



DYNAMIX

Comprehensive Benefit Package

From R5 278 Per Month



From the Principal Officer

Choosing the best medical scheme for you, your family or your employees is a big deal. We get it! Which is why we're proud to be renowned as the 'cover that cares' – bringing you affordable healthcare that you can always count on.

CompCare is a long-standing scheme with an outstanding track record of "being there when you need us most". In fact, our scheme has been independently ranked as one of the most financially sustainable schemes on the market. Not only do we offer incredible benefits that appeal to a broad range of interests, including professional and adventure sports, but we're also known for our highly innovative product design and some of the best preventative care and wellness benefit packages.

To us, you're more than just a number. As a valued member, you'll receive the individualised care that's key to our committed and dedicated approach. For whatever happens, we're here for you. Always!

When it comes to your healthcare needs, we've got you covered.

Yours in health and wellness,

Josua Joubert

CEO and Principal Officer

CompCare Wellness Medical Scheme

10 Reasons to choose CompCare

- 01 One of the Top Medical Schemes in SA.
- 02 41 Year track-record & solvency in excess of 45%.
- 03 Wide range of options:
 - Choose the perfect option to fit your lifestyle, needs and budget.
 - Efficiency discounted options ensuring savings on contributions of up to 25% by opting to go to Dis-Chem pharmacies and Netcare hospitals
- 04 Benefits that support and encourage your active lifestyle*:
 - Fitness assessments and exercise prescription programmes with access to registered biokineticists and exercise facilities.
 - Healthy eating and sports nutrition programmes.
- 05 Women's Health*:
 - Mammograms, cervical cancer vaccination and contraceptives
- 06 Men's Health*:
 - Prostate checks.
- 07 Kids' Health*:
 - Baby wellness visits, childhood immunisations, school readiness assessments, pre-school eye, hearing and a dental screening.
 - A visit to an emergency room every year for children younger than six.
 - Kids occupational therapist visits, a fitness assessment and exercise prescription programme, nutritional assessment and healthy eating plan.
 - Unlimited visits to the GP and basic dentistry for children younger than six, once your day-to-day benefits are depleted.
- 08 Extreme and adventure sports:
 - Healthcare cover when participating in extreme and adventure sports*.
 - Access to selected sports supplements and wearable fitness and health monitoring devices on selected CompCare options.
- 09 Emotional Health*:
 - Unlimited professional telephonic emotional health and wellbeing support around-the-clock and referrals for one-on-one counselling.
- 10 Superior services and benefits delivered through our partnership with leading healthcare administrator, Universal Healthcare.

*Paid from scheme risk, will not affect your day-to-day or savings benefits.

Contributions Effective from 1 January 2020

Contributions Effective from Francis y 2020			
Monthly	Principal Member	Adult Dependant	Child Dependant
Risk	R4 540	R3 545	R1 266
Savings	R738	R577	R206
Total	R5 278	R4 122	R1 472
Annual Benefit Amounts for 2020			
Savings	R8 856	R6 924	R2 472
AFB	R3 025	R2 350	R840
Total Day-to-Day	R11 881	R9 274	R3 312
Threshold	R17 885	R13 720	R4 860
SPG	R6 400	R4 760	R1 660

A child dependant is a dependant who is under the age of 21 years or a full time student up to the age of 27 years. An adult dependant is a dependant who is 21 years or older. These rates are only applicable to the main member and a maximum of three child dependants.

DYNAMIX Option

Why it's best for you

You're an experienced professional with kids in high school or varsity. So, what you want is a comprehensive medical scheme with a savings plan. Plus you want the added safety net of above-threshold benefits in case you or your family have a rough year with unforeseen medical, specialist and dental expenses. You want the assurance that if any chronic illness gets the better of you, you don't have to worry about it not being covered. The DYNAMIX option covers 65 chronic illnesses and provides great hospital benefits, offering unlimited hospital cover at any private hospital. Add to that, the peace of mind of knowing that if something happens, like cancer, you've got the cover you need.

Oh, and another reason you've chosen this scheme is because you're big on life and living it to the fullest. You love the cover CompCare provides for adventure sports, which many other schemes exclude. After all, you still enjoy some off-the-beaten-track adventures. And if you think you need something more, why not consider buying up to the PINNACLE option? Surf the CompCare website for more details (compcare.co.za).



