provided the testing is not considered routine. Refer to Section 1D1(b) for hospital pre-admission testing. All benefits are subject to PMB legislation.

<p>5G1 a) Face-to-face consultations Subject to the use of the COVID-19 DSPN, as designated by Profmed from time-to-time. <i>(Voluntary use of a non-DSP will result in a 25% co-payment.)</i></p>	<p>1 Consultation per beneficiary Additional consultations subject to PMB legislation GPs only: R602 Subject to day-to-day limit, and PMB legislation</p>	<p>1 Consultation per beneficiary Additional consultations subject to PMB legislation GPs only: R602 Subject to day-to-day limit, and PMB legislation</p>	<p>1 Consultation per beneficiary Additional consultations subject to PMB legislation GPs only: R602 Subject to day-to-day limit, and PMB legislation</p>	<p>Subject to PMB legislation</p>
<p>b) Virtual and telephonic consultations Subject to the use of the COVID-19 DSPN, as designated by Profmed from time to time. <i>(Voluntary use of a non-DSP will result in a 25% co-payment)</i></p>	<p>1 Consultation per beneficiary Additional consultations subject to PMB legislation GPs only: Code 0130: R350 Subject to day-to-day limit, and PMB legislation</p>	<p>1 Consultation per beneficiary Additional consultations subject to PMB legislation GPs only: Code 0130: R350 Subject to day-to-day limit, and PMB legislation</p>	<p>1 Consultation per beneficiary Additional consultations subject to PMB legislation GPs only: Code 0130: R350 Subject to day-to-day limit, and PMB legislation</p>	<p>Subject to PMB legislation</p>
<p>5G2 Pathology Tariff code 3979 – molecular (PCR) test <i>(Subject to qualifying criteria and best practise in terms of NDoH and NICD guidelines. Refer to Section 1D1(b) for hospital pre-admission testing.)</i></p>	<p>1 pathology test per beneficiary R500 per beneficiary Additional tests subject to PMB legislation Subject to day-to-day limit, and PMB legislation</p>	<p>1 pathology test per beneficiary R500 per beneficiary Additional tests subject to PMB legislation Subject to day-to-day limit, and PMB legislation</p>	<p>1 pathology test per beneficiary Additional tests subject to PMB legislation R500 per beneficiary Subject to day-to-day limit, and PMB legislation</p>	<p>Subject to PMB legislation</p>

5G3 COVID-19 vaccine

As per legislation. Subject to use of vaccination site as accredited by the Department of Health (DoH). Subject to PMB legislation.

PREMIUM

BENEFIT

PRO PINNACLE

PRO SECURE PLUS

PRO SECURE

PRO ACTIVE PLUS

PRO SELECT (NETWORK OPTION)

a) Vaccine only

100% of cost
As determined by DoH/ Single Exit Price
1 vaccine per beneficiary

b) Fee to administer vaccine

100% of cost
As determined by DoH

5H GENDER-BASED VIOLENCE SUPPORT PROGRAMME

Provides emotional and psychological support in the event of violence or abuse experienced by persons of any gender. Cover includes telephonic and face-to-face counselling. Legal counselling and assistance are provided but is at the cost of the beneficiary. Call 0860 944 772 for 24-hour assistance. Benefits are subject to the use of the DSP. Co-payment applies for voluntary use of the non-DSP. Subject to case management and protocols.

5H Counselling

a) Telephonic counselling

100% Negotiated Tariff
Appropriate number of sessions as determined by the designated case manager
Not subject to day-to-day limit

b) Face-to-face counselling

100% Negotiated Tariff
Up to 4 sessions per incident
Thereafter, subject to PMB legislation
Not subject to day-to-day limit

6. MATERNITY

Call 0860 776 363 where pre-authorization is required and for more information on clinical qualifying criteria and benefits.

Tums2Tots: Baby and Toddler programme available to expectant mothers and mothers with babies, and toddlers up to 3 years. Mothers can register on the programme via the Profmed App.

Health-on-Line on 082 911: Telephonic emergency and non-emergency medical advice, during pregnancy and once baby is born.

6A DAY-TO-DAY COVER

Members on the ProSecure Plus, ProSecure and ProActive Plus options are required to register on the Maternity programme to access the relevant benefits.

6A1 Ultra-sound scans (ante-natal)

100% Profmed Tariff
2 scans per pregnancy
Subject to day-to-day limit

100% Profmed Tariff
2 scans per pregnancy
Not subject to day-to-day limit
(Subject to registration on the Maternity programme, pre-authorization and protocols)

100% Profmed Tariff
2 2D scans per pregnancy
Not subject to day-to-day limit
(Subject to registration on the Maternity programme, pre-authorization and protocols)

Subject to PMB legislation

6A2 Consultations
Ante-/post-natal consultations by a medical practitioner

300% Profmed Tariff
13 visits per pregnancy
Subject to day-to-day limit

GPs: R602
Specialists: R882
13 visits per pregnancy
Not subject to day-to-day limit
(Subject to registration on the Maternity programme, pre-authorization and protocols)

GPs and specialists at GP rate: R602
6 visits per pregnancy
Not subject to day-to-day limit
(Subject to registration on the Maternity programme, pre-authorization and protocols)

