

**FEDHEALTH MEDICAL SCHEME
ANNEXURE A
2021**

- **MAXIFIED RANGE: MAXIMA EXEC AND
MAXIMA PLUS**
- **FLEXIFIED RANGE:**
 - **FLEXIFIED 1, FLEXIFIED 1^{ELECT}**
 - **FLEXIFIED 2, FLEXIFIED 2^{GRID} AND FLEXIFIED 2^{ELECT}**
 - **FLEXIFIED 3, FLEXIFIED 3^{GRID} AND FLEXIFIED 3^{ELECT}**
 - **FLEXIFIED 4, FLEXIFIED 4^{GRID} AND FLEXIFIED 4^{ELECT}**
- **MYFED**



**(To be read in conjunction with Annexure B, C and E)
(With effect from 1 January 2021)**

Handwritten signatures in black ink, including the name 'MK' and several illegible signatures.

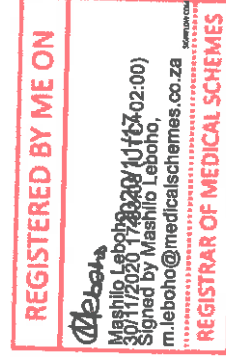
Fedhealth Medical Scheme
Annexure A

1. CONTRIBUTIONS

The Gross contribution payable shall be calculated based on income (where applicable) and the members' number and type of dependants in accordance with the tables below. Gross contributions includes the savings component of the applicable option.

Interpretations stated below are applicable, where relevant, on the tables below (1.1 – 1.5) as follows:

- **Member** – Is the Principal (Main) Member of the Scheme
- **Adult Dependant** – a person over 21 years of age or a person of any age legally classified as an adult, and who is legally dependent on the member, excluding such persons who qualify as child dependants up to the age of 27 years.
- **Child Dependant** - including a child under 27 years of age who is financially dependent on the member, not in receipt of any regular income greater than the maximum social pension, unmarried, and living with the member or living in a residential situation connected with full time studies at a tertiary education institution.
- **Dependants** – There shall be no limit on the number of qualifying dependants joining the Scheme. The Scheme will only charge the member for a maximum of three (3) child dependants.
- **Savings** – The applicable amount in the "Savings" columns in tables 1.1 – 1.9, shall be the savings component of the member's monthly Gross contribution (Total). The savings contribution will be credited to the member's Personal Medical Savings Account (PMSA) for the current year's savings benefit, as mentioned in Annexure B, where relevant. See paragraph 5 below for further detail on the administration of Savings.
- **Income** – For the purposes of calculating the contribution in respect of the member the basic monthly earnings in the form of a salary, commission, pension or any other fixed income, or a member who registers a spouse or partner as a dependant, the higher of the member or spouse's or partners earnings.



Fedhealth Medical Scheme
Annexure A

1.1 maxiFED Range

maxiFED PLUS		Risk	Savings	Total Contribution
Member		R10 229	R543	R10 772
Adult		R8 830	R468	R9 298
Child		R3 254	R172	R3 426
maxiFED EXEC		Risk	Savings	Total Contribution
Member		R5 936	R880	R6 816
Adult		R5 153	R764	R5 917
Child		R1 889	R279	R2 168

1.2 flexiFED Range

flexiFED 1		Risk	Savings	Total Contribution
Member		R1 763	R25	R1 788
Adult		R1 382	R19	R1 401
Child		R645	R8	R653
flexiFED 2		Risk	Savings	Total Contribution
Member		R1 374	R19	R1 393
Adult		R1 075	R14	R1 089
Child		R501	R6	R507

flexiFED 2		Risk	Savings	Total Contribution
Member		R2 473	R27	R2 500
Adult		R2 148	R23	R2 171
Child		R735	R7	R742

REGISTERED BY ME ON

M. Leboho
Mashilo Leboho
30/11/2020 17:50:20 (WTS:02:00)
Signed by Mashilo Leboho
m.leboho@medicalschemes.co.za

REGISTRAR OF MEDICAL SCHEMES

MLB
[Signature]

Fedhealth Medical Scheme
Annexure A

FlexiFED 2 nd Plan		Risk	Savings	Total Contribution
Member		R2 198	R24	R2 222
Adult		R1 913	R20	R1 933
Child		R653	R7	R660
FlexiFED 2 nd Plan		Risk	Savings	Total Contribution
Member		R1 851	R20	R1 871
Adult		R1 614	R17	R1 631
Child		R552	R6	R558

FlexiFED 3 rd Plan		Risk	Savings	Total Contribution
Member		R2 798	R27	R2 825
Adult		R2 525	R24	R2 549
Child		R1 006	R9	R1 015
FlexiFED 3 rd Plan		Risk	Savings	Total Contribution
Member		R2 487	R24	R2 511
Adult		R2 247	R22	R2 269
Child		R895	R8	R903
FlexiFED 3 rd Plan		Risk	Savings	Total Contribution
Member		R2 096	R21	R2 117
Adult		R1 894	R17	R1 911
Child		R755	R7	R762

