

Benefit and Contribution comparison

2018

Benefits and contributions for 2018

Below is a summary of the current benefits and contributions. For more information, please refer to the [Benefit Guide](#) or to [Plans & Products](#) on our website.

Every member receives a printed copy of the Benefit Guide at the end of each calendar year. New members will receive the current Benefit Guide upon joining the Scheme. The Benefit Guide is a summary of the Scheme's [Rules](#).

Abbreviations

Main member	MM
Spouse	SP
Prescribed Minimum Benefits	PMB
Medical Savings Account	MSA
Scheme Reimbursement Rate	SRR
Per annum	p.a.
Per beneficiary	p.b.
Per family	p.f.
Pharmacy Advised Therapy	PAT
Single Exit Price	SEP
Designated Service Provider	DSP
















Benefits per annum unless otherwise specified

Standard Care Plan Benefits: Paid at 100% of SRR, **or** negotiated rate, **or** at cost if PMB







Managed Care Plan Benefits: Paid at 100% of SRR, Top-Up rate, **or** negotiated rate, **or** at cost if PMB


Value Care Plan Benefits: Prime Cure agreed rate

Benefits




Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
ALCOHOL AND DRUG TREATMENT			
Programme			
Authorisation required	 0860 222 633	 0860 222 633	 0861 655 665
Designated Service Provider	SANCA	SANCA	No
Hospitalisation	100% of SRR limited to 21 days p.b.	100% of SRR limited to 21 days p.b.	100% of Price Cure approved rate limited to 21 days p.b.
Consultations and medicine in hospital according to SANCA guidelines	100% of SRR	100% of SRR	100% of the Prime Cure agreed rate
Consultations and medicine out of hospital according to the SANCA guidelines	100% of cost, subject to MSA	100% of SRR 100% of SEP, dispensing fee, Reference Price List, subject to Out of hospital services Sublimit 2 for consultations, acute medicine and PAT, and the Overall Out of Hospital Family Limit	No benefit
AMBULANCE SERVICES			
Authorisation required	 082 911	 082 911	 0861 665 665
Designated Service Provider	Netcare 911 Voluntary use of non-DSP results in 20% co-payment	Netcare 911 Voluntary use of non-DSP results in 20% co-payment	Prime Cure network providers
CANCER TREATMENT			
Oncology Management Programme			
Registration required	 0860 222 633	 0860 222 633	 0861 665 665
Chemotherapy and radiotherapy according to approved treatment plan	100% of SRR	100% of SRR	Treatment at Prime Cure facilities or network hospitals subject to referral by a Prime Cure practitioner

Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
DENTISTRY			
<p>Basic dentistry: fillings, X-rays, extractions and oral hygiene</p>	<p>100% of SRR, subject to the Dentistry Family Limit: Adult: R3 485 Child: R1 300</p> <p>Cost in excess of the SRR may be paid from funds available in the MSA</p> <p>Member to instruct the Scheme in every instance to pay the excess</p> <p>All dentistry costs lodged after the depletion of the Dentistry Benefit will automatically fund from available funds in the MSA</p>	<p>Unlimited, subject to DSP and protocol management</p> <p>Basic Dental Services p.b. every 180 days: One consultation One scaling, polishing and fluoride treatment Two intra-oral radiographs per visit One local anaesthetic per visit Four extractions Five restorations (amalgam or resin) One pair of plastic dentures every 4 years including One relining and repair p.b. per year</p>	<p>Treatment at Prime Cure facilities or Prime Cure network practitioners limited to: Conservative treatments (fillings, x-rays, extractions and consultations): One consultation p.b.</p> <p>Emergency visits: One event p.b.</p> <p>Preventative treatment (fluoride, cleaning, scaling and polishing): One treatment p.b.</p> <p>Hospital admissions: Dental procedures for children under seven years, subject to the Family Hospital Limit and authorisation</p> <p>Prime Cure – 0861 665 665</p>
<p>Additional Basic and Specialised dentistry: crowns, bridges, inlays, study models, dentures, orthodontics and periodontics</p>	<p>100% of SRR, subject to the Dentistry Family Limit: Adult: R3 485 Child: R1 300</p> <p>Costs in excess of the SRR may be paid from funds available in the MSA</p> <p>Member to instruct the Scheme in every instance to pay the excess</p> <p>All dentistry costs lodged after the depletion of the Dentistry Benefit will automatically fund from available funds in the MSA</p> <p>Implants done in hospital require authorisation and will be paid according to the Dentistry Family Limit or available MSA</p>	<p>100% of SRR, subject to the Dentistry Family Limit: Adult: R1 260 Child: R315</p> <p>Implants done in hospital require authorisation and will be paid according to the Dentistry Family Limit</p>	<p>No benefit except the payment of one set of dentures p.f. every two years, subject to a 20% co-payment</p>




Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
MAXILLO-FACIAL AND ORAL SURGERY IN HOSPITAL			
Authorisation required	 0860 222 633	 0860 222 633	 0861 665 665
Surgery including in hospital services	230% of SRR PMB cover only Member can use available funds in the MSA for non-PMB procedures	100% of SRR PMB cover only	Treatment at Prime Cure facilities or network hospitals subject to referral by a Prime Cure practitioner PMB cover only
Osseo-integrated implants or similar tooth implants	125% of SRR, subject to the Dentistry Family Limit: Adult: R3 485 Child: R1 300 Costs in excess of the SRR may be paid from funds available in the MSA Member to instruct the Scheme in every instance to pay the excess All dentistry costs lodged after the depletion of the Dentistry Benefit will automatically fund from available funds in the MSA	100% of SRR, subject to the Dentistry Family Limit: Adult: R1 260 Child: R315	No benefit
DIABETES			
Registration required	 011 053 4400	 011 053 4400	 0861 665 665
Designated Service Provider	CDE	CDE	Prime Cure Provider
Diabetes related medication	CDE One month's supply at a time	CDE One month's supply at a time	Available at Prime Cure facilities, Formulary Medicine List One month's supply at a time
Diabetes related services (i.e. pathology, consultations, dietician, podiatry etc.)	CDE	CDE	Treatment at Prime Cure facilities

Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
ENDOSCOPIES			
Endoscopies (gastrosopies, colonoscopies, sigmoidoscopies and proctoscopies)	<p>Co-payment: R3 350 when performed in hospital</p> <p>No co-payment: When performed in accredited doctor's rooms or registered day clinic</p>	<p>Co-payment: R3 350 when performed in hospital</p> <p>No co-payment: When performed in accredited doctor's rooms or registered day clinic</p>	N/A
EYE CARE			
Eye examination	100% of cost, subject to available funds in the MSA	R360 p.b.	One eye examination p.b. at Prime Cure facilities or network providers
Lenses, frames and refractive surgery	100% of cost, subject to available funds in the MSA 20% discount on frames and eyeglass lenses when you visit an optometrist in the Optometry Network	100% of cost, subject Optometry Family Limit: R2 000 (excluding refractive surgery) 20% discount on frames and eyeglass lenses when you visit an optometrist in the Optometry Network	One pair of spectacles p.b. every two years at Prime Cure facility network providers No benefit for refractive surgery
Cataract surgery for intra-ocular lens replacement	<p>Co-payment: R1 000 per cataract surgery for intra-ocular lens replacement when performed in hospital</p> <p>No co-payment: When performed in an accredited ophthalmologist's rooms or registered day clinic</p>	<p>Co-payment: R1 000 per cataract surgery for intra-ocular lens replacement when performed in hospital</p> <p>No co-payment: When performed in an accredited ophthalmologist's rooms or registered day clinic</p>	N/A
FRAIL CARE			
Authorisation required	 0860 222 633	No benefit	No benefit
Medically-related Frail Care services	100% of SRR, subject to R64 130 p.b. Scheme Clinical entry criteria will apply for approved Frail Care facilities or nursing care provided at home by a Registered Nursing Agency	No benefit	No benefit

Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
HIV/AIDS			
HIV/AIDS Disease Management Programme	Y	Y	Y
Registration required	Y 0860 222 633	Y 0860 222 633	Y 0861 665 665
Medicine – Designated Service Provider	Dis-Chem Direct 011 589 2788	Dis-Chem Direct 011 589 2788	Medicine available at Prime Cure facilities
Medicine obtained directly from the Designated Service Provider	100% of SRR One month's supply at a time	100% of SRR One month's supply at a time	100% of Prime Cure Rate subject to Formulary Medicine List One month's supply at a time
HOSPICE			
Hospice: in- and out-patient homecare instead of hospitalisation	100% of SRR if registered on Disease Management Programme	100% of SRR if registered on Disease Management Programme	No benefit
HOSPITALISATION			
Authorisation required	Y 0860 222 633	Y 0860 222 633	Y 0861 665 665
Annual limit	Unlimited	Unlimited	Unlimited in public hospitals, subject to a Family Hospital Limit of R150 000 . Sublimit of R65 000 p.f. in a Prime Cure Private Hospital Network
Top-Up Cover	230% of SRR for professional services in hospital (excl. pathology, radiology, alternative and allied health care services)	No benefit	No benefit
Non-PMB admission co-payment (including day cases)	R370 per day to a maximum of R1 100 for an admission	R170 per day up to a maximum of R510 for an admission	None – where no authorisation obtained, co-payment of R2 000 for an admission
PMB admission	100% of SRR – no limit	100% of SRR – no limit	100% of Prime Cure approved public and private hospital rate if referred by Prime Cure provider
Non-PMB admission	100% of SRR – no limit	100% of SRR – no limit	100% of Prime Cure approved public and private hospital rate if referred by Prime Cure provider subject to the Family Hospital Limit. No benefit for dental extractions in hospital
TTO medicine (to-take-out medicine)	100% of SEP limited to medicine for seven days	100% of SEP limited to medicine for seven days	100% of Prime Cure formulary list. Limited to medicine for seven days








Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
HOSPITALISATION (cont.)			
Internal Surgical Protheses	100% of cost, subject to R127 500 p.b.	100% of cost, subject to R60 125 p.b.	100% of Prime Cure approved costs, subject to R26 000 p.f. and the Family Hospital Limit
Professional services in hospital	230% of SRR for professional services in hospital (excl. pathology, radiology, alternative and allied health care services)	100% of SRR	100% of Prime Cure approved rate subject to the Family Hospital Limit. Psychiatric services limited to five days for an admission up to a maximum of R7 200 p.f. Auxiliary services: Physiotherapy, dietetics, occupational and speech therapy, podiatry, social worker and allied professionals, subject to combined limit of R7 200 p.f.
Procedures in-lieu of hospitalisation	Subject to Scheme protocols Specialist: 230% of SRR Network GP: Healthcare providers in the network at agreed network rate Non-network GP: 100% of SRR	Subject to Scheme protocols 100% of SRR	No benefit
Blood transfusion	100% of cost	100% of cost	100% of Prime Cure approved rate, limited to R14 800 p.f.
Step-down facilities	100% of SRR, subject to Scheme protocols	100% of SRR, subject to Scheme protocols	No benefit
KIDNEY DISEASE			
Authorisation required	 0860 222 633	 0860 222 633	 0861 665 665
Haemo/peritoneal dialysis according to approved treatment plan	100% of SRR	100% of SRR	100% of Prime Cure approved rate if referred by Prime Cure practitioner (PMB cover only)

Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
MATERNITY			
Maternity Management	Y	Y	N
Registration required	Y 0860 222 633 Register between weeks 12 and 20 of the pregnancy to qualify for benefits	Y 0860 222 633 Register between weeks 12 and 20 of the pregnancy to qualify for benefits	All costs, including confinement costs, subject to Family Hospital Limit and authorisation on 0861 665 665
Ante and post-natal consultations	Gynaecologist: 125% of SRR GP/Midwife: 100% of SRR Twelve consultations and two ultrasound scans (2D) for a pregnancy subject to registration	Gynaecologist: 100% of SRR GP/Midwife: 100% of SRR Eight consultations and two ultrasound scans (2D) for a pregnancy subject to registration	100% of Prime Cure agreed rate Two specialist visits and two ultrasound scans (2D) for a pregnancy
Confinement	Gynaecologist: 230% of SRR GP/Midwife: 100% of SRR	100% of SRR	100% of Prime Cure approved public hospital fees, subject to authorisation and referral by a Prime Cure practitioner limited to the Family Hospital Limit
MEDICAL AND SURGICAL APPLIANCES			
Annual limit	R14 585 p.f.	R8 600 p.f.	No benefit
Authorisation required	Y 0860 222 633 Appliances in excess of R1 000, Wheelchairs and Hearing Aids	Y 0860 222 633 Appliances in excess of R1 000, Wheelchairs and Hearing Aids	No benefit
Appliances	100% of the cost of appliance, subject to the Medical and Surgical Appliances Family Limit If claim submitted at point of sale by pharmacy, NAPPI pricing will apply	100% of the cost of appliance, subject to the Medical and Surgical Appliances Family Limit If claim submitted at point of sale by pharmacy, NAPPI pricing will apply	No benefit
Hearing Aids	100% of cost for a pair of Hearing Aids every two years, subject to the Hearing Aid Benefit: R36 710 p.b. Prescription by ENT specialist for beneficiaries younger than 60 years and authorisation required	100% of cost for a pair of Hearing Aids every two years, subject to the Medical and Surgical Appliance Family Limit Prescription by ENT specialist for beneficiaries younger than 60 years and authorisation required	No benefit

Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
MEDICAL AND SURGICAL APPLIANCES (cont)			
Wheelchair	100% of cost limited to one wheelchair every two years, subject to the Wheelchair Benefit: R22 950 p.b. If claim submitted at point of sale by pharmacy, NAPPI pricing will apply	100% of cost limited to one wheelchair every two years, subject to the Family Medical and Surgical Appliance Limit If claim submitted at point of sale by pharmacy, NAPPI pricing will apply	No benefit
MEDICINE ACUTE			
Acute medicine and injection material	100% of SEP and dispensing fee Subject to available funds in the MSA	100% of SEP, dispensing fee and Reference Price List Subject to Out of Hospital services Sublimit 2 for consultations, acute medicine and PAT, and the Overall Out of Hospital Family Limit	Available at Prime Cure facilities and providers, subject to medicine formulary and prescribed by Prime Cure practitioner
Homeopathic medicine	100% of cost, subject to available funds in the MSA	100% of SEP and dispensing fee for NAPPI coded medicine, prescribed or dispensed by a registered homeopath Subject to Out of Hospital services Sublimit 2 for consultations, acute medicine and PAT, and the Overall Out of Hospital Family Limit	No benefit
PAT medicine (over-the-counter medicine)	100% of cost, subject to available funds in the MSA	100% of SEP and dispensing fee Subject to Out of Hospital services Sublimit 2 for consultations, acute medicine and PAT, and the Overall Out of Hospital Family Limit. Limited to R100 per purchase to a maximum of five purchases for a family every three months	Available at Prime Cure facilities, subject to medicine formulary list and R90 per purchase up to a maximum of three prescriptions p.b. and R270 p.b. per annum
MEDICINE CHRONIC			
Authorisation required	 0860 222 633	 0860 222 633	 0861 665 665
PMB chronic medicine	100% of SEP and dispensing fee, subject to Reference Pricing Generic medicine, where appropriate will prevent co-payments One month's supply at a time	100% of SEP and dispensing fee, subject to Reference Pricing Generic medicine, where appropriate will prevent co-payments One month's supply at a time	Available at Prime Cure facilities, subject to registration and Formulary Medicine List One month's supply at a time

Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
MEDICINE CHRONIC (cont.)			
Non-PMB Chronic Medicine	100% of SEP and dispensing fee, subject to Reference Pricing and a Limit of R16 070 p.b. Generic medicine, where appropriate will prevent co-payments One month's supply at a time	100% of SEP and dispensing fee, subject to Reference Pricing and a Limit of R4 160 p.b. Generic medicine, where appropriate will prevent co-payments One month's supply at a time	No benefit
ORGAN TRANSPLANT			
Authorisation required	Y 0860 222 633	Y 0860 222 633	Y 0861 665 665
Hospitalisation, including harvesting of organ, post-operative care, anti-rejection medicine, professional services in hospital, payment of donor	Specialist: 230% of SRR, subject to clinical guidelines All other services 100% of SRR	100% of SRR, subject to clinical guidelines	100% of Prime Cure approved public hospital fees, subject to pre-authorisation and referral by a Prime Cure practitioner and limited to the Family Hospital Limit (PMB cover only)
OUT OF HOSPITAL SERVICES			
Annual limit	Medical Savings Account	Overall Out of Hospital Family Limit: Adult: R4 830 Child: R2 410 Sublimit 1: Family Limit for alternative and allied health care services: Adult: R3 120 Child: R650 and the Overall Out of Hospital Family Limit Sublimit 2: Family Limit for consultations, acute medicine and PAT: Adult: R4 530 Child: R2 265 and the Overall Out of Hospital Family Limit	N/A

Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
GPS & SPECIALISTS			
General Practitioner (GP) and Specialist consultations in rooms (non-PMB)	<p>Network GP: Healthcare providers in the network at agreed network rate, subject to available funds in the MSA</p> <p>Non-network GP: 100% of SRR, subject to available funds in the MSA</p> <p>Specialist: 125% of SRR subject to available funds in the MSA</p>	100% of SRR, subject to Out of Hospital services Sublimit 2 for consultations, acute medicine and PAT, and the Overall Out of Hospital Family Limit	<p>Prime Cure GP Network: No limit for treatment at Prime Cure facilities or Prime Cure network providers</p> <p>Visits after the sixth consultation for a beneficiary requires authorisation</p> <p>Non-Prime Cure Network GP, subject to a co-payment of 20% per visit, authorisation within 72 hours after consultation. R950 for a consultation (including related expenses) p.b. Limited to a maximum of two visits p.f.</p>
			Specialist: Out of hospital services subject to authorisation by Prime Cure. Limited to five consultations p.f. and a maximum of three p.b. Limited to R3 300 p.f.
GP consultations in rooms (PMB) according to treatment plan, subject to registration	<p>Network GP: Healthcare providers in the network at agreed network rate</p> <p>Non-network GP: 100% of SRR</p>	100% of SRR	Treatment at Prime Cure facilities or network provider, according to treatment protocol for a PMB condition
Specialist consultations in rooms (PMB) according to treatment plan, subject to registration	125% of SRR	100% of SRR	Treatment by Prime Cure Provider, according to treatment protocol for a PMB condition
Nursing consultations at Prime Cure Network Wellness Pharmacy Clinic	Not applicable	Not applicable	R250 per visit subject to a Family Limit of R500
Procedures and treatments in rooms	<p>Subject to Scheme protocols and a defined list</p> <p>GP: 100% of SRR</p> <p>Specialist: 125% of SRR</p>	100% of SRR, subject to Out of Hospital services Sublimit 2 for consultations, acute medicine and PAT, and the Overall Out of Hospital Family Limit	Treatment at Prime Cure facilities or network provider

Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
ALTERNATIVE AND ALLIED HEALTH CARE SERVICES			
Alternative and allied health care services	100% of cost subject to available funds in the MSA	100% of SRR, subject to Out of Hospital services Sublimit 1 for alternative and allied health care services, and the Overall Out of Hospital Family Limit	Family limit – Out of hospital: Limit of R1 680 p.b. up to a maximum of R2 530 p.f. A co-payment of 50% of the Prime Cure negotiated cost applies to members who self-refer to a non-Prime Cure provider
Audiology, podiatry, orthotics, dietetics, occupational therapy, speech therapy, physiotherapy, psychology and social services chiropractic services, chiropody, homeopathy, naturopathy, orthotics, prosthetics and acupuncture	100% of cost subject to available MSA	100% of SRR, subject to Out of Hospital services Sublimit 1 for alternative and allied health care services, and the Overall Out of Hospital Family Limit	100% of the Prime Cure negotiated cost, subject to the Allied Health care services Family Limit (excluding orthotics, prosthetics)
PRIVATE NURSING			
Authorisation required	 0860 222 633	 0860 222 633	No benefit
Private nursing	Authorised: 100% of SRR Not authorised: 100% of cost subject to available MSA	100% of SRR, subject to Out of Hospital services Sublimit 1 for alternative and allied health care services, and the Overall Out of Hospital Family Limit	No benefit
Private nursing at home or in a facility instead of hospitalisation	Authorised: 100% of SRR subject to Scheme protocols Not authorised: 100% of cost subject to available funds in the MSA	Authorised: 100% of SRR subject to Scheme protocols Not authorised: 100% of SRR, subject to Out of Hospital services Sublimit 1 for alternative and allied health care services and the Overall Out of Hospital Family Limit	No benefit
OXYGEN THERAPY			
Authorisation required	 0860 222 633	 0860 222 633	 0861 665 665
Designated Service Provider	 VitalAire	 VitalAire	Prime Cure Provider
Oxygen therapy	100% of SRR	100% of SRR	Prime Cure agreed rate

Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
PATHOLOGY			
Annual limit	No limit	Pathology Family Limit: Adult: R1 225 Child: R440	No limit
Non-PMB conditions (out of hospital)	100% of SRR – no limit of hospital)	100% of SRR, subject to Pathology Family Limit	100% of Prime Cure approved pathology rates and codes at Prime Cure facilities
PMB condition (out of hospital) subject to treatment plan and registration	100% of SRR	100% of SRR	100% of Prime Cure approved pathology rates and codes at Prime Cure facilities
Non-PMB conditions (in hospital)	100% of SRR – no limit of hospital)	100% of SRR – no limit	100% of Prime Cure approved pathology rates and codes in a public or Prime Cure private hospital limited to R17 000 p.f. subject to the Family Hospital Limit
Cancer screening blood tests (out of hospital)	100% of SRR – no limit of hospital)	100% of SRR, subject to Pathology Family Limit	100% of Prime Cure approved pathology rates and codes at Prime Cure facilities
RADIOLOGY			
Annual limit	None	Radiology Family Limit: Adult: R1 600 Child: R965	No limit
Non-PMB X-rays/radiology (out of hospital)	100% of SRR – no limit of hospital)	100% of SRR, subject to Radiology Family Limit	100% of Prime Cure approved radiology rates and codes at Prime Cure facilities
PMB condition (out of hospital) subject to treatment plan and registration	100% of SRR	100% of SRR	100% of Prime Cure approved radiology rates and codes at Prime Cure facilities
Non-PMB x-rays/radiology (in hospital)	100% of SRR – no limit of hospital)	100% of SRR – no limit	100% of Prime Cure approved radiology rates and codes for basic x-rays and soft tissue ultrasound excluding tomograms, contrast studies, barium studies, subject to the Family Hospital Limit Other radiological procedures subject to Specialised Radiology sublimit of R17 000 p.f. and the Family Hospital Limit

Benefit category	Managed Care Plan	Standard Care Plan	Value Care Plan
SPECIALISED RADIOLOGY			
Authorisation required	Y 0860 222 633	Y 0860 222 633	Y 0861 665 665
Isotope therapy	100% of SRR Scheme protocols apply	100% of SRR Scheme protocols apply	No benefit
MRI and CT scans	100% of SRR Scheme protocols apply	100% of SRR Scheme protocols apply	Subject to a combined in- and out of hospital Specialised Radiology sublimit of R17 000 p.f. and the Family Hospital Limit
Bone densitometry	100% of SRR One scan p.b. Scheme protocols apply	100% of SRR One scan p.b. Scheme protocols apply	No benefit
Mammogram	100% of SRR Scheme protocols apply	100% of SRR Scheme protocols apply	No benefit
VACCINES			
Flu and associated consultation	100% of SEP subject to one flu vaccine and one consultation p.b.	100% of SEP subject to one flu vaccine and one consultation p.b.	Available at Prime Cure facilities, subject to medicine list and one flu vaccine p.b.
Pneumococcal and associated consultation	100% of SEP subject to one pneumococcal vaccine and one consultation per lifetime over the age of 55 For beneficiaries younger than 55, claims will be reimbursed from available funds in the MSA	100% of SEP subject to one pneumococcal vaccine and one consultation per lifetime over the age of 55 For beneficiaries younger than 55, claims will fund subject to Out of Hospital services Sublimit 2 for consultations, acute medicine and PAT and the Overall Out of Hospital Family Limit	No benefit
HPV Vaccine (Human Papillomavirus)	One Lifetime vaccination per female beneficiary as per age bands	One Lifetime vaccination per female beneficiary as per age bands	No Benefit
HEALTH CHECK			
Health Check	R189 One Health Check, done at Wellness partners or employer wellness day	R189 One Health Check, done at Wellness partners or employer wellness day	R189 One Health Check, done at Wellness partners or employer wellness day

2018 Contributions

VALUE CARE PLAN								
Member			Adult dependant			Child dependant		
R820			R820			R200		
STANDARD CARE PLAN								
Member			Adult dependant			Child dependant		
R2 255			R2 255			R680		
MANAGED CARE PLAN								
Contributions (excluding savings)			Savings portion			Total contribution (including savings)		
Member	Adult dependant	Child dependant	Member	Adult dependant	Child dependant	Member	Adult dependant	Child dependant
R3 095	R3 095	R720	R1 030	R1 030	R235	R4 125	R4 125	R955