FEDHEALTH

Sanlam preferred healthcare provider

# hospital

# flexiFED 3 GUIDE



**flexiFED 3** HOSPITAL PLAN // **2027**

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# **Why** choose Fedhealth?

## PROTECT YOUR **HEALTH**

### 90-YEAR LEGACY

With 90 years of experience, you can be confident that you're choosing a scheme trusted by generations of South Africans.

### A DIVERSE RANGE OF PLANS FOR ALL SOUTH AFRICANS

Our diverse plan range caters to every need and budget.

### WIDE-RANGING BENEFITS AND DYNAMIC NETWORK COVERAGE

All Fedhealth plans offer unlimited hospital cover, as well as various out-of-hospital benefits. Our network plans offer extensive coverage.

### PERSONALISED CARE AND HEALTH ENGAGEMENT

Helping you get the right care, at the right time, and the right place.

### FRIENDLY AND INTELLIGENT CUSTOMER SERVICE

Dedicated service consultants and smart, digital platforms to support you.

## INVEST IN YOUR **FUTURE**

### GROW YOUR WEALTH

**Health Boosted WealthBonus**
Fedhealth members enjoy a **15% boost** to their **Sanlam WealthBonus** on qualifying Sanlam products.

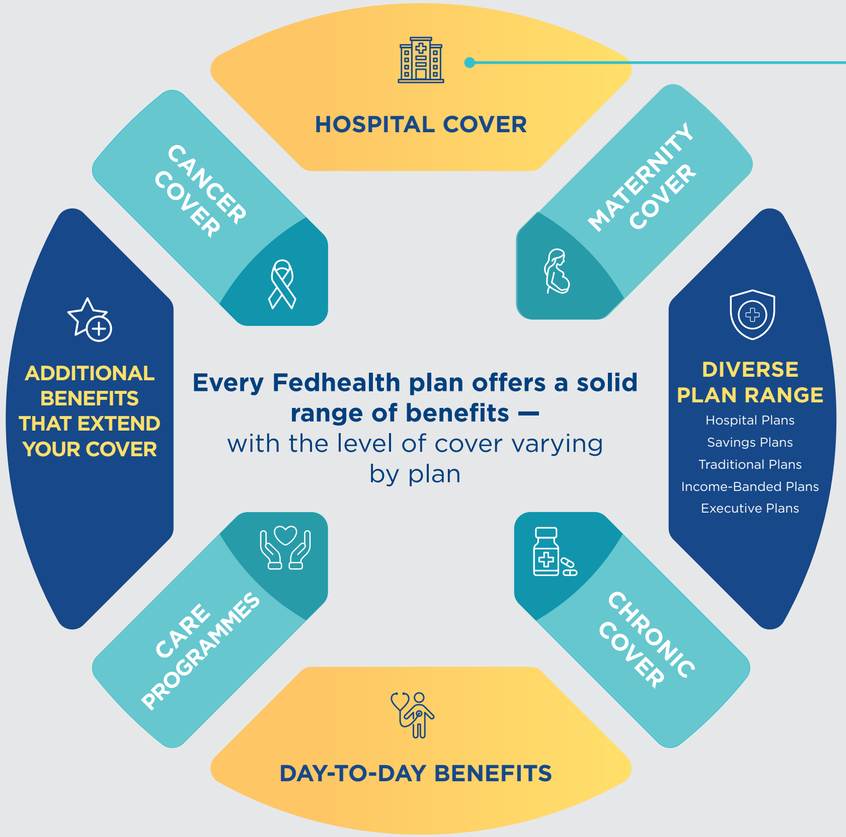
### GET REWARDS

Earn rewards through simple health engagement.

Sanlam



# Protect your health with plans that offer **wide-ranging benefits & dynamic network coverage**




**PERSONALISED CARE AND ENGAGEMENT**

Screen | Prevent | Support

## Dynamic networks to suit your preference when it comes to hospitalisation

**UNLIMITED HOSPITAL COVER AT PRIVATE HOSPITALS**

**FREEDOM OF CHOICE TO USE ANY PRIVATE HOSPITAL**

Available on: flexiFED 3

**AFFORDABLE COVER ON NETWORK PLANS**

Available on: flexiFED 3GRID

Extensive network coverage across South Africa

Representation across all major hospital groups*

MEDICLINIC GROUP · NETCARE · NATIONAL HOSPITAL NETWORK · Life Healthcare

*Plan dependent

Members on GRID options can save 10% on their monthly contribution

Available on: flexiFED 3GRID

# Protect your health: flexiFED 3 Hospital Plan overview

| | | flexiFED 3 GRID Hospital Plan | flexiFED 3 Hospital Plan |
|---|---|---|---|
| **Monthly contribution** | Principal Member | R5 035 | R5 614 |
| | Adult Dependant | R4 617 | R5 143 |
| | Child Dependant | R1 785 | R1 990 |
| **Day-to-day benefit** | Annual D2D+ | R4 160 | |
| | Additional benefits | Unlimited network GP consults once submitted out-of-pocket expenses reach Threshold | |
| | | Optical benefit | |
| | | Unlimited MRI/CT scans | |
| | | Basic dentistry once submitted out-of-pocket expenses reach Threshold | |
| **Maternity** | During pregnancy | ✓ | |
| | Hospital birth cover | ✓ | ✓ Including private ward cover |
| | Post-birth benefit | ✓ | |
| | Infant & childcare | ✓ | |
| **Chronic benefits** | 27 PMB conditions | ✓ | |
| | Additional conditions | Depression + 7 Conditions | |
| **Cancer** | | R374 920 | |
| **Mental health** | | 21 days for admissions or up to 15 out-of-hospital consultations per beneficiary for major affective disorders (including depression), anorexia, bulimia and substance abuse and 12 out-of-hospital consultations per beneficiary for acute stress disorder | |
| | Consultations | Mental health Programme | |
| | Psychiatric hospitalisation | ✓ R53 000 pf | |
| **Hospital cover** | Level of cover | Additional Non-PMB admissions<br>271 PMB admissions | |
| | Use network facilities for planned procedures | ✓ \| Any hospital | |

## HOSPITAL PLANS

**AVAILABLE ON ALL PLANS**

- Child rates up to age 27
- Only pay for first 3 children
- Screening benefits
- Wellness benefits
- Preventative benefits
- 30-day post-hospitalisation benefit
- Trauma treatment in a casualty ward
- Maternity Programme (excl. Savvy)
- Upgrade to a higher plan within 30 days of a life-changing event

D2D+ BENEFIT

# We reward your smart health choices with R4 160 in extra day-to-day benefits.

By completing a Health Risk Assessment at a pharmacy or GP, and registering on the Fedhealth Member App, flexi**FED 3** members can unlock an extra amount of R4 160 to use for day-to-day medical expenses. These expenses will first be covered by your D2D+ benefit up to the Fedhealth Rate once it is activated. After this benefit is exhausted, any remaining expenses will be paid from your day-to-day benefits:

- **GP consultations**
- **Specialist consultations**
- **Basic dentistry**
- **Prescribed medication**
- **Pathology**
- **General radiology**

| | |
|---|---|
| flexi**FED 3** | R4 160 |

*Please note that D2D+ Rand amounts listed are annual family amounts.*

## Threshold Benefit

The Threshold Benefit on flexi**FED 3** offers additional cover for certain day-to-day expenses.

The benefit is unlocked by submitting out-of-pocket expenses for day-to-day expenses not already covered on your plan.

Once your submitted expenses reach a certain Rand amount ('Threshold level'), your threshold benefit will unlock.

The Threshold Benefit on flexi**FED 3** only pays for certain additional services (such as GP consultations and basic dentistry).