Subject to PMB legislation

PREMIUM BENEFIT

	PRO PINNACLE	PRO SECURE PLUS	PRO SECURE	PRO ACTIVE PLUS	PRO SELECT (NETWORK OPTION)
6A3 Consultations Ante-/post-natal consultations by a registered midwife	300% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit	Consultations: R882 13 visits per pregnancy Not subject to day-to-day limit <i>(Subject to registration on the Maternity programme, pre-authorisation and protocols)</i>		GPs and specialists at GP rate: R602 6 visits per pregnancy Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	Subject to PMB legislation
6A4 General Practitioner or Paediatrician consultations	300% Profmed Tariff Subject to day-to-day limit	GPs: R602 Specialists: R882 Specialist tariff amount may differ depending on the speciality Subject to day-to-day limit		GPs and specialists at GP rate: R602 2 visits only Not subject to day-to-day limit (Subject to registration on the Maternity programme, pre-authorisation and protocols)	Subject to PMB legislation
6A5 Pathology <i>(Tariff codes 4188, 3764, 3765 and 3709)</i>	80% Negotiated Tariff Subject to day-to-day limit	80% Negotiated Tariff Subject to day-to-day limit		100% Negotiated Tariff Not subject to day-to-day limit, and PMB legislation (Subject to registration on the Maternity programme, pre-authorisation and protocols)	Subject to PMB legislation
6A6 Lactation consultation At a registered service provider Available up to 6 months post-delivery <i>(Subject to registration on the Maternity programme, pre-authorisation and protocols)</i>	100% Profmed Tariff 1 visit per pregnancy Subject to day-to-day limit	100% Profmed Tariff 1 visit per pregnancy Not subject to day-to-day limit		Subject to PMB legislation	
6A7 Nutrition consultation At a registered service provider Available up to 6 months post-delivery <i>(Subject to registration on the Maternity programme, pre-authorisation and protocols)</i>	100% Profmed Tariff 1 visit per pregnancy Subject to day-to-day limit	100% Profmed Tariff 1 visit per pregnancy Not subject to day-to-day limit		Subject to PMB legislation	
6A8 Nuchal Translucency Non-Invasive Pre-Natal Test (NIPT) <i>(Subject to registration on the Maternity programme, pre-authorisation and protocols)</i>	100% Profmed Tariff 1 per pregnancy Subject to day-to-day limit, and PMB legislation	100% Profmed Tariff 1 per pregnancy Not subject to day-to-day limit Subject to PMB legislation		Subject to PMB legislation	
6A9 Out-patient visits to hospital/clinic for, e.g. tococardiography	80% Profmed Tariff Subject to day-to-day limit	80% Profmed Tariff Subject to day-to-day limit		80% Profmed Tariff Subject to day-to-day limit	Subject to PMB legislation

PREMIUM BENEFIT

	PRO PINNACLE	PRO SECURE PLUS	PRO SECURE	PRO ACTIVE PLUS	PRO SELECT (NETWORK OPTION)
6A10 Ante-natal exercises by registered healthcare practitioner	80% Profmed Tariff R1163 per family Subject to day-to-day limit.	No benefit		No benefit	
6A11 Prescribed medication during pregnancy	80% Single Exit Price plus dispensing fee Subject to 5B1	80% Single Exit Price plus dispensing fee Subject to 5B1		80% Single Exit Price plus dispensing fee Subject to 5B1	Subject to PMB legislation
6A12 Post-natal home-based visit A post-birth 6-week visit by a registered nurse to assess baby's progress, provide support to parents and administer the 6-week immunisation. Available to newborns born onto and registered on the Scheme. An appointment will be scheduled once baby is born. The 6-week nurse visit in outlying areas is subject to the availability of nurses. Call 0860 679 200 to schedule an appointment. Subject to use of the Post-Natal Home-Based Care DSPN and registration on the Tums2Tots Baby and Toddler Programme.					
a) Visit	100% Negotiated Tariff Not subject to day-to-day benefit				
b) Immunisations Immunisations done at 6 weeks, per the Department of Health's Childhood Immunisation Schedule	100% Single Exit Price plus dispensing fee at DSPN rate Subject to Section 2B1				
6B HOSPITALISATION Call 0860 776 363 where pre-authorization is required and for more information on clinical qualifying criteria, and benefits. Subject to PMB legislation. ProSelect subject to use of network hospitals as listed at www.profmed.co.za .					
6B1 In-patient hospitalisation (ante-natal) (Subject to pre-authorization)	100% Negotiated Tariff in private ward	100% Negotiated Tariff in general ward		100% Negotiated Tariff in general ward	100% Negotiated Tariff in general ward (Subject to use of ProSelect DSPN)
6B2 Delivery fee by GP or specialist	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff
6B3 Delivery fee by registered midwife	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff
6B4 Labour ward	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	100% Negotiated Tariff (Subject to use of ProSelect DSPN)
6B5 Ward accommodation (post-delivery): Normal delivery – 3 days Caesarean section – 4 days	100% Negotiated Tariff in private ward	100% Negotiated Tariff in private ward	100% Negotiated Tariff in general ward	100% Negotiated Tariff in general ward	100% Negotiated Tariff in general ward (Subject to use of ProSelect DSPN)
6B6 Theatre and recovery room	100% Negotiated Tariff	100% Negotiated Tariff		100% Negotiated Tariff	100% Negotiated Tariff (Subject to use of ProSelect DSPN)
6B7 Other medical practitioner services, e.g. pathology and radiology while in hospital	100% Profmed Tariff				
6B8 Consultations while in hospital	300% Profmed Tariff	200% Profmed Tariff	100% Specific Tariff	175% Profmed Tariff	100% Specific Tariff

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INTELLIGENT MEDICAL AID FOR PROFESSIONALS

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