

Health Plan Guide 2017 KeyCare Series





Your health is everything

The Discovery Health Medical Scheme is the best choice for you

When you join Discovery Health Medical Scheme, you have access to affordable, comprehensive healthcare benefits. These are supported by world-class service and a range of industry leading digital tools and programmes to manage your health and health plan.





World-leading Health Insurance

In a global study by Deloitte, Discovery Health Medical Scheme has been ranked among the top 3 health insurers in the world since 2008, based on financial security, contribution levels, membership and innovation.

The benefits explained in this brochure are provided by Discovery Health Medical Scheme, registration number 1125, administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07, an authorised financial services provider. This brochure is only a summary of the key benefits and features of Discovery Health Medical Scheme plans, awaiting formal approval from the Council for Medical Schemes. In all instances, Discovery Health Medical Scheme Rules prevail. Please consult the Scheme Rules on www.discovery.co.za. When reference is made in this brochure to "we" in the context of benefits, members, payments or cover, this refers to Discovery Health Medical Scheme. Vitality is a separate wellness product sold and administered by Discovery Vitality (Pty) Ltd, registration number 1999/007736/07, an authorised financial services provider.

Comprehensive benefits

Choose from 23 plan options, which all offer rich benefits with unlimited private hospital cover, and full cover in our extensive healthcare networks.



Better healthcare

Access to wideranging benefits, care programmes and services that ensure you and your doctor can access the best healthcare available when you need it.



Lower cost

Affordable contributions, which are on average 14.6% lower than contributions for comparable cover with other South African medical schemes.

Better health

The opportunity to join the world's leading sciencebased wellness programme, Vitality, that gives you access to and rewards you for a healthy lifestyle.

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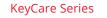
Google Pla

Tools to manage your health plan

The very latest digital health technology that empowers you and your doctor to manage your health and your health plan, anywhere, anytime.

The lower cost analysis is a comparison of our contributions with open scheme competitor contributions, based on internal analysis of publicly available marketing material.

Vitality is not part of Discovery Health Medical Scheme. Vitality is a separate wellness product sold and administered by Discovery Vitality (Pty) Ltd. Registration number 1999/007736/07, an authorised financial services provider.



Key features

Benefits available on the KeyCare Series



Unlimited hospital cover in our KeyCare hospital networks

Guaranteed full cover in hospital for specialists on the KeyCare network, and up to 100% of the Discovery Health Rate (DHR) for other healthcare professionals Ċ

Essential cover for chronic medicine on the KeyCare medicine list for all Chronic Disease List conditions



Unlimited cover for medically appropriate GP consultations, blood tests, X-rays or medicine in our KeyCare network on the KeyCare Plus and KeyCare Access plans

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The KeyCare Series has three health plan options

The three plan options have differences in benefits as indicated below. All other benefits not mentioned in the table are the same across all three plan options.

	Plus	Access	Core			
Hospitals Full cover in the Full Cover Hospital Network, and up to 70% of the DHR in the Partial Cover Hospital Network	Unlimited cover in the KeyCare Hospital Network. There is a list of procedures that are covered in the KeyCare day surgery network	Unlimited cover for emergencies and trauma in the KeyCare network of private hospitals. Childbirth and care for your newborn covered in the KeyCare Access network. Other conditions are covered in a contracted network of state facilities.	Unlimited cover in the KeyCare Hospital Network. There is a list of procedures that are covered in the KeyCare day surgery network.			
Day-to-day medical cover	Primary care cover through your chosen GP a	This plan does not offer day-to-day medical cover				
	Private specialist cover up to a limit of R3 570 for each person	Private specialist cover up to R3 570 for emergencies, trauma, childbirth and cover for your baby up to 12 months after childbirth	Private specialist cover up to a limit of R3 570 for each person			
Antenatal Benefit	If you are pregnant, the Antenatal Benefit covers you at 100% of the DHR for the following healthcare services: Four visits to a GP, midwife or gynaecologist at a network hospital One routine scan (between 10 and 20 weeks) Selected blood tests requested by your gynaecologist or GP 					
Casualty visits	Cover in any casualty unit at one of the KeyCare network hospitals. You have to pay the first R300 of the consultation.	Other than for emergencies and trauma, you have cover in any casualty unit at one of the KeyCare Access hospitals and KeyCare network hospitals once a year. You have to pay the first R300 of the consultation.	Casualty visits are not covered			
Chronic medicines prescriptions	Your chosen KeyCare GP must dispense you your approved medicine from network phar	Any GP can prescribe your approved medicine				
Cancer	We cover treatment only if it is a Prescribed Minimum Benefit. We will allocate you to a network provider.	We cover treatment if it is a Prescribed Minimum Benefit in a state facility	We cover treatment only if it is a Prescribed Minimum Benefit. We will allocate you to a network provider.			

