



Medical cover designed for students

From
R864
per month

Cover for everyday medical costs

Day-to-day benefits

 **Network GP visits**
(R140 co-payment per visit)

 **Radiology, pathology, and acute medicine**
R1 850

 **Self-medication**
R570

 **Dental check-ups and scale and polish treatments**

 **Optometry check-ups**

 **Physiotherapy**
Two visits per family

 **Specialist consultations**
R1 100 per family

Care that goes beyond day-to-day cover

Added insured benefits

 **Contraceptives**
R1 550/R2 100

 **Preventive care**
Compact list of health tests and screenings

Cover when it matters most

Core benefits

 **Trauma and emergency**

 **Network of quality private hospitals**

 **271 prescribed minimum benefit (PMB) and 26 Chronic Disease List conditions**

 **Specialised radiology, in hospital**

 **MedMove! Student**

Quality, network-based healthcare at a cost that makes sense, so you can focus on your studies with peace of mind

Complementary value-added journeys

Extra support, over and above your everyday cover

Care programmes

 **Mental health benefits**
Dedicated mental health support so that you can show up fully for your life.

 **Post-hospital recovery support**
Guided recovery, from hospital back to home.

 **Cancer care**
Even when the journey gets harder, your cover continues.

 **Compassionate care**
Compassionate support through serious illness, helping you and your loved ones navigate through serious illness with comfort and dignity.

 **Chronic care management**
Support to help you manage diabetes and other chronic conditions, with care that keeps you on track.

 **HIV/AIDS Programme**
Confidential testing, treatment, and support without judgement.

Monthly contributions

 **MedMove! Student**

R0 - R900

Student

R864

Network of quality, private hospitals and GPs

Monthly contributions

Monthly income	
R0 - R900	
Student	 R864

Day-to-day benefits

Network GP consultations and telehealth consultations (via Docotela)	6 visits per family per year - Authorisation is required from the 7th visit - Co-payment may apply: - Member pays the first R140 per visit (visit 1-10 only) for network GP consultations No co-payment for telehealth consultations 11th visit onward – only listed conditions
Virtual consultations with network GPs during nurse visits	Member pays the first R140 per virtual network GP consultation (no co-payment for nurse visits)
Specialist consultations	R1 100 per family per year at network specialists Specialist referrals by a network GP apply
Physiotherapy	Two visits per family Member pays the first R140 per visit
Self-medication	R120 per event, up to R570 per family
Acute medicine, standard radiology, and pathology (Ampath, Lancet, and PathCare Vermaak)	R1 850 per family
Eye test (Opticlear network)	One consultation per person per 24-month cycle Member pays the first R140 per consultation
Dentistry (DRC network)	One routine check-up per person One scale and polish treatment per person older than 12 years Member pays the first R140 per visit

Added insured benefits

Medihelp provides these benefits on top of your insured day-to-day benefits.

Health screenings	Available at network pharmacy clinics per person: One combo health screening (blood glucose, cholesterol, BMI, and blood pressure measurement)
Preventive care benefits	- A flu vaccine - A Pap smear every three years
New: Contraceptives for female beneficiaries 12 to 55 years or until menopause	- Oral/injectable/implantable contraceptives – R130 per month, up to R1 550 per year - Intrauterine device – R2 100 every 60 months
Maternity benefits	Two antenatal and postnatal consultations with a midwife/GP/gynaecologist

Core benefits

In-hospital treatment and life-essential services (insured benefits)

Hospitalisation	- Network hospitals (co-payments may apply) - Day procedure network applies to all day procedures (co-payments may apply) - Member pays a R1 900 co-payment (PMB admission excluded)
Medicine dispensed on hospital discharge: Applicable medicine dispensed and charged by the hospital on discharge from the hospital (to take out or TTO), excluding PMB/chronic medicine	R430 per admission (limited to 7 days)
Neonatal hospitalisation	R58 985 per family
Trauma that necessitates hospitalisation	PMBs
Childbirth	PMBs
Specialised radiology	MRI and CT imaging in hospital R14 280 per family (co-payment applies)
Standard radiology, pathology (Ampath, Lancet, and PathCare Vermaak) and medical technologist services	Unlimited when admitted to a network hospital
Radiography	R1 350 per family in hospital
Emergency transport (Netcare 911)	Unlimited within South Africa Transport by road and air
Post-hospital speech therapy, occupational therapy, and physiotherapy	R2 540 per member and R3 640 per family, after discharge from a day procedure facility or hospital
Treatment of life-threatening conditions	Unlimited Includes 271 PMB conditions and 26 Chronic Disease List (CDL) conditions
PMB medicine	Unlimited, subject to pre-authorisation and clinical protocols Formulary (medicine list) and DSPs apply
Oxygen	PMBs
Mental health (psychiatric treatment)	- Hospitalisation and professional psychiatric services: PMB only New: - Treatment of depression out of hospital, subject to registration on the Depression Support Programme: R2 000 per beneficiary per year, subject to the in-hospital limit, for services rendered by psychiatrists, clinical psychologists, social workers, occupational therapists, registered counsellors, and psychiatric nurses - Medicine: R110 per beneficiary per month
Cancer treatment	PMBs
Organ transplants	PMBs
Palliative care	Out-of-hospital benefit: R22 800 per family
Other core benefits	PMBs only Including renal dialysis, oxygen, hospice, subacute care, and private nursing services as an alternative to hospitalisation

Important

This is only a summary of the available benefits and co-payments that may apply to certain benefits. Please consult the registered Rules of Medihelp and the Member guide for more details. In case of a dispute, the Rules of Medihelp will apply (subject to approval by the Council for Medical Schemes). Certain added insured benefits are not available if the patient has registered the medical condition for PMB or chronic medicine benefits, as the treatment is no longer considered as preventive care.

