



PROACTIVE PLUS

PROACTIVE PLUS SAVVY

BENEFIT BROCHURE 2026

These benefits are subject to ratification by the Council for Medical Schemes.

This is a summary of benefits, please refer to the published Schedule of Benefits for detailed information on benefits. In the event of a dispute the approved rules of the Scheme and the rules contained in the Schedule of Benefits will prevail. All benefits are subject to the PMB legislation.

CONTRIBUTIONS

PROACTIVE PLUS SAVVY

(Subject to Savvy network of hospitals)

Members registered on the **ProActive Plus Savvy** option are required to make use of the Savvy network for hospitalisation, including day procedures.

- Voluntary use of a non-network hospital will result in a co-payment of R14 000; and
- Voluntary use of a non-network hospital for a specified day procedure will result in a co-payment of R5 000. (Subject to PMB legislation)

INCLUDES OVER 100+ FACILITIES ON THE SAVVY NETWORK.



Scan for a list of Network Hospitals

PROACTIVE PLUS SAVVY

Principal member	R 3 164
Adult dependant	R 2 914
Child	R 1 235

PROACTIVE PLUS

Members on the **ProActive Plus option** are not restricted to a network of hospitals.

- **Specified day procedures on the ProActive Plus option, are subject to the use of the Day Procedure network.**
- Voluntary use of a non-network hospital for a specified day procedure will result in a co-payment of R5 000. (Subject to PMB legislation)



Scan to view the Day Procedure Network

PROACTIVE PLUS

Principal member	R 3 516
Adult dependant	R 3 239
Child	R 1 370

CONTACT US

WITHIN RSA

OUTSIDE RSA

	WITHIN RSA	OUTSIDE RSA
CLIENT SERVICES & CLAIMS	0860 679 200	+27 12 679 4144
CHRONIC AUTHORISATIONS	0800 132 345	+27 11 770 6000
PRE-AUTHORISATIONS	0860 776 363	+27 12 679 4145
INTERNATIONAL TRAVEL MEDICAL ASSISTANCE	011 991 8564	+27 11 991 8564
EMERGENCY MEDICAL ASSISTANCE WITHIN RSA	082 911	-
WHISPA:		
• GBV SUPPORT	0860 944 772	-
• ASSISTANCE FOR TRAUMA, AND HIV EXPOSURE		

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.

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)
DOMICILIARY (HOME) OXYGEN	Ecomed Medical cc
EMERGENCY MEDICAL TRANSPORT (EMT) (WITHIN RSA)	Netcare 911
FUNCTIONAL REHABILITATION PROGRAMME	Documentation Based Care (DBC) Back and Neck Programme, Workability
HOSPITALISATION: PREMIUM OPTIONS (PMBS AND NON-PMBS)	No DSPN, with the exception of benefits for mental health hospitalisation, drug and alcohol rehabilitation and physical rehabilitation, subject to pre-authorization, 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 mental health hospitalisation, drug and alcohol rehabilitation, physical rehabilitation, subject to pre-authorization, 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 specified Netcare hospitals, as listed on the website, with exception of benefits for mental health hospitalisation, drug and alcohol rehabilitation, physical rehabilitation, subject to pre-authorization, rules and protocols
INTERNATIONAL TRAVEL MEDICAL ASSISTANCE	Europ Assistance
MENTAL HEALTH 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)
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
PHARMACY	Profmed Pharmacy Network, subject to rules, formulary, reference pricing and protocols
POST-NATAL HOME-BASED VISIT	Wellness Health Insurance Pathology Services (W.H.I.P.S)
PREVENTATIVE CARE	Pathology: Ampath, Lancet Laboratories and Pathcare
REHABILITATION	<ul style="list-style-type: none"> • Alcohol and Drugs: South African National Council on Alcoholism and Drug Dependence (SANCA) • Physical: Life Healthcare
WHISPA	
<ul style="list-style-type: none"> • GBV SUPPORT • ASSISTANCE FOR TRAUMA, AND HIV EXPOSURE 	Lifesense

HOSPITAL AND HOSPITAL-RELATED BENEFITS AND MAJOR MEDICAL EXPENSES

BENEFIT

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HOSPITALISATION

Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits.

