Diabetes Care programme 2020

Overview

Diabetes mellitus (diabetes) is a chronic condition which, if left untreated, can result in serious complications like blindness, kidney failure and heart attacks. However, good control of diabetes will reduce the occurrence of these complications.

If you are registered on the Chronic Illness Benefit for diabetes, you can join the Diabetes Care Programme. This programme together with your Premier Plus GP, will help you actively manage your diabetes. The programme gives you, and your Premier Plus GP, access to various tools to monitor and manage your condition and to ensure you get high quality coordinated healthcare and improved outcomes.

This document gives you more information about the Diabetes Care programme.

About some of the terms we use in this document

There may be some terms we refer to in the document that you may not be familiar with. Here are the meanings of these terms.

<table>
<thead>
<tr>
<th>TERMINOLOGY</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic Illness Benefit (CIB)</td>
<td>The Chronic Illness Benefit (CIB) covers you for a defined list of chronic conditions. You need to apply to have your medicine and treatment covered for your chronic condition.</td>
</tr>
<tr>
<td>Chronic Disease List (CDL)</td>
<td>A defined list of chronic conditions we cover according to the Prescribed Minimum Benefits (PMBs).</td>
</tr>
<tr>
<td>Designated service provider (DSP)</td>
<td>A healthcare provider (for example doctor, specialist, pharmacist or hospital) who we have an agreement with to provide treatment or services at a contracted rate. Visit <a href="http://www.discovery.co.za">www.discovery.co.za</a> or click on Find a healthcare provider on the Discovery app to view the full list of DSPs.</td>
</tr>
<tr>
<td>Discovery Health Rate</td>
<td>This is a rate we pay for healthcare services from hospitals, pharmacies, healthcare professionals and other providers of relevant health services.</td>
</tr>
</tbody>
</table>
| Emergency medical condition       | An emergency medical condition, also referred to as an emergency, is the sudden and, at the time unexpected onset of a health condition that requires immediate medical and surgical treatment, where failure to provide medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person's life in serious jeopardy.

An emergency does not necessarily require a hospital admission. We may ask you for additional information to confirm the emergency. An emergency does not necessarily require a hospital admission. We may ask you for additional information to confirm the emergency. |
| Guidepost Diabetes Coaching       | A diabetes coaching programme which will be offered to directly support high-risk diabetic patients in collaboration with their Premier Plus GP. |
| HealthID                          | HealthID is an online digital platform that gives your doctor fast, up-to-date access to your health information. Once you have given consent, your doctor can use HealthID to access your medical history, make referrals to other healthcare professionals and check your relevant test results. |
| ICD-10 code                       | A clinical code that describes diseases, signs and symptoms, abnormal findings, complaints, social circumstances and external causes of injury or diseases, as classified by the World Health Organisation (WHO). |
| Premier Plus GP                   | A Premier Plus GP is a network GP who has contracted with us to provide you with coordinated care for defined chronic conditions. |
| Prescribed Minimum Benefits (PMBs)| In terms of the Medical Schemes Act of 1998 (Act No. 131 of 1998) and its Regulations, all medical schemes have to cover the costs related to the diagnosis, treatment and care of:

  - An emergency medical condition
  - A defined list of 270 diagnoses |
### TERMINOLOGY | DESCRIPTION
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- A defined list of 27 chronic conditions. To access Prescribed Minimum Benefits, there are rules defined by the Council for Medical Schemes (CMS) that apply:
- Your medical condition must qualify for cover and be part of the defined list of Prescribed Minimum Benefit conditions
- The treatment needed must match the treatments in the defined benefits
- You must use Designated Service Providers (DSPs) in our network. This does not apply in emergencies. However even in these cases, where appropriate and according to the rules of the Scheme, you may be transferred to a hospital or other service providers in our network, once your condition has stabilised. If you do not use a DSP we will pay up to 80% of the Discovery Health Rate (DHR). You will be responsible for the difference between what we pay and the actual cost of your treatment.

If your treatment doesn’t meet the above criteria, we will pay according to your plan benefits.

### About joining the Diabetes Care programme

Members on all of our plans, who are over the age of 18 years and have been diagnosed and registered on the Chronic Illness Benefit for diabetes, may join the Diabetes Care Programme

#### Members must be registered on the Chronic Illness Benefit for diabetes and consult with a Premier Plus GP

To have access to the Diabetes Care Programme, you must consult with a Premier Plus GP and be registered on the Chronic Illness Benefit for type 1 or type 2 diabetes. Your Premier Plus GP can apply for registration on the Chronic Illness Benefit through HealthID, if you have given consent.

- Members on **Priority, Saver and Core plans** must use a Premier Plus GP for the management of their diabetes, to avoid a 20% co-payment.
- Members on **KeyCare plans** must choose a doctor who is on both the KeyCare or KeyCare Start and Premier Plus GP networks for management of their diabetes, to avoid a 20% co-payment.
- Members on **Smart plans** must choose a doctor who is on both the Smart and Premier Plus GP networks for management of their diabetes, to avoid a 20% co-payment.