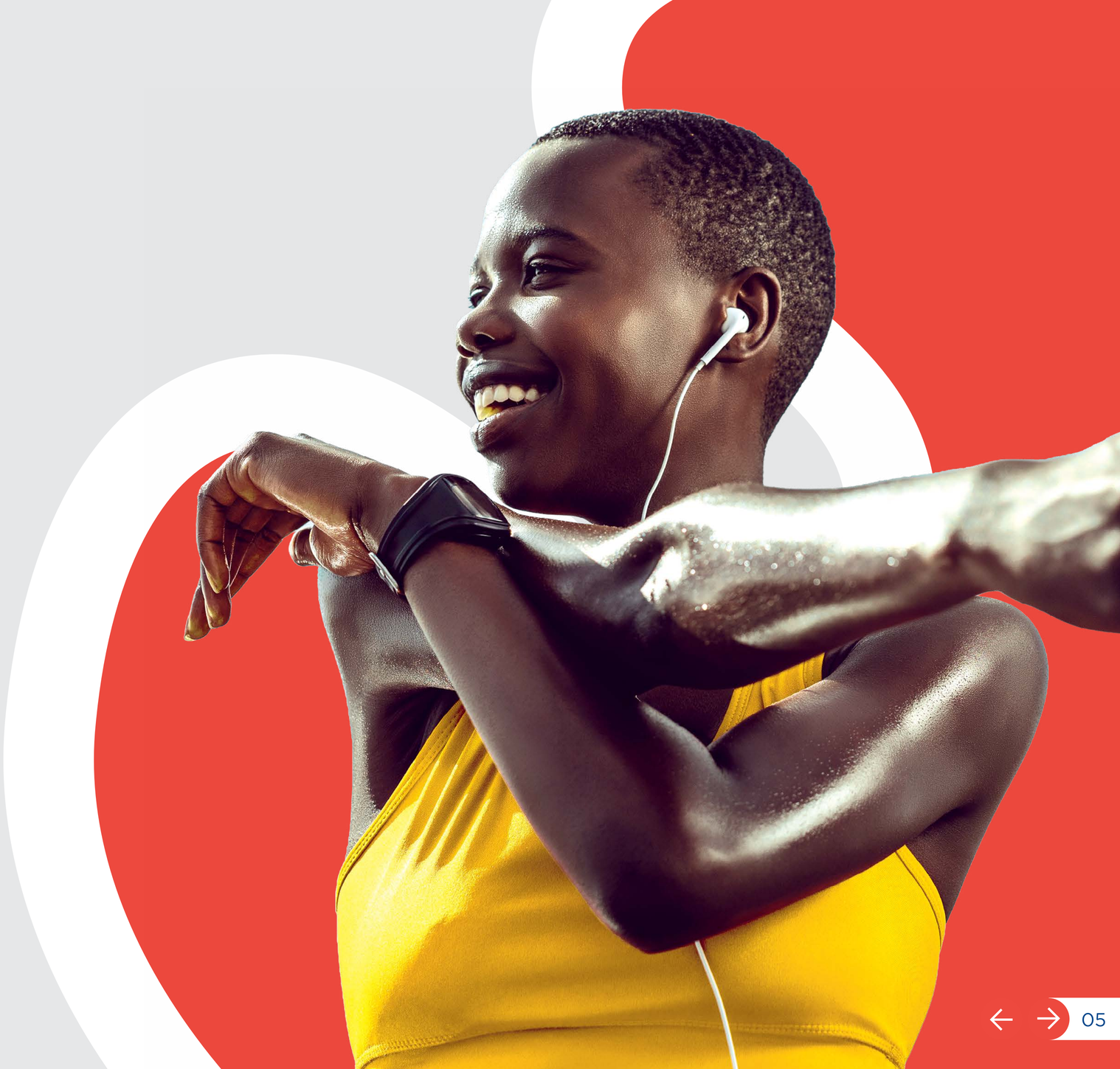
**Threshold levels on** flexi**FED hospital plans**

| | PRINCIPAL MEMBER | ADULT DEPENDANT | CHILD DEPENDANT* |
|---|---|---|---|
| flexi**FED 3** | R10 824 | R9 912 | R3 840 |

***NOTE:** Claims accumulate at cost on flexi**FED 3**.*
**Up to a maximum of three children*



# **Screening, wellness** and extra value-added benefits



# Screening & Wellness Benefit

For full benefit information, how to access or register, applicable DSPs, formularies and protocols, click here to access **ZOOM on Screening Benefit.**

| BENEFIT | Benefit criteria | Quantity and frequency | flexi**FED 3** |
|---|---|---|---|
| **WELLNESS BENEFITS** | | | |
| **MENTAL WELLNESS** | | | |
| Mental health consultations | | | Two mental health consultations per beneficiary at a nominated network GP once Threshold has been reached |
| **Mental Health Resource Hub:** Available via the Fedhealth Member App to help members navigate credible mental health information and guide them to necessary support channels should they need to speak to someone. | | | ✔ |
| **Mental Health Survey:** Available via the Fedhealth Member App to help reflect on your emotional wellbeing by completing a short survey. | | | ✔ |
| **GENERAL WELLNESS** | | | |
| HIV finger prick test | All lives | 1 test every year | ✔ |
| Flu vaccination and administration* | All lives | 1 vaccine every year | ✔ |
| Smoking cessation programme | All lives | 1 GoSmokeFree enrolment per beneficiary every year (face-to-face and virtual excluding patches, medicines etc) | ✔ |
| Cardiac health screening (full lipogram) | All lives aged 20 and older. | 1 test every 5 years | ✔ |
| **CHILDREN'S HEALTH** | | | |
| Immunisation Programme* (as per State EPI) | Birth to age 12 | | ✔ |
| Infant hearing screening test and consultation** | Birth up to 8 weeks of age | 1 per newborn beneficiary | ✔ |

** Combined administration of vaccination benefit limit of 15 per annum per family*

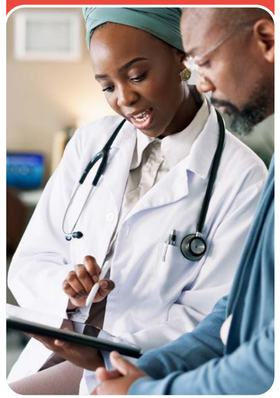
| BENEFIT | Benefit criteria | Quantity and frequency | flexiFED 3 |
|---|---|---|---|
| Vision screening for retinopathy of prematurity | Babies under 1.5kg or born before 32 weeks | 2 tests and consultations | ✔ |
| Paediatric consultation | Birth up to age 2 | 1 Paediatric consultation, with no referral required from GP | ✔ |
| HPV vaccine and administration* Cervarix and Gardasil only | Girls aged 9-16 | Two doses per lifetime | ✔ |
| **WOMEN'S HEALTH** | | | |
| Cervical cancer screening (Pap smear) | Women aged 21 - 65 | 1 test every 3 years | ✔ |
| Cervical cancer screening pharmacy consultation | Women aged 21 - 65 | 1 consultation every 3 years | ✔ |
| HPV PCR test | Women aged 21 to 65 | 1 test every 5 years | ✔ |
| Contraceptives | Women up to age 55 | Oral and injectable contraceptives, contraceptive patches and vaginal rings, subject to an approved list. It must, however, be prescribed by a GP or gynaecologist and is not applicable to non-contraceptive treatment (e.g. pills prescribed for acne.) | ✔ |
| | | **Contraceptive implants and Intrauterine Devices:** Limited to 1 every 2 years | ✔ |
| Emergency oral contraceptive benefit | Women up to age 55 | 1 every year | ✔ |
| **MEN'S HEALTH** | | | |
| Prostate Specific Antigen (PSA) | Men Aged 45-69 | 1 test every year | ✔ |
| **ALL OVER 40s HEALTH** | | | |
| Breast cancer screening with mammography | All lives aged 40 and older | 1 every 2 years | ✔ |
| Colorectal cancer screening (faecal occult blood test) | All lives aged 50-75 | 1 every year | ✔ |

** Combined administration of vaccination benefit limit of 15 per annum per family*
***Add newborns within 30 days*

| BENEFIT | Benefit criteria | Quantity and frequency | flexiFED 3 |
|---|---|---|---|
| Pneumococcal vaccination and administration* | All lives aged 65 and older | 2 per lifetime | ✔ |
| **HEALTH RISK ASSESSMENTS** | | | |
| Wellness screening (BMI, blood pressure, finger prick cholesterol and glucose tests) | All lives | 1 every year | ✔ |
| Preventative screening (waist-to-hip ratio, body fat %, flexibility, posture and fitness) | All lives | 1 every year | ✔ |
| Weight management programme | Limited to 1 qualifying enrolment per beneficiary per annum. | 2 Psychotherapy consultations<br>2 Dietician consultations<br>2 GP consultations<br>12 Biokinetics assessments (comprising of initial assessment, exercise sessions and reassessment sessions)<br>Pathology tests (1 Insulin fasting test, 1 TSH/T4 test, 1 Lipogram test, 1 Glucose test, 1 Total cholesterol test) | ✔ |

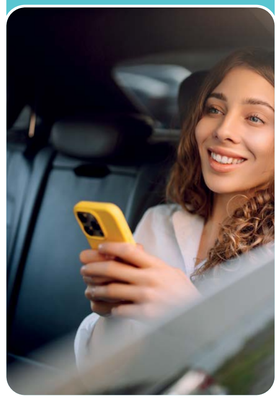
# **PLUS**, the following support and assistance:

## 30-day Post-hospitalisation benefit



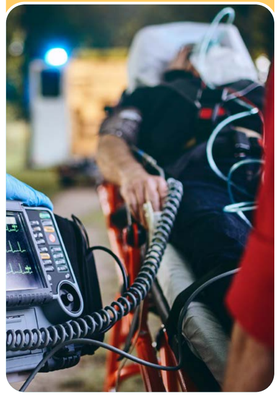
Fedhealth is one of the only medical schemes that pays for post-hospitalisation treatment for up to 30 days after discharge from hospital. This means that follow-up treatment for a full 30-day period after leaving the hospital is paid directly from Risk. This includes post-hospital treatment for physiotherapy, occupational therapy, speech therapy, ultra sounds, general radiology and pathology. Treatment is also subject to the relevant managed healthcare programme and prior authorisation.

## MediTaxi service



flexi**FED** members in Cape Town, Durban, Johannesburg and Pretoria can access the 24/7 MediTaxi benefit to take them to and collect them from follow-up healthcare service providers such as physiotherapists, doctors, specialists or a radiology practice, provided they have undergone an authorised operation or medical treatment that prevents them from driving. Trips are limited to two return trips per member/beneficiary per annum, and the total trip should not exceed 50km.

## Emergency assistance



flexi**FED** members can bank on the following assistance in emergency medical situations:

**Emergency Medical Benefit:** Azoza provides a 24-hour medical advice and evacuation service, which is available to members according to the benefit rules and includes the co-ordination and management of emergency transport. **Call 0860 333 432** to access this service, and press 1.

Included in this benefit is emergency road or air transport, ambulance transfers, blood or medication delivery, patient monitoring and care for stranded minors and companions.