- No restriction to network hospitals
- Specified day procedures, subject to use of the Day Procedure network.
- Use of a non-network hospital for a specified day procedure will result in a co-payment.



Scan to view the
Day Procedure
Network

Subject to use of the Savvy DSPN, use of a non-network hospital will result in a co-payment.



Scan for a list of
Network Hospitals

Hospital ward accommodation
(Subject to pre-authorisation)

100% Negotiated Tariff in general ward

Theatre and recovery room

100% Negotiated Tariff

Intensive care and high care

100% Negotiated Tariff

Emergency room visits and facility fees at hospitals that result in hospitalisation

100% Negotiated Tariff

MEDICINES IN HOSPITAL

Medicines and materials used in hospital and theatre

100% Negotiated Tariff

Medicines taken out of hospital on discharge

80% Negotiated Tariff
Paid from acute medicine benefit,
subject to the availability of funds

GENERAL PRACTITIONERS (GPs) AND SPECIALISTS IN HOSPITAL

Surgery and in-hospital procedures

175% Profmed Tariff

Consultations by a GP or specialist while hospitalised

175% Profmed Tariff

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.

a) Radiology and pathology while hospitalised
(Excluding MRI, radio-isotope, CT and PET scans and certain other investigative procedures)

100% Negotiated Tariff

MRI, radio-isotope and CT scans and certain other investigative procedures while hospitalised Specialist referral required, except for CT scans

100% Negotiated Tariff in-hospital
2 per family in-hospital only

OTHER MAJOR MEDICAL SERVICES

Call 0860 776 363 for authorisation and registration, information on clinical qualifying criteria, and benefits.

Transplants

Subject to registration on the Disease Management Programme, and PMB legislation. Benefits for donor costs are not available to members who elect to be a donor to a recipient who is not a Profmed member.

a) Hospitalisation

100% Negotiated Tariff

b) Donor costs PMBs only

100% Negotiated Tariff

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.

100% Negotiated Tariff

ONCOLOGY

Subject to pre-authorisation, protocols and PMB legislation. Members are required to register on the Oncology Programme.

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)

R418 000 per beneficiary
Thereafter, subject to PMB legislation

a) Chemotherapy

i. a) Consultations

GPs: R630
Specialists: R920

i. b) Procedures

100% Specific Tariff

ii. Chemotherapy drugs Excluding adjunctive treatment
(20% co-payment applies for non-use of Oncology pharmacy DSPN)

100% Single Exit Price plus dispensing fee

iii. Biologicals and other specified drugs
(Subject to use of the Oncology pharmacy DSPN)

Subject to PMB legislation

b) Radiation therapy

i. Consultations

Specialists: R920

ii. Radiation therapy and facility fees

100% Negotiated Tariff

c) PET scans (Positron-Emission Tomography)

(Subject to use of Oncology PET Scan DSPN. DSPN applicable within the greater Johannesburg region only)

100% Negotiated Tariff

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 pre-authorisation and use of the Rehabilitation DSPN and PMB legislation. Co-payment applies for voluntary use of a non-network facility.

(Subject to pre-authorisation)

100% Negotiated Tariff
R30 300 per family

Out-patient care in lieu of hospitalisation

a) Treatment in a registered sub-acute facility or at home by an appropriately registered practitioner

100% Negotiated Tariff
R14 200 per beneficiary

b) Wound care

Treatment at home, including surgicals, by an appropriately registered practitioner
(Subject to pre-authorisation and protocols)

100% Negotiated Tariff
R3 700 per beneficiary

MENTAL HEALTH TREATMENT

Includes all in- and out-of-hospital mental health and clinical psychology consultations, treatment and in-hospital medication, and alcohol and drug rehabilitation. Subject to pre-authorisation. Hospitalisation only available at the Mental Health 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.

a) In-hospital

100% Negotiated Tariff in general ward
R22 800 per family
Subject to PMB legislation

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b) Out-of-hospital consultations
(Subject to PMB legislation)

R7 700 per family
Subject to in-hospital limit
PMBs only

ENDOSCOPIC EXAMINATIONS

In suitably equipped procedure room, subject to protocols and PMB legislation.

