

## KeyCare Series 2009

You have selected a plan in the KeyCare Series. There are two plans in the **KeyCare Series – KeyCare Core and KeyCare Plus**. Please keep this information in a safe place for future reference



### Summary of the benefits available on the KeyCare Series

Here is a short summary of the key features of the KeyCare Series. More information is included in this brochure.

The **Hospital Benefit** covers you if you are admitted to a network hospital and Discovery Health has confirmed your admission.

You are covered for approved medicine and treatment for **27 chronic conditions, cancer and HIV and AIDS**.

The KeyCare Plus Plan offers more day-to-day benefits in addition to the above.

### Contact us

#### All our legal rules are available on request

This brochure is merely a summary of the benefits and features of the Discovery Health Medical Scheme plans. The rules of the Discovery Health Medical Scheme apply to your benefits. If you want to refer to the full set of legal rules on which this brochure is based, please write to:

The Compliance Department  
Discovery Health Medical Scheme  
PO Box 784262  
Sandton  
2146

Get detailed information on the benefits offered by your plan on [www.discovery.co.za](http://www.discovery.co.za) or ask us for this.

#### If you want to change your plan

You can change to any other plan at the end of each year with effect from 1 January the following year, not during the year. Please speak to your financial adviser before you decide to change your plan.

## 1 Cover for medical emergencies

### What is a medical emergency?

A medical emergency is the sudden, unexpected onset of a health condition that needs immediate medical or surgical treatment. If this treatment is not provided the person's life would be at risk or result in serious impairment or dysfunction of an organ or body part.

### Cover for medical emergencies in South Africa

Discovery 911 is a nationwide group of highly trained paramedics to help you with all aspects of your medical emergency, including trauma counselling.

Call **Discovery 911 on 0860 999 911** – this number is displayed on your membership card and car sticker for easy reference. If you need medically equipped transport, for example an ambulance or helicopter for a medical emergency, we will cover the costs from your Hospital Benefit, whether you are admitted to hospital or not.

### Emergency care

We will cover your emergency admission in full as a Prescribed Minimum Benefit in whatever hospital you are admitted to. A Prescribed Minimum Benefit is the minimum amount of cover that any medical scheme is obliged to offer. Once you have been stabilised we will arrange a transfer to our Designated Service Provider or DSP (our choice of hospitals or healthcare professionals) for your cover to continue in full. You may choose to stay in the non-DSP hospital and have your claims paid according to your plan type but you may have to pay an amount.

### Cover for going to casualty

If you are admitted to hospital directly from casualty, we will cover the costs of the casualty visit from your Hospital Benefit at the Discovery Health Rate, as long as we confirm your admission.

If you are a KeyCare Plus member and you go to a network casualty or emergency room and you are not admitted to hospital, you pay the first R185 of the account. The rest of the casualty account will be covered from the casualty benefit. Please read section 4 'Cover for day-to-day medical expenses' for more information.

You must call us at the time of the incident to confirm your benefits and Discovery will provide you with an authorisation number. If you do not call us, your accounts will not be covered.

KeyCare Core members do not have cover in a casualty unit.

### We cover HIV prophylactics

If you need HIV prophylactics to prevent HIV infection from mother-to-child transmission, occupational or traumatic exposure to HIV or sexual assault, call us on **0860 99 88 77**.

## 2 You have cover for chronic conditions, HIV and AIDS and cancer

### Chronic Illness Benefit

If you are diagnosed with one or more of the Chronic Disease List conditions, you have cover for 27 chronic diseases according to the Discovery Health KeyCare medicine list. On KeyCare Plus, your chosen GP must prescribe the medicine. On the KeyCare Core Plan, any GP can prescribe the medicine.

### We need to approve your application

We need to approve your application before we cover your condition from the Chronic Illness Benefit. To apply, get an application form on [www.discovery.co.za](http://www.discovery.co.za) or ask us to send you one. Complete the relevant application form with your doctor and send it to us. We will send you a letter detailing the cover available to you.

### What we cover as a Prescribed Minimum Benefit

We cover the diagnosis, consultations and medicine for 27 chronic conditions (including HIV and AIDS) according to the Prescribed Minimum Benefit treatment guidelines.

The Chronic Illness Benefit covers a limited number of diagnostic tests and consultations for these conditions. The benefit includes tests and consultations for both the diagnosis and management for each condition. The KeyCare GPs have this information. You can also find it on our website or contact us for more information.

### You have cover for treating cancer through our Oncology Programme

Our case managers will coordinate your cancer benefits with your treating doctor. We'll approve your treatment as long as it is in line with our clinical guidelines. We'll send you these treatment guidelines when you register on the Oncology Programme.

