



CO-PAYMENT LIST: 2025

SCHEME	PLAN OPTION	CINTOCARE
Anglo Medical Scheme	Managed Care	A co-payment of a minimum of R490 per day applies, up to a maximum of R1 465 for a hospital stay for non-Prescribed Minimum Benefit conditions
Anglo Medical Scheme	Standard Care	As a member of the Standard Care Plan, you have access to day clinics, facilities and private hospitals on the Scheme's Hospital Network. If you choose a non-network facility, a co-payment of R3 800 will apply. If a member is admitted to a non-network facility in a medical emergency (where a patient's life is in danger), no co-payment will be required.

Anglo Medical Scheme	Value Care	For hospitalisation relating to non-Prescribed Minimum Benefit conditions, members need to call the Prime Cure Call Centre on 0861 665 665 to authorise the hospital event and confirm the benefits available. If you do not get a referral from a Prime Cure Network doctor and authorisation from Prime Cure, a R2 215 co-payment will apply or the cost of the entire account. We pay for all hospitalisation cases at 100% of the Prime Cure Rate in a Prime Cure private or state hospital.
Anglovaal Group	Anglovaal	DSP - Please authorise all admissions beforehand Note: the Scheme's in-hospital clinical protocols apply
Bankmed	Basic	20%
Bankmed	Comprehensive	No co-payment
Bankmed	Core Saver	No co-payment
Bankmed	Essential	20%
Bankmed	Plus	No co-payment
Bankmed	Traditional	R5 720
Barloworld	Barloworld Comprehensive	DSP - no co-payment
Barloworld	Barloworld Value	Acute Hospitals and Mental Health Facilities: a co-payment of R15 000 will apply for the voluntary use of a non-network facility on the BARMED VALUE option. Contracted Day Surgery Network: a co-payment of 20% will apply for the voluntary use of a non-network facility on the BARMED VALUE option.

Bestmed	Beat 1	DSP - no co-payment
Bestmed	Beat 1 Network	DSP - no co-payment
Bestmed	Beat 2	DSP - no co-payment
Bestmed	Beat 2 Network	DSP - no co-payment
Bestmed	Beat 3	DSP - no co-payment
Bestmed	Beat 3 Network	DSP - no co-payment
Bestmed	Beat 3 Plus	DSP - no co-payment
Bestmed	Beat 4	DSP - no co-payment
Bestmed	Pace 1	DSP - no co-payment
Bestmed	Pace 2	DSP - no co-payment
Bestmed	Pace 3	DSP - no co-payment
Bestmed	Pace 4	DSP - no co-payment
Bestmed	RHYTHM 1	DSP - no co-payment
Bestmed	RHYTHM 2	DSP - no co-payment
BMW	BMW	DSP - no co-payment
Bonitas	BonCap	30%
Bonitas	BonClassic	30%
Bonitas	BonComplete	30%
Bonitas	BonComprehensive	DSP - no co-payment
Bonitas	BonEssential	DSP - no co-payment
Bonitas	BonEssential Select	30%
Bonitas	BonFit Select	30%
Bonitas	BonSave	30%
Bonitas	BonStart	12 680.00

Bonitas	BonStart Plus	12 680.00
Bonitas	Hospital Standard	30%
Bonitas	Primary	30%
Bonitas	Primary Select	30%
Bonitas	Standard	DSP - no co-payment
Bonitas	Standard Select	30%
BPSA	BPSA	10%
CAMAF	Alliance Network	20%
CAMAF	Alliance Plus	DSP - no co-payment
CAMAF	Double Network	20%
CAMAF	Double Plus	DSP - no co-payment
CAMAF	Essential Network	20%
CAMAF	Essential Plus	DSP - no co-payment
CAMAF	First Choice	DSP - no co-payment
CAMAF	Network Choice	20%
CAMAF	Vital	DSP - no co-payment
CAMAF	Vital Network	20%
CAMAF	Vital Plus	DSP - no co-payment
Cigna International	Cigna International	GOP
Compicare	Dynamix	DSP - no co-payment
Compicare	Dynamix Efficiency Discounted	30% with minimum R7 500
Compicare	Medx	DSP - no co-payment
Compicare	Medx Efficiency Discounted	30% with minimum R7 500
Compicare	Mumed	DSP - no co-payment

