

flexicare

Auto&General

 Discovery  
Health

2026 HOUSEHOLD  
EMPLOYER BROCHURE

Today's peace  
of mind. Tomorrow's  
**protection**





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*Flexicare gives you peace of mind and certainty with smart, affordable private day-to-day healthcare cover*

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# Flexicare benefits

*Employees aspire to have access to high-quality healthcare. However, medical scheme membership remains unaffordable for many individuals. Access to affordable private healthcare is highly valued by employees and substantially contributes to maintaining a healthy workforce while positively impacting productivity and overall wellbeing.*

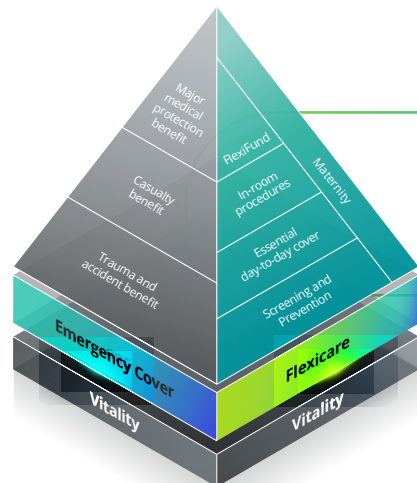
With more than 30 years' experience, Discovery Health is a trusted healthcare partner in the South African and international healthcare environments. Over this time, we have developed industry-leading expertise in high-quality, affordable healthcare solutions. Our extensive healthcare provider networks include doctors (GPs), pharmacies, dentists and optometrists across the country, supported by cutting-edge, real-time payment models with seamless claims processing.

Flexicare is offered by Auto&General and administered by Discovery Health.

It was introduced to provide quality, affordable access to primary healthcare for employees who are unable to access medical scheme benefits.

Flexicare leverages the combined expertise of Discovery Health and Auto&General to provide a truly innovative, integrated healthcare product to complement the existing healthcare solutions available to employees.

Flexicare offers your employees access to essential day-to-day benefits through high quality, private healthcare providers in the Discovery Health network.



This extensive Flexicare cover pairs perfectly with the end-to-end emergency cover accessed through Discovery Emergency Cover.



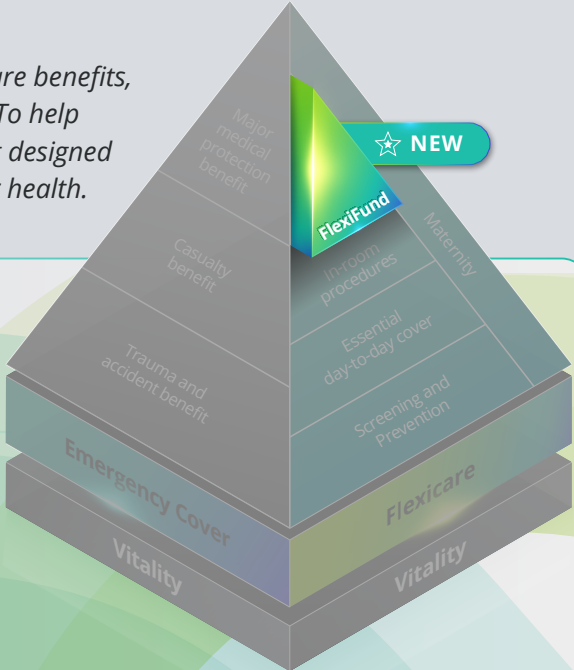
# Everyone deserves access to quality healthcare

Flexicare gives your employees access to affordable private healthcare and a world-class suite of digital tools to help manage their membership and access benefits on the go. Experience the peace of mind and certainty that comes with being in control of your employees health and wellbeing.

