

A close-up photograph of a young girl smiling broadly, showing her teeth. She is looking towards the left side of the frame. Another person's face is partially visible on the left side of the frame, looking towards the girl. The background is a soft, out-of-focus green, suggesting an outdoor setting.

Guide to selecting  
your Discovery  
Health Medical  
Scheme Plan 2017

# Guide to selecting your health plan



Please complete the following with the assistance of a registered financial adviser.



## Question 1:

Do you want a top of the range plan providing the most extensive cover for in-hospital, chronic and day-to-day benefits?

Your choice indicates the Executive Plan: The Executive Plan offers you the most extensive cover in-hospital, for day-to-day medical expenses and for emergencies

Plan selection	Distinguishing features	Hospital benefits	Day-to-day cover	Chronic condition cover
Executive	<ul style="list-style-type: none"> <li>Widest range of full cover options for specialists who we have an arrangement with (paid from day-to-day benefits) for both in- and out-of-hospital treatment</li> <li>Other specialists are paid up to 300% of the Discovery Health Rate from the Medical Savings Account and Above Threshold Benefit for both in- and out-of-hospital treatment</li> <li>The highest reimbursement rate and accumulation to the Annual Threshold</li> <li>Highest limits in key areas: dentistry, optical and prescribed medicines</li> <li>Cover for an extended list of chronic conditions</li> <li>Access to a defined list of non-generic medicines that we cover in full</li> <li>Specialised Medicine and Technology Benefit up to R200 000 for a defined list of latest treatments. Scheme funds in full (depending on treatment requested), or up to maximum of 80% of the cost of the treatment, co-payment applies where cost exceeds maximum payable by Scheme.</li> <li>Overseas Treatment Benefit for treatment not available in South Africa. Scheme pays 80% of the cost of the treatment, up to a limit of R500 000 for each person.</li> <li>Private ward cover</li> <li>R10 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover in ANY private hospital</li> <li>No overall hospital limit</li> <li>Full cover when using a specialist who we have an arrangement with (paid from day-to-day benefits)</li> <li>R1 750 private ward cover each day</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	<p>The highest level of day-to-day cover:</p> <ul style="list-style-type: none"> <li>25% Medical Savings Account</li> <li>Unlimited Above Threshold Benefit</li> <li>Annual Threshold equal to Medical Savings Account with no initial Self-payment Gap</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Other specialists are paid up to 300% of the Discovery Health Rate from the Medical Savings Account and Above Threshold Benefit</li> <li>Specialist claims accumulate up to 300% of the Discovery Health Rate</li> <li>The highest limits for dentistry, optical and prescribed medicines</li> <li>Day-to-day Extender Benefit pays for unlimited GP consultations, antenatal consultations and two 2D pregnancy scans, preferred day to day medicine (schedule 3 and above), blood tests, a defined list of external medical items, kids casualty visits, video call consultations with a paediatrician. Members must use a provider on the network to access these benefits once they have spent their annual MSA.</li> <li>Trauma Recovery Extender Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Extensive cover for a comprehensive list of chronic conditions</li> <li>Access to a defined list of non-generic medicines that we will cover in full</li> <li>Full cover for approved medicine on Discovery Health's medicine list</li> <li>A high set monthly amount available for medicine not on our list</li> <li>Specialised Medicine and Technology Benefit</li> </ul>

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### Question 2:

Do you want a plan that offers you unlimited day-to-day benefits and comprehensive cover in-hospital and for chronic medicine?

You have a choice between two Comprehensive plans: The Comprehensive plans offer you comprehensive cover in hospital, for day-to-day medical expenses and for emergencies.

Plan selection	Distinguishing features	Hospital benefits	Day-to-day cover	Chronic condition cover
Classic Comprehensive	<ul style="list-style-type: none"> <li>Access to a wider range of specialists who we have an arrangement with that we cover in full</li> <li>Other specialists are paid up to 200% of the Discovery Health Rate in hospital</li> <li>Cover for an extended list of chronic conditions</li> <li>Specialised Medicine and Technology Benefit up to R200 000 for a defined list of latest treatments. Scheme funds in full (depending on treatment requested), or up to maximum of 80% of the cost of the treatment, co-payment applies where cost exceeds maximum payable by Scheme.</li> <li>Overseas Treatment Benefit for treatment not available in South Africa. Scheme pays 80% of the cost of the treatment, up to a limit of R500 000 for each person.</li> <li>R5 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover in ANY private hospital</li> <li>No overall hospital limit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	<p>Comprehensive level of day-to-day cover:</p> <ul style="list-style-type: none"> <li>25% Medical Savings Account</li> <li>Unlimited Above Threshold Benefit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Day-to-day Extender Benefit pays for unlimited GP consultations, antenatal consultations and two 2D pregnancy scans, preferred day to day medicine (schedule 3 and above), blood tests, a defined list of external medical items, kids casualty visits, video call consultations with a paediatrician. Members must use a provider on the network to access these benefits once they have spent their annual MSA.</li> <li>Trauma Recovery Extender Benefit</li> </ul>	<ul style="list-style-type: none"> <li>You have extensive cover for a list of chronic conditions</li> <li>Full cover for approved medicine on Discovery Health's medicine list</li> <li>A high set monthly amount available for medicine not on our list</li> <li>Specialised Medicine and Technology Benefit</li> </ul>
Essential Comprehensive	<ul style="list-style-type: none"> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>Cover for an extended list of chronic conditions</li> <li>Specialised Medicine and Technology Benefit up to R200 000 for a defined list of latest treatments. Scheme funds in full (depending on treatment requested), or up to maximum of 80% of the cost of the treatment, co-payment applies where cost exceeds maximum payable by Scheme.</li> <li>Overseas Treatment Benefit for treatment not available in South Africa. Scheme pays 80% of the cost of the treatment, up to a limit of R500 000 for each person.</li> <li>R5 million International Travel Benefit</li> </ul>		<p>Comprehensive level of day-to-day cover:</p> <ul style="list-style-type: none"> <li>15% Medical Savings Account</li> <li>Unlimited Above Threshold Benefit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Day-to-day Extender Benefit pays for unlimited GP consultations and a defined list of external medical items. Members must use a provider on the network to access these benefits once they have spent their annual MSA.</li> <li>Trauma Recovery Extender Benefit</li> </ul>	

## Guide to selecting your health plan

You can choose a plan with a selected hospital network for planned procedures in order to reduce your monthly contributions.

