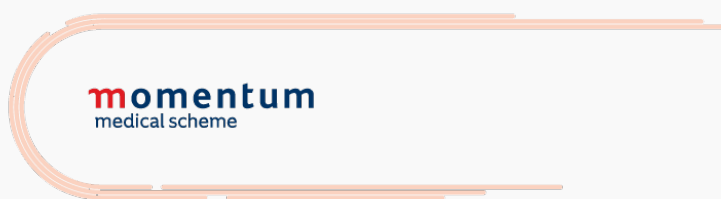


Focus on the Ingwe Option - 2027

Last Modified on 30/09/2026 11:23 am CAT



Introduction

The Ingwe Option provides affordable access to entry-level cover. For your hospitalisation cover, you can choose to use the Connect Network of private hospitals, the Ingwe Network of private hospitals or Any hospital.

For chronic treatment and day-to-day benefits, such as GP visits or prescribed medicine, if you choose Connect Network hospitals, you need to use State facilities, if you choose Ingwe Network hospitals, you need to use Ingwe Primary Care Network providers, or if you choose Any hospital, you need to use Ingwe Active Network providers. View the lists of network providers on the Momentum App or at momentummedicalscheme.co.za. Alternatively, WhatsApp or call us on **0860 11 78 59**.

You are also covered for three virtual GP consultations per year from the GP Virtual Consultation Network, which includes Hello Doctor. This means that you can have a virtual consultation with a qualified doctor, from the comfort of your home, or wherever you may find yourself at the time. If you need more day-to-day benefits, you can make use of Momentum HealthSaver⁺. HealthSaver is a complementary product offered by Momentum that lets you save for medical expenses not covered on your option.

The Health Platform Benefit provides cover for a range of preventative care benefits. If you choose Ingwe Network hospitals or Any hospital, Health Platform Benefits are only available from your chosen Primary Care Network provider, except for health assessments, maternity programme benefits and baby immunisations, which are available at any healthcare provider. If you choose Connect Network hospitals, you may use any healthcare provider.

If you need more day-to-day cover, you can choose to make use of the HealthSaver⁺. To help pay for in-hospital shortfalls and co-payments, you can make use of Momentum GapCover⁺. HealthSaver and GapCover are complementary products offered by Momentum.

This focus page summarises the 2027 benefits available on the Ingwe Option. Scheme Rules always take precedence and are available on request.

Momentum Medical Scheme's 2027 benefits and contributions Rules have been submitted to the Council for Medical Schemes and are subject to approval by the Registrar.

Major Medical Benefit

Provider	Connect Network hospitals, Ingwe Network hospitals or Any hospital
Limit	No overall annual limit applies
Rate	Up to 100% of the Momentum Medical Scheme Rate
Specialised procedures/treatment	Certain procedures/treatment covered – see Member brochure for the list

There is no overall annual limit for hospitalisation. This benefit provides cover for hospitalisation and certain specialised procedures/treatment at either the Connect Network of private hospitals, the Ingwe Network of private hospitals or Any hospital, depending on the provider you have chosen. Claims are paid up to 100% of the Momentum Medical Scheme Rate. Under the hospitalisation benefit, hospital accounts and related costs incurred in hospital (from admission to discharge) are covered – provided that treatment has been authorised.

The specialised procedures/treatment that are covered do not necessarily require admission to hospital and are included in the Major Medical Benefit – provided that the treatment is clinically appropriate and has been authorised.

If authorisation is not obtained, a 30% co-payment will apply on all accounts related to the event and the Scheme would be responsible for 70% of the negotiated tariff, provided authorisation would have been granted according to the Rules of the Scheme. In the case of an emergency, you or someone in your family or a friend must obtain authorisation within 72 hours of admission.

If you have chosen Connect Network hospitals or Ingwe Network hospitals and do not use these providers, a 30% co-payment will apply on the hospital account.

Chronic Benefit

Chronic provider and formulary	Ingwe Primary Care Network, Ingwe Active Network or State facilities. Subject to a list of medicine, referred to as a formulary.
Chronic conditions covered	26 conditions, according to the Chronic Disease List in the Prescribed Minimum Benefits.

The Chronic Benefit covers certain life-threatening conditions that need ongoing treatment. On the Ingwe Option, chronic benefits are available from the Ingwe Primary Care Network, Ingwe Active Network or State facilities. Chronic cover is provided for 26 conditions according to the Chronic Disease List, which forms part of the Prescribed Minimum Benefits. Chronic benefits are subject to registration and approval.

