

You will love the way we give you more

Choice.

DYNAMIX

Comprehensive Benefit Package

From R 5 563 Per Month



From the desk of our Principal Officer

At CompCare we fully appreciate that choosing the right medical scheme for you, and those you care for, is one of the most important decisions you'll ever make. We also know that when selecting the best, most appropriate medical scheme for employees, making the right decision is as important. We are immensely proud of the road we have walked with you our members and the businesses we serve. Our individual and corporate clients will attest that we are a medical scheme that understands. More importantly still, we are there for everyone – every step of the way.

Even though we have an established track-record spanning more than 42 years and have independently been ranked as one of the most financially stable schemes in the market, we do not rest on our laurels. We have put in some hard work over several decades, and you'll find that in 2021 we have yet again designed market-leading preventative care and wellness benefits for our diverse membership base, while making sure that our innovative, well-crafted products still guarantee maximum value that meets your needs and budget.

If professional or adventure sports is what gets your heart racing you'll be excited to know that as the medical scheme for adventure seekers, we've got your next move well and truly covered.

Yours in health and wellness,

Josua Toubert

CEO and Principal Officer
CompCare Medical Scheme

10 Reasons to choose CompCare

01 WE'RE ONE OF THE TOP SCHEMES IN SOUTH AFRICA

This is proven by our solid 42-year track record and solvency levels of more than 45%, which makes us one of the most financially stable schemes in SA.

02 SUPERIOR SERVICES AND BENEFITS

Delivered through our partnership with leading Healthcare Administrator, Universal Healthcare Administrators

03 WIDE RANGE OF OPTIONS

Get the value you deserve and choose the perfect option to fit not only your personal lifestyle, needs and budget, but also that of your employees. Our efficiency discounted options ensure savings on contributions of up to 25% when choosing Dis-Chem pharmacies for chronic medication and Netcare hospitals for planned, elective procedures.

04 BENEFITS THAT BOOST YOUR ACTIVE LIFESTYLE*

At CompCare healthy eating and sports nutrition programmes, as well as fitness assessments and exercise prescription programmes with access to registered biokineticists and exercise facilities, come as part of the deal.

05 THE SCHEME FOR ADVENTURE SEEKERS*

In addition to solid healthcare cover we bring you total peace of mind when participating in extreme and adventure sports.

06 UNLIMITED ONCOLOGY

We've got you covered with our unlimited cancer treatment programme, subject to our treatment protocols at our designated service provider (DSP) for oncology.

In addition to our broad range of Wellness Benefits, we also cover:

07 WOMEN'S HEALTH*

Mammograms, HPV (cervical cancer) vaccination and contraceptives.

08 MEN'S HEALTH*

Prostate checks and PSA blood test.

09 KIDS HEALTH*

Baby wellness visits, childhood immunisations, school readiness assessments, pre-school eye, hearing and dental screening, occupational therapist visits for children, a fitness assessment and exercise prescription programme, as well as a nutritional assessment and healthy eating plan. Kids under 6 get unlimited visits to the GP and basic dentistry, once your day-to-day benefits are depleted.

10 EMOTIONAL HEALTH*

Unlimited professional telephonic emotional health and wellbeing support, around-the-clock, and referrals for one-on-one counselling should this be required.

Contributions Effective from 1 January 2021

Monthly	Principal Member	Adult Dependant	Child Dependant
Risk	R4 786	R3 738	R1 335
Savings	R777	R607	R216
Total	R5 563	R4 345	R1 551

Annual Benefit Amounts for 2021			
Savings	R9 324	R7 284	R2 592
AFB	R3 144	R2 436	R872
Total Day-to-Day	R12 468	R9 720	R3 464
Threshold	R19 128	R14 664	R5 192
SPG	R6 660	R4 944	R1 728

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

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).

BENEFITS PAID FROM RISK

(Not subject to Savings)

All PMBs

Wellness and Preventative Benefits
Unlimited GP visits and Conservative
Dentistry (after limits reached)
Ambulance Services, Netcare911

DAY-TO-DAY BENEFITS ARE SUBJECT TO:

LEVEL 1: Savings Account (PMSA)

LEVEL 2: Annual Flexi Benefit (AFB)

LEVEL 3: Self-payment Gap (SPG)

LEVEL 4: Above Threshold Benefit (ATB)

HOSPITAL BENEFIT

Unlimited cover for in-hospital and
hospital-related services at 100%
of the scheme rate. Specialists are
paid at 100% of the scheme rate.



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 300 PMF applies, subject to the overall above threshold limit.

A referral from a GP is required before seeking treatment from 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.

