



CAPE MEDICAL PLAN - BENEFITS EFFECTIVE 1 JANUARY 2010

healthpact PREMIUM hospital plan

Affordable comprehensive hospital cover.

You are healthy and active. You have no need for complicated day-to-day benefits.

You don't suffer from ongoing chronic conditions. You simply want straightforward, affordable health care for your family, with effective cover for big events.

Choose HealthPact Premium Hospital Plan for peace of mind.

HealthPact Premium Hospital Plan offers comprehensive hospital cover, and allows you to manage your day-to-day medical expenses independently.

healthpact SILVER

Affordable private hospital cover plus out-of-hospital benefits.

You love your family and want to make sure that they are effectively covered for any unforeseen events.

You would like to know that you have a little money put aside for things like dental appointments, eye-tests, and over-the counter medication.

You need affordable health care for your family, with comprehensive hospital cover and day-to-day benefits.

Choose HealthPact Silver for inclusive care.

HealthPact Silver offers comprehensive hospital cover, as well as a medical savings account for day-to-day expenses.

healthpact SELECT

Comprehensive hospital cover plus flexible and enhanced out-of-hospital benefits.

You want to have peace of mind, knowing that you have access to the best possible care and facilities, should the need arise.

You want effective cover for chronic conditions, and you want to be sure that the funds in your Day to Day pool of benefits will cover your day-to-day expenses, in addition to which your medical savings

account will act as a back up, once your Day to Day pool of benefits has been exhausted.

Choose HealthPact Select for flexible and comprehensive care.

HealthPact Select offers comprehensive hospital cover, enhanced out-of-hospital/Day to Day benefits at R4800 per adult and R1200 per child per annum.

In addition to this you have a substantial medical savings account. The Day to Day benefits are combined and one member of the family can utilise the entire pool.

HEALTHPACT			
OPTION	SELECT (Hospital Plan with Day to Day and MSA)	SILVER (Hospital Plan with MSA)	PREMIUM (Hospital Plan only)
PRIVATE HOSPITAL COVER *			
Overall Annual Limit	Unlimited	Unlimited	Unlimited
Hospital Accommodation (Agreed preferred provider tariff)	Up to 100% of NHRPL/CMP tariff - Intensive Care, Specialised Intensive Care, High Care & General Wards	Up to 100% of NHRPL/CMP tariff - Intensive Care, Specialised Intensive Care, High Care & General Wards	Up to 100% of NHRPL/CMP tariff - Intensive Care, Specialised Intensive Care, High Care & General Wards
Out-Patient Services *	Payable from available Day to Day benefits, thereafter from available MSA	Payable from available MSA	No cover
Hospitalisation / Institutionalisation for treatment of Non-PMB Mental Illness, Alcoholism & Drug Addiction *	Payable from available Day to Day benefits, thereafter from available MSA	Payable from available MSA	No cover
