



| SCHEDULE OF BENEFITS | 2012

Applicable 1 January 2012 to 31 December 2012.

Please read in conjunction with the Information Guide and Rules of the Scheme available at www.profmed.co.za or by calling 0860 679 200.



Index

Contribution Table.....	1
Important Telephone Numbers.....	1
Definitions.....	1
Pre-authorisation.....	2
Tariff Descriptions.....	3
Scheme Exclusions.....	3
Schedule of Benefits.....	4
1. Hospital and Hospital-related Benefits and Major Medical Expenses.....	4
2. Preventative Care.....	6
3. Oral Contraceptives.....	7
4. Chronic Medication.....	8
5. Day-to-day Cover.....	8
6. Maternity.....	11

Contribution Table

Monthly Income R0 - R3 000					
	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
Adult	Not available	Not available	Not available	Not available	R416
Adult dependant	Not available	Not available	Not available	Not available	R416
Child	Not available	Not available	Not available	Not available	R268

Monthly Income R3 001 - R6 000					
	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
Adult	Not available	Not available	R1 286	Not available	R688
Adult dependant	Not available	Not available	R1 286	Not available	R688
Child	Not available	Not available	R584	Not available	R308

Monthly Income R6 000 +					
	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
Adult	R3 698	R2 202	R1 790	R1040	R924
Adult dependant	R3 430	R2 038	R1 656	R966	R854
Child	R924	R880	R716	R416	R370

Notes:

1. Members applying for the rates below R6 000 monthly income must submit proof of combined monthly income from all sources.
2. Child rates apply up to age 21. Thereafter rates will default to adult dependant rates.
3. Children older than 21 but younger than 26 who are studying full-time qualify for child rates, subject to annual proof of study being provided to the Scheme, i.e. proof of registration from academic institution. If proof of study is not received, rates will default to adult dependant rates.
4. Student rates are only available to students in at least their fourth year of study for a degree that qualifies them for Profmed.

Important Telephone Numbers

	Within RSA	Outside RSA	Fax
Client Services & Claims (no faxed claims)	0860 679 200	+27 12 679 4144	+27 12 679 4411
Chronic Disease & Medication Authorisations	0800 132 345	+27 11 770 6000	–
Hospital & Specialised Radiology Authorisations	0860 776 363	+27 12 679 4145	+27 12 679 4438
Emergency Transport Service within RSA & SADC Region	0861 776 363	+27 11 541 1225	–
International Travel Medical Assistance	011 541 1225	+27 11 541 1225	–
Disease Management Authorisations	0860 776 363	+27 12 679 4145	+27 12 679 4438
Dental Authorisations	0860 679 200	+27 12 679 4144	+27 12 679 4411
Post-trauma Counselling	0800 611 298	+27 11 459 2218	–
Post-trauma HIV Exposure Assistance:	Office hours	0860 906 090	–
	After hours	071 786 4520	–
Multiply Wellness Programme:			
Information and Momentous Baby	0861 886 600	–	–

Definitions

Day-to-day limit: Annual overall limit imposed on specific acute, out-of-hospital benefits. Sub-limits on these benefits are subject to availability of funds in the annual overall day-to-day limit. Funds in the annual overall limit can only be accessed through the relevant available sub-limits, where applicable.

Prescribed Minimum Benefit (PMB): This is the minimum benefit a scheme is required to cover in respect of the diagnosis and treatment of the 270 conditions, as required by legislation. This Schedule of Benefits is subject to the provisions of the Act and Regulations relating to the prescribed minimum benefits.

Profmed provides cover for 270 conditions listed in the PMBs as well as the 26 chronic conditions listed in the Chronic Disease List (CDL) in accordance with the provisions of the Act and Regulations. The 26 prescribed chronic conditions include the following: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Type 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis. The diagnosis, treatment and care costs of these conditions will be paid in full provided these services are obtained from Profmed's designated service provider (DSP). However, if such services are obtained voluntarily from a provider other than a DSP, the member will be liable for the balance of the account or the balance will be deducted from the relevant day-to-day benefit, subject to availability of funds. If the service was involuntarily obtained from a provider other than a DSP, the service will be paid in terms of the PMB legislation. All PMB treatment will be subject to the application of treatment protocols and formularies, which will be more or less restrictive depending on the option chosen by the member.

