

Comprehensive Series

The Comprehensive Plans offer you extensive cover in hospital and comprehensive day-to-day benefits

Hospital Benefit

In an emergency, go straight to hospital but call us or get someone else to call us within 12 hours. For planned hospital admissions, please call us 48 hours before you go to hospital to confirm your admission.

- You have no overall hospital limit on approved hospital admissions. Some healthcare services are limited.
- We cover you in full if you see a specialist who charges the Premier Rate or Classic Direct Rate (for Classic Comprehensive).
- We cover GPs and other healthcare professionals who do not participate in our direct payment arrangements to a maximum of 200% of the Discovery Health Rate on Classic Comprehensive and up to a maximum of 100% of the Discovery Health Rate on Essential Comprehensive.
- We pay the Discovery Health Rate for radiology and pathology claims.

You must use a network hospital on the Delta network options

On the Classic and Essential Delta Comprehensive network options, you are covered at hospitals in the Delta Hospital Network. For planned admissions at any other private hospital, you must pay a deductible of R3 850.

Your cover for chronic conditions

You have extensive and flexible cover for a list of chronic conditions. You have full cover for approved medicine on Discovery Health's medicine list or up to a set monthly amount for medicine not on our list.

The medicine list for the Comprehensive Plans has more medicines on it than other plans. If you choose to use medicines that are not on the medicine list, you also have a higher amount available to you than on other plans.

We pay medicine up to a maximum of the Discovery Health Medication Rate. We need to approve your chronic condition before it is covered from the Chronic Illness Benefit.

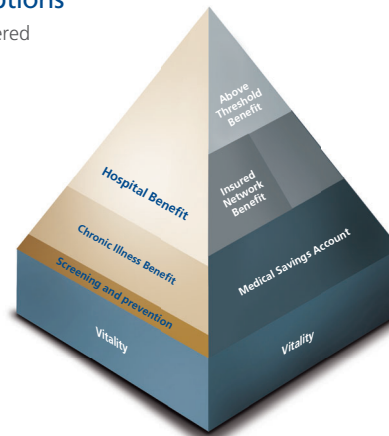
Your cover for cancer treatment

DiscoveryCare's Oncology Programme covers the first R400 000 of your approved cancer treatment over a 12-month cycle, in full, after which a 20% co-payment will apply, without any overall limits.

Radiology and pathology approved for your cancer treatment is also covered. Cancer treatment that falls within the Prescribed Minimum Benefits is always covered in full, with no co-payment. Please call us to register on the Oncology Programme.

Screening and Prevention Benefit

The Screening and Prevention Benefit covers a range of preventive healthcare services, including the following group of tests at a Discovery Wellness Network provider: blood glucose, blood pressure, cholesterol and body mass index. The benefit also covers a mammogram, Pap smear, PSA and HIV screening tests. Members from the age of 65 and members registered for certain chronic conditions are also covered for a seasonal flu vaccine from this benefit.



Discovery Vitality: The wellness programme that rewards you for getting healthier

Vitality empowers you to get healthier by giving you the knowledge, tools and motivation to improve your health. The more you interact with Vitality, the healthier you will become and the greater the rewards you'll qualify for.

Day-to-day cover through the Medical Savings Account and Above Threshold Benefit

Day-to-day cover refers to healthcare services that you get out of hospital. We pay these health services from your Medical Savings Account or from your Above Threshold Benefit.

We first pay claims from your Medical Savings Account. If it runs out, you need to pay claims from your pocket until your claims add up to a set rand amount called the Annual Threshold.

Annual Medical Savings Account amounts*:

Classic: R7 044 for a main member, R6 660 for each adult, R1 404 for each child (to a maximum of three)

Classic Delta Comprehensive: R6 336 for a main member, R5 988 for each adult, R1 260 for each child (to a maximum of three)

Essential: R3 540 for a main member, R3 348 for each adult, R708 for each child (to a maximum of three)

Essential Delta Comprehensive: R3 192 for a main member, R3 012 for each adult, R636 for each child (to a maximum of three)

*We pro-rate this benefit according to when you join the medical scheme

Above Threshold Benefit

Once your claims add up to the Annual Threshold amount, we pay the rest of your claims from the Above Threshold Benefit. We pay a maximum of the Discovery Health Rate from the Above Threshold Benefit.

Annual Threshold amounts*:

R7 700 for a main member, R7 700 for each adult, R1 450 for each child (to a maximum of three).

*We pro-rate this benefit according to when you join the medical scheme

The Insured Network Benefit

We further extend your day-to-day cover through the Insured Network Benefit. This benefit ensures you have no gaps in cover for GPs and pathology in our network. When you have spent your annual Medical Savings Account deposit:

- We cover the full cost of your consultation fees if you go to a GP in our network. We pay the claim directly to the GP.
- We cover blood tests at our network providers if your GP or specialist requests the appropriate tests using the Discovery Health pathology form.