Materials & Medicines (dispensed) and used in hospital*	100% of cost to a maximum of Single Exit Price plus the maximum dispensing fee allowed	100% of cost to a maximum of Single Exit Price plus the maximum dispensing fee allowed	100% of cost to a maximum of Single Exit Price plus the maximum dispensing fee allowed
Take home medication (TTO's)	Payable from available Day to Day benefits, thereafter from available MSA	Payable from R300 per family, acute medicine benefit, thereafter from available MSA	No cover
MATERNITY BENEFITS			
Confinements *	200% of NHRPL/CMP tariff	100% of NHRPL/CMP tariff	200% of NHRPL/CMP tariff
Ante-natal consultations and foetal scans	R2 000 per family, thereafter payable from available Day to Day benefits, and then from available MSA	R1 600 per family, thereafter from available MSA	R2 000 per family
GENERAL MEDICAL PRACTITIONERS			
Procedures & Operations *	200% of NHRPL/CMP tariff	100% of NHRPL/CMP tariff	200% of NHRPL/CMP tariff
Consultations	100% of cost payable from available Day to Day benefits, thereafter from available MSA	Up to 2 General Practitioner visits at NHRPL/CMP tariff, per beneficiary, thereafter from available MSA	No cover
PAEDIATRICIANS			
Procedures & Operations *	200% of NHRPL/CMP tariff	100% of NHRPL/CMP tariff	200% of NHRPL/CMP tariff
Consultations	200% of NHRPL/CMP tariff limited to the available Day to Day benefit, thereafter from available MSA	R600 per child up to 100% of NHRPL/CMP tariff, thereafter from available MSA	200% on NHRPL/CMP tariff, limited to R1200 per child
REGISTERED MEDICAL SPECIALISTS			
Procedures & Operations *	200% of NHRPL/CMP tariff	100% of NHRPL/CMP tariff	200% of NHRPL/CMP tariff
Consultations	Payable from available Day to Day benefit, thereafter from available MSA	Payable from available MSA	No cover
Laparoscopic & Endoscopic Procedures *	200% of NHRPL/CMP tariff. Laparoscopic procedures as per the Endoscopic Surgeons guidelines with a co-payment ranging between R1 000 – R2 500	100% of NHRPL/CMP tariff. Laparoscopic procedures as per the Endoscopic Surgeons guidelines with a co-payment ranging between R1 000 – R2 500	200% of NHRPL/CMP tariff. Laparoscopic procedures as per the Endoscopic Surgeons guidelines with a co-payment ranging between R1 000 – R2 500
RADIOLOGISTS			
Procedures (Angiograms, CT Scans, Duplex Doppler Scans, Interventional Radiology, MRI Scans, Nuclear Medical Investigations) *	100% of NHRPL/CMP tariff limited to R6 000 per beneficiary, with a co-payment of R1 500, per event in respect of all procedures	100% of NHRPL/CMP tariff limited to R6 000 per beneficiary, with a co-payment of R1 500, per event in respect of all procedures	100% of NHRPL/CMP tariff limited to R6 000 per beneficiary, with a co-payment of R1 500, per event in respect of all procedures
Black & White X-rays (In-Hospital) *	100% of NHRPL/CMP tariff	100% of NHRPL/CMP tariff	100% of NHRPL/CMP tariff
Black & White X-rays (Out-of-Hospital)	100% of NHRPL/CMP tariff limited to the available Day to Day benefit, thereafter from available MSA	Payable from available MSA	No cover
PATHOLOGY			
Services provided by Pathcare Laboratories (In & Out-of-Hospital), with GP referral	100% of cost at NHRPL/CMP tariff	100% of cost at NHRPL/CMP tariff	100% of cost at NHRPL/CMP tariff