### 3 Hospital benefits

We cover you in hospital for emergency and planned hospital admissions. In an emergency, go straight to hospital but call us or get someone to call us within 12 hours. For planned hospital admissions, please call us 48 hours before you go to hospital to confirm your admission. You must go to a KeyCare network hospital for planned hospital admissions or you will not be covered and you will have to pay your claims. Always try to go to a KeyCare network hospital in an emergency where possible as not all emergencies result in an admission to hospital. If you do not go to a KeyCare hospital and you are not admitted, we will not cover the claim.

#### Important information about your hospital cover

##### What to do before you go to hospital

Before you go to hospital for any planned procedure, you must:

- See your doctor
- Check whether your specialist participates in the KeyCare direct payment arrangement
- Call us on 0860 99 88 77 to confirm your hospital admission at least 48 hours before you go in. If you do not confirm your admission, we won't pay any of the hospital or related costs.

##### Cover is subject to our rules

We pay medically appropriate claims. Your cover is subject to our scheme rules, funding guidelines and clinical rules.

There are some expenses that you may incur while you are in hospital that your benefit does not cover, for example private ward costs. Certain procedures, medicines or new technologies need separate confirmation while you are in hospital. There are also some benefits that are limited. You can see the summary of limits in this document for more information.

You can find out more about our clinical rules and policies for cover at [www.discovery.co.za/dowecover](http://www.discovery.co.za/dowecover)

#### Hospitalisation

You are covered at 100% of the Discovery Health Rate or agreed rate when admitted to a KeyCare network hospital. In an emergency, you can go to any hospital but you may be transferred to a KeyCare network hospital once you have been stabilised. We must confirm your admission for it to be covered.

#### Cover for Prescribed Minimum Benefits

For Prescribed Minimum Benefits, we pay admissions for approximately 270 defined conditions in full if you have treatment at one of our Designated Service Providers (our choice of hospitals or healthcare professionals). If you do not use our Designated Service Provider you pay have to pay the difference between what the healthcare professional charges and what Discovery Health pays. A detailed description of how we pay for Prescribed Minimum Benefits is available on [www.discovery.co.za](http://www.discovery.co.za)

#### How we cover your healthcare professionals

Your healthcare professionals' accounts are separate from the hospital account. Healthcare professional accounts may include specialist accounts and other related accounts, for example accounts from a surgeon, anaesthetist, pathologist or radiologist.

Healthcare professionals are free to set their own rates. If they charge the Discovery Health Rate or participate in the KeyCare direct payment arrangement, we will pay them directly in full. If they charge more than the Discovery Health Rate or choose not to participate in a payment arrangement, we will pay you. You will have to make sure you pay your healthcare professionals the full amount.

Hospital limits	
Overall limit	There is no overall hospital limit on the KeyCare Plans. Limits apply to some healthcare services and procedures.
Choice of hospitals for planned admissions	The KeyCare Plans cover you in any hospital in the KeyCare network.
Procedures and consultations by specialists participating in payment arrangements	The KeyCare Plans cover you in full for procedures and consultations if you are treated by a specialist who charges according to the KeyCare payment arrangement. If you are treated by a specialist who does not participate in the KeyCare direct payment arrangement, you may need to pay for some of the costs yourself.
Other healthcare professionals	We pay up to 100% of the Discovery Health Rate
Endoscopies (gastroscopy, colonoscopy, sigmoidoscopy and proctoscopy)	As part of an approved hospital admission: no overall limit and no deductible
MRI and CT scans	If admitted for conservative back or neck treatment: you must pay the full cost of the scan because this treatment is an exclusion on the KeyCare Plans.
Dentistry	No benefit in hospital as this healthcare service is an exclusion on the KeyCare Plans.
Mental health benefit	21 days for each person
Alcohol and drug rehabilitation	21 days for each person. You must use our Designated Service Provider.
Terminal care benefit	R15 450 for each person
Dialysis	We cover these expenses up to agreed rates as long as you have registered with a State hospital first and you use either the State or National Renal Care as your service provider.
Chemotherapy and radiotherapy	We will pay for these claims as long as we approve your treatment plan and you use one of our Designated Service Providers.