Gastroscopy, Colonoscopy (including Sigmoidoscopy) and Colonoscopy and gastroscopy (combined procedure)

100% Negotiated Tariff

OTHER MEDICAL SERVICES

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

Physiotherapy

a) In-hospital

100% Profmed Tariff

b) Out-of-hospital
Post-operative, available up to 6 weeks after related hospital procedure

Subject to PMB legislation

Blood transfusions

100% Negotiated Tariff

Emergency medical transport (EMT)

Emergencies within the borders of South Africa. Contact 082 911 within RSA. (Subject to Profmed protocols and use of the EMT DSPN)

20% co-payment for voluntary use of a non-DSP, subject to PMB legislation
Non-emergency calls will not be funded

100% of cost

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.

(Subject to pre-authorisation, protocols and management)

100% Negotiated Tariff
R59 300 per family

Cataract surgery

Intra-ocular lens for cataract surgery (permanent implantable lenses, inclusive of basic and specialised lens varieties). 100% of the diagnosis, treatment, and care costs subject to PMB regulations, Profmed Negotiated Tariff, pre-authorisation, the treatment meeting the Scheme's treatment guidelines and clinical criteria.

a) Hospitalisation

100% Negotiated Tariff

b) Surgeon and anaesthetist fees

175% Profmed Tariff

c) Intra-ocular lens

R5 600 per beneficiary per eye

FUNCTIONAL REHABILITATION PROGRAMME

This is an inter-disciplinary programme for treatment of chronic back and neck conditions. This benefit is conservative treatment and only available out-of-hospital. Not subject to day-to-day benefits. Members have the option of using either the Workability or Documentation Based Care (DBC) Back and Neck Programmes for treatment.

Initial assessment, Treatment and Outcomes

100% Negotiated Tariff

DENTAL PROCEDURES IN HOSPITAL

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

Hospitalisation:

- Permanent tooth impaction removals
- Extensive conservative dental treatment only for children younger than 8 years (24-month benefit)

100% Negotiated Tariff

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a) Specialist and anaesthetist fees	175% Profmed Tariff
b) Dentist fees	135% Profmed Tariff
Hospitalisation: - Other	Subject to PMB legislation

MATERNITY BENEFITS

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

BENEFIT

IN-HOSPITAL BENEFITS

IN-PATIENT HOSPITALISATION	100% Negotiated Tariff in general ward
DELIVERY FEE BY GP, SPECIALIST OR MIDWIFE	175% Profmed Tariff
WARD ACCOMMODATION (post-delivery): • Normal delivery - 3 days • Caesarean section - 4 days	100% Negotiated Tariff in general ward
LABOUR WARD	100% Negotiated Tariff
THEATRE AND RECOVERY ROOM	100% Negotiated Tariff
CONSULTATIONS WHILE IN HOSPITAL	175% Profmed Tariff
OTHER MEDICAL PRACTITIONER SERVICES. EG. PATHOLOGY AND RADIOLOGY WHILE IN HOSPITAL	100% Profmed Tariff
NEONATAL ICU	100% Negotiated Tariff
ULTRA-SOUND SCANS (ANTE-NATAL)	100% Profmed Tariff 2 2D scans per pregnancy
ANTE-/POST-NATAL CONSULTATIONS BY MEDICAL PRACTITIONER OR MIDWIFE	GPs and specialists at GP rate: R630 6 visits per pregnancy
GENERAL PRACTITIONER OR PAEDIATRICIAN CONSULTATIONS	GPs and specialists at GP rate: R630 2 visits only
PATHOLOGY (Tariff codes 4188, 3764, 3765 and 3709)	100% Negotiated Tariff
POST-NATAL HOME-BASED VISIT	100% Negotiated Tariff The Immunisations done at 6 weeks, per the Department of Health's Childhood Immunisation Schedule, paid from the preventative care benefit

Members who register on the Maternity programme can access the below out-of-hospital benefits, which is not subject to the day-to-day limits.

