

FREQUENTLY ASKED QUESTIONS

DISCOVERY HEALTH

HEALTH LAUNCH 2025 | BENEFIT AND PRODUCT UPDATES





Discovery Gap Active

Technical questions related to the introduction of Discovery Gap Active

1. What Does Discovery Gap Active cover?

In 2025, Discovery Gap Active is being introduced as a foundational product option in the Discovery Gap Cover range, in addition to the existing Discovery Gap Core and Discovery Gap Comprehensive products.

The new Discovery Gap Active will cover in-hospital specialists up to 100% of medical scheme rate cover, over and above what the medical scheme pays. The product will also provide full cover for the procedural deductible of R7,500 related to non-PMB admissions on Discovery Health Medical Scheme's Active Smart plan.

The Hospital Admission Benefit (HABE) does not apply on Gap Active, and therefore Vitality status is not linked to cover in any way.

2. Does the Discovery Gap Active plan have an age limit?

While this new option is focused on providing affordable medical shortfall cover to young professionals with a Discovery Health Medical Scheme plan, Discovery Gap Active is available for purchase at any age and with any DHMS plan option, excluding KeyCare. The Discovery Gap Active premium structure is tiered according to different age bands, as indicated below:

Age*	Discovery Health Medical Scheme Classic & Executive Plans		Discovery Health Medical Scheme Essential Plans (including DHMS Active Smart)		Discovery Health Medical Scheme Coastal Plans	
	Single member	Family	Single member	Family	Single member	Family
0-30	R40	R140	R49	R200	R75	R300
31-40	R60	R175	R99	R300	R120	R400
41+	R267	R318	R400	R661	R668	R1,035

*based on age of next birthday, at entry of the oldest member on the policy

3. Will the Discovery Gap Active cover the in-hospital deductibles on the Priority Plans?

No. The Gap Active product will only provide cover for the procedural deductibles on the Discovery Health Medical Scheme Smart Active plan, up to a maximum of R7,500 per event, subject to availability of your overall yearly limit.

4. Are there any exclusions which apply on Gap Active?

There will be a general exclusion over the entire term of a Discovery Gap Active policy for pregnancy and childbirth related claims. All claims related to exclusions on the member's medical aid plan also apply (such as the exclusion of tonsillectomies, myringotomies and adenoidectomies on the DHMS Active Smart plan).

Flexicare and Discovery Emergency Cover

Technical questions related to Flexicare and the enhanced Discovery Emergency Cover offering

1. Is the Flexicare Plus Specialist Benefit live?

Yes, current Flexicare Plus members have access to the Specialist Benefit and this benefit will continue to be available in 2025.

2. Who is eligible to purchase Discovery Health's range of Emergency Cover products?

Employees or individuals who are not members of a medical scheme are eligible to purchase Discovery Health Emergency Cover. Across the range of three products, Emergency Core can be purchased as a standalone product. The newly introduced Emergency Plus and Emergency Max must be purchased in addition to Flexicare Plus or Flexicare Core.

3. What Emergency Cover option will existing Trauma Cover employer groups and individuals be defaulted to from 1 January 2025?

The existing Trauma Benefit will undergo a name change from 1 January 2025 to Emergency Core. The benefit detail, servicing team and access points remain the same with no impact to our current policy holders, apart from the addition of a post-admission benefit which includes a Clicks or Checkers voucher for corporate clients and a premium-waiver for retail clients.



4. Will ambulance services be covered by Discovery Emergency Cover?

Yes, the ambulance benefit on Flexicare will now be included as part of the Trauma and Accident Benefit and will be covered on all products within the Emergency Cover suite - including Emergency Core, Emergency Plus and Emergency Max.

5. What trauma conditions are covered by Emergency Core?

Emergency Core provides emergency transfer, casualty treatment and in-hospital cover for a broad range of trauma and accidents including:

- 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

6. What Cover is provided through the Emergency Plus option?

Emergency Plus includes the Trauma and Accident Benefit covered under Emergency Core, as well as the addition of private casualty treatment for any emergency condition with in-hospital cover for heart attacks and strokes.

7. What financial cover is there for Emergency Plus member when admitted with a suspected heart attack or stroke?

Members on Emergency Plus will have a selected cover limit of either R400,000 or R1 million per event. In the case of being admitted to casualty, the member will be liable for an upfront casualty copayment of R200 at a network facility and R250 at a non-network facility. This copayment will be refunded for diagnosed heart attacks or strokes. If not diagnosed with a heart attack or stroke, the member is still covered for their admission to casualty up to their selected policy limit.

8. What cover is provided on the Emergency Max option?

In addition to the Trauma and Accident Benefit, as well as the Casualty Benefit available on Emergency Plus, Emergency Max provides major medical protection for an additional nine frequent and expensive medical emergencies. These nine conditions include:

- Acute appendicitis
- Acute asthma
- Ectopic pregnancy
- Inflammation of gall bladder
- Fit or seizure
- Acute pneumonia
- Kidney stones
- Acute renal failure
- Pulmonary embolism
 - Covered only up R400 000 regardless of the policy cover limits chosen

Any approved treatment costs associated with emergency transport, trauma conditions, casualty, heart attacks, strokes and take home medication will accumulate to the selected policy limit of either R400,000 or R1 million.

9. In what instance will the casualty co-payment be refunded?

- In the case of members on the Emergency Cover Plus option, those with a diagnosed heart attack, stroke or a trauma related condition will have their casualty copayment refunded
- In the case of members on the Emergency Cover Max option, those with a diagnosed heart attack, stroke or a trauma related condition or 1 of the 9 qualifying major medical conditions will have their casualty copayment refunded. These qualifying major medical conditions include:
 - o Acute appendicitis, acute asthma, ectopic pregnancy, acute inflammation of gall bladder, seizures, acute pneumonia, kidney stones, acute renal failure and pulmonary embolism.

10. Can employer groups select multiple Discovery Emergency Cover options and cover limits within a single employee group?

Employer Groups are requested to make a single selection for both the Emergency Cover option and the cover limit (R400,000 or R1 million) that will then be applicable to all employees. A single plan selection is also applied to an employer's choice of Flexicare plans (Flexicare Core or Flexicare Plus).

11. On which Emergency Cover options is post admission support available?

Enhanced post admission support is available across all three Emergency Cover products, including Emergency Core, Emergency Plus and Emergency Max.



12. What benefits are available as part of enhanced post admission support?

Post admission support for policyholders and their families includes cover for take-home medication and two free telephonic counselling sessions. Employees also have access to a Checkers or Shoprite voucher to assist with groceries, or a Clicks voucher for personal care items while there is a Flexicare premium waiver available to retail/individual clients.

13. When can an existing Flexicare group with Emergency Cover change their emergency cover option and will any waiting periods be applied?

Employer groups can change their Emergency Cover option or limit at any point during the year, with changes taking effect from the 1st of the following month. Underwriting concessions may apply to group business, however this will be reviewed on a case-by-case basis and employers are encouraged to reach out to their Financial Advisors or Corporate Health Managers for assistance.

14. How do members download the Flexicare app and will they be able to view their Emergency Cover in this app?

Members can access their digital tools and policy information by visiting www.discovery.co.za. When accessed on a mobile device, members can save the webpage on their home screen for easy access alongside their existing apps. This digital platform gives members immediate access to their digital card and policy documents.

Members can also easily get their membership certificate and use a range of tools through Ask Flexicare on WhatsApp using 0860 444 779.