

MEDIBREF

JULY 2016

Managed Care Plan – Medical Savings Account

Members who have positive medical savings carried over from 2015 might have, in some instances, noticed that these amounts, and the interest thereof, have not displayed correctly on their 2016 monthly claims statements. In some instances it reflected a discrepancy of up to R22. This has now been corrected; you will see the adjustment on your August Statement. Please note that this was only a display error and had no effect on the actual value of your Personal Medical Savings Account (PMSA).

Cancer: How you can reduce your risk

Information

Members' Personal Medical Savings Account (PMSA) funds are for the exclusive use of members. These funds are invested by the Scheme in a money market portfolio where interest is earned. AMS has always allocated the interest earned on member savings, which has now become a regulatory requirement for the entire industry. Interest is allocated to members' PMSA monthly and reconciled on a quarterly basis to ensure that all interest is accounted for and allocated to members. This calculation is done to accommodate any variance experienced between the monthly allocated interest, and the interest earned in the money market portfolio. The monthly rolling balances might therefore differ as a result of the quarterly recalculation. Your total annual interest earned will always be shown on your medical scheme tax certificate.

More than 100 000 South Africans are diagnosed with cancer every year. One in four South Africans is affected by cancer through diagnosis of family, friends or self.

The most common types of cancer affecting South Africans are:

Women	Men
Breast	Prostate
Cervical	Kaposi Sarcoma
Colorectal	Lung
Kaposi Sarcoma	Colorectal

Following a healthy lifestyle and going for regular preventative screening, helps with early detection and prevention of cancer. In this issue we focus on what women can do to reduce their risk of developing one of the typical female cancers.

Breast cancer

In South Africa, one in 29 women will develop breast cancer during their lifetime. The good news is that if detected early enough, there is an excellent chance of recovery. Certain women are more at risk for developing breast cancer, for example, women who are older than 50 years, or who have a close family member with the disease. However, all women need to perform a breast self-examination monthly and go for regular screenings to detect any changes in their breasts. Discuss with your doctor when and how often you should have a mammogram, considering your health and risk profile. You might not be able to eliminate all risk factors, such as genetics, but besides the screening there is more you can do:

- Control your weight. Being obese increases the risk of breast cancer, particularly after menopause
- Be physically active and eat a healthy diet
- Limit alcohol. Even small amounts increase risk
- Don't smoke
- Breastfeed. The longer you breastfeed the greater the protective effect
- Consider limiting dose and duration of hormone therapy. Discuss with your doctor the benefits of the therapy versus the risks
- Avoid exposure to radiation and environmental pollution

Cervical cancer

Cervical cancer is a disease in which cancer cells form in the tissues of the cervix – the part of a woman's body that connects the uterus (womb) to the vagina (birth canal).

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It is almost always caused by infection with the human papillomavirus (HPV), a virus that is spread through sexual intercourse. Cervical cancer is a slow-growing type of cancer and usually does not cause any symptoms in the early stages.

Reduce your risk by:

- Going for a regular Pap smear test
- · Having an HPV-vaccine if you are under 27
- Avoiding unprotected sex
- Limiting the number of sexual partners
- Not becoming sexually active at a young age

Having a regular Pap smear can pick up abnormal cells in the cervix that can lead to cervical cancer. Regular check-ups can reduce the number of deaths from cervical cancer by two-thirds. It is recommended to have Pap smear tests every three years, unless otherwise determined by your doctor after considering your health profile.

Uterine cancer

The uterus, or womb, is the place where a baby grows when a women is pregnant. There are different types of uterine cancer, but the most common type starts in the lining of the uterus, the endometrium, called endometrial cancer. Uterine cancer usually occurs after menopause, and the chances of getting the disease increases if the woman is obese, or taking oestrogen-only hormone replacement therapy.

Ovarian cancer

The ovaries are almond-sized glands situated in a woman's pelvic cavity. They produce the female hormones, oestrogen and progesterone, and also release eggs (ova). Cancer of the ovaries usually happens in women older than 50, although it can affect

younger women too. Having a close relative with ovarian cancer, or with cancer of the breast, uterus, colon or rectum, increases a woman's chances of developing this disease.

AMS cancer prevention and screening benefits

Breast Cancer	
Mammogram	SCP* and MCP**: Specialised Radiology benefit
Gynaecological check-up	SCP: Out-of hospital services MCP: Medical Savings Account
Cervical Cancer	
HPV Vaccine	SCP and MCP: Vaccines benefit
Pap smear test	SCP and MCP: Pathology benefit for cancer screening
Gynaecological check-up	SCP: Out-of hospital services MCP: Medical Savings Account
Ovarian Cancer	
Gynaecological check-up	SCP: Out-of hospital services MCP: Medical Savings Account

*SCP: Standard Care Plan **MCP: Managed Care Plan

For full details of the benefits and funding of these and all other cancer screenings, please refer to your Benefit Guide.

Value Care Plan members: Please discuss your cancer screening with your GP.

Look out for the next issue of MediBrief where we continue with this topic focusing on cancer affecting men.

* MediBrief articles are not a substitute for professional medical advice, diagnosis or treatment. Always seek the advice of a qualified healthcare provider to discuss your medical concerns.

Q & A

Q: What are ICD 10 codes, and why are they important?

A: ICD 10 diagnosis codes are used in the healthcare industry to properly note diseases on health records, track epidemiological trends, and assist in medical reimbursement decisions.

They need to be included on your claims in order to ensure that payment is made from the correct benefits. It is law for an account received from a doctor, specialist or dentist to reflect the appropriate ICD 10 codes. Schemes received instruction from the Registrar of Medical Schemes not to pay any accounts that do not reflect these diagnostic codes. Your doctor is aware that these codes are a requirement on an account.

Remember: Your health records and claims information will not be disclosed without your consent and are always treated as confidential information.

Visit www.angloms.co.za to learn more about your Scheme and benefits. Find all previous MediBrief editions in the Info Centre > MediBrief Archive.

Member Queries:

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