**24-hour Fedhealth Nurse Line:** Members can call **0860 333 432** and press 2 to talk to their own professional nurse for advice on medical matters, medication and even advice for teens.

**Click here** to access **ZOOM on 30-day Post-hospitalisation Benefit.**

**Click here** to access **ZOOM on Weight Management Programme Benefit.**

**Click here** to access **ZOOM on MediTaxi Service.**

**Click here** to access **ZOOM on Emergency Assistance**

# flexiFED
# Day-to-Day Benefits

Here's an overview of the day-to-day benefits available on flexi**FED**, including the casualty ward benefit and the chronic medication benefit (refer to page 17 - 18 for further details).

On flexi**FED**, day-to-day expenses are either self-funded, or they can be paid from Fedhealth Savings if the member makes use of their available back-up day-to-day savings up to cost, and from available D2D+ benefits up to the Fedhealth Rate. See page 34 for information about Back-up Savings and page 4 for information about D2D+ benefits.



Click here to access **ZOOM on D2D+ Benefits.**

| BENEFIT | flexi**FED 3** |
|---|---|
| **NETWORK GENERAL PRACTITIONER (GP) CONSULTATIONS** | **Pre Threshold:** Self-funded or paid from available D2D+ benefits at the Fedhealth Rate.<br>Accumulates at cost to Threshold.<br>Claims paid from D2D+ do not accumulate to Threshold.<br>Each beneficiary can nominate up to 2 Network GPs.<br>Consultations at a network GP (not the nominated one) will be self-funded and accumulate to Threshold at cost.<br>**In Threshold:** Unlimited nominated Network GP benefit. Consultations will be subject to a 20% co-payment in Threshold.<br>**Mental health:** Maximum of 2 mental health consultations per beneficiary with a network GP will be paid from Threshold. |
| **NON-NETWORK GENERAL PRACTITIONER CONSULTATIONS**<br>When you have not consulted your network GP. | **Pre Threshold:** Consultations with an out-of-network GP will be self-funded or paid from available D2D+ benefits at the Fedhealth Rate.<br>**In Threshold:** Limit of 2 consultations with an out-of-network or non-nominated GP per beneficiary paid from Threshold.<br>Thereafter, consultations with a non-network GP will be self-funded.<br>**Mental health:** Consultations with a non-network GP will not be paid from Threshold, but will be self-funded. |
| **NETWORK MEDICAL SPECIALIST CONSULTATIONS AND VISITS**<br>(excluding psychiatrists) | Self-funded or paid from available D2D+ benefits at the Fedhealth Rate.<br>Accumulates at cost to Threshold.<br>Claims paid from D2D+ do not accumulate to Threshold. |
| **NON-NETWORK MEDICAL SPECIALIST CONSULTATIONS AND VISITS**<br>(excluding psychiatrists) | Self-funded or paid from available D2D+ benefits at the Fedhealth Rate.<br>Accumulates at cost to Threshold..<br>Claims paid from D2D+ do not accumulate to Threshold. |
| **NETWORK MEDICAL SPECIALIST CONSULTATIONS AND VISITS**<br>Psychiatrists | Self-funded or paid from available D2D+ benefits at the Fedhealth Rate.<br>Accumulates at cost to Threshold.<br>Claims paid from D2D+ do not accumulate to Threshold. |
| **NON-NETWORK MEDICAL SPECIALIST CONSULTATIONS AND VISITS**<br>Psychiatrists | Self-funded or paid from available D2D+ benefits at the Fedhealth rate.<br>Accumulates at cost to Threshold.<br>Claims paid from D2D+ do not accumulate to Threshold. |
| **TRAUMA TREATMENT IN A CASUALTY WARD** | Trauma treatment covered unlimited up to the Fedhealth Rate.<br>Authorisation must be obtained within 48 hours and a co-payment of R910 per visit for non-PMBs applies. |

| BENEFIT | flexiFED 3 | |
|---|---|---|
| **BASIC DENTISTRY**<br>Minor oral surgery, oral medical procedures including the diagnosis and treatment of oral and associated conditions, plastic dentures and dental technician's fees for all such surgery. | Trauma treatment covered unlimited up to the Fedhealth Rate.<br>Authorisation must be obtained within 48 hours and a co-payment of R910 per visit for non-PMBs applies. | Self-funded or paid from available D2D+ benefits at the Fedhealth Rate.<br>Accumulates at cost to Threshold. Claims paid from D2D+ do not accumulate to Threshold.<br>Once Threshold has been reached, the following benefits will be paid from Threshold: 2 annual consultations per beneficiary incl. x-rays and scaling and polishing and fillings and extractions.<br>Subject to contracted dentists and limited to a list of approved procedures, dental tariff codes and protocols. |
| **ADVANCED DENTISTRY**<br>Inlays, crowns, bridges, mounted study models, metal base partial dentures, oral surgery, orthodontic treatment, periodontists, prosthodontists and dental technicians. | Self-funded.<br>Accumulates at cost to Threshold. | |
| Osseo-integrated implants, orthognathic surgery. | Self-funded.<br>Accumulates at cost to Threshold. | |
| **ADDITIONAL MEDICAL SERVICES**<br>Audiology, dietetics, genetic counselling, hearing aid acoustics, occupational therapy, orthoptics, podiatry, private nursing*, psychologists, social workers, speech therapy | Self-funded.<br>Accumulates at cost to Threshold. | |
| **ALTERNATIVE HEALTHCARE**<br>Acupuncture, homeopathy, naturopathy, osteopathy and phytotherapy (including prescribed medication) | Self-funded.<br>Accumulates at cost to Threshold. | |
| **APPLIANCES, EXTERNAL ACCESSORIES AND ORTHOTICS**<br>Hearing aids, wheelchairs, etc. | Self-funded.<br>Accumulates at cost to Threshold. | |
| **MEDICINES AND INJECTION MATERIAL** | | |
| Acute medicine | Self-funded or paid from available D2D+ benefits at the Fedhealth Rate.<br>Accumulates at cost to Threshold.<br>Claims paid from D2D+ do not accumulate to Threshold. | |
| Chronic medicine | Please see Chronic Medicine Benefit on page 21 | |
| Over-the-counter medicine | Self-funded.<br>Accumulates at cost to Threshold. | |
| Specialised Drugs (oncology/non-oncology) | No benefit | |

| BENEFIT | flexiFED 3 |
|---|---|
| **OPTICAL BENEFIT** | |
| Consultations<br>Spectacle lenses<br>Frames and/or lens enhancements | Up to R2 070 per beneficiary every 24 months paid from Risk.<br>Lens enhancement excluded.<br>Thereafter, self-funded.<br>Accumulates at cost to Threshold. |
| **PATHOLOGY AND MEDICAL TECHNOLOGY** | Self-funded or paid from available D2D+ benefits at Fedhealth Rate.<br>Accumulates at cost to Threshold.<br>Claims paid from D2D+ do not accumulate to Threshold. |
| **GENERAL RADIOLOGY** | Self-funded or paid from available D2D+ benefits at the Fedhealth Rate.<br>Accumulates at cost.<br>Claims paid from D2D+ do not accumulate to Threshold. |
| **SPECIALISED RADIOLOGY**<br>Pre-authorisation is required | Unlimited at Fedhealth Rate.<br>First R3 170 for non-PMB MRI/CT scans for the member's account |
| Oncology PET and PET/CT scans | 2 PET scans per family per annum limited to the Oncology benefit subject to DSP network.<br>R5 890 co-payment for use of non-DSP. |
| **SPECIFIED PROCEDURES IN PRACTITIONER'S ROOMS**<br>Paid from the in-hospital benefit (subject to authorisation) | Gastroscopy (no general anaesthetic will be paid for)<br>Colonoscopy (no general anaesthetic will be paid for)<br>Flexible sigmoidoscopy<br>Indirect laryngoscopy<br>Removal of impacted wisdom teeth<br>Intravenous administration of bolus injections for medicines that include antimicrobials and immunoglobulins (payment of immunoglobulins is subject to the Specialised Medication Benefit)<br>Fine needle aspiration biopsy<br>Excision of nailbed<br>Drainage of abscess or cyst<br>Injection of varicose veins<br>Excision of superficial benign tumours<br>Superficial foreign body removal<br>Nasal plugging for epistaxis<br>Cauterisation of warts<br>Bartholin cyst excision |
| **PHYSICAL THERAPY**<br>Chiropractics, biokinetics and physiotherapy. | Self-funded.<br>Accumulates at cost to Threshold |

** Private nursing that falls outside the alternatives to hospitalisation benefit*

# Maternity and Childhood Benefits





# Maternity and Childhood Benefits

**flexiFED** members enjoy the following in- and out-of-hospital benefits during pregnancy, birth and their children's early years, which include for example the Fedhealth Baby | Mom Maternity Care Programme, paediatric consults, immunisations and the Paed IQ advice line.