	FLEXICARE CORE BENEFITS	FLEXICARE PLUS BENEFITS
Unlimited GP consultations 	Four direct GP visits with additional visits available with Nurse referral or via the Intercare Online Platform	✓
Virtual GP consultations 	✓	✓
Unlimited nurse consultations 	✓	
Specialist consultations 		✓
Dentistry 		✓
X-rays 	✓	✓
Flu vaccine 	✓	✓
Eye care 		✓
Medicine 	✓	✓
Health Check 	✓	✓
Maternity benefit 	✓	✓
Procedures in GP's rooms 	✓	✓
Blood tests 	✓	✓
HIV care 	✓	✓
FlexiFund 	✓	✓
OPTIONAL ADD-ONS		
Discovery Emergency Cover 	✓	✓
Vitality Active 	✓	✓

# Introducing the FlexiFund

Day-to-day healthcare needs can be unpredictable. While your Flexicare plan offers strong primary healthcare benefits, you may still face unexpected costs for things like additional medication, specialised tests, or provider fees. To help reduce these out-of-pocket expenses and give you more flexibility, your plan includes the FlexiFund a benefit designed to support your day-to-day healthcare needs and give you greater control and confidence in managing your health.



## How the FlexiFund Works:

### 01 | Complete a health check

### 02 | Get up to R1,000 in your FlexiFund

Every year, each Flexicare adult member can earn up to R1,000 in their FlexiFund based on their health check results and Flexicare plan. The more health metrics that fall within the healthy range, the higher the amount earned.



Number of health check metrics in range	Flexicare Core FlexiFund	Flexicare Plus FlexiFund
5	R500	R1,000
3 – 4	R250	R500
≤2	R125	R250

## Why the health check matters

The health check measures five key indicators: weight status, blood pressure, blood glucose, cholesterol, and smoking status. Clinical evidence shows that when these measures are out of range, mortality risk increases significantly. By understanding your results and identifying risks early, you can take meaningful steps to improve your health and wellbeing.

The following health check metrics will be taken into account when determining the FlexiFund value:

- A weight assessment
- Blood pressure
- Blood glucose
- Cholesterol
- Signing a non-smoker's declaration

### 03 | Use your FlexiFund

Member's claims are automatically paid out of the FlexiFund when there are no available day-to-day benefits.



GP consults



Specialist visits



Over-the-counter medication



Prescribed medication



Vaccines



Contraceptives

# Flexicare benefits

The information below provides a detailed breakdown of the Flexicare Benefits.

## FLEXICARE CORE

## FLEXICARE PLUS



### GP CONSULTATIONS AND SERVICES

<b>Virtual consultations</b>	This benefit provides access to a virtual consultation via the Discovery website and such visits will be covered at 100% of the Agreed Rate. You can have a virtual consultation with an network GP through the Online Platform without a nurse referral.	This benefit provides unlimited access to a virtual consultation via the Discovery website and such visits will be covered at 100% of the Agreed Rate. You can have a virtual consultation with an network GP through the Online Platform without a nurse referral.
<b>Doctor consultations</b>	<p>This benefit provides access to visit a network doctor (GP), and such visits will be covered at 100% of the Agreed Rate in the following instances:</p> <ul style="list-style-type: none"> <li>Up to 4 direct face-to-face GP visits with additional visits available with a nurse referral or via the Online Platform. Preauthorisation is required from the third visit.</li> <li>When a referral for a face-to-face visit is requested by the virtual GP during the primary care clinic visit.</li> <li>When you have a virtual GP consultation through the Intercare Online Platform and there is a need for a face-to-face GP referral.</li> <li>You have cover for a defined list of medical procedures that can be done in a network doctor's rooms, such as biopsies, wound care and stitching.</li> <li>You have the ability to change an allocated network doctor twice per year.</li> </ul>	<p>This benefit provides unlimited access to visit a network doctor (GP), and such visits will be covered at 100% of the Agreed Rate in the following instances:</p> <ul style="list-style-type: none"> <li>You can substitute your visits to a network doctor (GP) with virtual consultations.</li> </ul>
<b>Nurse consultations</b>	This benefit provides up to two primary care clinic network nurse consultations at 100% of the Agreed Rate. You can have a virtual consultation with an network GP through the Online Platform without a nurse referral.	No cover
<b>Specialist consultations</b>	No cover	<p>This benefit provides cover for 1 out-of-hospital specialist consultations per member per year, at the agreed rate up to a R2,090 benefit limit:</p> <ul style="list-style-type: none"> <li>Consultations with a network specialist are covered up to R1,400 which includes a R1,300 consultation fee and a R100 SOAP note for referral where appropriate/needed.</li> <li>Members who are referred for radiology or pathology post the network specialist consultation, will access R600 for diagnostic tests with accumulation to the overall R2,000 benefit limit.</li> <li>If the treatment costs more than the benefit limit, the member will be responsible for the difference.</li> <li>Consultations with a non-network specialists will only be paid up to 100% of the Discovery Health Rate and member will be responsible for the difference.</li> <li>Members who are referred for radiology or pathology post the non-network specialist consultation, will be covered subject to the availability of funds.</li> <li>Members are required to pay for the specialist visit and radiology/pathology services out of pocket (at the time of the consult) and thereafter submit their claim to Discovery for reimbursement.</li> <li>If a member visits a specialist, network or non-network, and is not referred for radiology/pathology during the first visit and subsequently visits another specialist, both the consultation and referrals for radiology/pathology from the second visit will not be funded as the benefit would be depleted with the first consultation.</li> </ul>

