



CONTENTS

01

Why choose **Fedhealth?**

03

Is my**FED** **right** for you?

06

Screening, wellness and **extra value-added benefits**

09

my**FED** **day-to-day** benefits

11

Maternity and **childhood** benefits

13

Chronic medicine benefits

15

Managed care

17

Oncology benefits

19

Mental health benefits

21

Hospital cover

27

Links to Benefits info

28

Contact us

29

Contact details



Why choose Fedhealth?

PROTECT YOUR HEALTH

90-YEAR LEGACY

With 90 years of experience, you can be confident that you're choosing a scheme trusted by generations of South Africans.

A DIVERSE RANGE OF PLANS FOR ALL SOUTH AFRICANS

Our diverse plan range caters to every need and budget.

WIDE-RANGING BENEFITS AND DYNAMIC NETWORK COVERAGE

All Fedhealth plans offer unlimited hospital cover, as well as various out-of-hospital benefits. Our network plans offer extensive coverage.

PERSONALISED CARE AND HEALTH ENGAGEMENT

Helping you get the right care, at the right time, and the right place.

FRIENDLY AND INTELLIGENT CUSTOMER SERVICE

Dedicated service consultants and smart, digital platforms to support you.

INVEST IN YOUR FUTURE



GROW YOUR WEALTH

Health Boosted WealthBonus
Fedhealth members enjoy a **15% boost** to their **Sanlam WealthBonus** on qualifying Sanlam products.

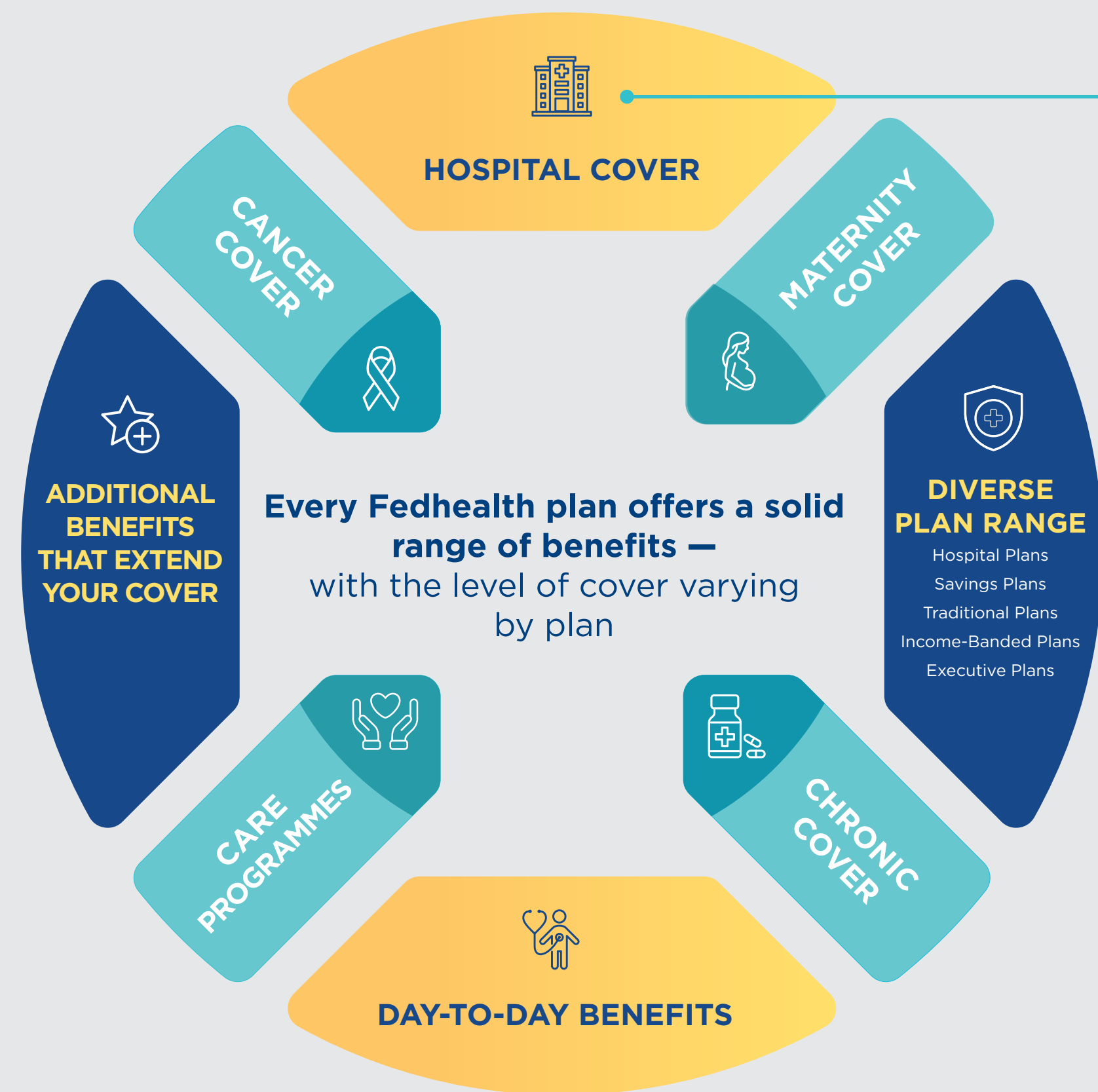


GET REWARDS

Earn rewards through simple health engagement.



Protect your health with plans that offer **wide-ranging benefits & dynamic network coverage**



PERSONALISED CARE AND ENGAGEMENT

Screen | Prevent | Support

Dynamic networks to suit your preference when it comes to hospitalisation

UNLIMITED HOSPITAL COVER AT PRIVATE HOSPITALS

Available on all plans - Benefit limits may apply

AFFORDABLE COVER ON NETWORK PLANS

Available on: myFED

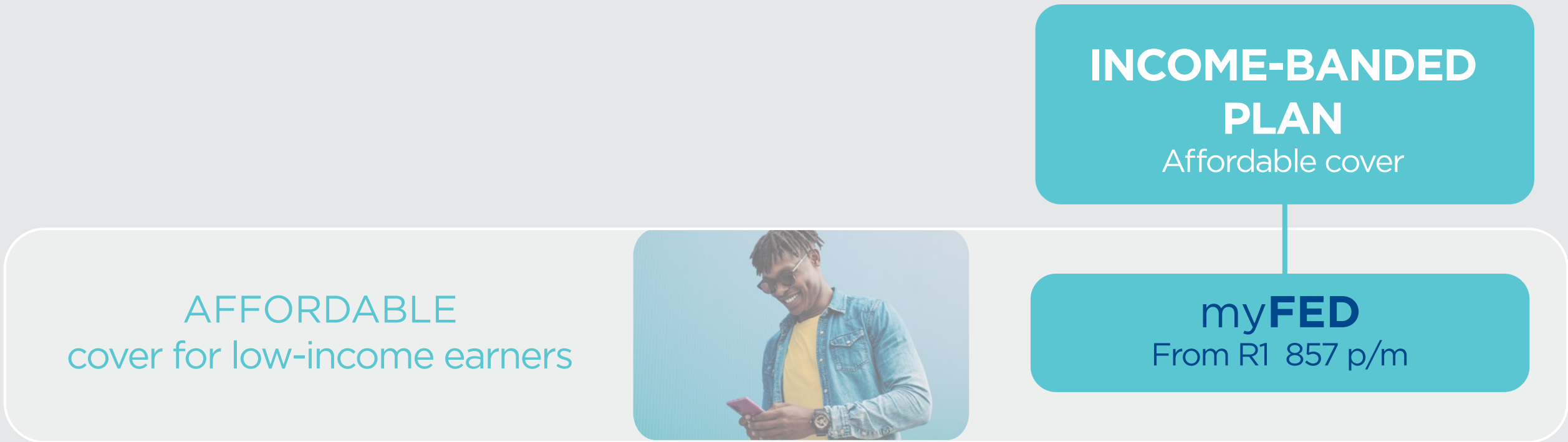
Extensive network coverage across South Africa

Representation across all major hospital groups*



*Plan dependent

Is myFED right for you?



