

FEDHEALTH MEDICAL SCHEME

ANNEXURE A – CONTRIBUTIONS AND SAVINGS

- **MAXIFED RANGE:**
 - MAXIMA EXEC
 - MAXIMA PLUS
- **FLEXIFED RANGE OF OPTIONS:**
 - FLEXIFED 1, FLEXIFED 1^{ELECT}
 - FLEXIFED 2, FLEXIFED 2^{GRID} AND FLEXIFED 2^{ELECT}
 - FLEXIFED 3, FLEXIFED 3^{GRID} AND FLEXIFED 3^{ELECT}
 - FLEXIFED 4, FLEXIFED 4^{GRID} AND FLEXIFED 4^{ELECT}
 - FLEXIFED^{SAVVY}
- **MYFED**

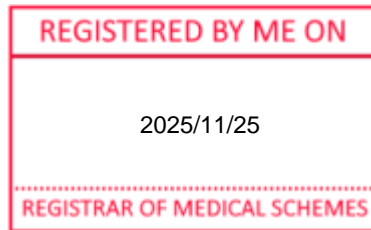
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2025/11/25
REGISTRAR OF MEDICAL SCHEMES

(To be read in conjunction with Annexure B, C, D and E)
(With effect from 1 January 2026)



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1. CONTRIBUTIONS

The Gross contribution payable shall be calculated based on income (where applicable) and the members' number and type of dependants in accordance with the tables below. Gross contributions includes the savings component of the applicable option.

Interpretations stated below are applicable, where relevant, on the tables below (1.1 – 1.5) as follows:

- **Member** – Is the Principal (Main) Member of the Scheme
- **Adult Dependant** – a person over 21 years of age or a person of any age legally classified as an adult, and who is legally dependent on the member.
- **Child Dependant** - includes a child of the main member or spouse up to the age 27 years of age
- **Dependants** – There shall be no limit on the number of qualifying dependants joining the Scheme. The Scheme will only charge the member for a maximum of three (3) child dependants.
- **Savings** – The applicable amount in the “**Savings**” columns in tables 1.1 – 1.9, shall be the savings component of the member's monthly Gross contribution (Total). The savings contribution will be credited to the member's Personal Medical Savings Account (PMSA) for the current year's savings benefit, as mentioned in Annexure B, where relevant. See paragraph 5 below for further detail on the administration of Savings.
- **Income** – For the purposes of calculating the contribution in respect of the member the basic monthly earnings in the form of a salary, commission, pension or any other fixed income, or a member who registers a spouse or partner as a dependant, the higher of the member or spouse's or partners earnings.

1.1 maxiFED Range

maxima PLUS	Risk	Savings	Total Contribution
Member	R18 749	R644	R19 393
Adult	R16 183	R556	R16 739
Child	R5 793	R199	R5 992

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maxima EXEC	Risk	Savings	Total Contribution
Member	R11 229	R1 044	R12 273
Adult	R9 747	R906	R10 653
Child	R3 470	R322	R3 792

1.2 flexiFED Range

flexiFED Savvy	Risk	Savings	Total Contribution
Member	R1 155	0	R1 155
Adult	R1 155	0	R1 155
Child	R849	0	R849

flexiFED 1	Risk	Savings	Total Contribution
Member	R2 603	R27	R2 630
Adult	R2 041	R20	R2 061
Child	R954	R9	R963

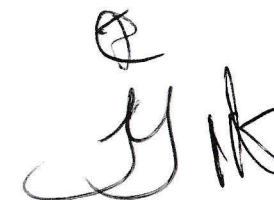
flexiFED 1 ^{Elect}	Risk	Savings	Total Contribution
Member	R2 031	R20	R2 051
Adult	R1 587	R15	R1 602
Child	R741	R6	R747

flexiFED 2	Risk	Savings	Total Contribution
Member	R4 118	R29	R4 147
Adult	R3 665	R25	R3 690
Child	R1 217	R7	R1 224

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flexiFED 2^{Grid}	Risk	Savings	Total Contribution
Member	R3 693	R26	R3 719
Adult	R3 293	R22	R3 315
Child	R1 091	R7	R1 098

flexiFED 2^{Elect}	Risk	Savings	Total Contribution
Member	R3 083	R21	R3 104
Adult	R2 756	R19	R2 775
Child	R916	R6	R922

flexiFED 3	Risk	Savings	Total Contribution
Member	R4 917	R29	R4 946
Adult	R4 505	R26	R4 531
Child	R1 743	R10	R1 753

flexiFED 3^{Grid}	Risk	Savings	Total Contribution
Member	R4 410	R26	R4 436
Adult	R4 044	R24	R4 068
Child	R1 564	R9	R1 573

flexiFED 3^{Elect}	Risk	Savings	Total Contribution
Member	R3 682	R23	R3 705
Adult	R3 379	R19	R3 398
Child	R1 307	R7	R1 314

