

# Prescribed minimum benefits (PMBs) explained



medihelp

12<sup>+</sup>  
YEARS

## What are Prescribed Minimum Benefits (PMBs)?

PMBs are a set of defined benefits to ensure that all medical scheme members have access to certain minimum health services, regardless of which medical aid plan you have chosen. Medical schemes must cover the cost relating to the diagnosis, treatment, and care of:

- 26 specific chronic conditions listed on the Chronic Disease List (CDL);
- 271 diagnosis and treatment pairs (DTPs); and
- life-threatening emergency medical conditions.

Read more about PMBs on the [website of the Council for Medical Schemes \(CMS\)](#). Find a list of CDL conditions [here](#) and a list of DTPs [here](#).

### Medihelp divides PMB conditions as follows:

| <b>Cancer</b><br>Register for the Cancer Programme with Medihelp.                                                                                                                                                                                                                                                                                                                                                   | <b>HIV/Aids</b><br>Register for the HIV/Aids Programme with LifeSense.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>All other PMB conditions</b><br>Register your condition with Medihelp.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
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| <b>Member Zone</b><br><br><b>Cancer medicine</b><br>(MedMove!, MedVital Elect, MedAdd Elect, MedReach, and MedPrime Elect plans only)<br>Dis-Chem Oncology<br>Tel: 010 003 8948<br><a href="mailto:oncology@dischem.co.za">oncology@dischem.co.za</a><br>or<br>Medipost<br>Tel: 012 404 4430<br>Fax: 086 680 3319<br><a href="mailto:oncology@medipost.co.za">oncology@medipost.co.za</a><br>Whatsapp: 012 426 4655 | <b>LifeSense</b><br>Tel: 0860 50 60 80<br>SMS: 31271 for a call-back<br>Fax: 0860 80 49 60<br>Enquiries:<br><a href="mailto:enquiry@lifesensedm.co.za">enquiry@lifesensedm.co.za</a><br><br>Scripts and pathology:<br><a href="mailto:results@lifesensedm.co.za">results@lifesensedm.co.za</a><br><a href="http://www.lifesensedm.co.za">www.lifesensedm.co.za</a><br><br><b>Medicine</b><br>Dis-Chem Direct<br>Tel: 010 589 2788<br><a href="mailto:direct.medihelp@dischem.co.za">direct.medihelp@dischem.co.za</a><br>or<br>Medipost<br>Tel: 012 426 4000<br>Fax: 086 688 9867<br><a href="mailto:life@medipost.co.za">life@medipost.co.za</a><br>Whatsapp: 012 426 4655 | <b>PMBs</b><br><b>Member Zone</b><br><br><b>PMB chronic medicine</b><br>Tel: 086 0100 678<br><b>Member Zone</b><br><br><b>Order PMB chronic medicine</b><br>(MedVital Elect, MedAdd Elect, MedMove!, and MedPrime Elect)<br>Medipost<br><a href="mailto:mrx@medipost.co.za">mrx@medipost.co.za</a><br>Fax: 086 659 4054<br>Phone: 012 426 4000<br>Email:<br><a href="mailto:customercare@medipost.co.za">customercare@medipost.co.za</a><br>Proof of payment:<br><a href="mailto:pay@medipost.co.za">pay@medipost.co.za</a><br>Fax: 086 682 2821<br>Whatsapp: 012 426 4655 |



## Benefits



Benefits for PMB services include cover for:

- consultations and treatment;
- medicine;
- hospitalisation;
- medical emergencies; and
- investigational procedures.

## To benefit from PMBs, the following requirements must be met:



- The condition must be listed as one of the defined PMB conditions.
- The treatment must match the defined PMB treatment for the PMB condition.
- Where specified, the treatment must follow protocols (clinical treatment guidelines) or formularies (a list of approved medicines).
- On certain plans, you must use Medihelp's network of specialists when required.

## Consultations and treatment



If you have been diagnosed with a condition that qualifies for a PMB and need to consult a specialist, you must ask your general practitioner (GP) to refer you to a specialist.

