



WHAT YOU PAY

IF YOUR MONTHLY INCOME IS:

SUBJECT TO INCOME VERIFICATION

| R0 TO R11 250 |
|--------------------|
| R11 251 TO R18 250 |
| R18 251 TO R23 740 |
| R23 741+ |

| R1 554 | |
|--------|--|
| R1 897 | |
| R3 058 | |
| R3 753 | |

| R1 554 | | |
|--------|--|--|
| R1 897 | | |
| R3 058 | | |
| R3 753 | | |

ADULT DEPENDANT

| R732 | |
|--------|--|
| R872 | |
| R1 157 | |
| R1 424 | |

CHILD DEPENDANT

BONCAP USES SPECIFIC NETWORKS AND FORMULARIES (INCLUDING GP, SPECIALIST, HOSPITAL, PATHOLOGY AND PHARMACY).

DEPENDANTS UP TO AGE 24 YEARS PAY CHILD RATES.
SPECIAL RATES APPLY FOR FULL TIME STUDENTS WHO JOIN AS THE MAIN MEMBER.

MAIN MEMBER





OUT-OF-HOSPITAL BENEFITS

These benefits cover your day-to-day medical expenses at 100% of the BonCap Rate.

| NETWORK GP CONSULTATIONS OR REGISTERED NURSE CONSULTATIONS (INCLUDING VIRTUAL CARE CONSULTATIONS) | Unlimited GP or Registered Nurse consultations, using a nominated BonCap network GP | Approval is required from the 8th GP/Registered Nurse consultation per beneficiary |
|---|--|---|
| NON-NETWORK GP CONSULTATIONS | 1 out-of-network consultation per beneficiary | Maximum of 2 consultations per family, limited to R400 per visit |
| NON-NET WORK GP CONSULTATIONS | 30% co-payment applies, unless PMB | |
| EMERGENCY ROOM BENEFIT (FOR EMERGENCIES ONLY) | 2 emergency consultations per family at a casualty ward or emergency room facility of a hospital | Benefit limited to emergencies only |
| | Main member only | R2 300 |
| | Main member + 1 dependant | R3 840 |
| GP-REFERRED ACUTE MEDICINE, X-RAYS AND | Main member + 2 dependants | R4 600 |
| BLOOD TESTS | Main member + 3 dependants | R5 020 |
| | Main member + 4 or more dependants | R5 570 |
| | Subject to the applicable formularies, pharmacy and pathology networks | For acute medicine and blood tests: 20% co-payment applies at non-DSP |
| NETWORK SPECIALIST CONSULTATIONS | Maximum of 3 visits limited to R3 900 per beneficiary | Maximum of 5 visits limited to R5 800 per family |
| (THIS BENEFIT INCLUDES ACUTE MEDICINE, BLOOD TESTS, X-RAYS, MRIs AND CT SCANS) | Subject to the BonCap Specialist network and referral from a BonCap network GP | Pre-authorisation required (including MRIs and CT scans) |
| NON-NETWORK SPECIALIST CONSULTATIONS | PMB only | |
| MATERNITY CARE (ALSO SEE CARE PROGRAMMES PAGE 8) | Antenatal consultations are subject to the GP consultation and specialist consultation benefits (including 2 2D scans) | 4 consultations with a midwife after delivery (1 of these can be used for a consultation with a lactation specialist) |
| | Limited to R115 per event | Maximum of R330 per beneficiary, per year |
| OVER-THE-COUNTER MEDICINE | Subject to the BonCap medicine formulary and Bonitas pharmacy network | |
| ALLIED MEDICAL PROFESSIONALS (SUCH AS DIETICIAN, SPEECH AND OCCUPATIONAL THERAPIST) | PMB only | |