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BENEFITS PAID

(Not subject to Savings, AFB, SPG and ATB)

Unlimited GP visits (after limits reached)

Wellness and Preventative Benefits

Ambulance Services, Netcare911

DAY-TO-DAY BENEFITS

LEVEL 1: Savings Account (PMSA)

LEVEL 2: Annual Flexi Benefit (AFB)

LEVEL 3: Self-payment Gap (SPG)

LEVEL 4: Above Threshold Benefit (ATB)

ARE SUBJECT TO:

of the scheme rate

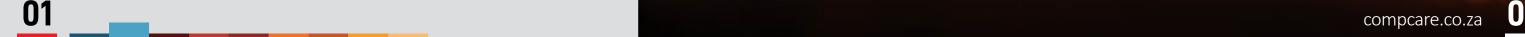
FROM RISK

Understanding your option

Let's get started on explaining some of the basics of your cover: You pay your contribution and based on that we pay your claims. Claims are incurred when you visit a doctor/dentist/optometrist/specialist, or any other registered healthcare provider, or if you are hospitalised.

Claims are divided into two categories, namely routine or day-to-day, out-of-hospital claims and in-hospital (otherwise known as major medical risk) expenses. Your day-to-day claims are initially paid from your savings (PMSA) and thereafter your Annual Flexi Benefit (AFB). You have a set amount of savings per year that you can use for day-to-day claims. If you don't use all your savings in one year, the balance will carry forward to the following year and remain available to you.

This option also provides extended cover, this is referred to as the Above Threshold Benefit (ATB). When you run out of your savings and Annual Flexi Benefit (AFB), you will have to pay for some healthcare expenses from your pocket, this is referred to the Self-payment Gap (SPG). While you are in your SPG, you must still submit all your claims to us so that we know when to start paying from the Above Threshold Benefit (ATB). Your accumulated claims submitted need to reach a specific rand value level before the extended Above Threshold Benefit (ATB) will start to cover your claims. Limits and sub-limits apply to the Above Threshold Benefit (ATB).



DAY-TO-DAY BENEFITS

Subject to savings, AFB, SPG and ATB*

Benefits are paid @ 100% of the scheme rate unless otherwise specified

Consultations, procedures and materials

GP\

Unlimited after threshold.

Specialist

Paid at 100% of the scheme rate.

An ATB limit of R4 150 PMF applies, subject to the overall above threshold limit.

A referral from a GP is required before seeking treatment form a specialist except for services provided by an ophthalmologist, gynaecologist, oncologist or urologist (for beneficiaries over the age of 40) and a paediatrician in respect of children under the age of 2 years or where multiple visits to a specialist has been authorised.

Non-referral will attract a 30% co-payment.



Acute medicines

Prescription medicines - Schedule 3 and higher.

An ATB limit of R3 200 PMF applies, subject to the overall above threshold limit. A 25% co-payment is applicable on non-generic products. Maximum Medical Aid Price (MMAP) applies to medicines where a generic product is available and might result in a co-payment.

Over the counter medicines (OTC)
Including homeopathic medicine and sport supplements with a NAPPI code.

No sub-limit in savings. Limited to R915 PB and R1 370 PMF in AFB to a maximum of R210 per event.

Does not accumulate to threshold.



Basic radiology

Including black and white X-rays and ultrasound

An ATB limit of R3 200 PMF applies, subject to the overall above threshold limit. (Combined ATB limit with pathology)

Specialised radiology

MRI, CT, High resolution CT and PET scans.

Combined limit with in-hospital benefit limit. First R2 250 payable from savings, AFB and SPG with accumulation to the threshold.

Pathology (

An ATB limit of R3 200 PMF applies, subject to the overall above threshold limit. (Combined ATB limit with basic radiology)

Dentistry

Basic dentistry
Unlimited after threshold.

Specialised dentistry

Dentures, crowns, bridgework, metal fillings and inlays.

Subject to a sub-limit of R12 000 PB and R16 800 PMF.

Subject to protocols. A quotation must be submitted for approval prior to the commencement of the treatment. No benefit for orthodontic treatment for patients older than 18 years. Orthodontic treatment limited to R17 500 per lifetime.

Optometry (

100% of SAOA rate (Subject to PMSA and AFB)

Eye test

2 Visits PB

Lenses and contact lenses

Sub-limit of R3 850 PB

Frames

1 Frame PB per year sub-limit of R1 600 included in lenses limit.

Auxiliary services

Audiologists, chiropractors, dietitians, homeopaths (consultations), naturopaths (consultations), speech and occupational therapists, chiropody, podiatry, social workers, physiotherapy and biokinetics

Collective sub-limit of R7 000 PMF in and out of hospital.

Surgical and medical appliances

Wheelchairs, crutches, glucometers, hearing aids, artificial eyes, external fixators and wearable devices (wearable devices subject to NAPPI code and sub-limit of R3 000 PMF)

Pre-authorisation required and sub-limits apply.

