

From only **R4 851 Per Month** 

# THE DYNAMIX OPTION 2022

Comprehensive Benefits Package



At CompCare we believe in giving you more. Complete Cover. Committed Care. CompCare.

compcare.co.za



# THE DYNAMIX

DYNAMIX - KNOW YOUR OPTION, You're an

experienced professional with kids in high school or varsity. What you want is a comprehensive medical scheme with a savings plan.

### **COMPREHENSIVE BENEFITS PACKAGE**

Comprehensive cover with a savings plan with above-threshold benefits. DYNAMIX covers 65 chronic illnesses and provides great hospital benefits, offering unlimited hospital cover at any private hospital.

DYNAMIX ED: Covers 65 chronic illnesses at any Dis-Chem pharmacy and unlimited hospital cover at any private Netcare hospital for planned procedures.

#### UNLIMITED HOSPITALISATION

DYNAMIX offers you unlimited cover for in-hospital and hospital-related services at 100% of the scheme rate. Specialists are paid at 100% of the

DYNAMIX ED Specialists are paid at 100% of the scheme rate at any Netcare hospital for planned procedures.

#### BENEFITS PAID FROM RISK

DYNAMIX and DYNAMIX ED All PMBs, Wellness and Preventative Benefits, Unlimited GP visits and Conservative Dentistry (after limits reached), Ambulance Services (Netcare 911). Not subject to Savings.

#### WELLNESS AND PREVENTATIVE BENEFITS

DYNAMIX and DYNAMIX ED includes preventative care, emotional wellness, active lifestyle programmes, women's health, kids' wellness and men's health benefits.

Live life to the fullest.

# **ADVENTURE**

are covered.

chronic conditions covered.

Dis-Chem pharmacies only

COMPCARES PREVENTATIVE BENEFITS Keep YOUR **WELLNESS** at heart.

**Contributions Effective from 1 January 2022** 

Monthly	Principal Member	Adult Dependant	Child Dependant
Risk	R5 071	R3 961	R1 414
Savings	R823	R643	R229
Total	R5 894	R4 604	R1 643
Annual Benefit An	nounts for 2022		
Savings	R9 876	R7 716	R2 748
AFB	R3 276	R2 532	R900
Total Day-to-Day	R13 152	R10 248	R3 648
Threshold	R21 144	R16 188	R5 724
SPG	R7 992	R5 940	R2 076

i (En				
Monthly	Principal Member	Adult Dependant	Child Dependant	
Risk	R4 173	R3 256	R1 180	
Savings	R678	R529	R191	
Total	R4 851	R3 785	R1 371	
Annual Benefit Amounts for 2022				
Savings	R8 136	R6 348	R2 292	
AFB	R2 688	R2 100	R768	
Total Day-to-Day	R10 824	R8 448	R3 060	
Threshold	R18 816	R14 388	R5 136	
SPG	R7 992	R5 940	R2 076	

THESE BENEFITS ARE SUBJECT TO YOUR SAVINGS (PMSA), AFB, SPG AND ATB\*

# DAY-TO-DAY BENEFITS



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 500 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, dermatologist, 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. Please remember to obtain pre-authorisation for any procedures.

#### **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 500 PMF in and out of hospital.

#### Radiology

#### Basic radiology

Including black and white X-rays and ultrasound. An ATB limit of R3 500 PMF applies, subject to the overall above threshold limit. (Combined ATB limit with pathology) Specialised radiology

Combined limit with in-hospital benefit limit. First R2 250 payable from savings, AFB and SPG with accumulation to the threshold. Contact 0860 111 090 or email preauthorisation@universal.co.za

#### Surgical and medical appliances

Wheelchairs, crutches, glucometers, hearing aids, artificial eyes and external fixators. Pre-authorisation required and sub-limits apply.

#### **Pathology**

An ATB limit of R3 450 PMF applies, subject to the overall above threshold limit (Combined ATB limit with basic radiology).

#### **Medicines**

#### Acute medicines

Prescription medicines - Schedule 3

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 R1 000 PB and R1 450 PMF in AFB to a maximum of R220 per event. Does not accumulate to threshold.

#### **Optometry**

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

2 Visits PB.

Lenses and contact lenses

Sub-limit of R4 200 PB.

#### Frames

1 Frame PB per year sub-limit of R1 780 included in lenses limit

## **Dentistry**

#### **Basic dentistry**

Unlimited after threshold.

#### Specialised dentistry

Dentures, crowns, bridgework, metal fillings and inlays. Subject to a sub-limit of R13 000 PB and R18 000 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.

**Email address for dental authorisation:** dental@universal.co.za

#### Radial Keratotomy and excimer laser

Limited to R7 000 per eye inclusive of hospitalisation and related costs.



Specialist pre-authorisation email specauth@universal.co.za

General pre-authorisation email preauthorisation@universal.co.za

Contact 0861 222 777 or email compcare@ Universal, co, za or visit our Mobi App.



Visit your healthcare provider online u-consult.co.za



MAJOR MEDICAL EXPENSES

# HOSPITAL BENEFITS

Cover in any Netcare hospital. Voluntary, non-emergency admissions to a non-Netcare facility will attract a co-payment of 30% with a minimum of R7 500. Specified elective procedures may have a co-payment (excluding PMBs).

#### Hospitalisation

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

**Surgical Procedures** out-of-hospital

#### Auxillary services in hospital

Collective limit of R7 500 PMF in and out of

Email casemanagement@universal.co.za for pre-authorisation.

#### Hospital related accounts

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

**Pathology** 

Medicine in hospital

**Basic Radiology** 

#### Specialised radiology

hip and knee replacements.

Surgical prostheses

Overall limit of R43 000 PMF.

MRI, CT, High resolution CT and PET scans Unlimited. First R2 250 payable from PMSA

find out about our special arrangements for

#### Medicine upon discharge (TTO)

7 days' supply.

### Radial keratotomy and excimer laser

Limited to R7 000 per eye inclusive of

- Contact 0860 111 090, email preauthorisation@universal.co.za or visit our Mobi App for pre-authorisation.
- For hospital account queries email hospitalaccounts@universal.co.za

#### **Contact details**



#### CompCare:

Universal Place, 15 Tambach Road, Sunninghill Park, Sandton

PO Box 1411, Rivonia, 2128

Tel: 0861 222 777

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

## THE DYNAMIX OPTION

## **Comprehensive Benefits Package**

For more details on the DYNAMIX option, please see the DYNAMIX 12 page brochure.

This brochure is a summary of the benefits of CompCare Medical Scheme. All information relating to the 2022 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 n 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