Compcare	Mumed Efficiency Discounted	30% with minimum R7 500
Compcare	Pinnacle	DSP - no co-payment
Compcare	Pinnacle Efficiency Discounted	30% with minimum R7 500
Compcare	Selfnet	30% with minimum R7 500
Compcare	Symmetry	DSP - no co-payment
Compcare	Symmetry Efficiency Discounted	30% with minimum R7 500
Compcare	Umbono	DSP - no co-payment
Compcare	Umbono Efficiency Discount	30% with minimum R7 500
Compcare	Unisave	DSP - no co-payment
Discovery Health	Classic Comprehensive	DSP - no co-payment
Discovery Health	Classic Core	DSP - no co-payment
Discovery Health	Classic Delta Core	R10 700.00
Discovery Health	Classic Delta Saver	R10 700.00
Discovery Health	Classic Priority	Procedural co-payment
Discovery Health	Classic Saver	DSP - no co-payment
Discovery Health	Classic Smart	R12 200
Discovery Health	Classic Smart Comprehensive	R12 200
Discovery Health	Coastal Core	30%
Discovery Health	Coastal Saver	30%
Discovery Health	Essential Core	DSP - no co-payment
Discovery Health	Essential Delta Core	R10 700.00
Discovery Health	Essential Delta Saver	R10 700.00
Discovery Health	Essential Dynamic Smart	R14 750
Discovery Health	Essential Priority	Procedural co-payment

Discovery Health	Essential Saver	DSP - no co-payment
Discovery Health	Essential Smart	R12 200
Discovery Health	Executive	No co-payment
Discovery Health	KeyCare Core	100%
Discovery Health	KeyCare Plus	100%
Discovery Health	Keycare Start	100%
Discovery Health	KeyCare Start Regional	100%
Fedhealth	flexiFED 1	R8840.00 hospital R2630.00 day surgery
Fedhealth	flexiFED 1 Elect	R15 470
Fedhealth	flexiFED 2	DSP - No co-payment - There is a R2 630 co-payment on use of non-network day surgery facilities
Fedhealth	flexiFED 2 Elect	R15 470
Fedhealth	flexiFED 2 GRID	R15 470
Fedhealth	flexiFED 3	DSP - No co-payment - There is a R2 630 co-payment on use of non-network day surgery facilities
Fedhealth	flexiFED 3 Elect	R15 470
Fedhealth	flexiFED 3 GRID	R15 470
Fedhealth	flexiFED 4	DSP - No co-payment - There is a R2 630 co-payment on use of non-network day surgery facilities
Fedhealth	flexiFED 4 Elect	R15 470

Fedhealth	flexiFED 4 GRID	R15 470
Fedhealth	flexiFED Savvy	R9 050 - co-payment on voluntary use of non-network hospitals will apply
Fedhealth	Maxima Exec	maxima EXEC covers all admissions at any private hospital except the following hospitals: Zuid-Afrikaans Hospital (City of Tshwane), Arwyp Medical Centre (Ekurhuleni), Busamed Modderfontein Private Hospital (City of Johannesburg), Hibiscus Hospital (Ugu), Mooimed Private Hospital (Dr Kenneth Kaunda), Capital Hospital (Durban), which will not be covered in full for 2025. Emergency treatment at these 6 hospitals, however, will be covered in full without a co-payment but elective procedures will attract a R8 840 co-payment.
Fedhealth	Maxima Plus	maxima PLUS covers all admissions at any private hospital except the following hospitals: Zuid-Afrikaans Hospital (City of Tshwane), Arwyp Medical Centre (Ekurhuleni), Busamed Modderfontein Private Hospital (City of Johannesburg), Hibiscus Hospital (Ugu), Mooimed Private Hospital (Dr Kenneth Kaunda), Capital Hospital (Durban), which will not be covered in full for 2025. Emergency treatment at these 6 hospitals, however, will be covered in full without a co-payment but elective procedures will attract a R8 840 co-payment.