Hospital cover

We cover you in hospital for emergency and planned hospital admissions

There is no overall hospital limit. Some healthcare services and procedures have a limit or we may have rules that determine how these are paid.

This is how we cover your hospital account and accounts from your admitting doctor, anaesthetist or other approved healthcare professionals (related accounts).

	Core	E	Plus	Ē	Access
	Но	ospital cover			
Full Cover Hospital Network	We cover you in full at the rate agreed with the hospital. On KeyCare Access cover is limited to emergencies and trauma. We also cover you in full in the KeyCare Access network for childbirth and care for your newborn.				
Partial Cover Hospital Network	We pay up to a maximum of 70% of the hospital account, you must pay the balance of the account. If the admission is a Prescribed Minimum Benefit, we will pay 80% of the Discovery Health Rate (DHR). On KeyCare Access cover is limited to emergencies and trauma.				
Non-network hospitals	We will not pay the hospital and related accounts if you are admitted to a non-network hospital for a planned admission. If the admission is a Prescribed Minimum Benefit, we will pay 80% of the Discovery Health Rate (DHR).				
	Rela	ated account	S		
Specialists and healthcare professionals in our network	Full cover				
Specialists and healthcare professionals not in our network	100% of the Discovery Health Rate (DHR). If they charge above the DHR you must pay the balance of the account				
Radiology and pathology	100% of the Discovery Health Rate (DHR)				

On KeyCare Core and KeyCare Plus, we cover these procedures in our day surgery network:

- Adenoidectomy
- Arthrocentesis (joint injection)
- Cataract surgery
- Cautery of vulva warts
- Circumcision
- Colonoscopy
- Cystourethroscopy
- Diagnostic D&C

- Gastroscopy
- Hysteroscopy
- Myringotomy
- Myringotomy with intubation (grommets)
- Prostate biopsy
- Proctoscopy
- Removal of pins and plates
- Sigmoidoscopy

- Simple nasal procedure for nose bleeding (nasal plugging and nasal cautery)
- Tonsillectomy
- Treatment of Bartholin's cyst/abscess
- Vasectomy
- Vulva/cone biopsy

On KeyCare Access we cover the following traumas in our network of private hospitals:

- Injuries at work
- Burns
- Injuries from a crime
- Sexual assault
- Injuries from a car accident
- Injuries from a fall

- The loss of an arm, hand, leg or foot
- Near-drowning
- Head injuries
- Poisoning or a serious allergic reaction that may cause death

Care for your baby after childbirth on KeyCare Access

This benefit covers babies that are registered on the Scheme from their date of birth when born to a parent registered on the Scheme. It covers approved hospital admissions in our network of private hospitals for the baby for 12 months from the baby's date of birth.

Babies not added to the Scheme from their date of birth will be covered in our contracted network of state facilities.

Prescribed Minimum Benefit (PMB) conditions

In terms of the Medical Schemes Act of 1998 (Act No. 131 of 1998) and its Regulations, all medical schemes have to cover the costs related to the diagnosis, treatment and care of:

- An emergency medical condition
- A defined list of 270 diagnoses
- A defined list of 27 chronic conditions

To access Prescribed Minimum Benefits, there are rules that apply:

- Your medical condition must qualify for cover and be part of the defined list of Prescribed Minimum Benefit conditions.
- The treatment needed must match the treatments in the defined benefits.
- You must use designated service providers (DSPs) in our network. This does not apply in emergencies. However even in these cases, where appropriate and according to the rules of the Scheme, you may be transferred to a hospital or other service providers in our network, once your condition has stabilised.

If your treatment doesn't meet the above criteria, we will pay up to 80% of the Discovery Health Rate. You will be responsible for the difference between what we pay and the actual cost of your treatment.

What is an emergency

An emergency medical condition, also referred to as an emergency, is the sudden and, at the time unexpected onset of a health condition that requires immediate medical and surgical treatment, where failure to provide medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person's life in serious jeopardy.

An emergency does not necessarily require a hospital admission. We may ask you for additional information to confirm the emergency.

What is the Discovery Health Rate (DHR)

This is a rate set by us at which healthcare services from hospitals, pharmacies and healthcare professionals are paid.

Healthcare services with an annual limit



Mental health

KeyCare Core and KeyCare Plus

21 days for admissions or up to 15 outof-hospital consultations for each person for major affective disorders, anorexia and bulimia, and up to 12 out-of-hospital consultations for acute stress disorder accompanied by recent significant trauma.

21 days for other mental health admissions.

All mental admissions are covered in full at a network facility. If you go elsewhere, we will pay up to 80% of the DHR for the hospital account.

KeyCare Access

21 days for admissions or up to 15 outof-hospital consultations for each person for major affective disorders, anorexia and bulimia, and up to 12 out-of-hospital consultations for acute stress disorder accompanied by recent significant trauma.

