2023/12/08

REGISTRAR OF MEDICAL SCHEMES

FEDHEALTH MEDICAL SCHEME

ANNEXURE E

GENERAL RULES APPLICABLE TO ALL OPTIONS

(To be read on conjunction with Annexure B, C and D)

(With effect from 1 January 2024 unless otherwise stated)

1. ENTITLEMENT TO BENEFITS

Beneficiaries are entitled to benefits as shown in this Annexure E, subject to:

- monetary limits set out herein;
- general rules applicable as set out herein,
- implementation of restrictions set out herein;
- exclusions set out in Annexure C of the Rules;
- general limitations and restrictions set out in Annexure D of the Rules; and
- procedural and other requirements set out in the Rules.

2. FEDHEALTH SCHEME RATE

The Fedhealth Tariff is defined as the Fedhealth monetary tariffs applicable in 2023 increased by 6.5%, (except for non-network General Practitioners and non- network Specialist, no increase)

3. OVERALL ANNUAL LIMIT, BENEFITS AND OTHER LIMITS

There is no overall annual limit on any Fedhealth options.

4. LIFE CHANGING EVENT BENEFIT

Upon a **Life Changing Event**, the member will have the option to upgrade to a higher benefit plan within 30 days of the event/diagnosis, except for myFED. Downgrades will only be accepted upon commencement of a new benefit year (i.e., 1 January of every consecutive benefit year).

5. CO-PAYMENTS AND DEDUCTIBLES

Co-payments are applicable, per option, on the hospital/ facility bill and are listed in the co-payment schedules below. Procedural co-payments are applicable in addition to the Hospital Benefits co-payments (where/ if applicable). On the flexiFED Elect options only the higher co-payment will apply where more than one is applicable.

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5.1. Co-payments applicable to the maxiFED range of options:

Procedure	maxima PLUS	maxima EXEC REGISTRAR OF MEDICAL SCH
Flocedule	maxima i 200	
Colonoscopy	No co-payment	R2 970
Upper GI endoscopy	No co-payment	R2 970
Surgical removal of wisdom teeth	No co-payment	R5 440
Hernia surgery (Open)	No co-payment	No co-payment
Inguinal hernia surgery	No co-payment	No co-payment
Varicose vein procedures	No co-payment	No co-payment
Spinal surgery	No co-payment	R7 130
Rhizotomies and facet pain blocks (Limited to 1 per beneficiary per annum)	No co-payment	R5 100
Hip arthroscopy	No co-payment	R3 170
Knee arthroscopy	No co-payment	R3 170
Shoulder arthroscopy	No co-payment	R3 170
Ankle arthroscopy	No co-payment	R3 170
Wrist arthroscopy	No co-payment	R3 170
Other Arthroscopic Procedures	No co-payment	R3 170
Joint replacements – Hip and Knee (Use of a Non contract providers for Non-PMBs)	R33 490	R33 490
Joint replacements – other	No co-payment	R5 440
Casualty Trauma Benefit	No co-payment	R800
MRI & CT Scans (In and Out of Hospital)	No co-payment	R2 810
Elective C-Sections	No co-payment	No co-payment
Dental Admissions	No co-payment	No co-payment
Procedures related to back and neck	No co-payment	No co-payment
Bunion Procedures	No co-payment	No co-payment
Gastritis/dyspepsia/heartburn	No co-payment	No co-payment

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Procedure	maxima PLUS	maxima EXEC	REGISTRAR OF MEDICAL SCH
Cataract Surgery (Voluntary use of a Non contracted provider)	R7 140	R7 140	
Skin biopsy and skin excision	No co-payment	No co-payment	
Diagnostic Cystoscopy	No co-payment	No co-payment	
Nasal Procedures	No co-payment	No co-payment	
Laparoscopic Procedures			
Diagnostic Laparoscopy	No co-payment	R5 100	
Hernia repairs:	No co-payment	R5 100	
bilateral inguinal			
repeated inguinal hernias		e e	
nissen/toupet hernia repairs	A		
Pyeloplasty	No co-payment	R5 100	
Radical prostatectomy	No co-payment	R5 100	
Varicocelectomy	No co-payment	No co-payment	
Sacrocolpopexy	No co-payment	R5 100	-
Rectopexy	No co-payment	R5 100	
Recto sacrocolpopexy	No co-payment	R5 100	

