

maxima **PLUS**

The ultimate in peace-of-mind cover

Our **maxima PLUS** core benefit bundle gives our established members the peace of mind that most of their healthcare needs will be met.

This comprehensive option does not leave a single thing to chance, especially as our members reach more of a mature age. It features ample in-hospital, chronic, screening, day-to-day cover covered by the core benefit bundle, as well as value-added additional benefits.

In addition, it also features a Medical Savings Account (MSA) for day-to-day expenses, a Threshold benefit and an Out-of-Hospital Expenses Benefit (OHEB).

Please see the following pages for more details on the **maxima PLUS** core benefit bundle and what it offers you.



We let **you be YOU**

2019

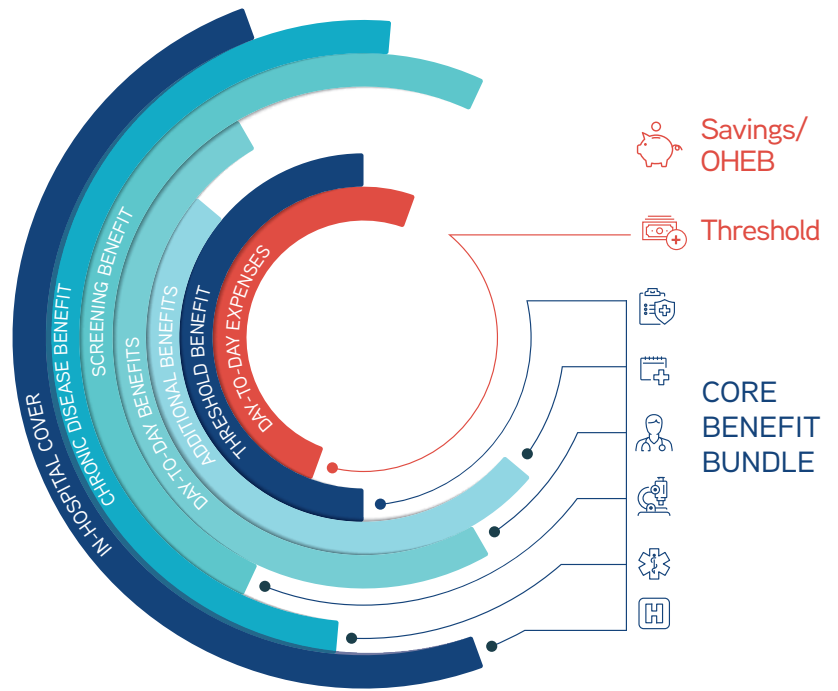
maxima PLUS

Ideal for:

Mature couples and/ or families

What's in it for you?

- Unlimited network GP and specialist visits
- Unlimited private hospitalisation for planned procedures
- Cover for 65 chronic conditions
- One annual free PSA screening for men aged 45 to 69
- One annual colorectal cancer screening per life aged 50 to 75



Cost

Risk Savings Total



Member
R7 894
R460
R8 354



Adult dependant
R6 808
R396
R7 204



Child dependant
R2 466
R144
R2 610

CORE BENEFIT BUNDLE

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 A comprehensive benefit bundle with a threshold benefit

IN-HOSPITAL BENEFIT	
Hospitalisation	No overall annual limit
Maternity	Unlimited
Network GPs and Specialists	Unlimited cover at cost
Non-network GPs	Up to 100% of Fedhealth Rate
Non-network Specialists	Up to 200% of Fedhealth Rate
Other healthcare professionals	Up to 300% of Fedhealth Rate
Oncology	Unlimited
Organ Transplant	Unlimited
Renal Dialysis	Unlimited at Designated Service Provider. 40% co-payment on use of non-DSP.
Specialised Medication	R347 900
In-hospital dentistry for children up to the age of 7	Hospitalisation and anaesthetist covered for children up to the age of 7

CHRONIC DISEASE BENEFIT	
	65 conditions. R15 000 per beneficiary, R28 100 per family subject to comprehensive formulary. Preferred providers: MediRite, Clicks, Dis-Chem, Pharmacy Direct

CORE BENEFIT BUNDLE • Paid from Risk (Continued)