21 days for other PMB mental health admissions.

All mental admissions are covered in full at a contracted network of state facilities. If you go elsewhere, we will pay up to 80% of the DHR for the hospital account.

Alcohol and drug rehabilitation

KeyCare Core and KeyCare Plus 21 days for each person

KeyCare Access

21 days for each person in our contracted network of state facilities



Cataract surgery

KeyCare Core and KeyCare Plus

We cover cataract surgery as long as we have approved your treatment at a doctor and facility in our network for cataract surgery.

KeyCare Access

Covered in our contracted network of state facilities

Chronic dialysis

Once registered, we will allocate you to a network provider or you can go to a state facility. If you go elsewhere, we will pay up to 80% of the DHR.

You get extensive cover for chronic conditions and cancer

Members living with a chronic illness or cancer get the best care and support at all times through our suite of programmes.

Prescribed Minimum Benefit (PMB) conditions

You have access to treatment for a list of medical conditions under the Prescribed Minimum Benefits (PMBs). The PMBs cover the 27 chronic conditions on the Chronic Disease List (CDL).

All our plans offer benefits that are far richer than the PMBs. To access PMBs, certain rules apply (see page 8).

Chronic Illness Benefit (CIB)

You have cover for a list of chronic conditions, as long as your chronic medicine is on the KeyCare medicine list. We need to approve your application before we cover your condition from the Chronic Illness Benefit.

On the KeyCare Plus and KeyCare Access Plans, your chosen KeyCare GP must prescribe your approved chronic medicine. On the KeyCare Core Plan, any GP can prescribe your approved medicine.

How we pay for medicine

We pay for medicine up to a maximum of the Discovery Health Rate for medicine. The Discovery Health Rate for medicine is the price of the medicine as well as the fee for dispensing it.

Chronic conditions we cover

Chronic Disease List (CDL) conditions Addison's disease, asthma, bipolar mood disorder, bronchiectasis, cardiac failure, cardiomyopathy, chronic obstructive pulmonary disease, chronic renal disease, coronary artery disease, Crohn's disease, diabetes insipidus, diabetes Type 1, diabetes Type 2, dysrhythmia, epilepsy, glaucoma, haemophilia, HIV, hyperlipidaemia, hypertension, hypothyroidism, multiple sclerosis, Parkinson's disease, rheumatoid arthritis, schizophrenia, systemic lupus erythematosus, ulcerative colitis

Where to get your medicine

You need to get your approved chronic medicine that is on the KeyCare medicine list from one of our network pharmacies or from your chosen KeyCare GP (if he or she dispenses medicine). If you get your medicine from anywhere else, you will have to pay 20% of the Discovery Health Rate for medicines. If you use chronic medicine that is not on our medicine list, you will have to pay for it yourself.

Suite of patient management programmes

Diabetes Care

Our Diabetes*Care* programme, together with your Premier Plus GP, will help you actively manage your diabetes. A Premier Plus GP is a network GP that has contracted with us on quality-based metrics.

The Diabetes*Care* programme is based on clinical and lifestyle guidelines. The programme gives you and your Premier Plus GP access to various tools to monitor and manage your condition and to ensure you have access to high-quality coordinated care.

You and your GP can track progress on a personalised dashboard displaying your unique Diabetes Management Score. This will help to identify the steps you should take to manage your condition and stay healthy over time. The programme also unlocks cover for valuable healthcare services from healthcare providers like dietitians and biokineticists.

Any Discovery Health Medical Scheme member registered on the Chronic Illness Benefit for diabetes can join the Diabetes*Care* programme.

You must use a Premier Plus GP to manage your condition to avoid a 20% co-payment.

How to join

Speak to your Premier Plus GP or visit www.discovery.co.za to find a GP and get more information.

HIVCare

When you register for our HIV*Care* Programme, you are covered for the care that you need. You can be assured of confidentiality at all times. You need to get your medicine from a DSP to avoid a 20% co-payment.

Compassionate care

The Compassionate Care Benefit gives you access to holistic home-based end-of-life care up to **R37 350** for each person in their lifetime.

Oncology*Care*

If you're diagnosed with cancer and once we have approved your cancer treatment, you are covered by the Oncology*Care* Programme.

We cover cancer treatment, if it is a PMB, in our network or a state facility. If you choose to use any other provider, we will only cover 80% of the Discovery Health Rate (DHR).

All cancer-related healthcare services are covered up to 100% of the Discovery Health Rate (DHR). You might have a co-payment if your healthcare professional charges above this rate.

Advanced Illness Benefit

Members with cancer have access to a comprehensive palliative care programme. This programme offers unlimited cover for approved care at home.

Coordinated care for members on KeyCare plans with multiple chronic conditions

KeyCare members who are diagnosed with one or more significant chronic conditions may be required to participate in our Care Coordination Programme.