Plan selection	Distinguishing features	Hospital benefits	Day-to-day cover	Chronic condition cover
Classic Delta Comprehensive	<ul style="list-style-type: none"> <li>Full cover at hospitals in the Delta Hospital Network</li> <li>For planned hospital admissions at any other hospital, you must pay an upfront payment of R7 100 to the hospital</li> <li>Access to a wider range of specialists who we have an arrangement with that we cover in full</li> <li>Other specialists are paid up to 200% of the Discovery Health Rate in hospital</li> <li>Specialised Medicine and Technology Benefit up to R200 000 for a defined list of latest treatments. Scheme funds in full (depending on treatment requested), or up to maximum of 80% of the cost of the treatment, co-payment applies where cost exceeds maximum payable by Scheme.</li> <li>Overseas Treatment Benefit for treatment not available in South Africa. Scheme pays 80% of the cost of the treatment, up to a limit of R500 000 for each person.</li> <li>R5 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover in a private hospital in the Delta Hospital Network</li> <li>No overall hospital limit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	<p>Comprehensive level of day-to-day cover:</p> <ul style="list-style-type: none"> <li>25% Medical Savings Account</li> <li>Unlimited Above Threshold Benefit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Day-to-day Extender Benefit pays for unlimited GP consultations, antenatal consultations and two 2D pregnancy scans, preferred day to day medicine (schedule 3 and above), blood tests, a defined list of external medical items, kids casualty visits, video call consultations with a paediatrician. Members must use a provider on the network to access these benefits once they have spent their annual MSA.</li> <li>Trauma Recovery Extender Benefit</li> </ul>	<ul style="list-style-type: none"> <li>You have extensive cover for a list of chronic conditions</li> <li>Full cover for approved medicine on Discovery Health's medicine list</li> <li>You have cover for approved chronic medicine if you use MedXpress. A 20% co-payment applies if you don't use MedXpress</li> <li>A high set monthly amount available for medicine not on our list</li> <li>Specialised Medicine and Technology Benefit</li> </ul>
Essential Delta Comprehensive	<ul style="list-style-type: none"> <li>Full cover at hospitals in the Delta Hospital Network</li> <li>For planned hospital admissions at any other hospital, you must pay an upfront payment of R7 100 to the hospital</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>Specialised Medicine and Technology Benefit up to R200 000 for a defined list of latest treatments. Scheme funds in full (depending on treatment requested), or up to maximum of 80% of the cost of the treatment, co-payment applies where cost exceeds maximum payable by Scheme.</li> <li>Overseas Treatment Benefit for treatment not available in South Africa. Scheme pays 80% of the cost of the treatment, up to a limit of R500 000 for each person.</li> <li>R5 million International Travel Benefit</li> </ul>		<p>Comprehensive level of day-to-day cover:</p> <ul style="list-style-type: none"> <li>15% Medical Savings Account</li> <li>Unlimited Above Threshold Benefit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Day-to-day Extender Benefit pays for unlimited GP consultations and a defined list of external medical items. Members must use a provider on the network to access these benefits once they have spent their annual MSA.</li> <li>Trauma Recovery Extender Benefit</li> </ul>	

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### Question 3:

Do you want the security of comprehensive hospital and chronic medicine cover, and do not need a Medical Savings Account but need the security of an unlimited Above Threshold Benefit?

Your choice indicates the Classic Comprehensive Zero MSA Plan.

Plan selection	Distinguishing features	Hospital benefits	Day-to-day cover	Chronic condition cover
Classic Comprehensive Zero MSA	<ul style="list-style-type: none"> <li>Access to a wider range of specialists who we have an arrangement with that we cover in full</li> <li>Other specialists are paid up to 200% of the Discovery Health Rate in hospital</li> <li>Cover for an extended list of chronic conditions</li> <li>Specialised Medicine and Technology Benefit up to R200 000 for a defined list of latest treatments. Scheme funds in full (depending on treatment requested), or up to maximum of 80% of the cost of the treatment, co-payment applies where cost exceeds maximum payable by Scheme.</li> <li>Overseas Treatment Benefit for treatment not available in South Africa. Scheme pays 80% of the cost of the treatment, up to a limit of R500 000 for each person.</li> <li>R5 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover in ANY private hospital</li> <li>No overall hospital limit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	<ul style="list-style-type: none"> <li>No Medical Savings Account</li> <li>Unlimited Above Threshold Benefit</li> <li>Full cover when using a specialist who we have an arrangement with</li> </ul>	<ul style="list-style-type: none"> <li>You have extensive cover for a list of chronic conditions</li> <li>Full cover for approved medicine on Discovery Health's medicine list</li> <li>A high set monthly amount available for medicine not on our list</li> <li>Specialised Medicine and Technology Benefit</li> </ul>



### Question 4:

Do you want cost-effective cover in-hospital, essential chronic medicine cover and limited day-to-day through a Medical Savings Account and limited Above Threshold Benefit?

You can choose a plan in the Priority Series that offers you cost-effective cover in-hospital where certain procedures will attract an upfront payment. You will have cover for essential chronic medicine and day-to-day benefits through a Medical Savings Account and a limited Above Threshold Benefit.

Plan selection	Distinguishing features	Hospital benefits	Day-to-day cover	Chronic condition cover
Classic Priority	<ul style="list-style-type: none"> <li>Access to a wider range of specialists who we have an arrangement with that we cover in full</li> <li>Other specialists are paid up to 200% of the Discovery Health Rate in hospital</li> <li>An upfront amount is payable on a defined list of in-hospital procedures. The upfront amount falls away if these procedures are done out of hospital</li> <li>Limited Above Threshold Benefit</li> <li>R5 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover in ANY private hospital</li> <li>No overall hospital limit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> <li>An upfront amount is payable on a defined list of in-hospital procedures.</li> <li>The upfront amount falls away if these procedures are done out of hospital</li> </ul>	<p>Limited day-to-day cover:</p> <ul style="list-style-type: none"> <li>25% Medical Savings Account</li> <li>Limited Above Threshold Benefit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Day-to-day Extender Benefit pays for unlimited GP consultations, antenatal consultations and two 2D pregnancy scans, blood tests, a defined list of external medical items, kids casualty visits, video call consultations with a paediatrician. Members must use a provider on the network to access these benefits once they have spent their annual MSA.</li> <li>Trauma Recovery Extender Benefit</li> </ul>	<ul style="list-style-type: none"> <li>You have cover for the Chronic Disease List conditions</li> <li>Full cover for approved medicine on Discovery Health's medicine list</li> <li>A set monthly amount available for medicine not on our list</li> </ul>
Essential Priority	<ul style="list-style-type: none"> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>An upfront amount is payable on a defined list of in-hospital procedures. The upfront amount falls away if these procedures are done out of hospital</li> <li>Limited Above Threshold Benefit</li> <li>R5 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover in ANY private hospital</li> <li>No overall hospital limit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> <li>An upfront amount is payable on a defined list of in-hospital procedures.</li> <li>The upfront amount falls away if these procedures are done out of hospital</li> </ul>	<p>Limited day-to-day cover:</p> <ul style="list-style-type: none"> <li>15% Medical Savings Account</li> <li>Limited Above Threshold Benefit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Day-to-day Extender Benefit pays for unlimited GP consultations and a defined list of external medical items. Members must use a provider on the network to access these benefits once they have spent their annual MSA.</li> <li>Trauma Recovery Extender Benefit</li> </ul>	<ul style="list-style-type: none"> <li>You have cover for the Chronic Disease List conditions</li> <li>Full cover for approved medicine on Discovery Health's medicine list</li> <li>A set monthly amount available for medicine not on our list</li> </ul>

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### Question 5:

Are you looking for the most economical cover in-hospital, essential chronic medicine cover and day-to-day cover through a Medical Savings Account?

You can choose a plan in the Saver Series where you can go to ANY hospital or a selected hospital network.

Plan selection	Distinguishing features	Hospital benefits	Day-to-day cover	Chronic condition cover
Classic Saver	<ul style="list-style-type: none"> <li>Access to a wider range of specialists who we have an arrangement with that we cover in full</li> <li>Other specialists are paid up to 200% of the Discovery Health Rate in hospital</li> <li>Out-of-hospital claims are covered from the available funds in the Medical Savings Account</li> <li>R5 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover in ANY private hospital</li> <li>No overall hospital limit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	<p>Limited day-to-day cover:</p> <ul style="list-style-type: none"> <li>25% Medical Savings Account</li> <li>Full cover when using a specialist who we have an arrangement with up to available funds in the MSA</li> <li>Day-to-day Extender Benefit pays for GP consultations, antenatal consultations and two 2D pregnancy scans, kids casualty visits, video call consultations with a paediatrician. Members must use a provider on the network to access these benefits once they have spent their annual MSA. These benefits are covered up to a defined family limit.</li> <li>Trauma Recovery Extender Benefit</li> </ul>	<ul style="list-style-type: none"> <li>You have cover for the Chronic Disease List conditions</li> <li>Full cover for approved medicine on Discovery Health's medicine list</li> <li>A set monthly amount available for medicine not on our list</li> </ul>
Essential Saver	<ul style="list-style-type: none"> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>Out-of-hospital claims are covered from the available funds in the Medical Savings Account</li> <li>R5 million International Travel Benefit</li> </ul>		<p>Limited day-to-day cover:</p> <ul style="list-style-type: none"> <li>15% Medical Savings Account</li> <li>Full cover when using a specialist who we have an arrangement with up to available funds in the MSA</li> <li>Day-to-day Extender Benefit pays for a limited number of GP consultations at a network GP when you have spent your MSA</li> <li>Trauma Recovery Extender Benefit</li> </ul>	

You can choose a plan with a selected hospital network for planned procedures in order to reduce your monthly contributions.