## FLEXICARE CORE

## FLEXICARE PLUS



## GP CONSULTATIONS AND SERVICES

Dentistry	No cover	Full mouth examination, preventive treatments, cleaning, scaling, polishing, restorations, treatment of pain and sepsis, infection control and extractions at a network dentist
Optometry (eye care)	No cover	Cover for one eye test every year in the optometry network and one pair of glasses (no contact lenses) every 24 months
Pathology (blood tests)	Only when referred by a network GP after a nurse consultation. 100% of the Agreed Rate. Limited to approved pathology codes. Must be requested by a network doctor (GP) and performed by a network pathologist	100% of the Agreed Rate. Limited to approved pathology codes. Must be requested by a network doctor (GP) and performed by a network pathologist
Radiology (X-rays)	Only when referred by a network GP after a nurse consultation. 100% of the Agreed Rate for black-and-white X-rays and soft-tissue ultrasounds. Must be requested by a network doctor (GP) and performed by a network radiologist	100% of the Agreed Rate for black-and-white X-rays and soft-tissue ultrasounds. Must be requested by a network doctor (GP) and performed by a network radiologist
Maternity benefits	Only when referred by a network GP after a nurse consultation. Unlimited network doctor visits throughout the pregnancy. Unlimited acute medicine in line with a defined medicine list prescribed or dispensed by a network doctor and collected from a network pharmacy. Essential blood and screening tests through a network pathologist when referred by a network doctor. Two ultrasound scans for each pregnancy at a network provider (first ultrasound between week 10 and 14, and the second between week 20 and 24)	Unlimited network doctor visits throughout the pregnancy. Unlimited acute medicine in line with a defined medicine list prescribed or dispensed by a network doctor and collected from a network pharmacy. Essential blood and screening tests through a network pathologist when referred by a network doctor. Two ultrasound scans for each pregnancy at a network provider (first ultrasound between week 10 and 14, and the second between week 20 and 24)
HIV management	Access to HIV treatment, counselling and education. Cover for antiretroviral medicine, multivitamins and supportive medicine, blood tests, X-rays and post-exposure prophylaxis medicine. All HIV-related queries and cases are treated with complete confidentiality	
COVID-19 testing	Only when referred by a network GP after a nurse consult For confirmed positive COVID-19 results: Cover for one positive COVID-19 test, with access to out-of-hospital management and appropriate supportive treatment, including diagnostic testing, basic chest X-rays and prescribed medicine	For confirmed positive COVID-19 results: Cover for one positive COVID-19 test, with access to out-of-hospital management and appropriate supportive treatment, including diagnostic testing, basic chest X-rays and prescribed medicine

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## FLEXICARE CORE

## FLEXICARE PLUS



## PROCEDURAL TREATMENT

## Medical procedures in doctor's room only

Only in an network GP's rooms.

Cover for a defined list of medical procedures that can be performed in a network doctor's rooms, such as biopsies, wound care and stitching

Cover for a defined list of medical procedures that can be performed in an network GP's rooms, such as biopsies, wound care and stitching