Your cover for medical technology and expensive medicine

You have additional cover for a defined list of the latest treatments through the Specialised Medicine and Technology Benefit, up to R200 000 for each person. Please call us to see whether your treatment qualifies.

This benefit includes access to the Overseas Treatment Benefit where you are covered when you travel overseas to seek evidence-based healthcare not available in South Africa at a registered healthcare professional, up to a limit of R500 000 for each person. You will need to pay and claim back from us when you return to South Africa.

Entry criteria and a co-payment of up to 20% applies to both benefits.

Trauma Recovery Extender Benefit

We will cover out-of-hospital claims for your recovery after certain traumatic events from the Trauma Recovery Extender Benefit. The cover applies for the rest of the year in which the trauma takes place, as well as the year after your trauma.

International Travel Benefit

The International Travel Benefit covers you if you have emergency medical expenses while travelling outside South Africa. The International Travel Benefit provides cover of up to R5 million for a maximum of 90 days from the date of departure from South Africa. You pay the first \$150 or €100 of out-of-hospital emergency claims.

The Africa Evacuation Benefit

You have cover for emergency medical evacuations from certain sub-Saharan African countries back to South Africa.

Some of your healthcare services have no limit and some are limited. Here is a summary: Hospital benefits

Comprehensive Series	
Overall limit	There is no overall hospital limit on Comprehensive Plans. Limits apply to some healthcare services and procedures.
Procedures and consultations with specialists participating in direct payment arrangements	We pay in full if you consult a specialist who charges the Premier Rate. If you are on a Classic Plan we cover a wider range of specialists in full.
Other healthcare professionals	Classic: We pay up to 200% of the Discovery Health Rate. Essential: We pay up to 100% of the Discovery Health Rate.
Radiology and pathology	We cover these expenses in full up to the Discovery Health Rate
Endoscopies (gastroscopy, colonoscopy, sigmoidoscopy and proctoscopy)	We pay the first R1 750 of your hospital account from your day-to-day benefits. We pay the balance of the hospital account and your related accounts from your Hospital Benefit.
MRI and CT scans	As part of an approved hospital admission: we pay this from your Hospital Benefit, up to the Discovery Health Rate. If admitted for conservative back or neck treatment: we pay the first R1 975 of the scan code from your day-to-day benefits. We pay the balance from your Hospital Benefit up to the Discovery Health Rate.
Dentistry	There is an overall limit of R18 500* for each person. We pay the first R1 975 of your hospital account from your day-to-day benefits. We pay the balance of the hospital account from your Hospital Benefit*. The R1 975 co-payment does not apply when children 12 years old or younger are admitted to hospital.
Cochlear implants and auditory brain implants and processors	R126 000 for each person for each benefit
Internal nerve stimulators	R96 000 for each person
Hip and knee joint prostheses	There is no overall limit if you get your prosthesis from our preferred supplier. If you choose not to, a limit of R31 500 will apply to each prosthesis.
Prosthetic devices used in spinal surgery	R20 000 for each level, limited to two levels for each procedure, and one procedure for each person each year
Mental health benefit	21 days for each person
Alcohol and drug rehabilitation	21 days for each person
Terminal care benefit	R23 400 for each person

* We pay all related accounts from the Medical Savings Account. Once you reach your Annual Threshold, we pay these accounts from the Above Threshold Benefit. A related account is the account for your admitting doctor, anaesthetist and any approved expenses you incur during your approved hospital admission, other than the hospital account.

* We pro-rate this benefit according to when you join the medical scheme. Both your hospital and related accounts are paid up to this limit.

Network of hospitals on the Delta options

Delta

On the Classic and Essential Delta Comprehensive network options, you are covered in full at hospitals in the Delta Hospital Network. For planned admissions at any other private hospital, you must pay a deductible of R3 850. This does not apply in an emergency.

Delta Hospital Network

Gauteng

Arwyp Medical Centre	Life Robinson Private Hospital	Life Mount Edgecombe Hospital
Life Bedford Gardens Hospital	Life Roseacres Clinic	Life Westville Hospital
Bougainville Private Hospital	Sulkerbosrand Clinic	Plus 1 day hospital
Life Brenthurst Clinic	The Donald Gordon Medical Centre	
Life Carstenhof Clinic	Life Wilgeheuwel Hospital	Western Cape
Clinix Private Hospital – Lesedi	Plus 22 day hospitals	Cape Town Medi-Clinic
Clinix Private Hospital – Sebokeng		Life Claremont Hospital
Clinton Clinic	Free State	Life Kingsbury Hospital
Emfuleni Medi-Clinic	Pelononi Private Hospital	Mitchells Plain Medical Centre
Life Fourways Hospital	Universtas Private Hospital	Panorama Medi-Clinic
Legae Private Hospital	Plus 3 day hospitals	Vergelegen Medi-Clinic
Lenmed Clinic Limited		Plus 4 day hospitals
Life Little Company of Mary	KwaZulu Natal	
Louis Pasteur Hospital	Life Chatsmed Garden Hospital	Use Discovery Health MAPS to see the latest Delta
Midvaal Private Hospital	Life Entabeni Hospital	Network hospitals on www.discovery.co.za from
Morningside Medi-Clinic	Midlands Medical Centre	1 January 2010.