On network plans, you have to consult a network GP and network specialist to avoid co-payments.

### 1 How to register a PMB condition

- **Download** the "Register your PMB condition" from the **Member Zone**.
- **Email** the completed form to [preauth@medihelp.co.za](mailto:preauth@medihelp.co.za).
- **Please note:** Additional information or medical reports may be required to finalise the authorisation.

### 2 Get an authorisation schedule

Once registered, you will receive an authorisation schedule indicating the approved PMB services. The authorisation schedule consists of a pre-approved list of consultations, treatments, blood tests, and/or radiology services to support you in managing your PMB condition. Only the listed services will qualify for PMBs.

**Please note:** If the doctor prescribes other services that are not listed in the care basket, you must complete step 1 to register for these services to be authorised.





## Medicine



- Download the PMB/chronic medicine application form from the **Member Zone**.
- If your prescription changes, you can load the new prescription on the **Member Zone**.
- Email the completed form and supporting documents to **medicineapp@medihelp.co.za**.

**Please note:** Provide the required test results and doctors' motivations or reports with the application where these are requested on the form.

## Entry criteria



For certain conditions to qualify for PMBs, you must meet specific entry criteria. Before the application can be finalised, you might be required to provide test results and doctors' motivations or reports.

## Medicine service providers



**MedReach, MedVital Elect, MedAdd Elect, MedPrime Elect, and MedMove!**

Order your PMB chronic medicine from Medipost for home delivery. Formularies apply.

### Co-payments

**MedVital Elect, MedAdd Elect, MedPrime Elect:** A 60% co-payment applies if you don't use Medipost or formulary medicine.

**MedReach:** A 30% co-payment applies if you don't use Medipost.

**MedMove!:** A 30% co-payment applies if you don't use Medipost, and a 60% co-payment applies if you don't use formulary medicine.

### All other members

All other members can get medicine from any pharmacy and you are not restricted to a formulary.



## Hospitalisation



If the PMB condition requires a planned hospital admission, you must get pre-authorisation to avoid a co-payment. Please provide all the supporting clinical information (such as the results of X-rays and blood tests). If you are admitted to the hospital in an emergency, authorisation must be requested on the first workday following the admission.

### Pre-authorise PMB hospital admissions

Visit the **Member Zone** to get pre-authorisation.

### Hospital network (procedures where you have to stay overnight or longer)

Members of MedVital Elect, MedAdd Elect, MedReach, MedPrime Elect, and MedMove! must use a network hospital to avoid a co-payment on the hospital account. [Click here](#) to find a network hospital.

### Day procedure network (procedures where you do not have to stay overnight)

- MedMove! members must use the MedMove! day procedure network for all day procedures.
- MedVital Elect, MedAdd Elect, MedReach, and MedPrime Elect members must use their day procedure network for the procedures listed below.
- All other members do not have to use a network facility, but must use a day procedure facility (not a hospital) for the day procedures mentioned below.

### Day procedures include:

Ophthalmological procedures, ear, nose, and throat procedures, endoscopic procedures, removal of skin lesions, circumcisions, dental services, and all other day procedures pre-authorised by Medihelp.

## Medical emergencies



A medical emergency is a PMB and defined in the Medical Schemes Act as “the sudden and unexpected onset of a health condition that requires immediate medical or surgical treatment, where failure to provide such treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person’s life in serious jeopardy”.

Emergency admissions must be authorised on the first workday after the admission.



## Investigational procedures



To find out if an investigational procedure qualifies for PMBs, email [enquiries@medihelp.co.za](mailto:enquiries@medihelp.co.za). Please include all the relevant supporting documentation and information with the request, for example radiology and pathology reports, letters of motivation from the treating doctors, and confirmation of whether the services relate to a medical emergency, if applicable.

## Use network specialists for PMB treatment



Medihelp has specialist networks for the treatment of PMB conditions. By using these specialists, you can limit your out-of-pocket expenses and ensure that the specialists' services are aligned with a network hospital.

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Medihelp is an authorised financial services provider (FSP no 15738)