## Hospital limits

Hospital limits (continued)	
Step down facilities	Subject to authorisation at one of our listed facilities.
Childbirth	<b>Normal vaginal deliveries:</b> a stay of three days and two nights in hospital <b>Caesarian sections:</b> a stay of four days and three nights in hospital
Medicine to take home	We cover medicine to take home up to a limit of R100 as long as it is included in the hospital account.
Organ transplants	Covered only in a state hospital, subject to Prescribed Minimum Benefits.
Major maxillo-facial procedures (internal TM joint surgical procedures, certain cancer, severe trauma-related surgery and cleft-palate repairs)	Unlimited cover in a KeyCare network hospital

### 4 Cover for day-to-day medical expenses (KeyCare Plus only)

Each dependant needs to choose a GP in the KeyCare GP network when joining. When you need to see a GP, you must always go to your chosen GP. If you need to change your GP please contact us. Your GP will be changed by the first of the next month.

Always check with your GP if your treatment or referred treatment will be covered by your plan.

If you need to see a dentist or need glasses, you must go to a dentist or optometrist in our KeyCare network. You can find the details of the providers on [www.discovery.co.za](http://www.discovery.co.za) or contact us.

The network providers displayed on the website may change from time to time. Please confirm with us or them that they are still on the network before your visit.

#### Here are more details about your cover for day-to-day medical expenses:

Casualty visits	<ul style="list-style-type: none"> <li>You must visit a casualty unit at a KeyCare network hospital.</li> <li>You pay the first R185 of the visit per event. If you are admitted to hospital from casualty, this fee will be paid back to you afterwards</li> <li>You must call us to confirm your benefits and to get an authorisation number at the time of the incident, or your claims won't be covered</li> <li>Cover for radiology and pathology claims is subject to specific treatment lists.</li> <li>Medicine to take home is paid up to R100. The medicine does not have to be on the formulary if it is dispensed by the casualty unit.</li> <li>Medicine dispensed by the casualty GP will be paid up to the Discovery Health Rate. It does not have to be on our formulary.</li> <li>Medicine dispensed by any retail pharmacy (even if it's the hospital pharmacy) will only be covered if it is on our medicine list.</li> <li>If a specialist sees you during your casualty visit, the claim will be paid from your Specialist Benefit.</li> <li>Specific mobility aids (such as wheelchairs and crutches) will be paid from your Mobility Devices Benefit if they are on the approved treatment list.</li> </ul>
Trauma Recovery Extender Benefit	We will cover out-of-hospital claims for your recovery after certain traumatic events. This cover applies for the rest of the year in which the trauma takes place. For more information on the conditions we cover, go to <a href="http://www.discovery.co.za">www.discovery.co.za</a>
Cover for GPs	Consultations and minor procedures are covered at your chosen KeyCare network GP We also cover 3 after hour visits for each person at your chosen GP
Out of area cover	If you are not near your network GP and you need treatment, you are covered for one GP claim, one radiology claim, one pathology claim and one pharmacy claim for each person. If medicine is not on our medicine list it is not covered and you need to pay for it.
X-rays and blood tests	Selected basic x-rays and blood tests are covered only if they are requested by your chosen KeyCare network GP
Medicine	Acute medicines (according to the KeyCare acute medicine list) are covered only if prescribed or dispensed by your chosen KeyCare network GP
Dentistry	Selected basic dentistry (such as consultations, fillings and extractions) is covered according to a treatment list and only at a dentist within the KeyCare dentist network. Crowns, bridges, braces, dentures and anything not on the approved treatment list are not covered.
Glasses and eye tests	One eye test and one pair of clear single vision, bifocal or multifocal lenses with a basic frame, or a basic set of contact lenses is covered for each person, every 24 months from your last date of service. Cover only at an optometrist within the KeyCare optometry network If you select anything outside the specific range you must pay for the balance of the account. Tinting, hard coating and sunglasses are examples of items we do not cover
Mobility Devices Benefit	There is an overall limit of R3 000 for each family. We cover specific items only: wheelchairs, wheelchair batteries and cushions, commodes, transfer boards and mobile ramps, long-leg callipers, crutches and walkers. You must go to one of our network providers else you will not be covered. Refer to <a href="http://www.discovery.co.za">www.discovery.co.za</a> or contact us for details of these providers You do not need to get confirmation from us before you get any of these items. But you may want to check with us beforehand to see if you will be covered for the item you want to purchase.
Allied health professionals (examples are physiotherapists, speech therapists, audiologists, chiropractors, homeopaths, psychologist etc)	The KeyCare Plus Plan does not cover these healthcare professionals out of hospital.