| BENEFIT | flexiFED 3 |
|---|---|
| **During pregnancy** | |
| **FEDHEALTH BABY \| MOM MATERNITY CARE PROGRAMME** | |
| Online Doula-on-Call consultation* to activate member's enrolment PLUS a R500 voucher once Doula consultation is completed.<br>A personal Doula (area dependent) from our Preferred Doula list.<br>Up to R4 000 in vouchers and gifts along member's pregnancy journey.<br>Weekly pregnancy updates (and every second week for spouse).<br>Area Doula support meetings during pregnancy - R1 000 voucher on completion of 3 doula meetings.<br>Online healthy pregnancy workshop (before 26 weeks) - R300 voucher on completion of workshop.<br>Online childbirth classes (after 26 weeks) - R700 voucher on completion of classes.<br>A midwife appointment - R500 voucher after appointment.<br>A R1 000 voucher if member gives birth at a preferred birthing facility.<br>24-hour medical advice line.<br>Trimester calls from our friendly consultants.<br>Doula-on-Call support throughout pregnancy.<br>Post-birth Doula check-in<br>Online lactation consultation.<br>Handy Fedhealth baby bag, filled with essential baby products.<br>**We know not every mum qualifies for Doula care due to medical reasons and therefore will receive a lesser value of certain Vouchers as above. Please speak to our team about the alternative programme benefits.* | ✔ |
| **MAIN BENEFITS** | |
| Antenatal (or postnatal) consultations | 12 antenatal (or postnatal) consultations with a midwife, network GP or gynaecologist | ✔ |
| Antenatal scans | 2 x 2D antenatal scans | ✔ |
| Amniocentesis | 1 amniocentesis | ✔ |
| Antenatal classes | Antenatal classes up to R1 250 conducted by Private Nurses. | ✔ |

Pre-authorisation is required. Members will receive a handy Fedhealth Baby Bag once they've registered for the Maternity Care Programme from their 12th week of pregnancy.

Please refer to page 33 to see benefits related to maternity confinement in-hospital.




| BENEFIT | | | flexiFED 3 |
|---|---|---|---|
| **BIRTH-RELATED BENEFITS** | | | |
| Private ward cover | Private ward cover (when available) for delivery | | ✔ |
| **Post-birth benefits** | | | |
| Postnatal (or antenatal) consultations | 12 antenatal (or postnatal) consultations with a midwife, network GP or gynaecologist | | ✔ |
| Vision screening for retinopathy of prematurity | Babies under 1.5kg or born before 32 weeks | 2 tests and consultations | ✔ |
| Infant hearing screening test** | Birth up to 8 weeks of age | 1 per newborn beneficiary | ✔ |
| Paediatric consultation | Birth up to age 2 | 1 Paediatric consultation, with no referral required from GP | ✔ |
| Online post-birth lactation and breastfeeding consultations | Exclusively available to members on Fedhealth. Baby \| Mom Maternity Care Programme | | ✔ |

Click here to access ZOOM on Maternity and Childhood Benefits.

Click here to access ZOOM on Fedhealth Baby | Mom Maternity Care Programme.



| BENEFIT | | | flexiFED 3 |
|---|---|---|---|
| **CHILD CARE** | | | |
| Immunisation programme and administration* (as per State EPI) | Birth to age 12 | | ✔ |
| HPV vaccine and administration* Cervarix and Gardasil only | Girls aged 9 – 16 | Two doses per lifetime | ✔ |
| Childhood illness specialised drug benefit | Payable from risk up to the age of 18 | Growth Hormone medication<br>Palivizumab for Respiratory<br>Syncytial Virus<br>Botulinum Toxin<br>Juvenile Idiopathic<br>Rheumatoid Arthritis medication | ✔ |
| **24-HOUR PAED-IQ ADVICE LINE** | Once your baby is born, access to paediatric nurse helpline 24 hours a day.<br>This advice line can be used until your child is 14 years old. | | ✔ |

***Please note:***
*1. *Combined administration of vaccination benefit limit of 15 per annum per family*
*2. **Add newborns within 30 days*
*3. Child rates up to the age of 27*
*4. Only pay for three children – we cover fourth and subsequent children for free*

# Chronic Medicine Benefits





# Chronic Medicine Benefits

For full benefit information, how to access or register, applicable DSPs, formularies and protocols, click here to access **ZOOM on Chronic Medicine Benefit.**

## Cover for conditions that require long-term medication or can be life-threatening:

| | flexi**FED 3** |
|---|---|
| **LIMIT** | Unlimited cover for conditions on the CDL plus Allergic Rhinitis (children under the age of 18), Eczema (children under the age of 18), Acne (up to the age of 21).<br>The following specified non-PMB conditions are subject to a sub-limit of R3 430 per family which are:<br>• ADHD (children ages 6 – 18 years old)<br>• Depression<br>• Generalised Anxiety Disorder<br>• Post-Traumatic Stress Disorder |
| **FORMULARY** | Intermediate formulary on flexi**FED 3**. Basic formulary on flexi**FED 3**$^{GRID}$ and **3**$^{Elect}$ or a 30% co-payment for non-use of formulary medication. |
| **PHARMACY** | Fedhealth Network Pharmacies, with a 30% co-payment for utilisation of a non-DSP. |
| **HIV/AIDS MEDICINE BENEFIT INCLUDING TREATMENT FOR MOTHER-TO-CHILD-TRANSMISSION, RAPE AND POST-EXPOSURE PROPHYLAXIS** | |
| **Limit** | Unlimited, 30% co-payment if DSP (ScriptPharm) is not utilised |

### 27 Chronic conditions on the Chronic Disease List (CDL) covered on all options:

Addison's Disease
Asthma
Bipolar Mood Disorder
Bronchiectasis
Cardiac Failure
Cardiomyopathy
COPD/ Emphysema/ Chronic Bronchitis
Chronic Renal Disease
Coronary Artery Disease
Crohn's Disease
Diabetes Insipidus
Diabetes Mellitus type 1 & 2
Dysrhythmias
Epilepsy
Glaucoma
Haemophilia
HIV
Hyperlipidaemia
Hypertension
Hypothyroidism
Multiple Sclerosis
Parkinson's Disease
Rheumatoid Arthritis
Schizophrenia
Systemic Lupus Erythematosus
Ulcerative Colitis

### 7 Additional conditions covered on flexi**FED 3**:

Acne (up to the age of 21)
Allergic Rhinitis (children under the age of 18)
Attention Deficit Hyperactivity Disorder (children ages 6 – 18)
Depression
Eczema (children under the age of 18)
Generalised Anxiety Disorder
Post-Traumatic Stress Disorder

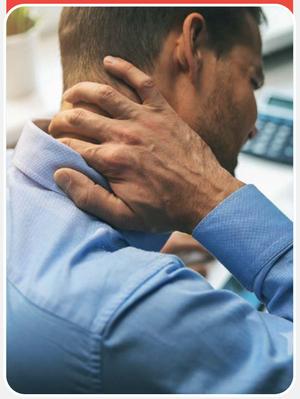


# Managed Care





## OrthoCare



The Fedhealth OrthoCare Spinal Programme takes a comprehensive and holistic approach to chronic back and neck pain and offers individualised treatment to qualifying members. After an initial assessment, beneficiaries receive treatment twice a week for six weeks. We cover the full cost of the programme for qualifying members.

**Click here** to access **ZOOM on OrthoCare Spinal Programme.**

## AfA HIV Management Programme



The Scheme offers the AfA (HIV Management) programme to help members who are HIV-positive manage their condition. The benefits of being on the programme (over and above the payment of the necessary medicine and pathology claims), include clinical and emotional support to manage the condition.

**Click here** to access **ZOOM on AfA HIV Management Programme.**

## Weight Management Programme



The Fedhealth Weight Management Programme is designed for qualifying members with a high BMI and waist circumference. This benefit is available once annually per beneficiary.

Under this programme, members participate in a 12-week, biokineticist-led intervention plan that gives them access to 2 dietician consultations, 2 psychologist consultations, as well as 2 GP consultations. Various pathology codes are also available to assist Doctors with exploring any underlying medical reason for obesity. Once the programme is completed, ongoing advice and monitoring is also made available to the member.

**Click here** to access **ZOOM on Weight Management Programme.**

## Smoking Cessation Programme



flexi**FED** members who smoke can sign up for the GoSmokeFree service that's available at 200 pharmacies countrywide, including Dis-Chem, Clicks and independent pharmacies. All smokers have access once per beneficiary per year to have the GoSmokeFree consultation paid from Risk. The consultation can be a GoSmokeFree Virtual Service (phone or video) or face to face.

**Click here** to access **ZOOM on Smoking Cessation Programme.**

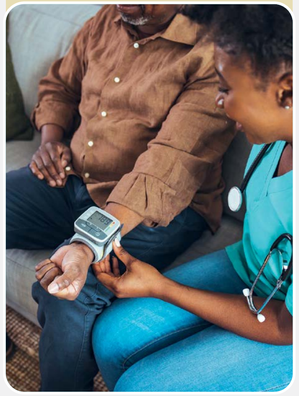
## Alignd Palliative Care Programme



This programme offers specialised, palliative care for members with serious cancer. An expert team, which could include doctors, nurses and social workers with extra palliative care training, will provide palliative support. The focus is on providing relief from symptoms and stress, and could take on the form of controlling a physical problem such as pain, or by helping the member by addressing their emotional, social or spiritual needs.

**Click here** to access **ZOOM on Alignd Palliative Care Programme.**

## Hospital at Home



Fedhealth's technology-enabled Hospital at Home service, in partnership with Quro Medical, is offered by a team of trained healthcare professionals who bring all the essential elements of in-patient care to a patient's home, including real-time patient monitoring.

