

# MEDI BRIEF

MAY 2017

## I owe the Scheme money? How did that happen and what are the consequences?

Did you know that there are instances in which you can end up owing the Scheme money?

### Examples of how you can get into debt with the Scheme:

- **Managed Care Plan:** You withdraw your membership in the middle of the year and you have spent more from your Medical Savings Account (MSA) than you have contributed to it.
- **Managed Care Plan:** You withdraw a dependant from your membership in the middle of the year, and have spent more from your Medical Savings Account (MSA) than you have contributed to it for the time that your dependant was on your membership.
- **All plans:** A claim was paid to you and to the provider and needs to be reversed.

### What happens once debt has been created?

Within 30 days of the debt becoming due, the Scheme will send you a letter informing you of the debt and how you can repay the Scheme. A debt collection clerk will call you and an SMS will be sent to the number the Scheme has on file for you. If you are still an active member as part of your employer group, a notification will also be sent to your employer, informing them of the debt due on your membership. If the Scheme does not receive a reply, another letter is sent out in the second month of the debt being due. A third letter is sent if no reply to the first two letters is received. Calls and text messages will continue during this period. After all attempts to make contact have failed, a report is generated and handed over to debt collection attorneys. At this point your credit record may be adversely impacted and your Scheme membership (if you haven't officially withdrawn from the Scheme) will be suspended.

If the amount you owe equals one month's standard adult contribution on your particular plan type, or is R1 000 or more, your membership will be suspended within 30 days of the debt being created if you do not reply to any of the calls, text messages or letters informing you

of the outstanding amount. In addition, any claims payments due to you will first be offset by the amount owed to the Scheme before any payments are released into your bank account.

### How to manage debt on your membership

Sometimes it is inevitable that debt will be created on your membership due to circumstances beyond your control (a processing error or your dependant needing to resign from the Scheme). However, if you stay informed and consider these tips you can manage debt on your membership:

- Advanced savings for you and your dependant(s) for the year are allocated to your MSA at the beginning of the year. If you or your dependant(s) leave the Scheme in the middle of the year, the amount paid from savings in respect of claims might be more than you were entitled to at the date of the withdrawal. This money is payable to the Scheme.
- Keep a close eye on your statements and check for claims reversals. This could be a processing error, or a provider may have submitted a claim to the Scheme in error, which needed to be reversed and reprocessed, causing debt on your membership.
- Don't delay in contacting us to verify the origin of the debt and discuss your options for re-payment.
- Bear in mind that any claims payments that are owing to you will first be used to offset the debt owing to the Scheme.
- To avoid your membership being suspended, keep a record of payments made and do your best to stick to payment arrangements.
- Always keep your contact details up-to-date so that we can reach you to resolve any debt issues as soon as possible. Update your details in the member log-in on [www.angloms.co.za](http://www.angloms.co.za) or call us on 0860 222 633.

### Co-payments reminder

As communicated in previous MediBriefs, the 2017 Benefit Guide and on the Scheme website: In 2017 the Scheme introduced a co-payment structure for endoscopies and cataract procedures if performed in a hospital instead of in a day clinic. This co-payment is R3 350 for endoscopies and R1 000 for cataract procedures and is applicable to members on the Standard and Managed Care Plans. Ask your GP, at the time of referral, whether the specialist operates from a day clinic. For more information and a list of day clinics near you, please call us on 0860 222 633.

# Alzheimer's disease

## What is Alzheimer's disease?

Alzheimer's is a neurological disorder in which the death of brain cells causes memory loss and cognitive decline. As a deteriorating type of dementia, the disease starts mildly and gets progressively worse.

## Every so often I forget where I put my glasses – does that mean that I am developing Alzheimer's or is this just ageing?

Just because you forgot an item on your grocery list doesn't mean you are developing dementia. Most people have occasional memory lapses, which increase with age. Memory problems that characterise warning signs of Alzheimer's are usually more frequent which then interfere with safe or competent daily functioning: forgetting to turn off the stove, leaving home without being properly dressed or forgetting important appointments. The disease usually involves a decline in other cognitive abilities: planning a schedule, following multi-step directions, carrying out familiar logistical tasks like cooking a meal. It can also involve social withdrawal, confusion, agitation and mood changes. Alzheimer's can also affect or slow down walking.

Diagnosing Alzheimer's usually involves a series of assessments, including a memory and cognitive test called a 'Mini Mental State Examination'. A thorough medical work-up will be done to determine whether the cognitive problems can be explained by other conditions such as another type of dementia, chronic ailments or possibly side effects from medication. Brain scans may also be done.

## What causes Alzheimer's?

The cause is unknown for most cases. Aside from age, which is the single biggest risk factor, there are health issues that can increase the chances of developing Alzheimer's. Heart and vascular problems, including stroke, diabetes and high blood pressure appear to increase the risk of Alzheimer's and other dementias. Depression has also been associated with increased risk.

## Can one prevent developing Alzheimer's?

Many researchers have been trying to figure this out. So far there is no clear answer. There are hints that behaviours that keep us healthy and engaged, i.e. exercise, healthy diet, social activities or educational activities, may keep dementia at bay for some time, probably because those behaviours promote overall brain and body health, as well as emotional wellbeing. Education may promote what is called cognitive reserve, essentially the idea that the more we learn and stimulate our brains, the more brain cells we have that can temporarily compensate for some memory and thinking problems. But no vitamin, supplement or brain game has been found to be a magic wand.

## What to do and what to prepare for if you have been diagnosed with Alzheimer's

### What and how to tell your family

The process of acceptance of your diagnosis might include sharing your condition with family and friends. Seeing a therapist might help your process as well as guide you in dealing with others. You can expect different responses from those close to you – some might want to find cures and other solutions, some might withdraw and become uncommunicative. Give them time to come to grips with the news. A trained therapist or counsellor can help you anticipate and deal with these responses effectively.

### How long can you live independently?

One cannot know the speed of your mental decline. It is different for everyone, until the disease realises its ultimate purpose.

### Revise your will

It is important that you make your wishes known to your partner and family while you are able to make decisions for yourself.

### End-of-life decisions

This very individual choice should be shared with your loved ones so that your personal instruction can be fulfilled when you can no longer make decisions. A living will is enforced when one is no longer capable of making decisions around treatment and end-of-life care. The declaration will stand as your Living Will and Directive, which will include, for example, a request not to be kept alive by means of mechanical systems or not to have medication administered other than to relieve pain. You can also include other decisions such as organ donation.

### When will advanced care be needed?

Your end-of-life wishes should include how you would like to receive care in the final stages of Alzheimer's. Care provided in an Alzheimer's unit focuses on bringing comfort, self-respect and peace to the final stage of your life. Discuss the stages of Alzheimer's with your treating doctor. Your choice might be to receive care at home. Anglo Medical Scheme covers Frail Care at home (rendered by a Registered Nursing Agency) or in a Frail Care Centre specialising in Alzheimer's care. Certain limits apply depending on your plan type, so be sure to call us to confirm your benefits.

### Identify facilities specialising in Alzheimer's care when your family can no longer care for you at home

Phone our Call Centre on 0860 222 633 to understand the benefit and where and when you can obtain the care.

Visit [www.angloms.co.za](http://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:

Value Care Plan: 0861 665 665, [anglo@primecure.co.za](mailto:anglo@primecure.co.za)

Standard and Managed Care Plan: 0860 222 633, [member@angloms.co.za](mailto:member@angloms.co.za)

Claims: [claims@angloms.co.za](mailto:claims@angloms.co.za)