

# 2020

member how to guide

We let you be **YOU.**

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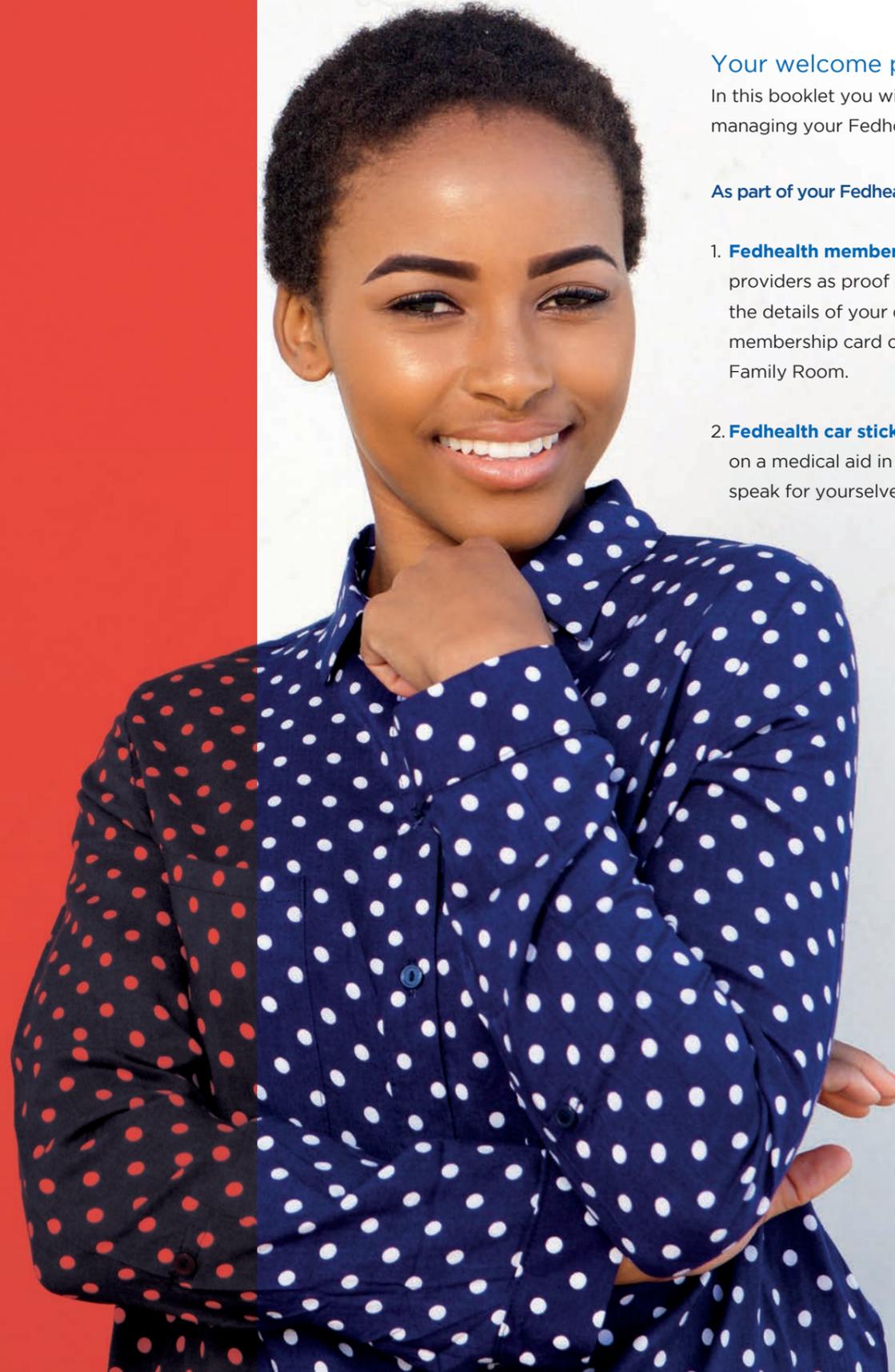
## 1. Getting you started

### Your welcome pack

In this booklet you will find everything you need to know about managing your Fedhealth membership.

#### As part of your Fedhealth welcome pack you have received:

1. **Fedhealth membership card.** Show this card to your healthcare providers as proof of your Fedhealth membership. It also displays the details of your dependants. You can also access an electronic membership card on our FedChat mobile app and the Fedhealth Family Room.
2. **Fedhealth car stickers,** to show medical professionals that you are on a medical aid in the event where you or your passengers cannot speak for yourselves.



