

REGISTRATIONS/ACCREDITATIONS:

Umvuzo Health is registered with the Council for Medical Schemes
Registration number 1597



CONTENT

02 PRIVATE HEALTHCARE
IN SOUTH AFRICA

05 WHO WE ARE

06 SCHEME
MANAGEMENT

07 SCHEME
ADMINISTRATION

08 OUR PRODUCTS

PRIVATE HEALTHCARE IN SOUTH AFRICA

We give members access to everything that rewards their lives. We go the extra mile.

In South Africa, despite initiatives aimed at creating affordable low-cost healthcare, medical schemes have remained inaccessible to a large majority of South Africans.

At Umvuzo Health, we strive to be a medical aid for 'the people,' meaning that we are out to change this dynamic in our country with versatile tailor-made offerings making it accessible to all employer groups.

Offering your employees a medical aid option has great benefits:

- Improved employee wellness and workplace productivity,
- Boosting employee morale,
- Decreased absenteeism,
- Tax rebates,
- Better relations with organised labour, and
- Decreased requests for advances and loans, which are often used for the payment of medical services.

The benefits of offering your employees medical aid are endless. It is finding the correct fit which is vital. Because we spend time understanding the needs of our members and your employees, we are able to offer the right fit for companies and their employees.



We are dedicated to making healthcare more accessible to employer groups and taking each member's hand along this journey.

BACKGROUND

Since Umvuzo Health's inception in 2004, it has always been our aim to reward life. Umvuzo Health is a Nguni word, with its very meaning being 'reward.' We are far more than a medical aid. We were created on the foundation of being a medical aid for the people, with the vision to reward life.

We work closely with our clients, brokers and consultants to maintain close relationships and to keep evolving and innovating with changing needs. Our 95% retention rate is clear evidence that indeed, we keep close ties with our members, their representatives, employers, brokers and all stakeholders to ensure we continue understanding the changing needs of our members.

It is important for us to make healthcare more accessible to companies and their employees. By doing this, a greater work ethic is created with decreased absenteeism creating a positive environment.

OUR SOLUTION

Constant innovation has taken place right from the start for us to stay abreast with the people's needs and the industry trends. With this research we are able to offer the best solution because we understand our market. Our solutions consistently open the doors to private healthcare for individuals who were previously uncovered by a medical aid.

In fact, over 60% of Umvuzo Health's members were previously uncovered by a medical scheme.



We are a restricted Scheme that was registered with the Council for Medical Schemes on 1 July 2004. We are restricted only to employer groups and their respective employees within the following industries and sectors:



MINING SECTOR



FOOD SECTOR



STEEL SECTOR



RETAIL SECTOR



TRANSPORT



HOSPITALITY



EDUCATION

WHO WE ARE

WE ARE A SELF ADMINISTERED SCHEME

We take ultimate responsibility for everything.

We like to keep matters in our own hands and due to the Schemes' restrictive criteria, anti-selection provides corporate employer groups with an opportunity to participate in a responsible medical scheme environment. The risk is well managed through cross-subsidisation which enables us to offer affordable premiums while maintaining the quality of healthcare to our members.



Our increasing membership base bears testimony to a Scheme that is fulfilling a promise. We are known to listen, show humanity and to simply be there for our members. With this unique offering, we walk with confidence together with our members on this journey.

We are all inclusive. Our Board of Trustees consists of a dynamic mix of representatives elected by the members themselves.

WHO MANAGES UMVUZO?

With the aim of being all inclusive, members enjoy 100% representation on the Board of Trustees. This Board of Trustees (BOT) is elected every three years at our Annual General Meeting and is fully represented by members of the Scheme. As the members themselves elect the BOT, a dynamic mix of representatives and employer groups are chosen.

Along with the BOT, an appointed Principal Officer manages the affairs of the Scheme.

We have a hands-on approach.
We take full responsibility for everything.

WHO ADMINISTERS THE SCHEME?

We are self-administered, ultimately taking full responsibility for everything. The great advantage of being self-administered ensures that the administrative duties are performed cost-effectively.