BENEFIT

OUT-OF-HOSPITAL BENEFITS

ULTRA-SOUND SCANS (ANTE-NATAL)	100% Profmed Tariff 2 2D scans per pregnancy
ANTE-/POST-NATAL CONSULTATIONS BY MEDICAL PRACTITIONER OR MIDWIFE	GPs and specialists at GP rate: R630 6 visits per pregnancy

BENEFIT

OUT-OF-HOSPITAL BENEFITS

GENERAL PRACTITIONER OR PAEDIATRICIAN CONSULTATIONS	GPs and specialists at GP rate: R630 2 visits only
PATHOLOGY (Tariff codes 4188, 3764, 3765 and 3709)	100% Negotiated Tariff
POST-NATAL HOME-BASED VISIT	100% Negotiated Tariff The Immunisations done at 6 weeks, per the Department of Health's Childhood Immunisation Schedule, paid from the preventative care benefit

PREVENTATIVE CARE

Benefits are subject to specific protocols. Co-payment applies for non-use of the Preventative Care DSP, where applicable. Not subject to day-to-day limit, unless otherwise specified.

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GENERAL HEALTH

Digital Health Assessments

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

Assessments to be done via Profmed App

2 assessments per beneficiary

Consultation

Includes a consultation for any one of the Preventative Care benefits

(Tariff codes 0190, 0191, 0192; Audiology tariff codes 1010, 1011)

GPs: R630
Specialists: R920
100% Profmed Tariff for speech therapists or audiologists
1 consultation per beneficiary, thereafter subject to available day-to-day limit

Fasting blood sugar test

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

Pathology

(Tariff code 4057)

100% Negotiated Tariff
1 per beneficiary

Fasting lipogram blood test

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

Pathology

(Tariff code 4025)

100% Negotiated Tariff
1 per beneficiary

HIV testing

Subject to PMB legislation.

Pathology

(Tariff codes 3932, 4614)

100% Negotiated Tariff
1 per beneficiary

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 R480 per beneficiary
MMAPI[®] applies

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: R630
2 sessions per family

VACCINES

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

Human papilloma virus (HPV) vaccine

Males and 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

Influenza vaccine

Vaccine only

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

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

WOMEN'S HEALTH

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

Faecal occult blood test

Females 50 years and older. Subject to PMB legislation.

Pathology

(Tariff codes 4351, 4352)

100% Negotiated Tariff
1 per beneficiary

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

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

Pap smear or liquid-based cytology

Females 18 years and older. Subject to PMB legislation.

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

Contraceptives

Funding only applies for contraceptive purposes. Protocols apply.

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 100 per beneficiary

MENS HEALTH

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

Faecal occult blood test

Males 50 years and older. Subject to PMB legislation.

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Pathology
(Tariff codes 4351, 4352)

100% Negotiated Tariff
1 per beneficiary

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

Pathology
(Tariff code 4519)

100% Negotiated Tariff
1 per beneficiary

CHILDREN'S HEALTH

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

AMPLIFIRE

Elevate Your Health Journey

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 App;
3. If required, complete a physical health assessment;
4. Complete all individual relevant Preventative Care benefits;
5. Where a beneficiary is registered on a Chronic Treatment Care plan, they are required to fully comply with the plan, to unlock benefits.



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

The additional benefit is allocated to the overall day-to-day benefit and can be used to cover out-of-hospital expenses.

R2 750 per beneficiary
Claims paid up to the option-specific 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-authorization and members must register via the Profmed App to access the benefit.

PROFMED APP

BRINGS YOU AN INNOVATIVE AI DRIVEN **DIGITAL HEALTH ASSESSMENT TOOL**.

This smart digital tool helps you identify potential health risks early, guiding you to take the necessary steps to improve your well-being. The facial recognition technology is fast and reliable, helping you take control of your health with confidence.



CHRONIC CONDITIONS

PROACTIVE PLUS + PROACTIVE PLUS SAVVY

The conditions covered on each option are listed above. 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. No chronic form required, members treating practitioner or pharmacist to phone MediKredit 0800 132 345.