The contribution that you pay is based on your highest household income

- ✓ Affordable cover particularly for low-income earners

Cover starting from
FROM **R1 857**p/m



HIGHEST HOUSEHOLD INCOME PER MONTH	MEMBER	ADULT DEPENDANT	CHILD DEPENDANT*
R1 – R11 494	R1 857	R1 857	R841
R11 495 – R16 226	R2 129	R2 129	R1 005
R16 227 – R22 495	R2 649	R2 649	R1 043
R22 496+	R4 376	R4 376	R1 383

*Up to a maximum of three children. Fedhealth charges child rates for children up to the age of 27.

Protect your health: myFED overview

		myFED					
Your contribution is based on your monthly household income:		R1 - R11 494	R11 495 - R16 226	R16 227 - R22 495	R22 496+	Child rates up to age 27	
Monthly contribution	Principal Member	R1 857	R2 129	R2 649	R4 376	Only pay for first 3 children	
	Adult Dependant	R1 857	R2 129	R2 649	R4 376		
	Child Dependant	R841	R1 005	R1 043	R1 383		
Day-to-day benefit	Annual day-to-day benefit	Individual limits per benefit category:				Screening benefits	
		 Unlimited nominated network GP consults		 Basic dentistry		Wellness benefits	
		 Unlimited pathology and general radiology, subject to protocols		 Unlimited acute medication, subject to formulary and protocols		Preventative benefits	
		 Consults at network Specialists		 Optical benefits			
Maternity	Ante- and postnatal consults	Unlimited at nominated network GPs					
	Midwife consults	4 consults per pregnancy in-and out-of-hospital					
	Pregnancy scans and tests	Paid from the respective radiology and pathology benefit					
	Infant benefits	Immunisations; infant hearing screening and consultation					
	Childcare benefits	Paediatric telephonic advice line					
Mental health	PMB	21 days for admissions or up to 15 out-of-hospital consultations per beneficiary for major affective disorders (including depression), anorexia, bulimia and substance abuse and 12 out-of-hospital consultations per beneficiary for acute stress disorder					
	Additional	2 out-of-hospital consults per person at nominated network GP					
Chronic benefits	27 PMB conditions	✓					
Cancer	PMB	✓					
Hospital cover	Use network facilities for planned procedures	Unlimited hospitalisation / Full cover for network Specialists in-hospital					
		✓					

More value than you might expect.

my**FED** membership also offers you:



The my**FED** **Baby Programme**



Child rates up to the age of 27



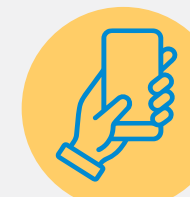
MediTaxi transport service for post-hospital treatment



Only pay for three children



Preventative benefits



Digital tools like the Fedhealth Member App

Screening, wellness and extra value-added benefits

Apart from a host of screening, preventative and wellness benefits, **myFED** also offers members additional benefits like MediTaxi and emergency assistance including the 24-hour Fedhealth Nurse Line.



Screening & Wellness Benefit

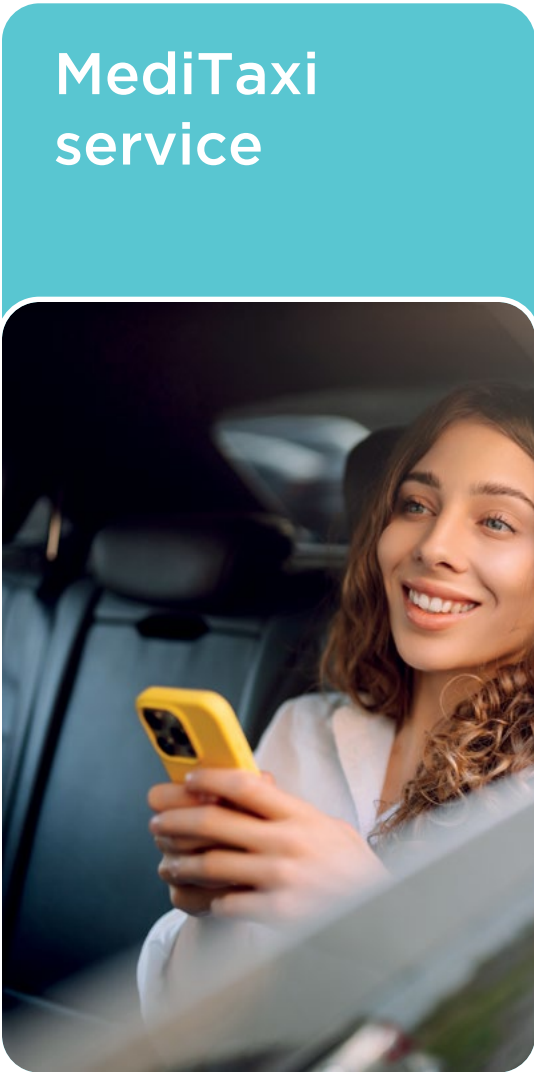


For full benefit information, how to access or register, applicable DSPs, formularies and protocols, [click here](#) to access **ZOOM on Screening Benefit**.

BENEFIT	Benefit criteria	Quantity and frequency
GENERAL WELLNESS		
HIV finger prick test	All lives	1 test every year
Flu vaccination and administration*	All lives	1 vaccine every year
Smoking cessation programme	All lives	1 GoSmokeFree enrolment per beneficiary every year (face-to-face and virtual excluding patches, medicines etc).
CHILDREN’S HEALTH		
Infant hearing screening test and consultation	Birth up to 8 weeks of age	1 per newborn beneficiary
WOMEN’S HEALTH		
Cervical Cancer Screening Pharmacy Consultation	Women aged 21 – 65	1 consultation every 3 years
Contraceptives	Women up to age 55	Female contraception: Oral and certain injectable contraceptives are paid for by the Scheme, subject to an approved list. It must, however, be prescribed by a GP or gynaecologist and is not applicable to non-contraceptive treatment (e.g. pills prescribed for acne.)
Emergency contraceptive benefit	Women up to age 55	1 every year
MEN’S HEALTH		
Prostate Specific Antigen (PSA)	Men Aged 45-69	1 test every year
HEALTH RISK ASSESSMENTS		
Wellness screening (BMI, blood pressure, finger prick cholesterol & glucose tests)	All lives	1 every year
Preventative screening (waist-to-hip ratio, body fat %, flexibility, posture and fitness)	All lives	1 every year

* Combined administration of vaccination benefit limit of 15 per annum per family per year

PLUS extra value-added benefits:



my**FED** members in Cape Town, Durban, Johannesburg and Pretoria can access the 24/7 MediTaxi benefit to take them to and collect them from follow-up healthcare service providers such as physiotherapists, doctors, specialists or a radiology practice, provided they have undergone an authorised operation or medical treatment that prevents them from driving. Trips are limited to two return trips per member/beneficiary per annum, and the total trip should not exceed 50km.