This approach enables us to take full control and to use the bulk of the member's premium towards the benefits of the members.

We make use of the Medstar System, maintained by MIP Holdings, and audited by the Council of Medical Schemes.

The system used integrates the following modules:



ACTIVATOR

Our Activator Option is a hybrid option designed for younger people entering the medical aid market for the first time. It is ideal for single people as well as young couples with healthy lifestyles.

It provides cost-effective healthcare cover at a member's nominated GP of choice. This member-nominated GP must be consulted for all ailments and must be the one to make referrals for other medical interventions, if and when necessary.

This is how we ensure better and more coordinated healthcare outcomes for our members and the option's continued affordability. Members have access to all private hospital groups countrywide, ensuring cover wherever you may be.

STANDARD

Our Standard Option is a comprehensive option with generous benefits on all levels to suit the healthcare needs of the whole family. It is a very cost-effective option that is suitable for middle-income earners and families. At a primary level, members on this option have access to a combination of virtual and face-to-face consultations with healthcare providers. For any further medical interventions that may be required, the primary healthcare provider (GP) that the member consulted, will refer the member accordingly, for the appropriate secondary care.

This is how we ensure an integrated and holistic approach to your health.

ULTRA AFFORDABLE VALUE

The Ultra Affordable Option is our entry benefit option specifically designed for younger people or those entering the medical aid market for the first time. It is ideal for single people as well as young couples with healthy lifestyles.

It offers a good balance of essential health benefits at an affordable price, making it an excellent choice for lower-income earners.

To make this option even more affordable than the ordinary Ultra Affordable option, at the primary level, members on this option have unlimited access to GPs or nurses through the Umvuzo Digital Platform. Through this platform, members will be directed to the most appropriate level of care. This option gives our members access to all private hospitals.

SUPREME

The Supreme Option is a traditional, fee-for-service option.

Members have the freedom to choose any provider of choice for their everyday needs. For all these day-to-day needs members are allocated a generous family benefit and additional benefits are available for secondary benefits. Additionally, members have access to the Umvuzo Digital Platform for virtual consultations with nurses and GPs.

This option is well-suited for those individuals who need generous cover and benefits without compromising their freedom. Members have access to all private hospital groups, ensuring you cover wherever you may be in the country.

ULTRA AFFORDABLE

The Ultra Affordable Option is our entry benefit option specifically designed for younger people or those entering the medical aid market for the first time. It is ideal for single people as well as young couples with healthy lifestyles. It offers a good balance of essential health benefits at an affordable price, making it an excellent choice for lower-income earners.

At a primary level, members on this option have access to a combination of virtual and face-to-face consultations with healthcare providers. For any further medical interventions that may be required, the primary healthcare provider (GP) that the member consulted, will refer the member accordingly.

This is how we ensure an integrated and holistic approach to your health.

EXTREME

The Extreme Option is a traditional, fee-for-service option.

Members have the freedom to choose any provider of choice for their everyday needs. For all these day-to-day needs members are allocated a generous family benefit and additional benefits are available for secondary benefits. Additionally, members have access to the Umvuzo Digital Platform for virtual consultations with nurses and GPs.

This option is well suited for those individuals and families with extensive healthcare needs, looking for comprehensive cover while still enjoying freedom of choice. Members have access to all private hospital groups, ensuring you cover wherever you may be in the country.

With having your best interests at heart, we have tailor-made Options that suit every stage of your life.



