

ABOUT THE STANDARD OPTION

THE STANDARD OPTION is well-suited for families who want a comprehensive level of cover across primary, secondary, and tertiary care needs.

It addresses the concerns of not only day-to-day healthcare costs but also larger, unforeseen medical events.

It strikes a balance between offering generous benefits that safeguard the whole family while maintaining flexibility through both virtual and inperson access to care.

It gives families a reliable plan that looks after everyone, providing reassurance that their health needs are well covered.

DIGITAL HEALTH MADE SIMPLE WITH UMVUZO HEALTH

At Umvuzo Health, we make it easy for members to connect, access care, and stay informed — anytime, anywhere. Our digital platforms put your healthcare in your hands, giving you more choice, greater convenience, and the confidence of knowing support is always within reach.

UMVUZO CARE APP (VIRTUAL CONSULTATION PLATFORM)

Your doctor's room — in your pocket.

With the Care App, members can connect directly with healthcare professionals for consultations from the comfort of home, at work, or while travelling. It saves time, reduces costs, and ensures you receive trusted guidance without unnecessary delays.

Whether it's a quick check-in for a minor concern or professional advice for ongoing health, the Care App makes quality care accessible whenever you need it most.

Download the Umvuzo Care App Today!

UMVUZO HEALTH MEMBER APP

All your benefits, in your pocket.

Our member app is your all-in-one health companion. It gives you convenient access to your membership card, membership details, and available balances at a glance. You can request authorisations, track claims, and manage your health information easily and securely — empowering you to take control of your healthcare journey.

With everything at your fingertips, the App simplifies your healthcare experience and helps you make the most of your benefits without the stress of paperwork or long calls.

Download the Umvuzo Health Member App Today!







UMVUZO WHATSAPP CHANNEL

Healthcare updates, at your fingertips.

Simple, fast, and familiar. Our WhatsApp channel offers a direct line for updates, support, and quick access to Scheme information. Members can engage with us on a platform they already use daily, making healthcare communication as easy as chatting with a friend.

From reminders, important announcements and health tips to quick answers about your membership, WhatsApp keeps you connected to Umvuzo Health in a way that fits seamlessly into your everyday life.

Scan the QR code to join Umvuzo's WhatsApp Channel!







* Please note that the Scheme Rules supersede information contained in this document. Our Scheme Rules can be obtained on www.umvuzohealth.co.za



RIMARY BENEFITS

NO PRE-AUTHORISATION REQUIRED • DOWNLOAD THE UMVUZO CARE APP TO ACCESS VIRTUAL CONSULTATIONS



GENERAL PRACTITIONERS & NURSES

- Members have access to 10 in-person consultations per beneficiary at any GP
- Additional in-person consultations must be accessed through the Umvuzo Digital
- Unlimited virtual consultations using Umvuzo Care App



MALE HEALTH

- PSA (for the screening of prostate cancer)
- . Circumcision
- Vasectomy

All procedures must be pre-authorised



DENTAL CARE

General dentistry which includes the following:

- » R4 900 per beneficiary per year
 - Benefit includes:
 - Dental Consultation
 - Extractions
 - Preventative & Fluoride Treatment
 - Cleaning, Scaling & Polishing
 - Dental Fillings

 - Oral X-rays
 - Crowns & Bridges
 - **Emergency Root Canal**
 - Wisdom Teeth Extraction (in the dentists' rooms)
 - Dentures



MEDICATION (FORMULARY)

- Self-medication (Over-The-Counter):
 - Cover of R950 per beneficiary per year, and a maximum of **R180** per event
- » Prescribed Acute Medication:
 - Acute medication as prescribed by treating nurse or GP
 - Unlimited and subject to the approved formulary
- Prescribed Chronic Medication:
 - Unlimited and subject to the approved formulary
- Subject to 27 CDL PMB conditions as well as selective Hormone Replacement Therapy (HRT) and registration on the applicable Disease Management Programme
- In addition to the 27 CDL conditions, this option also provides cover for 6 additional chronic conditions, namely:
 - Severe Acne
 - Anaemia
 - Severe Eczema
 - **Endometriosis**
 - Gastro-Oesophageal Reflux Disease
 - Sjogren Disease



FEMALE HEALTH

- Oral contraceptives cover of up to R210 per registered female per month
- Pap smear
- Mammogram*
- Laparoscopic Sterilisation*

* These services must be pre-authorised



MATERNITY CARE PLAN

A basket of services consisting of the following benefits will be made available to the expectant mother upon registering on the plan.

- 3 Visits to the GP or Gynaecologist
- Additional blood and urine tests as required
- 2x 2D Ultrasound Scans
- Prenatal Vitamins (iron, calcium and folic acid) for the duration of the pregnancy - according to formulary

Benefits will be pro-rated/apportioned according to the stage of the pregnancy at the time of registration.