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flexiFED 4	Risk	Savings	Total Contribution
Member	R6 591	R29	R6 620
Adult	R6 016	R26	R6 042
Child	R1 982	R9	R1 991

flexiFED 4^{Grid}	Risk	Savings	Total Contribution
Member	R5 905	R26	R5 931
Adult	R5 400	R24	R5 424
Child	R1 780	R7	R1 787

flexiFED 4^{Elect}	Risk	Savings	Total Contribution
Member	R4 935	R23	R4 958
Adult	R4 600	R20	R4 620
Child	R1 515	R6	R1 521

1.3 myFED

myFED – TOTAL CONTRIBUTION			
Income Band	Member	Adult	Child
R1 - R1 301	R1 399	R1 399	R752
R1 302 - R11 063	R1 719	R1 719	R779
R11 064 - R15 617	R1 971	R1 971	R931
R15 618 - R21 651	R2 453	R2 453	R966
R21 652 +	R4 052	R4 052	R1 281

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2. TIME FOR PAYMENT OF CONTRIBUTIONS

All contributions shall be payable monthly in **arrears**, unless otherwise stated, to the account of the Scheme at such place as stipulated and agreed to by the Scheme. All contributions shall be paid to the Scheme within **3 days of the end of the due month** and shall be accompanied by the required payment remittance advice for members fully disclosing any changes made to membership and/or contributions.

Where the member has the option to pay contributions in **advance**, these contributions shall be paid to the Scheme no later than the **beginning of the due month** and shall be accompanied by the required payment remittance advice per member fully disclosing any changes made to membership and/or contributions.

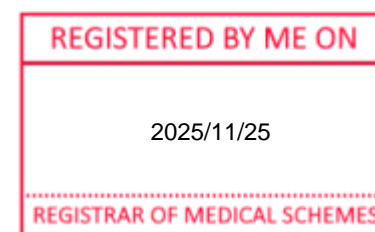
Exception to the rule will be the Debit order collection dates of the 5th and the 15th for members and pensioners who receive the monthly remuneration on a later date as well as the 20th for Topmed/other member take-on.

3. PREMIUMS PENALITES FOR PERSONS JOINING LATE IN LIFE

3.1 The Scheme may apply premium penalties to a late joiner and such penalties must be applied only to the portion of the contribution related to the member or any adult dependant affected by the late joiner penalty. Late joiner penalties are only applicable to members and adult dependants over the age of 35.

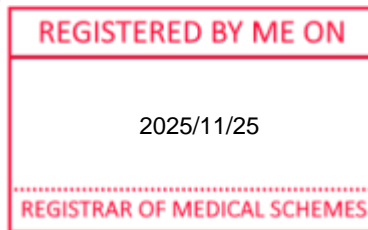
3.2 The premium penalties referred to in paragraph 3.1 shall not exceed the following bands:

Penalty bands	Maximum Penalty
1 – 4 years	0.05 x contribution
5 – 14 years	0.25 x contribution
15 – 24 years	0.50 x contribution
25 + years	0.75 x contribution



3.3 To determine the applicable penalty band to be applied to a late joiner in terms of the first column of the table in paragraph 3.2 the following formula shall be applied:

$$A = B \text{ minus } (35+C)$$



Annexure A

Where

“A” means the number of years referred to in the first column of the table in paragraph 3.2 for purposes of determining the appropriate penalty band;

“B” means the age of the late joiner at the time of his or her application for membership or admission as a dependant; and

“C” means the number of years of creditable coverage which can be demonstrated by the late joiner.

3.4 Where a member or his or her dependant produces evidence of creditable coverage after a late joiner penalty has been imposed, the Scheme must recalculate the penalty and apply such revised penalty from the time such evidence is provided.

3.5 Late joiner penalties may continue to be applied upon transfer of the member or adult dependant to other medical schemes.

4. WAITING PERIODS

See paragraph 1 of Annexure D.

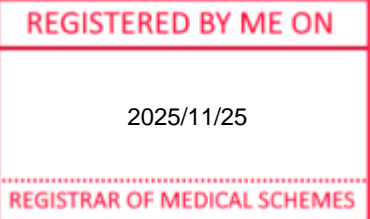
5. PERSONAL MEDICAL SAVINGS ACCOUNT (PMSA)

5.1. The amount towards the member's PMSA that is included in the total monthly contribution of the savings option, not exceeding 25% of the member's total contribution, which will be credited to the member's PMSA monthly from the 1 January of each year or pro-rated in respect of a member who joins the Scheme during the year.

