STANDARD

UMVUZO HEALTH

2017 HEALTH GUIDE

WELCOME TO

Umvuzo's **STANDARD** OPTION.

Your comprehensive healthcare solution.

THE REASONS TO CHOOSE UMVUZO

We have been providing solutions for our members and their families for the past 13 years. We are passionate about people, and show this in everything that we do.

SIGNING UP WITH UMVUZO, GIVES YOU ACCESS TO

✓ A team of professionals who have a positive, can-do attitude
✓ A personal approach to service
✓ All hospital groups
✓ 24 on site offices across the country
✓ 24/7/365 call centre
✓ Mobile key account managers
✓ A targeted and holistic approach to Disease Management
✓ No underwriting for employer groups of 100 and above
✓ Direct payment to service providers so you are never out of pocket

WE GIVE OUR MEMBERS ACCESS TO SOLUTIONS THAT REWARD LIFE.

HOW DO I GET A PRE–AUTHORISATION NUMBER?

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

PLEASE HAVE ONE OF THE FOLLOWING HANDY WHEN YOU CALL UMVUZO HEALTH

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

Administrative and non-emergency medical services are attended to during business hours from:
MONDAYS TO THURSDAYS
08:00 – 16:30
FRIDAYS
08:00 – 16:00

COUNCIL FOR MEDICAL SCHEMES

Call: **0861 123 267**
E-mail: **support@medicalschemes.com**
complaints@medicalschemes.com
Website: **www.medicalschemes.com**

Find us on Facebook
Umvuzo Health

YOUR PRIMARY BENEFITS

NO PRE-AUTHORISATION REQUIRED • Universal Health Only

GENERAL PRACTITIONER VISITS

> Unlimited but managed

MEDICATION (FORMULARY)

> Scripted: acute unlimited
> Scripted: chronic unlimited
(subject to 26 CDL PMB conditions as well as selective Hormone Replacement Therapy (HRT) and Chronic Management Programme registration)
> Unscripted: over the counter medication up to R255 per beneficiary per year, limited to 3 events, maximum of R85 per event

INVESTIGATIONS

> X-rays
> Mammogram (including ultrasound)
> Pathology
> Maternal ultrasound (limited to 2 per pregnancy)

DENTAL CARE

> 1 consultation per beneficiary per year
> 1 follow-up per beneficiary per year
> Cleaning, fluoride treatment, scaling, polishing
> Fillings
> Oral X-rays
> Emergency root canal
> Wisdom teeth extraction (in the dentist's rooms)
> 1 set of dentures per dependant over 21, every 24 months

OPTOMETRY

> 1 eye test per beneficiary per year
> 1 set of spectacles per beneficiary every 24 months
*Selection from a specified range of frames and lenses
*Sunglasses and contact lenses are not covered

KINDLY NOTE
After the 10th visit in a 12 month period the member must choose ONE GP for better management.

UMVUZO ABBREVIATION DICTIONARY

GP - General Practitioner
DSP - Designated Service Provider
CDL - Chronic Disease List
PMB - Prescribed Minimum Benefits

YOUR SECONDARY BENEFITS

PRE-AUTHORISATION REQUIRED

SPECIALIST VISITS

> 7 visits per family per year

*Must be referred by the GP and be clinically necessary

MEDICATION (FORMULARY)

> Scripted: acute unlimited

> Scripted: chronic unlimited (subject to 26 CDL PMB and 6 additional Chronic Management Programme registration)

* Medication prescribed by the specialist will be covered according to treatment guidelines

SUPPLEMENTARY BENEFITS

> R2 800 per family per year

- Occupational Therapy
- Dieticians
- Speech Therapy
- Physiotherapy

APPLIANCES

> R8 450 per family per year

- Crutches
- Support
- Slings

AFTER-HOURS VISITS

> 5 visits per family per year

TERMINAL AND WOUND CARE

> R8 000 per family per year

EMERGENCY MEDICAL SERVICES

> Netcare 911

> Emergency transport

> 1 medicine bag per family

*Upon joining

> 1 medicine bag refill per year

KINDLY NOTE

- All specialist visits must be referred by the Universal contracted GP and pre-authorised through the Umvuzo call centre.
- Each follow up visit must also be pre-authorised.

DISEASE MANAGEMENT

ACTIVE DISEASE MANAGEMENT PROGRAMMES

> Our Active Disease Management Programmes enable us to plan and coordinate the healthcare of members living with chronic medical conditions, in order to give them the best possible outcomes.

All 26 CDL are covered as part of Prescribed Minimum Benefits (PMB).

Registration on these Disease Management Programmes is necessary to access full benefits.

> HIV/Aids Disease Management Programme
> Oncology Disease Management Programme
> Diabetes Disease Management Programme
> Musculoskeletal Disease Management Programme
> Renal Disease Management Programme
> Hypertension Disease Management Programme
> Hyperlipidaemia Disease Management Programme (high cholesterol)
> Asthma/COPD/Bronchiostasis Disease Management Programme

A total treatment plan for each member includes:

- Confidentiality
- Ongoing member support and education
- Individualised treatment plan
- Ongoing counselling and health monitoring

All Prescribed Minimum Benefits are covered 100% according to Scheme rules, protocols and formularies.

How to register

STEP 1

Consult your GP to confirm the diagnosis and obtain the following:

- Completed chronic application form
- Prescription
- Supporting documents (blood results) for chronic medication registration

STEP 2

Fax or email the application form, supporting documents and prescription to Universal Healthcare.

Fax: 0862 108 743 | Email: chronicmedicine@universal.co.za

STEP 3

Universal Healthcare will fax, email or contact the member/practice with the authorisation letter confirming that the condition is registered.

YOUR HOSPITAL BENEFITS

PRE-AUTHORISATION REQUIRED • SCHEME RATES APPLY • SCHEME USES ALL HOSPITAL GROUPS

GENERAL

> Consultations (GP and specialists)
> Treatment
> Surgical procedures
> Non-surgical procedures
> Anaesthesia

ACCOMMODATION

> General ward
> ICU and/or high care

OVERALL PROSTHESES

> R46 500 overall per family per year
The following sub-limits are applicable:

- Vascular R25 600
- Joint replacement R28 650
- Functional R8 450
- Major musculoskeletal R17 100

BLOOD TRANSFUSION

> 100% covered

SCANS (IN & OUT OF HOSPITAL)

> 2 scans per family per year

- RT scan
- MRI scan
- CAT scan

DISCHARGE MEDICATION

> 7 days' supply

IMPORTANT NOTES

- Penalties will apply if authorisation is obtained after treatment.
- The claim may not be paid if pre-authorisation is not obtained.
- The Scheme rules supersede the information on this brochure.

WHAT IS THE COST?

PER MAIN MEMBER:	R1 389.00
PER ADULT DEPENDANT:	R1 315.00
PER CHILD DEPENDANT:	R594.00

CONTRIBUTIONS: **FULL DEAL**

SINGLE MEMBER	
	YOU PAY
	R1 389.00

DUAL PARENT FAMILY	
	YOU PAY
	R2 704.00
	R3 298.00
	R3 892.00
	R4 486.00

SINGLE PARENT FAMILY	
	YOU PAY
	R1 983.00
	R2 577.00
	R3 171.00
	R3 765.00

IMPORTANT CONTACT INFORMATION

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

Call Centre and Authorisations: **0861 083 084**

Please Call Me: **082 416 9898**

T: +27 (0) 12 845 0000
F: +27 (0) 86 670 0242
E: info@umvuzohealth.co.za

www.umvuzohealth.co.za