

Member Presentation

2017 Benefits and Contributions



1. Scheme Performance 2016
2. Changes for 2017
3. Benefits 2017
4. Contributions 2017
5. Plan Change Process
6. Questions



1. Scheme performance 2016



Scheme performance in 2016

- Number of claims up
- Hospital costs up
- Specialist costs up
- Medicine costs up
- Members' age up
- Number of members down

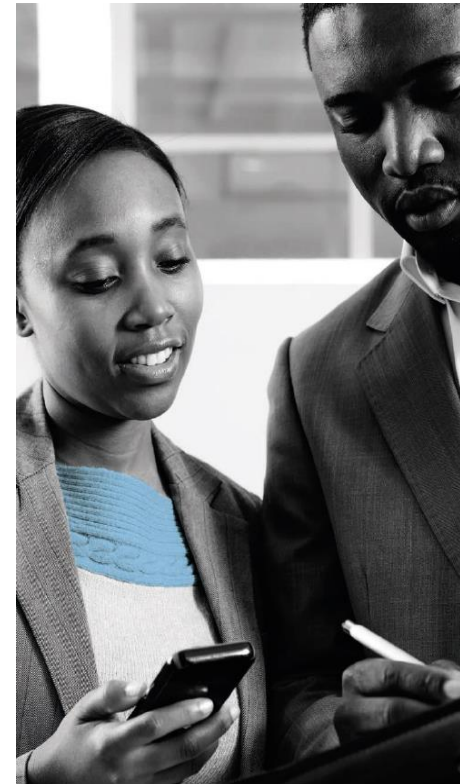
= Difficult year for the Anglo Medical Scheme
Most schemes experienced a bad 2016



Scheme performance from 2014 - 2016

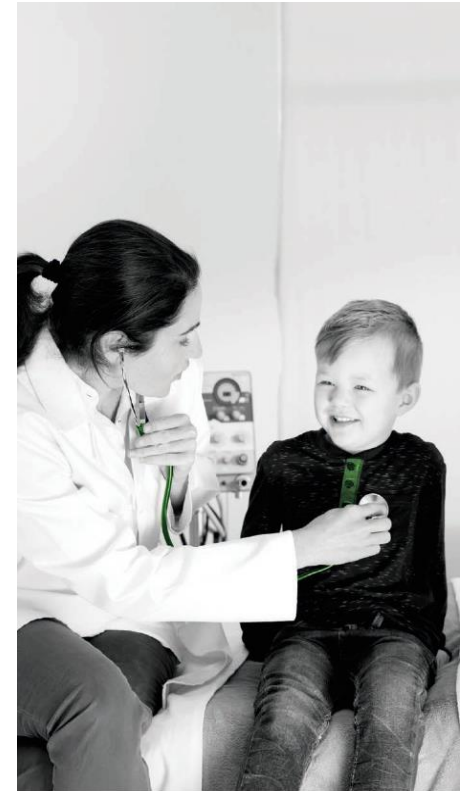
- Benefit improvements in 2014, 2015 and 2016
- Low contribution increase in 2016
- R130 million used from reserve money to pay claims

= AMS Plans - inexpensive and more comprehensive benefits compared to other similar plans



Scheme performance 2016 (Cont.)

- R150 million from reserves will be added to member contributions to pay 2017 claims
 - Each year more reserve money will be needed to pay claims as members age and costs increase
- = No more extra reserve money left to keep contributions low or improve benefits any further
- = Going forward, contributions will increase annually at a rate similar to other schemes

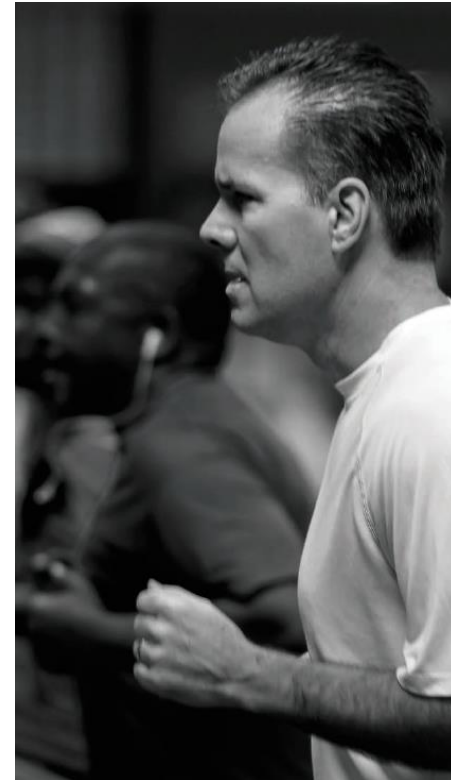


2. Changes for 2017



Managed Care Plan (MCP) and Standard Care Plan (SCP)