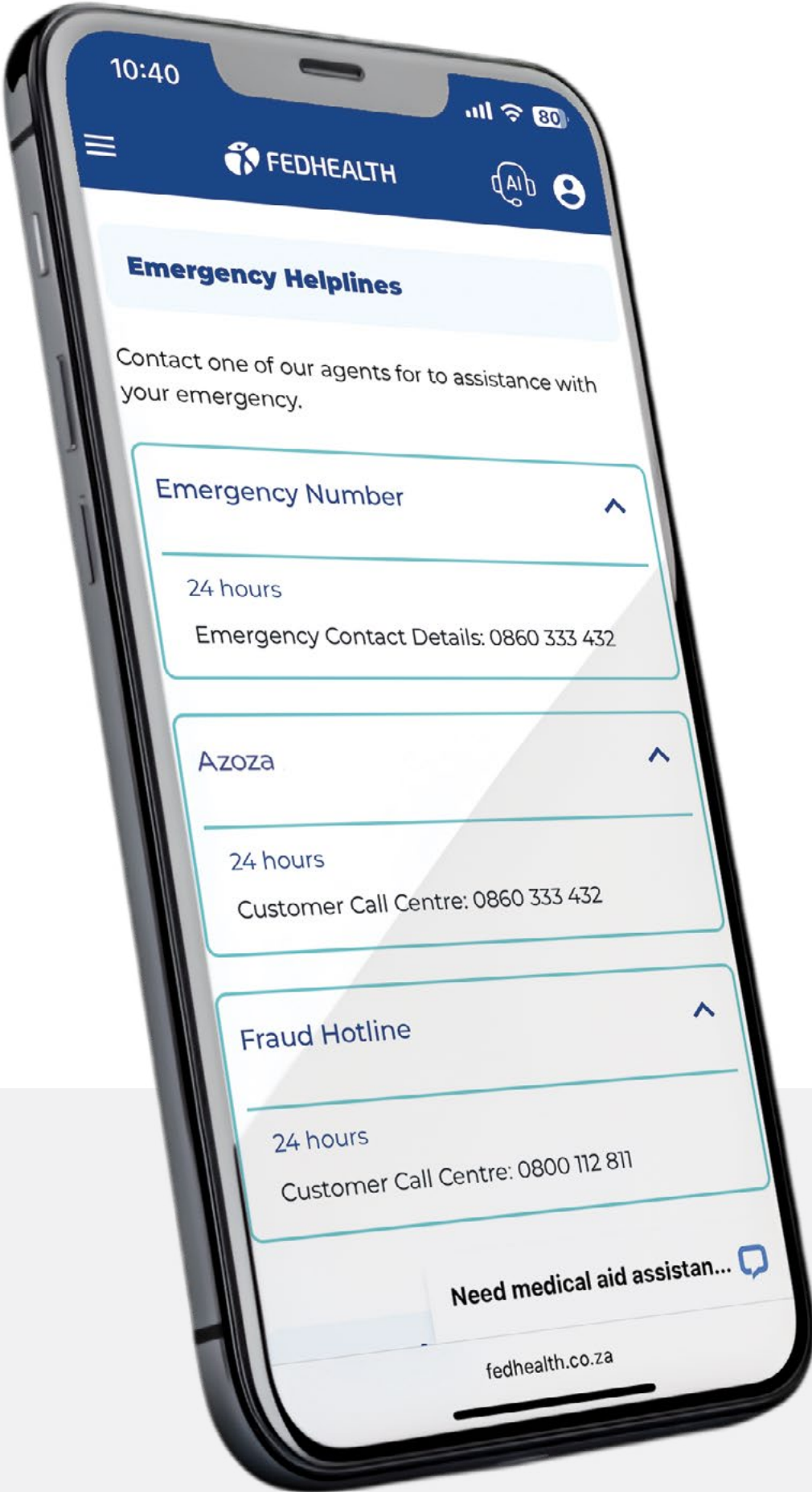


my**FED** members can bank on the following assistance in emergency medical situations:

Emergency Medical Benefit: Azoza provides a 24-hour medical advice and evacuation service, which is available to members according to the benefit rules and includes the co-ordination and management of emergency transport. **Call 0860 333 432** to access this service, and press 1.

Included in this benefit, emergency road or air transport, ambulance transfers, blood or medication delivery, patient monitoring and care for stranded minors and companions.

24-hour Fedhealth Nurse Line: Members can call **0860 333 432** and press 2 to talk to their own professional nurse for advice on medical matters, medication and even advice for teens.





Click here to access **ZOOM on MediTaxi Service.**



Click here to access **ZOOM on Emergency assistance.**

myFED

Day-to-Day Benefits

Here’s an overview of the day-to-day benefits available on my**FED**, including the casualty ward benefit and the chronic medicine benefit (refer to page 13 for further details).

BENEFIT	
NOMINATED CONTRACTED GENERAL PRACTITIONERS (GP) CONSULTATIONS AND VISITS Use of the myFED General Practitioner Network applies	Unlimited at nominated my FED contracted GP, subject to protocols and utilisation monitoring after 10 visits per beneficiary per year. Each beneficiary can nominate up to 2 my FED contracted GPs. Limited to 2 mental health consultations per beneficiary per year.
NON-CONTRACTED GENERAL PRACTITIONER (GP) CONSULTATIONS When you have not consulted your nominated contracted GP	Up to 2 GP consultations per beneficiary for non-contracted (or non-nominated) GPs allowed per year
NETWORK MEDICAL SPECIALIST CONSULTATIONS AND VISITS The use of the Fedhealth Specialist Network applies	2 specialist consultations and treatment up to R2 310 per family per year. Must be referred by contracted GP. No GP referral will attract a 40% upfront co-payment.
NON-NETWORK MEDICAL SPECIALIST CONSULTATIONS AND VISITS	No benefit
TRAUMA TREATMENT IN A CASUALTY WARD	Emergency treatment, like stitches, at a casualty ward is paid for whether the member is admitted to hospital or not (unlimited up to the Fedhealth Rate). Authorisation must be obtained within two working days. A co-payment of R910 per visit for non-PMBs applies.
BASIC DENTISTRY Removal of teeth and roots and suturing of traumatic wounds. Oral medical procedures: diagnosis and treatment of oral and associated conditions, plastic dentures and dental technician's fees for all such dentistry	Subject to a contracted list of dentists and limited to a list of approved procedures, dental tariff codes and protocols. Plastic dentures limited to one set per beneficiary every two years.
ADDITIONAL MEDICAL SERVICES Audiology, dietetics, genetic counselling, hearing aid acoustics, occupational therapy, orthoptics, podiatry, private nursing, psychologists, social workers, speech therapy	No benefit unless PMB level of care.
ALTERNATIVE HEALTHCARE Acupuncture, homeopathy, naturopathy, osteopathy and phytotherapy (including prescribed medication)	No benefit
APPLIANCES, EXTERNAL ACCESSORIES AND ORTHOTICS Hearing aids, wheelchairs, etc.	No benefit unless PMB level of care.

