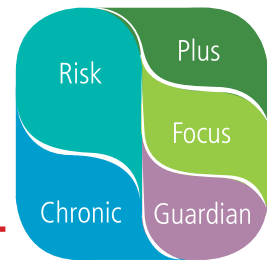


Prestige Option



Risk Benefit - Hospitalisation

Private hospitals

Including:

Surgical operations & procedures
Theatre fees
Labour and recovery wards
Ward accommodation
Medicine dispensed and used in hospital
Intensive care and high care units
Visits and consultations by a GP
X-rays and pathology
Physiotherapy
Ultrasound scans (other than for pregnancy)
Blood transfusions

Medicine received on discharge from hospital

Professional fees i.e. surgeon and anaesthetist, including visits and consultations by a specialist

Provincial hospitals

Diagnosis and treatment in respect of the Prescribed Minimum Benefits (PMB) package (as per government regulations)

Casualty / emergency visits

Clinician and facility fees only
(Clinician paid at 100% Scheme Rate)

Unlimited
Subject to Scheme Protocols

100% of Scheme Rate
100% of Scheme Rate
100% of Scheme Rate
100% of Scheme Rate
100% of Scheme Rate

Maximum of 7 days' supply

220% of Scheme Rate

Unlimited
Subject to Scheme Protocols

Limited to R1 200
per family per annum

Risk Benefit - Maternity

Confinements (normal vaginal delivery)

Confinements (caesarean section)

Neonatal Intensive Care

Elective caesarean section

ResoBaby Maternity Programme (Registration required)

Consultations (midwife, GP, or specialist)

2 x 2D scans

Baby care products at preferred pharmacy network

Length of stay: 3 days & 2 nights

Length of stay: 4 days & 3 nights

Subject to Scheme Protocols

Included

Included

9 consultations – any provider

Subject to Scheme Protocols

R 700

Risk Benefit - Other Risk Benefits

Psychiatric disorders

Cochlear implants and all related thereto

Organ transplants

Internal prostheses

Oncology

Oncologist, chemotherapy, radiotherapy, oncology – related blood tests

HIV / AIDS

Primary care including Voluntary Counselling and Testing and treatment
Hospitalisation if member is compliant on the HIV Management Programme

Hospitalisation if member is not registered and compliant on the HIV Management Programme

Haemodialysis

Trauma counselling

Assault, rape, hijacking and armed robbery

Limited to Network Provider and subject to PMB

R100 000 per family per annum

R290 000 per family per annum
Subject to PMB

R50 000 per family per annum
Subject to prosthesis sub-limits

Unlimited, subject to Scheme Protocols pre-
authorisation required

HIV Management Programme - Careworks
Private Network Provider hospitals and
subject to Scheme Protocols and PMB
Limited to provincial facility

Unlimited, subject to Scheme Protocols

3 psychologist visits per beneficiary per
annum and subject to Scheme Protocol
R 500 per visit

Risk Benefit - Other Insured Benefits

External medical appliances Subject to prescription by a registered healthcare practitioner and obtained from a supplier registered with the Board of Healthcare Funders (BHF)	R11 150 per family per annum Subject to appliance sub-limits
Home nursing	R7 100 per family per annum 100% of Scheme Rate
Hospice, rehab and step down facility	R29 500 per family per annum 100% of Scheme Rate
Specialised radiology (In and out of hospital) (CT, MRI, PET and Nuclear Medicine scans)	R12 000 per family per annum 100% of Scheme Rate
Video EEG for epilepsy surgery	R12 000 per family per annum
Emergency evacuation and ambulance services (Europ Assistance) Limited to preferred provider	100% of Scheme Rate
International cover	Limited to emergency medical cover up to 30 days / R2 million per beneficiary per incident

Chronic Medication Benefit

25 PMB Chronic Disease List (CDL) conditions	Included- Subject to Prestige chronic formulary
Prestige Plan additional chronic conditions	Included, subject to a benefit ceiling of: M R4 150 M+ R8 300 Chronic benefits limited to PMB CDL's thereafter

Note:

- Authorisation must be obtained in advance from the Scheme for all hospitalisation and other insured benefits
- No benefits shall be granted for (1) the replacement of existing External Medical Appliance items, without satisfactory proof that the existing item is obsolete, (2) costs of maintenance, spares or accessories
- Hospice, rehab and step down facility: Includes accommodation and visits by a medical practitioner, except where inclusive global fees are applicable
- Other insurer benefits are pro-rated for members joining during the course of the year
- Chronic medication:
 - Prestige Plan additional chronic medication benefit will be pro-rated for members joining during the course of the year
 - Should be obtained from Preferred Provider Pharmacies to avoid processing co-payments
 - Is restricted to formularies, clinical entry criteria and disease management protocols where applicable
 - Requires a script from a person legally entitled to prescribe and the relevant ICD 10 diagnosis code
 - Must be registered by the doctor or pharmacy through Swift Online (SOL) on 0800 132 345
 - Reference pricing and Maximum Medical Aid Price (MMAP®) may apply