Medicines

Acute medicines

Prescription medicines – Schedule 3 and higher.

An ATB limit of R3 350 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 R950 PB and R1 400 PMF in AFB to a maximum of R220 per event.

Does not accumulate to threshold.

Radiology

Basic radiology

Including black and white X-rays and ultrasound

An ATB limit of R3 350 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 350 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 500 PB and R17 500 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 R4 000 PB.

Frames

1 Frame PB per year sub-limit of R1 700 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 200 PMF in and out of hospital.

Surgical and medical appliances

Wheelchairs, crutches, glucometers, hearing aids, artificial eyes and, external fixators

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 900 PB and R12 230 PMF.**



HOSPITAL BENEFIT/

Major medical expenses

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

Overall Annual Limit (OAL) unlimited

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.

Collective limit of R7 200 PMF in and out of hospital.

Surgical prostheses

Overall limit of R41 500 PMF.

Sub-limits apply.

Contact our pre-authorisation 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 700 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.



BENEFITS PAID FROM RISK*

(unless otherwise indicated)



CHRONIC MEDICINES*

65 Chronic conditions are covered. Visit our website to view the list (compicare.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 950 PB** and **R16 500 PMF**. Thereafter you have access to the Above Threshold Benefit limited to **R3 300 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*:

- Emergency roadside assistance and ambulance transportation.
- **Hospital emergency room/Casualty emergency** visits resulting in a hospital admission will be **paid from the in-hospital benefit**.
- **Hospital emergency room/Casualty emergency** visits as a result of physical injury caused by an external force will be paid in full.
- **Hospital emergency room/Casualty emergency** visits not requiring admission will be paid from your savings and AFB.
- **Emergency search and rescue.**
- Refer to Kids Wellness benefits for additional emergency care related to children.



COVID-19 BENEFIT

The Scheme will cover the SAHPRA approved vaccination from risk. Members who has tested positive for COVID-19 will have access to the following benefits:

- Pulse oximeter.
- Nebulizer.
- Oxygenator.
- Thermometer.
- GP consultations (COVID-19 related at R400 PB).
- PCR test: 3 per beneficiary.
- 1 Antibody test per beneficiary.
- Chest physiotherapy.

Pre-authorisation and managed care protocols apply.

*DYNAMIX
covers
65
chronic
conditions*



WOMEN'S HEALTH*:

- **Antenatal classes: Paid from savings.** Limited to 12 antenatal classes and **R1 400 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, virtual consultations, 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, virtual consultations, healthy eating plan prescription and regular monitoring.
One additional assessment per pregnant women per pregnancy.
- **Contraceptives** limited to **R2 850 PB** for oral contraceptives (RP applies) or IUD device.
- **HPV (Cervical Cancer) vaccine**
- **Papsmear**

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 **R220 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.
- **Colorectal cancer screening:** One bowel cancer screening test every two years for beneficiaries between the ages of 45 and 75.



EMOTIONAL WELLNESS*

- **Psychiatric treatment in hospital** — subject to pre-authorisation and protocols.
- **Psychology: non-psychiatric admissions** — Limited to **R3 550 PMF**.
- **Alcoholism, drug dependence and narcotics** — PMB Only
- **Psychiatry** — Subject to savings and AFB, limited to **R10 700 PMF**.
- **Clinical psychologists** — Subject to savings and AFB, limited to **R2 500 PMF**.
- **Psychosocial counselling benefit** — Paid from risk. Unlimited telephonic counselling sessions through the Universal Wellness Care Centre, with an option for referral to one-on-one sessions with qualified psychologists, social workers or registered counsellors 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 **R220 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.**



ACTIVE LIFESTYLE PROGRAMMES*

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



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 250 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
- **Kid's fitness assessment and exercise prescription** programme
- **Kid's 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.

YOUR BODY YOUR MOVE

We know that staying fit and healthy is important to you and we're with you on that journey every step of the way, whether that's one step or ten thousand every day

Snap into action, or keep riding that wave of motivation with our fitness, exercise and nutritional benefits – all of which are specially designed so you can get the most out of your active lifestyle.



GO ON, GET ACTIVE!

From just-off-the-couch to climbing that peak, from chasing that personal best to just enough to deserve a rest, we've got something that works for you. The World Health Organization now regards exercise as a treatment, and recommends that adults aged 18–64 should do a minimum of 150 – 300 minutes of moderate-intensity exercise per week.

You can be assured we've got you covered. Sign up for our scientific Fitness Assessment and Exercise Prescription Programme at no extra cost to benefit from regular interaction and monitoring, courtesy of one of our registered biokineticists and exercise facilities. That's right, no gym fees needed.