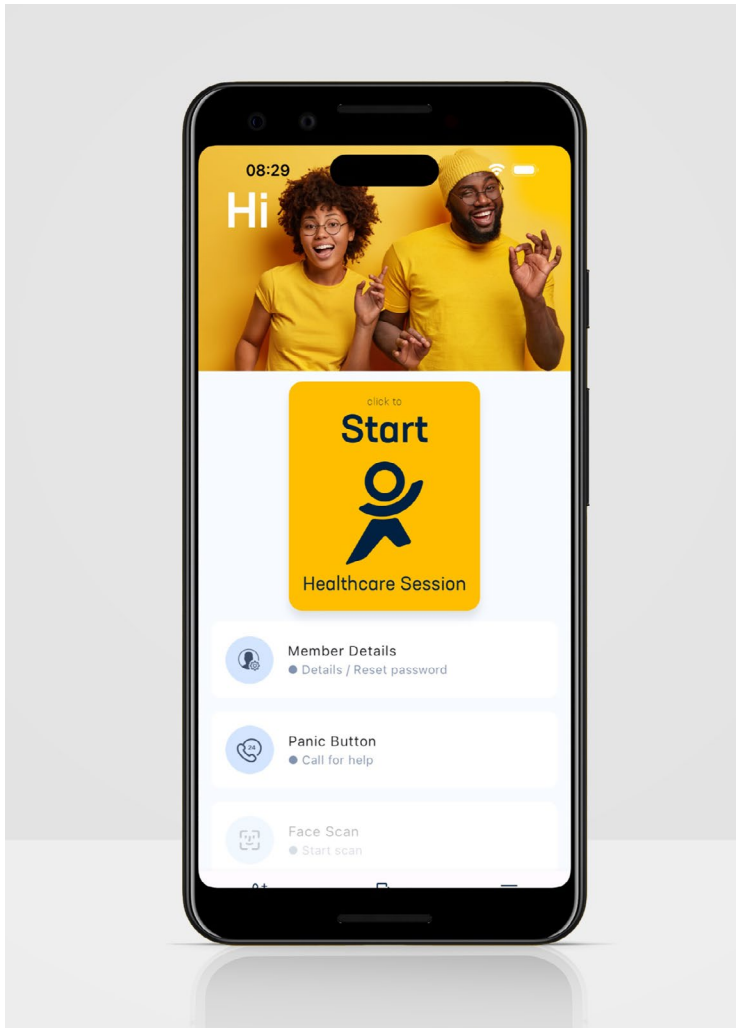


Breaking barriers to healthcare: Starting January 1, 2024, Umvuzo Health opens digital doors for all members, ensuring accessible and convenient medical consultations and treatments from the comfort of your home.

UMVUZO HEALTH DIGITAL PLATFORM

From 1 January 2024, all Umvuzo Health members, regardless of benefit option, will have access to our digital platform, where they can have many of their healthcare needs met.

The availability of digital platforms and new healthcare technologies has made healthcare more accessible and provides an opportunity for us to offer our members several options to access primary healthcare services, specifically medical consultations and/or treatment for minor acute and chronic disease conditions. This is a significant step towards making healthcare even more accessible to you and your registered beneficiaries, especially those who live long distances from the nearest healthcare provider, such as in rural and remote areas. The use of this service is provided data-free if you access it through the Umvuzo Care App.



ONLINE SYMPTOM CHECKER

Imagine you had a tool that you could use when you are not feeling well. This tool would ask you questions about how you are feeling. For example, if you have a fever, a cough or any other symptom. It would be like having a conversation with an online friend. Based on the outcomes of the online symptom checker, you would be advised of the most appropriate level of care you need, ranging from a nurse to a doctor. This is what the Umvuzo Health Online Symptom Checker will assist our members with.

You can choose how to consult with the healthcare provider on the virtual platform:

- Either by SMS or WhatsApp
- By voice call, or
- By video consultation.

This means you and your registered beneficiaries can now access healthcare services from the comfort of your homes, work or wherever else you may be, saving you time and money. Our onsite consultants and our specialised contact centre will offer support for any member who has difficulty accessing the virtual platform, or prefer to be walked through the entire process.

Rest assured that the digital platform will by no means replace face-to-face consultations with healthcare providers.

All members who need an in-person healthcare evaluation will be assisted and an appointment with the nearest or chosen healthcare practitioner will be facilitated.

NEW BENEFIT: YANDISA UMVUZO BENEFIT



We are proud to introduce this new benefit, which is aimed at further reducing out-of-pocket healthcare expenses for our members, due to depletion of benefits or uncovered benefits.