Plan selection	Distinguishing features	Hospital benefits	Day-to-day cover	Chronic condition cover
Classic Delta Saver	<ul style="list-style-type: none"> <li>Full cover at hospitals in the Delta Hospital Network</li> <li>For planned hospital admissions at any other hospital, you must pay an upfront payment of R7 100 to the hospital</li> <li>Access to a wider range of specialists who we have an arrangement with that we cover in full</li> <li>Other specialists are paid up to 200% of the Discovery Health Rate in hospital</li> <li>R5 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover at a private hospital in the Delta Hospital Network</li> <li>No overall hospital limit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	<p>Limited day-to-day cover:</p> <ul style="list-style-type: none"> <li>25% Medical Savings Account</li> <li>Specialists who we have arrangement with are paid in full up to available funds in the MSA</li> <li>Day-to-day Extender Benefit pays for GP consultations, antenatal consultations and two 2D pregnancy scans, kids casualty visits, video call consultations with a paediatrician. Members must use a provider on the network to access these benefits once they have spent their annual MSA. These benefits are covered up to a defined family limit.</li> <li>Trauma Recovery Extender Benefit</li> </ul>	<ul style="list-style-type: none"> <li>You have cover for Chronic Disease List Conditions</li> <li>Full cover for approved medicine on Discovery Health's medicine list</li> <li>You have cover for approved chronic medicine if you use MedXpress. A 20% co-payment applies if you don't use MedXpress</li> <li>A set monthly amount available for medicine not on our list</li> </ul>
Essential Delta Saver	<ul style="list-style-type: none"> <li>Full cover at hospitals in the Delta Hospital Network</li> <li>For planned hospital admissions at any other hospital, you must pay an upfront payment of R7 100 to the hospital</li> <li>Full cover when using a specialist who we have an agreement with</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>R5 million International Travel Benefit</li> </ul>		<p>Limited day-to-day cover:</p> <ul style="list-style-type: none"> <li>15% Medical Savings Account</li> <li>Specialists who we have an arrangement with are paid in full up to available funds in the MSA</li> <li>Day-to-day Extender Benefit pays for a limited number of GP consultations at a network GP when you have spent your MSA</li> <li>Trauma Recovery Extender Benefit</li> </ul>	
Coastal Saver	<ul style="list-style-type: none"> <li>Hospital cover at a selected network of private hospitals in the coastal province</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>R5 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover in a selected network of private hospitals in a coastal province</li> <li>No overall hospital limit</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	<p>Limited day-to-day cover:</p> <ul style="list-style-type: none"> <li>20% Medical Savings Account</li> <li>Full cover when using a specialist who we have an arrangement with up to available funds in the MSA</li> <li>Day-to-day Extender Benefit pays for a limited number of GP consultations at a network GP when you have spent your MSA</li> <li>Trauma Recovery Extender Benefit</li> </ul>	<ul style="list-style-type: none"> <li>You have cover for the Chronic Disease List conditions</li> <li>Full cover for approved medicine on Discovery Health's medicine list</li> <li>A set monthly amount available for medicine not on our list</li> </ul>

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### Question 6:

Are you looking for the most cost effective cover in-hospital, essential chronic medicine cover and a basket of essential day-to-day healthcare services paid by the Scheme with a fixed co-payment, which is accessed through an intuitive and personal digital platform?

If yes, you can choose between two plans within the Smart Series.

Plan selection	Distinguishing features	Hospital benefits	Day-to-day cover	Chronic condition cover
Classic Smart	<ul style="list-style-type: none"> <li>Full cover at hospitals in the Smart Hospital Network</li> <li>For planned hospital admissions at any other hospital, you must pay an upfront payment of R8 200 to the hospital</li> <li>Access to a wider range of specialists who we have an arrangement with that we cover in full</li> <li>Other specialists are paid up to 200% of the Discovery Health Rate in hospital</li> <li>R5 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover at a private hospital in the Smart Hospital Network</li> <li>No overall hospital limit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	<ul style="list-style-type: none"> <li>Unlimited cover for GP consultations at a GP in the Smart Plan network. A R50 co-payment applies for each consultation</li> <li>Members enjoy rich cover for a defined list of acute medicine prescribed by a Smart Plan network GP, subject to a co-payment of up to R10 for each item on the prescription</li> <li>Dentistry cover for a defined list of treatment with a R50 co-payment</li> <li>Optometry test benefit through any Mellins store with a R50 co-payment</li> <li>Defined list of treatment through sports injury benefit available through Network GP via HealthID</li> </ul>	<ul style="list-style-type: none"> <li>You have cover for the Chronic Disease List conditions</li> <li>Full cover for approved medicine on Discovery Health's medicine list</li> <li>You have cover for approved chronic medicine if you use MedXpress, Clicks or Dis-Chem. A 20% co-payment applies if you don't use the designated service provider</li> </ul>
Essential Smart	<ul style="list-style-type: none"> <li>Full cover hospital in the Smart Hospital Network</li> <li>For planned hospital admissions at any other hospital, you must pay an upfront payment of R8 200 to the hospital</li> <li>Access to a wider range of specialists who we have a payment arrangement with that we cover in full</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>R5 million International Travel Benefit</li> </ul>		<ul style="list-style-type: none"> <li>Unlimited cover for GP consultations at a GP in the Smart Plan network. A R100 co-payment applies for each consultation</li> <li>Dentistry cover for a defined list of treatment with a R100 co-payment</li> <li>Optometry test benefit through any Mellins store with a R100 co-payment</li> </ul>	



### Question 7:

Do you want a value-for-money hospital plan which provides unlimited private hospital cover and essential cover for chronic medicine with no day-to-day cover?

You can choose a plan in the Core Series where you can go to ANY hospital or a selected hospital network.

Plan selection	Distinguishing features	Hospital benefits	Day-to-day cover	Chronic condition cover
Classic Core	<ul style="list-style-type: none"> <li>Access to a wider range of specialists who we have an arrangement with that we cover in full</li> <li>Other specialists are paid up to 200% of the Discovery Health Rate in hospital</li> <li>No day-to-day cover</li> <li>R5 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover in ANY private hospital</li> <li>No overall hospital limit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	No day-to-day cover	<ul style="list-style-type: none"> <li>You have cover for the Chronic Disease List conditions</li> <li>Full cover for approved medicine on Discovery Health's medicine list</li> <li>A set monthly amount available for medicine not on our list</li> <li>You have cover for approved chronic medicine if you use MedXpress. A 20% co-payment applies if you don't use MedXpress</li> </ul>
Essential Core	<ul style="list-style-type: none"> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>No day-to-day cover</li> <li>R5 million International Travel Benefit</li> </ul>			

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You can choose a plan with a selected hospital network for planned procedures in order to reduce your monthly contributions