INVESTIGATIONS

These services are available as referred by treating healthcare provider as per protocol:

- Basic Radiology (X-rays)
- Soft Tissue Ultrasound
- Pathology (blood tests)



OPTOMETRY

Available every 24 months at PPN accredited network providers:

- 1 consultation per beneficiary
- Frame limited to R1 315 per beneficiary 100% of the costs of clear lenses (single/
- bi-focal/multi-focal) Contact lenses limited to R2 085
- Over 93% of optometrists are already on

the PPN Network.

Using a non-network provider will result in reduced benefits for consultations, frames and lenses.

SECONDARY BENEFITS

PRE-AUTHORISATION REQUIRED • SCHEME RATES APPLY



SPECIALIST VISITS

- 10 visits per family per year
 - Must be referred by the treating GP and be clinically necessary.

APPLIANCES

(ORTHOPAEDIC/

R13 500 per family per year

Crutches

Back/leg/arm/neck support

Surgical footwear post surgery

EMERGENCY MEDICAL SERVICES

Medical and Hospital Logistics Services

1 Medicine Bag per family upon joining

Emergency Road and Air Evacuation

1 Medicine Bag Refill per year

out-of-pocket expenses.

It is important to call only Netcare 911

for emergency medical services to avoid

EMERGENCY/AFTER HOUR VISITS

5 after-hour visits per family per year

when the treating GP is closed (in the

evenings, after hours on weekends or

not requiring hospitalisation or specialist

intervention but clinically validates a

intervention and/or medication

consultation and/or a procedure room

for incidents that occur at times

Medication prescribed will be

sufficient for a 3-day supply An incident is defined as a condition

public holidays)

Diabetic and stoma aids continually

essential for the medical treatment

SURGICAL/MEDICAL)

- Pre-authorisation is required before accessing the specialist
- Services covered include consultation and special investigations
- Follow-up visits must be pre-authorised



MEDICATION (FORMULARY)

- Acute Medication prescribed by specialist will be covered in accordance to treatment guidelines
- Chronic Medication will be covered as set out under CDL conditions



SUPPLEMENTARY BENEFITS (NO PRE-AUTHORISATION REQUIRED)

- » R8 200 per family per year
 - Occupational Therapy
 - Dieticians
 - Speech Therapy & Audiology
 - Physiotherapy, Chiropractors and **Biokinetics**
 - Podiatry
 - Psychology
 - Homeopathy
 - Nurse visits covered up to R200 per visit
 - Social and Community Workers

Maximum 60 minutes per consultation



MENTAL WELLNESS (NO PRE-AUTHORISATION REQUIRED)

- 24/7 Hotline & WhatsApp Support for immediate mental health assistance
- Therapist Consultations online or in person (subject to available Supplementary Benefits)
- Group & Family Support for trauma, chronic illness, or major life changes
- Digital Wellness Tools including coping guides, resilience content, and meditations.



TERMINAL AND WOUND CARE

- R8 000 per family per year
- The cost for all services related to care for a terminal condition that do not conform to acute admission or services



PREVENTION & SCREENINGS

Members can access the screening and preventative benefits through any pharmacy that offers these services:

- Flu Vaccine
- Glucose Test (finger prick) Cholesterol (finger prick)
- Blood Pressure
- BMI & Waist Circumference
- Rapid HIV Test

HOSPITAL BENEFITS

• PRE-AUTHORISATION REQUIRED • SCHEME RATES APPLY • ACCESS TO ALL HOSPITAL GROUPS



HOSPITAL ADMISSION

- All admissions to hospital must be pre-authorised
- In the case of a proven. life-threatening emergency, admission will automatically be granted for an initial period of 24 hours



GENERAL

- Consultations (GPs and Specialists)
- Treatment
- Surgical Procedures and Operations
- Non-surgical Procedures
- Anaesthesia for Surgical Procedures
- Medication administered during a hospital stay
- Hospital Apparatus



ACCOMMODATION

- General Ward
- High Care
- Intensive Care Unit (ICU)



INTERNAL MEDICAL AND SURGICAL PROSTHESES

- » Vascular Prosthesis (valve replacements, pacemakers, stents and grafts) R40 800
- Functional Items and Recuperative Prosthesis (K-wires, plates, screws, lenses, slings and hearing aids) R13 500
- Joint Replacements R45 700
- Major Musculoskeletal Prosthesis and Spinal Procedures R27 400



BLOOD TRANSFUSION

- 100% of the cost, including the cost of:
- Blood
- Apparatus
- Operator's Fee



DISCHARGE MEDICATION

7 days' supply of acute or chronic medication



INVESTIGATIONS

- Radiology (X-rays)
- Pathology (blood tests)
- Non-oncology Radiotherapy
- Medical Technology (mammogram)



SCANS (IN & OUT OF HOSPITAL)

- 2 scans per family per year
 - RT Scan
- MRI Scan
- CAT Scan



MENTAL HEALTH

- Subject to PMBs
- Hospital-Based Mental Health Management has up to 3 weeks cover per year OR
- Up to 15 Outpatient Psychotherapy contacts per year



ONCOLOGY (CANCER)

- Members are encouraged to register with the Cancer Management Programme
- A total treatment plan benefit will be allocated based on Scheme Treatment Guidelines
- Treatment must be obtained at Designated Service Providers (DSPs) and will be funded at negotiated tariffs according to the treatment protocols

ANDISA UMVUZO BENEFIT



The Yandisa Benefit is a:

- A pre-authorised benefit extender for specific items (not services)
- That can extend cover for certain items under exceptional circumstances.
- Factors taken into account in the granting of this benefit will include but are not limited to clinical, functional and financial factors and intended purpose.
- The benefit has to be applied for by completing the prescribed form and submitting relevant substantiated documentation to be reviewed by the Clinical committee and then authorised, if approved
- » The benefit is limited to R50 000 per family per year.