- Scheme Reimbursement Rate (SRR) increased by **6%**
- Benefit limits increased by **6%**



NEW

Introduction of Day Clinic Networks on MCP and SCP for certain procedures with no co-payment:

- **Endoscopic procedures** (Non-PMB gastroscopy, colonoscopy, sigmoidoscopy, proctoscopy used to investigate the digestive system)
- **Cataract surgery** with intra-ocular lens replacement

Co-payments will apply if procedures are not performed in accredited Day Clinic/Facility

Co-payments

- A co-payment of **R3 350** is payable by the member if admitted to hospital for a **non-PMB endoscopic investigation**
- No co-payment will be due in respect of a PMB condition



Co-payments

- A co-payment of **R1 000** is payable by the member if admitted to a non-designated Network hospital for **cataract surgery** and lens implants
- A list of facilities can be obtained by calling the call centre or visiting the website at www.angloms.co.za



NEW

The Compassionate Care Benefit - extends the current Hospice Benefit. It provides home-based terminal care, including pain management, general nursing care and supportive care to members at the end of their lives.

The Advanced Illness Benefit - offers members suffering from terminal cancer home based personal care including oxygen and wound care, home nursing, pain management, pathology and doctor consultations where needed.

Value Care Plan

- Scheme Reimbursement Rate (SRR) increased by **5%** on average
- Benefit limits increased by **5%**



3. 2017 Benefits



	Managed Care Plan	Standard Care Plan	Value Care Plan Subject to Prime Cure Network
Hospital Limit	None	None	R150 000 per family, sub-limit of R65 000 in a Prime Cure Private Hospital Network per family
Hospital co-payment required (non-PMB conditions) <i>Non-refundable</i>	R355 per day to a maximum of R1 065 per admission (Includes day cases except <i>endoscopic</i> and <i>cataract</i> procedures)	R160 per day to a maximum of R480 per admission (Includes day cases except <i>endoscopic</i> and <i>cataract</i> procedures)	Where no pre-authorisation is obtained for elective admissions by the member or provider of service, the member will be liable for a co-payment of R2 000

	Managed Care Plan	Standard Care Plan	Value Care Plan Subject to Prime Cure Network
Internal surgical prosthesis	100% of cost R121 430 per beneficiary per annum	100% of cost R57 260 per beneficiary per annum	100% of Prime Cure cost subject to sublimit of R24 800 per family and the overall Family Hospital limit
Professional services	230% of SRR (GAP cover) in hospital, excluding Radiology, Pathology and Auxiliary services NB! Procedures performed in Doctors Rooms in lieu of hospitalisation will be paid up to GAP	100% of SRR	100% of Prime Cure cost subject to the overall Family Hospital limit Prime Cure Private Hospital Network sublimit: R65 000 per family (unless PMB)

	Managed Care Plan	Standard Care Plan	Value Care Plan Subject to Prime Cure Network
Out-of-Hospital Services	No Limit Subject to Medical Savings Account	<p>Overall Out-of-Hospital Family limit of:</p> <p>Adult R4 600 Child R2 295</p> <p>The above includes:</p> <p><u>Sublimit 1:</u> Consultations, Visits out of Hospital, Acute Medication, PAT to a sublimit of: Adult R4 315 Child R2 155 and <u>Sublimit 2:</u> Alternative Health Care & Auxiliary Health Services to a sublimit of: Adult R2 970 Child R620</p>	<p>Unlimited</p> <p>Authorisation to be obtained after 6 consultations</p> <p>Out-of-Network Consultations: Limit of R900 per consultation + 20% co-payment per visit at the SRR</p> <p>One visit per beneficiary, maximum of two visits per family per annum</p>

	Managed Care Plan	Standard Care Plan	Value Care Plan Subject to Prime Cure Network
GP & Specialists (non- PMB)	<p>GP Network Benefit (voluntary use)</p> <p>No co-payment for out-of-hospital consultations at GPs on the Discovery Network - Paid from MSA</p> <p>Treatment of general conditions by Specialists (excluding radiologists and pathologists) paid up to 125% of SRR</p>	<p>Sublimit 1: Consultations, Visits out of Hospital, Acute Medication, PAT to a sublimit of:</p> <p>Adult R4 315</p> <p>Child R2 155</p>	<p>Specialist Consultations:</p> <p>Limits for non-PMB visits:</p> <p>R3 100 per family</p> <p>Limited to 5 consultations per family and a maximum of 3 visits per beneficiary</p> <p>30% co-payment will be applied for voluntary use of non-designated service provider</p>