Plan selection	Distinguishing features	Hospital benefits	Day-to-day cover	Chronic condition cover
Classic Delta Core	<ul style="list-style-type: none"> <li>Full cover at hospitals in the Delta Hospital Network</li> <li>For planned hospital admissions at any other hospital, you must pay an upfront payment of R7 100 to the hospital</li> <li>Access to a wider range of specialists who we have an arrangement with that we cover in full</li> <li>Other specialists are paid up to 200% of the Discovery Health Rate in hospital</li> <li>R5 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover at a private hospital in the Delta Hospital Network</li> <li>No overall hospital limit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	No day-to-day cover	<ul style="list-style-type: none"> <li>You have cover for Chronic Disease List conditions</li> <li>Full cover for approved medicine on Discovery Health's medicine list</li> <li>You have cover for approved chronic medicine if you use MedXpress. A 20% co-payment applies if you don't use MedXpress</li> <li>A set monthly amount available for medicine not on our list</li> </ul>
Essential Delta Core	<ul style="list-style-type: none"> <li>Full cover at hospitals in the Delta Hospital Network</li> <li>For planned hospital admissions at any other hospital, you must pay an upfront payment of R7 100 to the hospital</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>R5 million International Travel Benefit</li> </ul>			
Coastal Core	<ul style="list-style-type: none"> <li>Hospital cover at a selected network of private hospitals in a coastal province</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>R5 million International Travel Benefit</li> </ul>	<ul style="list-style-type: none"> <li>Cover in a selected network of private hospitals in a coastal province</li> <li>No overall hospital limit</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>		



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### Question 8:

Do you need affordable medical cover and are you willing to use a network of providers both in and out of hospital?

You can choose a plan in the KeyCare Series.

Plan selection	Distinguishing features	Hospital benefits	Day-to-day cover	Chronic condition cover
KeyCare Plus	<ul style="list-style-type: none"> <li>Full private cover for basic primary healthcare and for planned admissions within a network of facilities</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>Access to basic day-to-day cover</li> </ul>	<ul style="list-style-type: none"> <li>There is no overall hospital limit</li> <li>Access to private hospital cover. Full cover in the Full Cover Hospital Network and up to 70% of the DHR in the Partial Cover Hospital Network</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	<ul style="list-style-type: none"> <li>Basic primary healthcare day-to-day claims are covered when you use a healthcare professional in the KeyCare primary care network</li> <li>Access to a Specialist Benefit</li> <li>Cover for casualty unit visits through the Casualty Benefit, subject to a co-payment</li> <li>The Antenatal Benefit provides cover for defined antenatal healthcare services</li> <li>Mobility Devices Benefit</li> <li>Trauma Recovery Extender Benefit</li> </ul>	<ul style="list-style-type: none"> <li>You have cover for the Chronic Disease List conditions</li> <li>Full cover for approved medicine on KeyCare medicine list</li> </ul>
KeyCare Access	<ul style="list-style-type: none"> <li>Unlimited cover in the KeyCare Full Cover and Partial Cover Hospital Networks for emergencies and trauma and in the KeyCare Access Hospital Network for childbirth and care for newborns</li> <li>Other approved hospital admissions are covered in our contracted network of state facilities</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>Access to basic day-to-day cover</li> </ul>	<ul style="list-style-type: none"> <li>Unlimited cover for emergencies and trauma in the KeyCare Full Cover and Partial Cover Hospital Network of private hospitals</li> <li>Unlimited cover in the KeyCare Access Hospital Network of 31 private hospitals for childbirth and care for your baby up to 12 months after childbirth.</li> <li>Unlimited cover for approved admissions for other hospital care in our contracted network of state facilities.</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	<ul style="list-style-type: none"> <li>Access to a Specialist Benefit for defined healthcare services</li> <li>Casualty Benefit according to your plan's benefits</li> <li>The Antenatal Benefit provides cover for defined antenatal healthcare services</li> <li>Mobility Devices Benefit</li> <li>Trauma Recovery Extender Benefit</li> </ul>	
KeyCare Core	<ul style="list-style-type: none"> <li>Access to private hospital cover. Full cover in the Full Cover Hospital Network and up to 70% of the DHR in the Partial Cover Hospital Network</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Other specialists are paid up to 100% of the Discovery Health Rate in hospital</li> <li>No day-to-day cover</li> </ul>	<ul style="list-style-type: none"> <li>Access to private hospital cover. Full cover in the Full Cover Hospital Network and up to 70% of the DHR in the Partial Cover Hospital Network</li> <li>No overall hospital limit</li> <li>Full cover when using a specialist who we have an arrangement with</li> <li>Emergency response services nationwide with Discovery 911</li> </ul>	<ul style="list-style-type: none"> <li>No day-to-day cover</li> <li>Access to a Specialist Benefit for defined healthcare services</li> <li>The Antenatal Benefit provides cover a list of healthcare services</li> </ul>	<ul style="list-style-type: none"> <li>You have cover for the Chronic Disease List conditions</li> <li>Full cover for approved medicine on KeyCare medicine list</li> </ul>

Please note that this is a high-level guide to selecting a plan for 2017. You should consult your financial adviser for a more detailed analysis before making a decision.



## Compare our plans

### Summary

### Hospital cover

	EXECUTIVE	COMPREHENSIVE			PRIORITY	
		Classic Zero MSA	Classic	Essential	Classic	Essential
	The most extensive cover for in-hospital and day-to-day benefits	Comprehensive cover for in-hospital and day-to-day benefits			Cost-effective in-hospital and day-to-day benefits	
	<ul style="list-style-type: none"> <li>Unlimited cover in any private hospital, including private ward cover</li> <li>Guaranteed full cover in hospital for specialists on a payment arrangement, and up to 300% of the DHR for other specialists</li> <li>Full cover for chronic medicine for all CDL conditions plus some additional chronic conditions; plus access to an exclusive list of brand medicines</li> <li>Highest Medical Savings Account and an unlimited Above Threshold Benefit for your day-to-day healthcare needs</li> <li>Additional cover for GP consultation fees, kid's casualty visits, preferred medicine, blood tests, antenatal consultations, video call consultations with paediatricians and some external medical items</li> <li>Cover for medical emergencies when travelling</li> </ul>	<ul style="list-style-type: none"> <li>Unlimited private hospital cover</li> <li>Guaranteed full cover in hospital for specialists on a payment arrangement, and up to 200% of the DHR on Classic plans and 100% on Essential plans for other healthcare professionals</li> <li>Full cover for chronic medicine for all CDL conditions plus some additional chronic conditions</li> <li>A choice of a high or no Medical Savings Account and an unlimited Above Threshold Benefit for your day-to-day healthcare needs</li> <li>Additional cover for GP consultation fees and some external medical items. The Classic Comprehensive Plan also covers preferred medicine, blood tests, antenatal consultations, kid's casualty visits and video call consultations with paediatricians</li> <li>Cover for medical emergencies when travelling</li> </ul>			<ul style="list-style-type: none"> <li>Unlimited cover in any private hospital</li> <li>Guaranteed full cover in hospital for specialists on a payment arrangement, and up to 200% of the DHR on the Classic Plan and 100% on the Essential Plan for other healthcare professionals</li> <li>Full cover for chronic medicine for all CDL conditions</li> <li>A Medical Savings Account and limited Above Threshold Benefit for your day-to-day healthcare needs</li> <li>Additional cover for GP consultation fees and some external medical items. The Classic Plan also covers blood tests, antenatal consultations, kid's casualty visits and video call consultations with paediatricians</li> <li>Cover for medical emergencies when travelling</li> </ul>	
Hospitals (private hospital cover in a general ward)	Unlimited cover at any private hospital and private ward cover of up to R1 750 each day	Unlimited cover at any private hospital.			Unlimited cover at any private hospital.	
Upfront payments to hospitals	No upfront payment	On Delta options, you must pay an upfront payment of R7 100 to the hospital for planned admissions outside the Delta Hospital Network.			An upfront payment of between R2 800 and to R13 850 applies for a defined list of procedures.	
Specialists we have a payment arrangement with	Full cover	Full cover			Full cover	
Specialists we do not have a payment arrangement with	300% of the DHR	200% of the DHR		100% of the DHR	200% of the DHR	100% of the DHR
Other healthcare professionals	100% of the DHR	200% of the DHR		100% of the DHR	200% of the DHR	100% of the DHR
Radiology and pathology	100% of the DHR	100% of the DHR			100% of the DHR	
Scopes (gastroscopy, colonoscopy, sigmoidoscopy and proctoscopy)	We pay the hospital account from the Hospital Benefit and all related accounts from the Medical Savings Account and Above Threshold Benefit.	We pay the first R3 150 of the hospital account from your day-to-day benefits and the balance of the hospital account and related accounts from the Hospital Benefit. If done in the doctor's rooms, you won't have to pay an amount upfront. We pay the account from the Hospital Benefit.			You must pay R3 600 upfront, we pay the balance of hospital account and related accounts from the Hospital Benefit. If the procedure can be done out of hospital, for example in the doctor's rooms, you won't have to pay an amount upfront to the hospital. Please call us beforehand to confirm your benefits.	
MRI and CT scans	Paid from day-to-day benefits up to 100% of the DHR.	If done as part of an approved admission, we will pay up to 100% of the DHR from the Hospital Benefit.			If done as part of an approved admission, we will pay up to 100% of the DHR from the Hospital Benefit.	
<ul style="list-style-type: none"> <li>For conservative back and neck treatment, or</li> <li>If not related to your admission</li> </ul>		We pay the first R2 750 of the scan from the Above Threshold Benefit once you reach it. We pay the balance of the scan from the Hospital Benefit, up to 100% of the DHR.	We pay the first R2 750 of the scan from your day-to-day benefits. We pay the balance of the scan from your the Hospital Benefit, up to 100% of the DHR.	We pay the first R2 750 of the scan from day-to-day benefits. We pay the balance of the scan from the Hospital Benefit up to 100% of the DHR. For conservative back and neck treatment, you must also pay the first R2 800 of the hospital account. We pay the balance of the scan from the Hospital Benefit up to 100% of the DHR.		