## 5 Additional benefits (Plus and Core members)

You also have cover for the following additional benefits:

Specialists	<ul style="list-style-type: none"> <li>Specialists cover up to R1 800 for each person for each year.</li> <li>On KeyCare Plus, your chosen GP must refer you. KeyCare Core members can be referred by any GP.</li> <li>Confirm your benefits with us and obtain a reference number from us before the specialist visit. If you don't get a reference number before your visit, you will have to pay for the claim. The reference number is valid for 30 days.</li> <li>Any x-rays and blood tests referred by a specialist are subject to the R1 800 limit for each person, these tests do not have to be on approved treatment list.</li> <li>Medicine dispensed or scripted by the specialist is paid subject to the acute formulary or medicine list and will also add up to the R1 800 specialist limit.</li> </ul>
Antenatal benefits	<p>We cover:</p> <ul style="list-style-type: none"> <li>Four visits to the gynaecologist when you are pregnant. For KeyCare Plus members your selected GP must refer you</li> <li>One routine scan by your gynaecologist (between 10 and 20 weeks of pregnancy)</li> <li>Selected antenatal blood tests if requested by your gynaecologist</li> <li>Remember that you must get a reference number for your gynaecologist's claims to be covered.</li> </ul>
Screening Benefit	<p>If you go for certain preventive screening tests at a network provider, we will cover the claim. The screening tests include: blood glucose, blood pressure, cholesterol and body mass index at a Discovery Wellness Network provider. The benefit also covers a mammogram, Pap smear, prostate test (PSA) and HIV screening tests.</p>

## 6 Important tips

Ensure you always have your membership card with you (indicating your plan on the back)

Always visit your chosen GP first

Ensure you always visit a casualty unit at a network hospital even if you are out of area – contact us to confirm your benefits

Ensure you get authorisation for casualty, hospital admissions (emergency or non-emergency) and specialist visits

Ensure that the provider is still on our network before visiting them.

**When claiming from Discovery Health for your medical costs, whether these are hospital, chronic or day-to-day, these steps apply:**

- Send your claims within four months, otherwise we will consider them expired and not pay them.
- When sending claims, please make sure the following details are clear:
  - Your membership number
  - The service date
  - Your doctor's details and practice number
  - The amounts charged
  - The relevant consultation, procedure or NAPPI code and diagnostic (ICD-10) codes
  - The name and birth date of the dependant for whom the service was done
  - If paid, attach your receipt or make sure the claim says 'paid'
- Remember to always keep copies of your claims for your own records.
- To see the status of your claim, you can go to [www.discovery.co.za/claimstracker](http://www.discovery.co.za/claimstracker)

## 7 General exclusions

Discovery Health will not pay for healthcare services related to the following except as stipulated in the Prescribed Minimum Benefits:

1. Cosmetic procedures and treatments
2. Otoplasty for bat-ears, portwine stains and blepharoplasty (eyelid surgery)
3. Breast reductions and gynaecomastia
4. Obesity
5. Frail care
6. Infertility
7. Alcohol, drug or solvent abuse
8. Wilfully self-inflicted illness or injury
9. Wilful and material participation in a violation of the law or during a period of imprisonment
10. Wilful participation in war, terrorist activity, riot, civil commotion, rebellion or uprising
11. Experimental, unproven or unregistered treatment or practices
12. Search and rescue.
13. Any costs for which a third party is legally responsible
14. CT colonoscopy and CT angiogram of the coronary vessels

In addition to the exclusions previously mentioned, applicable on all plans, KeyCare Plans have the following additional exclusions, except as stipulated in the Prescribed Minimum Benefits:

1. In-hospital management of:
  - dentistry
  - skin disorders
  - diagnostic work-up
  - conservative back and neck treatment
  - functional nasal and sinus problems
  - elective caesarean section, except if medically necessary
  - surgery for oesophageal reflux
  - back and neck surgery
  - major joint replacements
  - cochlear implants, auditory brain implants and internal nerve stimulators. This includes procedures, devices and processors.
2. Brachytherapy for prostate cancer
3. Refractive eye surgery
4. Fibroadenosis
5. Healthcare services outside South Africa

Discovery Health will cover neither the complications nor the direct or indirect expenses that arise from any of the above.

If you have never belonged to a medical scheme or you have had a break in medical scheme membership of more than 90 days before joining Discovery Health, you will not have access to the Prescribed Minimum Benefits during your waiting period(s). This includes cover for emergency admissions.

