

2025  
**OPTIMUM  
BENEFITS**



# THE OPTIMUM OPTION AT A GLANCE

This traditional and first-class option provides members with comprehensive cover, which includes extensive day-to-day benefits; unlimited private hospitalisation; 26 CDL plus 28 non-CDL conditions. The option to choose if you would like a choice of providers.

## Brief description of benefits offered on the Optimum option:

### Medicine Benefit

#### ACCESS TO:

- Acute and preventative medicines
- Over-the-counter medicine
- Chronic medicine for 26 conditions
- Additional cover for 28 non-CDL conditions and medicines

### In-Hospital Benefits

Unlimited hospital cover

#### AMBULANCE SERVICES

You have 24-hour access to road and air emergency medical assistance

### Out-Of-Hospital Benefits

GP and Specialists consults optical, dental and other benefits

Emergency medical care via ER made EASY

Free and unlimited access to telephonic advice via Hello Doctor

### Maternity Benefits

Comprehensive maternity benefits via the Baby Bumps programme subject to registration onto the programme

Benefits include antenatal care, scans, vitamins and paediatric visits

## Chronic Benefits

You are covered for the 26 CDL conditions as well as:

- Acne
  - Allergic rhinitis
  - Ankylosing spondylitis
  - Attention deficit hyperactivity disorder (ADHD)
  - Cystic fibrosis
  - Depression
  - Eczema
  - Gastro-oesophageal reflux disease (GORD)
  - Gout prophylaxis
  - Meniere's disease
  - Migraine prophylaxis
  - Motor neuron disease
  - Narcolepsy
  - Neurogenic bladder
  - Onychomycosis
  - Osteoporosis
  - Osteoarthritis
  - Overactive bladder syndrome
  - Paget's disease
  - Peptic ulcer disease
  - Peripheral arterial disease
  - Primary hypogonadism (hormonal levels required)
  - Psoriasis
  - Psoriatic arthritis
  - Renal calculi
  - Thromboembolic disease
  - Tourette syndrome
  - Trigeminal neuralgia
- OTHER:**
- HIV/AIDS
  - Oncology

**Remember:** Chronic medicines approved from the additional non-PMB chronic condition benefit on the Classic + Classic Network and Optimum options will be paid subject to an annual limit. Please call 0861 000 300 for more information.

**Don't forget to register onto the Chronic Programme**

## Wellness Benefits

Reduce your risk and stay healthy. The Wellness benefit allows for early detection and pro-active management of your health. You are covered by the Scheme for:

- Glaucoma
- Health Risk Assessment
- DEXA bone density scan
- Cholesterol test
- Mammogram
- Pap smear
- Prostate specific antigen (PSA) testing
- HPV Vaccine
- Colorectal Screening
- Contraception
- Pneumococcal and flu vaccine for high risk members
- TB screening
- Tetanus diphtheria injection
- Blood glucose test

# OPTIMUM OPTION



## MONTHLY CONTRIBUTION

| MEMBER | ADULT  | CHILD  |
|--------|--------|--------|
| R9 287 | R7 905 | R2 326 |

## OUT-OF-HOSPITAL BENEFITS

Not sure what we mean? Refer to glossary on page 73

All sub limits set out below are subject to the day to day limit.

### ANY PROVIDER

All sub-limits set out below are subject to the day-to-day limits.

|                                             |                                                                                                                            |
|---------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Day-to-day limit                            | M R32 480<br>M1 R45 275<br>M2 R52 655<br>M3+ R61 815                                                                       |
| General practitioners (GPs) and specialists | Subject to day-to-day limit                                                                                                |
| Telehealth                                  | Subject to day-to-day limit<br>Scheme rates and managed care protocols apply Please call 0861 000 300 for more information |

### MEDICINES

|                                                                                               |                                                                                                                                                                                             |
|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Acute medicine                                                                                | M R14 040<br>M1 R15 210<br>M2 R17 910<br>M3 R19 540<br>M4+ R20 830                                                                                                                          |
| Over-the-counter (OTC)                                                                        | R265 per beneficiary per day                                                                                                                                                                |
| Contraceptives: oral, devices and injectables<br>Devices subject to pre-authorisation         | R1500 per female beneficiary up to the age of 45 years per annum                                                                                                                            |
| Chronic benefit<br>Benefits are subject to registration onto the chronic management programme | Provider - Any provider<br>26 conditions covered as per the chronic disease list and prescribed minimum benefits.<br>Refer to page 20 for more information on co-payments                   |
| Optometry                                                                                     | Per beneficiary = 1 composite eye examination<br>Per beneficiary = a frame of up to R1 650 and 2 lenses every 24 months<br>OR<br>Contact lenses of up to R2 280 instead of glasses per year |