BENEFIT	
MEDICINES AND INJECTION MATERIAL	
Acute medicine – dispensing GP	Unlimited at dispensing nominated contracted GP
Acute medicine – non-dispensing medical practitioner (e.g. Fedhealth Network Specialists, GPs and Dentists)	Unlimited, subject to acute formulary for all medical practitioners
Chronic medicine	Please see chronic medicine benefit on page 13
Over-the-counter medicine	No benefit
OPTICAL BENEFIT Subject to ISO Leso Network Optometrists	This benefit is available in a two-year benefit cycle per beneficiary. Subject to IsoLeso Optometrist Network.
Consultations	1 comprehensive consultation
Spectacle lenses	1 pair of single vision clear CR39 lenses or 1 pair of clear CR39 bifocal lenses
Frames and/or lens enhancements	Frame to the value of R239 or R239 off any other frame
PATHOLOGY AND MEDICAL TECHNOLOGY	Unlimited, subject to basic protocols and a limited list of tests and procedures. Must be referred by contracted medical practitioner
GENERAL RADIOLOGY	Unlimited, subject to basic protocols and a limited list of tests and procedures. Must be referred by a contracted medical practitioner
SPECIALISED RADIOLOGY	No benefit unless PMB level of care.
ONCOLOGY PET AND PET/CT SCANS	No benefit unless PMB level of care DSP Network applicable or a R5 890 co-payment for non-DSP use
NON-SURGICAL PROCEDURES AND TESTS: Specified non-surgical procedures in practitioner's rooms (subject to authorisation)	Covered in full, limited to a list of approved procedures by a nominated General Practitioner.
PHYSICAL THERAPY Chiropractics, biokinetics and physiotherapy	No benefit
MENTAL HEALTH Consultations	See GP benefit. Limited to 2 mental health consultations per beneficiary at a nominated myFED contracted GP



Click here to access
ZOOM on General
Practitioner codes.



Click here to access
ZOOM on Basic
Dentistry Benefit.



Click here to access
ZOOM on Radiology
and Pathology codes.

Maternity and Childhood Benefits



Maternity and Childhood Benefits

myFED members enjoy the following in- and out-of-hospital benefits during pregnancy, birth and their children’s early years, which include for example, the myFED Baby Programme, infant hearing screening and the Paed-IQ advice line.



BENEFIT		
During pregnancy		
FEDHEALTH myFED BABY PROGRAMME	Pre-authorisation is required. Members will receive a handy myFED Baby Bag once they’ve registered for the myFED Baby Programme from their 12th week of pregnancy.	
MAIN BENEFITS		
Antenatal (or postnatal) consultations	Ante- and postnatal consultations with a nominated myFED contracted GP, subject to protocols and utilisation monitoring after 10 visits per beneficiary per year. Each beneficiary can nominate up to two myFED contracted GPs.	
Pregnancy related scans and tests	Ultrasound as per radiology benefit. Pathology tests subject to pathology benefit.	
Post-birth benefits		
Postnatal midwife consultations.	4 x post-natal midwife consultations per event, in- and out-of-hospital.	
Infant hearing screening test	Birth up to 8 weeks of age	1 per newborn beneficiary
CHILD CARE		
24-hour PAED-IQ Advice Line	Once your baby is born, access to paediatric nurse helpline 24 hours a day. This advice line can be used until your child is 14 years old.	

Pre-authorisation is required. Members will receive a handy myFED Baby Bag once they’ve registered for the myFED Baby Programme from their 12th week of pregnancy.

Please refer to page 23 to see benefits related to maternity confinement in-hospital.

[Click here](#) to access ZOOM on Maternity and Childhood Benefits.



Chronic Medicine Benefits



Chronic Medicine Benefits

 For full benefit information, how to access or register, applicable DSPs, formularies and protocols, [click here](#) to access **ZOOM on Chronic Medicine Benefit**.

Cover for conditions that require long-term medication or can be life-threatening:

LIMIT 	Unlimited cover for the Prescribed Minimum Benefit conditions on the Chronic Disease List (CDL).
FORMULARY 	Basic formulary or a 25% co-payment for non-use of formulary medication
PHARMACY 	Clicks Courier, Dis-Chem Courier and Pharmacy Direct, with a 25% co-payment for utilisation of a non-DSP.
HIV/AIDS MEDICINE BENEFIT INCLUDING TREATMENT FOR MOTHER-TO-CHILD-TRANSMISSION, RAPE AND POST-EXPOSURE PROPHYLAXIS	
Limit	Unlimited

27 Chronic conditions on the Chronic Disease List (CDL):

- Addison's Disease
- Asthma
- Bipolar Mood Disorder
- Bronchiectasis
- Cardiac Failure
- Cardiomyopathy
- COPD/ Emphysema/ Chronic Bronchitis
- Chronic Renal Disease
- Coronary Artery Disease
- Crohn's Disease
- Diabetes Insipidus
- Diabetes Mellitus type 1 & 2
- Dysrhythmias
- Epilepsy
- Glaucoma
- Haemophilia
- HIV
- Hyperlipidaemia
- Hypertension
- Hypothyroidism
- Multiple Sclerosis
- Parkinson's Disease
- Rheumatoid Arthritis
- Schizophrenia
- Systemic Lupus Erythematosus
- Ulcerative Colitis



Managed Care



AfA HIV Management Programme



The Scheme offers the AfA (HIV Management) programme to help members who are HIV-positive manage their condition. The benefits of being on the programme (over and above the payment of the necessary medicine and pathology claims), include clinical and emotional support to manage the condition.



[Click here](#) to access ZOOM on AfA HIV Management Programme.

Smoking Cessation Programme



my**FED** members who smoke can sign up for the GoSmokeFree service that's available at 200 pharmacies countrywide, including Dis-Chem, Clicks and independent pharmacies. All smokers have access once per beneficiary per year to have the GoSmokeFree consultation paid from Risk. The consultation can be a GoSmokeFree Virtual Service (phone or video) or face to face.



[Click here](#) to access ZOOM on Smoking Cessation Programme.

Hospital at Home



Fedhealth's technology-enabled Hospital at Home service, in partnership with Quro Medical, is offered by a team of trained healthcare professionals who bring all the essential elements of in-patient care to a patient's home, including real-time patient monitoring. This gives members the option to receive active treatment for a specified period at home instead of a general hospital ward, without compromising on the quality of their care.