## 2. Getting in touch with us

Over the course of your Fedhealth membership, you might need to get hold of the Scheme. Here are the various service channels you need to be aware of and when to use them.

### Fedhealth Family Room

Register on the Fedhealth Family Room, our online member portal, to help you:

- manage every aspect of your membership like submitting claims and obtaining pre-authorisations
- join a host of communities based on your interests
- earn rewards
- stay up to date on the latest Scheme news
- access the **LiveChat** functionality to have your medical aid questions answered during office hours without the need for phone calls. You can also get hospital and chronic disease authorisations using **LiveChat**.

Access the Fedhealth Family Room via [fedhealth.co.za](http://fedhealth.co.za) and register by following all the prompts to enjoy all the great features.

### FedChat app

This dedicated Instant Messenger channel offers you the convenience of being able to communicate with Fedhealth service consultants during office hours, without the cost of a phone call or SMS. FedChat uses the same data you use for email and Internet browsing.

The app also contains an electronic format of your membership card that can be shared with your service provider and dependants when they need proof of their membership.

This app can be downloaded on your smartphone's App stores, just search for **FedChat**.



See page 24 of this guide for important Fedhealth contact numbers.

## 3. Paying your monthly contribution

### Paying for your medical aid

You pay your contributions to us each month. Your contribution must be paid by the third (3rd) day of each month. If we do not receive payment by the third day of the month, we will suspend your cover until we receive the contribution payment.

### Our bank details

**Account name:** Fedhealth Medical Scheme

**Bank:** Nedbank

**Branch code:** 19-84-05

**Account number:** 1984 563 009

### Payment of contributions

You can pay your monthly contributions by using one of the following methods:

- **Debit order:** the debit order will be deducted based on the date you selected upon joining the Scheme
- **EFT:** must be paid by the third day of the month
- **Paid by your employer** (depending on the employee benefits you enjoy)

### Arrears billing

Depending on what you selected when you joined Fedhealth, we can bill contributions in arrears. This means that the contribution for the current month is paid over at the end of the current month.

### Advanced billing

Depending on what you selected when you joined Fedhealth, we can bill contributions in advance. This means that the contribution for the current month is paid in the beginning of the month.



Please use your membership number as reference when making a payment.

# 4. Activating your MediVault and transferring funds into the Wallet

If you are on one of the flexi**FED** options, you have a choice when you start paying for your day-to-day medical benefits.

**How to activate your MediVault and transfer funds into your Wallet**

There are various options available to you:

## 1. USSD

Use our free USSD line to activate your MediVault and transfer funds into your Wallet. This is an easy-to-use tool for any mobile phone device (not just smartphones). Below are the steps:

- Dial \*134\*999\*membershipnumber#
- Follow the prompts on the screen
- Have your bank details close by: depending on your membership profile, we might request the information from you.
- Please note: the USSD line might time out because of network connectivity. The system will remember your transactions up to that point, which will allow you to continue where you've left off.
- Once you've activated the MediVault, you can proceed to transfer funds into your Wallet.

If you've already activated your MediVault, follow these steps to transfer funds into your Wallet:

- Dial \*134\*999\*membershipnumber#
- Follow the prompts on the screen
- You can transfer amounts:
  - In increments of R600, or
  - The entire MediVault amount at once, or
  - Transfer what's remaining in your MediVault.

- You can action multiple transfers, all depending on your day-to-day medical needs.

To make it easier, save the USSD code with your member number as a contact on your phone.

These transactions will be active immediately without additional transactions needed, so you can get your medication at the pharmacy without hassle.

## 2. Fedhealth Family Room

Login to the Fedhealth Family Room, go to the MediVault page and follow the prompts on the screen.

The Fedhealth Family Room will also provide you with a transaction history as well as an instalment calculator to assist you with the decision on the amount you need to transfer. These transactions will be active immediately without additional transactions needed.

## 3. Fedhealth Customer Contact Centre

Contact us, and one of our agents will take you through the process of activating your MediVault and transferring funds to your Wallet.

## 4. Email

Download the MediVault Application Form on the Fedhealth website and email it to [medivault@fedhealth.co.za](mailto:medivault@fedhealth.co.za). Please note it generally takes 48 hours for this transaction to be completed.

**Please note:** Your employer may have a specific set of rules in terms of the amount you can transfer and when it may be transferred. Please check with your Human Resources department to determine what your company's specific rules are with regards to the MediVault and Wallet.

### How is the MediVault instalment paid back?

The payment must be facilitated via a debit order and should not be paid as part of your monthly contribution payment.