Chronic

Cancer cover

Day-to-day benefits

	EXECUTIVE	COMPREHENSIVE			PRIORITY	
		Classic Zero MSA	Classic	Essential	Classic	Essential
Conditions	You have cover for the 27 CDL conditions according to the Prescribed Minimum Benefits list as well as additional conditions on our Additional Disease List. Your condition needs to be approved for it to be covered.	You have cover for the 27 CDL conditions according to the Prescribed Minimum Benefits list as well as additional conditions on our Additional Disease List. Your condition needs to be approved for it to be covered.			You have cover for the 27 CDL conditions according to the Prescribed Minimum Benefits list. Your condition needs to be approved for it to be covered.	
Medicine cover	Approved medicine on our medicine list covered in full (not applicable to ADL conditions). Medicine not on our list paid up to 100% of the DHR up to a maximum of the monthly Chronic Drug Amount.	Approved medicine on our medicine list covered in full (not applicable to ADL conditions). Medicine not on our list paid up to 100% of the DHR up to a maximum of the monthly Chronic Drug Amount.			Approved medicine on our medicine list covered in full. Medicine not on our list paid up to 100% of the DHR up to a maximum of the monthly Chronic Drug Amount.	
Benefit	We cover the first R400 000 of approved cancer treatment in full, over a 12-month cycle.	We cover the first R400 000 of approved cancer treatment in full over a 12-month cycle.			We cover the first R200 000 of the approved cancer treatment in full over a 12-month cycle.	
Co-payments	You will be required to pay 20% of the cost on all further treatment once costs for cancer treatment go over R400 000. Prescribed Minimum Benefits are covered in full.	You will be required to pay 20% of the cost on all further treatment once costs for cancer treatment go over R400 000. Prescribed Minimum Benefits are covered in full.			You will be required to pay 20% of the cost on all further treatment once costs for cancer treatment go over R200 000. Prescribed Minimum Benefits are covered in full.	
Medical Savings Account	Pays for day-to-day medical expenses like GP consultation fees, radiology and pathology as long as you have money available.	Pays for day-to-day medical expenses like GP consultation fees, radiology and pathology as long as you have money available. Not available on Classic Zero MSA.			Pays for day-to-day medical expenses like GP consultation fees, radiology and pathology as long as you have money available.	
Self-payment Gap	If you run out of money in your Medical Savings Account before your claims add up to the Annual Threshold, you will have to pay for your medical expenses.	If you run out of money in your Medical Savings Account before your claims add up to the Annual Threshold, you will have to pay for your day-to-day medical expenses. Not applicable to Classic Zero MSA.			If you run out of money in your Medical Savings Account before your claims add up to the Annual Threshold, you will have to pay for your day-to-day medical expenses.	
Day-to-day Extender Benefit	Pays for certain day-to-day benefits after you have run out of money in your Medical Saving Account and before you reach the Annual Threshold.	Pays for certain day-to-day benefits after you have run out of money in your Medical Savings account and before you reach the Annual Threshold. Not available on Classic Zero MSA.			Pays for certain day-to-day benefits after you have run out of money in your Medical Saving Account and before you reach the Annual Threshold.	
	Covers unlimited GP consultation fees, antenatal consultations, kid's casualty visits, video call consultations with paediatricians, preferred day-to-day medicine (schedule 3 and above), unlimited blood tests, and a defined list of external medical items. You must use a provider in our network.	This plan does not offer this benefit.	Covers unlimited GP consultation fees and some external medical items. The Classic Comprehensive Plan also covers antenatal consultations, kid's casualty visits, video call consultations with paediatricians, preferred day-to-day medicine (schedule 3 and above) and unlimited blood tests. You must use a provider in our network.		Covers unlimited GP consultation fees and some external medical items. The Classic Plan also covers antenatal consultations, kid's casualty visits, video call consultations with paediatricians and blood tests. You must use a provider in our network.	
Above Threshold Benefit	The Above Threshold Benefit is unlimited.	The Above Threshold Benefit is unlimited.			The Above Threshold Benefit is limited. Main member R11 150. Adult R7 950. Child dependant R3 850.	
MRI and CT scans	Paid from your available Medical Savings Account or Above Threshold Benefit.	We pay the first R2 750 of your MRI or CT scan from your day-to-day benefits. We cover the balance of the scan from the Hospital Benefit, up to the DHR. For conservative back and neck scans, where specific rules apply. On Classic Zero MSA, these are covered from the Above Threshold Benefit once you reach it.			We pay the first R2 750 of your MRI or CT scan from your day-to-day benefits. We cover the balance of the scan from the Hospital Benefit, up to the DHR. For conservative back and neck scans, specific rules and limits may apply.	