HEALTHPACT			
OPTION	SELECT (Hospital Plan with Day to Day and MSA)	SILVER (Hospital Plan with MSA)	PREMIUM (Hospital Plan only)
MAXILLO FACIAL & ORAL SURGEONS *			
In-Hospital Procedures *-	120% of NHRPL/CMP tariff, subject to CMP case management protocols & authorisations	100% of NHRPL/CMP tariff, subject to CMP case management protocols & authorisations	120% of NHRPL/CMP tariff, subject to CMP case management protocols & authorisations
Dental implants, general dental treatment, orthodontic treatment, orthognathic procedures, periodontic treatment & prosthodontic treatment	100% of NHRPL/CMP tariff limited to the available Day to Day benefit, thereafter from available MSA	100% of NHRPL/CMP tariff limited to available MSA	No cover
AMBULANCE SERVICES *			
Emergency Services provided by a registered Ambulance Service*	100% of NHRPL/CMP tariff	100% of NHRPL/CMP tariff	100% of NHRPL/CMP tariff
BLOOD TRANSFUSION SERVICES *			
In-Hospital cover *	100% of cost to a maximum of 100% of NHRPL/CMP tariff	100% of cost to a maximum of 100% of NHRPL/CMP tariff	100% of cost to a maximum of 100% of NHRPL/CMP tariff
PROSTHESIS & IMPLANTS* (See list attached)			
If introduced internally as an integral part of an operation these are covered to a maximum of Cape Medical Plan's prosthetic price list. (Hearing devices & dental implants are excluded.) *	100% of cost subject to CMP case management protocols & authorisations, with a limit of R20 000 per beneficiary	100% of cost subject to CMP case management protocols & authorisations, with a limit of R20 000 per beneficiary	100% of cost subject to CMP case management protocols & authorisations, with a limit of R20 000 per beneficiary
CHRONIC RENAL DIALYSIS* (Refer Notes & Terminologies attached)			
Covered as a Prescribed Minimum Benefit provided requirements are met and that treatment is provided by a DSP nominated by Cape Medical Plan*	100% of NHRPL/CMP tariff, subject to CMP case management protocols & authorisations	100% of NHRPL/CMP tariff, subject to CMP case management protocols & authorisations	100% of NHRPL/CMP tariff, subject to CMP case management protocols & authorisations
ONCOLOGY TREATMENT*			
Covered as a Prescribed Minimum Benefit provided requirements are met and that treatment is provided by a DSP nominated by Cape Medical Plan (treatment plan subject to approval) *	100% of NHRPL/CMP tariff, as per the SA Oncology Consortium Tier 1 & Tier 2 Curative treatment guidelines	100% of NHRPL/CMP tariff, as per the SA Oncology Consortium Tier 1 treatment guidelines	100% of NHRPL/CMP tariff, as per the SA Oncology Consortium Tier 1 treatment guidelines
Anti-Emetics (anti-nausea) and Vitamins	Payable from available Day to Day benefit, thereafter from available MSA	Payable from available MSA	No cover
GENERAL DENTAL PRACTITIONERS, DENTAL TECHNICIANS & DENTAL SPECIALISTS			
Orthodontic Treatment	100% of the NHRPL/CMP tariff limited to the available Day to Day benefit, thereafter from available MSA	Payable from available MSA	No cover
Consultations for General Dental Practitioner	100% of the NHRPL/CMP tariff limited to the available Day to Day benefit, thereafter from available MSA	100% of NHRPL/CMP tariff limited R300 per beneficiary, thereafter available from MSA	No cover
PRESCRIBED MEDICATION			
Chronic medication (Subject to Chronic Programme protocols) *	100% of cost to a maximum of Single Exit Price for all listed chronic conditions at a DSP, or via the CDE programme	100% of cost to a maximum of Single Exit Price for Asthma, Epilepsy & Juvenile Rheumatoid Arthritis at a DSP	100% of cost to a maximum of Single Exit Price for Asthma, Epilepsy & Juvenile Rheumatoid Arthritis at a DSP
Acute Medication	100% of cost to a maximum of Single Exit Price plus the maximum dispensing fee, limited to the available Day to Day benefit, thereafter from available MSA	100% cost to a maximum of Single Exit Price limited to R300 per family, thereafter from available MSA	No cover
SPECTACLES & CONTACT LENSES			
	100% of cost limited to the available Day to Day benefit, thereafter from available MSA	Payable from available MSA	No cover
BIOKINETICISTS & PHYSIOTHERAPISTS			
Approved treatment in hospital*	100% of NHRPL/CMP tariff, subject to CMP case management protocols & authorisations	100% of NHRPL/CMP tariff, subject to CMP case management protocols & authorisations	100% of NHRPL/CMP tariff, subject to CMP case management protocols & authorisations
Treatment & consultations out of hospital	100% of NHRPL/CMP tariff subject to the available Day to Day benefit, thereafter from available MSA	Payable from available MSA	No cover
HEARING DEVICES			
	100% of cost subject to the available Day to Day benefit, thereafter from available MSA	Payable from available MSA	No cover
TREATMENT IN LIEU OF HOSPITALISATION*			
If approved, treatment instead of hospitalisation (Subject to CMP case management protocols & authorisations) *	100% of NHRPL/CMP tariff provided by Hospices & Registered Nurses limited to 15 days per beneficiary. 100% of cost subject to the available Day to Day benefit, thereafter from available MSA	100% of NHRPL/CMP tariff provided by Hospices & Registered Nurses limited to 15 days per beneficiary, thereafter payable from available MSA	100% of NHRPL/CMP tariff provided by Hospices & Registered Nurses limited to 15 days per beneficiary
ORGAN TRANSPLANTS*			
Covered as a Prescribed Minimum Benefit provided requirements are met and that treatment is provided by a DSP nominated by Cape Medical Plan*	100% of NHRPL/CMP tariff	100% of NHRPL/CMP tariff	100% of NHRPL/CMP tariff