**The MediVault instalment must be paid into the following bank account:**

**Account name:** Fedhealth Medical Scheme PMSA

**Bank:** Nedbank

**Account number:** 1029 279 489

**Branch code:** 19-87-65

**Reference number:** <MediVault and your membership number>



If your employer pays for your MediVault instalment, your HR department will facilitate the payment.

## 5. Finding network providers in your area

On certain plans, you need to use Fedhealth Network Providers. We use the following networks:

- Option specific GP Networks
- Option specific Hospital Networks
- Fedhealth Specialist Network

It's helpful to familiarise yourself with the various providers in your area. To do this, access the 'Fedhealth Locator' on the Fedhealth website or the Fedhealth Family Room, which will provide you with a list of Fedhealth Network Providers.

## 6. Nominating your preferred GP

On the following Fedhealth options you enjoy unlimited nominated network GP benefits once you have reached your option's respective Threshold levels: flexiFED 1; flexiFED 1<sup>Elect</sup>, flexiFED 2, flexiFED 2<sup>GRID</sup>, flexiFED 2<sup>Elect</sup>, flexiFED 3, flexiFED 3<sup>GRID</sup> and flexiFED 3<sup>Elect</sup>. On flexiFED 4<sup>GRID</sup> and flexiFED 4<sup>Elect</sup> you enjoy unlimited nominated network GP consultations from day one

You also need to nominate a GP on myFED.

What you need to know about nominating a preferred GP:

- You need to nominate a GP on your option's respective GP Network
- Each beneficiary on your option can have a different nominated GP
- You can nominate two GPs per beneficiary

How do you nominate your GP?

### 1. Fedhealth Family Room

- Login to the Fedhealth Family Room
- Go to the option 'Manage my membership'
- Select 'Network Provider'
- Follow the prompts as provided on the screen

### 2. FedChat or LiveChat

You can start a conversation with one of our service agents via the FedChat app or LiveChat (accessible from the website).

### 3. Phone the Fedhealth Customer Contact Centre

Contact us on **0860 002 153** with the GP's name and practice number (if you have it with you), and an agent will load the required nomination on your membership.

### 4. Email

Send an email to [member@fedhealth.co.za](mailto:member@fedhealth.co.za) with the GP's name and practice number (if you have it with you). Also indicate for which dependants this GP must be nominated. Remember to check if your GP is in our GP network.

Don't know if your GP is on our network?

Access our 'Provider Locator' tool on the Fedhealth website as well as the Fedhealth Family Room to check if your GP is on our network or not. You can also find other GPs who are on our network in the area you live in.



**Specialist referral number**  
When visiting a specialist for a PMB condition a specialist referral number is required. This number must be obtained by your referring GP.

## 7. How to claim

The majority of your claims will most likely be submitted by your healthcare providers. But when you do need to claim, you can do so in the following ways:

- Login to the Family Room and submit your claim
- Use LiveChat accessible from the Fedhealth Family Room
- Use the FedChat app
- Email [claims@fedhealth.co.za](mailto:claims@fedhealth.co.za)

The following information needs to be included on all claims to ensure accurate processing:

1. Your Fedhealth membership number
2. The provider details (practice number)
3. The patient's name
4. The date of treatment
5. The relevant treatment codes (NAPPI or tariff codes)
6. The relevant diagnostic codes (ICD-10 code)
7. Proof of payment if the claim needs to be paid back to you

Monthly statements

Members will receive a comprehensive statement from Fedhealth once a month.

The claims statement reflects the following information:

- Member beneficiary status
- Benefit summary
- Member's portion and provider claims processed
- Claims refunded to member
- Savings account details
- For flexiFED members: MediVault account details
- Information section which includes important messages from Fedhealth



When submitting a claim, please ensure that your copy is clear and easy to read. We cannot complete the claim process if any of this is unclear or not available.



## 8. How to get authorisation for a hospital event

If you or one of your dependants needs to be admitted to hospital, you need to get pre-authorisation. We need the following information to process an authorisation:

- Are you being admitted as an in-patient or an out-patient?
- Date of admission
- Date of the procedure
- Date of discharge
- Name of the hospital and/ or its practice number (if you have it)
- Name and practice number of the treating provider
- Diagnostic codes (ICD-10 code)
- Procedure/ tariff codes

Your healthcare professional will provide you with all of the required information.

- You need to obtain an authorisation at least **48 hours before** your procedure is required.
- **In an emergency, you must get an authorisation number within two working days after** going to hospital, or you'll have to pay a penalty of R1 000.