# List of KeyCare hospitals for 2009

## Eastern Cape

### East London

- East London Private Hospital\*
- St James Operating Theatres\*

### Humansdorp

- Isivivana Private Hospital\*

### Port Elizabeth

- New Mercantile Hospital

### Queenstown

- Queenstown Private Hospital

### Uitenhage

- Cuyler Clinic

### Umtata

- St Marys Private Hospital

## Free State

### Bethlehem

- Hoogland Medi-Clinic

### Bloemfontein

- Hospitaalpark Clinic (Pasteur Hospital)\*
- Pelonomi Private Hospital
- Rosepark Clinic
- Universitas Private Hospital

### Welkom

- Ernest Opperheimer Hospital
- Hydromed Welkom Medi-Clinic
- St Helena Hospital

## Gauteng

### Boksburg

- Botshelong Empilweni Clinic (Clinix Vosloorus)
- Sunshine Centre

### Brakpan

- Dalview Clinic\*

### Germiston

- Roseacres Clinic

### Heidelberg

- Suikerbosrand Clinic

### Johannesburg

- Rand Clinic
- Johannesburg Eye Clinic\*
- Garden City Clinic
- Brenthurst Clinic

### Kempton Park

- Arwyp Hospital

### Lakefield

- Optiklin Eye Hospital\*

### Lenasia

- Lenmed Clinic Limited

## Pretoria

- Bougainville Private Hospital\*
- Eugene Marais Hospital
- Jacaranda
- Legae Private Clinic
- Louis Pasteur Hospital
- Medforum Medi-Clinic
- Moot Algemene Hospital
- Muelmed Hospital
- Pretoria Eye Institute\*
- Zuid Afrikaans Hospital

## Randfontein

- Robinson Hospital
- Sir Albert Medical Centre

## Soweto

- Clinix Soweto (Tshepo Themba)
- Lesedi Clinic

## Springs

- Springs Parkland Clinic
- St Mary's Maternity Hospital\*

## Thembisa

- Zamokuhle Private Hospital

## Vanderbijlpark

- Medivaal Hospital
- Ocumed\*
- Vaalpark

## Vereeniging

- Clinix Private Hospital Sebokeng (Pty) Ltd
- Midvaal

## KwaZulu Natal

### Amanzimtoti

- Kingsway Hospital

### Chatsworth

- Chatsmed Garden Hospital

### Durban

- City Hospital Ltd
- Entabeni Hospital

### Empangeni

- Empangeni Garden Clinic (Pty) Ltd

### Isipingo

- Isipingo Clinic

### Kokstad

- Kokstad Private Hospital

### Ladysmith

- La Verna Hospital

### Newcastle

- Newcastle Private Hospital

\* These hospitals do not have a casualty facility

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Go to [www.discovery.co.za](http://www.discovery.co.za) for the latest list or phone us.

# List of KeyCare hospitals for 2009

## Phoenix

- Mount Edgecombe

## Pietermaritzburg

- Midlands Medical Centre
- St Anne's

## Pinetown

- The Crompton Hospital

## Port Shepstone

- Hibiscus Hospital

## Richards Bay

- The Bay Hospital

## Sydenham

- Nu Shifa Hospital

## Tongaat

- Victoria Private Hospital

## Lesotho

- Maseru Private Hospital

## Limpopo

### Polokwane

- Limpopo Medi-Clinic

### Thabazimbi

- Curamed Thabazimbi Hospital

### Tzaneen

- Tzaneen Private Hospital

## Mpumalanga

### Barberton

- Barberton Medi-Clinic

### Ermelo

- Ermelo Private Hospital

### Middelburg

- Middelburg Private Hospital

### Nelspruit

- Nelspruit Private Hospital

### Trichardt

- Highveld Medi-Clinic

### Witbank

- Cosmos Hospital

## North West

### Carletonville

- Leslie Williams
- Western Deep Clinic

### Klerksdorp

- Anncron Clinic

### Mafikeng

- Victoria Private Hospital (Mafikeng Hospital)

## Orkney

- West Vaal Clinic

## Potchefstroom

- Potchefstroom Medi-Clinic

## Rustenburg

- Peglerae Hospital

## Northern Cape

### Kimberley

- Kimberley Medi-Clinic

### Upington

- Upington Private Hospital

### Vryburg

- Vryburg Private Hospital

## Western Cape

### Bellville

- Bellville Medical Centre
- Louis Leipoldt

### Cape Town

- Christiaan Barnard Memorial Hospital
- UCT Medical Centre (Pty) Ltd

### Ceres

- Ceres Private Hospital

### Gatesville

- Gatesville Medical Centre

### George

- Geneva Clinic
- George Medi-Clinic

### Hermanus

- Hermanus Medi-Clinic

### Kuils River

- Kuilsriver Private Hospital

### Milnerton

- Milnerton Medi-Clinic

### Mitchells Plain

- Mitchells Plain Medical Centre

### Mossel Bay

- Bayview Hospital

### Oudtshoorn

- Cango Day Clinic\*
- Klein Karoo Medi-Clinic

### Paarl

- Paarl Medi-Clinic

### West Coast

- West Coast Private Hospital

### Worcester

- Worcester Medi-Clinic

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