Designated Service Provider Network (DSPN): A provider or network of providers who are contracted by the Scheme to provide services, treatment, medicine or facilities to members in terms of both prescribed minimum benefits (PMBs) and non-PMB illnesses:

- PMBs (day-to-day): No DSP, subject to rules and protocols
- Hospitalisation (PMBs): No DSP, with the exception of benefits for psychiatric hospitalisation, drug and alcohol rehabilitation, and endoscopic examinations, subject to pre-authorisation, rules and protocols
- Hospitalisation (non-PMBs): No DSP, with the exception of benefits for endoscopic examinations, subject to pre-authorisation, rules and protocols
- Medication (CDLs, non-CDLs, non-PMBs and acute): Profmed Pharmacy Network, subject to rules, formulary and reference pricing
- Preventative Care: Ampath, Lancet Laboratories and Pathcare
- Optical: Opticlear
- Post-trauma Management:
 - Trauma Counselling: Independent Counselling and Advisory Services (ICAS)
 - HIV Exposure Management: Optipharm
- Alcohol and Drug Rehabilitation: South African National Council on Alcoholism and Drug Dependence (SANCA)
- Psychiatric Hospitalisation: Participating National Hospital Network (NHN) facilities
- Endoscopic Examinations: Netcare, Life Healthcare and Clinix facilities.

Costs in respect of PMBs that exceed the formulary, reference pricing, rules and protocols will be the responsibility of the member.

Member:	The principal member of the Scheme in terms of the rules.
Beneficiary:	The member and any of his dependants registered on the Scheme entitled to receive benefits in terms of the rules.
Family:	The total constitution of a member and his dependants registered on the Scheme in terms of the rules.
M:	Member
M+1:	Member plus one dependant.
M+2:	Member plus two dependants.
M+3:	Member plus three dependants.
Maximum:	Maximum benefit payable for a family larger than the family sizes indicated for a particular benefit.
"Off-label":	Medication utilised for a condition for which it is not specifically registered.
Single Exit Price:	The retail price of medication as determined by legislation.
SADC Region:	The region known as the Southern African Development Community, namely Angola, Botswana, DRC, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, Swaziland, Tanzania, Zambia and Zimbabwe.

Pre-authorisation

Pre-authorisation is not a guarantee of payment and benefits are paid in accordance with the relevant protocols and Scheme rules, subject to availability of funds. Authorised services or treatment must

commence within three months of authorisation. Authorisation does not include the fees charged by the attending medical practitioners. It is the member's responsibility to obtain pre-authorisation, which should be obtained at least seven days prior to the commencement of treatment or services. In case of emergencies that occur after hours or on weekends and public holidays, authorisation must be obtained the next working day.

Tariff Descriptions

Profmed Tariff: The 2011 Profmed Tariff plus 6% increase.

Profmed Negotiated Tariff: Negotiated by Profmed with particular providers and the various hospital groups and specific to each group.

Profmed Specific Tariff:

Consultations: R305 for GPs and R405 for specialists;

Procedures: Profmed Tariff plus 20% for GPs and specialists.

Profmed Premium Tariff: Private tariff (300% of Profmed Tariff) paid to GPs and specialists for consultations and procedures.

Profmed Optical Tariff: DSP tariff negotiated by Opticlear with registered optical service providers nationally.

Scheme Exclusions

Profmed will not pay for healthcare services related to the following (including direct and indirect expenses), except those stipulated in the prescribed minimum benefits:

- Excessive use of drugs and alcohol, subject to PMB legislation
- Educational therapy
- Elective cosmetic surgery and surgery for "bat ears" (otoplasty)
- Breast reduction and enlargement, and gynaecomastia surgery
- Expenses recoverable from a third party, subject to PMB legislation
- Insurance examinations
- Care for the frail, infirm or chronically ill
- Injuries related to professional sport, and sporting appliances, subject to PMB legislation
- Nasal tip surgery
- Scar revision
- Treatment that is experimental, scientifically unproven, "off-label" or not registered by the Medicines Control Council (MCC)
- Healthcare services related to infertility in respect of ART, IVF, GIFT, ZIFT and ICSI, subject to PMB legislation
- Travel expenses
- Elective and anticipated medical treatment outside the SADC Region
- Psychometry and group therapy
- Sunglasses and optical lens tinting
- Holidays for recuperative purposes
- Nutritional supplements or food supplements
- Treatment of impotence
- Organs or human tissue harvested outside South Africa
- Luxury drugs
- Treatment of obesity, e.g. gastroplasty
- Costs exceeding the maximum benefit to which a member is entitled in terms of the rules of the Scheme, subject to PMB legislation
- Bio-stress assessments
- Colonic irrigations
- DNA testing
- Harvesting of donor organs where the recipient is not a beneficiary of Profmed
- IQ tests and learning problems
- APS therapy machines or similar equipment
- Kidney belts
- "Medic Alert" bands
- Mattresses, waterbeds and special beds, and chairs
- Humidifiers
- Bedpans
- Cushions, sheepskins and waterproof sheets
- Health shoes, e.g. Green Cross
- Repairs of durable goods
- Replacement batteries for medical appliances or devices, e.g. hearing aids
- Solution kits for contact lenses.