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SCREENING BENEFIT		
Women's health	Cervical cancer screening (Pap smear)	Women, ages 21 to 65. 1 every three years
Children's health	Immunisation Programme (as per state EPI)	Birth to 12 years
Cardiac health	Cholesterol screening (full lipogram)	All lives, aged 20 and older. 1 every five years
General	Flu vaccination	All lives; 1 every year
	HIV finger prick test	All lives; 1 every year
	Breast cancer screening with mammography	All lives, aged 45 and older. 1 every three years
Men's health	Prostate Specific Antigen (PSA)	Men, ages 45 to 69. 1 every year
Over 50s	Pneumococcal vaccination	All lives; aged 65 and older. 1 per lifetime
	Colorectal cancer screening (faecal occult blood test)	All lives; ages 50 to 75. 1 every year
	Bone densitometry	Women; aged 65 and older and Men; aged 70 and older. 1 every two years
Health risk assessments	Wellness screening (BMI, blood pressure, finger prick cholesterol & glucose tests)	All lives; 1 every year
	Preventative screening by contracted wellness network provider (waist-to-hip ratio, body fat %, flexibility, posture & fitness)	All lives; 1 every year

ADDITIONAL BENEFITS	
Fedhealth Nurse Line	A 24-hour toll-free line manned by professional nurses for medical and related queries
Emotional Wellbeing Programme	A 24-hour telephonic support to get members through life's ups and downs, with the option to refer to psychologists
Emergency transport/ response	Emergency transport for members through Europ Assistance
Comprehensive managed care programmes	We offer various programmes for our members with specific healthcare needs
MediTaxi	A transport service for members who need follow-up medical visits following a hospital authorisation
SOS Call Me	A USSD call-back service so members can access Emergency Medical Services (EMS), Fedhealth Nurse Line or MediTaxi
Upgrades within 30 days of a life-changing event	Upgrade to a higher option upon the diagnosis of a dread disease or pregnancy
Child rates for financially dependent children up to the age of 27	Provided they're unmarried and don't earn more than the maximum social pension
Good news for bigger families	Fourth and subsequent children are covered for free

DAY-TO-DAY BENEFIT	
Unlimited Network GP consultations	Unlimited GP visits at Fedhealth Network GPs paid from risk never from savings
Specialised radiology	Unlimited specialised radiology paid from the Core Benefit Bundle if pre-authorised
Fedhealth Baby Maternity Programme	All pregnant members and dependants
Fedhealth Toddler Programme	Access to sound advice for parents with toddlers up to the age of 24 months
Doula benefit	R1 300 per delivery
Postnatal midwifery benefit	4 consultations with a midwife in and out-of-hospital per pregnancy
Infant hearing screening benefit	1 test with an audiologist up to Fedhealth Rate
Paed-IQ	An online parenting hub for expert advice
Take-home medicine benefit	Up to 100% of MPL. Limited to 7 days medication per hospital event
Post-hospitalisation treatment	For up to 30 days after discharge from hospital like physiotherapy, x-rays or pathology i.e. follow-up treatment for a full 30-day period is covered
Trauma treatment at a casualty ward	Unlimited at 100% of Fedhealth Rate
Female contraception benefit	Oral, patches, contraceptive rings, certain injectables as well as IUDs that include Mirena

CORE BENEFIT BUNDLE • Paid from Risk (Continued)

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BENEFITS PAID FROM THRESHOLD	
Annual Threshold Levels	
Principal member	R15 818
Adult	R12 166
Child (Up to a maximum of 3 children)	R4 219
Limits	Limits may apply when calculating certain claims for accumulation to Threshold. These limits also apply for refunds from Threshold
Additional medical services	Limit of R17 400 per family per year for the total of all additional medical services including psychiatrists
Antenatal scans	Two 2D antenatal scans per pregnancy per beneficiary per year
Advanced dentistry	Limit of R7 400 per person per year, up to an overall annual limit of R22 100 per family per year
Appliances, external accessories and orthotics	Limit of R15 500 per family per year with a sub-limit of R4 340 for foot orthotics
Optometry	Limit of R3 340 per person per year, up to an overall annual limit of R10 190 per family per year
Prescribed medication	Limit of R9 900 per person per year, up to an overall annual limit of R19 700 per family per year
Basic dentistry, non-Fedhealth Network GPs, pathology, general radiology	Unlimited at 100% of the Fedhealth Rate
Fedhealth network specialists	Unlimited at cost. 10% co-payment if GP referral not obtained
Non-Fedhealth network specialists	Unlimited at 100% of Fedhealth Rate. 10% co-payment if GP referral not obtained
Alternative healthcare, over-the-counter medication	Does not accumulate to or pay from threshold