We will contact you if you meet our entry criteria for participation. The programme offers care coordination that will help you manage your condition and get the best quality care. You are covered in full if you are registered on the programme. If you choose not to participate, we will only cover hospital and related accounts up to 80% of the Discovery Health Rate (DHR).

You get screening and prevention benefits

Preventive screening is important to ensure that medical conditions are detected early

As a Discovery Health Medical Scheme member, you have access to screening and prevention benefits at any one of our wellness providers that cover the following:

Screening for adults

This benefit covers certain tests at one of our wellness network providers, like blood glucose, blood pressure, cholesterol, body mass index and HIV screening.

We also cover a mammogram every 2 years, a Pap smear once every 3 years and a PSA test (prostate screening) each year.

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Screening for kids

This benefit covers growth assessment tests, including height, weight, head circumference and health and milestone tracking at any one of our wellness providers.

If you meet our clinical entry criteria you get access to the following additional tests:

- Rapid HbA1c glucose test
- Lipogram cholesterol test
- Breast MRI or mammogram and once-off BRCA testing for breast screening
- Pap smear for cervical screening
- Seasonal flu vaccine for members 65 years or older or registered for certain chronic conditions

The clinical entry criteria are available on www.discovery.co.za



How we pay

These tests and consultations do not affect your day-today benefits as they are paid from the Hospital Benefit. Consultations that do not form part of PMBs will be paid from your available day-to-day benefits.

Cover depends on the plan you choose. To find hospitals or providers in our network, visit www.discovery.co.za

Day-to-day cover

You have access to the following day-to-day cover:

Applicable to KeyCare Plus and KeyCare Access plans

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Cover for GP visits

You have unlimited cover for medically appropriate GP consultations. When joining, you must choose a GP from the KeyCare GP Network. You must go to your chosen GP for us to cover your consultations and some minor procedures. Preauthorisation is required after your 15th GP visit.



Blood, urine and other fluid and tissue tests

We pay for a list of blood, urine and other fluid and tissue tests. Your chosen GP must ask for these tests by filling in a KeyCare pathology form.



Day-to-day medicine

We pay for medicine from our medicine list if they are prescribed by your chosen KeyCare network GP.



You get four out-of-network GP visits

If you need to see a doctor and your chosen GP from our network is not available for you to see, each person on your plan can go to any GP with a limit of four out-of-network GP visits each year, covered up to the DHR. We will cover the GP visit, with selected blood tests and X-rays and medicine on our medicine list.



Cover for dentistry

We cover consultations, fillings and tooth removals at a dentist in our dentist network.



Cover for eye care

We cover one eye test for each person, but you must go to an optometrist in our network. The optometrist will have a specific range of glasses that you can choose from. You can get a set of contact lenses instead of glasses if you choose to. You can get new glasses or contact lenses every 24 months.



Basic X-rays

We pay for a list of basic X-rays at a network provider. Your chosen GP must ask for the X-rays to be done.



Casualty visits

On KeyCare Plus you can go to any casualty unit at one of the KeyCare network hospitals. You have to pay the first R300 of the consultation. On KeyCare Access, other than for emergencies and trauma, each person can go to casualty at one of the KeyCare network hospitals once a year. You have to pay the first R300 of the consultation.

Medical equipment

We cover wheelchairs, wheelchair batteries and cushions, transfer boards and mobile ramps, commodes, long-leg calipers, crutches and walkers on the medical equipment list, if you get them from a network provider. There is an overall limit of R5 200 for each family.



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Other types of healthcare

We do not cover other types of healthcare professionals, such as physiotherapists, psychologists, speech therapists, audiologists, homeopaths or chiropractors.

You also get additional benefits that enhance your cover



Specialist Benefit

Each person is covered up to R3 570. Your GP must get a reference number before your consultation with the specialist.

If you need to see a tooth specialist, psychiatrist, ophthalmologist or a specialist for maternity care, you do not need a referral from your GP or a reference number from us.

The KeyCare Access Plan covers specialist visits in our network for maternity, care for your baby up to 12 months after the baby is born, and trauma and emergencies up to the limit. For all other healthcare services we cover specialists employed by a state facility.



Antenatal Benefit

If you are pregnant, the Antenatal Benefit covers you at 100% of the Discovery Health Rate for the following healthcare services:

- Four visits to a GP, midwife or gynaecologist at a network hospital
- One routine scan (between 10 and 20 weeks)
- Selected blood tests requested by your gynaecologist or GP

Contributions

KeyCare income bands	O Main The member	H Adult	Ĥ child⁺
KeyCare Plus			
11 551+	R1 906	R1 906	R510
8 101 – 11 550	R1 280	R1 280	R358
0 – 8 100	R914	R914	R331
KeyCare Access			
11 551+	R1 863	R1 863	R503
8 101 – 11 550	R1 241	R1 241	R348
5 051 – 8 100	R859	R859	R309
0 – 5 050	R644	R644	R281
KeyCare Core			
11 551+	R1 408	R1 408	R318
8 101 – 11 550	R912	R912	R224
0 – 8 100	R731	R731	R190

Income verification will be conducted for the lower income bands. Income is considered as: The higher of the main member's or registered spouse or partner's earnings, commission and rewards from employment; interest from investments; income from leasing of assets or property; distributions received from a trust, pension and/or provident fund; receipt of any financial assistance in terms of any statutory social assistance programme.