If you cannot contact the Authorisation Centre yourself, your doctor, family member or the hospital can contact us on your behalf.

You can request authorisation by:

- Calling the Fedhealth Customer Contact Centre
- Submitting the request on the Fedhealth Family Room
- Or via email: [authorisations@fedhealth.co.za](mailto:authorisations@fedhealth.co.za)

## 9. How to access post-hospitalisation treatment paid from Risk

Post-hospitalisation treatment in the 30 days after your hospital visit is paid from your Risk benefit, however you will need an additional authorisation number.

This treatment is subject to protocols, and the day of your discharge is counted as day 1 of the 30 days of the benefit. Only treatment as a result of a hospital event is covered under this benefit and must be related to your original diagnosis.

Call **0860 002 153**, email us at [authorisations@fedhealth.co.za](mailto:authorisations@fedhealth.co.za) or via the Fedhealth Family Room. Please provide us with the following information:

- The type of treatment you require, e.g. physiotherapy, occupational therapy, speech therapy, general radiology, pathology tests and dietetics
- The duration of the treatment you require
- The treating provider's practice number

## 10. Getting authorisation for MRI and CT scans whether they're done in-hospital or not

Fedhealth covers specialised radiology like MRI and CT scans from Risk whether they are performed in-hospital or not. Co-payments apply depending on your option, but you have to obtain authorisation first to have this paid from Risk.

Call **0860 002 153**, email us at [authorisations@fedhealth.co.za](mailto:authorisations@fedhealth.co.za) or get in touch via LiveChat.

# 11. Getting authorisation for a visit to the casualty ward

## Claims will be paid from Risk if:

- You visit the trauma unit of a clinic or hospital and are admitted into hospital immediately for further treatment.
- You visit the trauma unit of a clinic or hospital for emergency treatment for a fracture, for example, and are not immediately admitted into hospital.

## A co-payment will apply to all non-PMB visits to the trauma unit of a clinic or hospital if you're not admitted to hospital directly, dependent on your option.

- Authorisation for the casualty visit must be obtained within **two working days after** the visit, to have the claim paid from your Risk benefit and to avoid a larger co-payment.

- **In an emergency, you must get an authorisation number from us within two working days after** going to hospital, or you will have to pay a penalty of R1 000.

If you cannot contact the Authorisation Centre yourself, your doctor, a family member or the hospital can contact us on your behalf. The same information as listed on page 10 (hospital authorisation) would be required.

# 12. How to register on the Fedhealth Baby Programme

Fedhealth offers a great baby programme for moms-to-be who are members of the Scheme. To join the Fedhealth Baby Programme, call us on **081 116 016** or email [info@babyhealth.co.za](mailto:info@babyhealth.co.za). You can join from 12 weeks into your pregnancy.

We also offer great content regarding your pregnancy and baby on the Fedhealth Family Room, so join our Baby Bumps community on this online member portal.

**Please note:** Once your new bundle of joy has arrived, you only have 30 days to add your baby to your Fedhealth membership. This provides the baby with cover from their date of birth. If the request to add the baby follows after 30 days, then underwriting may be applied to your newborn.

To add your baby, please complete the Newborn Registration Form which can be found on the Fedhealth website.

# 13. How to apply for the chronic disease benefit

## To claim for medication under this benefit, your condition:

- Must appear in the list of chronic conditions, and
- Must meet a set of defined criteria to qualify for the benefit (referred to as clinical entry criteria). If you need information on the criteria, please contact us.

## STEP 1: Collect the information needed to apply

You'll need the following information to apply.

If you need help gathering this information, please contact us.

- Membership number
- Dependant code
- ICD10 code of your chronic condition
- Drug name, strength and quantity
- Prescribing doctor's practice number
- Diagnostic test results, e.g. Total Cholesterol, LDL, HDL, glucose tests, thyroid (depending on your condition).

## STEP 2: Apply in one of the following ways

1. **Telephone:** Call Chronic Medicine Management (CMM) between 08h30 and 17h00, Monday to Thursday and 09h00 to 17h00 on Fridays. Phone **0860 002 153**.
2. **Fedhealth Family Room:** Go to [www.fedhealth.co.za](http://www.fedhealth.co.za) to access the Fedhealth Family Room. Simply click on Health > Request Chronic Pre-authorisation, and complete the form.
3. **Ask your doctor or pharmacist to apply on your behalf.** They can do an online application or contact our Provider Call Centre on **0861 112 666**.



## STEP 3: Get a response right away

We will reply to your application right away. If we need more information, we will let you, your doctor or your pharmacist know exactly what information to give to us. If we don't approve the application, we will give you the reasons why, and you will have the opportunity to ask us to review our decision.