The rules of the Scheme, Annexure C, as well as the Information Guide, provide further information on expenses not covered by the Scheme.

Schedule of Benefits

Benefit	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
1. Hospital and Hospital-related Benefits and Major Medical Expenses					
1A Hospitalisation – Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits.					
1A1 Private, government and provincial hospital ward accommodation (Subject to pre-authorisation)	100% Profmed Negotiated Tariff in private ward	100% Profmed Negotiated Tariff in general ward		100% Profmed Negotiated Tariff in general ward	
1A2 Theatre and recovery room	100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
1A3 Intensive care and high care (Subject to confirmation every 72 hours)	100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
1A4 Emergency room visits and facility fees for private hospitals that result in hospitalisation	100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
1B Medicines in Hospital					
1B1 Medicines and materials used in hospital and theatre	100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
1B2 Medicines taken out of hospital on discharge (Benefit limited to a 7-day supply) (See Section 5B1)	80% Profmed Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds	80% Profmed Negotiated Tariff Paid from acute medicine benefit, subject to the availability of funds		No benefit, subject to PMB legislation	
1C General Practitioners (GPs) and Specialists in Hospital					
1C1 Surgery and in-hospital procedures	100% Profmed Premium Tariff	100% Profmed Premium Tariff	100% Profmed Specific Tariff	100% Profmed Premium Tariff	100% Profmed Specific Tariff
1C2 Visits and consultations by a GP or specialist while hospitalised	100% Profmed Premium Tariff	100% Profmed Premium Tariff	100% Profmed Specific Tariff	100% Profmed Premium Tariff	100% Profmed Specific Tariff
1D Radiology and Pathology in Hospital – Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits. Hospitalisation not covered if admission is for the sole purpose of radiology or pathology investigations.					
1D1 Radiology and pathology while hospitalised (Excluding MRI, radio-isotope, CT and PET scans and certain other investigative procedures)	100% Profmed Tariff	100% Profmed Tariff		100% Profmed Tariff	
1D2 MRI, radio-isotope and CT scans and certain other investigative procedures in hospital Specialist referral only (See Section 5A6) (Subject to pre-authorisation)	100% Profmed Tariff 2 investigations per family in- or out-of-hospital	100% Profmed Tariff 2 investigations per family in- or out-of-hospital		100% Profmed Tariff 2 investigations per family in-hospital only	
1E Other Major Medical Services – Call 0860 776 363 for authorisation and registration, information on clinical qualifying criteria, and benefits.					
1E1 Transplants Subject to registration on the Disease Management Programme, and PMB legislation					
a) Hospitalisation (Subject to pre-authorisation)	100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
b) Donor costs Profmed recipient only (Subject to pre-authorisation)	100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
1E2 Peritoneal dialysis and haemodialysis (Subject to pre-authorisation and registration on the Disease Management Programme, and PMB legislation)	100% Profmed Tariff	100% Profmed Tariff		100% Profmed Tariff	
1E3 Oncology					