OHEB AND SAVINGS

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DAY-TO-DAY BENEFIT	
Available for day-to-day expenses	ANNUAL SAVINGS AND OHEB
Member	R14 243
Adult Dependant	R11 047
Child Dependant (Up to a maximum of 3 children)	R3 662

IN-HOSPITAL BENEFIT

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BENEFIT	ALL LIMITS ARE PER FAMILY PER YEAR UNLESS OTHERWISE SPECIFIED
Overall annual limit	Unlimited at negotiated tariff
Healthcare Professional Tariff in hospital (HPT)	
Fedhealth Network GPs and Specialists	Covered at cost
Non-Fedhealth Network GPs	Covered at 100% of Fedhealth Rate
Non-Fedhealth Network Specialists	Covered at 200% of Fedhealth Rate
Other Healthcare Professionals	Covered at 300% of Fedhealth Rate
Prescribed Minimum Benefits (PMB): 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. Should you choose not to make use of network providers, the Scheme will only refund treatment at 100% of the Fedhealth Rate for non-network GPs & 200% of the Fedhealth Rate for non-network specialists. You will have a co-payment should the healthcare professional charge more
Hospitalisation costs: accommodation in a general ward, high care ward and intensive care unit, theatre fees, medicine, material and hospital apparatus	Unlimited at negotiated tariff

*Must use ICPS or JointCare for non-PMB hip and knee joint replacements. Non-use of Contracted Provider (CP) will result in co-payment.

**No benefit unless Conservative Back and Neck Rehabilitation Programme has been completed.

†Preferred provider is ICON - Independent Clinical Oncology Network.

IN-HOSPITAL (Continued)

Co-payments per event applicable on the hospital/ facility bill only	
Arthroscopic procedures - other	No co-payment
Balloon sinuplasty	
Colonoscopy, upper GI endoscopy	
Arthroscopic procedures: hip	
Arthroscopic procedures: wrist	
Joint replacements	
Single hip and knee replacements with CP*	
Single hip and knee replacements - voluntary use of non-CP*	
Involuntary use of non-CP* for single hip and knee replacements	
Other joint replacements	
Laparoscopic hernia repairs (bilateral inguinal, repeated inguinal hernias & Nissen/ Toupey hernia repairs only)	
Laparoscopic procedures	
Rhizotomies and facet pain blocks (limited to 1 of either procedure per beneficiary per year)	
Spinal surgery**	
Surgical extraction of impacted wisdom teeth	
Additional medical services (dietetics, occupational therapy and speech therapy) and physical therapy , (physiotherapy)	Unlimited subject to medical practitioner referral
Alternatives to hospitalisation: Nursing services, private nurse practitioners & nursing agencies Sub-acute facilities, physical rehabilitation facilities	Unlimited at negotiated tariff
Appliances, external accessories and orthotics	Unlimited at cost
Blood, blood equivalents and blood products	Unlimited
Immune deficiency related to HIV infection	Unlimited (see HPT)
Maxillo-facial surgery Surgical extraction of impacted wisdom teeth	Unlimited, subject to approval (see HPT)
In-hospital dentistry benefit for children under 7	We cover the hospital and anaesthetist. Dentist will be paid from Day-to-Day Benefits
Oncology: oncologist consultations, visits, treatment and materials for chemotherapy and radiotherapy, approved medication, radiology and pathology	Unlimited at preferred provider† and subject to level 3 treatment protocols
Reimbursement rate if you don't use ICON	Up to 100% of Fedhealth Rate
Specialised Medication	R347 900 at cost
Organ transplant including immunosuppression medication Corneal graft	Unlimited (see HPT) R20 700 per beneficiary
Pathology, radiology (general)	Unlimited at 100% of Fedhealth Rate
Prostheses	
Internal	Various sub-limits apply
Aorta Stent Grafts	R58 500
Bone lengthening devices	See combined benefit limit for all unlisted internal prosthesis*
Cardiac pacemakers	R58 500
Cardiac stents	R50 100
Cardiac valves	R44 500
Carotid Stents	See combined benefit limit for all unlisted internal prosthesis*
Detachable platinum coils	R50 700
Elbow replacement	R44 500
Embolic Protection Devices	See combined benefit limit for all unlisted internal prosthesis*
Hip replacement	R44 500
Intraocular lenses (per lens)	R3 200
Knee replacement	R44 500
Other approved spinal implantable devices	See combined benefit limit for all unlisted internal prosthesis*
Peripheral Arterial Stent Grafts	See combined benefit limit for all unlisted internal prosthesis*
Shoulder replacement	R44 500
Spinal plates and screws	See combined benefit limit for all unlisted internal prosthesis*
Total ankle replacement	See combined benefit limit for all unlisted internal prosthesis*
*Combined benefit limit for all unlisted internal prosthesis	*R36 100
External	R21 800 at cost
Psychiatric Services: accommodation in a general ward, procedures, ECT, materials and hospital equipment, consultations and visits, medicines and injection material	R40 300 (See HPT)
Renal dialysis (chronic): consultations, visits, all services, materials and medicines associated with the cost of renal dialysis	Unlimited at 100% of Fedhealth Rate at Designated Service Provider. 40% co-payment on use of non-DSP.
Specialised Medication (e.g. biologicals) Benefit (oncology & non-oncology)	R347 900 at cost
Specialised radiology	Unlimited at Fedhealth Rate
Spinal surgery	No benefit unless utilisation of back & neck rehabilitation programme has been completed
Terminal care benefit	R31 000 at Fedhealth Rate