* We count a maximum of three children when we work out the monthly contributions.

KeyCare Hospital Networks

The lists apply to members on the KeyCare Core and KeyCare Plus plans. You must go to one of these hospitals for planned hospital admissions. If you do not use one of these hospitals for a planned admission, you will need to pay these claims. The lists also apply to KeyCare Access, for emergencies and trauma.

Full Cover Hospital Network - We cover you in full at the rate agreed with the hospital

Eastern Cape

East London

Welkom

- Mediclinic Welkom

Life Beacon Bay Hospital

- Life East London Private Hospital*
- Life St James Operating Theatres*
- Life St Dominic's Private Hospital Humansdorp
- Life Isivivana Private Hospital

Port Elizabeth

Life New Mercantile Hospital

Queenstown

- Life Queenstown Private Hospital Uitenhage
- Netcare Cuyler Clinic

Umtata

Life St Mary's Private Hospital

Free State

Bethlehem

 Mediclinic Hoogland Bloemfontein

- Horizon Eye Care Centre Netcare Pelonomi Private Hospital
- Life Rosepark Clinic
- Life Pasteur Hospital*
- Netcare Universitas Private Hospital

Sasolburg

Netcare Vaalpark Medical Centre

St Helena Hospital

Gauteng

Benoni

- Life The Glynnwood Hospital
- н. Sunshine Hospital

Boksburg

Clinix Botshelong-Empilweni Private Hospital

Brakpan

Life Dalview Clinic

Germiston

- Life Roseacres Clinic
- Heidelberg
- Life Suikerbosrand Clinic
- Johannesburg
- Netcare Rand Clinic
- Johannesburg Eye Clinic н.
- Netcare Garden City Clinic
- Life Brenthurst Clinic

Lakefield

- Netcare Optiklin Eye Hospital Midrand
- Life Carstenhof Clinic
- Pretoria
- Netcare Bougainville Private н. Hospital
- Centurion Eye Hospital н.

- Life Eugene Marais Hospital
- Netcare Jakaranda Hospital*
- Mediclinic Legae
- Mediclinic Medforum Muelmed Hospital
- Pretoria Eye Institute Randfontein
- Life Robinson Hospital
- Lenmed Randfontein Private Hospital

Saxonwold

Life Genesis Clinic

Soweto

- Clinix Tshepo-Themba Private Hospital
- Dr S K Matseke Memorial Hospital

Springs

- Life Springs Parkland Clinic
- Life St Mary's Maternity HospitalClinic*

Thembisa

Lenmed Health Zamokuhle Private Hospital

Vanderbijlpark

- Mediclinic Emfuleni
- Ocumed

Vereeniging

Clinix Naledi-Nkanyezi Private

Hospital

Midvaal Private Hospital

Westgate

Medgate Day Clinic

KwaZulu-Natal

Amanzimtoti

- Netcare Kingsway Hospital
- Chatsworth

 Life Chatsmed Garden Hospital

 Durban
- JMH City Hospital
- Life Entabeni Hospital
- Empangeni
- Life Empangeni Garden Clinic

Isipingo

JMH Isipingo Clinic

Kokstad

- Netcare Kokstad Hospital
- Ladysmith
- Lenmed Health La Verna Hospital Newcastle
- Newcastle Private Hospital
 Phoenix
- Life Mount Edgecombe
- Pietermaritzburg
- Netcare St Anne's Hospital

Pinetown

- Life Crompton Hospital
- Port Shepstone
- Hibiscus Hospital

Richards Bay

- Netcare The Bay Hospital
- Tongaat
- Mediclinic Victoria (Tongaat)

Limpopo

Bela-Bela

St Vincent's Hospital

Phalaborwa

Clinix Phalaborwa Private Hospital

Polokwane

- Mediclinic Limpopo
 Thabazimbi
- Mediclinic Thabazimbi
- Tzaneen
- Mediclinic Tzaneen

Mpumalanga

Barberton

- Mediclinic Barberton
 Emalahleni
- Life Cosmos Hospital
- Emeleosinos nospital
 Emalahleni Day Hospital
- Ermelo
- Ermelo Private Hospital
 Middelburg
- Life Middelburg Private Hospital
 Nelspruit
- Mediclinic Nelspruit
 Piet Retief
- Life Piet Retief Hospital
 Trichardt
- Mediclinic Highveld