| PHYSIOTHERAPY, PODIATRY AND BIOKINETICS | PMB only | | |
|--|---|-----------------------------------|--|
| GENERAL MEDICAL APPLIANCES (SUCH AS WHEELCHAIRS AND CRUTCHES) R7 090 per family | | Subject to Managed Care protocols | |
| OPTOMETRY | Glasses or contact lenses are available through the contracted service provider once every 2 years (based on the date of your previous claim) | | Managed Care protocols apply |
| EYE TESTS | 1 composite consultation per beneficiary, at a network provider | OR | R400 per beneficiary for an eye examination, at a non-network provider |
| SINGLE VISION LENSES (CLEAR) OR | 100% towards the cost of lenses at network rates | | R215 per lens, per beneficiary, out of network |
| BIFOCAL LENSES (CLEAR) OR | 100% towards the cost of lenses at network rates | | R460 per lens, per beneficiary, out of network |
| MULTIFOCAL LENSES | 100% towards the cost of base lenses at a network provider, or limited to a maximum of R860 per designer lens, per beneficiary, in and out of network | | |
| FRAMES | R275 per beneficiary at a network provider | OR | R206 per beneficiary at a non-network provider |
| CONTACT LENSES R1 295 per beneficiary | | | |
| BASIC DENTISTRY | You must use a provider on the DENIS network Covered at the Bonitas Dental Tariff | | |
| DASIC DENTISTRY | Managed Care protocols apply | | |
| CONSULTATIONS 1 consultation per beneficiary | | | |
| EMERGENCY CONSULTATION | 1 emergency consultation for sepsis per beneficiary | | |
| X-RAYS: INTRA-ORAL | -RAYS: INTRA-ORAL 4 X-rays per beneficiary | | |
| X-RAYS: EXTRA-ORAL | PMB only | | |
| SCALING AND POLISHING | SCALING AND POLISHING 1 scaling and polishing | | 1 polish per beneficiary |
| FLUORIDE TREATMENTS | 1 treatment for beneficiaries from age 5 and younger than 16 years | | |

| FISSURE SEALANTS | 1 per tooth, once every 3 years for beneficiaries under 16 years | | |
|--|--|---|--|
| INHALATION SEDATION IN DENTAL ROOMS (LAUGHING GAS) | Inhalation sedation limited to extensive conservative dental treatment only | Managed Care protocols apply | |
| EMERGENCY ROOT CANAL THERAPY | For emergency treatment only, limited to pulp removal (wisdom teeth excluded) | Subject to DENIS treatment protocols | |
| EXTRACTIONS | Subject to DENIS treatment protocols | Impacted teeth excluded | |
| PLASTIC DENTURES AND ASSOCIATED | Once every 2 years for beneficiaries 21 years and older (based on the date of your previous claim) | Managed Care protocols apply | |
| LABORATORY COSTS | 20% co-payment applies | Pre-authorisation required or further 20% penalty applies | |
| DENTAL FILLINGS | 4 fillings per beneficiary | Benefit for fillings is granted once per tooth, every 2 years | |
| DENIAL FILLINGS | Benefit for re-treatment of a tooth is subject to Managed Care protocols | | |
| MAXILLO-FACIAL SURGERY IN DENTAL CHAIR | PMB only | Pre-authorisation from DENIS required | |
| MODERATE/DEEP SEDATION IN DENTAL ROOMS (IV CONSCIOUS SEDATION) | Limited to extensive conservative dental treatment | Pre-authorisation from DENIS required | |
| HOSPITALISATION | PMB only | Pre-authorisation from DENIS required | |
| (GENERAL ANAESTHETIC) | Avoid a 30% co-payment by using a hospital on the applicable network | | |

ADDITIONAL BENEFITS

We believe in giving you more value. The following benefits are in addition to your day-to-day and other benefits.