Additional benefits

	EXECUTIVE	COMPREHENSIVE			PRIORITY	
		Classic Zero MSA	Classic	Essential	Classic	Essential
Screening and Prevention Benefit	Covers certain tests at one of our wellness network providers, like blood glucose, blood pressure, cholesterol and body mass index. We also cover a mammogram every 2 years, Pap smear every 3 years, PSA (a prostate screening test) once a year and HIV screening tests. Members 65 years or older and members registered for certain chronic conditions are also covered for a seasonal flu vaccine.  Additional, and/or more frequent screening is available for those who meet our clinical criteria.	Covers certain tests at one of our wellness network providers, like blood glucose, blood pressure, cholesterol and body mass index. We also cover a mammogram every 2 years, Pap smear every 3 years, PSA (a prostate screening test) once a year and HIV screening tests. Members 65 years or older and members registered for certain chronic conditions are also covered for a seasonal flu vaccine.  Additional, and/or more frequent screenings are available for those who meet our clinical criteria.			Covers certain tests at one of our wellness network providers, like blood glucose, blood pressure, cholesterol and body mass index. We also cover a mammogram every 2 years, Pap smear every 3 years, PSA (a prostate screening test) once a year and HIV screening tests. Members 65 years or older and members registered for certain chronic conditions are also covered for a seasonal flu vaccine.  Additional, and/or more frequent screening is available for those who meet our clinical criteria.	
Kid's screening	Covers growth assessment and health and milestone tracking at any one of our wellness network providers.	Covers growth assessment and health and milestone tracking at any one of our wellness network providers.			Covers growth assessment and health and milestone tracking at any one of our wellness network providers.	
Trauma Recovery Extender Benefit	Out-of-hospital claims for recovery after certain traumatic events are covered on this benefit for the rest of the year in which the trauma took place, and a year after the trauma.	This plan does not offer this benefit.		Out-of-hospital claims for recovery after certain traumatic events are covered on this benefit for the rest of the year in which the trauma took place, and a year after the trauma.	Out-of-hospital claims for recovery after certain traumatic events are covered on this benefit for the rest of the year in which the trauma took place, and a year after the trauma.	
Specialised Medicine and Technology Benefit	Cover up to R200 000 each person for a defined list of the latest and most advanced treatments. A co-payment of up to 20% and specific rules apply to this benefit.	Cover up to R200 000 each person for a defined list of the latest and most advanced treatments. A co-payment of up to 20% and specific rules apply to this benefit.			These plans do not offer these benefits.	
Overseas Treatment Benefit	Up to R500 000 for each person travelling for evidence-based healthcare treatment not available in South Africa. A co-payment of 20% and specific rules apply to this benefit.	Up to R500 000 for each person travelling for evidence-based healthcare treatment not available in South Africa. A co-payment of 20% and specific rules apply to this benefit.				
Additional cover for allied, therapeutic psychology and external medical items	Provides unlimited cover for a list of allied healthcare services, like physiotherapy and external medical items. This unlimited cover is for a defined list of conditions, for example quadriplegia and cerebral palsy. Cover depends on your condition and meeting the criteria for it.	Provides unlimited cover for a list of allied healthcare services, like physiotherapy and external medical items. This unlimited cover is for a defined list of conditions, for example quadriplegia and cerebral palsy. Cover depends on your condition and meeting the criteria for it.				

Summary

Hospital cover

	SAVER			SMART		CORE			KEYCARE		
	Classic	Essential	Coastal	Classic	Essential	Classic	Essential	Coastal	Core	Plus	Access
	Economical in-hospital and day-to-day benefits			Affordable in-hospital benefits and day-to-day cover		Value-for-money hospital plan			Affordable medical aid cover		
	<ul style="list-style-type: none"> <li>Unlimited private hospital cover</li> <li>Guaranteed full cover in hospital for specialists on a payment arrangement, and up to 200% of the DHR on Classic plans and 100% on Essential and Coastal plans for other healthcare professionals</li> <li>Full cover for chronic medicine for all CDL conditions</li> <li>A Medical Savings Account for your day-to-day healthcare needs</li> <li>Additional cover for GP consultation fees. The Classic plans also cover antenatal consultations, kid's casualty visits and video call consultations with paediatricians</li> <li>Cover for medical emergencies when travelling</li> </ul>			<ul style="list-style-type: none"> <li>Unlimited private hospital cover in a Smart network hospital</li> <li>Guaranteed full cover in hospital for specialists on a payment arrangement, and up to 200% of the DHR on the Classic Plan and up to 100% of the DHR on the Essential Plan for other healthcare professionals</li> <li>Day-to-day cover for GP consultation fees, acute medicine, eye and dental check-up and sports-related injuries with fixed payments. Cover depends on the plan you choose.</li> <li>Full cover for chronic medicine on our medicine list for all CDL conditions when you use MedXpress, Clicks or Dis-Chem</li> <li>Cover for medical emergencies when travelling</li> </ul>		<ul style="list-style-type: none"> <li>Unlimited private hospital cover</li> <li>Guaranteed full cover in hospital for specialists on a payment arrangement, and up to 200% of the DHR on Classic plans and 100% on Essential and Coastal plans for other healthcare professionals</li> <li>Full cover for chronic medicine for all CDL conditions when you use MedXpress</li> <li>Cover for medical emergencies when travelling</li> </ul>			<ul style="list-style-type: none"> <li>Unlimited emergency and trauma cover in our KeyCare network of hospitals and planned hospital cover on KeyCare Core, KeyCare Plus and KeyCare Access. Full cover in the Full Cover Hospital Network and up to 70% of the DHR in the Partial Cover Hospital Network</li> <li>Guaranteed full cover in hospital for specialists on the KeyCare network, and up to 100% of the DHR for other healthcare professionals</li> <li>Unlimited cover for medically appropriate GP consultations, blood tests, X-rays or medicine in our KeyCare Network on the KeyCare Plus and KeyCare Access plans</li> <li>Essential cover for chronic medicine on the KeyCare medicine list for all CDL conditions</li> <li>Cover for medical emergencies in South Africa</li> </ul>		
Hospitals (private hospital cover in a general ward)	Unlimited cover at any private hospital.	Unlimited cover at selected private hospitals in the coastal provinces.	Unlimited private hospital cover in the Smart Network.	Unlimited hospital cover at any private hospital.	Unlimited cover at selected private hospitals in the coastal network.	Full cover on Delta options when using the Delta Hospital Network of private hospitals.	Full cover on Delta options when using the Delta Hospital Network of private hospitals.	Full cover in the Full Cover Hospital Network, and up to 70% of the DHR in the Partial Cover Hospital Network. On KeyCare Access cover is limited to emergencies and trauma only.	Unlimited cover in the KeyCare Hospital Network. A list of procedures are covered in the day surgery network.	Unlimited cover for emergencies and trauma in the KeyCare network of private hospitals. Childbirth and care for your newborn covered in the KeyCare Access network. Other conditions are covered in a contracted network of state facilities.	
Upfront payments to hospitals	On Delta options, you must pay an upfront payment of R7 100 to the hospital for planned admissions outside the Delta Hospital Network.	If you do not use a coastal hospital in our selected network, you will have to pay all costs. If you use a hospital outside the coastal region, we pay up to 70% of the DHR of the hospital account and you must pay the difference. This does not apply in an emergency.	For planned admissions at hospitals outside of the Smart Hospital Network, you must pay an upfront payment of R8 200 to the hospital.	On Delta options, you must pay an upfront payment of R7 100 to the hospital for planned admissions outside the Delta Hospital Network.	If you do not use a coastal hospital in our selected network, you will have to pay all costs. If you use a hospital outside the coastal region, we pay up to 70% of the DHR of the hospital account and you must pay the difference. This does not apply in an emergency.	If you use a hospital in the Partial Cover Network, we pay up to 70% of the DHR. On KeyCare Access cover is limited to emergencies and trauma. If you do not use hospitals in the networks, you will have to pay all costs. This does not apply in an emergency.					
Specialists we have a payment arrangement with	Full cover			Full cover		Full cover			Full cover		
Specialists we do not have a payment arrangement with	200% of the DHR	100% of the DHR	200% of the DHR	100% of the DHR	200% of the DHR	100% of the DHR	100% of the DHR	100% of the DHR	100% of the DHR		