Chronic Disease Benefit

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Limit	R15 000 per beneficiary, subject to an overall limit of R28 100 per family per year
IN-BENEFIT	
Conditions covered	65 conditions. See lists below
Formulary	Comprehensive formulary
Preferred Provider	MediRite, Dis-Chem, Clicks & Pharmacy Direct
OUT-OF-BENEFIT (See CDL list below)	
Formulary	Comprehensive formulary
Preferred Provider	MediRite, Dis-Chem, Clicks & Pharmacy Direct
HIV/AIDS medicine benefit including treatment for mother-to-child-transmission, rape & post-exposure prophylaxis	
Limit	Unlimited

CHRONIC DISEASE LIST (CDL)

CDL	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
Additional conditions on maxima PLUS (CDL as above + the following 40)	Alzheimer's Disease, Angina, Ankylosing Spondylitis, Anorexia Nervosa, Attention Deficit Disorder (in children only), Barrett's Oesophagus, Benign Prostatic Hyperplasia, Bulimia Nervosa, Conn's Syndrome, Cushing's Syndrome, Cystic Fibrosis, Deep Vein Thrombosis, Depression, Dermatomyositis, Gastro-Oesophageal Reflux Disease, Generalised Anxiety Disorder, Gout, Hypoparathyroidism, Menopause, Motor Neuron Disease, Muscular Dystrophy, Myasthenia Gravis, Narcolepsy, Obsessive Compulsive Disorder, Osteoporosis, Paget's Disease of the Bone, Pancreatic Disease, Panic Disorder, Paraplegia/ Quadriplegia (associated medicine), Pemphigus, Polyarteritis Nodosa, Post-Traumatic Stress Syndrome, Pulmonary Interstitial Fibrosis, Scleroderma, Stroke, Thromboangitis Obliterans, Thrombocytopenic Purpura, Tourette's Syndrome, Valvular Heart Disease, Zollinger-Ellison Syndrome

Non-compliance with formulary requirements will attract a co-payment of 40%. All medicine claims are subject to the Medicine Price List (MPL), a generic reference price list, and the maximum negotiated dispensing fee. Fedhealth does not make use of a DSP network, only a preferred provider network.

The preferred provider ensures price certainty for members when obtaining medication. Members may use any pharmacy, however if a dispensing fee in excess of 25%/ R25 is charged, the member will incur a co-payment.