	Managed Care Plan	Standard Care Plan	Value Care Plan Subject to Prime Cure Network
Acute medication & Injection Material	100% of cost subject to MSA	<u>Sublimit 1:</u> Consultations, Visits out of Hospital, Acute Medication, PAT to a sublimit of: Adult R4 315 Child R2 155	Formulary medication only No Limit
Homeopathic medicines			No benefit
PAT medicine			PAT medicine: R95 per prescription, 5 prescriptions per family every 3 months

	Managed Care Plan	Standard Care Plan	Value Care Plan Subject to Prime Cure Network
PMB Chronic medication <i>26 conditions</i>	100% of SEP subject to Reference Price List and registration by doctor or pharmacist 0860 222 633	100% of SEP subject to Reference Price List and registration by doctor or pharmacist 0860 222 633	Subject to medicine formulary and registration by doctor 0861 665 665
Non-PMB Chronic medication <i>43 conditions</i>	100% of SEP subject to Reference Price List and the Non-PMB Chronic Medication limit of: R15 305 per beneficiary Registration by doctor or pharmacist 0860 222 633	100% of SEP subject to Reference Price List and the Non-PMB Chronic Medication limit of: R3 960 per beneficiary Registration by doctor or pharmacist 0860 222 633	No benefit

	Managed Care Plan	Standard Care Plan	Value Care Plan Subject to Prime Cure Network
Dentistry	<p>100% of SRR subject to Dentistry Family limit: Adult R3 320 Child R1 245</p> <p>Primary care and specialised dentistry (Excess may be paid from MSA)</p>	<p>100% of SRR subject to Dentistry Family limit: Adult R2 770 Child R705</p> <p>Primary care and specialised dentistry</p>	<p>Emergency Dental visit: 1 event per beneficiary</p> <p>Dental hospital admissions: children under 7 and trauma (PMB related) subject to authorization 0861 665 665</p> <p>Specialised Dentistry Benefit: 1 set of dentures per family every 2 years and 20% co-payment</p>
Optometry (DH Network – up to 20% discount)	<p>100 % of cost subject to Medical Savings Account</p>	<p>Eye test: R345 per beneficiary</p> <p>Spectacles Family Limit: R1 910</p>	<p>1 eye test per year</p> <p>1 pair of spectacles per beneficiary every 2 years</p>

	Managed Care Plan	Standard Care Plan	Value Care Plan Subject to Prime Cure Network
Out-of-Hospital Pathology	<p>100 % of SRR No limit</p> <p>PMBs - subject to registration and protocols 0860 222 633</p>	<p>100% of SRR subject to Pathology Family limit: Adult R1 165 Child R420</p> <p>PMBs - subject to registration and protocols 0860 222 633</p>	<p>Subject to approved tests</p> <p>Programme registration for PMB conditions 0861 665 665</p>
Out-of-Hospital Radiology	<p>100 % of SRR No limit</p> <p>PMBs - subject to registration and protocols 0860 222 633</p>	<p>100% of SRR subject to Radiology Family limit: Adult R1 520 Child R920</p> <p>PMBs - subject to registration and protocols 0860 222 633</p>	<p>100% Prime Cure approved radiology tariff for basic x-rays R16 100 per family (combined limit for in- and out-of-hospital specialised radiology including CT and MRI scans)</p> <p>Programme registration for PMB conditions 0861 665 665</p>

	Managed Care Plan	Standard Care Plan	Value Care Plan Subject to Prime Cure Network
Cancer Treatment	<p>100% of SRR Subject to registration and treatment protocols 0860 222 633</p>	<p>100% of SRR Subject to registration and treatment protocols 0860 222 633</p>	<p>Subject to Family Hospital limit: R150 000 unless PMB Subject to authorisation, referral by a Prime Cure practitioner and treatment protocols 0861 665 665</p>
Maternity	<p>100% of SRR Subject to registration</p> <p>12 consultations; and 2 ultrasound scans (2D) per pregnancy</p>	<p>100% of SRR Subject to registration</p> <p>8 consultations and 2 ultrasound scans (2D) per pregnancy</p>	<p>100% of Prime Cure tariff subject to registration</p> <p>2 specialist visits, 2 ultrasounds per pregnancy All costs including confinement subject to overall Family Hospital limit</p>