BENEFIT AMOUNT OF UP TO R50 000 PER FAMILY PER YEAR

- This is a benefit that provides enhanced cover for benefits that are not already covered
- Where existing benefits have already been exhausted
- This benefit is subject to Scheme funding guidelines, pre-authorisation and protocols.

ACTIVE DISEASE MANAGEMENT PROGRAMMES

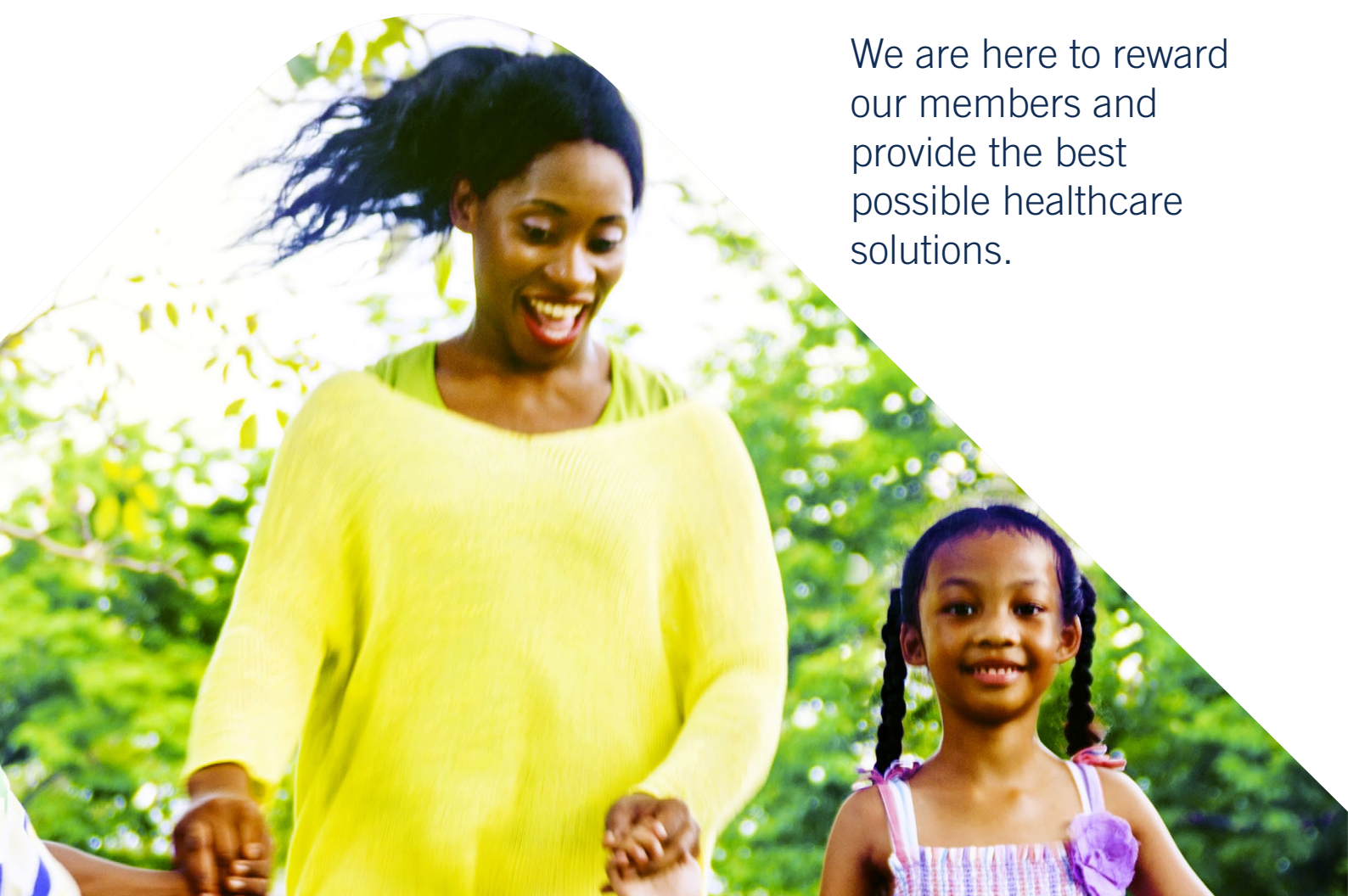
Our Disease Management Programmes are structured treatment plans that aim to help our members diagnosed with chronic conditions better manage their disease, and maintain and improve their quality of life.