Fedhealth	myFED	R15 470.00 - Unlimited at Fedhealth Network Hospitals. R15 470 co-payment on voluntary use of non-network hospitals will apply R2 630 co-payment on voluntary use of non-network day surgery facilities will apply R4 290 co-payment on voluntary use of non-network mental health facilities will apply
Gems	Beryl	R15 470.00 - Unlimited at Fedhealth Network Hospitals. R15 470 co-payment on voluntary use of non-network hospitals will apply R2 630 co-payment on voluntary use of non-network day surgery facilities will apply R4 290 co-payment on voluntary use of non-network mental health facilities will apply
Gems	Emerald	DSP - No co-payment
Gems	Emerald Value	R15 000
Gems	Onyx	DSP - No co-payment
Gems	Ruby	No co-payment
Gems	Tanzanite One	R15 000
Genesis	MED-100	DSP - No co-payment
Genesis	MED-200	DSP - No co-payment
Genesis	MED-200 Plus	DSP - No co-payment

Golden Arrow	Advanced	A co-payment of R500 will apply to all admissions to private facilities, except in cases where a R1 000 co-payment is indicated for a specific procedure - R348 000 per beneficiary per year
Golden Arrow	Primary	Limited to overall annual day-to-day limit
Golden Arrow	Standard	R180 700 per beneficiary per year
Imperial Motus Med	Budget	No co-payment
Imperial Motus Med	Health	No co-payment
KeyHealth	Equilibrium	DSP - No co-payment
KeyHealth	Essence	DSP - No co-payment
KeyHealth	Gold	DSP - No co-payment
KeyHealth	Platinum	DSP - No co-payment
KeyHealth	Silver	DSP - No co-payment
LA Health	LA Active	You may go to any hospital for treatment or care. When you're admitted to a hospital, there is no overall limit that applies for the hospital
LA Health	LA Comprehensive	You may go to any hospital for treatment or care. When you're admitted to a hospital, there is no overall limit that applies for the hospita
LA Health	LA Core	You may go to any hospital for treatment or care. When you're admitted to a hospital, there is no overall limit that applies for the hospita
LA Health	LA Focus	30%
LA Health	LA KeyPlus	100%

Libcare		Day procedures that are performed in Day Surgery facilities and Acute Hospitals: Members must have their procedures authorised and performed at a facility in the Scheme's designated day surgery or acute hospital network (see note 13 on page 56). You may be liable for a 10% co-payment on the hospital account when a procedure from the defined list is performed at an outof-network facility, unless any of the procedures can be performed out-ofhospital and are also listed under the "Day procedures performed in Doctors' rooms". Where a beneficiary in consultation with his/ her healthcare service provider has elected to have the relevant procedure performed in their doctor's rooms, the beneficiary shall not be obliged to have the procedure funded instead at a Day Surgery or Acute Hospital.
Massmart Health Plan	Choice	Unlimited private hospitalisation at Netcare hospitals for all admissions, for both member and family
Massmart Health Plan	Essential	Private hospitalisation at any Network hospital, unlimited for any PMB condition only. For other admissions, up to R500 000 per beneficiary or R750 000 per family.
Massmart Health Plan	Network	Private hospitalisation at any Network hospital, unlimited for any PMB conditions and for other admissions, up to R1 million per beneficiary or R1.5 million per family
Medihelp	MedAdd	DSP - No co-payment

Medihelp	MedAdd Elect	35%
Medihelp	MedElect	35%
Medihelp	MedElect Student	35%
Medihelp	MedElite	DSP - No co-payment
Medihelp	MedMove	35%
Medihelp	MedPlus	DSP - No co-payment
Medihelp	MedPrime	DSP - No co-payment
Medihelp	MedPrime Elect	35%
Medihelp	MedSaver	DSP - No co-payment
Medihelp	MedVital	DSP - No co-payment
Medihelp	MedVital Elect	35%
Medshield	MediBonus	DSP - No co-payment
Medshield	MediCore	30% upfront co-payment for the use of a non-network hospital.
Medshield	MediCurve	30% upfront co-payment for the use of a non-Compact Network Hospital.
Medshield	Mediphila	30% upfront co-payment for the use of a non-network facility.
Medshield	Mediplus Compact	• 30% upfront co-payment for the use of non-network hospital
Medshield	Mediplus Prime	• 30% upfront co-payment for the use of non-network hospital
Medshield	MediSaver	30% upfront co-payment for the use of non-network hospital
Medshield	MediSwift	30%

