

Flexicare

for Household employees 2024

Affordable private day-to-day healthcare cover

Summary of benefits

PRIMARY HEALTHCARE

GP consultations and services	Flexicare	Flexicare Plus
Doctor consultations	Only when referred by a nurse on the network. Unlimited cover for network doctor (GP) consultations at 100% of the Agreed Rate. You can substitute your network doctor visit with a virtual consultation, meaning doctor visits can either be face-to-face or virtual. Risk management protocols apply. Ability to change an allocated network doctor twice per year	Unlimited cover for network doctor (GP) consultations at 100% of the Agreed Rate. You can substitute your network doctor visit with a virtual consultation, meaning doctor visits can either be face-to-face or virtual. Risk management protocols apply. Ability to change an allocated network doctor twice per year
Nurse consultations	Unlimited cover for network nurse consultations at 100% of the Agreed Rate. You can substitute your nurse visit with a virtual consultation, meaning nurse visits can either be face-to-face or virtual.	No cover
Dentistry	No cover	Full mouth examination, preventive treatments, cleaning, scaling, polishing, restorations, composite fillings, treatment of pain and sepsis, infection control and extractions at a network dentist
Optometry (eye care)	No cover	Cover for one eye test every year in the optometry network and one pair of glasses (no contact lenses) every 24 months
Pathology (blood tests)	Only when referred by a network GP after a nurse consultation. 100% of the Agreed Rate. Limited to approved pathology codes. Must be requested by a network doctor (GP) and performed by a network pathologist	100% of the Agreed Rate. Limited to approved pathology codes. Must be requested by a network doctor (GP) and performed by a network pathologist
Radiology (X-rays)	Only when referred by a network GP after a nurse consultation. 100% of the Agreed Rate for black-and-white X-rays and soft-tissue ultrasounds. Must be requested by a network doctor (GP) and performed by a network radiologist	100% of the Agreed Rate for black-and-white X-rays and soft-tissue ultrasounds. Must be requested by a network doctor (GP) and performed by a network radiologist

GP consultations and services

Maternity benefits	<p>Only when referred by a network GP after a nurse consultation.</p> <p>Unlimited network doctor visits throughout the pregnancy.</p> <p>Unlimited acute medicine in line with a defined medicine list prescribed or dispensed by a network doctor and collected from a network pharmacy. Essential blood and screening tests through a network pathologist when referred by a network doctor.</p> <p>Two ultrasound scans for each pregnancy at a network provider (first ultrasound between week 10 and 14, and the second between week 20 and 24)</p>	<p>Unlimited network doctor visits throughout the pregnancy.</p> <p>Unlimited acute medicine in line with a defined medicine list prescribed or dispensed by a network doctor and collected from a network pharmacy. Essential blood and screening tests through a network pathologist when referred by a network doctor.</p> <p>Two ultrasound scans for each pregnancy at a network provider (first ultrasound between week 10 and 14, and the second between week 20 and 24)</p>
HIV management	<p>Access to HIV treatment, counselling and education.</p> <p>Cover for antiretroviral medicine, multivitamins and supportive medicine, blood tests, X-rays and post-exposure prophylaxis medicine. All HIV-related queries and cases are treated with complete confidentiality</p>	
COVID-19 testing	<p>Only when referred by a network GP after a nurse consult</p> <p>For confirmed positive COVID-19 results:</p> <p>Cover for one positive COVID-19 test, with access to out-of-hospital management and appropriate supportive treatment, including diagnostic testing, basic chest X-rays and prescribed medicine</p>	<p>For confirmed positive COVID-19 results:</p> <p>Cover for one positive COVID-19 test, with access to out-of-hospital management and appropriate supportive treatment, including diagnostic testing, basic chest X-rays and prescribed medicine</p>