EAT YOUR WAY TO WELLNESS

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 smash your goals. Our Nutritional Assessment and Healthy Eating Programme provides a consultation with a registered dietitian to whip up your personalised healthy eating plan. And the cherry on top? It's available across all our plans at no extra cost to you. **We're with you every bite of the way, so why not sign up today?**

Men's health

We know you're man enough to hear this. Did you know that over 4 000 men, some as young as 40, are diagnosed with prostate cancer in South Africa every year and that prostate problems are one of the most common conditions affecting men today? So gents, a prostate check together with a prostate specific antigen (PSA) blood test, is definitely the right thing to do to help you take charge of your health. Your PSA test is a guaranteed benefit, and paid from the scheme's risk pool, which means it comes at no extra cost to you. There is no excuse not to do the right thing.

Women's health

There's never been a better time than now to invest in some self-care. Take advantage of the bouquet of routine health screenings on offer, which were designed for maximum value no matter your individual stage of life and lifestyle. This includes a regular mammogram, pap smear, HPV (cervical cancer) vaccine, annual benefit for contraceptives (including IUDs), antenatal classes and visits and more!

Kids' health

There's nothing small about our kids' health benefits. We know your children mean the world to you, which is why we packed a world of value – specifically with their health and wellness needs in mind – into our plans. From baby wellness visits to childhood immunisations, school readiness assessments, pre-school eye, hearing and a dental screening, we've got their every move covered. For children younger than six years, you also get unlimited GP visits and basic dentistry as well as an extra visit to an emergency room every year. We also 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.



LIVE WITHOUT LIMITS!



MEDICAL SCHEME GONE MOBILE!

The power of your medical scheme is in your hands. Our Member App is your mobile gateway to information, allowing you to view and edit your medical scheme option, benefits and claims anywhere, anytime!



CLAIMS

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.

QUERY

Submit queries 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.