Please note: This is not a gap cover and excludes primary care benefits and any other services.

DISEASE MANAGEMENT



ACTIVE DISEASE MANAGEMENT PROGRAMME

- Our Disease Management Programme are structured treatment plans that aim to help our members diagnosed with chronic conditions better manage their disease, and maintain and improve quality of life.
- The main aim of our programmes is to reduce the symptoms associated with a chronic disease and keep them from getting worse. Through these programmes we also aim to improve cooperation between the various specialists and institutions that provide care for our members, such as family and specialist doctors, hospitals and rehabilitation centers. This is meant to ensure that the individual treatment steps are well coordinated.

We cover treatment and medication for the following 27 CDL PMB conditions:

- Chronic Renal Disease
- Addison's Disease
- Asthma
- Bronchiectasis
- Cardiac Failure
- Cardiomyopathy
- Chronic Obstructive Pulmonary Disorder
- Coronary Artery Disease
- Crohn's Disease
- Diabetes Insipidus

- Diabetes Mellitus Types 1 & 2
- Dysrhythmias
- Epilepsy
- Bipolar Mood Disorder
- Hypothyroidism Hypertension
- HÍV
- Glaucoma
- Haemophilia
- Ulcerative Colitis
- Systemic lupus Erythematosus
- Schizophrenia

- » Rheumatoid Arthritis
- Parkinson's Disease
- Hyperlipidaemia Multiple Sclerosis

We encourage all our members living with a chronic condition to register on the relevant Disease Management Programme to benefit from this coordinated care, personalised attention and ongoing support.

WHAT IS THE MONTHLY COST?



MAIN MEMBER R3 106.00

PER ADULT DEPENDANT

R2 949.00



PER CHILD DEPENDANT

R942.00

MONTHLY CONTRIBUTIONS

SINGLE MEMBER



CONTRIBUTION R3 106.00

DUAL PARENT FAMILY



R6 055.00



R6 997.00



R7 939.00



R8 881.00

SINGLE PARENT FAMILY

CONTRIBUTION

CONTRIBUTION



R4 048.00



R4 990.00



R5 932.00



R6 874.00

IMPORTANT CONTACT INFORMATION

Alenti Office Park, Building D, 457 Witherite Road, The Willows, Pretoria, 0040 PO Box 1463, Faerie Glen, 0043

24/7/365 Authorisation Call Centre: **0861 083 084**

Medical emergency services (Netcare 911): 082 911 24-hour Pre-authorisation Call Centre: 0861 083 084 Hospital and Specialist Please Call Me: 060 070 2352 Pre-authorisation email address: auth@rxhealth.co.za Chronic Disease registration: chronic@rxhealth.co.za Maternity Care Plan registration: maternity@rxhealth.co.za

www.umvuzohealth.co.za

HOW DO I GET A PRE-AUTHORISATION NUMBER?

- Call us on **0861 083 084**
- E-mail: auth@rxhealth.co.za
- » We will access your medical history immediately and assist you with obtaining any information you may need

PLEASE BE READY TO SUPPLY THE FOLLOWING INFORMATION WHEN REQUESTING PRE-AUTHORISATION

To ensure there are no delays to your request, please ensure you have on hand the following:

- » Your membership number,
- The referral letter from the doctor,
- ICD 10 code (in other words the diagnosis code),
- The name and practice number of your referring doctor,
 The name and practice number of the specialist to whom you are referred, and
- Any other related documents as may be required.

Once your request has been processed and approved, you will then be sent your authorisation number on your mobile by SMS and email where applicable.

Administrative and Client services are attended to during business hours from:

MONDAYS TO FRIDAYS

SATURDAYS 08:00 - 13:00

PLEASE BE READY TO SUPPLY THE FOLLOWING INFORMATION WHEN CALLING UMVUZO HEALTH

- » Umvuzo Health membership number
- Surname
- » South African ID number
- » Passport number (if you are from a neighbouring country)

Client Service Call Centre: Client Service Please Call Me: 0861 083 084 060 070 2095 WhatsApp: 060 070 2094

Head Office Tel: 012 845 0000 086 670 0242 E-mail: info@umvuzohealth.co.za

COUNCIL FOR MEDICAL SCHEMES

0861 123 267

E-mail: support@medicalschemes.com complaints@medicalschemes.com Website: www.medicalschemes.com



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