**Click here** to access **ZOOM on Hospital at Home Benefit.**

# **Oncology** Benefits



# Oncology Benefits

Cancer is arguably one of the biggest and most serious dread diseases facing members, and Fedhealth strives to offer valuable oncology benefits and support in their time of need. We understand that each cancer journey may look different , and as such we aim to provide relief through benefits like the Alignd Palliative Care Programme, as well as the Terminal Care benefit to members and their families.



Click here to access ZOOM on Oncology Benefits.

On flexi**FED 3**, oncology is covered up to R374 920 per family per year at the designated service provider, ICON, subject to Essential protocols.
A 25% co-payment applies where a DSP provider is not used.

**This benefit is subject to the submission of a treatment plan and registration on the Oncology Management Programme. Members will have access to post active treatment for life.**

| BENEFIT | flexi**FED 3** |
|---|---|
| **ONCOLOGY LIMIT:**<br>The use of non-DSP* will attract a 25% upfront co-payment. | R374 920 |
| Active treatment period | Subject to Oncology limit.<br>ICON Essential Protocols apply. |
| **ONCOLOGY AND ONCOLOGY MEDICINE**<br>Chemotherapy, as well as medicine and consumables directly associated with the treatment of cancer, should be obtained from the Oncology Pharmacy Network and in accordance to the oncology Preferred Product List (PPL) – non-use of these will result in a 25% co-payment. | Subject to Oncology limit.<br>ICON Essential Protocols apply. |
| Radiology and pathology | Subject to Oncology limit. |
| PET and PET-CT scans | Subject to Oncology limit.<br>Limited to 2 per family per year, DSP Network applicable or a R5 890 co-payment for non-DSP use |
| Specialised drugs for oncology | No benefit unless PMB level of care |
| Brachytherapy materials | No benefit |
| **TERMINAL CARE** | R36 960 |

** Designated Service Provider is ICON (Independent Clinical Oncology Network)*

## Alignd Palliative Care Programme

This programme offers specialised, palliative care for members with serious cancer. An expert team, which could include doctors, nurses and social workers with extra palliative care training, will provide palliative support. The focus is on providing relief from symptoms and stress, and could take on the form of controlling a physical problem such as pain, or by helping the member by addressing their emotional, social or spiritual needs.

# Mental Health Benefits



# Mental Health Benefits



| BENEFIT | | flexiFED 3 |
|---|---|---|
| **WELLNESS RESOURCES AND DIGITAL TOOLS** | **Mental Health Resource Hub:** Available via the Fedhealth Member App to help members navigate credible mental health information and guide them to necessary support channels should they need to speak to someone. | ✔ |
| | **Mental Health Survey:** Available via the Fedhealth Member App to help reflect on your emotional wellbeing by completing a short survey. | ✔ |
| **OVERVIEW OF PMBs FOR MENTAL HEALTH** | | Up to 21 days of admissions or up to 15 out-of-hospital consultations per beneficiary for major affective disorders (including depression), anorexia, bulimia, acute stress disorder, and substance abuse.<br>Chronic medication for bipolar disorder and schizophrenia is also covered as part of PMBs. |
| **CONSULTATIONS** | | Up to 21 days of admissions or up to 15 out-of-hospital consultations per beneficiary for major affective disorders (including depression), anorexia, bulimia and substance abuse and 12 out-of-hospital consultations per beneficiary for acute stress disorder.<br>Additional consultations will be self-funded.<br>Once in Threshold, two mental health consultations per beneficiary (in-network GPs only). |
| **CHRONIC MEDICATION FOR MENTAL HEALTH CONDITIONS** | | As part of annual chronic medicine benefit of R3 430 per family, covers selected mental health conditions like depression, anxiety and PTSD. |
| **MENTAL HEALTH PROGRAMME** | | Limited to R10 000 per enrolling beneficiary.<br>Once enrolled, qualifying members gain access to support from a dedicated Care Manager, educational resources, as well as consultations with psychiatrists, psychologists, GPs or other mental health providers. |
| **PSYCHIATRIC HOSPITALISATION** | | R53 000 per family. |

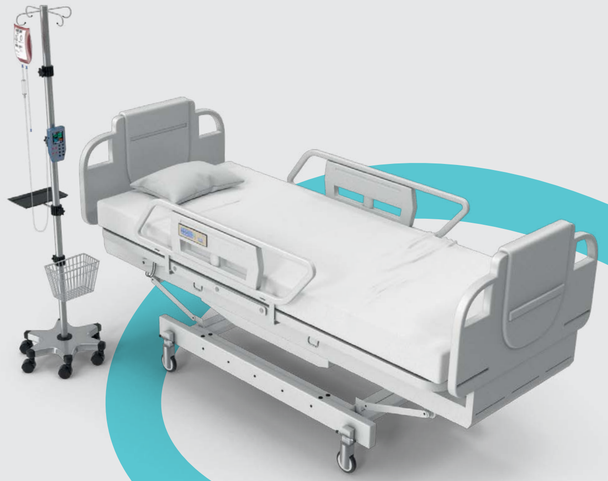
Click here to access ZOOM on Mental Health Benefits.

# Hospital Cover



# Unlimited Hospital Cover

flexi**FED**, like all Fedhealth options, has an unlimited in-hospital benefit. Pre-authorisation must be obtained for all planned hospital admissions.



## The in-hospital benefit covers:

- The **hospital costs and accounts from doctors and specialists**, e.g. the anaesthetist and the X-ray department.
  - Specialists and GPs on the Fedhealth network are covered in full. Specialists and GPs not on the Fedhealth network are covered up to the Fedhealth Rate.
- **Selected procedures in day wards, day clinics and doctor's rooms** on the Fedhealth Day Surgery Network.
- Members must use the **Fedhealth Hospital Network** or pay a co-payment on the hospital account, depending on the option.
- **Physiotherapy:** Referral by a medical practitioner and pre-authorisation is required, covered up to the Fedhealth Rate.

## Prescribed Minimum Benefits (PMBs)

PMBs are a basic level of cover for a defined set of conditions. By law, all medical schemes must cover the treatment of 271 hospital-based conditions and 27 chronic conditions, i.e. the Chronic Disease List (CDL), in full without co-payment or deductibles, as well as any emergency treatment and certain out-of-hospital treatment.

This means that all schemes must provide **PMB level of care** at cost for these conditions. Schemes are allowed to require members to use Designated Service Providers (DSPs) and apply formularies and managed care protocols. Fedhealth uses network specialists, network GPs and network hospitals for the provision of PMBs.

Members must use a Fedhealth Network Specialist and a nominated network GP in order for the cost to be refunded in full. Should members not use these DSPs for PMB treatment, the Scheme will reimburse treatment at the non-network rate.

**Co-payments** are applicable to the voluntary use of non-DSPs. Referral must be obtained from a Fedhealth Network GP for consultations with Fedhealth Network Specialists. If referral is not obtained, there will be a co-payment on specialist claims paid from the Risk benefit. Co-payments are option dependent.

***Please note:*** *Qualification for reimbursement as a PMB is not based solely on the diagnosis (condition), but also on the treatment provided (level of care). So although a member's condition may be a PMB condition, the Scheme would only be obliged to fund it in full if the treatment provided was considered PMB level of care.*

## Co-payments on certain procedures

For some treatments and procedures, members must pay an amount out of their own pocket. Co-payments apply to the hospital account and/or certain procedures, depending on the option. Please see page 38 for a list of co-payments.

### What are considered as emergencies?

- An unexpected condition that requires immediate treatment. This means that if there's no immediate treatment, the condition might result in lasting damage to organs, limbs or other body parts, or even in death.
- Members on network hospital options can get treatment for emergency medical conditions at any hospital, but once their condition has stabilised and they can be safely transferred to a network hospital, the co-payment will apply if they opt not to be transferred.

| BENEFIT | flexi**FED 3** |
|---|---|
| **OVERALL ANNUAL LIMIT (OAL)** | No overall annual limit |
| **HOSPITAL NETWORK** | |
| Acute Hospital Facilities | flexi**FED 3:** At any private hospital<br>flexi**FED 3**$^{GRID}$: Hospital Network |
| Day Surgery Facilities | flexi**FED 3** and flexi**FED 3**$^{GRID}$**:**<br>Day Surgery Facilities Network |
| Mental Health Facilities | flexi**FED 3**$^{GRID}$**:** Fedhealth Mental Health Facilities Network. |
| **HOSPITAL LIMIT** | Unlimited |
| **PRESCRIBED MINIMUM BENEFITS (PMB)**<br>Treatment for PMB conditions can be funded in two ways | To have the treatment for PMB conditions covered in full, you will have to use Fedhealth Network GPs, specialists, hospitals and DSPs where applicable.<br>Should you choose not to make use of network providers, the Scheme will only refund treatment up to the Fedhealth Rate and you will have a co-payment should the healthcare professional charge more. |
| **HOSPITALISATION**<br>Accommodation, use of operating theatres and hospital equipment, medicine, pharmaceuticals and surgical items | Unlimited at any hospital.<br>30% co-payment on voluntary use of non-network day surgery facilities.<br>On flexi**FED 3**$^{GRID}$, members must use network hospitals. There is a 30% co-payment on use of non-network hospitals.<br>There is a 30% co-payment on use of non-network day surgery facilities.<br>On flexi**FED 3**$^{Elect}$, there is a R16 570 excess on all hospital admissions except emergency admissions. |
| Hospital co-payment for non-network hospital | flexi**FED 3** and flexi**FED 3**$^{GRID}$ there is a 30% co-payment on voluntary use of non-network day surgery facilities.<br>flexi**FED 3**$^{GRID}$: there is a 30% co-payment on voluntary use of non-network acute hospitals and a 30% co-payment on voluntary use of non-network mental health facilities.<br>On flexi**FED 3** and flexi**FED 3**$^{GRID}$ there is a 15% co-payment on voluntary use of non-network hospitals for rehabilitation for substance abuse.<br>On flexi**FED 3**$^{Elect}$, there is a R16 570 excess on all hospital admissions except emergency admissions.<br>On flexi**FED 3**$^{Elect}$, there is a 25% co-payment on voluntary use of non-network hospitals for rehabilitation for substance abuse |
| **CONFINEMENT** | |
| **Maternity confinement:**<br>Accommodation in a general ward, high care and intensive care unit, theatre fees, medicine, material and hospital apparatus. | Unlimited |
| Elective Caesareans | Unlimited |
| Private ward cover | When available |
| Delivery by Fedhealth Network GPs and specialists | Covered in full |
| Delivery by non-network GPs and specialists | Covered up to the Fedhealth Rate |
| Maternity confinement in a registered birthing unit or out-of-hospital | Unlimited |

