

⊕ ESSENTIAL PRIMARY PLUS 2018



Our **ESSENTIAL PRIMARY PLUS** option has been created to provide a choice between **DAY-TO-DAY** and **EMERGENCY & ACCIDENTAL** benefits because we understand that every individual is unique. Whether belonging to a medical scheme or not, access to the very best essential and affordable health insurance is within your reach, providing cover to you, your spouse and any child dependant of whom you are the parent or legal guardian.

Our **HEALTH INSURE** clients have unlimited access to any Unity Health network doctor nationwide. No upfront payments are required when you visit a network provider because your Stratum Health Insure and Unity Health client card identifies you as a registered client, allowing you to access the benefits that you need.

Rest assured that you have found a healthcare partner that not only covers you, but gets you.



⊕ ESSENTIAL PRIMARY PLUS

BENEFIT OPTION	ENTRY AGE	MONTHLY PREMIUM			
		PRINCIPAL INSURED	SPOUSE	ADULT DEPENDANT <small>FULL TIME STUDENT 21+</small>	CHILD DEPENDANT <small>20 AND YOUNGER</small>
DAY-TO-DAY BENEFITS ONLY	55 and younger	R 315	R 210	R 210	R 85
	56+	R 465	R 360	--	--
EMERGENCY & ACCIDENTAL BENEFITS ONLY	60 and younger	R 135	R 75	R 75	R 30
	61+	R 170	R 110	--	--
DAY-TO-DAY AND EMERGENCY & ACCIDENTAL BENEFITS	55 and younger	R 405	R 290	R 290	R 105
	56+	R 580	R 465	--	--

WE COVER

- You, your spouse and any child dependant of whom you are the parent or legal guardian.
- Child dependants up to the age of 21 at a child dependant premium and full time students over the age of 21 at an adult dependant premium, provided proof of studies is submitted yearly.
- You, whether you belong to a medical scheme or not.

DAY-TO-DAY BENEFITS

Our comprehensive and essential **DAY-TO-DAY BENEFITS**, which can be taken as a stand-alone benefit option, are provided by Unity Health's network of service providers consisting of approximately **1 800 doctors, 2 274 dentists, 2 582 optometrists** as well as various pharmacies, pathologists and radiologists.

DAY-TO-DAY BENEFITS	UNIQUE FEATURES
DOCTOR VISITS	You and your loved ones have access to unlimited visits at any Unity Health network doctor .
BASIC MEDICAL PROCEDURES	Your network doctor can perform minor medical and surgical procedures in the rooms such as removal of a mole or draining of an abscess.
ACUTE MEDICATION	<p>DISPENSING NETWORK DOCTOR When you need acute medication for an acute condition or illness, such as chest infection, sinusitis or flu, your dispensing network doctor can provide medication according to a formulary. Acute medication that is provided by your dispensing network doctor in the rooms is unlimited.</p> <p>NON-DISPENSING NETWORK DOCTOR A non-dispensing network doctor will prescribe acute medication according to a formulary that can be collected at any Mediscor pharmacy, which includes pharmacies such as Clicks and Dis-Chem. Acute medication that is prescribed by your non-dispensing network doctor is limited to R 2 750 per person per year.</p>
CHRONIC MEDICATION	Chronic conditions or diseases, such as diabetes, can be treated by your network doctor . Chronic medication can be provided or prescribed by your network doctor according to a formulary, for the following chronic conditions or diseases: Chronic Obstructive Pulmonary Disorder, Diabetes Type 1 & 2, Epilepsy, Hyperlipidemia, Hypertension, Tuberculosis and HIV / AIDS .
BASIC BLOOD TESTS & X-RAYS	Your network doctor must refer you for basic blood tests, such as a cholesterol or glucose test, or basic x-rays, such as a chest x-ray during one of your visits. Blood tests and x-rays are subject to an approved list of tariff codes.
BASIC & EMERGENCY DENTISTRY	Basic dental procedures, such as a full mouth assessment, fillings and extractions and emergency dental procedures, such as treatment of an abscess or emergency root canal can be provided by your Unity Health network dentist . Basic and emergency dental procedures are subject to an approved list of tariff codes, limited to R 1 100 per person per event and R 3 300 per family every 2 years . Specialised dentistry such as bridgework, crowns, dentures and orthodontic treatment are not covered.
ACCIDENTAL DENTISTRY	When you need urgent dental treatment for an unexpected physical injury that causes loss or damage to your teeth, such as a broken tooth, your network dentist can provide you with treatment to a maximum of R 2 200 per person per event and R 6 600 per family every 2 years .
BASIC EYE CARE	Your nearest PPN network optometrist can provide an eye test and prescribe glasses when you need basic eye care. You are covered for 1 eye test per person every year , as well as 1 standard frame to the value of R 195 per person and 1 pair of clear monofocal or bifocal lenses per person every 2 years . Additional optional extras, such as tinting, anti-reflective and scratch resistant coatings are not covered.
MATERNITY CARE	You may consult with any gynaecologist of your choice when you, the soon-to-be-mom, need one-on-one consultations to get advice about your health during your pregnancy. Our benefit provides 2 maternity check-ups including ultrasound scans during your visits, limited to R 2 600 per policy per year.