Hospital cover

Chronic

Cancer cover

	SAVER			SMART		CORE			KEYCARE		
	Classic	Essential	Coastal	Classic	Essential	Classic	Essential	Coastal	Core	Plus	Access
Other healthcare professionals	200% of the DHR	100% of the DHR		200% of the DHR	100% of the DHR	200% of the DHR	100% of the DHR		100% of the DHR		
Radiology and pathology	100% of the DHR			100% of the DHR		100% of the DHR			100% of the DHR		
Scopes (gastroscopy, colonoscopy, sigmoidoscopy and proctoscopy)	We pay the first R3 900 of the hospital account from your day-to-day benefits and the balance of the hospital account and related accounts from the Hospital Benefit. If done in the doctor's rooms, you won't have to pay an amount upfront. We pay the account from the Hospital Benefit.			You must pay the first R3 900 of the hospital account. We pay the balance of the account and related accounts from the Hospital Benefit. If done in the doctor's rooms, you won't have to pay an amount upfront. We pay the account from the Hospital Benefit.		You must pay the first R3 900 of the hospital account. We pay the balance of the account and related accounts from the Hospital Benefit. If done in the doctor's rooms, you won't have to pay an amount upfront. We pay the account from the Hospital Benefit.			We cover scopes at our day-surgery network.		We cover scopes at our network of contracted state facilities and in the KeyCare Access Hospital Network if related to emergencies, trauma, childbirth and care for a newborn.
MRI and CT scans	If done as part of an approved admission, we will pay up to 100% of the DHR from the Hospital Benefit.			If done as part of an approved hospital admission, we will pay up to 100% of the DHR from the Benefit.		If done as part of an approved admission, we pay up to 100% of the DHR from the Hospital Benefit.			If done as part of an approved admission, we will pay up to 100% of the DHR from the Hospital Benefit.		
<ul style="list-style-type: none"> <li>▪ For conservative back and neck treatment, or</li> <li>▪ If not related to your admission</li> </ul>	If not related to your admission, we pay the first R2 750 of the scan from your day-to-day benefits. We pay the balance of the scan from the Hospital Benefit, up to 100% of the DHR.			If not related to your admission, you need to pay the first R2 750 of the scan from your pocket. We pay the balance of the scan from the Hospital Benefit, up to 100% of the DHR.	If not related to your admission or if for conservative back or neck treatment, we do not pay for it.	If not related to your admission or if for conservative back or neck treatment, we do not pay for it.			If not related to your admission, we pay it from the Specialist Benefit up to a limit of R3 570 each person each year.		
Conditions	You have cover for the 27 CDL conditions according to the Prescribed Minimum Benefits list. Your condition needs to be approved for it to be covered.			You have cover for the 27 CDL conditions according to the Prescribed Minimum Benefits list. Your condition needs to be approved for it to be covered.		You have cover for the 27 CDL conditions according to the Prescribed Minimum Benefits list. Your condition needs to be approved for it to be covered.			You have cover for the 27 CDL conditions according to the Prescribed Minimum Benefits list. Your condition needs to be approved for it to be covered.		
Medicine cover	Approved medicine on our medicine list covered in full. Medicines not on our list paid up to 100% of the DHR up to a maximum of the monthly Chronic Drug Amount. On Delta options, your designated service provider is MedXpress.			Approved medicine on our medicine list covered in full, when you use MedXpress, Clicks or Dis-Chem.		Approved medicine on our medicine list when you use MedXpress. Medicines not on our list paid up to 100% of the DHR up to a maximum of the monthly Chronic Drug Amount.			Approved medicine must be purchased from one of our network pharmacies or from your chosen GP. If medicine is purchased elsewhere, you will have to pay a 20% co-payment. Your chosen GP must prescribe the chronic medicine.		
Benefit	We cover the first R200 000 of the approved cancer treatment in full over a 12-month cycle.			We cover the first R200 000 of the approved cancer treatment in full over a 12-month cycle.		We cover the first R200 000 of the approved cancer treatment in full over a 12-month cycle.			We cover cancer treatment according to the Prescribed Minimum Benefits and if you go to a cancer specialist in our network.		We cover cancer treatment according to the Prescribed Minimum Benefits in a network of contracted state facilities.
Co-payments	You will have to pay 20% of the cost on all further treatment once costs for cancer treatment go over R200 000. Prescribed Minimum Benefits are covered in full.			You will have to pay 20% of the cost on all further treatment once costs for cancer treatment go over R200 000. Prescribed Minimum Benefits are covered in full.		You will have to pay 20% of the cost on all further treatment once costs for cancer treatment go over R200 000. Prescribed Minimum Benefits are covered in full.					

Day-to-day benefits

	SAVER			SMART		CORE			KEYCARE		
	Classic	Essential	Coastal	Classic	Essential	Classic	Essential	Coastal	Core	Plus	Access
Medical Savings Account	Pays for day-to-day medical expenses like GP consultation fees, radiology and pathology as long as you have money available.			You have cover for unlimited GP consultation fees, full cover for video call consultations, one eye check and one dental check. The Classic Plan also covers acute medicine and sports-related injuries. Fixed payments apply to these benefits.		Not applicable to these plans.			This plan does not offer this benefit.		
Self-payment Gap	You need to pay claims when your Medical Savings Account runs out.			Not applicable to this plan.					Not applicable to these plans.		
Day-to-day Extender Benefit	Pays for certain day-to-day benefits after you have run out of money in your Medical Savings Account.										
	Covers a defined number of GP consultation fees. The Classic plans also cover antenatal consultations, kid's casualty visits and video call consultations with paediatricians. You must use a provider in our network.										
Above Threshold Benefit	These plans do not offer this benefit.										
MRI and CT scans	We pay the first R2 750 of MRI or CT scan from your available Medical Savings Account. We cover the balance of the scan from the Hospital Benefit, up to the DHR. For conservative back and neck scans, specific rules and limits may apply.			You must pay the first R2 750 of MRI or CT scan from your pocket. We cover the balance of the scan from the Hospital Benefit, up to the DHR. For conservative back and neck scans, specific rules and limits may apply.					MRI and CT scans are paid from the Specialist Benefit up to a limit of R3 570 each person each year.		

Additional benefits

Screening and Prevention Benefit	Covers certain tests at one of our wellness network providers, like blood glucose, blood pressure, cholesterol and body mass index. We also cover a mammogram every 2 years, Pap smear every 3 years, PSA (a prostate screening test) once a year and HIV screening tests. Members 65 years or older and members registered for certain chronic conditions are also covered for a seasonal flu vaccine. Additional, and/or more frequent screening is available for those who meet our clinical criteria.			Covers certain tests at one of our wellness network providers, like blood glucose, blood pressure, cholesterol and body mass index. We also cover a mammogram every 2 years, Pap smear every 3 years, PSA (a prostate screening test) once a year and HIV screening tests. Members 65 years or older and members registered for certain chronic conditions are also covered for a seasonal flu vaccine. Additional, and/or more frequent screening is available for those who meet our clinical criteria.		Covers certain tests at one of our wellness network providers, like blood glucose, blood pressure, cholesterol and body mass index. We also cover a mammogram every 2 years, Pap smear every 3 years, PSA (a prostate screening test) once a year and HIV screening tests. Members 65 years or older and members registered for certain chronic conditions are also covered for a seasonal flu vaccine. Additional, and/or more frequent screening is available for those who meet our clinical criteria.			Covers certain tests at one of our wellness network providers, like blood glucose, blood pressure, cholesterol and body mass index. We also cover a mammogram every 2 years, Pap smear every 3 years, PSA (a prostate screening test) once a year and HIV screening tests. Members 65 years or older and members registered for certain chronic conditions are also covered for a seasonal flu vaccine. Additional, and/or more frequent screening is available for those who meet our clinical criteria.		
Kid's screening	Covers growth assessment and health and milestone tracking at any one of our wellness network providers.			Covers growth assessment and health and milestone tracking at any one of our wellness network providers.		Covers growth assessment and health and milestone tracking at any one of our wellness network providers.			Covers growth assessment and health and milestone tracking at any one of our wellness network providers.		
Trauma Recovery Extender Benefit	Out-of-hospital claims for recovery after certain traumatic events are covered on this benefit for the rest of the year in which the trauma took place, and a year after the trauma.			Out-of-hospital claims for recovery after certain traumatic events are covered on this benefit for the rest of the year in which the trauma took place, and a year after the trauma.		This plan does not offer this benefit.			These plans do not offer these benefits.		
Specialised Medicine and Technology Benefit	These plans do not offer these benefits.			These plans do not offer these benefits.					This plan does not offer this benefit.		
Overseas Treatment Benefit									Out-of-hospital claims for recovery after certain traumatic events are covered on this benefit for the rest of the year in which the trauma took place, and a year after the trauma.		
Additional cover for allied, therapeutic psychology and external medical items									These plans do not offer these benefits.		