CODE	DESCRIPTION	CODE	DESCRIPTION
0206	Intravenous treatment, intravenous infusions, insertion of cannula – chargeable once every 24 hours	1228	General practitioner's fee for taking of an ECG only (without effort:) ½ (item 1232)
0244	Repair of nail bed	1229	General practitioner's fee for taking of an ECG only (with or without effort:) ½ (item 1233)
0255	Drainage of abscess	1232	Electrocardiogram without effort
0259	Removal of foreign body	1233	Electrocardiogram with or without effort
0300	Stitching of additional wound	1234	Effort electrocardiogram with the aid of a special bicycle ergometer, monitoring apparatus and availability of associated apparatus
0301	Stitching of additional wound	1235	Multi-stage treadmill test
0307	Excision and repair	1236	Electrocardiogram without effort: under 4 years old
0308	Each additional small procedure done at the same time	1996	Bladder catheterisation: male (not at operation)
0316	Fine-needle aspiration for soft tissue (all areas)	1997	Bladder catheterisation: female (not at operation)
0317	Aspiration of cyst or tumour	2133	Circumcision: clamp procedure
0321	Biopsy or excision of cyst, benign tumour, aberrant breast tissue, duct papilloma	2137	Circumcision: surgical excision other than by clamp or dorsal slit, any age
0887	Limb cast (excluding aftercare)	2139	Circumcision: dorsal slit of prepuce (independent procedure)
0922	Removal of foreign bodies requiring incision	3615	Routine obstetric ultrasound at 10 to 20 weeks gestational age, preferable at 10 to 14 weeks gestational age to include nuchal translucency assessment
1136	Nebulisation (in rooms)	3615	Routine obstetric ultrasound at 10 to 20 weeks gestational age, preferable at 10 to 14 weeks gestational age to include nuchal translucency assessment
1192	Peak expiratory flow only	3617	Routine obstetric ultrasound at 20 to 24 weeks to include detailed anatomical assessment

You will not need to pay for approved treatments received from a network provider. However, if you use a provider that is not a part of the network, or if an unapproved treatment is provided, you will be responsible for 100% of the costs.

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MEDICINE

Day-to-day medicine	Medication can be prescribed and dispensed by the nurse as part of the primary care clinic consultation. A referral to the network GP will be done by the nurse in instances where the medication can only be prescribed by a GP  The medication must be on the medicine list (formulary) for acute medicine and will be available without a co-payment	Cover for medicine on our list if a network doctor prescribes it or gives it to you
Over-the-counter (OTC) medicine	Cover for self-medication on our list, up to R160 per policy per year, up to R80 bi-annual limit, at a network pharmacy	Cover for self-medication on our list, up to R115 per quarter – a maximum of R460 per member per year, at a network pharmacy
Chronic medicine	Cover for HIV medicine on the defined medicine list at a network pharmacy	Cover for chronic medicine on the defined medicine list for 27 chronic conditions (including HIV) at a network pharmacy



SCREENING AND PREVENTION

Flu vaccine	Cover for a flu vaccine once a year from a network pharmacy
Wellness screening	Cover for one wellness screening per year at a network pharmacy or wellness day. Screening includes blood pressure, blood glucose (blood sugar), cholesterol and body mass index (BMI). You can have an HIV test done at the same time

You will not need to pay for approved treatments received from a network provider. However, if you use a provider that is not a part of the network, or if an unapproved treatment is provided, you will be responsible for 100% of the costs.



# Discovery Emergency Cover

*The Discovery Emergency Cover range offers three flexible plans designed to give you peace of mind with access to quality, comprehensive emergency healthcare when you need it most.*

This extensive emergency cover pairs perfectly with the comprehensive primary healthcare benefits accessed through the Flexicare product, ensuring employees have cover for their day-to-day healthcare needs and financial certainty in the unfortunate case of an accident, emergency or unforeseen hospital admission.

EMERGENCY  
**CORE**  
from **R218**

**Trauma and Accident Benefit**  
Private emergency healthcare services, including treatment in casualty and hospital admission, for a broad range of traumatic events.

EMERGENCY  
**PLUS**  
from **R313**

**Casualty Benefit**  
Cover for stabilisation and treatment in casualty for all medical emergencies, including hospital admissions for confirmed heart attacks or strokes.

**Trauma and Accident Benefit**  
Private emergency healthcare services, including treatment in casualty and hospital admission, for a broad range of traumatic events.

EMERGENCY  
**MAX**  
from **R439**

**Major Medical Protection Benefit**  
Cover for 9 expensive and frequently experienced medical emergency conditions.

**Casualty Benefit**  
Cover for stabilisation and treatment in casualty for all medical emergencies, including hospital admissions for confirmed heart attacks or strokes.