HEALTHPACT			
OPTION	SELECT (Hospital Plan with Day to Day and MSA)	SILVER (Hospital Plan with MSA)	PREMIUM (Hospital Plan only)
PRINCIPLE MEMBER	R1 850 (R259 savings included per month)	R976 (R191 savings included per month)	R 727
ADULT BENEFICIARY	R1 850 (R259 savings included per month)	R976 (R191 savings included per month)	R 727
MINOR BENEFICIARY	R300 (R42 savings included per month)	R142 (R28 savings included per month)	R 121
MEDICAL SAVINGS ACCOUNT	Compulsory savings included in contribution	Compulsory savings included in contribution	Not applicable

NOTES AND TERMINOLOGIES	
	Excesses/Co-Payments: Healthpact Premium - all charges that exceed Cape Medical Plan's limits, or that are in excess of the tariff charged by doctors, specialists & hospitals will be for the member's own account. HealthPact Silver - all charges in excess of Cape Medical Plan's sub-limits, as well as excess tariffs charged by doctors, specialists and hospitals, will be payable from the available MSA. If the MSA is depleted, these expenses will be for the member's own account. HealthPact Select - all charges in excess of Cape Medical Plan's sub-limits, as well as excess tariffs charged by doctors, specialists and hospitals, will be payable from the available MSA. If the MSA is depleted, these expenses will be for the member's own account. However, if you allow us to manage the case on your behalf, these co-payments will be minimal.
	Claims - all claims must be submitted within 4 months of the date of treatment.
	Pro-Rated Benefits - any members who join Cape Medical Plan after 1 January of each year will receive out-of-hospital benefits in proportion to the number of months subscription they will pay, for the remainder of that particular year ie. out-of-hospital benefits will be pro-rated.
	Medical Savings Accounts (MSA's) is an interest-bearing account, which means you will earn interest on a positive balance which is carried over each year. The MSA benefit only applies to the HealthPact Silver and HealthPact Select products.
	Day to Day pool - unused benefits are not carried over each year.
	NHRPL/CMP tariff is the recommended government tariff (National Health Reference Price List) - previously known as "medical aid rates" and is a list of benchmark prices for medical services, published by the Department of Health. This list is used by medical schemes to determine the amount that they should pay out for each specific procedure. Medical professionals are free to charge whatever they choose for their services, but bear in mind that as in any other profession, they are often negotiable. The CMP tariff is the 2010 NHRPL tariff.
	Case Management - by choosing the right service providers and negotiating with them, patients can get a better deal on medical treatment and medication. We have established a Case Management division to guide you in knowing which questions to ask your service providers, and also to establish the best course of action to treat your condition. Items marked "subject to CMP case management protocols and authorisations" will be covered in full, provided that our case management protocols are adhered to.
	Pre-Authorisation - all procedures marked with an asterisk (*) require pre-authorization. Please remember that no claims can be paid for these procedures if pre-authorization was not obtained! In the event of emergency admission to hospital, the member has 72 hours in which to obtain authorisation. Call 0860 100 512 during office hours to obtain authorisation.
	Single Exit Price is the price at which medicines leave the manufacturer. This price, as well as the dispensing fee (this may be added by pharmacists and doctors) is regulated by Government.
	Agreed Tariff is the negotiated fixed tariff that Cape Medical Plan has agreed with all major hospital groups in South Africa (Netcare, Mediclinic, Lifehealthcare and National Hospital Network), and this agreed tariff will be applied to all our members requiring hospitalisation.
	Financial Year - Cape Medical Plan's financial year runs from 1 January to 31 December - this applies to the insured benefits, Day to Day pool and medical savings account (MSA).
	Designated Service Provider (DSP)/Preferred Provider - these are our elected partners providing approved medical procedures, at pre-agreed tariffs. Renal Dialysis = the State, Chronic Medication = Clicks Pharmacies and Prescribed Minimum Benefits (PMB's) = the State.
	Prescribed Minimum Benefits (PMB's) - if your medical condition meets certain requirements, as laid down by law, you will qualify to be treated according to the rules of Prescribed Minimum Benefits. All medical aids must provide their members with the stipulated Prescribed Minimum Benefits; and no waiting periods, co-payments or restrictions may be imposed on patients qualifying for Prescribed Minimum Benefits.
	Benefit Payment Policy - all benefits shall be paid to the member where the service provider charges at a cost, rate, tariff or fee that is in excess of that provided for in the benefit sets of Cape Medical Plan. All benefits shall be paid to the member where the member requests that payment be made.
	All benefits in respect of oncology treatment shall be paid to the member directly.

Endoscopic Procedures		Prosthetic & Implants Price List	
PROCEDURE	AMOUNT	DEVICE	AMOUNT
Arthroscopies	R1 000	Cardiac stents (bare stents including delivery system)	R9 000 per stent
Appendectomies	R1 500	Cardiac stents (drug eluting including delivery system)	R15 000 per stent
Inguinal Hernia Repair	R1 000	Trans Vaginal Tape	R7 500
Gynaecological procedures	R1 500	Intra Ocular Lenses	R2 200 per lens
Urology procedures	R2 500	Patches utilised in incisional hernia repair	R3 000
Umbilical Hernia Repairs	R2 000	Patches utilised in groin hernia repair	R1 000
Incisional Hernia Repairs	R2 000	Hip, knee, shoulder, ankle and elbow replacements	R20 000
Ventral Hernia Repairs	R2 000	Pacemaker including leads	R20 000
Colectomy	R2 500		
Colonoscopy	R1 000		
Gastroscopy	R1 000		
Hysteroscopy	R1 000		
Sympathectomy	R2 500		
Vaginal Hysterectomy	R2 500		
Cystoscopy	R1 000		