| CHILDCARE | | |
|---|--|---|
| HEARING SCREENING | For newborns up to 8 weeks, in or out-of-hospital | |
| CONGENITAL HYPOTHYROIDISM SCREENING | For infants under 1 month old | |
| BABYLINE | 24/7 helpline for medical advice for children under 3 years | |
| CHILDHOOD IMMUNISATIONS UP TO AGE 12 | According to the Expanded Programme on Immunisation in South Africa | |
| MILESTONE REMINDERS NEW | For children under 3 years | |
| ONLINE SCREENINGS NEW | For infant and toddler health | |
| BE BETTER BENEFIT (Preventative care and wellness benefits for all life stages) | | |
| GENERAL HEALTH | 1 HIV test and counselling per beneficiary | 1 flu vaccine per beneficiary |
| WOMEN'S HEALTH | 1 mammogram and ultrasound every 2 years, for women over 40 | 1 pap smear every 3 years, or 1 HPV PCR test every 5 years, for women between ages 21 and 65 |
| WUMEN 5 REALIN | 2 Human Papillomavirus (HPV) vaccines, female beneficiaries between ages 9 and 14 (one course per lifetime) | 3 Human Papillomavirus (HPV) vaccines, female beneficiaries between ages 15 and 26 (one course per lifetime) |
| MEN'S HEALTH | 1 prostate screening antigen test for men between ages 55 and 69 | |
| ELDERLY HEALTH | 1 pneumococcal vaccine every 5 years, for members aged 65 and over | 1 stool test for colon cancer, for members between ages 45 and 75 Subject to applicable formulary |
| DENTAL FISSURE SEALANTS | DENTAL FISSURE SEALANTS 1 per tooth, once every 3 years for beneficiaries under 16 | |
| CONTRACEPTIVES (FOR WOMEN AGED UP TO | R1 330 per family | You must use the DSP for pharmacy-dispensed contraceptives |
| 50) | If you choose not to use a DSP, a 40% co-payment applies | |
| WELLNESS SCREENING | 1 wellness screening per beneficiary, aged 21 and over, at a participating pharmacy, biokineticist or a Bonitas wellness day | Wellness screening includes the following tests: • Blood pressure • Glucose • Cholesterol • Body Mass Index • Waist-to-hip ratio |
| AFRICA BENEFIT | | |
| PER TRIP | In and out-of-hospital treatment covered at 100% of the BonCap Rate | Subject to authorisation |

CHRONIC BENEFITS

BonCap ensures that you are covered for the 28 chronic conditions listed below. You must use the Bonitas Chronic Medicine Courier Pharmacy Network to get your medicine. If you choose not to use the Bonitas Chronic Medicine Courier Pharmacy Network or if you choose to use medicine that is not on the BonCap formulary, you will have to pay a 30% co-payment.

Subject to nomination of a network GP for management of chronic conditions.

PRESCRIBED MINIMUM BENEFITS COVERED

| 1. | Addison's Disease |
|----|---------------------------------------|
| 2. | Asthma |
| 3. | Bipolar Mood Disorder |
| 4. | Bronchiectasis |
| 5. | Cardiac Failure |
| 6. | Cardiomyopathy |
| 7. | Chronic Obstructive Pulmonary Disease |
| 8. | Chronic Renal Disease |
| 9. | Coronary Artery Disease |

| 10. | Crohn's Disease |
|-----|--------------------|
| 11. | Diabetes Insipidus |
| 12. | Diabetes Type 1 |
| 13. | Diabetes Type 2 |
| 14. | Dysrhythmias |
| 15. | Epilepsy |
| 16. | Glaucoma |
| 17. | Haemophilia |
| 18. | HIV/AIDS |
| | |

| 19. | Hyperlipidaemia |
|-----|------------------------------|
| 20. | Hypertension |
| 21. | Hypothyroidism |
| 22. | Multiple Sclerosis |
| 23. | Parkinson's Disease |
| 24. | Rheumatoid Arthritis |
| 25. | Schizophrenia |
| 26. | Systemic Lupus Erythematosus |
| 27. | Ulcerative Colitis |

ADDITIONAL CONDITION COVERED

| dication up to R160 per beneficiary, |
|--------------------------------------|
| (|

CARE PROGRAMMES

These programmes empower you to manage your condition effectively in the most clinically-proven way, ensuring your benefits last longer. You will need to register to join these programmes.