Benefit	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
<p>a) Active treatment: radiotherapy and/or chemotherapy (Subject to pre-authorisation and registration on the Oncology Programme, and PMB legislation)</p> <p>b) Non-active treatment: not receiving radiotherapy or chemotherapy</p> <p>c) PET scans (Positron-Emission Tomography) (Subject to pre-authorisation and protocols)</p>	<p>100% Profmed Premium Tariff Subject to Profmed protocols and costings. Benefits include approved medicines, related radiology and pathology</p> <p>Benefits paid from relevant chronic or day-to-day limits and subject to the protocols, rules and limits applicable to those benefits, and PMB legislation</p> <p>R10 000 per scan</p>	<p>100% Profmed Specific Tariff Subject to Profmed protocols and costings. Benefits include approved medicines, related radiology and pathology</p> <p>Benefits paid from relevant chronic or day-to-day limits and subject to the protocols, rules and limits applicable to those benefits, and PMB legislation</p> <p>R10 000 per scan</p>	<p>100% Profmed Specific Tariff Subject to Profmed protocols and costings. Benefits include approved medicines, related radiology and pathology</p> <p>No benefit, subject to PMB legislation</p> <p>R10 000 per scan</p>		
<p>1E4 Rehabilitation This benefit covers members who have become disabled as a result of acute injuries caused by trauma, infection, surgery, spinal cord injury, brain injury, bleeding or infarction resulting in a stroke. This benefit is only available as an in-patient in a registered rehabilitation facility. Rehabilitation must occur within the benefit year in which the specified injury takes place, or commence directly after discharge from an acute hospitalisation facility, or not more than one calendar month after the specified injury is sustained. Benefits are limited to two month's rehabilitation and the availability of benefits, and are subject to case management and Profmed protocols. Admissions covered at authorised service providers only. Subject to PMB legislation. (Subject to pre-authorisation)</p>					
	R60 000 per family	R40 000 per family		R20 000 per family	
<p>1E5 Out-patient care in lieu of hospitalisation</p>					
<p>a) Treatment in a registered sub-acute facility or at home by an appropriately registered practitioner (Subject to pre-authorisation and protocols)</p> <p>b) Wound care Treatment at home, including surgicals, by an appropriately registered practitioner (Subject to pre-authorisation and protocols)</p>	<p>100% Profmed Negotiated Tariff R13 000 per beneficiary</p> <p>100% Profmed Negotiated Tariff R5 000 per beneficiary</p>	<p>100% Profmed Negotiated Tariff R11 000 per beneficiary</p> <p>100% Profmed Negotiated Tariff R3 000 per beneficiary</p>		<p>100% Profmed Negotiated Tariff R9 500 per beneficiary</p> <p>100% Profmed Negotiated Tariff R2 500 per beneficiary</p>	
<p>1E6 Psychiatric treatment Includes all in- and out-of-hospital psychiatric and psychology consultations, treatment and medication, and alcohol and drug rehabilitation. Hospitalisation only available at DSP. PMBs are deducted from this benefit but are not subject to these limits. Co-payment applies for voluntary use of a non-DSP.</p>					
<p>a) In-hospital (Subject to pre-authorisation)</p> <p>b) Out-of-hospital consultations, subject to PMB legislation</p>	<p>100% Profmed Negotiated Tariff R30 000 per family</p> <p>100% Profmed Negotiated Tariff R5 250 per family Subject to 1E6(a) in-hospital limit</p>	<p>100% Profmed Negotiated Tariff R20 000 per family</p> <p>100% Profmed Negotiated Tariff R5 250 per family Subject to 1E6(a) in-hospital limit</p>		<p>100% Profmed Negotiated Tariff R15 000 per family</p> <p>100% Profmed Negotiated Tariff R5 250 per family Subject to 1E6(a) in-hospital limit PMBs only</p>	
<p>1E7 Endoscopic examinations In suitably equipped procedure room, subject to protocols and PMB legislation and use of the DSPN. Co-payment applies for voluntary use of a non-DSP.</p>					
<p>a) Gastroscopy (Subject to pre-authorisation)</p> <p>b) Colonoscopy Includes sigmoidoscopy (Subject to pre-authorisation)</p> <p>c) Colonoscopy and gastroscopy Combined procedure (Subject to pre-authorisation)</p>	<p>100% Profmed Negotiated Tariff</p> <p>100% Profmed Negotiated Tariff</p> <p>100% Profmed Negotiated Tariff</p>	<p>100% Profmed Negotiated Tariff</p> <p>100% Profmed Negotiated Tariff</p> <p>100% Profmed Negotiated Tariff</p>		<p>100% Profmed Negotiated Tariff</p> <p>100% Profmed Negotiated Tariff</p> <p>100% Profmed Negotiated Tariff</p>	
<p>1F Other Medical Services – Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits.</p>					
1F1 Physiotherapy					

