

# LA Comprehensive

## Hospital and other large cost benefits

MMB is the Major Medical Benefit and this part of your Benefit Option covers your medical expenses if you are admitted to hospital, as well as certain out-of-hospital procedures. You will be covered in hospital up to a maximum of 100% of the LA Health Rate\*, subject to certain clinical criteria and protocols.

If you are planning to go to hospital, you need to phone us and authorise your admission. This helps us plan and get better rates with the hospitals. If you don't let us know, you may have to pay a co-payment. In an emergency, you can go straight to hospital and let us know in the next two days.

## Chronic Illness Benefit

This benefit covers you if you have a long-term condition and you need medicine for the rest of your life. The Scheme provides cover for Prescribed Minimum Benefit conditions according to certain protocols and a formulary. You must use a pharmacy that submits claims through MediKredit. You must remember to register first through SwiftOnline.

The Scheme also provides cover for additional chronic conditions, and you will get cover up to an annual limit of between R2 950 and R9 250, depending on your family size. We will pay for medicine for these additional chronic conditions up to 90% of the LA Health Medicine Rate\*\*.

The Chronic Illness Benefit includes cover for HIV and AIDS, if you register on the HIVCare Programme.

## Above Threshold for day-to-day benefits

Each year we set a rand amount we call the Annual Threshold. When your day-to-day expenses calculate up to this total, the Scheme will take over the payment of certain day-to-day expenses for the remainder of the year. This is called your Above Threshold Benefit. All claims will be paid up to a maximum of the LA Health Rate\*.

Your Medical Savings Account is the tool that will help you pay for your day-to-day expenses while your claims are counting towards this rand value.

If you run out of money in your Medical Savings Account before you reach your Annual Threshold, you will be in a Self-payment Gap. You will then have to pay for your day-to-day claims from your pocket. You must still submit your claims to the Scheme and when they calculate up to the threshold, we take over the payment of your claims.

### Annual Threshold amount for 2010

Principal member	R7 800
Spouse	R5 300
Per adult dependant	R5 300
Per child (maximum 3)	R2 350

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## Medical Savings Account

Your Medical Savings Account (MSA) is the part of your Benefit Option you use to pay for day-to-day medical expenses. The full MSA amount is available to you on 1 January which you repay every month of the year as part of your monthly contribution.

You can choose how you want to pay your day-to-day claims from this money by either paying at our recommended rate, called the LA Health Rate\*, or at the full amount claimed which is called Cost\*\*\* (this will make your Medical Savings Account run out faster though).

The remaining balance at the end of the year will carry over to the next year, and will be paid out to you if you leave the Scheme or transfer to another Scheme, where applicable.

### Medical Savings Account annual amount for 2010

Principal member	R5 676
Spouse	R3 300
Per adult dependant	R3 300
Per child (maximum 3)	R1 452

