



Aon Member Letter

Discovery Health Medical Scheme 2025

Dear Aon Client,

At Aon, we shape decisions for the better – to protect and enrich the lives of people around the world.

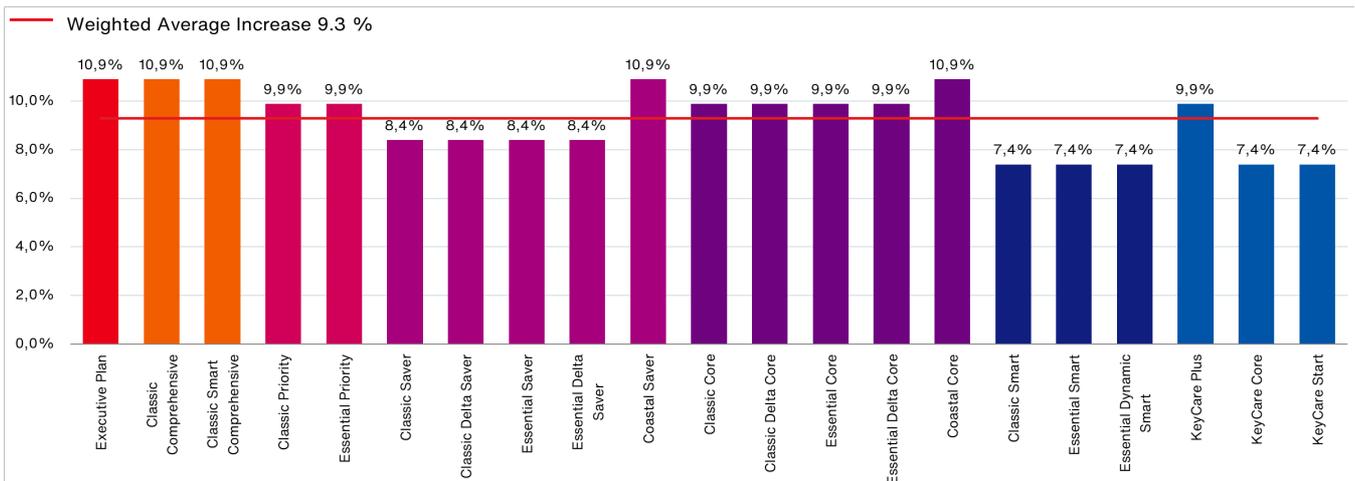
It is important that at this time of the year you evaluate your current healthcare arrangements to ensure the most appropriate cover for 2025. Whether you wish to remain on your current option or change to a more suitable option for 2025, it remains Aon’s responsibility to guide you through the review process. This will ensure that you make an informed decision regarding your healthcare cover for 2025.

We have pleasure in sharing the Aon on-line Microsite platform for Discovery Health Medical Scheme (DHMS), which has been developed to provide you with essential information like voice recorded year-end presentation, launch highlights presentation, member letter, alert, brochures, to make better decisions regarding your medical scheme and gap cover requirements.

Benefits and Contributions Update for 2025

What are the contribution increases for 2025?

DHMS has announced a weighted average contribution increase of 9.3% effective 1 January 2025.



- As communicated by DHMS, **50%** of members will have an increase of **8.4%** or **lower**.
- **50%** of members will have an increase of **9.9%** or **greater** (to ensure contributions can maintain benefit utilisation).

Please click on the **Microsite** link shared on the previous page to access the **2025 contribution table** which includes **Annual Medical Savings and Threshold** amounts.

Key Benefit changes

- **Introduction of a Designated Service Provider (DSP) for cataract surgery**

Members must use a DSP for cataract surgery to avoid a 20% co-payment on the hospital account. An upfront deductible of R6 000 will apply if members use a non-DSP provider. This will apply to all plans except members on the KeyCare Start and KeyCare Start Regional plans.

- **Changes to cover for scopes**

If a scope is performed in-room at a healthcare professional outside of the network, then a co-payment will be applied. Co-payments will not apply to gastroscopies, colonoscopies, proctoscopies, and sigmoidoscopies for children 12 years and younger, or for confirmed prescribed minimum benefit cases.