## STEP 4: Get your medicine access card

If we approve your application, we'll give you a medicine access card. Your medicine access card will record the medical condition for which we've approved treatment.



### Treatment guidelines

The Scheme has set up treatment guidelines for the chronic conditions on the Chronic Disease List (CDL) to ensure that you have access to appropriate treatment for your condition. You will receive details of the treatment guidelines with your letter from CMM.

### If there is a co-payment on your medicine

If the medicine your doctor has prescribed has a co-payment, because it costs more than the ceiling price given in the Medicine Price List, ask your pharmacist to help you to change it to a generic medicine we cover in full. If the medicine has a co-payment because it's not in the formulary, discuss a possible alternative with your prescribing doctor.

### We will approve a chronic condition, not individual chronic medications

Thanks to our Disease Authorisation process, you can apply for approval of a chronic condition, as opposed to a single chronic medication. The Scheme will approve an entire list of medication for your specific

condition (known as a basket of medicine). So, if your doctor should ever change your medication, you will most likely already be approved for it – provided it's in the basket.

You can view the approved medication for your condition in the Fedhealth Family Room. Simply click on Health > My authorisations > Select a dependant > Track authorisation type > Submit. When you need to change or add a new medicine for your condition, you can do this quickly and easily at your pharmacy with a new prescription, without having to contact Fedhealth at all.

To check what medicine is available to you in your condition's basket, call Chronic Medicine Management (CMM) between 08h30 and 17h00, Monday to Thursday and 09h00 to 17h00 on Fridays on **0860 002 153**.

## 14. How do I register with Pharmacy Direct to have my chronic medicine delivered to me?

To have your chronic medication delivered directly to you (home, work, temporary address or nearest Post Office), use our preferred provider, Pharmacy Direct, for free-of-charge courier services. (Please note Pharmacy Direct is one of the DSP's you need to use when you are on one of the following plans: flexi**FED 1**, flexi**FED 1<sup>Elect</sup>**, flexi**FED 2<sup>GRID</sup>** and flexi**FED 2<sup>Elect</sup>** and my**FED**).

To get in touch with Pharmacy Direct you can:

- Phone the call centre on 0860 027 800 (Monday to Friday from 07h30-17h00)
- Send a Please call me to 0836908934 and they will contact you
- Send an email to care@pharmacydirect.co.za
- Or visit [www.pharmacydirect.co.za](http://www.pharmacydirect.co.za)

## 15. How to register for Diabetes Care

All Fedhealth members with diabetes will have automatic access to the Diabetes Care programme and its benefits once they have registered their chronic condition for disease specific benefits.

When you register for Diabetes Care, we take all your other medical needs into account, including any other chronic conditions you may have. In addition,

we continue to work with your doctor who looks after your chronic conditions in order to provide coordinated quality care. You can get your chronic medication from your pharmacy of choice.

Simply call **0860 002 153** or email [diabeticcare@fedhealth.co.za](mailto:diabeticcare@fedhealth.co.za)

## 16. Registering on the Oncology Disease Management Programme (cancer)

On diagnosis of cancer, it is important that you register on the Oncology Disease Management Programme (ODM). You or your treating doctor can call them on **0860 100 572** and register. The programme aims to help your doctor to ensure the best cancer treatment and support for you.

Changes that are needed in your oncology treatment plan need to be given to ODM as soon as possible. Please email your treatment plan to [cancerinfo@fedhealth.co.za](mailto:cancerinfo@fedhealth.co.za)



## 17. How to register for Aid for Aids (AfA)

Fedhealth provides unlimited cover for HIV/Aids treatment and preventative medicine. To qualify for this benefit, you must be registered on the Scheme's HIV/Aids disease management programme, Aid for Aids (AfA). You have access to the HIV/Aids medicine benefit only when you are registered.

**AfA is a comprehensive HIV disease management programme providing access to:**

- Anti-retrovirals and related medicines
- Post-exposure preventative medicine

- Preventative medicine for mother-to-child transmission
- Post-exposure preventative medicine after rape.

The programme gives ongoing patient support and monitors the disease and response to therapy. To join AfA, call them in confidence on **0860 100 646**. Your doctor may also call AfA on your behalf.

## 18. How to access the Weight Management Programme

The Fedhealth Weight Management Programme is a 12-week biokineticist led programme for qualifying members who would like to kick-start their weight loss journey in a healthy way. It also provides access to a dietician and behavioural psychologist. This programme is available every two years.