Medshield	MediValue Compact	30% upfront co-payment for the use of non-network hospital
Medshield	MediValue Prime	30% upfront co-payment for the use of non-network hospital
Medshield	Premium Plus	DSP - No co-payment
Momentum Medical Scheme	Custom Any Assoc	DSP - No co-payment
Momentum Medical Scheme	Custom Any Open	DSP - No co-payment
Momentum Medical Scheme	Custom Any State	DSP - No co-payment
Momentum Medical Scheme	Custom Assoc Assoc	30%
Momentum Medical Scheme	Custom Associated Open	30%
Momentum Medical Scheme	Custom Associated State	30%
Momentum Medical Scheme	Evolve	30%
Momentum Medical Scheme	Extender Any Assoc	DSP - No co-payment
Momentum Medical Scheme	Extender Any Open	DSP - No co-payment
Momentum Medical Scheme	Extender Any State	DSP - No co-payment
Momentum Medical Scheme	Extender Assoc Assoc	30%
Momentum Medical Scheme	Extender Associated Open	30%
Momentum Medical Scheme	Extender Associated State	30%
Momentum Medical Scheme	Incentive Any Assoc	DSP - No co-payment
Momentum Medical Scheme	Incentive Any Open	DSP - No co-payment
Momentum Medical Scheme	Incentive Any State	DSP - No co-payment
Momentum Medical Scheme	Incentive Assoc Assoc	30%
Momentum Medical Scheme	Incentive Associated Open	30%
Momentum Medical Scheme	Incentive Associated State	30%

Momentum Medical Scheme	Ingwe Any	30%
Momentum Medical Scheme	Ingwe Network	30%
Momentum Medical Scheme	Ingwe State	30%
Momentum Medical Scheme	Summit	No co-payment
Moto Health Care	Classic	No co-payment
Moto Health Care	Classic Network	30% co-payment for using non-network provider
Moto Health Care	Custom	30% co-payment will be applied for voluntary use of a non-network provider
Moto Health Care	Essential	State hospital only
Moto Health Care	Hospicare	DSP - No co-payment
Moto Health Care	Hospicare Network	30%
Moto Health Care	Optimum	DSP - No co-payment
Netcare	Netcare Savings	25%
Old Mutual Staff	Hospital	DSP - No co-payment
Old Mutual Staff	Network	20%
Old Mutual Staff	Network Select	20%
Old Mutual Staff	Savings	DSP - No co-payment
Old Mutual Staff	Traditional	DSP - No co-payment
Old Mutual Staff	Traditional Plus	DSP - No co-payment
Old Mutual Staff	Traditional Plus Select	20%
Old Mutual Staff	Traditional Select	20%
Opmed	Opmed	DSP - No co-payment
Parmed	Parmed Medical Aid Scheme	DSP - No co-payment
Pick and Pay	Plus	DSP - No co-payment

Pick and Pay	Primary	30%
Platinum Health	Platcap	DSP - No co-payment annual limit
Platinum Health	PlatComprehensive	DSP - No co-payment annual limit R172 428.00
Platinum Health	PlatFreedom	R1 221 241 per member family. All limits are subject to the Overall Annual Limit (OAL)
Polmed	Aquarium	R15 000
Polmed	Marine	DSP - no-co-payment
Polmed	Marine - day cases	R2 000.00
Profmed	ProActive Plus	DSP - no-co-payment
Profmed	ProActive plus - day cases	R5000
Profmed	Proactive Plus Savvy	R12 500
Profmed	ProActive Plus Savvy - day case	R5000
Profmed	ProPinnacle	DSP - no-co-payment
	ProPinnacle - day case	R5000
Profmed	ProPinnacle Savvy	R12 500
Profmed	ProSecure	DSP - no-co-payment
Profmed	ProSecure Plus	DSP - no-co-payment
Profmed	Prosecure Plus Savvy	R12 500
Profmed	ProSecure Savvy	R12 500
Profmed	ProSelect	DSP - no-co-payment
Profmed	ProSelect Savvy	R12 500
Remedi	Classic	R2,575,000 Overall annual limit for families
Remedi	Comprehensive	Unlimited