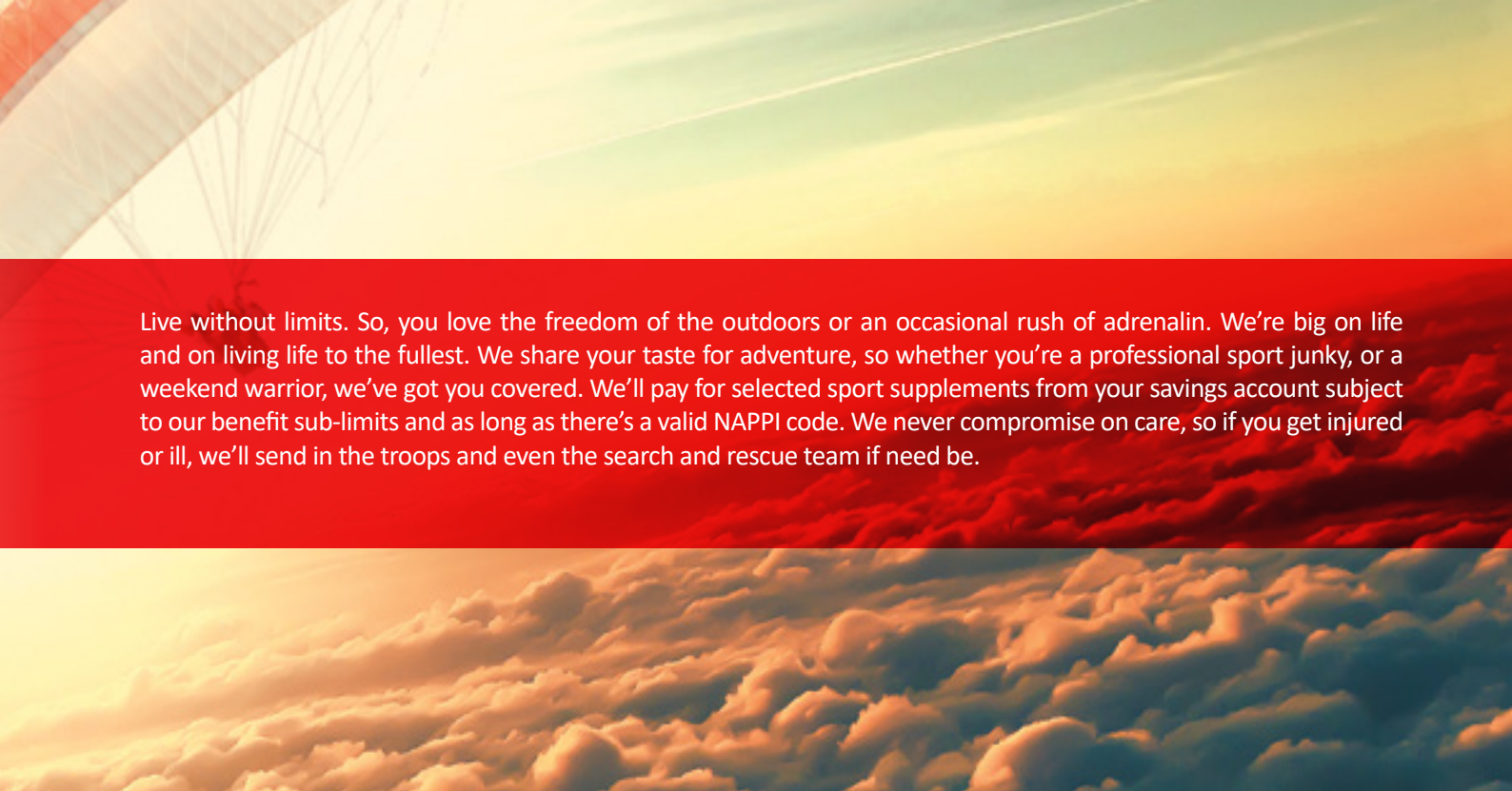
BENEFITS

View all your benefits, annual limits and your available balances.



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'.



Live without limits. So, you love the freedom of the outdoors or an occasional rush of adrenalin. We're big on life and on living life to the fullest. We share your taste for adventure, so whether you're a professional sport junky, or a weekend warrior, we've got you covered. We'll pay for selected sport supplements from your savings account subject to our benefit sub-limits and as long as there's a valid NAPPI code. We never compromise on care, so if you get injured or ill, we'll send in the troops and even the search and rescue team if need be.



MENTAL HEALTH MATTERS

It's been a day, a month, a year, a decade... Your mental health influences how you feel, act, think and make choices, how you deal with stress and how you connect with others. 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 suffered from common mental disorders. When it comes to your emotional health and wellbeing, we want you to know we've got you covered. We offer a 24-hour helpline with trained clinical professionals to help you whenever needed. But the care doesn't stop there. A referral for face-to-face counselling is also available as part of your benefit package



NO COMPROMISE ON CANCER CARE

At CompCare we're big on the Big C. And by C we mean CARE. Did you know that a quarter of South Africans have either personally been diagnosed, or have a loved one, family, friend or colleague with cancer? With as many as 100 000 South Africans diagnosed with cancer every year, we want you to know that no matter what happens, we've got you covered with our unlimited cancer treatment programme, subject to our treatment protocols at designated oncology service providers.



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
- Oncology
- Pharmacy
- Biokineticists
- Dietitians
- Psychosocial counsellors

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

DYNAMIX Option

Comprehensive Benefit Package

Glossary

A	Adult Dependant	PMF	Per Member Family
AFB	Annual Flexi Benefit	PMB	Prescribed Minimum Benefits
ATB	Above Threshold Benefit	PMSA	Personal Medical Savings Account
C	Child Dependant	PP	Preferred Provider
CDL	Chronic Disease List	RP	Reference Pricing
DSP	Designated Service Provider	SAOA	South African Optometric Association
MMAP	Maximum Medical Aid Price	SPG	Self Payment Gap
OTC	Over the Counter Medicine	TL	Threshold Level
P	Principal Member	TTO	To Take Out (Medicine taken on discharge from hospital)
PB	Per Beneficiary		

Contact details

CompCare:

Universal Place, 15 Tambach Road,
Sunninghill Park, Sandton

PO Box 1411, Rivonia, 2128

Tel: 0861 222 777 | Fax: 0866 450 991

E-mail: compcare@universal.co.za

Website: compcare.co.za

Complaints escalated to the Council for Medical Schemes:

Tel: 0861 123 267

E-mail: complaints@medicalschemes.com

Web: medicalschemes.com



UniversalTM

This brochure is a summary of the benefits of CompCare Medical Scheme. All information relating to the 2021 CompCare 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.

All limits are pro-rated when a member or a beneficiary joins the scheme during the year, calculated from the date of registration to the end of that financial year. If you leave the Scheme before the year is up and have used all the funds in your savings account, you will owe the Scheme the advanced portion of the Medical Savings Account you have used as it is a pro-rated benefit allocated in advance for the full benefit year. This summary is for information purposes only and does not supersede the rules of the Scheme. In the event of a discrepancy between the summary and the rules, the rules will prevail.

CompCare Medical Scheme is administered by Universal Healthcare Administrators (Pty) Ltd.