| CANCER | Puts you first, offering emotional and medical support | Matches the treatment plan to your benefits to ensure you have the cover you need |
|--|---|---|
| | Liaises with your doctor to ensure your treatment plan is clinically appropriate to meet your needs | Uses the Bonitas Oncology Network of specialists |
| | Access to a social worker for you and your loved ones | Uses the Bonitas Oncology Medicine Network (20% co-payment applies for use of a non-network provider) |
| | Provides you with appropriate treatment and tools to live your best life | Offers 1 annual pap smear for members who had a positive cytology test |
| | Offers HIV-related consultations to visit your doctor to monitor your clinical status | Gives ongoing patient support via a team of trained and experienced counsellors |
| HIV/AIDS | Offers access to telephonic support from doctors | Treatment and prevention of opportunistic infections such as pneumonia, TB and flu |
| | Covers medicine to treat HIV (including drugs to prevent mother-to-child transmission and infection after sexual assault or needle-stick injury) | Helps in finding a registered counsellor for face-to-face emotional support |
| | Covers regular blood tests to monitor disease progression, response to therapy and to detect possible side-effects of treatment | |
| MATERNITY SUPPORT (BY REGISTERING FOR THE MATERNITY PROGRAMME) | Access to 24/7 maternity advice line | Pregnancy education emails and SMSs sent to you weekly |
| | Dedicated maternity nurse/midwife to support and advise you throughout your pregnancy | Online antenatal classes to prepare you for the birth and what to expect when you get home |
| | Access to articles regarding common pregnancy concerns | Baby bag including baby care essentials |
| | Early identification of high-risk pregnancies | Weekly engagement for high-risk pregnancies |
| 4 | Post-childbirth follow-up calls | Online assessments for pregnancy and mental health |
| PRE-DIABETIC LIFESTYLE MANAGEMENT PROGRAMME | Health risk assessment needs to be completed and submitted by a network GP for the programme to be enabled | 1 Dietician visit every 6 months |
| | 1 Biokinetics assessment every 6 months | 2 GP visits |
| BACK AND NECK PAIN MANAGEMENT PROGRAMME | A multidisciplinary, evidence-based programme to manage and treat back pain in 3 easy steps | A health risk assessment needs to be completed and submitted by a network GP for the programme to be enabled |
| HOSPITAL-AT-HOME (SUBJECT TO PRE-AUTHORISATION) | Care for any acute condition deemed appropriate by your treating provider i.e., pneumonia, Covid-19 | An alternative to general ward admission and stepdown facilities, allowing you to receive quality, safe healthcare in the comfort of your home |
| | Remote patient monitoring including 24/7 vital signs monitoring from our clinical command centre, continuous virtual visits and clinical support, continuous care from a doctor, short-term oxygen (as prescribed) and emergency ambulance services | Our hospital setup at home also includes remote patient monitoring, daily visits, laboratory services, blood tests, wound dressings, medication/fluids via a drip, allied healthcare services and physiotherapy (as prescribed) |
| | A team of trained healthcare professionals, including skilled nurses, that will bring all the essential elements of hospital care to your home | A transitional care programme to minimise re-admissions |

| MENTAL HEALTH PROGRAMME | Available to members who suffer from depression, anxiety, post-traumatic stress disorder and alcohol abuse | Provides educational material on mental health which empowers you to manage your condition |
|-------------------------|--|---|
| | Access to a Care Manager who will work with you, your treating doctor and where appropriate, with other healthcare professionals to assist in improving your condition | A digital platform designed to give members easy access to mental health information, community support and expert help |
| | Your Care Manager will help you understand the importance of preventative care and the use of wellness benefits as well as resolve queries related to any other health condition | |
| NEW FEMALE HEALTH | Accessible to all female members aged 18 and above | Guidance, support, and education led by women's healthcare experts |
| | Early detection of diseases and seamless access to specialised carew | Proactive support in accessing essential healthcare services |
| | Promotion of preventative healthcare strategies tailored to women's needs | Online health assessments tailored to female health concerns |
| | Empowerment of women to actively manage their health | |

IN-HOSPITAL BENEFITS

Hospitalisation is covered at 100% of the BonCap Rate at all hospitals on the applicable network. You must get pre-authorisation for your hospital admission. You will have to pay a 30% co-payment if you use a non-network hospital (except for emergencies) or if you do not get pre-authorisation within 48 hours of admission. Managed Care protocols apply.