| BENEFIT | flexiFED 3 |
|---|---|
| Delivery by a registered midwife/nurse or a practitioner | Unlimited |
| Hire of water bath and oxygen cylinder | Unlimited |
| **Medicine on discharge from hospital:**<br>The medicine can either be dispensed by the hospital and reflect on the original hospital account, or be dispensed by a pharmacy on the same day as the member is discharged from hospital. | Limited to 7 days' medication up to a maximum of R428 per beneficiary per admission |
| **FEDHEALTH BABY \| MOM MATERNITY CARE PROGRAMME** | All members enjoy access to the Fedhealth Baby \| Mom Maternity Care Programme that provides ongoing support and benefits throughout their pregnancy journey, including a custom-designed Fedhealth baby bag. |
| **ADDITIONAL MEDICAL SERVICES**<br>Includes dietetics, occupational therapy, speech therapy, orthoptics, podiatry, private nurse practitioners, social workers, audiology, genetic counselling | Self-funded<br>Accumulates at cost to Threshold |
| **SURGICAL PROCEDURES**<br>Hospital admissions will require pre-authorisation | Unlimited |
| **NON-SURGICAL PROCEDURES AND TESTS**<br>Specified non-surgical procedures in practitioner's rooms (Subject to authorisation and covered from risk) | Gastroscopy (no general anaesthetic will be paid for)<br>Colonoscopy (no general anaesthetic will be paid for)<br>Flexible sigmoidoscopy<br>Indirect laryngoscopy<br>Removal of impacted wisdom teeth<br>Intravenous administration of bolus injections for medicines that include antimicrobials and immunoglobulins (payment of immunoglobulins is subject to the Specialised Medication Benefit)<br>Fine needle aspiration biopsy<br>Excision of nailbed<br>Drainage of abscess or cyst<br>Injection of varicose veins<br>Excision of superficial benign tumours<br>Superficial foreign body removal<br>Nasal plugging for epistaxis<br>Cauterisation of warts<br>Bartholin cyst excision |
| **MEDICINE ON DISCHARGE FROM HOSPITAL**<br>The medicine can either be dispensed by the hospital and reflect on the original hospital account, or be dispensed by a pharmacy on the same day as the member is discharged from hospital. | Up to 7 days supply to a maximum of R428 per beneficiary per admission |

| BENEFIT | flexiFED 3 |
|---|---|
| **ALTERNATIVES TO HOSPITALISATION**<br>Sub-acute facilities and physical rehabilitation facilities. | |
| Nursing services, private nurse practitioners and nursing agencies | Unlimited at negotiated tariff |
| Sub-acute facilities, physical rehabilitation facilities | Unlimited at cost at PMB level of care |
| Terminal Care Benefit | R36 960 |
| **APPLIANCES, EXTERNAL ACCESSORIES AND ORTHOTICS** | |
| General medical and surgical appliances (including glucometers) | Self-funded.<br>Accumulates at cost to Threshold. |
| Hearing aids including repairs | Self-funded.<br>Accumulates at cost to Threshold. |
| Large orthopaedic orthotics/ appliances | Self-funded.<br>Accumulates at cost to Threshold. |
| Stoma products | Unlimited subject to authorisation |
| CPAP apparatus for sleep apnoea | Self-funded.<br>Accumulates at cost to Threshold. |
| Foot orthotics (incl. shoes and foot inserts/levellers) | Self-funded.<br>Accumulates at cost to Threshold. |
| Oxygen therapy equipment | Unlimited subject to authorisation |
| Home ventilators | Unlimited subject to authorisation |
| Long leg callipers | Unlimited subject to authorisation |
| Moon boots | Limited to R2 140 per beneficiary |
| **BLOOD, BLOOD EQUIVALENTS AND BLOOD PRODUCTS**<br>Including transportation of blood | Unlimited |
| **CONSULTATIONS AND VISITS BY MEDICAL PRACTITIONER** | |
| Fedhealth Network GPs and Specialists | Covered in full |
| Non-network GPs and Specialists | Covered up to the Fedhealth Rate. |
| Other Healthcare Practitioners | Covered up to the Fedhealth Rate |

| BENEFIT | flexiFED 3 |
|---|---|
| **ORGAN TISSUE AND HAEMOPOIETIC STEM CELL (BONE MARROW) TRANSPLANTATION**<br>Haemopoietic stem cell (bone marrow) transplantation, immunosuppressive medication, post transplantation biopsies and scans, radiology and pathology | R334 110 |
| Corneal grafts | No benefit |
| **PATHOLOGY AND MEDICAL TECHNOLOGY** | Unlimited |
| **PHYSIOTHERAPY**<br>In-hospital physiotherapy requires pre-authorisation and referral by a medical practitioner. Subject to treatment protocols | Unlimited |
| **PROSTHESES AND DEVICES INTERNAL** | |
| Aorta stent grafts | R70 160 |
| Bone lengthening devices, carotid stents, embolic protection devices, other approved spinal implantable devices and intervertebral discs, peripheral arterial stent grafts, spinal plates and screws | See combined benefit limit for all unlisted internal prosthesis* |
| Cardiac pacemakers | Unlimited at cost at PMB level of care |
| Cardiac stents | Unlimited at cost at PMB level of care |
| Cardiac valves | Unlimited at cost at PMB level of care |
| Detachable platinum coils | R60 740 |
| Elbow, hip, knee and shoulder replacement | See combined benefit limit for all unlisted internal prosthesis* |
| Total ankle replacement | No benefit |
| Bi-ventricular pacemakers and implantable cardioverter defibrillators (ICDs) | Unlimited at cost at PMB level of care |
| Intraocular lenses – non-cataract (per lens) limited to 2 per beneficiary | R3 750 |
| * Combined benefit limit for all unlisted internal prosthesis | R29 880 |

| BENEFIT | flexiFED 3 |
|---|---|
| **PROSTHESES EXTERNAL** | R13 820 |
| Continuous Glucose Monitoring<br>(CGM devices)<br>This benefit is limited to Type 1 diabetics only. | No benefit |
| **GENERAL RADIOLOGY** | Unlimited |
| **SPECIALISED RADIOLOGY** | Unlimited at Fedhealth Rate. First R3 170 for non-PMB MRI/ CT scans for the member's account<br>Oncology PET and PET/CT scans - 2 PET scans per family per annum limited to the Oncology benefit subject to DSP network. R5 890 co-payment for use of non-DSP. |
| CT scans, MUGA scans, MRI scans, radio isotope studies | Specific authorisation required |
| **CHRONIC RENAL DIALYSIS**<br>Pre-authorisation is required and services must be obtained from the DSP. A 40% co-payment applies where a DSP provider is not used.<br>Haemodialysis and peritoneal dialysis, radiology and pathology. Consultations, visits, all services, materials and medicines associated with the cost of renal dialysis. | R334 110 up to the Fedhealth Rate |
| **IMMUNE DEFICIENY RELATED TO HIV INFECTION**<br>Hospitalisation, anti-retroviral and related medication and related pathology. | Unlimited |