Guardian Benefit

Limited to (Excludes consultation)	R2 950 per family per annum, Scheme Rate applies
Blood pressure Blood sugar Cholesterol Body mass index	R 90 per beneficiary over the age of 18 years only at pharmacy
HIV test	1 Test per beneficiary per annum
Mammogram	1 Test per beneficiary per annum over the age of 25 years
Pap smears	1 Test per beneficiary per annum
PSA testing	1 Test per beneficiary per annum over the age of 45 years
Vaccinations	1 Flu vaccination per beneficiary per annum Childhood immunisations as recommended by the Department of Health up to 18 months HPV (cervical cancer) vaccine –1 course (3 doses per registered schedule) per female beneficiary per life between 9 and 46 years of age
Pharmacist benefit Pharmacist prescribed medication	R 300 per family per annum Formulary applies
Health Assist (Nurse helpline)	Call 0861 112 162

Focus Benefit

<p>General Practitioners Consultations outside Networks may incur a co-payment</p>	<p>Unlimited 100% of Scheme Rate Subject to Scheme rules and protocols</p>
<p>Specialists Consultations Room procedures Note: Consultations outside Networks may incur a co-payment</p>	<p>100% of Scheme Rate 220% of Scheme Rate M 4 visits per annum M+1 5 visits per annum M+2+ 6 visits per annum Additional visits subject to PMB and pre-authorisation</p>
<p>Dentistry Conservative dentistry Consultations X-Rays Fillings Oral hygiene Preventative Extractions Root canal therapy Dentures</p>	<p>2 annual check-ups per beneficiary per annum 2 emergency consultations per beneficiary per annum Covered at 100% of Scheme Rate Intra-Oral: 8 per beneficiary per annum Extra-Oral: 1 per beneficiary per annum Treatment plan and x-rays required for more than 5 fillings. Once per tooth in a 1 year benefit cycle. There are no benefits for replacing amalgam (silver) fillings with composite white fillings. 100% of Scheme Rate 2 annual scale and polish treatments per beneficiary No benefits for oral hygiene instructions or for adult fluoride One fissure sealant per molar tooth in a 3 year cycle limited to individuals younger than 16 years 100% of Scheme Rate 100% of Scheme Rate 1 set of plastic dentures (upper and lower) or partial metal dentures per beneficiary. Benefit for plastic dentures granted only once in a 4 year cycle. Benefit for metal dentures granted only once in a 5 year cycle. Full metal dentures are not covered.</p>
<p>Specialised dentistry Note: Pre-authorisation required Orthodontics (fixed braces) Surgery in rooms Anaesthetics in rooms (Laughing gas and IV sedation) Dental treatment in hospital</p>	<p>£8 000 per family per annum <ul style="list-style-type: none"> • Crowns • Bridges • Implants • Partial metal dentures • Periodontics • Orthodontics Pre-authorisation required Subject to Scheme Rules and Protocols Limited to individuals younger than 38 years. Orthognathic surgery is not covered 100% of Scheme Rate Pre-authorisation required 100% of Scheme Rate Clinical protocols apply Impacted wisdom teeth and certain maxillofacial procedures Extensive treatment for children younger than 5 years of age Pre-authorisation is required and protocols apply 100% of Scheme Rate</p>

Optometry Limited to Network Provider and 24 month benefit cycle Consultations / examination Spectacles / lenses Or Contact lenses	1 consultation per beneficiary Limited to R2 500, including a frame sub-limit of R1 200 Or Limited to R1 800 per beneficiary
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Plus Benefit

Annual limits Will be pro-rated for members joining during the course of the year	M R5 600 per annum M+1 R7 900 per annum M+2+ R10 100 per annum
Alternative healthcare services Biokineticists Chiropodists Chiropractors Dieticians Homeopaths Naturopaths Occupational therapists Osteopaths Podiatrists Social workers Acupuncture	M R2 400 per annum M+1 R3 550 per annum M+2+ R4 700 per annum 100% of Scheme Rate Subject to annual limit
Radiology and Pathology (excluding specialised radiology)	M R2 400 per annum M+1 R2 950 per annum M+2+ R3 550 per annum 100% of Scheme Rate Subject to annual limit
Acute medication Subject to plan formulary Reference and MMAP® pricing may apply Benefit protocols apply Use preferred provider pharmacies to avoid processing co-payments	M R2 400 per annum M+1 R3 550 per annum M+2+ R4 700 per annum Subject to annual limit
Physiotherapy	R1 050 per family per annum 100% of Scheme Rate Subject to annual limit
Psychology and psychiatric treatment	R1 200 per family per annum 100% of Scheme Rate Subject to annual limit
Speech therapy and audiology	R1 200 per family per annum 100% of Scheme Rate Subject to annual limit
Extended pharmacist benefit	M R 600 per annum M+1 R 700 per annum M+2+ R 950 per annum Subject to Formulary and annual limit Limited to R 90 per script

Contributions

	Prestige
Principal Member	R2 083
Adult Dependant	R2 026
Child Dependant	R 534

Consult your Broker or Distribution Consultant regarding Resolution's diversified product range and ensure that when you are faced with healthcare eventualities, you can rest assured that we have you covered. This information brochure is a summary of the Plan benefits. Please refer to the Member's Guide, online brochures and Scheme Rules for more information.