

# CompCare

Medical Scheme



From only  
**R3 880 Per Month**

## THE SELFSURE OPTION 2022

Traditional Plan



VISIT YOUR HEALTHCARE  
PROVIDER ONLINE

[u-consult.co.za](https://u-consult.co.za)

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

[compcare.co.za](https://compcare.co.za)

Administered by  **Universal**™

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

# THE SELFSURE OPTION

**SELSURE - KNOW YOUR OPTION.** You're in a good place with a family and a prospering career. You want complete day-to-day cover with comprehensive unlimited hospital cover in private facilities and more.

## 1 CONTROL YOUR DAY-TO-DAY SPENDING

Out of hospital claims are funded from the Day-to-Day and Day-to-Day Extender Benefit (Risk).

## 2 UNLIMITED HOSPITALISATION

SELSURE offers you unlimited cover for in-hospital and hospital-related services.

## 3 BENEFITS PAID FROM RISK

All PMBs, Wellness and Preventative Care Benefits, Ambulance Services (Netcare 911).

## 4 WELLNESS AND PREVENTATIVE BENEFITS

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

Live life to the fullest.  
**ADVENTURE SPORTS** are covered.

**40** chronic conditions covered.

Keep **YOUR WELLNESS** at heart.

COMPCARE'S PREVENTATIVE BENEFITS

### Contributions Effective from 1 January 2022

Monthly	Principal Member	Adult Dependant	Child Dependant
Contribution	R3 880	R3 880	R971
<b>Annual Benefit Amounts for 2022</b>			
Day-to-Day Benefit	R6 000	R4 200	R2 100
Day-to-Day Extender Benefit		R6 000 PB	R8 600 PMF

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.

THESE BENEFITS ARE SUBJECT TO DAY-TO-DAY\* AND DAY-TO-DAY EXTENDER BENEFITS\*\*

# DAY-TO-DAY BENEFITS



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

## Consultations, procedures and materials

**GP\*:** Subject to Day-to-Day Benefit.

**Specialist\*:** Paid at 100% of the scheme rate.

A referral from a GP is required before seeking treatment from a specialist except for services provided by an ophthalmologist, dermatologist, 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. Please remember to obtain pre-authorization for any procedures.

## Medicines\*

### Acute medicines

Paid from Day-to-Day Benefit.

**Prescription medicines** – Schedule 3 and higher. 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)

Limited to **R300 per event**

## Auxiliary services\*

Audiologists, chiropractors, dietitians, homeopaths (consultations), naturopaths (consultations), speech and occupational therapists, chiropody, podiatry, social workers, physiotherapy\*\* and biokinetics\*\*. Collective sub-limit of **R4 300 PMF** in and out of hospital.

## Surgical and medical appliances\*

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

## Optometry

100% of SAOA rate. Limited to **R5 700 PMF**. Benefit every second year.

### Eye test

1 Visit PB.

### Lenses and contact lenses

Limited to **R1 000 PB**. Subject to optometry limit. Benefit available every second year.

### Frames

1 Frame PB. Limited to **R560 PB**. Subject to optometry limit.

## Radial keratotomy and excimer laser

Subject to optical benefit, pre-authorization and protocols.

## Radiology\*\*

### Basic radiology

Including black and white X-rays and ultrasound. Joint limit with Pathology, Basic Dentistry, Biokinetics and Physiotherapy (Day-to-Day Extender Benefit).

### Specialised radiology

MRI, CT, High resolution CT and PET scans. Combined limit with in-hospital specialised radiology benefit. Limited to **R27 200 PMF**.

A co-payment of **R2 500** will apply.

Contact **0860 111 090** or email [preauthorisation@universal.co.za](mailto:preauthorisation@universal.co.za)

## Pathology\*\*

Combined limit with in-hospital benefit and limited to **R34 000 PMF**. Joint limit with Radiology, Basic Dentistry, Biokinetics and Physiotherapy (Day-to-Day Extender Benefit).

## Dentistry\*\*

### Basic dentistry

Conservative and restorative. Joint limit with Radiology, Pathology, Biokinetics and Physiotherapy (Day-to-Day Extender Benefit)

### Specialised dentistry\*

Dentures, crowns, bridgework, metal fillings and inlays.

Subject to Day-to-Day Benefits and 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.

A co-payment of **R2 000** will apply.

Email address for dental authorisation: [dental@universal.co.za](mailto:dental@universal.co.za)



Visit your healthcare provider online  
[u-consult.co.za](http://u-consult.co.za)



Specialist pre-authorization email  
[specauth@universal.co.za](mailto:specauth@universal.co.za)

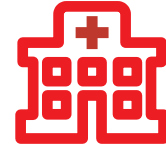
General pre-authorization email  
[preauthorisation@universal.co.za](mailto:preauthorisation@universal.co.za)

Contact **0861 222 777** or email [compcare@universal.co.za](mailto:compcare@universal.co.za) or visit our **Mobi App**.



MAJOR MEDICAL EXPENSES

# HOSPITAL BENEFITS



## Hospitalisation

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

## Surgical Procedures out-of-hospital

## Auxillary services in hospital

Physiotherapy, biokinetics, dietitian, etc. Collective limit of **R4 300 PMF** in and out of hospital. Email [casemanagement@universal.co.za](mailto:casemanagement@universal.co.za) for pre-authorisation.

## Hospital related accounts

GP visits, specialists, radiology, surgical procedures and blood transfusions.

## Organ transplants

PMBs

## Surgical prostheses

Overall limit of **R38 000 PMF**. Sub-limits apply.

## Pathology

Combined in and out of hospital limit of **R34 000 PMF**.

## Specialised radiology

MRI, CT, High resolution CT and PET scans. Combined limit with in-hospital benefit and limited to **R27 200 PMF**. A co-payment of **R2 500** will apply.

## Medicine in hospital

## Basic Radiology

## Medicine upon discharge (TTO)

7 days' supply.

## Radial Keratotomy and excimer laser

Subject to optical benefit, pre-authorisation and protocols.

- Contact 0860 111 090, email [preauthorisation@universal.co.za](mailto:preauthorisation@universal.co.za) or visit our Mobi App for pre-authorisation.
- For hospital account queries email [hospitalaccounts@universal.co.za](mailto: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](mailto:compcare@universal.co.za)

Website: [compcare.co.za](http://compcare.co.za)

**Complaints escalated to the Council for Medical Schemes:**

Tel: 0861 123 267

E-mail: [complaints@medicalschemes.com](mailto:complaints@medicalschemes.com)

Web: [medicalschemes.com](http://medicalschemes.com)

# THE SELFSURE OPTION

## Healthcare That Keeps Pace With Your Life

For more details on the SELFSURE option, please see the SELFSURE 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 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.

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