

momentum
health

Member guide
for students
2017

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No 1 healthcare choice for students



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Disclaimer: This document is a focused marketing aid for students based on the Ingwe Any hospital and Ingwe Active Primary Care Network benefit option, with an income of less than R650 per month. It is not intended to replace the full marketing brochure or member brochure; nor is it intended to provide the detail of the benefits offered on this option, but rather an example thereof.

Overview

Benefit Year

Momentum Health's benefit year runs from 1 January to 31 December. This means that if you join from 1 January, you are entitled to the full allocation of benefits as defined in your option. If you join any time after 1 January, for example from 1 February, your benefits will be pro-rated, which means it will be adjusted in line with the number of months left in the year. You may change your option once a year, in January.

Your responsibilities as a Momentum Health member

- Understand the benefits on your option and how to use them.
- Keep Momentum Health up to date of any changes to your personal details.
- Check all accounts from healthcare service providers as well as claim statements from Momentum Health.
- Inform Momentum Health before you or any of your dependants are admitted to hospital to request a pre-authorisation number. Please refer to page 3 for other benefits that require pre-authorisation.
- Keep your membership card in a safe place to ensure that no one else can use it fraudulently and present it to service providers during each visit.
- Read all correspondence from Momentum Health.

Medical expenses covered by Momentum Health

Major Medical Benefits (In-hospital benefits) - The hospital benefit provides cover for hospitalisation, if treatment is clinically appropriate and has been pre-authorised by Momentum Health.

Day-to-day benefits - Day-to-day medical expenses refers to medical treatment received out-of-hospital (or in the casualty ward of a hospital). These benefits generally include services from doctors, dentists, optometrists, radiologists and pathologists, as well as prescribed medicine.

Chronic benefit - The chronic benefit covers certain life-threatening conditions that need ongoing treatment. Chronic benefits are subject to registration and approval.

Important notes

Your Ingwe Active Primary Care Network provider must be the starting point for all your doctors consultations, medical care and medication.

Prescribed Minimum Benefits

Prescribed Minimum Benefits is a list of benefits for which all medical schemes in South Africa have to provide cover, in terms of the Medical Schemes Act 131 of 1998. The Prescribed Minimum Benefit list covers 270 medical conditions, for example meningitis, various cancers and high blood pressure treatment.

Claims for Prescribed Minimum Benefits will be paid from your Major Medical Benefit. If you are admitted to a private hospital for treatment and the hospital limit is reached, you could be transferred to a State hospital once stabilised. Momentum Health will pay for the continued treatment once authorisation is granted. Should you choose to stay in the private facility, you will then be responsible for the shortfall (co-payment) between the rates charged in the private facility and the applicable rates payable at State facilities. This co-payment will not apply in the case of an emergency admission*.

The list of Prescribed Minimum Benefits includes chronic diseases - known as the Chronic Disease List. Specific medication guidelines exist for each chronic condition to ensure quality treatment. You need to obtain authorisation from Momentum Health to access benefits and medication for these conditions.

Important notes

*Emergency medical condition means the sudden and, at the time, unexpected onset of a health condition that requires immediate medical or surgical treatment, where failure to provide medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part, or would place the person's life in serious jeopardy.

Momentum Health is allowed to stipulate Designated Service Providers from which members should obtain Prescribed Minimum Benefits, in order to enjoy full cover for these benefits. Momentum Health's Designated Service Providers for Prescribed Minimum Benefits on the Ingwe Option are the Ingwe Active Primary Care Network providers, Associated Specialists and State facilities. To view the providers in your area log on to www.ingwehealth.co.za, or contact the member call centre on **0860 102 493**. Treatment for Prescribed Minimum Benefits is subject to Momentum Health's clinical protocols.

Major Medical Benefits (In-hospital benefit)

Momentum Health will pay your Major Medical Benefits in line with the Scheme Rules and clinical protocols. We will cover the cost of in-hospital specialists and related providers such as radiologists etc. up to 100% of the Momentum Health Rate. Some service providers charge fees in excess of the Momentum Health Rate. In this case, you will need to pay the difference between the Momentum Health Rate and the fees charged.

