

Flexicare Plus

for Individuals

Affordable private day-to-day healthcare cover

What you get from the cover

PRIMARY HEALTHCARE

Consultations and services	
Doctor consultations	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
Dentistry	Full mouth examination, preventive treatments, cleaning, scaling, polishing and fluoride treatment, restorations and composite fillings, treatment of pain and sepsis, infection control and extractions at a network dentist
Optometry	Cover for one eye test every year in the optometry network and one pair of glasses (no contact lenses) every 24 months
Pathology	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	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
Maternity	Unlimited network doctor visits throughout the pregnancy 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 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)
HIV management	Access to HIV treatment, counselling and education 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
COVID-19 testing	For confirmed positive COVID-19 results: 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

Procedural treatment

Medical procedures in doctor's room	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			
	Code	Description	Code	Description
	0206	Intravenous treatment, intravenous infusions, insertion of cannula – chargeable once every 24 hours	1228	General practitioner's fee for taking of an ECG only – without effort: ½ (item 1232)
	0244	Repair of nail bed	1229	General practitioner's fee for taking of an ECG only – with or without effort: ½ (item 1233)
	0255	Drainage of abscess	1232	Electrocardiogram: Without effort
	0259	Removal of foreign body	1233	Electrocardiogram: With or without effort
	0300	Stitching of wound	1234	Effort electrocardiogram with the aid of a special bicycle ergometer, monitoring apparatus and availability of associated apparatus
	0301	Stitching of additional wound	1235	Multi-stage treadmill test
	0307	Excision and repair	1236	Electrocardiogram without effort: under 4 years old
	0308	Each additional small procedure done at the same time	1996	Bladder catheterisation: Male (not at operation)
	0316	Fine needle aspiration for soft tissue (all areas)	1997	Bladder catheterisation: Female (not at operation)
	0317	Aspiration of cyst or tumour	2133	Circumcision: Clamp procedure
	0321	Biopsy or excision of cyst, benign tumour. Aberrant breast tissue, duct papilloma	2137	Circumcision: Surgical excision other than by clamp or dorsal slit, any age
	0887	Limb cast (excluding after-care)	2139	Circumcision: Dorsal slit of prepuce (independent procedure)
	0922	Removal of foreign bodies requiring incision	3615	Routine obstetric ultrasound at 10 to 20 weeks gestational age, preferable at 10 to 14 weeks gestational age to include nuchal translucency assessment
	1136	Nebulisation (in rooms)	3617	Routine obstetric ultrasound at 20 to 24 weeks to include detailed anatomical assessment
	1192	Peak expiratory flow only		

Medicine

Day-to-day medicine	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 R105 per claim event – a maximum of R420 per member per year, limited to one claim event per quarter at a network pharmacy
Chronic medicine	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 services	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
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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.

Accident Cover

Optional Accident cover offered by Auto&General. If you selected the Accident Cover when you applied, you have access to emergency private healthcare services at any hospital facility. Please check your membership certificate that we included in your welcome pack.



ACCIDENT COVER

Depending on the Accident Cover option selected you and your dependants are covered for medical treatment up to a defined limit. You can choose either the Basic or Advanced Accident Cover.

There are no hospital network restrictions and in the case of a traumatic event, emergency services will determine the most clinically appropriate course of action.



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 up to a R20,000 per event per insured party limit.



TREATMENT IN HOSPITAL

If you selected the Advanced Accident Cover depending on the cover amount selected, you have cover for in-patient hospital stabilisation and treatment. You are covered up to R400,000 or R 1,000,000 per event with a total limit of R1,500,000 per annum per insured party for hospital and related accounts. If the hospital and related accounts reach the Accident 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.







ACCIDENTAL DEATH COVER

Auto & General Accident Cover includes access to death cover that provides a lump sum payment in the event of the death of an insured party due to accidental harm. Death cover is limited to R20,000 for children below six years of age and R25,000 for all other insured parties.

WE COVER TREATMENT FOR THE FOLLOWING TRAUMA CONDITIONS

- 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

Accident Cover services offered

Benefit name	Benefit description	Limit
 Basic Accident Cover		
Casualty Treatment	Cover for emergency services in a hospital casualty in the event of a Medical Emergency resulting from a Traumatic Event, up to a maximum Rand value per event.	R20,000 per event, per Insured Party
 Accidental Death Cover		
Death cover	Death of an Insured Party A lump sum payment in the event of the death of an Insured Party because of Accident Harm. Death Cover limited to:	Children below six years: R20,000 All other Insured Parties: R25,000
 Advanced Accident Cover		
Casualty Treatment	Cover for emergency services in a hospital casualty in the event of a Medical Emergency resulting from a Traumatic Event, up to a maximum Rand value per event.	R20,000 per event, per Insured Party
In-Hospital Trauma Treatment	In-hospital cover in the event of a Medical Emergency due to a Traumatic Event. Limited to the actual cost up to a maximum Rand value per Insured Party, per event with a total limit per Insured Party per annum.	R400,000 or R1,000,000 per event with a total limit of R1,500,000 per annum per Insured Party
 Accidental Death Cover		
Death cover	Death of an Insured Party A lump sum payment in the event of the death of an Insured Party as a result of Accident Harm. Death Cover limited to:	Children below six years: R20,000 All other Insured Parties: R25,000

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
- **Accident cover/Trauma Benefit Waiting Period**
1-month waiting period

Your contributions

Flexicare contributions for you and your family with pricing for optional Accident Cover

Role	Flexicare	Basic Accident Cover ¹	Advanced Accident Cover (R400,000) ¹	Advanced Accident Cover (R1,000,000)
Main member	R435	R44	R174	R244
Spouse	R400	R44	R174	R244
Adult	R400	R44	R174	R244
Child ²	R229	R22	R65	R108

¹ The Accident Cover is optional. If you activate this benefit, it will apply to you and your dependants on Flexicare.

² 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.

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 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 ACCIDENT COVER OFFERED BY AUTO&GENERAL

If Accident cover is selected, please contact us on 0860 44 47 79 for an authorisation for trauma related admission.

CONTACTING US

- Scan the QR 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

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.