[Click here](#) to access ZOOM on Hospital at Home Benefit.

Oncology Benefits



Oncology Benefits

Cancer is arguably one of the biggest and most serious dread diseases facing members, and Fedhealth strives to offer valuable oncology benefits and support in their time of need.



 [Click here](#) to access **ZOOM** on Oncology Benefits.

On my**FED**, oncology cover is unlimited at PMB level of care at the designated service provider, ICON, subject to Essential protocols. A 25% co-payment applies where a DSP provider is not used.

This benefit is subject to the submission of a treatment plan and registration on the Oncology Management Programme. Members will have access to post active treatment for life.

BENEFIT	
ONCOLOGY LIMIT The use of non-DSP* will attract a 25% upfront co-payment.	Covered up to PMB level of care at Designated Service Provider.
Active treatment period	Covered up to PMB level of care. ICON Essential Protocols apply
ONCOLOGY AND ONCOLOGY MEDICINE Chemotherapy, as well as medicine and consumables directly associated with the treatment of cancer, should be obtained from the Oncology Pharmacy Network and in accordance to the oncology Preferred Product List (PPL) – non-use of these will result in a 25% co-payment.	Covered up to PMB level of care. ICON Essential Protocols apply
Radiology and pathology	Covered up to PMB level of care
PET and PET-CT scans	No benefit unless PMB level of care. DSP Network applicable or a R5 890 co-payment for non-DSP use.
Specialised drugs for oncology	No benefit
Brachytherapy materials	No benefit
TERMINAL CARE	No benefit unless PMB level of care

** Designated Service Provider is ICON (Independent Clinical Oncology Network)*

Mental Health Benefits



Mental Health Benefits



 [Click here](#) access ZOOM on Mental Health Benefits.

BENEFIT	
OVERVIEW OF PMBs FOR MENTAL HEALTH	Up to 21 days of admissions or up to 15 out-of-hospital consultations per beneficiary for major affective disorders (including depression), anorexia, bulimia and substance abuse and 12 out-of-hospital consultations per beneficiary for acute stress disorder. Chronic medication for bipolar disorder and schizophrenia is also covered as part of PMBs.
CONSULTATIONS	15 out-of-hospital consultations per person for major affective disorders, anorexia, bulimia and substance abuse and 12 out-of-hospital consultations per beneficiary for acute stress disorder as per PMB entitlement.
CHRONIC MEDICATION FOR MENTAL HEALTH CONDITIONS	Covered under PMBs for qualifying conditions.
MENTAL HEALTH PROGRAMME	No access to programme.
PSYCHIATRIC HOSPITALISATION	Unlimited at cost at PMB level of care at a myFED mental health network facility, 30% co-payment on voluntary use of non-network mental health facilities will apply.

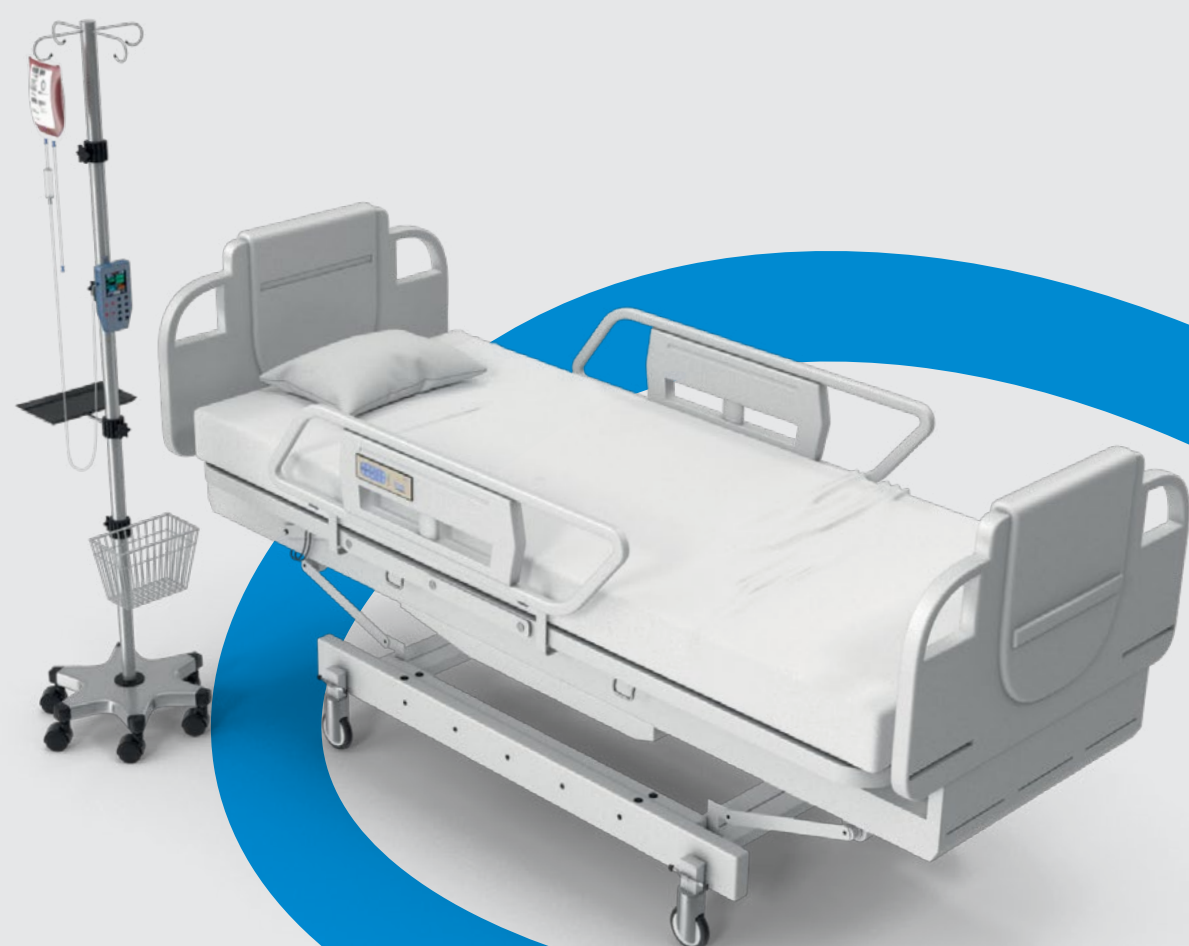


Hospital Cover



Unlimited Hospital Cover

myFED, like all Fedhealth options, has an unlimited in-hospital benefit. Pre-authorisation must be obtained for all planned hospital admissions. For emergencies, authorisation must be obtained within two working days after going to hospital.



The in-hospital benefit covers:

- The **hospital costs and accounts from doctors and specialists**, e.g. the anaesthetist and the X-ray department.
 - Specialists and GPs on the Fedhealth network are covered in full. Specialists and GPs not on the Fedhealth network are covered up to the Fedhealth Rate up to a limit of R2 840 per family per year.
- **Selected procedures in day wards and day clinics** on the my**FED** Day Surgery Network.
- Members must use the **myFED Fedhealth Hospital Network** or pay a co-payment on the hospital account..
- **Physiotherapy**: Referral by a medical practitioner and pre-authorisation is required, covered up to the Fedhealth Rate.