Screening Benefit

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Women's Health		
Cervical cancer screening (Pap smear)	Women; ages 21 to 65	1 every 3 years
Men's Health		
Prostate Specific Antigen (PSA)	Men; ages 45 to 69	1 every year
Children's Health		
Immunisation Programme (as per State EPI)	Birth to 12 years	Various
Cardiac Health		
Cholesterol screening (full lipogram)	All lives; aged 20 and older	1 every 5 years
Over 50's		
Pneumococcal vaccination	All lives; aged 65 and older	1 per lifetime
Colorectal cancer screening (faecal occult blood test)	All lives; ages 50 to 75	1 every year
Bone densitometry	Women; aged 65 and older and Men; aged 70 and older.	1 every two years
General		
Breast cancer screening with mammography	All lives; aged 45 and older	1 every 3 years
Flu vaccination	All lives	1 every year
HIV finger prick test by a contracted wellness network provider	All lives	1 every year
Health risk assessments		
Wellness screening (BMI, blood pressure, finger prick cholesterol & glucose tests)	All lives	1 every year
Preventative screening by contracted wellness network provider (waist-to-hip ratio, body fat %, flexibility, posture & fitness)	All lives	1 every year

Additional Benefits

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Fedhealth Nurse Line	A 24-hour toll-free line manned by professional nurses for medical and related queries
Emotional Wellbeing programme	24-hour telephonic support to get members through life's ups and downs, with the option to refer to psychologists
Emergency transport/ response	Emergency transport for members through Europ Assistance
MediTaxi	A transport service for members who need follow-up medical visits following a hospital authorisation
SOS Call Me	A USSD call-back service so members can access Emergency Medical Services (EMS), Fedhealth Nurse Line or MediTaxi
Comprehensive managed care programmes	
Aid for AIDS	Support programme for members living with HIV/Aids
Conservative Back & Neck Rehabilitation Programme	Helping members address back and neck pain to avoid spinal surgery
Smoking Cessation Programme	All members can sign up free of charge for the GoSmokeFree service once a year to kick the habit
Weight Management Programme	12-week programme designed to help qualifying members with a high BMI and waist circumference lose weight
Oncology Disease Management	Comprehensive care for cancer patients
Mental Health Programme	Support for members with substance-abuse or mental health issues like depression or bipolar mood disorder
Upgrades within 30 days of a life-changing event	Upgrade to a higher option upon the diagnosis of a dread disease or a pregnancy for example
Child rates for financially dependent children up to the age of 27	We charge child rates for children up to 27 who are financially dependent on their parents, provided they're unmarried and don't earn more than the maximum social pension
Good news for bigger families	Fourth and subsequent children are covered for free

Day-to-day Benefits • Paid from Risk

Unlimited Network GP consultations	Unlimited GP visits at Fedhealth Network GPs
Specialised radiology benefit Out-of-hospital	Unlimited at Fedhealth Rate
Fedhealth Baby Maternity Programme	Beautiful baby bag with samples and expert parenting advice
Fedhealth Toddler Programme	Access to sound advice for parents with toddlers up to the age of 24 months
Doula benefit	R1 300 per delivery
Postnatal midwifery benefit	4 consultations with a midwife in and out-of-hospital per pregnancy
Infant hearing screening benefit	1 test with an audiologist up to Fedhealth Rate
Paed-IQ	An online parenting hub for expert advice
Take-home medicine benefit	7-days of paid for take-home medication after discharge from hospital - provided the medication is dispensed by the hospital and reflects on the original hospital account
Post-hospitalisation treatment benefit	For up to 30 days after discharge from hospital like physiotherapy, x-rays or pathology i.e. follow-up treatment for a full day 30-day period is covered
Trauma treatment at a casualty ward	Unlimited at 100% of Fedhealth Rate
Female contraception benefit	Oral, patches, contraceptive rings, certain injectables as well as IUDs that include Mirena