	Managed Care Plan	Standard Care Plan	Value Care Plan subject to Prime Cure network
HIV/ AIDS Confidential programme	100% of SRR subject to registration Optipharm will supply your medication after registration with One Health 0860 143 258	100% of SRR subject to registration Optipharm will supply your medication after registration with One Health 0860 143 258	100% of Prime Cure Tariff Subject to medicine formulary and registration by doctor 0861 665 665
Kidney Disease	100% of SRR subject to registration and treatment protocols 0860 222 633	100% of SRR subject to registration and treatment protocols 0860 222 633	Subject to overall Family Hospital limit: R150 000 (unless PMB), registration and treatment protocols 0861 665 665

	Managed Care Plan	Standard Care Plan	Value Care Subject to Prime Cure Network
<p>Auxiliary Health Services</p> <p>Acupuncture, audiology, homeopathy, osteopathy, physiotherapy and private nursing</p>	<p>100% of cost subject to MSA</p>	<p><u>Sublimit 2:</u> Auxiliary Health Services to a sublimit of: Adult R2 970 Child R620</p>	<p>Out-of-Hospital services: Limited to R1 600 per beneficiary, maximum of R2 400 per family</p> <p>No private nursing benefit</p>
<p>Frail Care</p>	<p>100% of SRR with a limit of R61 075 per beneficiary</p> <p>Subject to authorisation 0860 222 633</p>	<p>No benefit</p>	<p>No benefit</p>

	Managed Care Plan	Standard Care Plan	Value Care Plan Subject to Prime Cure Network
Medical & Surgical Appliances	<p>Family Limit: R13 890</p> <p>Authorisation required for appliances in excess of R1 000</p> <p>0860 222 633</p>	<p>Family limit: R8 195</p> <p>Authorisation required for appliances in excess of R1 000</p> <p>0860 222 633</p>	No benefit
Hearing Aids	<p>R17 480 per Hearing Aid every 2 years</p> <p>Subject to authorisation and clinical motivation by ENT for beneficiaries younger than 60yrs</p> <p>0860 222 633</p>	<p>Subject to Medical and Surgical Appliance Family limit. Limited to one pair every 2 years</p> <p>Subject to authorisation and clinical motivation by ENT for beneficiaries younger than 60yrs</p> <p>0860 222 633</p>	No benefit

	Managed Care Plan	Standard Care Plan	Value Care Plan subject to Prime Cure network
Wheelchair	<p>R21 855 per beneficiary every two years</p> <p>Subject to authorisation 0860 222 633</p>	<p>One per beneficiary every two years</p> <p>Subject to Medical & Surgical Appliances Family limit</p> <p>Subject to authorisation 0860 222 633</p>	No benefit