*Once the annual threshold is reached, specific Above Threshold Benefits (ATB) will be available up to a limit of R6 660 PB and R11 770 PMF.

HOSPITAL BENEFIT/

Major medical expenses

Benefits are unlimited and paid @ 100% of the scheme rate unless otherwise specified.

Hospitalisation

Specified elective procedures may have a co-payment (excluding PMBs), please refer to our website (compcare.co.za) for list of co-payments and exclusions.

Hospital related accounts

GP visits, specialists, radiology, surgical procedures blood transfusions Specialists paid at 100% of the scheme rate

- Medicine in hospital
 - Medicine upon discharge (TTO)
 7 days' supply
 - Surgical Procedures out-of-hospital
 - Organ transplants
 - Pathology and Basic Radiology
 - Auxillary services in hospital Physiotherapy, biokinetics, dietitian, etc. Combined limit of R7 000 PMF in and out of hospital
 - Surgical prostheses

Overall limit of R40 000 PMF
Sub-limits apply
Contact our pre-authorsation department to find out about our special arrangements for hip and knee replacements

Specialised radiology

MRI, CT, High resolution CT and PET scans.

Combined limit with in-hospital benefit limit. First R2 250 payable from savings, AFB and SPG with accumulation to the threshold.

Radial Keratotomy and excimer laser

Limited to R6 400 per eye inclusive of hospitalisation and related costs

PLEASE NOTE: Treatment subject to pre-authorisation, case management, specialist programmes and scheme protocols.



HOSPITAL PRE-AUTHORISATION PROCESS

It's the member's responsibility to make sure that all non-emergency hospital admissions are authorised by either phoning **0860 111 090** or by sending an e-mail to **preauthorisation@universal.co.za**. These must be authorised at least 48 hours prior to admission. The member, doctor or hospital may phone in for this authorisation. The hospital utilisation management team will need the following details: Name of the patient being admitted, medical

aid number, hospital name, date of admission, name and practice number of admitting practitioner, ICD 10, and procedural codes. A penalty will apply for late requests for authorisations. Emergency admissions must be authorised on the first working day after admission. There will be a penalty if the member does not obtain authorisation. This also applies to oncology treatment.

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© BENEFITS PAID FROM RISK*

*SCHEME PROTOCOLS APPLY



CHRONIC MEDICINES*

(unless otherwise indicated)

65 Chronic conditions are covered. Visit our website to view the list (compcare.co.za). **27 of the 65 chronic conditions** include conditions from the Chronic Disease List (CDL). **38 of the conditions** are referred to as non CDL conditions.

27 CDL chronic conditions – unlimited benefit with no co-payments or levy if the medicine is on the scheme's formulary and the price of the medicine is equal or less than the reference price of the product.

38 non-CDL medicines are subject to available savings, AFB and SPG for registered conditions first and limited to R9 580 PB and R16 000 PMF Thereafter you have access to the Above Threshold Benefit limited to R3 180 PMF.

A 25% co-payment will apply if medicine is not on the formulary.

Phone **0860 111 900** to register your chronic condition or register on the Mobi App.



PRESCRIBED MINIMUM BENEFITS (PMBs)*

All PMBs are defined in the Medical Schemes Act No 131 of 1998. Organ transplants, renal dialysis and plasmapheresis are paid in terms of PMB protocols.



EMERGENCY CARE

What to do in the event of an emergency:

Call the emergency medical services provider, **Netcare 911** on **082 911**. Please note: to avoid a 25% co-payment, authorisation needs to be obtained at the time of the emergency, or within 24 hours thereafter.

PLEASE SEE EMERGENCY EVENTS BELOW*:

Hospital emergency room/Casualty emergency visits resulting in a hospital

• Hospital emergency room/Casualty emergency visits as a result of physical injury

• Hospital emergency room/Casualty emergency visits not requiring admission will

• Refer to Kids Wellness benefits for additional emergency care related to children.

Emergency roadside assistance and ambulance transportation.

admission will be paid from the in-hospital benefit.

caused by an external force will be paid in full.

be paid from your savings and AFB.

• Emergency search and rescue.





Keeping
YOUR
WELLNESS
at heart

PREVENTATIVE CARE*

- GP wellness consultation: One per year, excludes procedures. Limited to tariff codes 0190/1/2 and diagnosis codes (ICD10) Z00.0 or Z00.1.
 - Health check: Blood pressure, blood sugar, cholesterol, BMI and waist circumference One
 measurement per beneficiary over the age of 18 years, limited to R200 per event. Only at DSP
 pharmacy.
 - · Rapid HIV tests.
 - Preventative malaria medication when required.
 - Flu vaccine: One PB.
 - Tetanus vaccine: One vaccination when required.
 - Glaucoma test: One PB.