EMERGENCY & ACCIDENTAL BENEFITS

Our unique **EMERGENCY & ACCIDENTAL BENEFITS**, which can be taken as a stand-alone benefit option, are provided by your nearest, registered private hospital and the hospital's casualty facility. When you are admitted into a private facility for a planned medical procedure, cover is not applicable.

EMERGENCY & ACCIDENTAL BENEFITS	UNIQUE FEATURES
OVERALL POLICY LIMIT (OPL)	Each benefit has its own rand amount limit but when combined cannot exceed R 1 000 000 per policy per year.
HOSPITALISATION DUE TO AN EMERGENCY	You are covered at your nearest private hospital when you need immediate treatment in the event of a medical emergency that requires you to be stabilised before being transferred to a public facility, should you need further treatment. An emergency is an event or unexpected health condition that can result in death or serious bodily impairment if not treated immediately, such as a heart attack or stroke. Our benefit is limited to R 17 500 per person per event, subject to the OPL .
HOSPITALISATION DUE TO AN ACCIDENT	We cover you when you need immediate treatment due to accidental impact, which results in severe physical injury. Examples of accidents are motor vehicle accidents where you sustained severe injuries, injuries from a crime or a snake bite. Our benefit is limited to R 1 000 000 per person per event, subject to the OPL .
CASUALTY FACILITY	When you need immediate treatment for minor physical injury that is caused by an external force, you are covered at a private hospital's casualty facility to a benefit limit of R 5 000 per person per event, subject to the OPL . Visits to a casualty facility can be due to minor injuries caused by vehicle accidents or from working with factory machinery.
24 HOUR MEDICAL EMERGENCY SERVICES	When life happens and every second matters, our national emergency partners will be standing by to provide essential emergency assistance. You have access to: <ul style="list-style-type: none"> • Our national 24-hour emergency contact centre • Ambulance transfers between hospitals • Repatriation of a loved one's mortal remains within the borders of South Africa • Emergency transport services by air or road • Telephonic medical advice
ACCIDENTAL DEATH BENEFIT	Our benefit offers a lump sum payment when you are faced with unexpected change due to the loss of a loved one. We provide a payment of R 10 000 in the event of the accidental death of the principal insured or spouse registered on the health insurance policy, not subject to the OPL .

ESSENTIAL WELLNESS BENEFITS

Our **ESSENTIAL WELLNESS BENEFITS** provide access to a wellness assessment and a telephonic assistance programme consisting of counselling and advisory services that are automatically included when you join our **DAY-TO-DAY**-, or **DAY-TO-DAY AND EMERGENCY & ACCIDENTAL BENEFITS** health insurance option, because we believe a healthy body and a focused mind help you lead your best life.

Our stand-alone **EMERGENCY & ACCIDENTAL BENEFITS** health insurance option includes access to only our **ESSENTIAL ASSISTANCE PROGRAMME (EAP)** when sound advice is needed most.

ESSENTIAL WELLNESS BENEFITS	UNIQUE FEATURES
WELLNESS ASSESSMENT BENEFIT	Your nearest Dis-Chem pharmacy provides the necessary wellness assessment when you need peace of mind about the status of your health. The wellness assessment is done by registered nurse practitioners at a Dis-Chem clinic in an enclosed private consultation room. Our WELLNESS ASSESSMENT BENEFIT includes the following health checks: <ul style="list-style-type: none"> • Blood pressure • Glucose levels • Waist circumference • Cholesterol • Body Mass Index (BMI) • HIV including pre- & post-test counselling Our benefit is limited to 1 assessment per person per year.
ESSENTIAL ASSISTANCE PROGRAMME (EAP)	When the storms of life get you down and you need advice and guidance, you have access to our ESSENTIAL ASSISTANCE PROGRAMME (EAP) that provides unlimited telephonic advisory and counselling services. Our EAP benefit is available 24/7 and includes advice and counselling for: <ul style="list-style-type: none"> • Trauma counselling • Legal advice • HIV counselling • Financial advice When you need an extra boost to face life head-on, personal face-to-face counselling can be arranged for your own pocket.