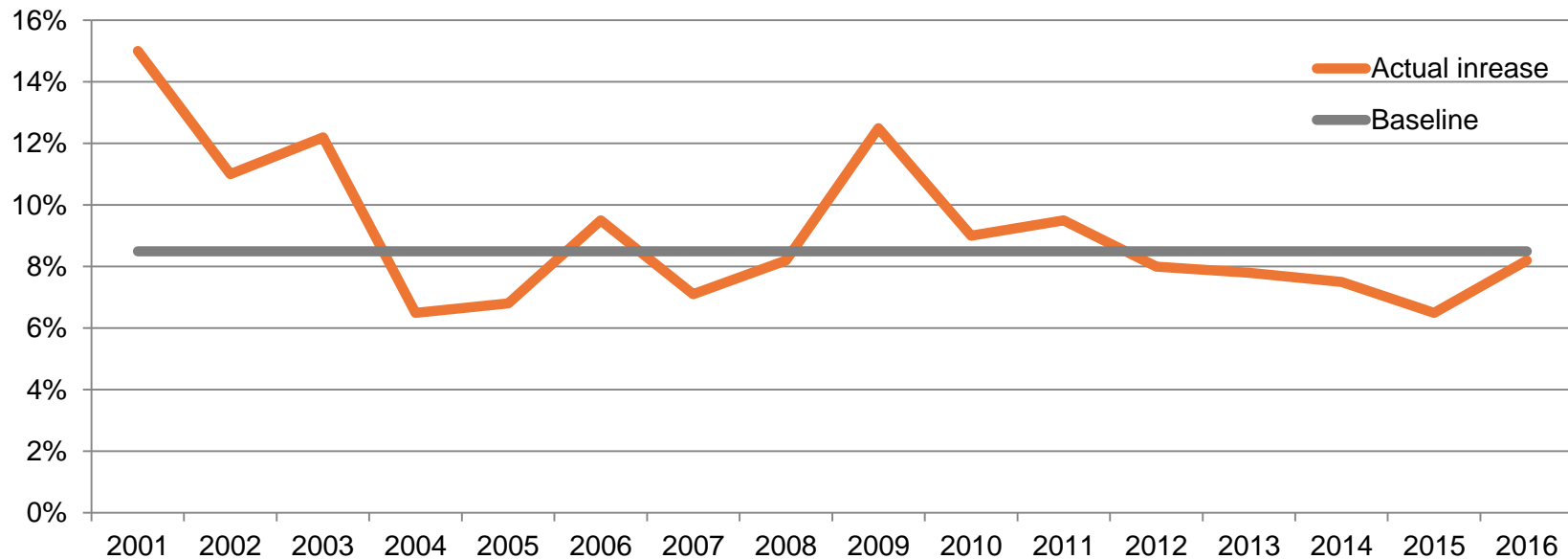
4. Contributions



Contribution increases

- Scheme increases have been low compared to the industry since 2011
- Bad 2015 / 2016 claims experience across the industry
- Expected 2017 industry average increase between 11% and 14%
- **Anglo Medical Scheme average contribution increase for 2017: 11.5%**

Contribution increases in %



Baseline is the Scheme's required contribution increase to maintain the long term funding.

Contribution increases in % and ZAR

	%	2014 ZAR	%	2015 ZAR	%	2016 ZAR	%	2017 ZAR
MCP	7%	Adult: R195 Child: R45	6,5%	Adult: R195 Child: R47	7,5%	Adult: R235 Child: R55	11,6%	Adult: R395 Child: R95
SCP	8%	Adult: R118 Child: R35	6,5%	Adult: R104 Child: R33	8,5%	Adult: R145 Child: R45	11,7%	Adult: R215 Child: R65
VCP	5%	Adult: R29 Child: R7	6,5%	Adult: R41 Child: R11	8,9%	Adult: R50 Child: R25	6,9%	Adult: R50 Child: R10

Total contributions

including the monthly savings amount on the MCP

	Managed Care Plan	Standard Care Plan	Value Care Plan
Principal Member	R 3 800	R 2 060	R750
Adult Dependant	R 3 800	R 2 060	R750
Child Dependant	R 880	R 620	R185

Monthly Savings Allocation

Managed Care Plan	Monthly	Annual
Adult	R950	R11 400
Child	R220	R 2 640



5. Plan Change Process



Option change form

Submit option changes by
31 December 2016

If you change plans, consult
with your Client Liaison
Officer, HR Officer or Pension
Office

> **if you buy up**, understand
your company subsidy

> **If you buy down**,
understand the benefit
limitations

Plan change request

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MEDICAL
SCHEME

- Only the employer or pension fund can instruct the Scheme on option changes.
- The option change will be effective 1 January.
- The option change will apply to the main member and dependants.
- Please return the completed form to your employer or pension fund before 31 December to make sure your request is captured.
- If you are a direct paying member, please submit this form to the Scheme.

1. MEMBER DETAILS

Member name

Telephone (H) (W)

Cellphone Fax

Email

Member number Payroll number

I want to change my Plan with effect

Signature of member Date

Ensure you understand the financial and, if relevant, subsidy implications of your requested change or discuss it with your HR Department or Pension Office.

Change from:

Managed Care Plan R

Standard Care Plan R

Value Care Plan R

To:

Managed Care Plan R

Standard Care Plan R

Value Care Plan R

2. EMPLOYER OR PENSION FUND APPROVAL (IF APPLICABLE)


Name

Phone Approved Yes No


Signature


- 
- Direct paying member

- 
- Complete Plan Change Request form and submit to Scheme

- 
- Fax: 011 539 1015 or
 - E-Mail: member@angloms.co.za

- 
- Employer / Pension Fund

- 
- Electronic processing of Option Change Request by Employer/Pension Fund

- 
- Fax: 011 539 1015 or
 - E-Mail: employer@angloms.co.za

Cut-off date: 31 December 2016

Questions?

**We wish you a Merry Christmas and
a Healthy New Year!**

www.angloms.co.za