Day-to-day Benefit

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BENEFIT	LIMIT PER FAMILY PER YEAR
Tariff	Up to 100% of FR
Co-payments in Threshold	No co-payment
Appliances, external accessories and orthotics: Hearing aids, wheelchairs, etc.	R15 500 per family per year before & after threshold. Subject to Savings, OHEB & threshold. (R4 340 sub-limit per beneficiary for foot orthotics)
Alternative healthcare: Acupuncture, homeopathy, naturopathy, osteopathy and phytotherapy (including prescribed medication)	Subject to Savings & OHEB. Does not accumulate to or pay from Threshold
Additional medical services: Audiology, dietetics, genetic counselling, hearing aid acoustics, occupational therapy, orthoptics, podiatry, private nursing*, psychologists, social workers, speech therapy; Physical therapy (Biokinetics, Chiropractics and Physiotherapy)	R17 400 per family per year before and after Threshold. Subject to Savings, OHEB and Threshold
Dentistry Advanced: inlays, crowns, bridges, mounted study models, metal base partial dentures, osseo-integrated implants, orthognathic surgery, oral surgery, orthodontic treatment, periodontists, prosthodontists and dental technicians	R7 400 per beneficiary per year, R22 100 per family per year before and after Threshold. Subject to Savings, OHEB and Threshold
Dentistry (Basic)	Subject to Savings, OHEB and Threshold. Unlimited once Threshold is reached
General Practitioners: Limited to 2 mental health consultations per beneficiary per year	
Fedhealth Network GPs	Subject to OHEB then unlimited from Risk. Once your OHEB is depleted, Fedhealth gives unlimited cover for GP consultations as long as you use a GP who is on the Fedhealth Network
Non-Fedhealth Network GPs	Subject to Savings, OHEB and Threshold. Unlimited accumulation to and refund from Threshold at FR
Maternity benefit	Limited to 2 x 2D antenatal scans per pregnancy before and after Threshold. Subject to Savings, OHEB and Threshold
Optometry	R3 340 per beneficiary per year, R10 190 per family per year before and after Threshold. Subject to Savings, OHEB and Threshold
Over-the-counter medication	Subject to Savings only. Does not accumulate to or pay from Threshold
Pathology & Radiology	Subject to Savings, OHEB and Threshold. Unlimited once Threshold is reached
Physical therapy: Chiropractics, biokinetics & physiotherapy	Subject to Savings, OHEB and Threshold. Unlimited once Threshold is reached
Prescribed medication	R9 900 per beneficiary per year, R19 700 per family per year before and after Threshold. Subject to Savings, OHEB and Threshold
Radiology Specialised	Paid from the Core Benefit Bundle if pre-authorized
Specialists excluding Psychiatrists: Network GP referral required for consultations (Including PMB conditions to be paid from risk benefits)	
Fedhealth Network Specialists	Subject to Savings, OHEB and accumulation at cost to Threshold. Unlimited at cost once Threshold is reached. 10% co-payment if GP referral is not obtained
Non-Fedhealth Network Specialists	Subject to Savings, OHEB and Threshold. Accumulation to and refund from Threshold at Fedhealth Rate only. 10% co-payment if GP referral is not obtained
Specialists: Psychiatrists: Network GP referral required for consultations (Including PMB conditions to be paid from risk benefits)	
Fedhealth Network Psychiatrists	Subject to Additional Medical Services limit of R17 400 per family per year before and after threshold. Subject to Savings, OHEB and accumulation to & refund from threshold at cost. 10% co-payment if GP referral is not obtained
Non-Fedhealth Network Psychiatrists	Subject to Additional Medical Services limit of R17 400 per family per year before & after threshold. Subject to Savings, OHEB and accumulation to & refund from threshold at the Fedhealth Rate. 10% co-payment if GP referral is not obtained
Threshold Benefit	The Threshold Benefit pays for certain day-to-day expenses once your day-to-day benefits have been depleted and claims have accumulated up to the required level. The threshold level is reached through the accumulation of claims paid from member's day-to-day benefits and the member's own pocket through the year at the Fedhealth Rate. Certain benefit limits do not accumulate to Threshold. Where limits do accumulate, expenses will only accumulate up to this limit and this limit will also apply to refunds from Threshold. A 10% co-payment will apply to all claims paid from the Threshold Benefit. No co-payment will apply to GP and Specialist consultations in-network.

FR - Fedhealth Rate | MPL - Medicine Price List

*Private nursing that falls outside the Alternatives to Hospitalisation Benefit.