In-room co-payments will be applicable to all DHMS plans, except for the KeyCare series where only prescribed minimum benefit scopes are covered. Co-payments are as follows:

- For a single scope, the co-payment will be R1 750.
- For bi-directional scopes, the co-payment will be R3 000.

- **KeyCare Start and KeyCare Start Regional plans**

Introduction of an additional income band: The current income band structure consists of three income bands across the KeyCare series. In 2025, the KeyCare Start and KeyCare Start Regional income bands will be adjusted to four income bands. The current highest income band will be split in two:

- Members earning between R15 951 and R24 250; and
- Members earning more than R24 251+

Members must use **DSPs** for maternity, mental health, and cataract surgery to avoid a co-payment.

Maternity benefit changes: All out-of-hospital and referred healthcare services related to pregnancy and post-delivery will be accessible through the members nominated GP, as part of the risk-funded day-to-day benefits for GP healthcare services. 2 x 2D scans per pregnancy up to 100% of the Discovery Health Rate (DHR) will be covered when referred by the member's nominated GP. It is important to note that Gynaecologist visits for maternity on the KeyCare Start plans will be subject to the Specialist benefit.

Introduction of a DSP for psychiatric admissions: Each region will have a designated psychiatric facility as the DSP for psychiatric admissions for KeyCare Start and KeyCare Start Regional members. Members will receive full cover for their psychiatric admission when admitted to the DSP. If the member voluntarily goes to a facility that is outside of the network, cover will be up to 80% of the DHR.

Enrolment on Mental Health Care Programme for treatment of depression

Members diagnosed with depression need to be enrolled on the Mental Health Care Programme to receive full cover for out-of-hospital psychotherapy consultations. Members not enrolled on the programme will attract a 20% co-payment.

Benefit Enhancements

- **Maternity benefit**

The maternity benefit has been enhanced allowing 2 mental health consultations and one nutrition assessment available during pregnancy or after delivery.

- **The Screening and Preventative benefit**

From 1 January 2025, this benefit will include self-sampling testing kits, related pathology tests for bowel cancer screening once every 2 years, Human Papilloma Virus (HPV) testing every 5 years and cover for a breast biopsy in the network of accredited mammography centres following a positive result.

- **Depression Risk Management Programme**

This is a six-month care programme aimed at reducing the risk of depression and enhancing mental wellbeing. Members will be identified either based on the result of their mental wellbeing assessment or pro-actively identified by a machine learning algorithm to identify depression risk. Members identified as being at risk of depression will have access to the following benefits:

- Face-to-face or virtual mental wellbeing consultants with a Premier Plus network GP or Psychologist on the mental health network.
- 3 virtual coaching sessions with a healthcare professional to monitor progress and identify next steps.
- 2 sessions with a Dietician.
- Digital therapeutics and internet cognitive based therapy to improve wellbeing and depression symptoms severity.
- Continuous monitoring and screening.

- **KeyCare Start Regional – Regional Hubs**

Pretoria and Johannesburg Central will be added as 2 new regional hubs on the KeyCare Start Regional plan.

REGION	MEDICLINIC (MC) HOSPITAL	INTERCARE GPs
Pretoria	Medforum MC	Intercare Tramshed
Johannesburg Central	Donald Gordon Medical Centre MC	Intercare Linden

Benefit Limit Increases

- Limits, co-payments, deductibles and thresholds**

Benefit limits, co-payments and deductibles will increase in line with inflation except for the following benefits: Oncology threshold, Specialised Medicine and Technology, international travel, overseas treatment, surgical and appliance items, including hip, knee and shoulder joint prosthesis, and external medical appliances.

Thresholds limits will increase by 1% more than the contribution increase.

No increase on the limited Above Threshold Benefit (ATB) for Priority and Comprehensive plans.

New Benefits

- Personal Health Pathways and Personal Health Fund**

Personal Health Pathways is a platform for members to get healthy, get rewarded and build their Personal Health Fund by completing certain actions identified to improve their health. By completing these actions, all DHMS members who activate their Personal Health Pathways will unlock additional day-to-day value through the member's Personal Health Fund.