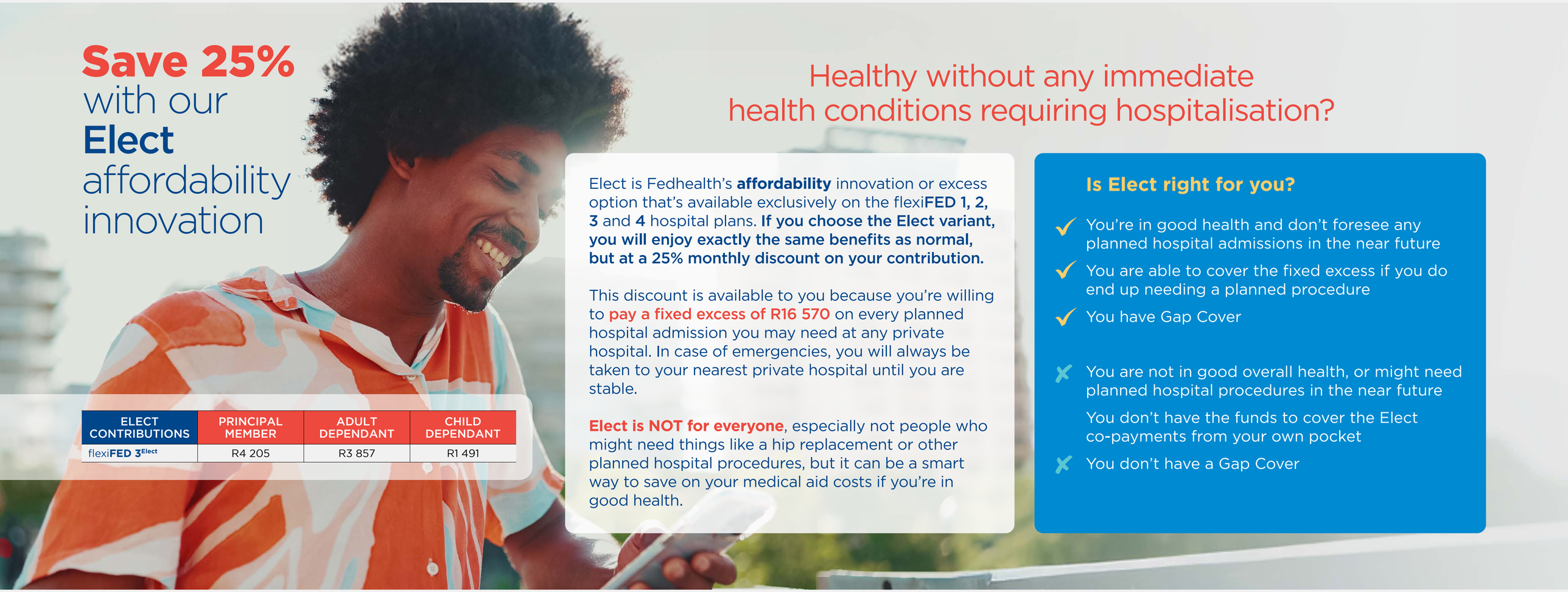
# Procedure co-payments

| BENEFIT | flexiFED 3 |
|---|---|
| Bunion procedures, diagnostic cystoscopy, gastritis/dyspepsia/heartburn, nasal procedures, skin biopsy/excision | No co-payment |
| All open hernia surgery | R6 140 |
| Arthroscopic procedures - shoulder, ankle | R11 360 |
| Arthroscopic procedures - wrist | R11 360 |
| Arthroscopic procedures - hip | R11 360 |
| Arthroscopic procedures - knee | R11 360 |
| Other arthroscopic procedures | R11 360 |
| Back and neck procedures | R5 630 |
| Colonoscopy, upper GI endoscopy | R5 760 |
| Dental admissions | No co-payment |
| Inguinal hernia surgery | R6 140 |
| **JOINT REPLACEMENTS** | |
| Single hip and knee replacements with CP* | No co-payment |
| Single hip and knee replacements-non-use of CP* | R37 750 |
| Other joint replacements | R9 060 |
| Laparoscopic hernia repairs (bilateral inguinal, repeated inguinal hernias and Nissen/Toupet hernia repairs only), laparoscopic procedures | R8 510 |
| Laparoscopic varicocelectomy | R8 510 |
| Rhizotomies and facet pain blocks (limited to 1 of either procedure per beneficiary per year) | No benefit |
| Spinal surgery** | R10 710 |
| Surgical extraction of impacted wisdom teeth | R6 140 |
| Varicose vein procedures | R5 760 |

** Contracted Provider: Must use ICPS Hip and Knee network, JointCare, Surge Orthopaedics or Major Joints for Life for single non-PMB hip and knee joint replacements. Non-use of Contracted Provider (CP) will result in co-payment.*
*** No benefit unless OrthoCare Spinal Programme has been completed.*

# Protect your health with **innovative customisation features**

Talk to your financial adviser about how you can **customise your cover** to better suit your needs and budget.



## **Save 25%** with our **Elect** affordability innovation

| ELECT CONTRIBUTIONS | PRINCIPAL MEMBER | ADULT DEPENDANT | CHILD DEPENDANT |
|---|---|---|---|
| flexi**FED 3**[Elect] | R4 205 | R3 857 | R1 491 |

## Healthy without any immediate health conditions requiring hospitalisation?

Elect is Fedhealth's **affordability** innovation or excess option that's available exclusively on the flexi**FED 1, 2, 3** and **4** hospital plans. **If you choose the Elect variant, you will enjoy exactly the same benefits as normal, but at a 25% monthly discount on your contribution.**

This discount is available to you because you're willing to **pay a fixed excess of R16 570** on every planned hospital admission you may need at any private hospital. In case of emergencies, you will always be taken to your nearest private hospital until you are stable.

**Elect is NOT for everyone**, especially not people who might need things like a hip replacement or other planned hospital procedures, but it can be a smart way to save on your medical aid costs if you're in good health.

### Is Elect right for you?

- ✓ You're in good health and don't foresee any planned hospital admissions in the near future
- ✓ You are able to cover the fixed excess if you do end up needing a planned procedure
- ✓ You have Gap Cover

- ✗ You are not in good overall health, or might need planned hospital procedures in the near future
- ✗ You don't have the funds to cover the Elect co-payments from your own pocket
- ✗ You don't have a Gap Cover

# flexi**FED 3** Hospital Plan

## 2027 Gross monthly contributions

| OPTION | PRINCIPAL MEMBER | ADULT DEPENDANT | CHILD DEPENDANT |
|---|---|---|---|
| flexi**FED 3** | R5 614 | R5 143 | R1 990 |
| flexi**FED 3**$^{GRID}$ | R5 035 | R4 617 | R1 785 |
| flexi**FED 3**$^{Elect}$ | R4 205 | R3 857 | R1 491 |

**Your 4th and subsequent child will be covered free of charge.**

**Fedhealth applies child rates up until age 27.**

## Annual Benefit Pools

D2D+ BENEFIT

| | |
|---|---|
| flexi**FED 3** | R4 160 |

*Please note that D2D+ Rand amounts listed are annual family amounts.*

### Threshold Benefit

| OPTION | PRINCIPAL MEMBER | ADULT DEPENDANT | CHILD DEPENDANT |
|---|---|---|---|
| flexi**FED 3** | R10 824 | R9 912 | R3 840 |

***NOTE:** Claims accumulate at cost on flexi**FED 3**,*
**Up to a maximum of three children*

### Annual Nominal Savings (included in the Gross Contribution)

flexi**FED** hospital plans come with a nominal savings account so that members joining Fedhealth from other schemes can easily transfer their Medical Savings Account balances to the Scheme. The nominal savings amount is included in your contribution.

| OPTION | PRINCIPAL MEMBER | ADULT DEPENDANT | CHILD DEPENDANT |
|---|---|---|---|
| flexi**FED 3** | R348 | R312 | R120 |
| flexi**FED 3**$^{GRID}$ | R312 | R288 | R108 |
| flexi**FED 3**$^{Elect}$ | R276 | R228 | R84 |

### Annual maximum Back-up Savings that a member can add to their day-to-day cover

### Back-up Savings*

Worried about costly day-to-day expenses not already covered on your flexi**FED** Hospital Plan? Why not add back-up savings to your cover?.

The amounts below indicate how much back-up Savings you have available based on your option and family composition. The amount you activate will be divided by 12 and added to your hospital plan contribution.

| OPTION | PRINCIPAL MEMBER | ADULT DEPENDANT | CHILD DEPENDANT |
|---|---|---|---|
| flexi**FED 3** | R12 576 | R11 520 | R4 464 |
| flexi**FED 3**$^{GRID}$ | R12 612 | R11 544 | R4 476 |
| flexi**FED 3**$^{Elect}$ | R12 660 | R11 616 | R4 512 |

*The amount of Back-up savings that a member decides to add to their cover will be divided by 12 and added to their gross contribution*

**Powered by the MediVault*



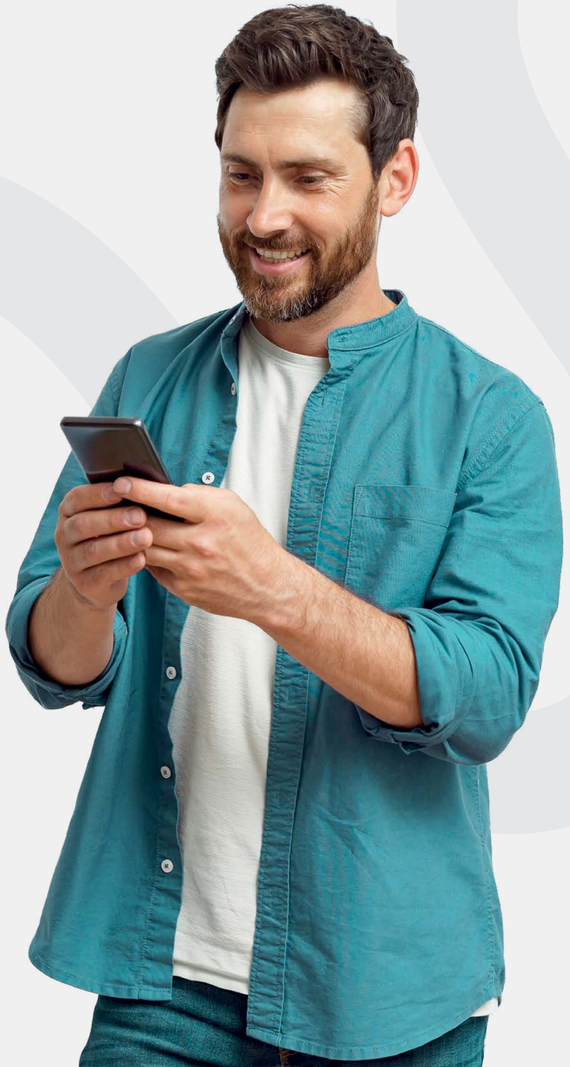
# **Links to** benefits info

## Need more information on a specific Fedhealth benefit, programme, service or provider?

We've got you covered. For additional information, just click on the relevant ZOOM to find out more.