### Who qualifies?

Fedhealth members with the following parameters will be eligible for the programme:

- BMI  $\geq 30\text{kg/m}^2$ , or

- Men with a waist circumference  $\geq 102\text{cm}$ , or
- Women with a waist circumference  $\geq 88\text{cm}$ , or
- Other cases identified by a GP or BASA biokineticist supported by a motivation e.g. member with a BMI between  $25.0\text{kg/m}^2$  and  $29.9\text{kg/m}^2$  with diabetes and comorbidities.

To access this programme, call us on **0860 002 153** or ask your GP to apply on your behalf.



## 19. How to access the Conservative Back and Neck Rehabilitation Programme

### Need spinal or back surgery?

You will need to participate in the Conservative Back and Neck Rehabilitation Programme and successfully complete it first before the surgery can be covered by the Scheme (not applicable to emergency treatment/PMB). The programme focuses on active muscle reconditioning, improved flexibility, reduced pain and stiffness – in other words, a better quality of life without undergoing surgery.

### How you can access the programme:

- Call us on **0860 002 153**
- You could be identified by the Scheme through predictive modelling
- The Scheme might intervene prior to authorising your back and neck surgery
- Managers might refer their employees to be assessed for eligibility
- Referral by your GP or specialist.

## 20. Contacting our Designated Service Providers for non-PMB hip and knee replacements

Should you need a planned hip or knee replacement (non-PMB), you need to use our DSPs, JointCare and ICPS, to avoid a co-payment on your procedure.

For a list of ICPS and JointCare specialists, contact us on **0860 002 153** or via [icpservices.co.za](http://icpservices.co.za), and JointCare on **011 883 3310**.

## 21. Who to call in case of an emergency

### Emergency Ambulance Services

As a Fedhealth member, you enjoy unlimited cover with Europ Assistance Ambulance Services. Simply call **0860 333 432** in case of an emergency.

Europ Assistance offers a range of emergency services:

- Emergency road or air response
- Medical advice in any emergency situation
- Delivery of medication and blood
- Patient monitoring
- Care for stranded minors or frail companions
- 24-hour Fedhealth Nurse Line

## 22. What to do if you've been in a car accident

If you were injured in a car accident, you may have to go through certain procedures with the Road Accident Fund before the Scheme will pay any claims. Please

contact the MVA/ Third Party Recovery Department at Fedhealth for more information on **0800 117 222**.

## 23. How to use the SOS Call Me service

Our SOS Call Me service, powered by Europ Assistance, allows you to get hold of Fedhealth without any cost to you in case of emergency; to book the MediTaxi service; or to contact the Fedhealth Nurse Line.

2. In an emergency, choose this number and select the service (EMS, Nurse Line or MediTaxi). An SMS will be sent to the Europ Assistance Emergency Contact Centre who'll phone you back within the agreed emergency timelines for each service: EMS – 120 seconds; Nurse Line – 2 hours; and MediTaxi – 2 hours before pick-up.

1. Save the number **\*130\*3272\*31#** for EMS, Nurse Line and Medical Taxi as a contact on your phone (under Europ Assistance or a name you'll remember for emergencies);

## 24. How to use the MediTaxi service

MediTaxi is a medical taxi service available to qualifying Fedhealth members in Cape Town, Johannesburg, Pretoria and Durban.

Fedhealth members who've had hospital authorisations can access the 24/7 MediTaxi benefit to take them to follow-up doctor's appointments, if they've undergone an authorised operation or medical treatment that prevents them from driving. MediTaxi provides transport from the member's home to the approved healthcare service provider such as physiotherapists, doctors, specialists or a radiology practice, and includes the return trip.

### Booking the MediTaxi service

When you phone to book a trip, you need to provide your a) membership number, b) date of operation, and c) healthcare provider's details.

### To access the MediTaxi benefit

Save the number **\*130\*3272\*31#** for Emergency Medical Service (EMS), Nurse Line and MediTaxi as a contact on your phone (under Europ Assistance or a name you'll remember for emergencies).

When you need to book MediTaxi, you need to choose this number and select the service (EMS, Nurse Line or MediTaxi). An SMS will be sent to the Europ Assistance Emergency Contact Centre who'll phone you back within the agreed emergency timeline for the MediTaxi service: 2 hours before pick-up.

## 25. Making changes to your membership

As a principal member, you can add or remove dependants to/from your Fedhealth membership.

