

Ideal cover for *young families*

MedAdd



From **R2 970**
per month

Day-to-day benefits

15%
savings
account

Insured dentistry
< 18 years



Insured eye care
cover



Insured benefits

Once savings account funds are depleted
R4 000 per year for a family



Added insured benefits



Contraceptives
R2 200/R2 600



10 maternity consultations



2 GP/specialist visits for children under 2 years



Preventive care
Health tests and screenings



1 GP visit



Care extender
R510 self-medication
Activated after completing certain health screenings/tests

Core benefits



Trauma and emergency medical cover



Quality private hospitalisation



Care for 271 PMB diagnoses and all CDL conditions



Specialised radiology in and out of hospital

MedAdd gives you the flexibility of a **15% savings account** to manage your medical aid your way. It also offers a safety net of additional insured cover after your savings are depleted.

MedAdd
Elect

Quality network of private hospitals

Main member

MedAdd Elect

R2 970
(R5 328 savings per year)

MedAdd

R3 720
(R6 696 savings per year)

Dependant

R2 328
(R4 176 savings per year)

R3 138
(R5 616 savings per year)

Child dependant <26 years

R1 032
(R1 872 savings per year)




R1 260
(R2 304 savings per year)

On MedAdd, you also pay for only 2 children under the age of 18 and child dependant rates until they turn 26. This makes it a popular option for young families.



medihelp
Medical Aid in Action

Monthly contributions

	MedAdd Elect	MedAdd
Main member 	R2 970 (R444 savings contribution included per month and R5 328 per year)	R3 720 (R558 savings contribution included per month and R6 696 per year)
Dependant 	R2 328 (R348 savings contribution included per month and R4 176 per year)	R3 138 (R468 savings contribution included per month and R5 616 per year)
Child dependant <26 years 	R1 032 (R156 savings contribution included per month and R1 872 per year)	R1 260 (R192 savings contribution included per month and R2 304 per year)

Pay for only 2 children under the age of 18 and pay child dependant rates until they turn 26

Core benefits

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

Hospitalisation	No overall annual limit MedAdd: Any private hospital, and day procedure facilities apply for certain day procedures MedAdd Elect: Network hospitals, and day procedure network applies to certain day procedures
Hospital medicine on discharge: Applicable medicine dispensed and charged by the hospital on discharge from the hospital (to take out or TTO), excluding PMB/ chronic medicine	R420 per admission
Trauma that necessitates hospitalisation	Unlimited
Childbirth	<ul style="list-style-type: none"> In hospital – unlimited Home delivery – R16 300 per event
Specialised radiology	R18 000 per family (co-payments apply)
Post-hospital care for speech therapy, occupational therapy, and physiotherapy	R2 300 per member, and R3 300 per family, including discharge from a day procedure facility or hospital
Emergency transport (Netcare 911)	<ul style="list-style-type: none"> In country of residence Unlimited (RSA, Lesotho, Eswatini, Mozambique, Zimbabwe, Namibia, and Botswana) Outside country of residence R2 500 for road transport and R16 900 for air transport
Treatment of life-threatening conditions	Unlimited Includes 271 PMB and 26 Chronic Diseases List (CDL) conditions
PMB medicine	Unlimited
Cancer treatment	R260 000 per family
Mental health (psychiatric treatment)	<ul style="list-style-type: none"> Hospitalisation and professional psychiatric services: R30 300 per beneficiary per year to a maximum of R41 800 per family per year Treatment of depression out of hospital, subject to registration on the Mental Health programme: R3 000 per beneficiary per year, subject to the in-hospital limit, for services rendered by psychiatrists, psychologists, social workers, occupational therapists, and psychiatric nurses <ul style="list-style-type: none"> Medicine: R95 per beneficiary per month, subject to the in-hospital limit
Health-essential functional prostheses	R77 400 per person <ul style="list-style-type: none"> Intra-ocular lenses – R5 260 per lens, two lenses per person Hip, knee and shoulder replacement – non-PMB cases are limited to replacements caused by an acute injury
Other prostheses	<ul style="list-style-type: none"> EVARs prosthesis – R163 300 per person Vascular/cardiac prosthesis – R69 800 per person Prosthesis with reconstructive or restorative surgery – R11 800 per family
Organ transplants	PMB – unlimited Cornea implants – R35 900 per implant
Palliative care	R26 400 per family per year
Wound care	R4 500 per family per year, including nurse consultations and material/stock used
Other core benefits	Including renal dialysis, oxygen, hospice, subacute care, and private nursing services as an alternative to hospitalisation

Day-to-day benefits

Savings account	15% savings available at the beginning of the year (see monthly contributions) Example of available savings: MedAdd: Member = R6 696 per year Member +1 = R12 312 per year Member +2 = R14 616 per year MedAdd Elect: Member = R5 328 per year Member +1 = R9 504 per year Member +2 = R11 376 per year Unused savings are carried over to the next year and accumulate interest. Once you've depleted your savings, insured day-to-day benefits become available
GP and specialist visits, virtual consultations, physiotherapy, acute medicine, self-medication, visits to emergency units, standard radiology, pathology, and medical technologist services	Paid from savings first and after the depletion of savings: Member = R2 000 per year Family = R4 000 per year MedAdd Elect: GP network and specialist referrals by a network GP apply
Radiography	R1 300 per family
Dentistry (DRC network)	<ul style="list-style-type: none"> Conservative dental benefits for children <18 years Removal of impacted teeth in the dentist's chair
Optometry (PPN network)	Per person per 24-month cycle <ul style="list-style-type: none"> Eye test R315 for a frame/lens enhancements R710 for contact lenses
Care extender benefit	
One additional GP consultation	Activates for the family once we've paid the first claim for a specified health test* from your added insured benefits
R510 for self-medication dispensed at a network pharmacy	Activates for the family once we've paid the first claim for a combo health screening** from your added insured benefits
Added insured benefits	
Medihelp provides these benefits on top of your insured day-to-day benefits. You can activate them when you register on HealthPrint, Medihelp's free wellness programme for members, on the Member Zone. Your health screening results from Dis-Chem or Clicks will automatically upload to your health record on HealthPrint.	
Contraceptives	<ul style="list-style-type: none"> Oral/injectable/implantable contraceptives – R160 per month, up to R2 200 per year Intra-uterine device – R2 600 every 60 months
Maternity benefits	<ul style="list-style-type: none"> Ten antenatal and postnatal consultations at a midwife/GP/gynaecologist Two antenatal and postnatal consultations at a dietician/lactation specialist/antenatal classes Two 2D ultrasound scans
Babies <2 years	Two consultations at a paediatrician/GP/ear, nose, and throat specialist
Child immunisation	Standard immunisation up to seven years
Health screenings	<ul style="list-style-type: none"> One combo health screening (blood glucose, cholesterol, BMI, and blood pressure measurement)**
Preventive care benefits	<ul style="list-style-type: none"> A tetanus vaccine A flu vaccine A mammogram* every two years A Pap smear* every three years A prostate test* An FOBT test* A bone mineral density test* every two years Two HPV vaccinations for girls and boys between 10-14 years or three between 15-26 years

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.