Procedural treatment

Medical procedures in doctor's room only	<p>Only in a network GP's rooms when referred by a nurse.</p> <p>Cover for a defined list of medical procedures that can be performed in a network doctor's rooms, such as biopsies, wound care and stitching</p>	<p>Cover for a defined list of medical procedures that can be performed in a network doctor's rooms, such as biopsies, wound care and stitching</p>																																																		
	<table border="1"> <thead> <tr> <th>Code</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>0206</td> <td>Intravenous treatment, intravenous infusions, insertion of cannula – chargeable once every 24 hours</td> </tr> <tr> <td>0244</td> <td>Repair of nail bed</td> </tr> <tr> <td>0255</td> <td>Drainage of abscess</td> </tr> <tr> <td>0259</td> <td>Removal of foreign body</td> </tr> <tr> <td>0300</td> <td>Stitching of additional wound</td> </tr> <tr> <td>0301</td> <td>Stitching of additional wound</td> </tr> <tr> <td>0307</td> <td>Excision and repair</td> </tr> <tr> <td>0308</td> <td>Each additional small procedure done at the same time</td> </tr> <tr> <td>0316</td> <td>Fine-needle aspiration for soft tissue (all areas)</td> </tr> <tr> <td>0317</td> <td>Aspiration of cyst or tumour</td> </tr> <tr> <td>0321</td> <td>Biopsy or excision of cyst, benign tumour, aberrant breast tissue, duct papilloma</td> </tr> <tr> <td>0887</td> <td>Limb cast (excluding aftercare)</td> </tr> <tr> <td>0922</td> <td>Removal of foreign bodies requiring incision</td> </tr> <tr> <td>1136</td> <td>Nebulisation (in rooms)</td> </tr> <tr> <td>1192</td> <td>Peak expiratory flow only</td> </tr> <tr> <td>1228</td> <td>General practitioner's fee for taking of an ECG only (without effort:) ½ (item 1232)</td> </tr> <tr> <td>1229</td> <td>General practitioner's fee for taking of an ECG only (with or without effort:) ½ (item 1233)</td> </tr> <tr> <td>1232</td> <td>Electrocardiogram without effort</td> </tr> <tr> <td>1233</td> <td>Electrocardiogram with or without effort</td> </tr> <tr> <td>1234</td> <td>Effort electrocardiogram with the aid of a special bicycle ergometer, monitoring apparatus and availability of associated apparatus</td> </tr> <tr> <td>1235</td> <td>Multi-stage treadmill test</td> </tr> <tr> <td>1236</td> <td>Electrocardiogram without effort: under 4 years old</td> </tr> <tr> <td>1996</td> <td>Bladder catheterisation: male (not at operation)</td> </tr> <tr> <td>1997</td> <td>Bladder catheterisation: female (not at operation)</td> </tr> </tbody> </table>		Code	Description	0206	Intravenous treatment, intravenous infusions, insertion of cannula – chargeable once every 24 hours	0244	Repair of nail bed	0255	Drainage of abscess	0259	Removal of foreign body	0300	Stitching of additional wound	0301	Stitching of additional wound	0307	Excision and repair	0308	Each additional small procedure done at the same time	0316	Fine-needle aspiration for soft tissue (all areas)	0317	Aspiration of cyst or tumour	0321	Biopsy or excision of cyst, benign tumour, aberrant breast tissue, duct papilloma	0887	Limb cast (excluding aftercare)	0922	Removal of foreign bodies requiring incision	1136	Nebulisation (in rooms)	1192	Peak expiratory flow only	1228	General practitioner's fee for taking of an ECG only (without effort:) ½ (item 1232)	1229	General practitioner's fee for taking of an ECG only (with or without effort:) ½ (item 1233)	1232	Electrocardiogram without effort	1233	Electrocardiogram with or without effort	1234	Effort electrocardiogram with the aid of a special bicycle ergometer, monitoring apparatus and availability of associated apparatus	1235	Multi-stage treadmill test	1236	Electrocardiogram without effort: under 4 years old	1996	Bladder catheterisation: male (not at operation)	1997	Bladder catheterisation: female (not at operation)
Code	Description																																																			
0206	Intravenous treatment, intravenous infusions, insertion of cannula – chargeable once every 24 hours																																																			
0244	Repair of nail bed																																																			
0255	Drainage of abscess																																																			
0259	Removal of foreign body																																																			
0300	Stitching of additional wound																																																			
0301	Stitching of additional wound																																																			
0307	Excision and repair																																																			
0308	Each additional small procedure done at the same time																																																			
0316	Fine-needle aspiration for soft tissue (all areas)																																																			
0317	Aspiration of cyst or tumour																																																			
0321	Biopsy or excision of cyst, benign tumour, aberrant breast tissue, duct papilloma																																																			
0887	Limb cast (excluding aftercare)																																																			
0922	Removal of foreign bodies requiring incision																																																			
1136	Nebulisation (in rooms)																																																			
1192	Peak expiratory flow only																																																			
1228	General practitioner's fee for taking of an ECG only (without effort:) ½ (item 1232)																																																			
1229	General practitioner's fee for taking of an ECG only (with or without effort:) ½ (item 1233)																																																			
1232	Electrocardiogram without effort																																																			
1233	Electrocardiogram with or without effort																																																			
1234	Effort electrocardiogram with the aid of a special bicycle ergometer, monitoring apparatus and availability of associated apparatus																																																			
1235	Multi-stage treadmill test																																																			
1236	Electrocardiogram without effort: under 4 years old																																																			
1996	Bladder catheterisation: male (not at operation)																																																			
1997	Bladder catheterisation: female (not at operation)																																																			