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 centres. This is meant to ensure that the individual treatment steps are well coordinated.

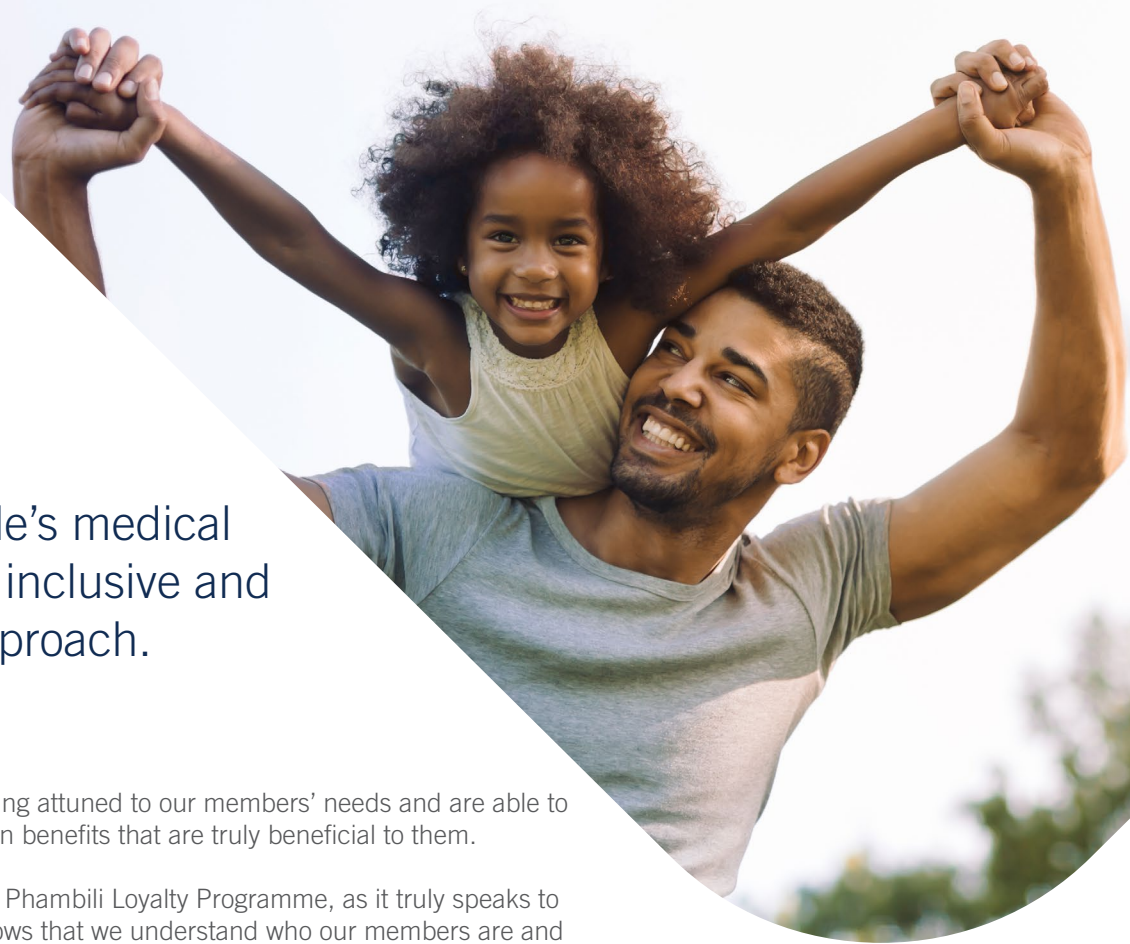
WE COVER TREATMENT AND MEDICATION FOR THE FOLLOWING 26 CDL PMB CONDITIONS:

- 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
- HIV
- 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.