Prescribed Minimum Benefits (PMBs)

PMBs are a basic level of cover for a defined set of conditions. By law, all medical schemes must cover the treatment of 271 hospital-based conditions and 27 chronic conditions, i.e. the Chronic Disease List (CDL), in full without co-payment or deductibles, as well as any emergency treatment and certain out-of-hospital treatment.

This means that all schemes must provide **PMB level of care** at cost for these conditions. Schemes are allowed to require members to use Designated Service Providers (DSPs) and apply formularies and managed care protocols. Fedhealth uses network specialists, network GPs and network hospitals for the provision of PMBs.

Members must use a Fedhealth Network Specialist and a nominated network GP in order for the cost to be refunded in full. Should members not use these DSPs for PMB treatment, the Scheme will reimburse treatment at the non-network rate.

Co-payments are applicable to the voluntary use of non-DSPs. Referral must be obtained from a Fedhealth Network GP for consultations with Fedhealth Network Specialists. If referral is not obtained, there will be a 40% co-payment on specialist claims paid from the Risk benefit.

***Please note:** Qualification for reimbursement as a PMB is not based solely on the diagnosis (condition), but also on the treatment provided (level of care). Although a member's condition may be a PMB condition, the Scheme would only be obliged to fund it in full if the treatment provided was considered PMB level of care.*

Co-payments on certain procedures

For some treatments and procedures, members must pay an amount out of their own pocket. Co-payments apply to the hospital account and/or certain procedures.

What are considered as emergencies?

- An unexpected condition that requires immediate treatment. This means that if there's no immediate treatment, the condition might result in lasting damage to organs, limbs or other body parts, or even in death.
- Members on network hospital options can get treatment for emergency medical conditions at any hospital, but once their condition has stabilised and they can be safely transferred to a network hospital, the co-payment will apply if they opt not to be transferred.

BENEFIT	
OVERALL ANNUAL LIMIT (OAL)	No overall annual limit
HOSPITAL NETWORK	
Acute hospital facilities	my FED hospital network
Day surgery facilities	Day Surgery Facilities Network
Mental health facilities	Fedhealth Mental Health Facilities Network
PRESCRIBED MINIMUM BENEFITS (PMB) Treatment for PMB conditions can be funded in two ways	To have the treatment for PMB conditions covered in full, you will have to use Fedhealth Network GPs, specialists, hospitals and DSPs where applicable. Should you choose not to make use of network providers, the Scheme will only refund treatment up to the Fedhealth Rate and you will have a co-payment should the healthcare professional charge more
HOSPITALISATION Accommodation, use of operating theatres and hospital equipment, medicine, pharmaceuticals and surgical items. Hospital admissions will require a referral from a Network GP and pre-authorisation.	Unlimited at Fedhealth my FED network hospitals
Hospital co-payment for non-network hospital	30% co-payment on voluntary use of non-network hospitals. 30% co-payment on voluntary use of non-network day surgery facilities. 30% co-payment on voluntary use of non-network mental health facilities. 25% co-payment on voluntary use of non-network substance abuse facilities.
CONFINEMENT	
Maternity confinement: Accommodation in a general ward, high care and intensive care unit, theatre fees, medicine, material and hospital apparatus. Hospital admissions will require a referral from a GP and pre-authorisation.	Unlimited
Elective Caesareans.	Unlimited at PMB level of care. Subject to a R16 570 co-payment
Delivery by Fedhealth Network GPs and specialists.	Covered in full at negotiated rate.
Delivery by non-network GPs and specialists.	Covered up to the Fedhealth Rate. Limited to R2 840 per family per year.
Maternity confinement in a registered birthing unit or out-of-hospital.	Unlimited at PMB level of care.
Delivery by a registered midwife/nurse or a practitioner.	Unlimited at PMB level of care.
Hire of water bath and oxygen cylinder.	Unlimited at PMB level of care.
Medicine on discharge from hospital: The medicine can either be dispensed by the hospital and reflect on the original hospital account, or be dispensed by a pharmacy on the same day as the member is discharged from hospital.	Limited to 7 days' medication up to a maximum of R428 per beneficiary per admission.

BENEFIT	
FEDHEALTH BABY PROGRAMME Fedhealth my FED Baby Programme - see page 11	
ADDITIONAL MEDICAL SERVICES Includes dietetics, occupational therapy, speech therapy, orthoptics, podiatry, private nurse practitioners, social workers, audiology, genetic counselling	No benefit unless PMB level of care
SURGICAL PROCEDURES	Hospital admissions will require a referral from a General Practitioner as well as pre-authorisation. Unlimited at PMB level of Care.
NON-SURGICAL PROCEDURES AND TESTS Specified non-surgical procedures in practitioner’s rooms (Subject to authorisation and covered from risk)	Covered in full, limited to a list of approved procedures by a contracted my FED General Practitioner.
MEDICINE ON DISCHARGE FROM HOSPITAL The medicine can either be dispensed by the hospital and reflect on the original hospital account, or be dispensed by a pharmacy on the same day as the member is discharged from hospital.	Up to 7 days supply to a maximum of R428 per beneficiary per admission.
ALTERNATIVES TO HOSPITALISATION	Sub-acute facilities and physical rehabilitation facilities. Does not include Hospice
Sub-acute facilities, physical rehabilitation facilities	Unlimited at cost at PMB level of care
Terminal care benefit	No benefit unless PMB level of care
APPLIANCES, EXTERNAL ACCESSORIES AND ORTHOTICS Subject to PMB and managed care protocols if deemed clinically appropriate	
General medical and surgical appliances (including glucometers)	No benefit unless PMB level of care
Hearing aids including repairs	No benefit unless PMB level of care
Large orthopaedic orthotics/appliances	No benefit unless PMB level of care
Stoma products	No benefit unless PMB level of care
CPAP apparatus for sleep apnoea	No benefit unless PMB level of care
Foot orthotics (incl. shoes and foot inserts/levellers)	No benefit unless PMB level of care
Oxygen therapy equipment	No benefit unless PMB level of care
Home ventilators	No benefit unless PMB level of care
Long leg callipers	No benefit unless PMB level of care
Moon boots	No benefit unless PMB level of care

BENEFIT	
BLOOD, BLOOD EQUIVALENTS AND BLOOD PRODUCTS Including transportation of blood	Unlimited
CONSULTATIONS AND VISITS BY MEDICAL PRACTITIONER Hospital admissions will require a referral from a GP and pre-authorisation. A 40% co-payment applies on the specialist account if no referral is received from a GP.	
Fedhealth Network GPs and Specialists	Covered in full
Non-network GPs and Specialists	Covered up to the Fedhealth Rate. Limited to R2 840 per family per year
Other healthcare practitioners	Covered up to the Fedhealth Rate
ORGAN TISSUE AND HAEMOPOIETIC STEM CELL (BONE MARROW) TRANSPLANTATION Haemopoietic stem cell (bone marrow) transplantation, immunosuppressive medication, post transplantation biopsies and scans, radiology and pathology	Unlimited at cost at PMB level of care at DSP
Corneal grafts	No benefit
PATHOLOGY AND MEDICAL TECHNOLOGY	Unlimited
PHYSIOTHERAPY In-hospital physiotherapy requires pre-authorisation and referral by a medical practitioner. Subject to treatment protocols.	Unlimited
PROSTHESES AND DEVICES INTERNAL	Unlimited at cost at PMB level of care
PROSTHESES EXTERNAL	Unlimited at cost at PMB level of care
GENERAL RADIOLOGY	Unlimited
SPECIALISED RADIOLOGY	R16 100 per family per year
CT scans, MUGA scans, MRI scans, radio isotope studies	Specific authorisation required
CHRONIC RENAL DIALYSIS Pre-authorisation is required and services must be obtained from the DSP. A 40% co-payment applies where a DSP provider is not used. Haemodialysis and peritoneal dialysis, radiology and pathology. Consultations, visits, all services, materials and medicines associated with the cost of renal dialysis.	Unlimited at cost at PMB level of care at DSP. 40% co-payment for voluntary use of non-DSP.