ZOOM

- 30-Day Post-Hospitalisation Benefit →
- Alignd Serious Illness Benefit →
- All about dependants →
- Alternatives to Hospitalisation Benefit →
- Chronic Medicine Benefit →
- Contraceptive Benefit →
- Emergency Assistance →
- Emergency Treatment in a Casualty Ward →
- Maternity & Childhood Benefits →
- Fedhealth Baby | Mom Maternity Care Programme →
- flexi**FED 3** Basic Dentistry Benefit →
- GP Nomination →
- Hospital at Home Benefit →
- MediTaxi Benefit →
- Mental Health Benefit →
- Mental Health Programme →
- Oncology Benefit →
- Option Upgrades →
- OrthoCare Spinal Programme →
- Screening Benefit →
- Self-Service Channels →
- Selected Procedures Benefit →
- Smoking Cessation Programme →
- Specialised Radiology Benefit →
- Specialist Referral →
- Weight Management Programme →

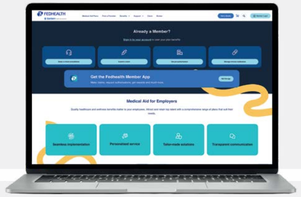


# Contact us

## WEBSITE

**fedhealth.co.za**

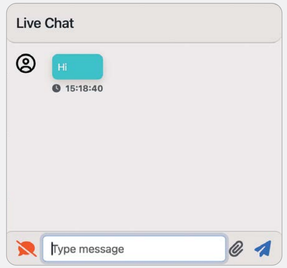
The website provides easy-to-navigate information on our options, step-by-step instructions on how to submit claims etc., scheme news, and also hosts the informative Healthy Living articles – filled with lifestyle and wellness topics.



## LIVECHAT

**Access on the website**

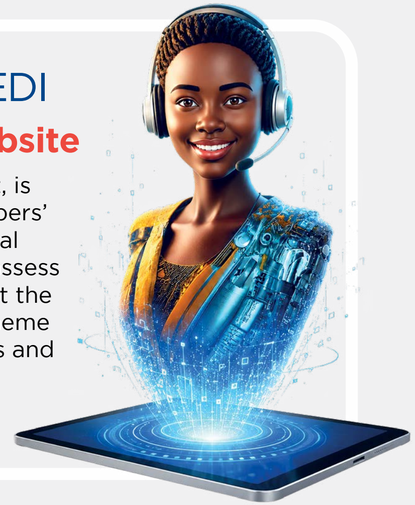
Members can type in their queries and one of our LiveChat agents will assist them online.




## AI AGENT NALEDI

**Access on the website**

Naledi, our expert AI agent, is on hand to help with members' general queries and informal searches. Naledi can help assess members' needs to suggest the right plan, and provide Scheme resources on benefits, rules and plan details.



## FAMILY ROOM

**Access on the website**

Our online member portal allows members to manage their membership by updating contact details, viewing and submitting claims, viewing member statements, seeing how much Savings they've got left, activate the amount of Savings they require, registering for chronic medicine and obtaining hospital authorisations.

## WHATSAPP

Members can choose from self-service actions like obtaining their tax certificates or membership e-cards.

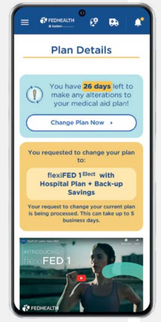
**Save the number 060 070 2479 as a contact and type 'hi' to start a conversation**

## MEMBER APP

Our app has been designed to simplify members' interaction with the Scheme. Available from the

**Google Play Store, Huawei App Gallery and Apple App Store,**

it lets the member activate the amount of Savings they require, download their e-card, view their option's benefits, set medicine reminders, and lots more.



# Contact details

**Hospital Authorisation Centre**
Monday to Thursday 08h30 – 17h00
Friday 09h00 – 17h00
**Tel:** 0860 002 153
**Email:** authorisations@fedhealth.co.za
**Web:** www.fedhealth.co.za

**Alignd**
**Tel:** 0860 100 572
**Email:** referrals@alignd.co.za

**Ambulance Services**
Azoza
**Tel:** 0860 333 432

**AfA (HIV Management)**
Monday to Friday 08h00 – 17h00
**Tel:** 0860 100 646
**Email:** afa@afadm.co.za
**Web:** www.aidforaids.co.za
**SMS (call me):** 083 410 9078

**Chronic Medicine Management**
Monday to Thursday 08h30 – 17h00
Friday 09h00 – 17h00
**Tel:** 0860 002 153
**Email:** cmm@fedhealth.co.za
**Postal address:** PO Box 38632, Pinelands, 7430

**Disease Management**
Monday to Friday 08h00 – 16h30
**Tel:** 0860 002 153
**Email:** membercare@medscheme.co.za

**Fedhealth Baby | Mom Maternity Care Programme**
Monday to Friday 09h00 - 16h00
**Tel:** 0861 116 016
**Email:** info@babyhealth.co.za

**Fedhealth Oncology Programme**
Monday to Friday 08h00 – 16h00
**Tel:** 0860 100 572
**Email:** cancerinfo@fedhealth.co.za
**Postal address:** PO Box 38632, Pinelands, 7430

**Fedhealth Paed-IQ 24 hour service**
**Tel:** 0860 444 128

**Fraud Hotline**
**Tel:** 0800 112 811

**MVA Third Party Recovery Department**
Monday to Friday 08h00 – 16h00
**Tel:** 0800 117 222

**MediTaxi**
**Tel:** 0860 333 432 press 5 for the point-to-point service

**Hospital-at-Home (Quro Medical)**
**Tel:** 010 141 7710
**Web:** www.quromedical.co.za

## Medscheme Client Service Centres

For personal assistance, visit one of the following Medscheme Client Service Centres.

These branches are open
**Monday to Thursday 07h30 – 17h00,**
**Friday 09h00 - 17h00 and**
**Saturday 08h00 - 12h00**

**Bloemfontein**
Medical Suites 4 & 5, 1st Floor, Middestad Centre, Cnr Charles & West Burger Street, Bloemfontein

**Cape Town**
Shop 6, 9 Long Street, Cnr Long & Waterkant Streets, Cape Town

**Durban**
14/36 Silver Oaks Office Park, Silverton Road, Musgrave, Durban

**East London**
Unit 5, Balfour Road, Vincent, East London

**Johannesburg**
Mathomo Mall, 115 Main Street, Marshalltown, Johannesburg

**Kathu**
Shop 18D, Kameeldoring Plein Building, Cnr Frikkie Meyer & Rooisand Road, Kathu

**Kimberley**
Shop 76, North Cape Mall, Royldene, Kimberley

**Klerksdorp**
48 Buffelsdoorn Road, Buffelspark Office Complex, Klerksdorp

**Lephalale**
Shop 0050A, Lephalale Mall, cnr Chris Hani Ave & Nelson Mandela Drive, Lephalale

**Mafikeng**
Shop 118, Ground Floor, East Gallery, Mafikeng

**Nelspruit**
Shop 11, City Centre Mall, Cnr Andrews Street & Madiba Drive, Mbombela

**Pietermaritzburg**
Shop 32B, Park Lane Shopping Centre, 12 Chief Albert Luthuli Street, Pietermaritzburg

**Polokwane**
Shop 3, Checkers Centre, 51 Biccard Street, Polokwane

**Port Elizabeth**
Block 3, Greenacres Office Park, 2nd Avenue, Newton Park, Gqeberha

**Pretoria**
Shop 17, Nedbank Plaza, Ground Floor, 175 Steve Biko Street, Arcadia, Pretoria

**Roodepoort**
Valley View Office Park, 680 Joseph Lister Street, Constantia Kloof, Roodepoort

**Rustenburg**
Lifestyle Square, Shop 23, Beyers Naude Drive, Rustenburg

**Vereeniging**
32 Grey Avenue, Vereeniging

**Worcester**
45 Church Street, Worcester

## Contact us

**Fedhealth Customer Contact Centre**
**Tel:** 0860 002 153
**Email:** member@fedhealth.co.za
**Claim submission:** claims@fedhealth.co.za
**Web:** www.fedhealth.co.za
**Postal address:** Private Bag X3045, Randburg, 2125

Contact Centre is open
**Monday to Thursday 08h30 – 17h00,**
**Friday 09h00 - 17h00**

FEDHEALTH

Sanlam preferred healthcare provider


Fedhealth Customer Contact Centre 0860 002 153

Corner Ontdekkers Road and Conrad Street, Absa Building Block F, Florida, 1716
Private Bag X3045, Randburg 2125

**www.fedhealth.co.za**


**Please note:** All Fedhealth benefits are subject to registered Scheme Rules, and as such, this document only aims to provide a summary of such benefits.

For the full Scheme Rules, please visit fedhealth.co.za or contact the Fedhealth Customer Contact Centre on 0860 002 153 to obtain a copy.