### Adding or removing dependants

Only the principal member can add or remove dependants. To register or remove a dependant, you must fill in a Member Record Amendment Form and email it to: [update@fedhealth.co.za](mailto:update@fedhealth.co.za)

We have to receive changes to your membership by no later than the 15th of the month - to become

effective from the 1st of that month. If a company pays your medical aid contribution, you must tell the salary department that you are going to make changes, as this will affect the contribution.

### Who can be registered as a dependant?

- Your spouse or partner
- Your children
- Other family members if, according to the Scheme Rules, they rely on you for financial care and support and have been approved by the Scheme.

### Criteria for child rates up to 27

Fedhealth will charge the child rate for your child dependants until they turn 27. However, the child needs to be either:

- A full-time student, who's living at home or in res at a tertiary institution; or
- Living at home, unmarried, and not receiving a regular income greater than the maximum social pension.

### Additional documents needed for registering dependants:

Type of dependant	Extra document we may need
<b>A newborn baby</b>	A copy of the baby's birth certificate or notification of birth from the hospital. The baby's ID number when they are registered
<b>A biological or adopted child over the age of 21 years</b>	Proof of registration from a full-time tertiary institution for the current year if a full-time student, or an affidavit for the dependant confirming residency, employment, income and marital status
<b>An adopted child</b>	Proof of legal adoption
<b>A foster child</b>	Legal proof that the child is a foster child
<b>A brother or sister, grandchild, nephew or niece, third generation baby</b>	An affidavit confirming residency, employment, income and marital status of child and both parents
<b>A parent or grandparent of the principal member</b>	An affidavit confirming residency, employment, income and marital status
<b>A spouse or partner</b>	Marriage certificate, if available

### Dependant reviews

Dependant reviews are conducted on an annual basis to determine eligibility.

- Annual student review: takes place annually in February. Three letters are sent monthly to you, two letters are sent as a reminder. A confirmation letter stating receipt/acceptance of information is sent and then the dependant remains on student status (child rates) for another year. OR if no response is received, we raise the contributions to adult status.
- Overage review: applies to child status dependants over the age of 27. This will take place annually linked to the birthdate of a dependant. Three letters are sent monthly to you,

### Adding a newborn baby

You must register babies within 30 days after they are born by filling in a Member Record Amendment Form and emailing it to [update@fedhealth.co.za](mailto:update@fedhealth.co.za)

Third generation babies (your adult child dependant's baby) will not be covered from date of birth and will be subject to normal underwriting. Fedhealth does not charge for the baby for the month in which the baby is born.

two letters are sent as reminder. A confirmation letter stating receipt/acceptance of information is sent and then the dependant remains on special status for another year. OR if no response is received, we terminate the dependant.

- Age review: refers to all dependants over the age of 21 except students and spouses. This takes place annually linked to birthdate of dependant. Three letters are sent monthly to you, two letters are sent as reminder. A confirmation letter stating receipt/acceptance of information is sent and then the dependant remains on child status for another year. OR if no response is received, we raise the contributions to adult status.

- d) Special dependant review: refers to parents, siblings, grandparents, foster children, NOT including disabled dependants. This takes place on the anniversary of the start date of the dependant. Three letters are sent monthly to you, two letters are sent as reminder. A confirmation letter stating receipt/acceptance of information is sent and then the dependant remains on special status for another year. OR if no response is received, we terminate the dependant.

#### Year-end renewal change of option

During October, we advise you of plan changes for the next year, and you may select an option change. The closing date is 30 November. Complete an Option Change Form and email it to us at [update@fdhealth.co.za](mailto:update@fdhealth.co.za). In general, option changes are only allowed with effect from 1 January every year.

#### You can upgrade to a higher option

You can upgrade to a higher option with more comprehensive benefits anytime of the year, but only on diagnosis of a dread disease or in the case of a life-changing event, for example pregnancy. The option upgrade will only be allowed within 30 days of diagnosis. You will be required to provide supporting medical evidence.

## 26. Leaving the Scheme

If you want to leave Fedhealth, you must give us three months' notice in writing.

#### Last contribution

If you pay at the start of the month for the previous month's cover, your last contribution will be deducted in the month after your last day of membership. We will deduct your last contribution by the third day of the month after your last day of membership.

#### Amount in Savings Account – if you spent less than you paid in

We pay the balance in your Savings Account to your new medical scheme's savings account five months after you've left Fedhealth. This ensures that we can pay out any outstanding claims. You must provide us with the name of your new scheme as well as your membership number so we can transfer your Savings Account balance. If your new scheme does not have a savings component, we will pay the balance to you. Please make sure we have your latest banking details to make this refund.