BENEFIT	
MENTAL HEALTH In-hospital consultations and visits, procedures, assessments, therapy, treatment and/or counselling. Hospital admissions will require a referral from a GP and pre-authorisation.	Unlimited at cost at PMB level of care at a my FED mental health network facility. 30% co-payment on voluntary use of non-network mental health facilities will apply.
Rehabilitation for substance abuse	Limited to one rehabilitation programme per beneficiary per year at PMB level of care at a my FED substance abuse network facility. 25% co-payment on voluntary use of non-network substance abuse facilities will apply.
IMMUNE DEFICIENCY RELATED TO HIV INFECTION Hospitalisation, anti-retroviral and related medication and related pathology.	Unlimited at cost at PMB level of care.

Co-payments on certain procedures

For some treatments and procedures, members must pay an amount out of their own pocket. Co-payments apply to the hospital account and/or certain procedures.

Voluntary use of non-network hospital	30% co-payment
Voluntary use of non-network day surgery facility	30% co-payment
Voluntary use of non-network mental health facilities	30% co-payment
Elective Caesarean sections	R16 570

Links to benefits info

Need more information on a specific Fedhealth benefit, programme, service or provider?

We've got you covered. For additional information, just click on the relevant ZOOM to find out more.



- [Alignd Serious Illness Benefit →](#)
- [All about dependants →](#)
- [Alternatives to Hospitalisation Benefit →](#)
- [Basic Dentistry Benefit →](#)
- [Chronic Medicine Benefit →](#)
- [Contraceptive Benefit →](#)
- [Emergency Assistance →](#)
- [Emergency Treatment in a Casualty Ward →](#)
- [General Practitioner codes →](#)
- [GP Nomination →](#)
- [Hospital at Home Benefit →](#)
- [Maternity & Childhood Benefits →](#)
- [MediTaxi Benefit →](#)
- [Mental Health Benefit →](#)

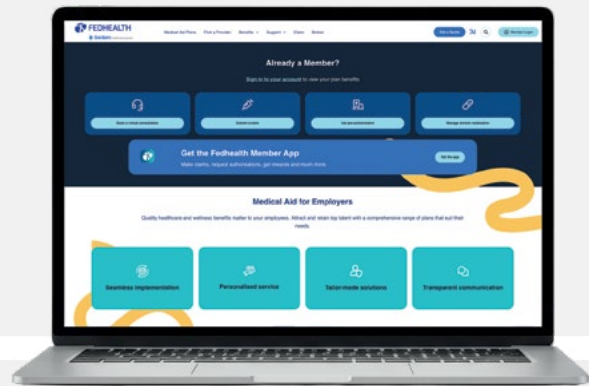
- [Oncology Benefit →](#)
- [Radiology and Pathology codes →](#)
- [Screening Benefit →](#)
- [Self-Service Channels →](#)
- [Smoking Cessation Programme →](#)



Contact us

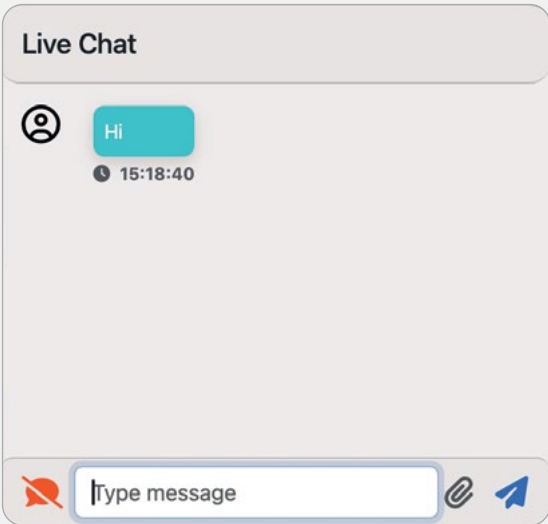
WEBSITE fedhealth.co.za

The website provides easy-to-navigate information on our options, step-by-step instructions on how to submit claims etc., scheme news, and also hosts the informative Healthy Living articles – filled with lifestyle and wellness topics.



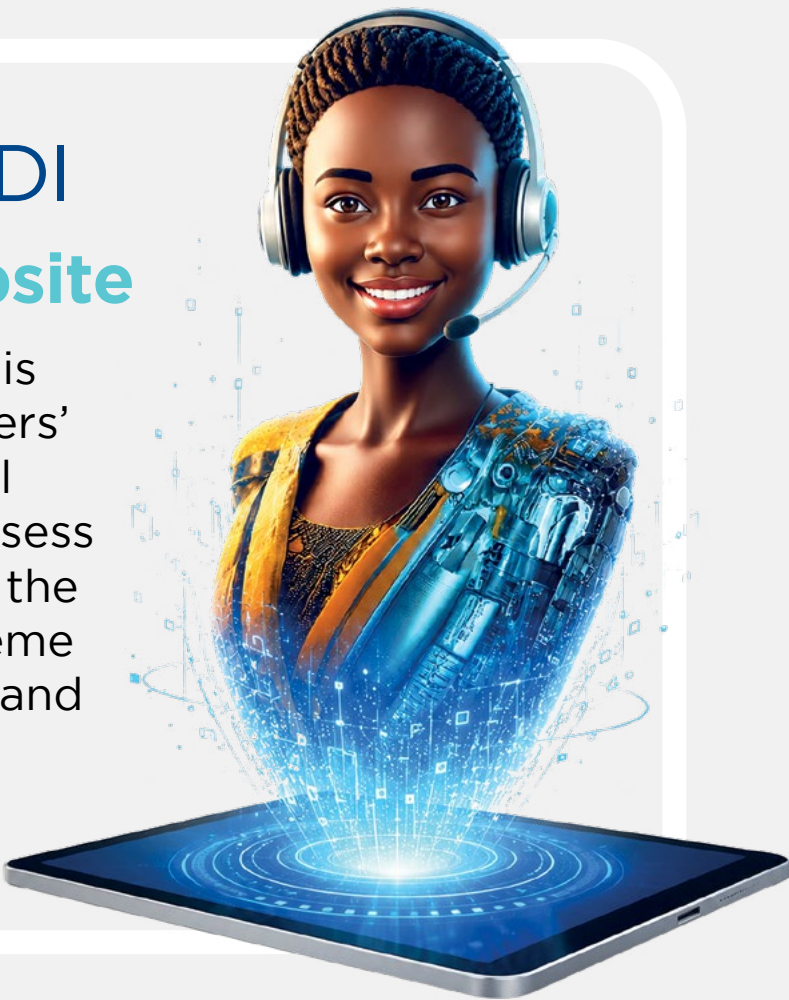
LIVECHAT [Access on the website](#)

Members can type in their queries and one of our LiveChat agents will assist them online.