We are here to reward our members and provide the best possible healthcare solutions.



We are the people's medical Scheme. Always inclusive and flexible in our approach.

LOYALTY PROGRAMME

We pride ourselves in being attuned to our members' needs and are able to offer products and add-on benefits that are truly beneficial to them.

We are very proud of our Phambili Loyalty Programme, as it truly speaks to members and clearly shows that we understand who our members are and what their needs are.

Upon joining, all Umvuzo Health main members qualify for the following:

- One medicine bag per family (this has basic medicines that are usually available over the counter, such as paracetamol, bandages, cough medicine, etc.),
- A new medicine bag every 5 years, and
- Free membership to the Mahala Plan for main members only.

MAHALA PLAN BENEFITS



ACCIDENTAL DEATH COVER



FINAL EXPENSES



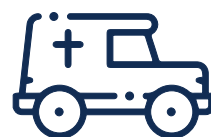
PERMANENT TOTAL DISABLEMENT



TRAVEL ALLOWANCE



MOBILITY COVERAGE



REPARTRIATION COVERAGE

AFTER-SALES SUPPORT

Members are the reason we exist. Because we have taken note of this, every effort and procedure has been put into place to offer the best possible after-sales support.

Our call centre is ready to assist 24 hours a day, seven days a week and 365 days a year. For general enquiries, members are assisted during working hours, and for all authorisations, the call centre is open 24/7/365.

To ensure that phone calls are handled to the best of our ability, all calls are recorded. All member interactions are also recorded on the system to ensure that every interaction is captured. In the event of any queries or complaints, we are able to retrieve the call and do thorough investigations. As part of ongoing quality management and control, we also randomly listen to calls to ensure that our agents maintain the highest standards possible and give effective, quality service to our members.

KEY ACCOUNT MANAGERS

We take special care in selecting Key Account Managers. Being professional, positive, connected, reliable, innovative, attentive and approachable are essential when it comes to the way in which we deal with our members and partners.

The Key Account Managers visit our members at their respective workplaces at predetermined times, and usually with a dedicated person in the Human Resources Department. These dates and times are communicated to the members/employees in advance for them to be able to have an open channel of communication to their Scheme.

Our Key Account Managers have remote access to our systems, which enables them to give on-the-spot feedback on most issues.

With our approachable nature and positive outlook, we can see beyond any obstacle.