North West

- Brits
- Mediclinic Brits

Carletonville

- Leslie Williams Private Hospital
- Western Deep Clinic

Klerksdorp

Life Anncron Clinic
 Mafikeng

Victoria Private Hospital (Mafikeng Hospital)

Orkney

- West Vaal Clinic
- Potchefstroom
- Mediclinic Potchefstroom
- Rustenburg
- Life Peglerae Hospital
- Vryburg
- Vryburg Private Hospital

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Northern Cape

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Kathu

 Lenmed Health Kathu Private Hospital

Kimberley

- Mediclinic Kimberley
- Finsch Mine Hospital

Upington

Upington Private Hospital

Western Cape

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Bellville

- Bellville Medical Centre
- Mediclinic Louis Leipoldt
- Cape Eye Hospital

Cape Town

- Netcare Christiaan Barnard Memorial Hospital
- NetCare UCT Medical Centre*

Ceres

Netcare Ceres Hospital
 Gatesville

Melomed Gatesville

George

- Mediclinic Geneva
- Mediclinic George

Hermanus

- Mediclinic Hermanus
 Kuils River
- Netcare Kuils River Hospital Milnerton
- Mediclinic Milnerton
- Mitchells Plain
- Melomed Mitchells Plain

Mossel Bay

- Life Bayview HospitalOudtshoornCango Medicentre
- Mediclinic Klein Karoo*
- Paarl
- Paarl
- Mediclinic Paarl
 West Coast
- west Coast
- Life West Coast Private Hospital

Worcester

Mediclinic Worcester

Lesotho

- ••••••
- Willie's Hospital*

Partial Cover Hospital Network – We pay up to a maximum of 70% of the hospital account, you must pay the balance of the account. If the admission is a Prescribed Minimum Benefit, we will pay 80% of the Discovery Health Rate.

Gauteng

Kempton Park

- Arwyp Medical Centre Lenasia
- Lenmed Ahmed Kathrada Private Hospital
 Pretoria
- Louis Pasteur Hospital
- Zuid-Afrikaans Hospital

KwaZulu-Natal

Pietermaritzburg

- Midlands Medical Centre
 Sydenham
- Lenmed Health Shifa Hospital

KeyCare Access Hospital Network for childbirth and care for your baby

We cover you in full at the agreed rate with the hospital. If you do not use one of these hospitals, you will need to pay these claims.

Eastern Cape

Tembisa

- Port Elizabeth
- Life New Mercantile Hospital
- Uitenhage
- Netcare Cuyler Hospital
- Umtata
- Life St Mary's Private Hospital

Free State

- Bloemfontein
- Netcare Pelonomi Private Hospital
 Sasolburg
- Netcare Vaalpark Hospital
- Gauteng

Alberton

- Netcare Clinton Hospital Johannesburg
- Netcare Rand Hospital
- KrugersdorpNetcare Krugersdorp Hospital
- Pretoria
- Netcare Femina Hospital
- Mediclinic Legae

Soweto

- DR S K Mateke Memorial Hospital
 Springs
- Netcare N17 Hospital

 Lenmed Health Zamokhule Private Hospital

KwaZulu-Natal

-
- Amanzimtoti

 Netcare Kingsway Hospital
- Durban
- City Hospital
- Kokstad
- Netcare Kokstad Hospital
 Ladysmith
- Lenmed Health La Verna Hospital
 Pietermaritzburg
- Netcare St Anne's Hospital
- Richards Bay
- Netcare The Bay Hospital
- Sydenham
- Lenmed Health Shifa Hospital
 Tongaat
- Mediclinic Victoria

Limpopo

- Phalaborwa
- Clinix Phalaborwa Private Hospital **Polokwane**
- Mediclinic Limpopo

Tzaneen

Mediclinic Tzaneen

Mpumalanga

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Nelspruit

Mediclinic Nelspruit

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Northern Cape

Kimberley

Mediclinic Kimberley

.....

North West

.....

Rustenburg

Netcare Ferncrest Hospital

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Western Cape

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Gatesville

Melomed Gatesville

Kuils River

Netcare Kuils River Hospital

Milnerton

Mediclinic Milnerton

Mitchells Plain

Melomed Mitchells Plain

Paarl

Mediclinic Paarl

General exclusions

Discovery Health Medical Scheme has certain exclusions. We do not pay for healthcare services related to the following, except where stipulated as part of a defined benefit or under the Prescribed Minimum Benefits. For a full list of exclusions, please visit www.discovery.co.za

General exclusion list includes:

Cosmetic procedures and treatments

- Otoplasty for bat ears, port-wine stains and blepharoplasty (eyelid surgery)
- Breast reductions or enlargements and gynaecomastia
- Obesity
- Frail care
- Infertility
- Wilfully self-inflicted illness or injury
- Alcohol, drug or solvent abuse
- Wilful and material violation of the law
- Wilful participation in war, terrorist activity, riot, civil commotion, rebellion or uprising