The Personal Health Fund gives members up to R10 000, depending on the members' plan and family composition, in additional risk funded benefits for day-to-day medical expenses.

Any new member who activates their Personal Health Pathways and completes the high-value tile action, will have access to an additional once-off amount of up to R10 000. The once-off amount will expire at the end of 2026.

MAXIMUM PERSONAL HEALTH FUND ALLOCATION BY PLAN SERIES PER ANNUM				
		Per adult	Per child	Per family
Classic	Executive, Comprehensive, Priority and Saver	R2 500	R1 250	R10 000
	Core and Smart	R2 000	R1 000	R 8 000
Essential and Coastal	Priority and Saver	R1 500	R 750	R 6 000
	Core and Smart	R1 000	R 500	R 4 000
KeyCare	KeyCare Plus, Core and Start	R 500	R 250	R 1 000

The full brochure can be accessed [here](#).

How this benefit works:

- Download the Discovery Health App to understand your next best actions.
- Complete the health and exercise actions to build up your Personal Health Fund to the maximum annual limit. This is over and above the allocated Medical Savings Account (MSA).
- This limit is subject to plan type and family composition.
- The funds can be used for day-to-day medical expenses i.e. GP consultations, dentistry, specialist consultations, physiotherapy and medicine.
- Members and dependants can start using the benefit as soon as there are funds available in the PHF i.e. from the first R500 accumulated. Once accumulated, the Personal Health Fund will pay automatically for relevant claims. The R10 000 is not an upfront amount.
- It is important to note that this is a once off benefit and there are no carry-over funds to the following year and the benefit must be activated within 90 days of joining DHMS.

Other important information:

- All actions completed from 1 January 2025 are considered.
- Adults on the policy accumulate both for themselves and their families i.e. child dependants.
- Funds can be used by all beneficiaries regardless of who completed the actions.
- The Personal Health Fund encourages all adults on the policy to improve their health. The fund value for children on the policy becomes available once all adults on the membership have completed at least 2 actions.
- “*Next best health actions*” count towards the Personal Health Fund.
- Members who have completed all the “*next best health actions*”, but haven’t yet reached their maximum available PHF, will earn R100 per exercise action per week until another health action becomes available.
- If no funds are available in the Personal Health Fund, relevant day-to-day claims will be paid from the member’s available Medical Savings Account or will be for member’s account if there is no savings component on the membership.
- This benefit pays out before the member’s Medical Savings Account is used.
- All risk benefits will still be paid from risk.
- Participation in PHP is voluntary, and members can opt out at any time.
- Members at the end-of-life care benefit or with severe physical and/or mental disabilities to the point that they are unable to participate in the Personal Health Pathways will need to complete a Health Check to have the Personal Health Fund value allocated.

- **Introduction of supportive post-surgery programme**

Certain low acuity procedures performed in short stay surgical network facilities will unlock additional risk funded benefits including home nursing, pain management as required to supplement oral medicine and virtual physical therapy.

- **Providing access to female health management tools**

From 2025, members will have access to tailored benefits including access to female health technology. These benefits include tools to support women through all life stages, from reproductive health to menopause. The benefits will be available in the Women’s Health Hub on the Discovery Health app, accessible through the Personal Health Fund or maternity benefit.

- **Personalised menopause care in partnership with Stella**

DHMS has partnered with the Stella App to give members access to end-to-end menopause management, funded through the Personal Health Fund. Tools include:

- Symptom assessment tools.
- Personalised behavioral and lifestyle change plans.
- One-on-one coaching support.
- Curated content library.
- Virtual consults with GPs training on menopause.
- Supportive online community.

- **Enhanced maternity support in partnership with Parent Sense**

All DHMS members can fund contraceptives through their Personal Health Fund once unlocked.

Members will now get access to an 18-month subscription to the Parent Sense App, an all-in-one parenting app and baby tracker. The app also includes:

- Vaccine schedules and reminders, weight tracking and access to medical resources.
- Daily play activities, age-specific play advice, milestone tracking and sense stimulation tips,
- Sleep routine planning and tracking, tips for night and day sleep.
- Breastfeeding and bottle-feeding guidance, personalized feeding schedules and solids recipe planning.