Day-to-day benefits

Some of your day-to-day expenses are limited. These limits apply to claims paid from your Medical Savings Account and Above Threshold Benefit.

	Classic	Essential
Professional services		
General practitioner	There is no limit on the number of GP visits or services	
Specialists	There is no limit on the number of specialist visits or services	
Allied healthcare professionals (for example physiotherapists, chiropractors, occupational and speech therapists)	There is no limit on these healthcare services	
Radiology and pathology	There is no limit on these healthcare services	
Mental health benefit* (including psychologists and psychiatrists)	You have R15 000 for your family	You have R13 100 for your family
Private nursing	You have R6 200 for your family	
Antenatal classes	You have R850 for your family	
Dentistry*	You have an overall limit of R18 500 for each person	
Endoscopies (gastroscopy, colonoscopy, sigmoidoscopy and proctoscopy) done in your doctor's rooms	There is no limit on these healthcare services. Discovery Health pays for these claims without using your day-to-day benefits.	
MRI and CT scans	There is no limit on these healthcare services. We will pay the first R1 975 of your MRI or CT scan code from your day-to-day benefits. We cover the balance in full at the Discovery Health Rate.	
Medicine		
Prescribed medicine * (schedule 3 and above)	Single member: R15 700 Member with one dependant: R18 400 Member with two dependants: R21 400 Member with three or more dependants: R24 400 We pay these claims from available funds in your Medical Savings Account	Single member: R10 150 Member with one dependant: R12 300 Member with two dependants: R14 800 Member with three or more dependants: R16 200
Over-the-counter medicine, including prescribed schedule 0, 1 and 2 medicine and lifestyle-enhancing products		
Appliances and equipment		
External medical items	You have R41 100 for your family	You have R27 300 for your family
Hearing aids	You have R15 000 for your family	You have R12 200 for your family
Optical* (includes cover for spectacles, frames, contact lenses and surgery or any healthcare service to correct refractive errors of the eye, eg excimer laser)	You have R2 600 for each person	

* We pro-rate this benefit according to when you join the medical scheme.

The benefits described in this section are subject to clinical guidelines and policies

The amounts we add up to your Annual Threshold

For you to get to your Above Threshold Benefit we add up claims to your Annual Threshold. Here are the amounts that we add up:

Specialists: For Premier Rate specialists, we add up the Premier Rate. For non-participating specialists, we add up the Discovery Health Rate.

Medicine: For generic medicines, we add up 100% of the Discovery Health Medication Rate. For non-generic medicines, we add up 75% of the Discovery Health Medication Rate. Over-the-counter medicines do not add up to your Annual Threshold.

All other health services: We add up the Discovery Health Rate.

For each of these, we add up the amount to the benefit limit available.

General exclusions

The Discovery Health Medical Scheme has certain exclusions. Discovery Health will not pay for healthcare services related to the following, except where stipulated as part of a defined benefit or under the Prescribed Minimum Benefits:

- Cosmetic procedures and treatments
- Otoplasty for bat-ears, portwine stains and blepharoplasty (eyelid surgery)
- Breast reductions or enlargements and gynecomastia
- Obesity
- Frail care
- Infertility
- Willfully self-inflicted illness or injury
- Alcohol, drug or solvent abuse
- Willful and material violation of the law or during a period of imprisonment
- Willful participation in war, terrorist activity, riot, civil commotion, rebellion or uprising
- Experimental, unproven or unregistered treatments or practices
- Search and rescue
- Any costs for which a third party is legally responsible.

We also do not cover the complications or the direct or indirect expenses that arise from any of the exclusions listed above.

If we apply waiting periods because you have never belonged to a medical scheme or have had a break in membership of more than 90 days before joining Discovery Health, you will not have access to the Prescribed Minimum Benefits during your waiting periods. This includes cover for emergency admissions.

What you will pay

Family size	Classic Comprehensive	Classic Delta Comprehensive	Essential Comprehensive	Essential Delta Comprehensive
Main member	R2 348	R2 113	R1 972	R1 775
Adult dependant	R2 220	R1 998	R1 865	R1 678
Child ***	R469	R422	R394	R355

*** We count a maximum of three children when we work out your contribution, Medical Savings Account and Above Threshold Benefit

This brochure is merely a summary of the key benefits and features of the Discovery Health plans, pending formal approval from the Council for Medical Schemes. Full details will be found in the Discovery Health Medical Scheme Rules. For a copy of the rules, email compliance@discovery.co.za. Discovery Health Medical Scheme is administered by Discovery (Pty) Ltd, Registration number 1997/013480/07, an authorised financial services provider.

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