EMOTIONAL WELLNESS*

- **Psychiatric treatment in hospital** subject to pre-authorisation and protocols.
- Psychology: non-psychiatric admissions Limited to R3 400 PMF.
- Alcoholism, drug dependence and narcotics PMB Only
- Psychiatry Subject to savings and AFB, limited to R10 300 PMF.
- Clinical psychologists Subject to savings and AFB, limited to R2 420 PMF.
- Psychosocial counselling benefit Paid from risk. Unlimited telephonic
 counselling sessions with a Universal network psychologist or social
 worker, with an option for referral to one-on-one sessions with qualified
 psychologists or social workers to a maximum of 3 referral sessions PB per

year.

ONCOLOGY AND SPECIALITY CARE*

- Unlimited oncology including chemotherapy and radiotherapy at our oncology DSP.
- Biological agents and specialised medication limited to R212 000 PMF (25% co-payment on non-PMB medicine).
- Wound care in lieu of hospitalisation.
- · Oxygen home ventilation.
- Home nursing visits limited to 40 days PMF.
- Step-down nursing facilities, hospice and rehabilitation.

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ACTIVE LIFESTYLE PROGRAMMES*

- Fitness Assessment and exercise prescription: Access to the Universal Network of biokineticists for annual fitness assessment, exercise prescription and regular monitoring.
- Nutritional assessment and healthy eating plan: Access to the Universal Network of dietitians for annual assessment, healthy eating plan prescription and regular monitoring.
- Cover for injuries resulting from professional and adventure sports.
- Specified wearable devices subject to savings and a sub-limit of R3 000 PMF (provided there is a valid NAPPI code).
- Specified sports supplements subject to savings and the over the counter medicine (OTC) benefit limit (provided there is a valid NAPPI code).



WOMEN'S HEALTH*:

- Antenatal classes: Paid from savings. Limited to 12 antenatal classes and R1 300 per pregnancy, including a lactation consultation with a midwife.
- Antenatal visits: Limited to 12 ante-natal visits with a GP, midwife or specialist. Maternity bag issued on registration on maternity programme.
- Confinements: Includes 2 x 2D ultrasound pregnancy scans.
 Members can opt for a 3D scan which will be paid at the rate of a 2D scan.
 Fitness Assessment and Exercise prescription: Access to the
- Universal Network of biokineticists for annual fitness assessment, exercise prescription and regular monitoring.

 One additional assessment per pregnant woman per pregnancy.
- Nutritional assessment and healthy eating plan: Access to the Universal Network of dietitians for annual assessment, healthy eating plan prescription and regular monitoring.
 One additional assessment per pregnant women per pregnancy.
- Contraceptives limited to R2 750 PB for oral contraceptives (RP applies) or IUD device.
- HPV (Cervical Cancer) vaccine
 Papsmear



MEN'S HEALTH*

Preventative Care:

Access to your doctor for a physical examination, paid from savings.

Prostate specific antigen (PSA) blood test, paid from risk.



KIDS' WELLNESS*

- Baby Wellness visits, childhood immunisations, school readiness assessments, pre-school eye and hearing screening, a dental screening, and one additional emergency room visit limited to R1 200 per event for children < 6 years.
- Unlimited GP consultations and basic dentistry for children < 6 years once day-to-day benefits are depleted.
- Initial Occupational Therapy consultation
- FitKids fitness assessment and exercise prescription programme
- NutriKids nutritional assessment and healthy eating programme



CHRONIC CONDITION AND MEDICINE REGISTRATION PROCESS

In order to receive the chronic medication benefit, members will need to register their chronic medicine prescriptions with Universal. To register your chronic medicine prescription with Universal, either you, your doctor or your pharmacist will need to contact Universal telephonically on **0861 222 777** or send an e-mail to **chronicmedicine@universal.co.za**. Application forms are no longer needed.

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BOOS YOUR BOOL Staying fit and healthy is a life long struggle that requires motivation in abundance. Find your focus and get fit! From being able to swim that extra length, or run another kilometre to drop that extra kilo, finding that boost of energy and motivation (when all you want to do is reach for the snooze



GO ON, GET ACTIVE!

button) is what it takes to tackle your goals! So, we're here to help...

Whether you're a gym bunny flexing your triceps, someone undergoing rehabilitation after a major injury or operation, or just an average Joe or Jane wanting to improve your physical health, we've got something that's fit for you! The World Health Organization now regards exercise as a treatment, and exercise prescription is an evidence-based way of treating illness and disabilities, and ensuring overall wellness. They recommend that adults aged 18–64 should do a minimum of 150 – 300 minutes of moderate-intensity exercise per week.