New Plan

- **Active Smart Plan 2025**

DHMS has announced a new plan in the Smart Series called **Active Smart**. This plan combines the core design elements of Smart plans and is tailored to address the needs of the next generation of healthcare consumers in South Africa.

The Active Smart plan is the one of the more affordable plans offered by DHMS, offering tailored benefits for young professionals starting their careers.

Benefits include:

- Full cover for emergencies to any private hospital.
- Unlimited hospital cover for admissions in the Dynamic Smart Hospital network. A standard deductible of R7 500 per admission for elective non-Prescribed Minimum Benefit admissions will apply.
- Specialist reimbursement rate for hospital admissions at 100% of the Discovery Health Rate.
- Unlimited virtual GP and nurse consultations (no co-payments).
- Unlimited in-person GP Consultations (co-payment: R125).
- One basic dental check-up per member (co-payment: R190).
- One eye test per member at a network provider (co-payment: R125).
- Over-the-counter medication at a network pharmacy (up to R535 per family per annum).
- Preventative care covered through Screening and Prevention Benefit and Personal Health Fund.
- ☞ Access to the Mental Health Care Programme.
- Oncology and maternity (as per Prescribed Minimum Benefit level of care).
- Additional benefits available through the Personal Health Fund:

- Prescribed acute medication, radiology, and pathology.
- Physiotherapy
- Specialist consultations
- Contraceptives
- Flexibility through the Personal Health Fund where members get R1 000 per adult to spend on day-to-day medical expenses, like contraceptives and prescription medication, based on their engagement in their Personal Health Pathway.
- Dialysis will be covered at state facilities.
- The contribution is R1 350 per person on the plan.

Below the links to:

DHMS Health Guides 2025:

[Executive Plan 2025](#)

[Comprehensive Plans 2025](#)

[Priority Plans 2025](#)

[Saver Plans 2025](#)

[Smart Plans 2025](#)

[Core Plans 2025](#)

[KeyCare Plans 2025](#)

[DHMS Plan Comparison 2025](#)

[DHMS Plan Contributions 2025](#)

DHMS Networks 2025:

[Hospital Network List 2025](#)

[Major Joints Network List 2025](#)

[DHMS Day Surgery Network 2025](#)

[KeyCare Start GP Network List 2025](#)

Discovery Vitality 2025

[Vitality Premium Sales Brochure 2025](#)

Virtual and in-person Year-End training sessions

Aon will be conducting virtual and in-person training sessions on the relevant information pertaining to the 2025 medical scheme options. These sessions will elaborate on medical scheme benefit changes, enhancements, and contribution increases.

Please note that the virtual sessions as stipulated below will not include specifics regarding your subsidy or participation policy.

Virtual Year-End Presentation dates are as follows:

Date	Time	Date	Time
17 October 2024	14:00	18 October 2024	10:00
21 October 2024	10:00	22 October 2024	14:00

Please note that presentations will be conducted in English.

Please follow these steps to register for an information session:

- [Click here](#) to register for the specific information session you would prefer to join.
- Please use a Chrome or Firefox browser to register
- Select your preferred date, complete all your details and press “**Submit**”.
- You will receive an e-mail confirmation that says ‘*You are now registered*’ – click on the “*Add to Calendar*” link, a page will open with a small box on the top right saying Downloads – Click on the *Open File link* and a calendar invitation will open that you can save for this session. This invitation includes the Teams link.

On the day of the event:

- Open your calendar invitation.
- Click on the **https link** provided and follow the instructions, if needed.
- If you have trouble accessing the webinar through the calendar invitation, please copy the link and open it in your Chrome or Firefox browser.

We look forward to welcoming you at the Aon virtual year-end training session.

When will employer specific training sessions be held?

If dates have not been allocated below, the dates for these sessions will be communicated by your HR department.

Date	Time	Venue	Language
13 November	9am	Sandton	English
14 November	9am	JetPark	English
18 November	9am	Virtual	English

How do I book an individual session with the Aon Consultant to discuss my personal circumstances?