- | | | |
|--|------------------------|----------------------------------|
| 1. Addison's Disease | 10. Crohn's Disease | 20. Hypertension |
| 2. Asthma | 11. Diabetes Insipidus | 21. Hypothyroidism |
| 3. Bipolar Mood Disorder | 12. Diabetes Type 1 | 22. Multiple Sclerosis |
| 4. Bronchiectasis | 13. Diabetes Type 2 | 23. Parkinson's Disease |
| 5. Cardiac Failure | 14. Dysrhythmias | 24. Rheumatoid Arthritis |
| 6. Cardiomyopathy | 15. Epilepsy | 25. Schizophrenia |
| 7. Chronic Obstructive Pulmonary Disease | 16. Glaucoma | 26. Systemic Lupus Erythematosus |
| 8. Chronic Renal Disease | 17. Haemophilia | 27. Ulcerative Colitis |
| 9. Coronary Artery Disease | 18. HIV/AIDS | |
| | 19. Hyperlipidaemia | |

OUT-OF-HOSPITAL BENEFITS

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.

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ANNUAL OVERALL DAY-TO-DAY LIMIT

Available only through relevant available day-to-day sub-limits, where applicable

M R4 800
M+1 R6 700
Maximum R8 400 per family

GENERAL PRACTITIONERS (GPs) AND SPECIALISTS

A) FACE-TO-FACE CONSULTATIONS

GPs and specialists at GP rate: R630

B) VIRTUAL AND TELEPHONIC CONSULTATIONS

3 consultations per beneficiary
Code 0130: R350
Specialist tariff amount may differ depending on the speciality

PHYSIOTHERAPY

100% Profmed Tariff
Maximum R800 per family
Not subject to day-to-day limit

NON-HOSPITAL PROCEDURES IN DOCTOR'S ROOMS

100% Specific Tariff at GP rate

RESCRIBED ACUTE MEDICATION SUBJECT TO USE OF THE PHARMACY DSPN

80% Single Exit Price plus dispensing fee
M R800
M+1 R1100
Maximum R1 400 per family
MMAP® applies

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CONSERVATIVE DENTISTRY

(Includes annual check-ups, etc)

135% Profmed Tariff

EYE EXAMINATIONS

100% Optical Tariff
24-month benefit

RADIOLOGY AND PATHOLOGY

(Excluding MRI and CT scans)

80% Negotiated Tariff

MRI, RADIO-ISOTOPE AND CT SCANS

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

80% Negotiated Tariff
R6 500 per family
Not subject to day-to-day benefit

EMERGENCY ROOM VISITS AND FACILITY FEES AT HOSPITALS THAT DO NOT RESULT IN HOSPITALISATION

100% Negotiated Tariff

ADDITIONAL BENEFITS

BENEFIT

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INTERNATIONAL TRAVEL COVER

R2.5 million per beneficiary per journey

This benefit covers members for medical emergencies while travelling internationally. Cover is available up to 150 days from date of departure per journey. This benefit is not available to members who reside in the SADC Region when travelling outside the borders of their country of residence.

Members who reside in the SADC region only have access to the emergency evacuation cover to South Africa, provided that they are on an international journey.

SABBATICAL

Profmed offers a sabbatical benefit to our members. Provided you/your dependant(s) have not been diagnosed with new conditions or there were no deterioration / changes or circumstances in your and your dependant health (for example but not limited to: pregnancy) since departure, we will re-activate your membership without underwriting being applied. You will be allocated a new membership number.

The benefit is available to members who have been on Profmed for a minimum of one year, and the benefit is valid for a period not exceeding three years from your resignation date.

PROFMED WELLBEING

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.

HEALING@HOME

Profmed has partnered with Quro Medical to provide Healing@Home services, a revolutionary solution that brings quality healthcare to your doorstep, allowing you to recover in the comfort of your home while maintaining clinical oversight and monitoring.

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WHISPA:

- **GBV support programme**
- **Trauma, and HIV assistance 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, and legal counselling and assistance are provided but is at the cost of the beneficiary.

This benefit also provide cover for 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, not subject to day-to-day limit. Where relevant, victims will be accompanied by an appropriate, qualified professional to identity parades and court appearances for emotional support. Call 0860 944 772 for 24-hour assistance.

JOIN PROFMED

Call: 0800 DEGREE (334 733)
Email: degree@profmed.co.za

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CLIENT SERVICES

Call: 0860 679 200
Email: info@profmed.co.za
Claims: claims@profmed.co.za
Private Bag X1031, Lyttelton, 0140



PROFMED