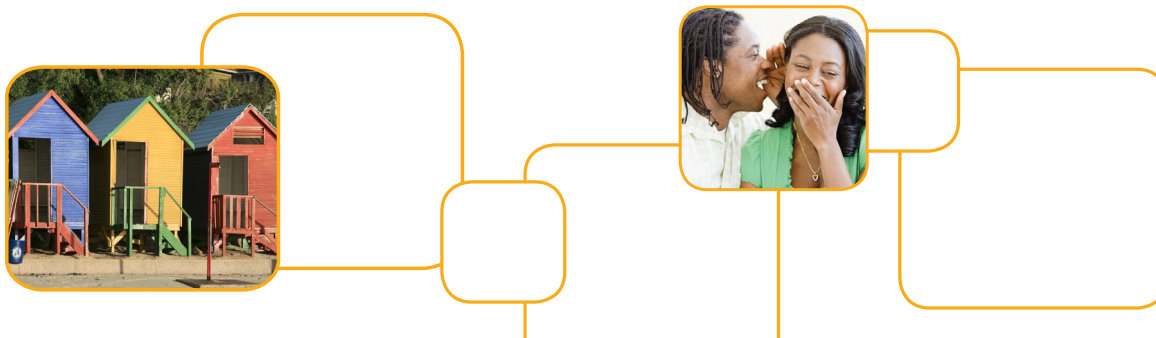
## Contributions

### Total monthly contributions including your Medical Savings Account, for 2010

Principal member	R2 967
Spouse/adult dependant	R2 263
Per child/ dependant	R 720

### What you will pay if you get a 60% subsidy (with a maximum of R2 850.80 per family)

Principal member	R1 187
Principal + Spouse	R2 380
Principal + Spouse + 1 Child	R3 100
Principal + Spouse + 2 Children	R3 820
Principal + Spouse + 3 Children	R4 540



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# Benefit summary

## LA Comprehensive

### Day-to-day benefits

Non - hospital Benefits	How the claim will be reimbursed and accumulate to the Annual Threshold	Annual limit
<b>Over-the-counter medicine</b> (schedule 0, 1 and 2, generic or non-generic, whether prescribed or not)	Paid from MSA at cost, but will not accumulate to the Annual Threshold	Limited to funds in the MSA
<b>Acute / prescribed medicine</b> (schedule 3+, generic or non-generic)	Covered up to 90% of the LA Health Medicine Rate** and will accumulate to your Annual Threshold	Member R 5 500 Member + 1 R 7 000 Member + 2 R 8 450 Member + 3 R 9 750 Member + 4 + R 11 150
<b>Dentistry</b>	Joint in- or out-of-hospital limit paid up to 100% of LA Health Rate* and will accumulate to your Annual Threshold	This will be covered up to a joint maximum amount of R17 450 per person
<b>Optical</b> (including spectacles, frames, contact lenses and refractive eye surgery)	Paid from MSA/ATB up to 100% of the LA Health Rate* and will accumulate to your Annual Threshold	Limited to R2 500 per beneficiary
<b>Optometry consultations</b>	Paid from and limited to funds in MSA/IPB up to 100% of LA Health Rate*	Unlimited once in ATB
<b>Radiology</b> (eg x-rays, ultrasounds)	Paid from MSA/ATB up to 100% of the LA Health Rate* and will accumulate to your Annual Threshold	Unlimited once in ATB
<b>Endoscopic procedures</b> (eg gastroscopy, colonoscopy, sigmoidoscopy and proctoscopy). This includes hospital and related accounts, even if done in hospital	Paid from MMB up to 100% of the LA Health Rate*	Unlimited
<b>External medical items</b> (eg crutches, wheelchairs, artificial limbs, stoma bags, bandages etc)	Paid from MSA/ATB up to 100% of the LA Health Rate* and will accumulate to your Annual Threshold	Limited to R16 000 per family (sub-limit of R10 700 per family for hearing-aids)
<b>Mental health</b> (including drug and alcohol rehabilitation). This also includes psychologists, psychiatrists, art therapy and social workers	Paid from MSA/ATB up to 100%, and will accumulate to the Annual Threshold	Limited to R10 550 per family (sub-limit of R3 500 per beneficiary for alcohol and drug rehabilitation)
<b>Antenatal classes</b>	Paid from MSA/ATB up to 100% of the LA Health Rate* and will accumulate to your Annual Threshold	R900 per beneficiary/pregnancy
<b>Nurse practitioners</b> (excluding domestic services)	Paid from MSA/ATB up to 100% of the LA Health Rate* and will accumulate to your Annual Threshold	Limited to R6 150 per family
<b>Pregnancy scans</b>	Paid from MSA/ATB up to 100% of the LA Health Rate*	Limited to cost of two 2-D scans per pregnancy. 3-D scans covered up to the cost of 2-D scans
<b>MRI and CT scans</b> (referred by a specialist)	Paid from MMB up to 100% of the LA Health Rate*	Unlimited
<b>Audiologists, chiropractors, general practitioners, homeopaths, occupational therapists, pathologists, physiotherapists, podiatrists, specialists, speech therapists etc</b>	Paid from MSA/ATB up to 100% of the LA Health Rate* and will accumulate to your Annual Threshold	Unlimited once in ATB