Procedural treatment

2133	Circumcision: clamp procedure
2137	Circumcision: surgical excision other than by clamp or dorsal slit, any age
2139	Circumcision: dorsal slit of prepuce (independent procedure)
3615	Routine obstetric ultrasound at 10 to 20 weeks gestational age, preferable at 10 to 14 weeks gestational age to include nuchal translucency assessment
3617	Routine obstetric ultrasound at 20 to 24 weeks to include detailed anatomical assessment

Medicine

Day-to-day medicine	Only when prescribed by a network GP after a nurse consultation. Cover for medicine on our list if a network doctor prescribes it or gives it to you	Cover for medicine on our list if a network doctor prescribes it or gives it to you
Over-the-counter (OTC) medicine	Cover for self-medication on our list, up to R150 per policy per year, up to R75 bi-annual limit, at a network pharmacy	Cover for self-medication on our list, up to R110 per quarter – a maximum of R440 per member per year, at a network pharmacy
Chronic medicine	Cover for HIV medicine on the defined medicine list at a network pharmacy	Cover for chronic medicine on the defined medicine list for 27 chronic conditions (including HIV) at a network pharmacy

Screening and prevention

Flu vaccine	Cover for a flu vaccine once a year from a network pharmacy
Wellness screening	Cover for one wellness screening per year at a network pharmacy or wellness day. Screening includes blood pressure, blood glucose (blood sugar), cholesterol and body mass index (BMI). You can have an HIV test done at the same time

Emergency benefits

Ambulance service	Access to emergency medical services through Netcare 911 ambulance services. Transportation to an appropriate state hospital. Limited to road transportation only. You can call Netcare 911 on 0860 999 911 or the Flexicare call centre on 0860 44 47 79
--------------------------	---

You will not need to pay for approved treatments received from a network provider. However, if you use a provider that is not a part of the network, or if an unapproved treatment is provided, you will be responsible for 100% of the costs.

OPTIONAL TRAUMA BENEFIT OFFERED BY DISCOVERY INSURE

If you have selected the Trauma Benefit when you applied, you have access to emergency private healthcare services at any hospital facility. Please check cover with your employer or check your membership certificate that we included in your welcome communication.

WHAT WE COVER:

- Burns
- Head injuries, chest injuries or severe fractures as a result of a fall
- Loss of an arm, hand, leg or foot
- Near-drowning
- Poisoning or a serious allergic reaction that may cause death
- Injuries resulting from a crime, sexual assault, a car accident or an injury at work.

MEDICAL EVACUATION AND AMBULANCE SERVICES

You can call Netcare 911 on 0860 999 911 or the Flexicare call centre on 0860 444 779. If you experience a traumatic event, you have cover for medical evacuation services to the most clinically appropriate hospital facility.

CASUALTY TREATMENT

At the casualty facility or hospital, you have access to medical treatment in the casualty unit for the defined list of trauma conditions.

TREATMENT IN HOSPITAL

You will have cover for in-patient hospital stabilisation and treatment. Depending on the cover selected, you are covered up to R400,000 or R1 million per admission for hospital and related accounts. If the hospital and related accounts reach the Trauma Benefit cover limit, you will be transferred to a state facility or discharged if stabilised. If your treatment costs more than the selected cover amount, you will need to pay the rest.