Day-to-day Benefit

Day-to-day provider	Ingwe Primary Care Network, Ingwe Active Network or State facilities
Day-to-day benefit	<p>If you choose Connect Network hospitals, benefits are available from State facilities, unless otherwise indicated.</p> <p>If you choose Ingwe Network hospitals, benefits are only available from Ingwe Primary Care Network providers or if you choose Any hospital, benefits are only available from Ingwe Active Network providers.</p> <p>Benefits are subject to the rules and provisions set by the network, commonly referred to as protocols, and to the network's list of applicable tariff codes.</p>

This benefit provides for day-to-day medical expenses, such as GP visits and prescribed medicine. On the Ingwe

Option, day-to-day benefits are available from the Ingwe Primary Care Network, Ingwe Active Network or State facilities, unless otherwise indicated. You also have cover for three virtual consultations per year from the GP Virtual Consultation Network, which includes Hello Doctor.

Health Platform Benefit

Provider	Ingwe Primary Care Network, Ingwe Active Network or Any provider
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This benefit encourages health awareness, enhances the quality of life and gives peace of mind through:

- preventative care and early detection;
- maternity programme; and
- health education and advice.

If you choose Connect Network hospitals, you can use any healthcare provider for your Health Platform Benefits. The Scheme will pay these benefits up to the maximum rand amount per benefit. You do not need to pre-notify before using the benefits, except for preventive dental care, pap smears, general physical examinations and HIV tests.

If you choose Ingwe Network hospitals or Any hospital, Health Platform Benefits are only available from your chosen Primary Care Network provider, except for health assessments, maternity programme benefits and baby immunisations, which are available at any healthcare provider.

Contributions

Your
monthly
income

Choose
your providers

Choose
your family composition

	Hospital	Chronic	Day-to-day						
R0 - R1 600	Connect Network	State	State	R1 158	R2 316	R1 481	R2 639	R2 962	R3 285
	Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R699	R1 398	R1 328	R2 027	R2 656	R3 285
	Any	Ingwe Active Network	Ingwe Active Network	R699	R1 398	R1 398	R2 097	R2 796	R3 495
R1 601 - R9 800	Connect Network	State	State	R1 344	R2 688	R1 696	R3 040	R3 392	R3 744
	Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R1 537	R3 074	R2 240	R3 777	R4 480	R5 183
	Any	Ingwe Active Network	Ingwe Active Network	R1 998	R3 996	R2 791	R4 789	R5 582	R6 375
R9 801 - R13 100	Connect Network	State	State	R1 755	R3 510	R2 193	R3 948	R4 386	R4 824
	Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R1 957	R3 914	R2 691	R4 648	R5 382	R6 116
	Any	Ingwe Active Network	Ingwe Active Network	R2 794	R5 588	R3 639	R6 433	R7 278	R8 123
R13 101 - R18 850	Connect Network	State	State	R1 892	R3 784	R2 362	R4 254	R4 724	R5 194
	Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R2 689	R5 378	R3 480	R6 169	R6 960	R7 751
	Any	Ingwe Active Network	Ingwe Active Network	R3 805	R7 610	R4 692	R8 497	R9 384	R10 271
R18 851 - R24 500	Connect Network	State	State	R3 080	R6 160	R3 780	R6 860	R7 560	R8 260
	Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R3 858	R7 716	R4 994	R8 852	R9 988	R11 124
	Any	Ingwe Active Network	Ingwe Active Network	R4 884	R9 768	R6 302	R11 186	R12 604	R14 022
R24 501+	Connect Network	State	State	R3 543	R7 086	R4 348	R7 891	R8 696	R9 501
	Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R3 873	R7 746	R5 014	R8 887	R10 028	R11 169
	Any	Ingwe Active Network	Ingwe Active Network	R4 905	R9 810	R6 327	R11 232	R12 654	R14 076

All children are charged for

Benefit schedule

Major Medical Benefit

Major Medical Benefit

General rule applicable to the Major Medical Benefit: You need to contact us for pre-authorisation before making use of your Major Medical Benefits. For some conditions, like diabetes, you will need to register on a health management programme. The Scheme will pay benefits in line with the Scheme Rules and the clinical protocols that the Scheme has established for the treatment of each condition. The sub-limits specified below apply per year. Should you not join in January, your sub-limits will be adjusted pro-rata (this means it will be adjusted in line with the number of months left in the year).