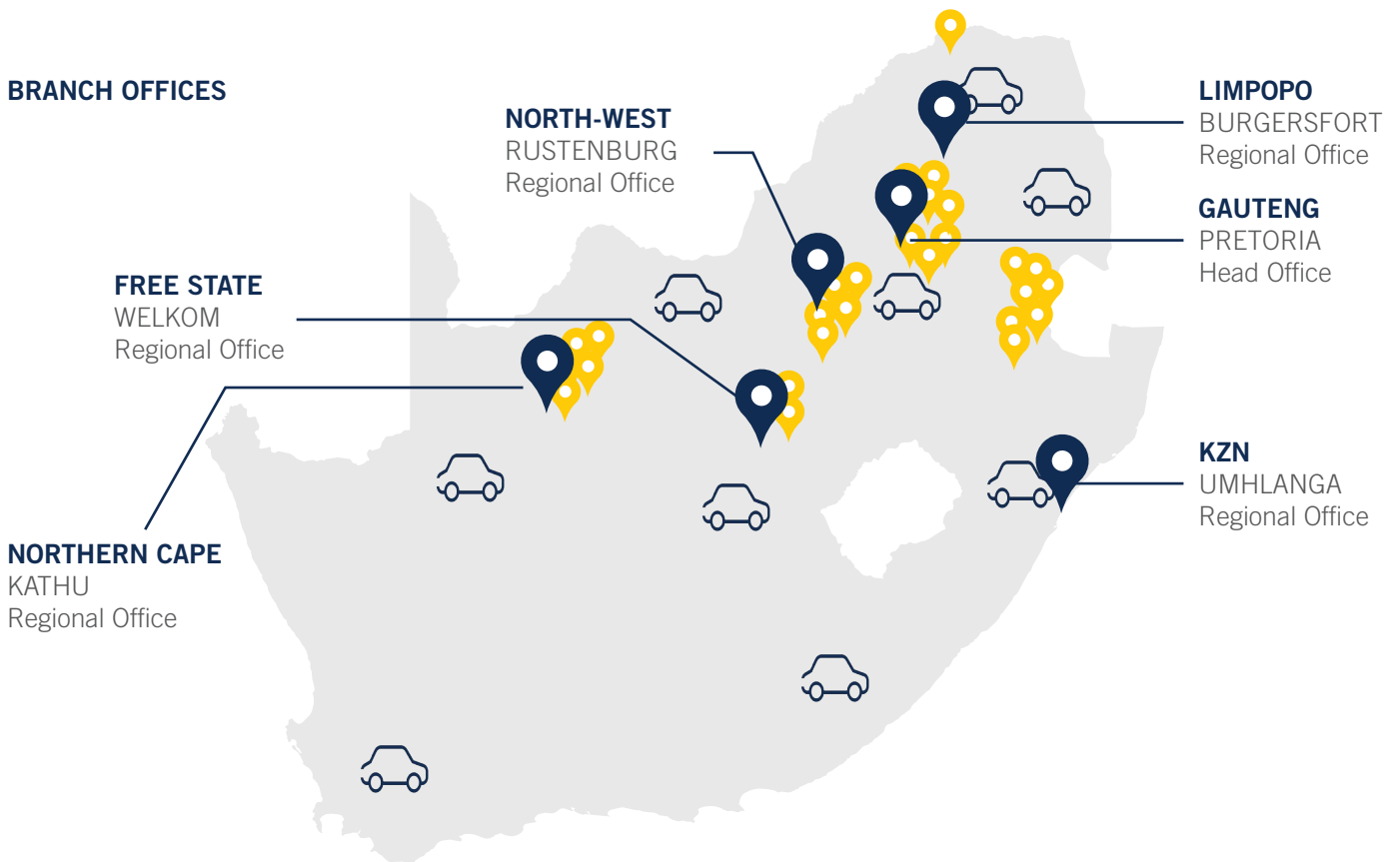


Our national footprint gives members easy access to any queries or on-the-spot assistance.

SATELLITE OFFICES

We like to be close to our members and give hands-on advice. That is why we operate in (almost) every corner of the country. These offices are fully equipped and members who visit them are assisted with any queries they might have. The representatives at these offices have direct access to our Head Office for any additional support.

BRANCH OFFICES



10 Roaming Key Account Managers

26 On-Site Offices

6 Regional Offices

HEAD OFFICE:

Building D, Alenti Office Park,
457 Witherite Road, The Willows,
Pretoria, 0040

Tel: 012 845 0000

Fax: 086 670 0242

Email: info@umvuzohealth.co.za

POSTAL ADDRESS:

PO Box 1463, Faerie Glen, 0043

NORTHERN CAPE:

SIOC Community Development Trust,
Office Park, Block B, Ground Floor,
Cnr Hendrik van Eck and Kameeldoring Road,
Kathu, 8446

RUSTENBURG:

No 2 Heystek Street,
Rustenburg, 0299

LIMPOPO:

Office No 29,
Corner Eddie Sedibe Road and Church Road,
Maphutaditshaba Building,
Burgersfort, 1150

KWAZULU-NATAL:

16 Solstice Road,
Unit 25 Crystal Rock Building,
Umhlanga Rocks, KZN, 4319

FREE STATE:

358 Stateway Street,
Welkom, 9459

www.umvuzohealth.co.za