Benefit	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
a) In-hospital (Subject to pre-authorisation)	100% Profmed Tariff	100% Profmed Tariff		100% Profmed Tariff	
b) Out-of-hospital Post-operative, available up to 6 weeks after related hospital procedure (Subject to pre-authorisation)	100% Profmed Tariff M R2 200 Maximum R3 865 per family	100% Profmed Tariff M R1 665 Maximum R2 755 per family		No benefit, subject to PMB legislation	
1F2 Blood transfusions (Subject to pre-authorisation)	100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
1F3 Emergency transport services Contact International SOS within RSA on 0861 776 363; within SADC Region on +27 11 541 1225	100% of cost Subject to Profmed protocols	100% of cost Subject to Profmed protocols		100% of cost Subject to Profmed protocols	
1F4 Internal surgical devices A fabricated or artificial substitute that is surgically implanted permanently into the body and does not protrude from the body and replaces or assists a diseased or missing part of the body to restore functionality. Subject to PMB legislation.					
a) Major (Subject to pre-authorisation, protocols and management)	100% Profmed Negotiated Tariff R37 000 per family	100% Profmed Negotiated Tariff R37 000 per family		100% Profmed Negotiated Tariff R37 000 per family	
b) Intraocular lenses (Subject to pre-authorisation, protocols and management)	R3 635 per beneficiary per event	R3 635 per beneficiary per event		R3 635 per beneficiary per event	
1F5 Cochlear implants Excluding upgrade/replacement of external appliance (Subject to pre-authorisation)	100% Profmed Negotiated Tariff R80 000 per family	100% Profmed Negotiated Tariff R75 000 per family		100% Profmed Negotiated Tariff R50 000 per family	
1G Dental Procedures in Hospital – Call 0860 776 363 for authorisation, information on clinical qualifying criteria, and benefits.					
1G1 In-hospital basic dentistry (Subject to pre-authorisation, protocols and management) Exceptional cases only	100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
1G2 In-hospital advanced dentistry (Subject to pre-authorisation, protocols and management) Exceptional cases only	100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
1G3 Functional orthognathic surgery Includes all costs related to the admission and procedure, e.g. all medical practitioner fees, hospitalisation, etc. (Subject to pre-authorisation)	100% Profmed Negotiated Tariff R26 200 per family	No benefit		No benefit	
2. Preventative Care Benefits are subject to specific protocols and the use of the DSPN. Co-payment applies for voluntary use of non-DSP.					
2.1 Prostate Specific Antigen (PSA) Test for prostate cancer. Males 40 years and older. Subject to PMB legislation.					
a) Consultation	100% Profmed Premium Tariff for GPs and specialists 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) and specialists (R405) 1 consultation per beneficiary		100% Profmed Specific Tariff for GPs (R305) only 1 consultation per beneficiary	
b) Pathology (Tariff code 4519)	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary		100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	
2.2 Pap smear or liquid-based cytology for cervical cancer Females 18 years and older. Subject to PMB legislation.					

Benefit	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
a) Consultation	100% Profmed Premium Tariff for GPs and specialists 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) and specialists (R405) 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) only 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) only 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) only 1 consultation per beneficiary
b) Pathology (Tariff code 4566 – Pap smear. Tariff codes 4559 and 4560 – liquid-based cytology – reimbursed per tariff code 4566)	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary
2.3 Mammograms for breast cancer Females 40 years and older. Females younger than 40 years pre-disposed to breast cancer subject to motivation. Subject to PMB legislation.					
Radiology (Tariff code 34100)	100% Profmed Tariff 1 investigation per beneficiary	100% Profmed Tariff 1 investigation per beneficiary	100% Profmed Tariff 1 investigation per beneficiary	100% Profmed Tariff 1 investigation per beneficiary	100% Profmed Tariff 1 investigation per beneficiary
2.4 Fasting lipogram (blood test) for cholesterol Males 40 years and older; females 50 years and older. Subject to PMB legislation.					
a) Consultation	100% Profmed Premium Tariff for GPs and specialists 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) and specialists (R405) 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) only 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) only 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) only 1 consultation per beneficiary
b) Pathology (Tariff code 4025)	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary
2.5 Fasting blood sugar test for late onset diabetes Males and females 40 years and older. Subject to PMB legislation.					
a) Consultation	100% Profmed Premium Tariff for GPs and specialists 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) and specialists (R405) 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) only 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) only 1 consultation per beneficiary	100% Profmed Specific Tariff for GPs (R305) only 1 consultation per beneficiary
b) Pathology (Tariff code 4057)	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary	100% Profmed Negotiated Tariff at DSPN 1 investigation per beneficiary
2.6 Influenza vaccine					
a) Vaccine only	R60 per beneficiary	R60 per beneficiary	R60 per beneficiary	R60 per beneficiary	R60 per beneficiary
b) Administering of vaccine	Subject to relevant day-to-day limits	Subject to relevant day-to-day limits	Subject to relevant day-to-day limits	No benefit	No benefit
3. Oral Contraceptives					
Contraceptive purposes only	R100 per beneficiary per month	R100 per beneficiary per month	R100 per beneficiary per month	R100 per beneficiary per month	R100 per beneficiary per month