# Discovery Health Medical Scheme 2017 contributions

Series	Plan	Contributions			Contributions to Medical Savings Account			Total contributions		
		Main member	Adult	Child*	Main member	Adult	Child*	Main member	Adult	Child*
Executive	Executive Plan	4 158	4 158	792	1 386	1 386	263	5 544	5 544	1 055
	Classic Comprehensive	3 380	3 198	674	1 126	1 066	224	4 506	4 264	898
Comprehensive	Classic Delta Comprehensive	3045	2 882	606	1 014	960	201	4 059	3 842	807
	Classic Comprehensive Zero MSA	3 380	3 199	674	No Medical Savings Account			3 380	3 199	674
	Essential Comprehensive	3 219	3 043	648	568	537	114	3 787	3 580	762
	Essential Delta Comprehensive	2 899	2 738	582	511	483	102	3 410	3 221	684
	Classic Priority	2 226	1 753	891	742	584	296	2 968	2 337	1 187
Priority	Essential Priority	2 169	1 704	865	382	300	152	2 551	2 004	1 017
Saver	Classic Saver	1 933	1 522	774	644	507	257	2 577	2 029	1 031
	Classic Delta Saver	1 544	1 218	620	514	405	206	2 058	1 623	826
	Essential Saver	1 740	1 306	697	307	230	122	2 047	1 536	819
	Essential Delta Saver	1 389	1 046	557	245	184	98	1 634	1 230	655
	Coastal Saver	1 606	1 205	647	401	301	161	2 007	1 506	808
Smart	Classic Smart	1 535	1 209	612	No Medical Savings Account			1 535	1 209	612
	Essential Smart	1 100	1 100	1 100	No Medical Savings Account			1 100	1 100	1 100
Core	Classic Core	1 918	1 510	767	No Medical Savings Account			1 918	1 510	767
	Classic Delta Core	1 535	1 209	612	No Medical Savings Account			1 535	1 209	612
	Essential Core	1 648	1 234	661	No Medical Savings Account			1 648	1 234	661
	Essential Delta Core	1 317	989	528	No Medical Savings Account			1 317	989	528
	Coastal Core	1 496	1 122	596	No Medical Savings Account			1 496	1 122	596
KeyCare	KeyCare Plus 0-8 100	914	914	331	No Medical Savings Account			914	914	331
	KeyCare Plus 8 101-11 550	1 280	1 280	358	No Medical Savings Account			1 280	1 280	358
	KeyCare Plus 11 551+	1 906	1 906	510	No Medical Savings Account			1 906	1 906	510
	KeyCare Access 0-5 050	644	644	281	No Medical Savings Account			644	644	281
	KeyCare Access 5 051-8 100	859	859	309	No Medical Savings Account			859	859	309
	KeyCare Access 8 101-11 550	1 241	1 241	348	No Medical Savings Account			1 241	1 241	348
	KeyCare Access 11 551+	1 863	1 863	503	No Medical Savings Account			1 863	1 863	503
	KeyCare Core 0-8 100	731	731	190	No Medical Savings Account			731	731	190
	KeyCare Core 8 101-11 550	912	912	224	No Medical Savings Account			912	912	224
	KeyCare Core 11 551+	1 408	1 408	318	No Medical Savings Account			1 408	1 408	318

\* We count a maximum of three children when we work out the monthly contribution and annual Medical Savings Account.

\*\* Income verification will be conducted for the lower income bands. Income is considered as: The higher of the main member or registered spouse or partner's earnings, commission and rewards from employment; interest from investments; income from leasing of assets or property; distributions received from a trust, pension and/or provident fund; receipt of any financial assistance received from any statutory social assistance programme.

# Annual Medical Savings Account

Series	Plan	Main member	Adult	Child*
Executive	Executive Plan	16 632	16 632	3 156
Comprehensive	Classic Comprehensive	13 512	12 792	2 688
	Classic Delta Comprehensive	12 168	11 520	2 412
	Essential Comprehensive	6 816	6 444	1 368
	Essential Delta Comprehensive	6 132	5 796	1 224
Priority	Classic Priority	8 904	7 008	3 552
	Essential Priority	4 584	3 600	1 824
Saver	Classic Saver	7 728	6 084	3 084
	Classic Delta Saver	6 168	4 860	2 472
	Essential Saver	3 684	2 760	1 464
	Essential Delta Saver	2 940	2 208	1 176
	Coastal Saver	4 812	3 612	1 932

\* We count a maximum of three children when we work out the annual Medical Savings Account.  
If you join the medical scheme after January, you won't get the full amount because it is calculated by counting the remaining months in the year.

# Annual Threshold Amounts

## Annual Threshold

	Main member	Adult	Child*
Executive	16 600	16 600	3 150
Comprehensive	15 500	15 500	2 950
Priority	13 150	9 850	4 300

## Above Threshold Benefit limits

	Main member	Adult	Child*
Executive		unlimited	
Comprehensive			
Priority	11 150	7 950	3 850

\* We count a maximum of three children when we work out the Annual Threshold and Above Threshold Benefit limit.  
If you join the medical scheme after January, you won't get the full amount because it is calculated by counting the remaining months in the year.

# Complaints

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Discovery Health Medical Scheme is committed to providing you with the highest standard of service and your feedback is important to us. The following channels are available for your complaints and we encourage you to follow the process.

## Step 1 | To take your query further

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If you have already contacted us and feel that your query has still not been resolved, please complete our online complaints form on the website. We would also love to hear from you if we have exceeded your expectations.

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## Step 2 | To contact the Principal Officer

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If you are still not satisfied with the resolution of your complaint after following the process in step 1 you are able to escalate your complaint to the Principal Officer of the Discovery Health Medical Scheme by completing the online form on the website.

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## Step 3 | To lodge a dispute

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If you have received a final decision from Discovery Health Medical Scheme and want to challenge it, you may lodge a formal dispute. You can find more information on the Scheme's disputes process on the website.

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## Step 4 | To contact the Council for Medical Schemes

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Discovery Health Medical Scheme is regulated by the Council for Medical Schemes (CMS). You may contact the CMS at any stage of the complaints process but are encouraged to follow the steps above to resolve your complaint before contacting the CMS directly. Members who wish to approach the Council for Medical Schemes for assistance, may do so in writing to: Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch - Hazel Avenue, Eco Park, Centurion, 0157 or email [complaints@medicalschemes.com](mailto:complaints@medicalschemes.com).  
Customer care centre: 0861 123 267 / website [www.medicalschemes.com](http://www.medicalschemes.com)



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The CMS contact details are as follows: Email [complaints@medicalschemes.com](mailto:complaints@medicalschemes.com) / Customer Care Centre: 0861 123 267 / website [www.medicalschemes.com](http://www.medicalschemes.com)