If you have attended a training session and still cannot decide whether you need to change your existing option, despite having read all the information, please contact the Aon Resolution Centre (ARC).

It is important to attend a session prior to contacting the ARC.

The Aon consultant will either be available on the day of the training session, or your HR department will advise when the consultant will be available for a one-on-one session.

Please ensure that you e-mail your dedicated consultant as mentioned below, to schedule an individual one-on-one session.

[Book time with Sandy Dougan: Chep - Discovery Health one on one sessions 2025 • This single-use link will expire on: January 12, 2025](#)

Where do I get more information and who can I contact if I have any questions?

The DHMS Call Centre can be contacted on 0860 99 88 77 or WhatsApp 0860 756 756 for the clarification of benefit changes and contribution increases and the **Aon Resolution Centre (0860 100 404)** or email on **arc@aon.co.za** will also be available to provide advice on option selections for 2025.

DHMS option change?

It is important to note that no late changes will be accepted.

Online option change - The advantage with an on-line option change is that it eliminates the error associated with a paper process. You can make online option changes up until **13 December 2024**.

Please find attached the DHMS online option change guide.

Your health option change will be confirmed as successful when you see a message with a reference number. Please keep record of this reference number in case you have queries with regards to the option change.

Manual option change - If you could not make your option selection online, please notify your HR/ Payroll partner in writing by no later than **13 December 2024** by completing the attached option change form.

Must I complete a KeyCare option change form?

If you want to change your current option to a KeyCare option for 2025, you need to complete a separate KeyCare application form (Choosing KeyCare as my health option) and submit it to your HR Department.

If none of the above applies to you, you do not need to do anything, and you will remain on your current option in 2025. Please do not inform DHMS directly without also informing your HR of your decision to change options.

Connect with us.

We focus on communication and engagement, across insurance retirement and health, to advise and deliver solutions that create great client impact. We partner with our clients and seek solutions for their most important people and HR challenges.

We have established presence on social media to engage with our audiences on all matters related to risk and people.

For more information from Aon Employee Benefits on healthcare, retirement benefits and a wide range of topics feel free to go to www.aon.co.za

Aon Employee Benefits – Healthcare



<https://www.facebook.com/aon.healthcare>
Click “Like” on our page (Aon Healthcare)



https://x.com/Aon_SouthAfrica
Click “follow” on our profile.

About Aon

Aon plc (NYSE: AON) exists to shape decisions for the better —to protect and enrich the lives of people around the world. Through actionable analytic insight, globally integrated Risk Capital and Human Capital expertise, and locally relevant solutions, our colleagues in over 120 countries and sovereignties provide our clients with the clarity and confidence to make better risk and people decisions that help protect and grow their businesses.

© Aon SA (Pty) Ltd. All rights reserved.

On all services provided, Aon’s Terms & Conditions of Business, as amendment from time to time, are applicable and can be found at <http://aon.co.za/terms-of-trade> or will be sent to you upon request.

Disclaimer: The benefits and contributions are subject to approval by the council for medical schemes. Although care is taken to represent the rates and benefits correctly, errors and omissions could occur. In case of any conflict, the rules of the affected medical scheme prevail. Any decisions regarding your medical scheme portfolio should be made in conjunction with your Aon Employee Benefits consultant or manager. While Aon has taken reasonable steps to ensure that the information contained in this report is relevant, accurate and current, no warranties of any kind, whether express or implied, including but not limited to the accuracy, completeness, relevance, or fitness for a particular purpose are given and Aon expressly disclaims any liability for any loss or damage that may arise from the use of this report. This report is confidential and intended solely for the use of the individual or entity to whom it is addressed. If you received this report in error, you should not disseminate, distribute, or copy this report and you should notify Aon if you are not the intended recipient and destroy the report. The report is copyright of Aon SA (Pty) Ltd. You may not, except with our express written permission, distribute or commercially exploit the report. Aon hereby authorizes you to copy the report for non-commercial use within your organization.

Please click [here](#), to view the Aon South Africa (Pty) Ltd Healthcare privacy notice.