TO-TAKE-OUT MEDICATION

Medicine prescribed after treatment in the casualty unit or in the hospital must be collected from a pharmacy. Take-home medicine is covered up to the Trauma Benefit limit, per event.

Underwriting

WAITING PERIODS

A waiting period means that you or your dependants cannot claim for the associated healthcare services during the waiting period. Unless otherwise approved the following waiting periods will apply. A 12-month, condition-specific waiting period may be applied for any condition (including chronic illnesses and HIV) that existed before the start date of the membership.

WAITING PERIOD DESCRIPTIONS

- **General Waiting Period**
1-month general waiting period on all benefits
- **Radiology and Pathology Waiting Period**
1-month waiting period
- **Dentistry Waiting Period**
3-month waiting period
- **Optometry Waiting Period**
3-month total waiting period
- **Maternity Waiting Period**
12-month waiting period
- **HIV Waiting Period**
12-month waiting period
- **Chronic Conditions Waiting Period**
12-month waiting period
- **Over-The-Counter Medicine Waiting Period**
1-month waiting period
- **Trauma Benefit Waiting Period** 1-month waiting period

Your contributions

Flexicare contributions for you and your family with pricing for optional Trauma benefit

Role	Flexicare	Flexicare Plus	Trauma** R400,000	Trauma** R1,000,000
Main member	R350	R469	R187	R262
Spouse	R350	R434	R187	R262
Adult	R350	R434	R187	R262
Child*	R239	R249	R70	R116

* There is no limit to the number of children that will be allowed on the policy. Each child will be charged for separately and can stay on Flexicare if they depend on you financially. Child dependants who turn 21 will be charged adult rates from the month after their birthday.

** The Trauma Benefit is optional. If you activate this benefit, it will apply to you and your dependants on Flexicare. The Trauma Benefit applies to you and your registered dependants.

ACCESSING YOUR BENEFITS

FINDING A HEALTHCARE PROVIDER

Visit www.discovery.co.za to find a healthcare provider in our network

VISITING A HEALTHCARE PROVIDER

When you visit your doctor, pharmacy, dentist or optometrist, you need to take your digital or physical membership card and either your ID, passport or driving licence with you so that your healthcare provider can confirm that you are a Flexicare member. Confirm with your healthcare provider that your treatment or medicine is on our list of benefits.

ACCESSING MATERNITY COVER

To access your maternity benefits you need to visit your doctor(GP) first, they will refer for the necessary blood tests or scans and will be able to prescribe your day-to-day medicine.



ACCESSING TRAUMA BENEFIT COVER, OFFERED BY DISCOVERY INSURE

If your employer has selected Trauma cover for you, please contact us on 0860 44 47 79 for an authorisation for trauma related admission

CONTACTING US

- Scan this code below to access your Flexicare digital tools and support



- USSD service: *120*DISCO# or *120*34726#
- Call: 0860 44 47 79
- Email: flexicare@discovery.co.za
- WhatsApp us on 0860 444 779 and get in touch whenever you need information or have questions on Flexicare.
- Claims can be submitted to: claims@discovery.co.za

If you have any complaints, please email flexicareescalations@discovery.co.za.

If you still have concerns, you can contact Discovery's Group Compliance.

- Email: compliance@discovery.co.za.

Underwritten by
auto general

Flexicare is not a medical scheme. The cover is not the same as that of a medical scheme and is not intended to be a substitute for medical scheme membership. Flexicare and Auto & General Accident Cover is administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07 an authorised financial services provider and underwritten by Auto & General Insurance Company Limited, registration number 1973/016880/06, a licensed non-life insurer and financial services provider. Terms, conditions and limits apply.

Discovery Vitality (Proprietary) Limited, registration number: 1999/007736/07. Terms, conditions and limits apply.

The Trauma Benefit is a non-life insurance policy, underwritten by Discovery Insure Ltd, registration number 2009/011882/06, a licensed non-life insurer and an authorised financial services provider. Flexicare is a separate non-life insurance policy and is not conditional on the purchase of a Trauma Benefit policy.