Remedi	Standard	R775,000 Overall annual limit for families
Sasolmed Medical Scheme	Comprehensive Network	DSP - no-co-payment
Sasolmed Medical Scheme	Restricted Network	DSP - no-co-payment
Sizwe Hosmed	Access Core	Patient liable
Sizwe Hosmed	Access Saver 25	Patient liable
Sizwe Hosmed	Essential Copper Renal	Patient liable
Sizwe Hosmed	Gold Ascend	Patient liable
Sizwe Hosmed	Gold Ascend EDO	Patient liable
Sizwe Hosmed	Platinum Enhanced	Patient liable
Sizwe Hosmed	Platinum Enhanced EDO	Patient liable
Sizwe Hosmed	Plus	Patient liable
Sizwe Hosmed	Titanium Executive	Patient liable
Sizwe Hosmed	Value	Patient liable
Sizwe Hosmed	Value Core	Patient liable
WCMAS	Comprehensive	No co-payment
WCMAS	Midmas	No co-payment
Wooltru Healthcare Fund	Comprehensive	Paid at 3x the WHFT(Wooltru health care Fund) for authorised admissions - no hospital network applicable
Wooltru Healthcare Fund	Network	100% of the agreed tariff in a Network Option network hospital for authorised admissions, if referred by a network healthcare provider

Wooltru Healthcare Fund	Saver	Saver Option: 100% of the agreed tariff in a Mediclinic or Netcare hospital for authorised admissions (a 25% co-payment will apply if you do not make use of a Mediclinic and Netcare hospital) Saver Choice Option: Paid at the WHFT for authorised admissions - no hospital network applicable
Cape Medical Plan	MyHealth 100 Saver	At Life Health, Mediclinic or Netcare hospitals and any doctor/specialist of your choice
Engen	Engen	You will have to pay a deductible of R7 000 to the facility if you make use of the service of a non-Network facility to undergo one of the listed procedures. - day procedures
Tsogo Sun Group	Classic comprehensive	You will have to pay a deductible of R7 000 to the facility if you make use of the service of a non-Network facility to undergo one of the listed procedures. - day procedures
Tsogo Sun Group	Classic comprehensive	No co-payments
Tsogo Sun Group	Classic saver	No co-payments
AECI	Comprehensive	Private hospitals, day clinics and unattached operating theatres No limit. For any day procedure, the contracted day clinic network must be used, or a co-paymentFor any day procedure, the contracted day clinic network must be used, or a co-payment of R2 000 may be applied. Refer to our website for more information.
AECI	Comprehensive Select	Same as above

AECI	Value	Same as above
Foschini Group (TFG)	TFG Health Plus	A R7,000 deductible shall be payable by the patient in respect of the hospital account for elective admissions at a facility which is not a network facility - day surgery
Foschini Group (TFG)	TFG Health Plus	100% medical aid tariffs
Glencore -X Strata	Glencore	100% of the lower of cost or Scheme Rate
Lonmin	Lonmin	30% co-payment -
Malcor(Total Med)	A	Services rendered by public hospitals/DSP at 100% of cost or agreed rate or 100% of the Scheme Rate in a private hospital where the beneficiary voluntarily elects another service provider
Malcor(Total Med)	B	Services rendered by public hospitals/DSP at 100% of cost or agreed rate or 100% of the Scheme Rate in a private hospital where the beneficiary voluntarily elects another service provider
Malcor(Total Med)	C	R1,000,000 per family per annum
Horizon	Hospital Core	Subject to overall annual limit of R2 073 700 per family per year; any hospital. R1 000 co-payment for non-PMB admissions.
Horizon	Hospital Plus Savings	No co-payment
Horizon	Hospital plus Network	Subject to overall annual limit of R2 073 700 per family per year; any hospital. R1 000 co-payment for non-PMB admissions.
MBMed	MBMED MEDICAL AID FUND	