AI AGENT NALEDI [Access on the website](#)

Naledi, our expert AI agent, is on hand to help with members' general queries and informal searches. Naledi can help assess members' needs to suggest the right plan, and provide Scheme resources on benefits, rules and plan details.



FAMILY ROOM [Access on the website](#)

Our online member portal allows members to manage their membership by updating contact details, viewing and submitting claims, viewing member statements, seeing how much Savings they've got left, activate the amount of Savings they require, registering for chronic medicine and obtaining hospital authorisations.



WHATSAPP

Members can choose from self-service actions like obtaining their tax certificates or membership e-cards.

Save the number 060 070 2479 as a contact and type 'hi' to start a conversation

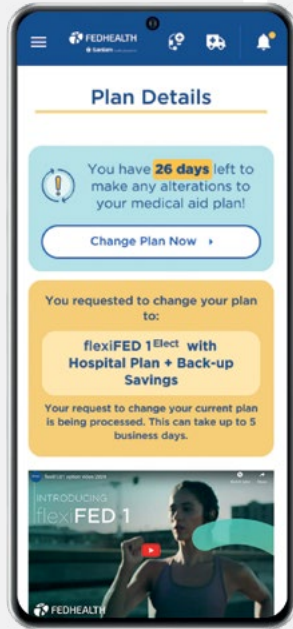


MEMBER APP

Our app has been designed to simplify members' interaction with the Scheme. Available from the

[Google Play Store](#), [Huawei App Gallery](#) and [Apple App Store](#),

it lets the member activate the amount of Savings they require, download their e-card, view their option's benefits, set medicine reminders, and lots more.



Contact details

Hospital Authorisation Centre
Monday to Thursday 08h30 – 17h00
Friday 09h00 – 17h00
Tel: 0860 002 153
Email: authorisations@fedhealth.co.za
Web: www.fedhealth.co.za

Alignd
Tel: 0860 100 572
Email: referrals@alignd.co.za

Ambulance Services
Azoza
Tel: 0860 333 432

AfA (HIV Management)
Monday to Friday 08h00 – 17h00
Tel: 0860 100 646
Email: afa@afadm.co.za
Web: www.aidforaids.co.za
SMS (call me): 083 410 9078

Chronic Medicine Management
Monday to Thursday 08h30 – 17h00
Friday 09h00 – 17h00
Tel: 0860 002 153
Email: cmm@fedhealth.co.za
Postal address: PO Box 38632, Pinelands, 7430

Disease Management
Monday to Friday 08h00 – 16h30
Tel: 0860 002 153
Email: membercare@medscheme.co.za

Fedhealth Baby | Mom Maternity Care Programme
Monday to Friday 09h00 – 16h00
Tel: 0861 116 016
Email: info@babyhealth.co.za

Fedhealth Oncology Programme
Monday to Friday 08h00 – 16h00
Tel: 0860 100 572
Email: cancerinfo@fedhealth.co.za
Postal address: PO Box 38632, Pinelands, 7430

Fedhealth Paed-IQ 24 hour service
Tel: 0860 444 128

Fraud Hotline
Tel: 0800 112 811

MVA Third Party Recovery Department
Monday to Friday 08h00 – 16h00
Tel: 0800 117 222

MediTaxi
Tel: 0860 333 432 press 5 for the point-to-point service

Hospital-at-Home (Quoro Medical)
Tel: 010 141 7710
Web: www.quoromedical.co.za

Medscheme Client Service Centres

For personal assistance, visit one of the following Medscheme Client Service Centres.

These branches are open
Monday to Thursday 07h30 – 17h00,
Friday 09h00 – 17h00 and
Saturday 08h00 – 12h00

Bloemfontein
Medical Suites 4 & 5, 1st Floor, Middestad Centre, Cnr Charles & West Burger Street, Bloemfontein

Cape Town
Shop 6, 9 Long Street, Cnr Long & Waterkant Streets, Cape Town

Durban
14/36 Silver Oaks Office Park, Silverton Road, Musgrave, Durban

East London
Unit 5, Balfour Road, Vincent, East London

Johannesburg
Mathomo Mall, 115 Main Street, Marshalltown, Johannesburg

Kathu
Shop 18D, Kameeldoring Plein Building, Cnr Frikkie Meyer & Rooisand Road, Kathu

Kimberley
Shop 76, North Cape Mall, Royldene, Kimberley

Klerksdorp
48 Buffelsdoorn Road, Buffelspark Office Complex, Klerksdorp

Lephalale
Shop 0050A, Lephalale Mall, cnr Chris Hani Ave & Nelson Mandela Drive, Lephalale

Mafikeng
Shop 118, Ground Floor, East Gallery, Mafikeng

Nelspruit
Shop 11, City Centre Mall, Cnr Andrews Street & Madiba Drive, Mbombela

Pietermaritzburg
Shop 32B, Park Lane Shopping Centre, 12 Chief Albert Luthuli Street, Pietermaritzburg

Polokwane
Shop 3, Checkers Centre, 51 Biccard Street, Polokwane

Port Elizabeth
Block 3, Greenacres Office Park, 2nd Avenue, Newton Park, Gqeberha

Pretoria
Shop 17, Nedbank Plaza, Ground Floor, 175 Steve Biko Street, Arcadia, Pretoria

Roodepoort
Valley View Office Park, 680 Joseph Lister Street, Constantia Kloof, Roodepoort

Rustenburg
Lifestyle Square, Shop 23, Beyers Naude Drive, Rustenburg

Vereeniging
32 Grey Avenue, Vereeniging

Worcester
45 Church Street, Worcester

Contact us

Fedhealth Customer Contact Centre
Tel: 0860 002 153
Email: member@fedhealth.co.za
Claim submission: claims@fedhealth.co.za
Web: www.fedhealth.co.za
Postal address: Private Bag X3045, Randburg, 2125

Contact Centre is open
Monday to Thursday 08h30 – 17h00,
Friday 09h00 – 17h00



Fedhealth Customer Contact Centre 0860 002 153

Corner Ontdekkers Road and Conrad Street, Absa Building Block F, Florida, 1716
Private Bag X3045, Randburg 2125

www.fedhealth.co.za

Please note: All Fedhealth benefits are subject to registered Scheme Rules, and as such, this document only aims to provide a summary of such benefits.

For the full Scheme Rules, please visit fedhealth.co.za or contact the Fedhealth Customer Contact Centre on 0860 002 153 to obtain a copy.