FlexiFED 4 th Plan		Risk	Savings	Total Contribution
Member		R3 720	R27	R3 747
Adult		R3 375	R24	R3 399
Child		R1 145	R8	R1 153

REGISTERED BY ME ON

Mashilo Leboho
Mashilo Leboho
30/11/2020 17:23:28 (UTC+02:00)
Signed by Mashilo Leboho,
m.leboho@medicalschemes.co.za

REGISTRAR OF MEDICAL SCHEMES

MK
MS

Fedhealth Medical Scheme
Annexure A

FlexFED 4 ¹⁰⁰		Risk	Savings	Total Contribution
Member		R3 302	R24	R3 326
Adult		R3 003	R22	R3 025
Child		R1 020	R7	R1 027
FlexFED 4 ¹⁰⁰		Risk	Savings	Total Contribution
Member		R2 785	R21	R2 806
Adult		R2 580	R18	R2 598
Child		R875	R6	R881

1.3 myFED

myFED – TOTAL CONTRIBUTION			
Income Band	Member	Adult	Child
R1 - R1 202	R788	R788	R484
R1 203 – R6 251	R1 128	R985	R543
R6 252 – R10 219	R1 430	R1 242	R699
R10 220 – R12 622	R2 005	R1 750	R769
R12 623 – R14 426	R2 547	R2 100	R996
R14 427 +	R3 455	R3 147	R1 317

REGISTERED BY ME ON

 Mashilo Leboho
 30/11/2020 17:30:20 (UTC+02:00)
 Signed by Mashilo Leboho,
 m.leboho@medicalschemes.co.za

REGISTRAR OF MEDICAL SCHEMES

2. TIME FOR PAYMENT OF CONTRIBUTIONS

All contributions shall be payable monthly in arrears, unless otherwise stated, to the account of the Scheme at such place as stipulated and agreed to by the Scheme. All contributions shall be paid to the Scheme within 3 days of the end of the due month and shall be accompanied by the required payment remittance advice for members fully disclosing any changes made to membership and/or contributions.

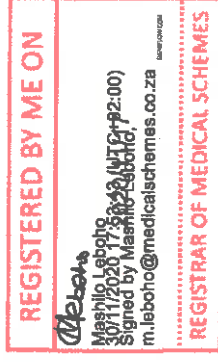
The member has the option to pay contributions in advance, these contributions shall be paid to the Scheme within 3 days of the beginning of the due month and shall be accompanied by the required payment remittance advice per member fully disclosing any changes made to membership and/or contributions.



3. PREMIUMS PENALITIES FOR PERSONS JOINING LATE IN LIFE

- 3.1** The Scheme may apply premium penalties to a late joiner and such penalties must be applied only to the portion of the contribution related to the member or any adult dependant affected by the late joiner penalty. Late joiner penalties are only applicable to members and adult dependants over the age of 35.
- 3.2** The premium penalties referred to in paragraph 3.1 shall not exceed the following bands:

Penalty bands	Maximum Penalty
1 – 4 years	0.05 x contribution
5 – 14 years	0.25 x contribution
15 – 24 years	0.50 x contribution
25 + years	0.75 x contribution



- 3.3** To determine the applicable penalty band to be applied to a late joiner in terms of the first column of the table in paragraph 3.2 the following formula shall be applied:

$$A = B \text{ minus } (35+C)$$

Where

- “A” means the number of years referred to in the first column of the table in paragraph 3.2 for purposes of determining the appropriate penalty band;
- “B” means the age of the late joiner at the time of his or her application for membership or admission as a dependant; and
- “C” means the number of years of creditable coverage which can be demonstrated by the late joiner.
- 3.4** Where a member or his or her dependant produces evidence of creditable coverage after a late joiner penalty has been imposed, the Scheme must recalculate the penalty and apply such revised penalty from the time such evidence is provided.
- 3.5** Late joiner penalties may continue to be applied upon transfer of the member or adult dependant to other medical schemes.

Fedhealth Medical Scheme
Annexure A

4. WAITING PERIODS

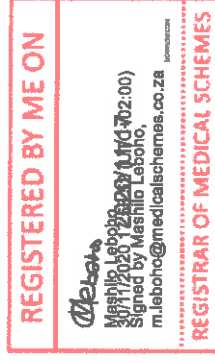
See paragraph 1 of Annexure D.

5. PERSONAL MEDICAL SAVINGS ACCOUNT (PMSA)

- 5.1.** The amount towards the member's PMSA that is included in the total monthly contribution of the savings option, not exceeding 25% of the member's total contribution, which will be credited to the member's PMSA monthly from the 1 January of each year or pro-rated in respect of a member who joins the Scheme during the year.
- 5.2.** At the beginning of each benefit year or on the date of joining the Scheme or this benefit option, each member shall be allocated a medical savings benefit for the year. This benefit shall be deemed to be an advance by the Scheme to the member and shall be equal to 12 (twelve) times the amount referred to below, pro-rated in respect of a member who joins the Scheme or this benefit option during the course of the year.