Visit www.discovery.co.za or click on **Find a healthcare provider** on the Discovery app to find a doctor on the network.

#### Your Premier Plus GP will work with you to manage your condition

The Diabetes Care programme is based on clinical and lifestyle guidelines. The programme gives you and your Premier Plus GP access to various tools to monitor and manage your condition and to ensure you have access to high-quality coordinated care. You and your GP can track progress on a personalised dashboard on HealthID, displaying your unique Diabetes Management Score. This will help to identify the steps you should take to manage your condition and stay healthy over time.

Your Premier Plus GP will ensure you have regular laboratory tests to assess and monitor diabetes control, kidney function, and cholesterol according to best practice clinical guidelines.

In addition to the standard treatment basket of procedures and consultations available to members registered on the Chronic Illness Benefit with diabetes, members who join the Diabetes Care programme will have the benefit of an additional dietician and one biokineticist consultation per year:

- The biokineticist consult is offered to ensure that you obtain the best advice about exercise, tailored to your needs. To make sure that we fund this from the correct benefit, please ask your biokineticist to claim the code DCARE and include the ICD-10 code on the claim.
The additional dietician consultation is offered to ensure that you obtain the best advice about nutrition. To make sure that we fund this from the correct benefit, please ask your dietician to claim the most appropriate code from the table below and include the ICD-10 code on the claim.

<table>
<thead>
<tr>
<th>Procedure code</th>
<th>Description and rates</th>
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<tbody>
<tr>
<td>84200</td>
<td>Nutritional assessment, counselling and/or treatment. Duration: 1-10min</td>
</tr>
<tr>
<td>84201</td>
<td>Nutritional assessment, counselling and/or treatment. Duration: 11-20min</td>
</tr>
<tr>
<td>84202</td>
<td>Nutritional assessment, counselling and/or treatment. Duration: 21-30min</td>
</tr>
<tr>
<td>84203</td>
<td>Nutritional assessment, counselling and/or treatment. Duration: 31-40min</td>
</tr>
<tr>
<td>84204</td>
<td>Nutritional assessment, counselling and/or treatment. Duration: 41-50min</td>
</tr>
<tr>
<td>84205</td>
<td>Nutritional assessment, counselling and/or treatment. Duration: 51-60min</td>
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</tbody>
</table>

You may also have access to a diabetes educator to help you with the day-to-day management of your condition

Qualifying members who may benefit from diabetes coaching will be contacted by Guidepost, a service provider contracted by the Scheme, who offer telephonic coaching, education and support to help with the day-to-day management of your condition.

Track your Health with health goals

If you are registered on the Chronic Illness Benefit for diabetes or cardiovascular disease, you have access to Health goals which will reward you for achieving personalised health targets. These goals are tailored to your unique personal health profile and are designed to help you manage your health by completing your recommended health tests and providing your Premier Plus GP with the tools needed to better monitor and manage your conditions. Download the Discovery App to activate Health goals.
Contact us

Tel (Members): 0860 99 88 77, Tel (Health partner): 0860 44 55 66, PO Box 784262, Sandton, 2146, www.discovery.co.za, 1 Discovery Place, Sandton, 2196.

Complaints process

Discovery Health Medical Scheme is committed to providing you with the highest standard of service and your feedback is important to us. The following channels are available for your complaints and we encourage you to follow the process:

1 | STEP 1 – TO TAKE YOUR QUERY FURTHER:

If you have already contacted the Discovery Health Medical Scheme and feel that your query has still not been resolved, please complete our online complaints form on www.discovery.co.za. We would also love to hear from you if we have exceeded your expectations.

2 | STEP 2 – TO CONTACT THE PRINCIPAL OFFICER:

If you are still not satisfied with the resolution of your complaint after following the process in Step 1 you are able to escalate your complaint to the Principal Officer of the Discovery Health Medical Scheme. You may lodge a query or complaint with Discovery Health Medical Scheme by completing the online form on www.discovery.co.za or by emailing principalofficer@discovery.co.za.

3 | STEP 3 – TO LODGE A DISPUTE:

If you have received a final decision from Discovery Health Medical Scheme and want to challenge it, you may lodge a formal dispute. You can find more information of the Scheme's dispute process on the website.

4 | STEP 4 – TO CONTACT THE COUNCIL FOR MEDICAL SCHEMES:

Discovery Health Medical Scheme is regulated by the Council for Medical Schemes. You may contact the Council at any stage of the complaints process, but we encourage you to first follow the steps above to resolve your complaint before contacting the Council. Contact details for the Council for Medical Schemes: Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch-Hazel Avenue, Eco Park, Centurion 0157 | complaints@medicalschemes.com 0861 123 267 | www.medicalschemes.com