Waiting periods

If we apply waiting periods because you have never belonged to a medical scheme or you have had a break in membership of more than 90 days before joining Discovery Health Medical Scheme, you will not have access to the Prescribed Minimum Benefits during your waiting periods. This includes cover for emergency admissions. Injuries sustained or healthcare services arising during travel to or in a country at war

- Experimental, unproven or unregistered treatments or practices
- Search and rescue
- Any costs for which a third party is legally responsible

We also do not cover the complications or the direct or indirect expenses that arise from any of the exclusions listed above, except where stipulated as part of a defined benefit or under the Prescribed Minimum Benefits.

If you had a break in cover of less than 90 days before joining Discovery Health Medical Scheme, you may have access to Prescribed Minimum Benefits during waiting periods. In addition to the general exclusions that apply to all plans, KeyCare plans do not cover the following, except where stipulated as part of a defined benefit or under the Prescribed Minimum Benefits.

01 Hospital admissions related to, among others:

- Dentistry
- Nail disorders
- Skin disorders, including benign growths and lipomas
- Investigations and diagnostic work-up
- Functional nasal surgery
- Elective caesarean section, except if medically necessary
- Surgery for oesophageal reflux and hiatus hernia
- Back and neck treatment or surgery
- Knee and shoulder surgery (note: arthroscopies are covered on Essential Smart)
- Joint replacements, including but not limited to hips, knees, shoulders and elbows
- Cochlear implants, auditory brain implants and internal nerve stimulators – this includes procedures, devices and processors
- Healthcare services that should be done out of hospital and for which an admission to hospital is not necessary

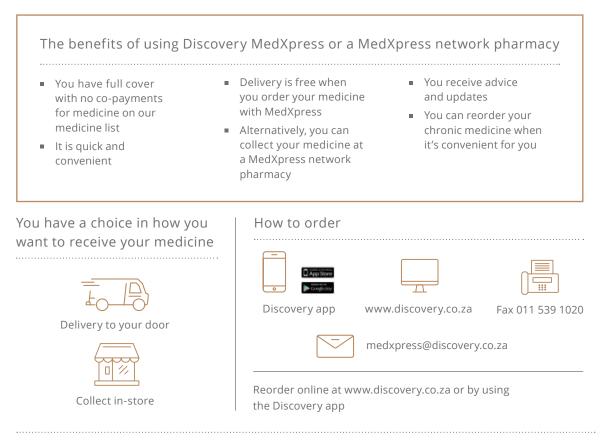
- **02** Correction of hallux valgus (bunion) and Tailor's bunion (bunionette)
- 03 | Removal of varicose veins
- 04 | Refractive eye surgery
- 05 | Non-cancerous breast conditions
- **06** Healthcare services outside South Africa (note: covered on Essential Smart)

Fools and services to improve your health

MedXpress

Convenient medicine ordering service

Discovery MedXpress is a convenient cost-effective medicine ordering service, particularly for monthly chronic medicine. Using Discovery MedXpress or a MedXpress network pharmacy will ensure you get favourable rates for your approved chronic medicine.



MedXpress is brought to you by Discovery Health (Pty) Ltd, registration number 1997/013480/07, an authorised financial services provider. To find a MedXpress network pharmacy, visit www.discovery.co.za

Discovery HomeCare

Quality care in the comfort of your own home

Discovery HomeCare is a unique home-based service that offers you quality care in the comfort of your own home, with minimum disruption to your normal routine and family life.

Care offered	What is covered
Postnatal care	We will cover three day visits by a midwife if mother and baby are healthy and if your gynaecologist /obstetrician discharges you a day earlier from hospital.
End-of-life care	End-of-life care provided by nurses or care workers in partnership with the Hospice Palliative Care Association of South Africa. Cancer patients have access to this service through the Advanced Illness Benefit.
IV infusions (drips)	The administration of IV antimicrobials, iron treatment, steroids and immunoglobulins for patients whose condition is stable and who do not require hospital admission.
Wound care	Wound care for venous ulcers, diabetic foot ulcers, pressure sores and other moderate to severe wounds for patients whose condition is stable and who do not require hospital admission.

These services are paid from the Hospital Benefit, subject to approval.