ANNUAL ALLOCATION OF FUNDS TO PERSONAL MEDICAL SAVINGS ACCOUNT

2021 Annualised Savings			
OPTION	P	A	C
maxima PLUS	R6 516	R5 616	R2 064
maxima EXEC	R10 560	R9 168	R3 348
flexIFED 1	R300	R228	R96
flexIFED 1 ^{Elect}	R228	R168	R72
flexIFED 2	R324	R276	R84
flexIFED 2 ^{Grid}	R288	R240	R84
flexIFED 2 ^{Elect}	R240	R204	R72
flexIFED 3	R324	R288	R108



M. Leboho
M. Leboho

Fedhealth Medical Scheme
Annexure A

2021 Annualised Savings				
flexIFED 3 ^{Grid}	R288	R264	R96	R96
flexIFED 3 ^{Elect}	R252	R204	R84	R84
flexIFED 4	R324	R288	R96	R96
flexIFED 4 ^{Grid}	R288	R264	R84	R84
flexIFED 4 ^{Elect}	R252	R216	R72	R72



- 5.3. A member or dependant whose membership of the Scheme or of an option with a PMSA is terminated during the course of a benefit year and whose claims exceeded the savings benefit advance, pro-rated on a monthly basis at the date of termination shall be liable to repay the excess or shortfall to the Scheme.
- 5.4. PMSA balances not utilised at the end of the benefit year will be carried forward to the next year and accumulate from year to year ("accumulated savings") to meet future expenses for which the members is responsible.
- 5.5. TOP UPS to PMSA provision for members will be made available up to 25% of the registered contribution. TOP-UP savings are voluntary contribution to the member's accumulated savings.
- 5.6. While these savings belong to the member, this may only be used for relevant healthcare services in respect of day-to-day medical expenses. Savings benefits may not be used to provide for benefits and co-payments relating to PMBs.
- 5.7. Provided there are actual funds available in a member's PMSA, such funds may, in addition to providing for day-to-day benefits, be utilised to pay for relevant healthcare services generally or specifically excluded from risk benefits or where the actual costs exceed the benefit payable or available.

6. INTEREST EARNED ON PMSA

The Schemes are no longer required to pay any interest on PMSA credit balances and may elect to do so at the Scheme discretion.

7. PERSONAL MEDICAL SAVINGS ACCOUNT STATEMENTS

A member shall receive a monthly statement from the Scheme reflecting all transactions relating to the PMSA of such a member.

8. BALANCE OF PMSA UPON TERMINATION OF MEMBERSHIP OR TRANSFER TO A NONE SAVINGS OPTION OR ANOTHER OPTION

8.1. Upon termination of membership, any actual funds still available in the member's PMSA shall, after off-setting any shortfalls due by the member and taking into account any outstanding amounts that may be recoverable by the Scheme from the member, be dealt with as follows:

8.1.1. Deceased member

Upon the death of a member, the balance due to the member must be paid into the estate of that member, if unclaimed after the prescribed period of three (3) years, in accordance with the Prescription Act the funds will be written back to the Scheme.

8.1.2. Termination for other reasons

8.1.2.1. Should membership of the Scheme be terminated and the member does not enroll in another savings medical scheme or benefit option, the balance due to the member after off-setting of debt must be refunded to the member within 5 (five) months after the date of termination of membership. It is the responsibility of the member to provide the Scheme with his or her current banking details within 30 (thirty) days from the date of termination.

8.1.2.2. Should membership of the Scheme or this benefit option be terminated and the member transfers to another medical scheme or benefit option with a PMSA, the balance due to the member after off-setting of debt will be transferred to such scheme or benefit option within 5 (five) months after the date of termination. It is the responsibility of the member to provide the Scheme with the details of the new medical scheme within 30 (thirty) days from the date of termination.

8.1.3. Transfer to another benefit option within the Scheme

On transfer to another benefit option of the Scheme, which does not provide for a PMSA, any credit balance (paid balance) in the member's PMSA will be refunded to the member within 5 (five) months after the effective date of such transfer.

9. UNCLAIMED PMSA CREDIT BALANCES

Unclaimed PMSA balances, where a member cannot be traced within three (3) years of the member leaving the scheme, and after all reasonable attempts at tracing such members has been pursued, will be written back to the Scheme's income after the prescribed period of three (3) years, in accordance with the Prescription Act.

10. SCHEME LIQUIDATION

The PMSA, as an asset of the Scheme, can be attached by the Scheme creditors in the event of liquidation of the Scheme.



[Handwritten signatures]