Co-payments for elective non	-use of DSPs on maxima EXEC and maxima PLUS		
Substance Abuse Network		25%	

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5.2. Co-payments applicable to the flexiFED 4 Range, flexiFED 3 Range, flexiFED 2 Range, flexiFED 1 Range and myFED options:

Procedure	flexiFED 4 flexiFED 4 ^{Grid} flexiFED 4 ^{Elect}	flexiFED 3 flexiFED 3 ^{Grid} flexiFED 3 ^{Elect}	flexiFED 2 flexiFED 2 ^{Grid} flexiFED 2 ^{Elect}	flexiFED 1 flexiFED 1 ^{Elect}	myFED	flexiFED ^{Savvy}
Colonoscopy	R2 970	R5 100	R5 100	R7 540	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Upper GI endoscopy	R2 970	R5 100	R5 100	R7 540	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Surgical wisdom teeth removal	R5 440	R5 440	R5 440	R5 440	No benefit	No benefit
Hiatus Hernia surgery (Open)	No co-payment	R5 440	R5 440	R8 040	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Varicose vein procedures	No co-payment	R5 100	R7 540	R7 540	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Spinal surgery	R7 130	R9 500	No benefit, except for PMB level of care	No benefit, except for PMB level of care	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Rhizotomies and facet pain blocks (Limited to 1 per beneficiary per annum)	R5 100	No benefit	No benefit	No benefit	No benefit	No benefit
Hip arthro _{Scopy}	R3 170	R10 070	R10 070	No benefit	No benefit	No benefit
Knee arthroscopy	R3 170	R10 070	R10 070	R10 070	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Shoulder arthroscopy	R3 170	R10 070	R10 070	R10 070	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Ankle arth roscopy	R3 170	R10 070	R10 070	R10 070	No benefit	No benefit

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Procedure	flexiFED 4 flexiFED 4 ^{Grid} flexiFED 4 ^{Elect}	flexiFED 3 flexiFED 3 ^{Grid} flexiFED 3 ^{Elect}	flexiFED 2 flexiFED 2 ^{Grid} flexiFED 2 ^{Elect}	flexiFED 1 flexiFED 1 ^{Elect}	myFED	flexiFED ^{Savvy}
Wrist arthroscopy	R3 170	R10 070	R10 070	No benefit, except for PMB level of care	No benefit	No benefit
Other Arthroscopic procedures	R3 170	R10 070	R10 070	R10 070	No benefit	No benefit
Joint replacements – Hip and Knee (Use of a Non contracted providers for Non- PMBs)	R33 490	R33 490	No benefit, except for PMB level of care	No benefit, except for PMB level of care	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Joint replacements – other	R5 440	R8 040	No benefit, except for PMB level of care	No benefit, except for PMB level of care	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Casualty Trauma Benefit	R800	R800	R800	R800	R800	R800
MRI & CT Scans (In and Out of Hospital)	R2 810	R2 810	R2 810	R3 890	No copayment, refer to benefit limit Annexure B.	PMB level of care
Elective C-Sections	No co-payment	No co-payment	No co-payment	No co-payment	R14 700	No benefit, except for PMB level of care
Dental Admissions	No co-payment	No co-payment	No Co-payment	No benefit	No benefit	No benefit
Procedures related to back and neck	R2 760	R5 000	R7 540	R7 540	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Admission for conservative back and neck treatment	R2 760	R5 000	R7 540	R7 540	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Bunion Procedures	No co-payment	No co-payment	R7 540	R7 540	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Gastritis/dyspepsia/heartburn	No co-payment	No co-payment	R7 540	R7 540	No benefit, except for PMB level of care	No benefit, except for PMB level of care