Benefit	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
4. Chronic Medication The formulary and reference pricing will be most restrictive on the ProActive options and least restrictive on the ProPinnacle option. MMAP® applies. The conditions covered on each option are listed below. The Condition Medicine List (CML), including the list of chronic diseases (CDL), is available on the Profmed website at www.profmed.co.za. Subject to the use of the DSPN. Co-payment applies for voluntary use of a non-DSP. Call 0860 679 200 for information on the clinical qualifying criteria and benefits.					
ProPinnacle (60 conditions) CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Type 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis Other: Allergic Rhinitis (in patients with asthma), Alzheimer's Disease, Ankylosing Spondylitis, Benign Prostatic Hypertrophy, Cushing's Disease, Cystic Fibrosis, Deep Vein Thrombosis, Gastro-Oesophageal Reflux Disorder, Gout, Hypoparathyroidism, Hyperthyroidism, Major Depressive Disorder, Malabsorption Syndrome, Meniere's Disease, Menopause (HRT), Menopause (Calcium), Motor Neuron Disease, Myasthenia Gravis, Obsessive Compulsive Disorder, Oncology Adjunctive Treatment, Osteoarthritis, Osteoporosis, Paget's Disease, Paraplegia & Quadriplegia, Peripheral Vascular Disease, Pituitary Adenomas/Hyperfunction of Pituitary Gland, Post Organ Transplant (DTPs), Post Organ Transplant (non-DTPs), Psoriatic Arthritis, Pulmonary Interstitial Fibrosis, Stroke/Cerebrovascular Accident, Systemic Connective Tissue Disorders, Tuberculosis, Valvular Heart Disease.					
ProSecure Plus and ProSecure (40 conditions) CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Type 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis Other: Alzheimer's Disease, Ankylosing Spondylitis, Benign Prostatic Hypertrophy, Menopause (HRT), Major Depressive Disorder, Obsessive Compulsive Disorder, Oncology Adjunctive Treatment, Osteoporosis, Paraplegia & Quadriplegia, Pituitary Adenomas/Hyperfunction of Pituitary Gland, Post Organ Transplant (DTPs), Psoriatic Arthritis, Pulmonary Interstitial Fibrosis, Valvular Heart Disease.					
ProActive Plus and ProActive (28 conditions) CDLs: Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy Disease, Chronic Obstructive Pulmonary Disorder, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus Type 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, HIV/AIDS, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis. Other: Menopause (HRT), Post Organ Transplant (DTPs)					
Chronic medication CDLs, non-CDLs and other PMB-related chronic conditions 24-day dispensing cycle applies (Attending doctor or pharmacist to call 0800 132 345 to register condition and authorise medication)	100% Single Exit Price and dispensing fee 60 conditions covered Subject to Profmed formulary and reference price	100% Single Exit Price and dispensing fee 40 conditions covered Subject to Profmed formulary and reference price M R12 000 M+1 R20 400 Maximum R27 000 per family	Restricted to 28 conditions, subject to PMB legislation Subject to Profmed formulary and strict reference price		
5. Day-to-day Cover All sub-limits for out-of-hospital benefits described in this section, and benefits subject to the day-to-day limit in other sections of this Schedule, are subject to the availability of the annual overall day-to-day limit, subject to PMB legislation.					
Annual overall day-to-day limit (Available only through relevant available day-to-day sub-limits, where applicable)	M R13 000 M+1 R19 500 Maximum R26 000 per family	M R8 270 M+1 R12 300 Maximum R16 500 per family	No benefit, subject to PMB legislation		
5A General Practitioners (GPs) and Specialists					
5A1 Visits and consultations	100% Profmed Premium Tariff Subject to day-to-day limit	100% Profmed Specific Tariff Subject to day-to-day limit	No benefit. PMBs paid from Psychiatric IE6 benefit, subject to PMB legislation		
5A2 Non-hospital procedures in doctor's rooms	100% Profmed Premium Tariff Subject to day-to-day limit	100% Profmed Specific Tariff Subject to day-to-day limit	No benefit, subject to PMB legislation		
5A3 Psychiatric consultations (out-of-hospital) (See Section 1E6)	Paid from Psychiatric benefit	Paid from Psychiatric benefit	No benefit. PMBs paid from Psychiatric IE6 benefit, subject to PMB legislation		
5A4 Clinical psychology (See Section 1E6)	Paid from Psychiatric benefit	Paid from Psychiatric benefit	No benefit. PMBs paid from Psychiatric IE6 benefit, subject to PMB legislation		
5A5 Radiology and pathology (Excluding MRI and CT scans)	80% Profmed Tariff Subject to day-to-day limit	80% Profmed Tariff Subject to day-to-day limit	No benefit, subject to PMB legislation		