**Trauma and Accident Benefit**  
Private emergency healthcare services, including treatment in casualty and hospital admission, for a broad range of traumatic events.

DISCOVERY EMERGENCY COVER

R400,000 or R1,000,000 cover options

+

FLEXICARE CORE OR FLEXICARE PLUS

Emergency Cover

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Emergency Cover treatment is based on the Emergency Cover option the member has chosen.

# Discovery Emergency Cover

Optional Discovery Emergency Cover, offered by Discovery Insure

	EMERGENCY CORE	EMERGENCY PLUS	EMERGENCY MAX	
Emergency Cover package detail	Cover for emergency healthcare services, including casualty and in-hospital treatment, for a broad range of accidental and traumatic events	Cover for accidents and trauma, the stabilisation and treatment of any emergency condition in a casualty facility, including admission and treatment for heart attacks and strokes.	Cover for accidents and trauma, the stabilisation and treatment of any emergency condition in a casualty facility and the admission and treatment of a defined list of emergency conditions including heart attacks and strokes.	
Conditions covered	<p>Cover for casualty and in-hospital treatment for the following accidental and traumatic events:</p> <ul style="list-style-type: none"><li>• Burns</li><li>• Loss of an arm, hand, leg or foot</li><li>• Near-drowning</li><li>• Poisoning or a serious allergic reaction that may cause death</li><li>• Injuries resulting from a crime, sexual assault, a car accident or an injury at work.</li></ul>	<p>Cover for the in-hospital treatment of defined accidental and traumatic events.</p> <p>Cover for any medical emergency condition in a casualty facility, including hospital admission for the treatment of heart attacks and strokes</p> <ul style="list-style-type: none"><li>• R200 co-payment when using network facility</li><li>• R250 co-payment when using a non-network facility</li><li>• This co-payment will be refunded if the claimant is diagnosed with a heart attack or stroke</li></ul>	<ul style="list-style-type: none"><li>• Cover for the in-hospital treatment of defined accidental and traumatic events.</li><li>• Cover for any medical emergency condition in a casualty facility, including hospital admission for the treatment of heart attacks and strokes. The casualty co-payment of R200 at a network facility or R250 outside of the network, will be refunded if the claimant is diagnosed with one of the qualifying emergency in-hospital conditions.</li><li>• Admission and treatment for the following additional emergency conditions:</li><li>• Acute appendicitis, acute asthma, ectopic pregnancy, acute inflammation of gall bladder, fit or seizure, acute pneumonia, kidney stones, acute renal failure, pulmonary embolism.</li></ul>	
Differentiating benefits	Discovery Emergency Core provides affordable cover for the unforeseen costs of private ambulance transport and emergency medical treatment for trauma and accidents.	Discovery Emergency Plus ensures access to quality healthcare at a private casualty facility for swift evaluation and assistance. Employees have cover for emergency transport and treatment for defined trauma conditions,including admission for heart attacks and strokes.	Discovery Emergency Max provides ultimate peace of mind for a defined list of trauma conditions, assessment and stabilisation in casualty as well as in-hospital cover for 9 of the most likely high-cost emergency admissions facing the workforce.	
Cover limits	R400,000 and R1million limit	R400,000 and R1million limit	R400,000 and R1million limit, a sublimit of R400,000 will apply to the nine defined conditions.	
Pre and post emergency event support	 Medical evacuation	 Counselling sessions	 Take-home medicine	 Voucher for groceries or personal care items

# Your monthly premiums

*Flexicare premiums for your employees, with pricing for the optional Discovery Emergency Cover.*

## FLEXICARE MONTHLY PREMIUMS

ROLE	FLEXICARE CORE	FLEXICARE PLUS
Principal member	R459	R539
Spouse	R459	R499
Adult	R459	R499
Child*	R286	R286

\* There is no limit to the number of children that we allow on the policy. We charge separately for each child and they can stay on Flexicare if they depend on you financially. For child dependants, we charge the adult dependant premium from the month after their 21st birthday.