| <b>DENTISTRY</b>                                                                                                                                               |                                                                                                                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Basic                                                                                                                                                          | Single member = R2 985<br>Family = R6 010                                                                                                                                    |
| Specialised                                                                                                                                                    | Single member = R15 800<br>Family = R23 455                                                                                                                                  |
| Auxiliary services<br>Sub-limits                                                                                                                               | At a preferred provider, subject to auxiliary sub-limit and day-to-day limits<br>Single Member = R5 975<br>Family = R18 030                                                  |
| <b>ADDITIONAL BENEFITS (PAID FROM RISK BENEFITS)</b>                                                                                                           |                                                                                                                                                                              |
| Chronic medicine<br>Non-CDL chronic medicine limit                                                                                                             | 26 conditions – unlimited – plus 28 conditions, subject to sub-limits:<br><br>M R 8 080<br>M1 R16 170<br>M2 R17 460<br>M3 R20 150<br>M4+ R21 280                             |
| Co-payment for non-formulary medicine                                                                                                                          | 20%                                                                                                                                                                          |
| Free Hello Doctor advice                                                                                                                                       | Telephonic advice via Hello Doctor. Talk or text a doctor on your phone, any time, any where, any official language – for free<br>Refer to page 10 for detailed information. |
| Medical and surgical appliances – general<br>Sub-limits to Appliance Benefit<br>Glucometer per beneficiary every 2 years<br>Nebuliser per family every 3 years | Per family = R12 200<br><br>R920<br>R920                                                                                                                                     |
| Hearing aids<br>Per beneficiary every 3 years<br><br>Hearing aid maintenance                                                                                   | Unilateral = R13 720<br>Bilateral = R27 440<br>R1 230 per beneficiary per annum                                                                                              |
| External Prosthesis                                                                                                                                            | Per family per annum = R34 000                                                                                                                                               |
| Patient care programmes<br>(Diabetes, HIV, oncology)                                                                                                           | Subject to registration and managed care protocols                                                                                                                           |

## IMPORTANT

Treatment performed in-hospital needs to be pre-authorized prior to commencement of treatment. Conditions such as cancer will require you to register onto the Patient Care Programme to access benefits. MHC will pay benefits in accordance with the Scheme Rules and clinical protocols per condition. The sub-limits specified below apply per year. If you join the Scheme after January your limits will be pro-rated.

## IN-HOSPITAL BENEFITS

### ANY HOSPITAL

Subject to pre-authorization and managed care protocols

|                             |           |
|-----------------------------|-----------|
| Public and private hospital | Unlimited |
|-----------------------------|-----------|

## CO-PAYMENT FOR SPECIALISED PROCEDURES/TREATMENT

(This co-payment is only applicable to benefit below and not the entire benefit)

|                                                                                                                                                                       |                                                                                                                                                                                                                                                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Procedure/treatment<br>Gastroscopy, colonoscopy, sigmoidoscopy, arthroscopy, joint replacements, diagnostic laparoscopy, urological scopes and facet joint injections | If performed in hospital: A co-payment of R1 200 will apply per admission, which needs to be paid directly by the member to the treating practitioner<br><br>If performed out of hospital: Procedure will be paid at Scheme rate subject to pre-authorisation and clinical protocols |
| GPs and specialists                                                                                                                                                   | Unlimited Specialist – subject to preferred provider rates                                                                                                                                                                                                                           |
| To-take-out medicine                                                                                                                                                  | Up to 7 days                                                                                                                                                                                                                                                                         |
| Organ transplants (non-PMB cases)                                                                                                                                     | Per family = R76 070 limit includes harvesting and transportation costs National donor only                                                                                                                                                                                          |
| Internal prostheses                                                                                                                                                   | Per family per annum = R55 125                                                                                                                                                                                                                                                       |
| Refractive eye surgery                                                                                                                                                | Per beneficiary per eye = R6 540; maximum of R 13 080 for both eyes once per lifetime                                                                                                                                                                                                |
| Reconstructive surgery                                                                                                                                                | Per family = R75 950                                                                                                                                                                                                                                                                 |
| MRI, CT, PET and radio isotope scans                                                                                                                                  | R16 650 per scan per family per annum = 2 scans from risk thereafter from the annual day-to-day limit subject to clinical protocols and pre-authorisation                                                                                                                            |
| Alternative care instead of hospitalisation                                                                                                                           | Per family = 30 days to a maximum of R48 320 per event subject to clinical protocols and pre-authorisation                                                                                                                                                                           |
| Mental health (in- and out-of-hospital)                                                                                                                               | 100% of Scheme rate – Subject to clinical protocols and pre-authorisation                                                                                                                                                                                                            |
| Alcohol and drug rehabilitation                                                                                                                                       | 100% of negotiated rate, a South African National Council on Alcoholism and Drug Dependence (SANCA) approved facility<br>Subject to clinical protocols                                                                                                                               |
| Oncology                                                                                                                                                              | Unlimited clinical protocols and pre-authorisation                                                                                                                                                                                                                                   |
| Pathology and radiology                                                                                                                                               | Unlimited subject to clinical protocols                                                                                                                                                                                                                                              |
| Dialysis                                                                                                                                                              | Unlimited and subject to use of DSP, clinical protocols and pre-authorisation                                                                                                                                                                                                        |
| General dentistry                                                                                                                                                     | Subject to day-to-day limit and sub-limits                                                                                                                                                                                                                                           |
| Ambulance transport                                                                                                                                                   | Emergency road and air transport subject to use of the designated service provider, clinical protocols and pre-authorisation                                                                                                                                                         |