Medipos Medical Scheme	A	Patient liable
Medipos Medical Scheme	B	Patient liable
Medipos Medical Scheme	C	Patient liable
SABC Medical Aid Scheme	SABC	DSP - No co-payment - The Scheme's pre-authorisations are based on clinical and funding guidelines as well as set criteria in recognising healthcare providers who are able to perform certain procedures. Once you have pre-approval, the healthcare provider and hospital account will be processed in accordance with the Scheme Rules and benefits.
SABC Medical Aid Scheme	SABC Value	Subject to the relevant managed healthcare protocols and pre-authorisation. For the Value option, subject to the use of the contracted hospital network provider. A co-payment of R2 000 will apply for the voluntary use of a nonnetwork facility. This co-payment will not apply in the case of an emergency
Impala Platinum	Impala Platinum	
Medimed	Alpha	No co-payments
Medimed	Medisave Essential	Unlimited 100% at preferred providers 80% at non-preferred providers
Medimed	Medisave Max	DSP - no-co-payment
Medimed	Medisave Standard	DSP - no-co-payment

Multichoice Medical Aid Scheme	MMed	100% of Scheme Rate Subject to overall annual limit.
PG Group	PG Group	100% of Scheme rate
Retail Medical Aid	Essential	A R7 000 deductible applies if the patient chooses to undergo one of the defined procedures at a non-network facility
Retail Medical Aid	Essential Plus	A R7 000 deductible applies if the patient chooses to undergo one of the defined procedures at a non-network facility
SA Breweries	SAB Comprehensive	DSP - no-co-payment
SA Breweries	SAB Essential	An overall annual limit applies R521 809 per family*
SEDMED Medical Scheme	SEDMED	R10 000.00 - Non DSP
Sisonke Health (Goldfields)	Sisonke Diversity	Unlimited at private hospital
Sisonke Health (Goldfields)	Sisonke Heritage	Unlimited at any private hospital
Sisonke Health (Goldfields)	Sisonke Pride	Covered at 100% of Medical Aid Rates – R600 000 Per Member Family
Suremed	Challenger	Unlimited 100% at the Suremed Scheme Tariff
Suremed	Explorer	Unlimited at Preferred Provider. Prescribed Minimum Benefits (PMB's) are unlimited at the scheme's Designated Service Provider.
Suremed	Navigator	Unlimited 100% at the Suremed Scheme Tariff
Thebemed	Energy	UNLIMITED 100% of Negotiated Tariff

Thebemed	Fantasy	UNLIMITED 100% of Negotiated Tariff Based on internal protocols Based on the Clinical Outcomes and Tariff Negotiations. The Scheme has the right to channel cases to the most competitive network.
Thebemed	Universal	<ul style="list-style-type: none"> • UNLIMITED at DSP network for EDO option, hospitals under Life Healthcare, Mediclinic & Netcare group • A co-payment of R1 000 applicable for use of Non-DSP
Thebemed	Universal EDO	<ul style="list-style-type: none"> • UNLIMITED at DSP network for EDO option, hospitals under Life Healthcare, Mediclinic & Netcare group • A co-payment of R1 000 applicable for use of Non-DSP
Tiger Brands	Base Network	<ul style="list-style-type: none"> • 100% of the Scheme rate. • Unlimited • This benefit is subject to preauthorisation and protocols to avoid a R1 200 co-payment. • All out-of-hospital and TTO (totake-home) medication, limited to a 7-day supply, will follow the Universal Care formulary and must be obtained from a Universal Care Medical Centre, DSP pharmacy, or dispensing practitioner, with prescriptions by a Universal Network GP or contracted provider.

Tiger Brands	A	100% of the Scheme rate. • Unlimited • This benefit is subject to preauthorisation and protocols to avoid a R1 200 co-payment. • A co-payment of R1 200 is payable on the following procedures, subject to PMBs, when performed in hospital instead of a day clinic: • Functional nasal surgery • Myringotomy • Tonsillectomy and Adenoidectomy • Varicose vein surgery
Tiger Brands	B	• 100% of the Scheme rate. • Unlimited • This benefit is subject to preauthorisation and protocols to avoid a R1 200 co-payment. • A co-payment of R1 200 is payable on the following procedures, subject to PMBs, when performed in hospital instead of a day clinic: • Functional nasal surgery • Myringotomy • Tonsillectomy and Adenoidectomy • Varicose vein surgery
Tiger Brands	C	100% of the Scheme rate. • Unlimited • This benefit is subject to preauthorisation and protocols to avoid a R1 200 co-payment. • A co-payment of R1 200 is payable on the following procedures, subject to PMBs, when performed in hospital instead of a day clinic: • Functional nasal surgery • Myringotomy • Tonsillectomy and Adenoidectomy • Varicose vein surgery