#### Amount in Savings Account – if you spent more than you paid in

If you leave the Scheme and have spent more than the monthly contributions you have paid into the Savings Account, you'll have to refund us with the difference. You must make the refund within 10 days after the last day of membership.

#### Remaining a member after resigning from a company

If you wish to contribute as an individual member (Direct Paying Member), complete a Record Amendment Form along with new banking details for the payment of contributions. You can also inform us in writing, along with a copy of a bank statement, not older than three months and a copy of your ID. Also state that the banking details are for refunds.

# 27. Important Fedhealth contact numbers and details

## 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 and 5, First Floor, Middestad Mall, Corner West Burger and Charles Streets

**Cape Town** – Icon Building, Ground Floor, Cnr Lower Long Street & Hans Strijdom Avenue, Cape Town

**Durban** – Ground Floor, 102 Stephen Dlamini Road, Musgrave, Durban

**Port Elizabeth** – 1st Floor, Block 6, Greenacres Office Park, 2nd Avenue, Newton Park

**Pretoria** – Nedbank Plaza, Ground Floor, Shop 17, 631 Steve Biko Street, Arcadia

**Roodepoot** – Shop 21 & 22, Flora Centre, Cnr Ontdekkers Road and Conrad Street, Florida North, Roodepoot

**Vereeniging** – Ground Floor, 36 Merriman Avenue

## Fedhealth Customer Contact Centre

Monday to Thursday 08h30 - 17h00

Friday 09h00 - 17h00

**Tel:** 0860 002 153

**Email:** [member@fedhealth.co.za](mailto:member@fedhealth.co.za)

[fedhealth.co.za](http://fedhealth.co.za)

**Postal address:** Private Bag X3045, Randburg 2125

## Hospital Authorisation Centre

Monday to Thursday 08h30 - 17h00

Friday 09h00 - 17h00

**Tel:** 0860 002 153

**Email:** [authorisations@fedhealth.co.za](mailto:authorisations@fedhealth.co.za)

[fedhealth.co.za](http://fedhealth.co.za)

## Ambulance Services

Europ Assistance

**Tel:** 0860 333 432

## Aid for AIDS

Monday to Friday 08h00 - 17h00

**Tel:** 0860 100 646

**Fax:** 0800 600 773

**Email:** [afa@afadm.co.za](mailto:afa@afadm.co.za)

[aidforaids.co.za](http://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](mailto:cmm@fedhealth.co.za)

**Postal address:** Private Bag X3045, Randburg 2125

## Disease Management

Monday to Friday 08h00 - 16h30

**Tel:** 0860 002 153

**Email:** [dm@fedhealth.co.za](mailto:dm@fedhealth.co.za)

## Emotional Wellbeing Programme

**Tel:** 087 365 8664

## Fedhealth Baby Programme

Monday to Friday 08h00 - 17h00

**Tel:** 0861 116 016

**Email:** [info@babyhealth.co.za](mailto:info@babyhealth.co.za)

[babyhealth.co.za](http://babyhealth.co.za)

## Fedhealth Paed-IQ

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

**Dial \*130\*3272\*31#**

## Oncology Disease Management

Monday to Friday 08h00 - 16h00

**Tel:** 0860 100 572

**Fax:** 021 466 2303

**Email:** [cancerinfo@fedhealth.co.za](mailto:cancerinfo@fedhealth.co.za)

**Postal address:** Private Bag X3045, Randburg 2125

## SOS Call Me

**Dial \*130\*3272\*31#**

## Preferred Provider/DSP Pharmacies Clicks

**Tel:** 0860 254 257

To locate a store go to [clicks.co.za](http://clicks.co.za) and select 'Store Locator'

## Dis-Chem

**Care-Line:** 0860 347 243

To locate a store go to [dischem.co.za](http://dischem.co.za) and select 'Store Locator'

## MediRite Pharmacy

**Tel:** 0800 222 617

To locate a store go to [medirite.co.za](http://medirite.co.za) and select Store Locator

## Pharmacy Direct

Monday to Friday 07h30 - 17h00

**Tel:** 0860 027 800

**Fax:** 0866 114 000/ 1/ 2/ 3/ 4

**Email:** [care@pharmacydirect.co.za](mailto:care@pharmacydirect.co.za)

[pharmacydirect.co.za](http://pharmacydirect.co.za)

**SMS (call me):** 083 690 8934



Fedhealth Customer Contact Centre **0860 002 153**

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

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[www.fedhealth.co.za](http://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](http://fedhealth.co.za) or contact the Fedhealth Customer Contact Centre on 0860 002 153 to obtain a copy.