Provider	Connect Network hospitals, Ingwe Network hospitals or Any hospital
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Overall annual limit	None
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Hospitalisation

Benefit	Specialists covered up to 100% of the Momentum Medical Scheme Rate. Hospital accounts are covered in full at the rate agreed upon with the hospital group
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High and intensive care	10 days per admission
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Renal dialysis	Limited to Prescribed Minimum Benefits at State facilities
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Oncology	<p>If you choose Connect Network hospitals, you need to obtain your oncology treatment from an oncologist authorised by the Scheme, and benefits are limited to Prescribed Minimum Benefits at Connect Network hospitals.</p> <p>If you choose Ingwe Network hospitals or Any hospital, benefits are limited to Prescribed Minimum Benefits at State facilities.</p>
Organ transplants	<p>If you choose Connect Network hospitals, benefits are limited to Prescribed Minimum Benefits at Connect Network hospitals.</p> <p>If you choose Ingwe Network hospitals or Any hospital, benefits are limited to Prescribed Minimum Benefits at State facilities.</p>
In-hospital dental and oral benefits	Not covered. Dentistry related to trauma covered at State facilities, limited to Prescribed Minimum Benefits.
Maternity confinements Caesarean sections: Only emergency caesareans are covered	No annual limit applies
Neonatal intensive care	No annual limit applies
Medical and surgical appliances in hospital (such as support stockings, knee and back braces, etc)	R7 300 per family
Prosthesis – internal (including knee and hip replacements, permanent pacemakers, etc)	Limited to Prescribed Minimum Benefits at State facilities
Prosthesis – external (such as artificial arms or legs)	Limited to Prescribed Minimum Benefits at State facilities
MRI and CT scans, magnetic resonance cholangiopancreatography (MRCP), whole body radioisotope and PET scans	<p>If you choose Connect Network hospitals, MRI and CT scans are limited to Prescribed Minimum Benefits at Connect Network hospitals and other specialised scans are subject to Prescribed Minimum Benefits at State facilities.</p> <p>If you choose Ingwe Network hospitals or Any hospital, all scans are limited to Prescribed Minimum Benefits at State facilities.</p>
Mental health <ul style="list-style-type: none"> including psychiatry and psychology; and drug and alcohol rehabilitation 	Limited to Prescribed Minimum Benefits at State facilities
Take-home medicine	7 days' supply
Medical rehabilitation and step-down facilities	R18 300 per beneficiary (combined limit), subject to case management
Private nursing and Hospice	Not covered
Health management programmes for conditions such as HIV/Aids	Your doctor needs to register you on the appropriate health management programme
Immune deficiency related to HIV <ul style="list-style-type: none"> Anti-retroviral treatment HIV related admissions 	<p>R44 200 per family at preferred provider</p> <p>R44 700 per family at your chosen hospital provider</p>
Emergency medical transport in South Africa by Netcare 911	No annual limit applies
Specialised procedures or treatment	

Certain specialised procedures/treatment covered (when clinically appropriate) in- and out of hospital. Refer to the Member brochure for a list of procedures and treatment covered.

Chronic Benefit

Chronic Benefit

General rule applicable to the Chronic Benefit: Benefits are only available at your chosen Network provider, and are subject to a list of medicine, referred to as a Network entry-level formulary.

Provider	Ingwe Primary Care Network, Ingwe Active Network or State facilities
Cover	26 conditions covered, according to the Chronic Disease List in the Prescribed Minimum Benefits

Day-to-day Benefit

Day-to-day Benefit

General rule applicable to the Day-to-day Benefit: If you choose Connect Network hospitals, benefits are available from State facilities, unless otherwise indicated. If you choose Ingwe Network hospitals, benefits are only available from Ingwe Primary Care Network or if you choose Any hospital, benefits are only available at Ingwe Active Network. Benefits are subject to the rules and provisions set by the network, commonly referred to as protocols, and to the network's list of applicable tariff codes.

Provider	Ingwe Primary Care Network, Ingwe Active Network or State facilities
Acupuncture, Homeopathy, Naturopathy, Herbology, Audiology, Occupational and Speech therapy, Chiropractors, Dieticians, Biokinetics, Orthoptists, Osteopathy, Audiometry, Chiropody, and Podiatry	Limited to Prescribed Minimum Benefits at State facilities
Mental health (incl. psychiatry and psychology)	Limited to Prescribed Minimum Benefits at State facilities
Dentistry – basic (such as extractions or fillings)	Examinations, fillings and x-rays as per the list of tariff codes. One dental consultation is covered per year per beneficiary. You need to contact us for pre-authorisation if you have more than 4 fillings or 4 extractions.
Dentistry – specialised (such as bridges or crowns)	Not covered
External medical and surgical appliances (incl. hearing aids, wheelchairs, etc)	Not covered
General practitioners	There is no limit to the number of times you may visit your network GP. However, all visits from the 11th visit onwards must be pre-authorised.
GP virtual consultations	3 virtual consultations per year from the GP Virtual Consultation Network, which includes Hello Doctor. Consultations include scripting of medication where required.

