

BENEFITS	ULTRA AFFORDABLE	ULTRA AFFORDABLE VALUE	STANDARD	ACTIVATOR	SUPREME	EXTREME
Monthly Fees	Income Below R10 500 Main: R1 436.00 Adult: R1 436.00 Child: R 723.00 Income Above R10 500 Main: R2 114.00 Adult: R2 114.00 Child: R876.00	Income Below R10 500 Main: R1 402.00 Adult: R1 402.00 Child: R 898.00 Income Above R10 500 Main: R2 064.00 Adult: R2 064.00 Child: R 814.00	Main: R2 852.00 Adult: R2 708.00 Child: R 898.00	Main: R2 995.00 Adult: R2 816.00 Child: R 935.00	Main: R3 421.00 Adult: R3 216.00 Child: R1 071.00	Main: R4 482.00 Adult: R4 212.00 Child: R1 426.00
GP Visits	8 in person consultations and unlimited through the Umvuzo Health Digital Platform	Umvuzo Health promotes access to primary care and related services through the preferred Umvuzo Digital Platform which guides beneficiaries towards appropriate and reasonable levels of care. Services on this option can only be accessed and authorised via the Umvuzo Digital Platform and be channelled to the appropriate levels of care. Benefits include consultations, treatments small procedures and injections	10 in person consultations and unlimited through the Umvuzo Health Digital Platform	Consultations subject to day-to-day availability	Consultations subject to available family benefit	Consultations subject to available family benefit
Specialist Visits	7 visits per family per year	7 visits per family per year	10 visits per family per year	12 visits per family per year	Consultations subject to available Family Benefit	Consultations subject to available Family Benefit
Acute Medication	Unlimited as prescribed by treating GP and subject to formulary	Unlimited as prescribed by treating GP and subject to formulary	Unlimited as prescribed by treating GP and subject to formulary	Acute Medication prescribed by a specialist will be covered in accordance to treatment guidelines Chronic Medication is subject to 27 CDL PMB Conditions, Formularies and Disease Management Programme registration	Restricted acute formulary medication paid out of risk benefits. Acute medication outside of restricted acute formulary will be paid from Family Benefits	Restricted acute formulary medication paid out of risk benefits. Acute medication outside of restricted acute formulary will be paid from Family Benefits.
Chronic Medication	CDL unlimited	CDL unlimited	CDL Unlimited + 6 additional	CDL unlimited	CDL Unlimited + 9 additional from Family Benefit	CDL Unlimited + 9 additional from Family Benefit
Over The Counter Medication	Cover of R750 per beneficiary per year. Maximum of R155 per event	Cover of R750 per beneficiary per year, to a maximum of R155 per event	Cover of R900 per beneficiary per year. Maximum of R170 per event	Cover of R1 700 per beneficiary per year. Maximum of R190 per event	Cover of R2 500 per beneficiary per year. Maximum of R210 per event	Cover of R3 150 per beneficiary per year. Maximum of R270 per event
Terminal & Wound Care	R5 000 per family per year	R5 000 per family per year	R8 000 per family per year	R5 000 per family per year	R10 000 per family per year	R10 000 per family per year
Optometry	Cover of R1 000 per beneficiary (Frames Only). 1 eye test every 24 months. 100% cost of lenses (single/bifocal/multi). Contact lenses at the cost of R1 825	Cover of R1 000 per beneficiary (Frames Only). 1 eye test every 24 months. 100% cost of lenses (single/bifocal/multi). Contact lenses at the cost of R1 825	Cover of R1 250 per beneficiary (Frames Only). 1 eye test every 24 months. 100% cost of lenses (single/bifocal/multi). Contact lenses at the cost of R2 025	Cover of R1 250 per beneficiary (Frames Only). 1 eye test every 24 months. 100% cost of lenses (single/bifocal/multi). Contact lenses at the cost of R2 025	Cover of R1 500 per beneficiary (Frames Only). 1 eye test every 24 months. 100% cost of lenses (single/bifocal/multi). Contact lenses at the cost of R2 225	Cover of R1 750 per beneficiary (Frames Only). 1 eye test every 24 months. 100% cost of lenses (single/bifocal/multi). Contact lenses at the cost of R2 425
Dental Care	Cover of R3 900 per beneficiary per year	Cover of R3 900 per beneficiary per year	Cover of R4 650 per beneficiary per year	Cover of R5 400 per beneficiary per year	Subject to available family benefit	Subject to available family benefit
Specialised Dentistry	-	-	-	-	R7 500 per beneficiary per year	R15 000 per beneficiary per year
Appliances	R8 600 per family per year	R8 600 per family per year	R12 200 per family per year	R12 500 per family per year	R13 000 per family per year	R14 800 per family per year
Scans	1 per family per year RT, MRI and CAT	1 per family per year RT, MRI and CAT	2 per family per year RT, MRI and CAT	2 per family per year RT, MRI and CAT	2 per family per year RT, MRI and CAT	3 per family per year RT, MRI and CAT
Hospitalisation	Unlimited at all Hospitals	Unlimited at all Hospitals	Unlimited at all Hospitals	Unlimited at all Hospitals	Unlimited at all Hospitals	Unlimited at all Hospitals
Internal Medical and Surgical Prostheses	Vascular prosthesis R31 000 Functional items and recuperative prosthesis R10 600 Joint replacements R34 200 Major musculoskeletal prosthesis R21 100	Vascular prosthesis R31 000 Functional items and recuperative prosthesis R10 600 Joint replacements R34 200 Major musculoskeletal prosthesis R21 100	Vascular prosthesis R38 900 Functional items and recuperative prosthesis R12 800 Joint replacements R43 700 Major musculoskeletal prosthesis R26 200	Vascular prosthesis R45 000 Functional items and recuperative prosthesis R15 000 Joint replacements R47 000 Major musculoskeletal prosthesis R28 100	Vascular prosthesis R50 500 Functional items and recuperative prosthesis R17 900 Joint replacements R50 500 Major musculoskeletal prosthesis R30 200	Vascular prosthesis R65 300 Functional items and recuperative prosthesis R23 200 Joint replacements R65 300 Major musculoskeletal prosthesis R39 400
Plan Level	Entry	Entry	Mid-range	Mid-range	High	Very High