5.2. At the beginning of each benefit year or on the date of joining the Scheme or this benefit option, each member shall be allocated a medical savings benefit for the year. This benefit shall be deemed to be an advance by the Scheme to the member and shall be equal to 12 (twelve) times the amount referred to below, pro-rated in respect of a member who joins the Scheme or this benefit option during the course of the year.

ANNUAL ALLOCATION OF FUNDS TO PERSONAL MEDICAL SAVINGS ACCOUNT

2024 Annualised Savings			
OPTION	P	A	C
maxima PLUS	R7 728	R6 672	R2 388
maxima EXEC	R12 528	R10 872	R3 864
flexiFED ^{Savvy}	0	0	0
flexiFED 1	R324	R240	R108
flexiFED 1 ^{Elect}	R240	R180	R72
flexiFED 2	R348	R300	R84
flexiFED 2 ^{Grid}	R312	R264	R84
flexiFED 2 ^{Elect}	R252	R228	R72
flexiFED 3	R348	R312	R120
flexiFED 3 ^{Grid}	R312	R288	R108
flexiFED 3 ^{Elect}	R276	R228	R84
flexiFED 4	R348	R312	R108
flexiFED 4 ^{Grid}	R312	R288	R84
flexiFED 4 ^{Elect}	R276	R240	R72



- 5.3. A member or dependant whose membership of the Scheme or of an option with a PMSA is terminated during the course of a benefit year and whose claims exceeded the savings benefit advance, pro-rated on a monthly basis at the date of termination shall be liable to repay the excess or shortfall to the Scheme.
- 5.4. PMSA balances not utilised at the end of the benefit year will be carried forward to the next year and accumulate from year to year ("accumulated savings") to meet future expenses for which the members is responsible.

- 5.5. While these savings belong to the member, this may only be used for relevant healthcare services in respect of day-to-day medical expenses. Savings benefits may not be used to provide for benefits and co-payments relating to PMBs.
- 5.6. Provided there are actual funds available in a member's PMSA, such funds may, in addition to providing for day-to-day benefits, be utilised to pay for relevant healthcare services generally or specifically excluded from risk benefits or where the actual costs exceed the benefit payable or available.

6. INTEREST EARNED ON PMSA

The Schemes are no longer required to pay any interest on PMSA credit balances and may elect to do so at the Scheme discretion.

7. PERSONAL MEDICAL SAVINGS ACCOUNT STATEMENTS

A member shall receive a monthly statement from the Scheme reflecting all transactions relating to the PMSA of such a member.

8. BALANCE OF PMSA UPON TERMINATION OF MEMBERSHIP OR TRANSFER TO A NONE SAVINGS OPTION OR ANOTHER OPTION

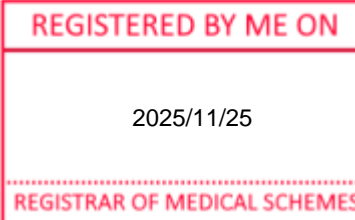
- 8.1. Upon termination of membership, any actual funds still available in the member's PMSA shall, after off-setting any shortfalls due by the member and taking into account any outstanding amounts that may be recoverable by the Scheme from the member, be dealt with as follows:

8.1.1. Deceased member

Upon the death of a member, the balance due to the member must be paid into the estate of that member, if unclaimed after the prescribed period of three (3) years, in accordance with the Prescription Act the funds will be written back to the Scheme.

8.1.2. Termination for other reasons

- 8.1.2.1. Should membership of the Scheme be terminated and the member does not enroll in another savings medical scheme or benefit option, the balance due to the member after off-setting of debt must be refunded to the member within 5 (five) months after the date of termination of membership. It is the responsibility of the member to provide the Scheme with his or her current banking details within 30 (thirty) days from the date of termination.
- 8.1.2.2. Should membership of the Scheme or this benefit option be terminated and the member transfers to another medical scheme or benefit option with a PMSA, the balance due to the member after off-setting of debt will be transferred to such scheme or benefit option within 5 (five) months after the date of termination. It is the responsibility of the member to provide the Scheme with the details of the new medical scheme within 30 (thirty) days from the date of termination.



8.1.3. Transfer to another benefit option within the Scheme

On transfer to another benefit option of the Scheme, which does not provide for a PMSA, any credit balance (paid balance) in the member's PMSA will be refunded to the member within 5 (five) months after the effective date of such transfer.

9. UNCLAIMED PMSA CREDIT BALANCES

Unclaimed PMSA balances, where a member cannot be traced within three (3) years of the member leaving the scheme, and after all reasonable attempts at tracing such members has been pursued, will be written back to the Scheme's income after the prescribed period of three (3) years, in accordance with the Prescription Act.

10. SCHEME LIQUIDATION

The PMSA, as an asset of the Scheme, can be attached by the Scheme creditors in the event of liquidation of the Scheme.