Out-of-network GP, casualty or after-hours visits	1 visit per beneficiary per year, subject to authorisation (you need to authorise within 72 hours of the consultation, otherwise a 30% co-payment will apply and Momentum Medical Scheme will be responsible for 70% of the negotiated tariff). Maximum of 2 visits per family per year, R110 co-payment per visit applies.
Specialists	2 visits per family per year, limited to R1 500 per visit and up to a maximum of R3 000 per family per year. Covered at 100% of Momentum Medical Scheme Rate. Subject to referral and pre-authorisation. Psychologists and psychiatrists are limited to Prescribed Minimum Benefits at State facilities.
Physiotherapy	Included in the specialist limit
Optical and optometry (excl. contact lenses and refractive eye surgery)	1 eye test and 1 pair of clear standard or bi-focal lenses with standard frame as per formulary per beneficiary every 2 years. Spectacles will only be granted if your refraction measurement is more than 0.5
Pathology – basic (such as cholesterol tests)	Specific list of pathology tests covered
Radiology – basic (such as x-rays)	Specific list of black and white x-rays covered
MRI and CT scans, magnetic resonance cholangiopancreatography (MRCP), whole body radioisotope and PET scans	If you choose Connect Network hospitals, MRI and CT scans are limited to Prescribed Minimum Benefits at Connect Network hospitals and other specialised scans are subject to Prescribed Minimum Benefits at State facilities. If you choose Ingwe Network hospitals or Any hospital, all scans are limited to Prescribed Minimum Benefits at State facilities.
Prescribed medication	Subject to a list of medicine, referred to as a prescribed formulary
Over-the-counter medication	Not covered

Health Platform Benefit

Health Platform Benefit

General rule applicable to the Health Platform Benefit: If you choose Connect Network hospitals, you can use any healthcare provider for Health Platform Benefits and the Scheme will pay the benefits up to the maximum rand amount per benefit. You do not need to pre-notify, except for preventive dental care, pap smears, general physical examinations and HIV tests. If you choose Ingwe Network hospitals or Any hospital, Health Platform Benefits are only available from your chosen Primary Care Network provider, except for health assessments, maternity programme benefits and baby immunisations, which are available at any healthcare provider.

What is the benefit?	Who is eligible?	How often?
Preventative care		
Baby immunisations: Covered in private facilities for baby's first year, limited to R3 250 per year. Once the limit is reached, immunisations are available at the Department of Health baby clinics	Children up to age 6	As required by the Department of Health

Flu vaccines	Children between 6 months and 5 years, beneficiaries 60 years and older and high-risk beneficiaries	Once a year
Tetanus diphtheria injection	All beneficiaries	As needed
Early detection tests		
Preventative dental care, such as a consultation with a dentist or dental cleaning at an oral hygienist, covered up to R520	All beneficiaries	Once a year
Pap smear consultation (nurse or GP)	Women 15 and older	Based on type of pap smear (see below)
Pap smear (pathologist): Standard or LBC (Liquid based cytology) Or HPV PCR screening test (If the result indicates high risk, then a follow-up LBC is also covered)	Women 15 and older Women 21 to 65	Once a year Once every 3 years
General physical examination (GP consultation)	Beneficiaries 21 to 29	Once every 5 years
	Beneficiaries 30 to 59	Once every 3 years
	Beneficiaries 60 to 69	Once every 2 years
	Beneficiaries 70 and older	Once a year
Prostate specific antigen (pathologist)	Men 40 to 49	Once every 5 years
	Men 50 to 59	Once every 3 years
	Men 60 to 69	Once every 2 years
	Men 70 and older	Once a year
Health assessment: Blood pressure test, cholesterol and blood sugar tests (finger prick tests), height, weight and waist circumference measurements	All principal members and adult beneficiaries	Once a year
Cholesterol test (pathologist): Only covered if health assessment results indicate a total cholesterol of 6 mmol/L and above	Principal members and adult beneficiaries	Once a year
Blood sugar test (pathologist): Only covered if health assessment results indicate blood sugar levels of 11 mmol/L and above	Principal members and adult beneficiaries	Once a year
HIV test (pathologist)	Beneficiaries 15 and older	Once every 5 years
Maternity programme (subject to registration on the Maternity programme between 8 and 20 weeks of pregnancy)		
Antenatal visits (midwives, GP or gynaecologist)		7 visits
Nurse home visit		1 visit on the day after returning from hospital following childbirth
Urine tests (dipstick)		Included in antenatal visits

Pathology tests	Blood group, full blood count, haemoglobin estimation and Rhesus factor	Women registered on the programme	1 test
	Urinalysis		7 tests
	Urine tests (microscopic exams, antibiotic susceptibility and culture)		As indicated
Scans			2 pregnancy scans
Paediatrician visits		Babies up to 12 months registered on the programme	1 visit in baby's first year
Health line			
24-hour emergency health advice		All beneficiaries	As needed

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