Which conditions are covered on the Chronic Medication Benefit?	
Please remember that the chronic benefit is not automatic – if you are diagnosed with one of the following conditions, you should call 0860 100 512 to apply to join the Chronic Medication Programme. One of our qualified nursing sisters will explain the protocols and formularies that apply.	
- Addison's Disease	- Diabetes Mellitus Type 1 & 2
- Anti-coagulating Therapy	- Dysrhythmias
- Asthma	- Epilepsy
- Bipolar Mood Disorder	- Glaucoma
- Bronchiectasis	- Haemophilia
- Cardiac Failure	- Hyperlipidaemia
- Cardiomyopathy	- Hypertension
- Chronic Obstructive Pulmonary Disease	- Hypothyroidism
- Chronic Renal Disease	- Rheumatoid Arthritis / Juvenile Rheumatoid Arthritis
- Coronary Artery Disease	- Multiple Sclerosis
- Crohn's Disease	- Parkinson's Disease
- Cushing's Disease	- Schizophrenia
- Diabetes Insipidus	- Systemic Lupus Erythematosus
	- Ulcerative Colitis

Chronic Diabetic Endocrinology (CDE) Programme

A nationwide Preferred Provider Network of 160 trained diabetes teams deliver the benefits of this programme. These centres are contracted to provide certain services to those people with diabetes who belong to medical schemes and whose schemes have chosen to take part in the programme.

Each centre has a complete team of healthcare professionals consisting of a registered nurse, a dietician, a podiatrist and an ophthalmologist, offering a range of therapies, from generics to the most expensive modern drugs.

The guaranteed services available via the Diabetes Management Programme are:

Consultations with a health professional trained in diabetes management no less than twice a year – more if required.

Full initial and ongoing individual and group diabetes education as specified in the guidelines.

An initial interview with a dietician followed by an annual visit – more if required.

A minimum of one visit per year to a podiatrist.

Appropriate laboratory investigations, including but not limited to HbA (1c), every six months; annual monitoring of blood fat levels and kidney function.

One annual consultation for retinopathy and glaucoma screening with a specialist ophthalmologist.

All diabetes medication, including blood glucose testing meters and strips.

All hospitalisation for diabetes emergencies, including diabetic ketoacidosis and hypoglycaemia.

A 24-hour telephone hotline to facilitate the management of home-treatable diabetes emergencies.

To join this programme you need to be on the Healthpact Select product and have completed the Chronic Disease Application Form.

Benefit Exclusions (Rule 21 of the CMP Benefit Set 2010 Premium and Rule 25 of the CMP Benefit Set 2010 Silver and Select)

The following exclusions apply, but are payable from either the Day to Day benefit (Select product), or from the Individual Medical Savings Account, (Silver and Select products):

- Surgery and other procedures for the purpose of correcting refractive errors
- In-Vitro Fertilisation and Infertility treatment
- Treatment relating to sexual dysfunction
- Treatment relating to or forming part of Organ Transplants other than provided for in Rule 19 of the CMP Benefit Set 2010 Premium and Rule 22 of the CMP Benefit Set 2010 Silver and Select
- Treatment for cosmetic purposes
- Treatment relating to or arising from participation in professional sporting activities
- Medical examinations for insurance, school, association, emigration, visa, employment or similar purposes
- Any treatment relating to substance abuse including alcohol
- Treatment for Obesity including surgery
- Educational Therapy
- Protective gear
- Treatment of HIV/AIDS shall be limited to Prescribed Minimum Benefits
- Treatment arising from wilful self-injury, suicide or attempted suicide
- Hearing devices including cochlear implant devices, whether introduced internally or not, as well as the maintenance of these devices
- Household medicinal remedies, contraceptives, patent medicines, non-ethical and all proprietary preparations including but not limited to vitamins, minerals, medical creams, soaps, shampoos and laxatives
- Treatment for injury or illness for which any other party is liable, unless Cape Medical Plan will advance the benefits, provided that where recovery is later made Cape Medical Plan shall be refunded for benefits paid
- Ptosis repairs
- Artificial and synthetic blood products
- All treatment and costs incurred for which benefits are not specifically provided
- Experimental and unproven treatments, procedures, devices and medications

For clarification of any of the items in this brochure, please contact us on 021 937 8300 or email customers@cmp.co.za