Benefit	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
5A6 MRI and CT scans Specialist referral only (See Section 1D2) (Subject to pre-authorisation. Call 0860 776 363 for authorisation and protocols)	80% Profmed Tariff 2 investigations per family in- or out-of-hospital	80% Profmed Tariff 2 investigations per family in- or out-of-hospital Subject to day-to-day limit out-of-hospital		No benefit, subject to PMB legislation	
5A7 Out-patient visits and facility fees for private hospitals and emergency rooms without subsequent hospitalisation	100% Profmed Negotiated Tariff Subject to day-to-day limit	100% Profmed Negotiated Tariff Subject to day-to-day limit		No benefit, subject to PMB legislation	
5B Acute Medication					
5B1 Prescribed acute medication Subject to use of DSPN. Co-payment applies for voluntary use of non-DSP. (Certain medication on repeat script will be funded from this benefit. Call 0860 679 200 for more information)	80% Single Exit Price and dispensing fee M R7 235 M+1 R9 720 M+2 R10 260 M+3 R11 340 Maximum R13 500 per family MMAP® applies Subject to day-to-day limit	80% Single Exit Price and dispensing fee M R2 600 M+1 R3 890 M+2 R4 290 M+3 R4 450 Maximum R4 800 per family MMAP® applies Subject to day-to-day limit		No benefit, subject to PMB legislation	
5B2 Over-the-counter medication (See Section 5B1)	80% of cost R1 365 per family Subject to acute medication and day-to-day limits	80% of cost R1 100 per family Subject to acute medication and day-to-day limits		No benefit	
5C Supplementary Benefits					
5C1 a) External prostheses and appliances Includes insulin pumps, hearing aids, home oxygen therapy and stoma bags. » Hearing aids: 1 pair every 24 months » Insulin pumps: 1 every 48 months (Subject to protocols and pre-authorisation. Call 0860 776 363 for authorisation and protocols)	100% Profmed Negotiated Tariff R15 000 per family	100% Profmed Negotiated Tariff R10 000 per family		No benefit, subject to PMB legislation	
b) Other Includes neck braces fitted in theatre, wheel chairs, walking frames and crutches	100% Profmed Negotiated Tariff R3 700 per family Subject to day-to-day limit	100% Profmed Negotiated Tariff R2 670 per family Subject to day-to-day limit		No benefit, subject to PMB legislation	
5C2 Supplementary services • Audiometrists • Biokineticists • Dieticians • Occupational therapists • Speech therapists • Physiotherapists • Podiatrists	100% Profmed Tariff M R2 100 Maximum R3 620 per family Subject to day-to-day limit, and PMB legislation	100% Profmed Tariff M R1 920 Maximum R3 210 per family Subject to day-to-day limit, and PMB legislation		No benefit, subject to PMB legislation	
5C3 Alternative health practitioners Including homeopaths, homeopathic medication and chiropractors. Practitioners must be registered with the Association of Alternative Health Care Providers	80% of cost R1 700 per family R540 sub-limit for homeopathic medication per family Subject to day-to-day limit	No benefit		No benefit	

Benefit	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
5D Optical Services Benefits are subject to protocols and are applied over a 24-month period. Lenses are limited to contact lenses OR spectacle lenses.					
5D1 Eye examinations	100% Profmed Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation	100% Profmed Optical Tariff 24-month benefit Subject to day-to-day limit, and PMB legislation		No benefit, subject to PMB legislation	
5D2 Spectacles					
a) Lenses (generic) Single vision, bi-focal and varifocal	100% Profmed Optical Tariff 24-month benefit Subject to day-to-day limit	100% Profmed Optical Tariff 24-month benefit Subject to day-to-day limit		No benefit	
b) Extras	100% Profmed Optical Tariff for generic hard-coating and generic plastic anti-reflex coating 24-month benefit Subject to day-to-day limit	100% Profmed Optical Tariff for generic hard-coating 24-month benefit Subject to day-to-day limit		No benefit	
c) Frames	R900 per beneficiary 24-month benefit Subject to day-to-day limit	R650 per beneficiary 24-month benefit Subject to day-to-day limit		No benefit	
5D3 Contact lenses (clear)	R2 200 per beneficiary 24-month benefit Subject to day-to-day limit	R1 290 per beneficiary 24-month benefit Subject to day-to-day limit		No benefit	
5D4 Refractive eye surgery Includes all costs related to the admission and procedure, all medical practitioner fees, hospitalisation, etc. (Subject to protocols and pre- authorisation. Call 0860 776 363 for authorisation and protocols)	R2 500 per beneficiary	No benefit		No benefit	
5E Dentistry Benefits are subject to protocols and management.					
5E1 Basic dentistry	100% Profmed Tariff Subject to day-to-day limit	100% Profmed Tariff Subject to day-to-day limit		No benefit	
5E2 Advanced dentistry Orthodontics only available up to age 18. (Orthodontics and implants subject to pre-authorisation. Call 0860 679 200 for authorisation and protocols)	100% Profmed Tariff R5 000 per beneficiary Maximum R10 000 per family	100% Profmed Tariff R4 250 per beneficiary Maximum R8 500 per family		No benefit	
5F Post-trauma Management Benefit covers trauma and HIV exposure as a result of crime, e.g. assault or rape, and HIV exposure resulting from crime and occupational injuries, e.g. needle-stick injury. Call 0800 611 298 for 24-hour trauma counselling assistance. For HIV exposure assistance, call 0860 906 090 during office hours and 071 786 4520 after hours. Benefits are subject to the use of the DSPs within 14 days of incident.					
5F1 Post-trauma counselling					
a) Initial telephonic consultation	1 consultation per incident at DSP	1 consultation per incident at DSP		1 consultation per incident at DSP	
b) Counselling	2 sessions per beneficiary per incident at DSP	2 sessions per beneficiary per incident at DSP		2 sessions per beneficiary per incident at DSP	
5F2 HIV exposure management 2 doctor's consultations, 30 day's PEP medication, pathology and 3 - 6 months HIV exposure management	1 course of treatment per beneficiary per incident at DSP, subject to PMB legislation	1 course of treatment per beneficiary per incident at DSP, subject to PMB legislation		1 course of treatment per beneficiary per incident at DSP, subject to PMB legislation	
6. Maternity Call 0860 776 363 where pre-authorisation is required and for more information on clinical qualifying criteria and benefits. Subject to PMB legislation.					
Expectant mothers can contact Multiply on 0861 886 600 to access the Momentous Baby programme on full Multiply.					
6.1 Ultra-sound scans (ante-natal)	100% Profmed Tariff 2 scans per pregnancy Subject to day-to-day limit	100% Profmed Tariff 2 scans per pregnancy Subject to day-to-day limit		No benefit, subject to PMB legislation	