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Fedhealth BOT approved

Procedure	flexiFED 4 flexiFED 4 ^{Grid} flexiFED 4 ^{Elect}	flexiFED 3 flexiFED 3 ^{Grid} flexiFED 3 ^{Elect}	flexiFED 2 flexiFED 2 ^{Grid} flexiFED 2 ^{Elect}	flexiFED 1 flexiFED 1 ^{Elect}	myFED	flexiFED ^{Savvy}
Cataract Surgery (Voluntary use of a Non contract providers)	R7 140	R7 140	R7 140	R7 140	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Skin biopsy and skin excision	No co-payment	No co-payment	R7 540	R7 540	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Diagnostic Cystoscopy	No co-payment	No co-payment	R7 540	R7 540	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Nasal Procedures	No co-payment	No co-payment	R7 540	R7 540	No benefit, except for PMB level of care	No benefit, except for PMB level of care
Laparoscopic Procedures	flexiFED 4 flexiFED 4 ^{Grid} flexiFED 4 ^{Elect}	flexiFED 3 flexiFED 3 ^{Grid} flexiFED 3 ^{Elect}	flexiFED 2 flexiFED 2 ^{Grid} flexiFED 2 ^{Elect}	flexiFED 1 flexiFED 1 ^{Elect}	myFED	flexiFED ^{Savvy}
Diagnostic Laparoscopy	R5 100	R7 540	R7 540	R7 540	Open only, except for PMB	Open only, except for PMB
Hernia repairs: bilateral inguinal repeated inguinal hernias and nissen/toupet hernia repairs 	R5 100	R7 540	R7 540	R7 540	PMB Level of care	PMB Level of care
Hysterectomy	R5 100	R7 540	R7 540	R7 540	Open only, except for PMB	Open only, except for PMB
Pyeloplasty	R5 100	R7 540	R7 540	R7 540	Open only, except for PMB	Open only, except for PMB
Radical prostatectomy	R5 100	R7 540	R7 540	R7 540 REGISTERED BY ME ON	Open only, except for PMB	Open only, except for PMB

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Procedure	flexiFED 4 flexiFED 4 ^{Grid} flexiFED 4 ^{Elect}	flexiFED 3 flexiFED 3 ^{Grid} flexiFED 3 ^{Elect}	flexiFED 2 flexiFED 2 ^{Grid} flexiFED 2 ^{Elect}	flexiFED 1 flexiFED 1 ^{Elect}	myFED	flexiFED ^{Savvy}
Varicocelectomy	No co-payment	R7 540	R7 540	R7 540	Open only, except for PMB	Open only, except for PMB
Sacrocolpopexy	R5 100	R7 540	R7 540	R7 540	Open only, except for PMB	Open only, except for PMB
Rectopexy	R5 100	R7 540	R7 540	R7 540	Open only, except for PMB	Open only, except for PMB
Recto sacrocolpopexy	R5 100	R7 540	R7 540	R7 540	Open only, except for PMB	Open only, except for PMB

Co-payments for elective non-use of DSPs	flexiFED 2 ^{Grid}	flexiFED 3 ^{Grid}	flexiFED 4 ^{Grid}	myFED
Hospital Admissions	R14 700	R14 700	R14 700	R14 700
Day Surgery	R2 500	R2 500	R2 500	R2 500
Mental Health Admission	R14 700	R14 700	R14 700	R4 070
Co-payments for elective non-use of DSPs	fl	exiFED 1	flexiF	EDSavvy
Hospital Admissions		R8 400	R8	600
Day Surgery		R2 500	R2	500
Mental Health Admissions	-	R8 400	R8	600

REGISTERED BY ME ON

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Co-payments for elective non-	use of DSPs on flexiFED ^{Savvy} , flexiFED 1, flexiFED 2, flexiFED 2 ^{Grid} , flexiFED 3, flexiFED 3 ^{Grid} , flexiFED 4 and flexiFED 4 ^{Grid}
Substance Abuse Network	15%

Co-payments for elective non-use of DSPs on myFED		
Substance Abuse Network	25%	

Co-payments for elective non-use of	Elect Acute Hospital Network on flexiFE	ED 1 ^{Elect} , flexiFED 2 ^{Elect} , flexiFED 3 ^{Elect} and flexiFED 4 ^{Elect}			
Hospital Admissions	R14 700				
Day Surgery Admissions	R14 700				
Substance Abuse Admissions	25%				
Mental Health Admissions	REGISTERED BY ME ON R14 700				

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