Medicine will be covered during your hospital stay, provided that it is part of your hospital treatment. On discharge, a seven-day supply of prescribed medicine will be covered. This medication must form part of the medication that you received during hospitalisation and excludes vitamins and supplements.

Pre-authorisation

You need to phone us on **0860 102 493** for authorisation before making use of your Major Medical Benefits. The hospital will assist in obtaining the pre-authorisation number, but it remains your responsibility as the member to ensure that approval has been granted. It is important to note that certain benefits have limits and you need to be aware of the benefits applicable to your option (see page 17 for the benefit schedule).

- An emergency* hospital admission needs to be authorised within 72 hours of admission
- A planned hospital admission should be authorised 48 hours prior to admission.

Services / treatment that require pre-authorisation

You must obtain pre-authorisation from Momentum Health for:

- hospitalisation
- day clinic admissions
- specialised procedures
- all other Major Medical Benefits.

For some conditions, like cancer, you will need to register on a Health Management Programme.

Process to follow to get a pre-authorisation number

Step 1	Step 2
<p>Phone Momentum Health's pre-authorisation department on 0860 102 493, at least 48 hours before you are admitted to hospital or before going for a procedure.</p> <p>You must provide the following information when obtaining pre-authorisation:</p> <ul style="list-style-type: none">— your membership number— the name and details of the patient— the reason for hospital admission or procedure— the procedure code (CPT), diagnosis code (ICD-10) and tariff code (these details are available from your treating doctor)— the date of admission— the contact details and practice number of the referring doctor— the contact details and practice number of the specialist— the name and practice number of the hospital or day clinic	<p>The pre-authorisation department will confirm your benefits and give you a pre-authorisation number or request more information if required.</p>

What about emergencies*?

If you are admitted directly to hospital as a result of an emergency, a member of your family, a friend or the hospital must notify Momentum Health on the first working day after admission.

What about extended stays?

The hospital must get approval from Momentum Health for an extended length of stay.

What about intensive and high care?

Intensive care and high care is limited to 10 days per admission

Important notes

Please note that if pre-authorisation is not obtained, you may need to pay 30% of all the claims relating to the event, provided authorisation would have been given for the treatment.

Major Medical Benefits (continued)

Internal and external prostheses

Cover for internal and external prostheses is limited to Prescribed Minimum Benefits at State facilities.

Medical and surgical appliances

The benefit limit for medical and surgical appliances is R4 650 per family per year.

MRI / CT scans

These scans will only be covered if they are done for a Prescribed Minimum Benefit condition, and are subject to pre-authorisation (refer to pre-authorisation on page 3 and 4).

Dental surgery or major dental treatment

Implants, orthodontics, orthognathic surgery and other dentistry in-hospital are not covered. Maxillo facial surgery (trauma only) will be covered at State facilities subject to Prescribed Minimum Benefits.

Medical rehabilitation, private nursing, Hospice and step-down facilities

These benefits cover treatment for a limited period of care, and are available to assist with the recovery of the patient usually after a procedure or surgery. To find out whether you qualify for these benefits, please contact Momentum Health on **0860 102 493**. Medical rehabilitation and step-down facilities are covered up to R11 260 per beneficiary per year. Private nursing and Hospice are not covered.

Important notes

Any admission to hospital, day-clinic or rehabilitation centre is subject to pre-authorisation.

Medical emergency evacuation

Netcare 911 is Momentum Health's preferred service provider for medical emergency evacuation in South Africa.

The benefit includes:

- emergency medical response by road or air from the scene of a medical emergency
- transfer by road or air to the closest, most appropriate medical facility
- moving you from one hospital to another

Procedure to follow in case of an emergency evacuation

Call Netcare 911 on **082 911** in life-threatening situations where you need emergency transport to the closest appropriate medical facility in order to receive immediate medical attention.