We've got you! Sign up for our scientific Fitness Assessment and Exercise Prescription Programme to benefit from regular interaction and monitoring, courtesy of one of our registered biokineticists and exercise facilities. And the sweetener? You can do this without paying gym fees.



EAT YOUR WAY TO WELLNESS

And while you're at it, you might as well start eating healthier too! And we'll guide you along every step of the way. Get going by signing up for our Nutritional Assessment and Healthy Eating programme, which provides a consultation with a registered dietitian with a personalised health eating plan. Whether you want to lose weight or eat correctly for health reasons, or follow a top achiever sports nutrition programme, we're here to help you reach your goals.

Remember: excuses don't burn calories. So, sign up today!

Kids' health

for contraceptives, including Intrauterine devices (IUDs) and oral

contraceptives.

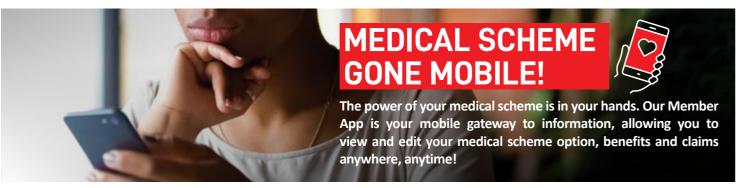
They're the future, so just like you, we love all children. Which is why we've designed a special kid's range of benefits to ensure that their every health and wellness need is catered for.

From baby wellness visits to childhood immunisations, school readiness assessments, pre-school eye, hearing and a dental screening – we've got your precious ones well cared for.

For every child younger than six years, you now get unlimited GP visits and basic dentistry as well as an extra visit to an emergency room every year. Furthermore, we cover a consultation with an occupational therapist, a fitness assessment and exercise prescription programme, as well as a nutritional assessment and healthy eating plan specially for kids. Now all you have to worry about is convincing them to eat the green stuff on their dinner plate!







Submit new claims and view your claims history.

HOSPITAL PRE-AUTHORISATION

Submit new pre-auth requests and view your hospital pre-auth history.

AND MUCH MORE

Request your Tax or Member Certificates. See all your registered Chronic Conditions, register new conditions, update your scripts and apply for an extended supply. Access your personal details, your dependant details and your scheme details. You can also search for Network Specialists in your area.

Submit gueries and view important contact details.

MEMBERSHIP CARD

See a digital version of your Membership Card so you're never caught without it again! You can even send it on as and when needed.

View all your benefits, annual limits and your available



YOUR MIND MATTERS

South African studies show that more than 30% of adults will have suffered from some form of mental disorder in their lifetime, and one in six adults – or 16.5% – suffered from common mental disorders. A quarter of these cases were classified as serious, which represents about four out of every hundred South Africans.

When it comes to your emotional health and wellbeing, we've got you covered! Because we care, we've made sure that you have the necessary benefits available to you when you need them most. We offer a 24-hour help-line with trained clinical professionals to help you whenever needed. A referral for face-to-face counselling is also available as part of your benefit package.



NO COMPROMISE ON CANCER CARE

Did you know that ¼ of South Africans have either personally been diagnosed, or have a loved one, family, friend or colleague with cancer? And as many as 100 000 South Africans are diagnosed with cancer every year. So, we want to give you the peace of mind of knowing that whatever happens, we've got you covered!

We offer an unlimited cancer treatment programme, subject to our treatment protocols at our oncology DSP.



HOW TO REGISTER ON THE MOBI APP

Keep in control of your medical scheme with the CompCare App. Simple, seamless and super convenient, the App makes it quick and easy for you to check anything from claims to benefits, and where your closest doctor is. Download the Mobi App on your smart device using the Google Play Store (Android users) or the Apple App Store (IOS users). Find and download the App by searching for 'Universal Healthcare Member'.



MEDICAL COVER WITHOUT THE COPAYS:

You can get more with CompCare by using our extensive network of Healthcare providers. Avoid co-payments and out of pocket payments by using one of the following Universal Healthcare Networks:

- Hospital

- Psychosocial counsellors

For more information visit our website (compcare.co.za) or Mobi app





This brochure is a summary of the benefits of CompCare Wellness Medical Scheme. All information relating to the 2020 CompCare Wellness Medical Scheme benefits and contributions are subject to formal approval by the Council for Medical Schemes. On joining the Scheme, all members will receive a detailed member brochure, as approved. The final registered Rules of the Scheme will apply.