Give your doctor consent to view your health records

⊗Discovery HealthID

HealthID is Discovery Health's market leading app that gives your doctor fast, up-to-date access to your health information. Once you have given consent, your doctor can use HealthID to access your medical history, gain insight into the benefits of your health plan, make referrals to other healthcare professionals, study your blood test results, and write electronic prescriptions and referrals.

or or 3 **Discovery** website SMS 31347 Discovery app On the 'Health' tab in the Log in to www.discovery.co.za SMS, Consent3, date of birth Discovery app, select "Doctor(s) to manage consent. and doctor's individual practice number to 31347. Consent" to give consent. For example: Consent3,19720726,1543261 Download on the App Store Google Play When you give consent, you agree to the terms and conditions as listed on www.discovery.co.za

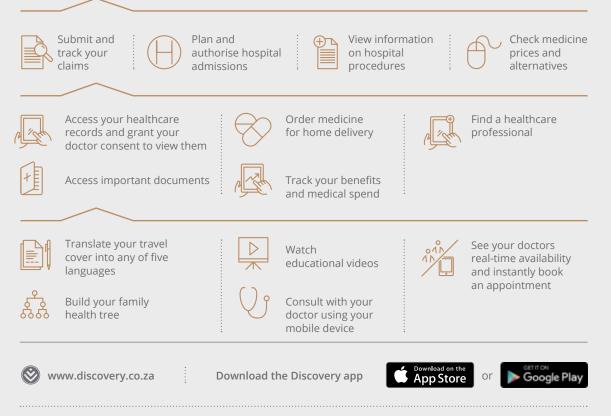
You can revoke your consent at any time using your logged in profile or by calling us.

These are the ways you can give your consent before you see your doctor

HealthID is brought to you by Discovery Health (Pty) Ltd, registration number 1997/013480/07, an authorised financial services provider.

Go digital with Discovery Your health 24/7

The Discovery app and website have both been purpose-built to help you get the most out of your health plan



HealthID is brought to you by Discovery Health (Pty) Ltd, registration number 1997/013480/07, an authorised financial services provider.

Exclusive access to value-added healthcare offers

Our members have exclusive access to value-added offers outside of the Discovery Health Medical Scheme benefits and rules that are not available to members of other open medical schemes.



Access to a separate wellness programme

You have the opportunity to join the world's leading science-based wellness programme, Vitality, that encourages you to get healthier. Not only is a healthy lifestyle more enjoyable, it is clinically proven that Vitality members live longer and have lower healthcare costs.



Savings on stem cell banking and semen cryopreservation

You get an exclusive offer with Netcells that gives expectant parents the opportunity to cryogenically store their newborn baby's umbilical cord blood and tissue stem cells and semen preservation for potential future medical use at a discounted rate.



Savings on personal and family care items

You can sign up for HealthyCare, a separate offer that helps reduce your out-of-pocket spend on a vast range of personal and family care products at any Clicks or Dis-Chem. HealthyCare items include a list of baby care, dental care, eye care, foot care, sun care and hand care products, as well as first aid and emergency items and over-the-counter medicine.

Vitality is not part of Discovery Health Medical Scheme. Vitality is a separate wellness product sold and administered by Discovery Vitality (Pty) Ltd, registration number 1999/007736/07, an authorised financial services provider. HealthyCare is brought to you by Discovery Vitality (Pty) Ltd, registration number 1997/007736/07, an authorised financial services provider. Netcells is brought to you by Discovery Health (Pty) Ltd, registration number 1997/00736/07, an authorised financial services provider. Netcells is brought to you by Discovery Health (Pty) Ltd, registration number 1997/013480/07, an authorised financial services provider.

Complaints

Discovery Health Medical Scheme is committed to providing you with the highest standard of service and your feedback is important to us. The following channels are available for your complaints and we encourage you to follow the process.

Step 1 | To take your query further

If you have already contacted us and feel that your query has still not been resolved, please complete our online complaints form on **www.discovery.co.za**. We would also love to hear from you if we have exceeded your expectations.

Step 2 | To contact the Principal Officer

If you are still not satisfied with the resolution of your complaint after following the process in step 1, you are able to escalate your complaint to the Principal Officer of the Discovery Health Medical Scheme by completing the online form on www.discovery.co.za or by emailing principalofficer@discovery.co.za.

Step 3 | To lodge a dispute

If you have received a final decision from Discovery Health Medical Scheme and want to challenge it, you may lodge a formal dispute. You can find more information on the Scheme's disputes process on the website.

Step 4 | To contact the Council for Medical Schemes

Discovery Health Medical Scheme is regulated by the Council for Medical Schemes (CMS). You may contact the CMS at any stage of the complaints process but are encouraged to follow the steps above to resolve your complaint before contacting the CMS directly. Members who wish to approach the Council for Medical Schemes for assistance, may do so in writing to: Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch – Hazel Avenue, Eco Park, Centurion, 0157 or email complaints@medicalschemes.com. Customer care centre: 0861 123 267 / www.medicalschemes.com

Discovery Health Medical Scheme

Contact Centre 0860 99 88 77 | healthinfo@discovery.co.za | www.discovery.co.za





www.discovery.co.za

Discovery Health Medical Scheme is regulated by the Council for Medical Schemes.