| GP CONSULTATIONS | Unlimited, covered at 100% of the BonCap Rate for BonCap network GPs | Non-network GPs are covered at 70% of the BonCap Rate | | |
|---|--|---|--|--|
| SPECIALIST CONSULTATIONS | Unlimited, covered at 100% of the BonCap Rate for BonCap specialists | Non-network specialists are covered at 70% of the BonCap Rate | | |
| BLOOD TESTS AND OTHER LABORATORY TESTS R31 230 per family except for PMB | | | | |
| BLOOD TRANSFUSIONS | R22 690 per family except for PMB | | | |
| X-RAYS AND ULTRASOUNDS | Unlimited, covered at 100% of the BonCap Rate | | | |
| MRIs AND CT SCANS (SPECIALISED RADIOLOGY) | R14 250 per family | Pre-authorisation required | | |
| | R1 230 co-payment per scan event, except for PMB | | | |
| CATARACT SURGERY | You must use a DSP or a R7 420 co-payment will apply | | | |
| ALLIED MEDICAL PROFESSIONALS (SUCH AS DIETICIAN, SPEECH AND OCCUPATIONAL THERAPIST) | PMB only, 30% co-payment at non-DSP | Subject to referral by the treating practitioner | | |
| PHYSIOTHERAPY, PODIATRY AND BIOKINETICS | PMB only, 30% co-payment at non-DSP | Subject to referral by the treating practitioner | | |
| INTERNAL AND EXTERNAL PROSTHESES | PMB only at the DSP | Managed Care protocols apply | | |
| | Pre-authorisation required | | | |
| MENTAL HEALTH HOSPITALISATION (ALSO SEE CARE PROGRAMMES PAGE 8) | PMB only | No cover for physiotherapy for mental health admissions | | |
| | You must use a DSP or a 30% co-payment will apply | | | |
| NEONATAL CARE | Limited to R55 710 per family, except for PMB | | | |
| TAKE-HOME MEDICINE | Limited to a 7-day supply up to R470 per hospital stay | | | |
| PHYSICAL REHABILITATION | R60 900 per family | Pre-authorisation required | | |
| | | | | |

| ALTERNATIVES TO HOSPITAL (HOSPICE, STEP-DOWN FACILITIES) | R17 550 per family | Pre-authorisation required |
|---|---|--|
| PALLIATIVE CARE (CANCER ONLY) | Unlimited, subject to using the DSP | Pre-authorisation required |
| | Including hospice/private nursing, home oxygen, pain management, psychologist and social worker support | |
| CANCER TREATMENT (ALSO SEE CARE PROGRAMMES PAGE 8) | PMB only at a DSP or a 30% co-payment applies | Pre-authorisation required |
| CANCER MEDICINE | Subject to the preferred product list | You must use a DSP or a 20% co-payment will apply |
| ORGAN TRANSPLANTS | PMB only at a DSP | Pre-authorisation required |
| KIDNEY DIALYSIS | Unlimited (subject to Managed Care protocols) | You must use a DSPor a 20% co-payment will apply |
| | Pre-authorisation required | |
| HIV/AIDS (ALSO SEE CARE PROGRAMMES PAGE 8) | Unlimited, if you register on the HIV/AIDS programme | Chronic medicine must be obtained from the DSP |
| DAY SURGERY PROCEDURES (APPLIES TO SELECTED PROCEDURES) | You must use a network day hospital or a 30% co-payment will apply | |
| SURGICAL PROCEDURES THAT ARE NOT COVERED | Back and neck surgery | Joint replacement surgery |
| | Caesarean sections done for non-medical reasons | Functional nasal and sinus surgery |
| | Varicose vein surgery | Hernia repair surgery |
| | Laparoscopic or keyhole surgery | Gastroscopies, colonoscopies and all other endoscopies |
| | Bunion surgery | In-hospital dental surgery |

Ponitas

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- · How to get your claims paid quickly
- · Effortlessly getting hospital authorisations
- · Registering your chronic medicine
- Accessing our maternity programme
- · Getting more benefits with the Benefit Booster
- · Going for a free wellness screening
- · And much more...

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