THE CLEAR PRINT



We believe in consistently communicating in a simple, clear and concise manner and have therefore removed the insurance jargon so that you don't have to read between the lines.

YOUR HEALTH INSURE POLICY WAITING PERIODS

From the first day your cover starts, waiting periods will apply to the **DAY-TO-DAY BENEFITS** on your **ESSENTIAL PRIMARY PLUS** option.

2 MONTH GENERAL WAITING PERIOD

Within the first **2 months** of cover a general waiting period will apply to all benefits.

9 MONTH MATERNITY CARE WAITING PERIOD

Within the first **9 months** of cover a waiting period will apply to the **MATERNITY CARE** benefits.

12 MONTH BASIC EYE CARE & CHRONIC MEDICATION WAITING PERIOD

Within the first **12 months** of cover a waiting period will apply to the **BASIC EYE CARE** and **CHRONIC MEDICATION** benefits.

EXCEPTIONS TO THE RULE

- A **2 Month** General Waiting Period applies to the **ESSENTIAL WELLNESS BENEFITS** on your **ESSENTIAL PRIMARY PLUS** option.
- Waiting periods do not apply to the **EMERGENCY & ACCIDENTAL BENEFITS** on your **ESSENTIAL PRIMARY PLUS** option.

GENERAL EXCLUSIONS APPLICABLE TO YOUR HEALTH INSURE POLICY

We do not cover service providers' accounts for related medical procedures and / or treatment, hospitalisation, illness, disease, loss, damage, death, bodily injury or liability that is caused by or results from:

- 1) An event where the claimant is not an insured person at the time of the event.
- 2) An event where a benefit limit or an Overall Policy Limit (OPL) has been reached.
- 3) An event where the health insurance policy does not provide the relevant benefit to claim from.
- 4) An event where pre-authorization or an appropriate service provider referral was not obtained and / or where the Unity Health guidelines or protocols were not adhered to.
- 5) An event where a service provider was utilised that does not form part of the Unity Health network, unless otherwise specified.
- 6) An event where healthcare services, such as consultations, basic medical procedures, acute and chronic medication and basic dentistry do not form part of Unity Health's list of approved services, tariff codes or benefits.
- 7) An event that occurs during a policy waiting period, unless otherwise specified.
- 8) A hospital event that was not due to an accident or an emergency.
- 9) A hospital event for a planned medical procedure.
- 10) Costs incurred for the voluntary stay at a private facility following stabilisation due to an emergency.
- 11) Reconstructive cosmetic surgery and / or maxillo-facial surgery, including related medical conditions and procedures, if not performed during an authorised hospital event resulting from an accident.
- 12) Contact lenses.
- 13) External prostheses or appliances, such as artificial limbs.
- 14) Artificial insemination, infertility treatment or contraceptives.
- 15) Robotic surgery, specialised mechanical or computerised appliances, equipment and all related service providers' accounts.
- 16) Routine physical, diagnostic procedures or examination where there are no objective indications of impairment in normal health.
- 17) Riots, wars, political acts, public disorder, terrorism, civil commotions, labour disturbances, strikes, lock-out, or any attempted such acts.
- 18) A deliberate criminal or fraudulent act or any illegal activity conducted by you or a member of your household which directly or indirectly results in loss, damage or injury.
- 19) Attempted suicide, intentional self-injury and deliberate exposure to exceptional danger except when attempting to save a human life.
- 20) An event where the use of drugs or alcohol is involved.
- 21) Participation in:
 - a) Active military, police or police reservist duty.
 - b) Aviation other than as a passenger.
 - c) Hazardous, competitive or professional sports or activities.
 - d) Any form of race or speed test, other than on foot or involving any non-mechanically propelled vehicle vessel craft or aircraft.
- 22) Nuclear weapons material, ionising radiations or contamination by radioactivity from any nuclear fuel, nuclear waste or from the combustion of nuclear fuel that includes any self-sustaining process of nuclear fission.
- 23) Events that occur for which the actual damage is provided for by legislation, including contractual liability and consequential loss.
- 24) Non-disclosure of material information that is likely to affect the assessment or acceptance of risk.