Transmed Medical Fund	Guardian	Only PMB*15 conditions for major medical events and selected knee and hip replacements through ICPS*13 No benefit for non-PMB conditions If a State hospital is not accessible in terms of the set criteria for PMB*15 treatment, authorisation will be considered for admission to a hospital on the Transmed private hospital network*6 as the secondary DSP*3 and payable at the Transmed rate* The co-payment*8 for the voluntary use of a non-DSP will be the amount equal to the difference between the total cost incurred in respect of the hospital services, including all related medical services, and the cost that would have been payable to the State hospital (DSP*3) or secondary DSP*3 – whichever is applicable Pre-authorisation required Please call 0800 225 151
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Transmed Medical Fund	Link	<p>This plan provides hospital benefits for PMB*6 conditions at State hospitals, the DSP*11 for hospital services. Members can utilise private facilities, subject to pre-authorisation, for the following admissions:</p> <ul style="list-style-type: none">• admissions for emergency treatment in case of an accident or trauma• admissions of children between the ages of one and 12 years for PMB*6 conditions• admissions for selected non-PMB conditions, e.g. functional endoscopic sinus surgery, tonsillectomies and adenoidectomies, sterilisations, strabismus (squint eye) repair and vasectomies.
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Transmed Medical Fund	Select	<p>This plan provides hospital benefits for both PMB*6 and non-PMB conditions at State hospitals, the DSP*11 for hospital services. Members can utilise private facilities, subject to pre-authorisation, for the following admissions:</p> <ul style="list-style-type: none"> • admissions for maternity • admissions for children under 12 years for PMB*6 conditions • admissions for medical emergencies, accidents or trauma • admissions for psychiatric treatment • admissions for certain dental procedures • admissions for selected non-PMB conditions, e.g. functional endoscopic sinus surgery, tonsillectomies and adenoidectomies, grommets, sterilisations, strabismus (squint eye) repair and vasectomies • admissions related to cancer treatment • admissions for cataract surgery.
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Transmed Medical Fund	The Prime	<p>This plan provides hospital benefits for both PMB*6 and non-PMB conditions at State hospitals, the DSP*11 for hospital services. Members can utilise private facilities, subject to pre-authorisation, for the following admissions: • admissions for maternity • admissions for children under 12 years for PMB*6 conditions • admissions for medical emergencies, accidents or trauma • admissions for psychiatric treatment • admissions for certain dental procedures • admissions for selected non-PMB conditions, e.g. functional endoscopic sinus surgery, tonsillectomies and adenoidectomies, grommets, sterilisations, strabismus (squint eye) repair and vasectomies • admissions related to cancer treatment • admissions for cataract surgery.</p>
Umvuso	Extreme	<p>» All admissions to hospital must be pre-authorised » In the case of a proven, life-threatening emergency, admission will automatically be granted for an initial period of 24 hours</p>
Umvuso	Supreme	<p>» All admissions to hospital must be pre-authorised » In the case of a proven, life-threatening emergency, admission will automatically be granted for an initial period of 24 hours</p>

Umvuzo Health Medical Scheme	Activator	All admissions to hospital must be pre-authorised » In the case of a proven, life-threatening emergency, admission will automatically be granted for an initial period of 24 hours
Umvuzo Health Medical Scheme	Standard	DSP - no-co-payment
Umvuzo Health Medical Scheme	Ultra Affordable	» All admissions to hospital must be pre-authorised » In the case of a proven, life-threatening emergency, admission will automatically be granted for an initial period of 24 hours
Umvuzo Health Medical Scheme	Ultra Affordable Value	Admissions to hospital must be pre-authorised » In the case of a proven, life-threatening emergency, admission will automatically be granted for an initial period of 24 hours
Samwumed	A	OPTION A Oval Unlimited
Samwumed	B	Option B: Overall Annual LimitUNLIMITED Special Programmes Special Programmes Overall Annual Limit-R2,021,000 per family