Benefit	ProPinnacle	ProSecure Plus	ProSecure	ProActive Plus	ProActive
6.2 Consultations Ante-/post-natal consultations by a medical practitioner	100% Profmed Premium Tariff 13 visits per pregnancy Subject to day-to-day limit	100% Profmed Specific Tariff 13 visits per pregnancy Subject to day-to-day limit		No benefit, subject to PMB legislation	
6.3 Consultations Ante-/post-natal consultations by a registered midwife	100% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit	100% Profmed Tariff 13 visits per pregnancy Subject to day-to-day limit		No benefit, subject to PMB legislation	
6.4 In-patient hospitalisation (ante-natal) (Subject to pre-authorisation)	100% Profmed Negotiated Tariff in private ward	100% Profmed Negotiated Tariff in general ward		100% Profmed Negotiated Tariff in general ward	
6.5 Out-patient visits to hospital/ clinic for investigations, e.g. Tocardiography	80% Profmed Tariff Subject to day-to-day limit	80% Profmed Tariff Subject to day-to-day limit		No benefit, subject to PMB legislation	
6.6 Ante-natal exercises by registered healthcare practitioner	80% Profmed Tariff R800 per family Subject to day-to-day limit	No benefit		No benefit	
6.7 Prescribed medication during pregnancy (See Section 5B1)	80% Single Exit Price and dispensing fee Paid from acute medication limit, subject to the availability of funds Subject to day-to-day limit	80% Single Exit Price and dispensing fee Paid from acute medication limit, subject to the availability of funds Subject to day-to-day limit		No benefit, subject to PMB legislation	
6.8 Delivery fee by GP or specialist	100% Profmed Premium Tariff	100% Profmed Premium Tariff	100% Profmed Specific Tariff	100% Profmed Premium Tariff	100% Profmed Specific Tariff
6.9 Delivery fee by registered midwife	100% Profmed Tariff	100% Profmed Tariff		100% Profmed Tariff	
6.10 Labour ward accommodation	100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
6.11 Ward accommodation (post-delivery): Normal delivery – 3 days Caesarean section – 4 days	100% Profmed Negotiated Tariff in private ward	100% Profmed Negotiated Tariff in private ward	100% Profmed Negotiated Tariff in general ward	100% Profmed Negotiated Tariff in general ward	
6.12 Theatre and recovery room	100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	
6.13 Other medical practitioner services, e.g. pathology and radiology while in hospital	100% Profmed Tariff	100% Profmed Tariff		100% Profmed Tariff	
6.14 Consultations while in hospital	100% Profmed Premium Tariff	100% Profmed Premium Tariff	100% Profmed Specific Tariff	100% Profmed Premium Tariff	100% Profmed Specific Tariff
6.15 Home nursing (post-natal) 48-hour benefit in the event of a home delivery or if discharged from a birthing unit within 24 hours after delivery (Subject to pre-authorisation)	Subject to Section 1E5(a) of this Schedule	Subject to Section 1E5(a) of this Schedule		Subject to Section 1E5(a) of this Schedule	
6.16 Neonatal care Neonate must be registered as a dependant on Profmed (Subject to pre-authorisation)	100% Profmed Negotiated Tariff	100% Profmed Negotiated Tariff		100% Profmed Negotiated Tariff	

Contributions and benefits are subject to ratification by the Council for Medical Schemes.
This Schedule is subject to the rules and protocols of the Scheme and in the event of a dispute the rules of the Scheme will prevail.
All benefits are subject to the PMB legislation.