## DISCOVERY EMERGENCY COVER MONTHLY PREMIUMS

ROLE	R400,000 LIMIT PER EVENT			R1,000,000 LIMIT PER EVENT		
	PRINCIPAL MEMBER	ADULT	CHILD	PRINCIPAL MEMBER	ADULT	CHILD
Emergency Core	R218	R218	R92	R313	R313	R137
Emergency Plus	R313	R313	R219	R440	R440	R240
Emergency Max	R439	R439	R302	R626	R626	R302

\*\* The Discovery Emergency Cover is optional. If you activate this benefit, it will apply to you and your registered dependants on Flexicare. You must select a cover limit of either R400,000 or R1 million.





## Waiting period

A waiting period means that your employees or their dependants cannot claim for the associated healthcare services during the waiting period. Unless otherwise approved, a waiting period will apply.

- **General waiting period**

Any dependant, who joins 60 days post the main member, will incur a three-month general waiting period. Newborn children can be added onto an existing policy within 90 days of birth, free of underwriting.

# Important Information

## Extending cover to dependants

- Newborns can join without waiting periods if you add them to an employee's policy within 90 days of birth.
- Any dependant who joins 60 days after the main member will have a three-month general waiting period. This will apply in all instances, unless the two-month waiting period concession for a new employer exists or if a specific window period applies for the employer. Premiums for newborn babies will be collected from the month following their birth.
- If your employees or their dependants have a break of more than 30 days in their membership, all waiting periods will be applied when reapplying for cover.
- There is no limit to the number of children that will be allowed on the policy. Each child will be charged for separately and can stay on Flexicare if they depend on the main member financially. Child dependants who turn 21 will be charged the adult dependant premium rates from the month after their 21st birthday.

## Eligibility

Your employees and their dependants cannot be members of a medical scheme administered by Discovery Health and have the Flexicare product at the same time.



# Contact us

## Complaints

**Email:** flexicareescalations@discovery.co.za

If you still have concerns, you can contact Discovery's Group Compliance at the address below.

**Email:** compliance@discovery.co.za

## HIV

HIV\_Queries\_Flexicare@discovery.co.za

## Hospital Preauthorisation

**telephone:** 0860 44 47 79

## USSD Services

You can use our USSD service to confirm your policy number, find your allocated GP, or get benefit information.

**To access this service, dial:**

\*120\*DISCO# or \*120\*34726#

**Note:** Members must access the USSD menu using the same cellphone number we have on record for you.

## Emergency Services

If you have the Emergency Cover activated, you can call the Flexicare call centre on 0860 44 47 79. If you call after hours, we will divert the call to our Emergency Cover partner, Netcare 911.

## Finding a healthcare provider

To find out which providers are part of the Flexicare network, contact our Flexicare call centre on 0860 44 47 79.

Employees can also use the **Find a healthcare provider** tool on the Discovery website at [www.discovery.co.za](http://www.discovery.co.za) to locate healthcare providers in our networks.

## Website support

For all internet-related questions, such as registration problems, security issues, compatibility issues, login problems, a forgotten password and trouble with navigating the site, call 0860 10 06 96. This contact number is available weekdays only, from 07:00 to 18:00.

## Servicing team



### GENERAL QUERIES

flexicare@discovery.co.za



### ESCALATIONS

flexicareescalations@discovery.co.za



### BILLING SERVICES

flexicareadmin@discovery.co.za

flexicare

# Join Flexicare today



### WHATSAPP

Add us on 0860 44 47 79 and get in touch whenever you need information or have questions about Flexicare.



### CALL CENTRE

0860 44 47 79



### SCAN BELOW TO REQUEST A CALLBACK



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Flexicare is not a medical scheme. The cover is not the same as that of a medical scheme and is not intended to be a substitute for medical scheme membership. Flexicare and Auto&General Accident Cover is administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07 an authorised financial services provider and underwritten by Auto & General Insurance Company Limited, registration number 1973/016880/06, a licensed non-life insurer and financial services provider. Terms, conditions and limits apply.

Discovery Vitality (Proprietary) Limited, registration number: 1999/007736/07. Terms, conditions and limits apply.

Discovery Emergency Cover is administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07 an authorised financial services provider. Terms, conditions and limits apply. Discovery Emergency Cover is a non-life insurance policy, underwritten by Discovery Insure Ltd, registration number 2009/011882/06, a licensed non-life insurer and an authorised financial services provider.