\***LA Health Rate** – This is a rand amount that is based on the National Health Reference Price List (NHRPL). In certain cases the LA Health Rate is a rate that has been negotiated with certain provider groups. **If your doctor charges more than the LA Health Rate, we will pay you. You will then need to pay the doctor the full claimed amount. If your doctor charges the LA Health Rate or less, we will pay the doctor directly.**

\*\***LA Health Medicine Rate** is the single exit price for medicine plus the professional fee. It will always apply to all MediKredit claims.

\*\*\* If you choose to have the claims from your Medical Savings Account paid out at Cost, LA Health will pay the actual amount you claim for, as long as you have money available in your Medical Savings Account. Please note that only the LA Health Rate accumulates to the Annual Threshold. If there is a difference between the LA Health Rate and **Cost**, this amount does not accumulate to the Annual Threshold.

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### Hospital benefits

Hospital benefits	Annual limit
<b>HIV and AIDS-related illnesses</b>	Unlimited if registered on the HIVCare Programme. R35 000 per family if not registered on the HIVCare Programme
<b>Cochlear implants, implantable defibrillators and auditory brain implants</b>	Limited to R126 000 per beneficiary per year
<b>Major maxillo-facial procedures</b> (severe infections, jaw-joint replacements, cancer-related and certain trauma-related surgery, cleft-lip and palate repairs)	Unlimited
<b>Dentistry in-hospital</b>	First R1 600 of hospital account covered from MSA/ATB; remainder of hospital account covered from MMB, subject to joint overall maximum of R17 450 per beneficiary for basic and specialised dentistry. All related non-hospital accounts will be covered from MSA/ATB. All accounts will accumulate to the limit
<b>Mental Health:</b> including drug and alcohol rehabilitation (PMB)	21 days. Detoxification limited to 3 days
<b>Terminal care benefit (excluding frail care)</b>	Unlimited
<b>Dialysis, chemo- and radiotherapy</b>	Unlimited, subject to approval of treatment plan
<b>Pathology and radiology ( including MRI and CT scans)</b>	Unlimited

#### Prescribed Minimum Benefits

All medical schemes in South Africa are required by law to cover a minimum set of medical treatments for certain conditions, even when scheme exclusions apply or waiting periods have been applied in certain circumstances, or when the limit for a benefit has been reached. The Prescribed Minimum Benefits (PMB) is essentially a package of minimum clinical benefits to be paid by the medical scheme and not from medical savings accounts.

The Prescribed Minimum Benefits consist of a list of treatments and chronic diseases and their respective treatments.

LA Health will pay for Prescribed Minimum Benefits only for treatments provided by or at one of its designated service providers, except in emergency situations.

#### Exclusions

The Rules of the Scheme provide for a limited number of exclusions from benefits in line with the generally accepted practice in the Medical Scheme Industry.

#### LA Health's medical scheme brokers

LA Health will be using medical scheme brokers to sell our Benefit Options. The role of a broker is to provide you with medical scheme information which informs you about the different Options available. The broker will help you to choose an Option which is affordable and that has the benefits which are right for you. The broker will provide group training sessions and one-on-one information sessions about the Option changes and benefits for 2010. They will also sign up new members to LA Health. The broker must provide you with ongoing services and support. This is a requirement of LA Health. If you wish to make use of a broker, please sign a broker appointment form. This form will give the broker access to your medical information.

This brochure is merely a summary of LA Health's key benefits and features, pending approval from the Council for Medical Schemes. If there is any discrepancy between this document and the Rules, the Rules will always prevail.

Discovery Health (Pty) Ltd, referred to as "Discovery Health" is the Scheme's Administrator.

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