Depending on the situation, proceed to your nearest emergency medical facility / hospital. Alternatively, call your Ingwe Active Primary Care Network doctor for advice or call Momentum Health's Health Advice Line on **0860 102 493** for advice / assistance.

If you have been taken to hospital by an alternative service provider (i.e. other than Netcare 911) due to an emergency, it is important that the Netcare 911 call centre is advised immediately to ensure your claim is paid.

You will be responsible for the settlement of the alternative service provider's account if you, a family member or friend do not notify Netcare 911 within 48 hours of receiving assistance from an alternative service provider.

Important notes

You will need your Momentum Health membership number to get authorisation for all Netcare 911 services.

Cellphone and In Case of Emergency (I.C.E.)

When involved in an accident, paramedics often struggle to identify a patient, particularly when the patient is unconscious. The identification of a patient is vital for 2 reasons, mainly to notify the patient's loved ones of the accident and secondly to decide which hospital to take the patient to. All you need to do is add an entry to your contact list on your cellphone called I.C.E. Add the name and number of the contact person and emergency services number 082 911. It is simple and makes an emergency situation much easier to deal with.

Day-to-day Benefits

Day-to-day medical expenses refer to medical treatment received out-of-hospital. These services include consultations / visits to doctors and other registered medical practitioners (for example radiologists and pathologists, dentists and specialists).

Day-to-day Benefits are only available at an Ingwe Active Primary Care Network provider (see below), and are subject to certain rules and policies set by us, commonly referred to as protocols. This benefit is also subject to Momentum Health's formulary for medicine and a specific list of day-to-day treatments.

Momentum Health Primary Care Networks

When you join Momentum Health, you choose to make use of a doctor from the Ingwe Active Primary Care Network. Please note you may access any doctor on the Ingwe Active Primary Care Network.

Agreements are in place between Momentum Health and specific providers

> You choose your Momentum Health benefit option

> You choose a doctor on the Ingwe Active Primary Care Network

Benefits available from your network provider

- **Doctor consultations:** Out-of-hospital doctor consultations for diagnosis and treatment of medical conditions. Your GP needs to contact us to obtain authorisation from the 11th visit per beneficiary per year.
- **Medicine:** Your Ingwe Active Primary Care Network doctor needs to prescribe medicine for you from a list of medicine, referred to as a prescribed formulary. A dispensing doctor will provide you with the medicine. A non-dispensing doctor will issue a script for medicine on the formulary and refer you to a contracted pharmacy, from which you need to obtain your medicine. Please contact the Momentum Health call centre on **0860 102 493** for a list of Ingwe Active Primary Care Network contracted pharmacies in your area.
- **Basic blood tests:** Basic blood tests and urine sample tests are covered and will be sent to an Ingwe Active Primary Care Network laboratory for testing. A doctor on the Ingwe Active Primary Care Network must request the test and the test must be within Momentum Health's approved list of tests.
- **Basic x-rays:** Basic x-rays can be taken at an Ingwe Active Primary Care Network facility. Contact the Momentum Health call centre on **0860 102 493** to be referred to a contracted radiologist. Momentum Health will pay this account as long as the request:
 - is from a doctor on the Ingwe Active Primary Care Network, and
 - falls within your Scheme's protocols and approved list of tests.
- **Dentistry:** You can only visit an Ingwe Active Primary Care Network dentist. The dentist will discuss the procedures with you, and submit the claim to Momentum Health for payment. If the procedures are not covered by an Ingwe Active Primary Care Network, you will need to pay the account.

Basic dentistry, such as extractions and fillings, is covered, subject to our protocols and approved tariff codes. The consultation is covered once a year per beneficiary. Pre-authorisation is required from us for more than 4 fillings and more than 4 extractions. Please phone the member call centre for authorisation on **0860 102 493**.

Specialised dentistry, such as bridges and crowns, is not covered on your benefit option.
- **Optometry:** You can only visit an Ingwe Active Primary Care Network optometrist. Benefits will only be granted if qualifying criteria are met.

The procedure is as follows:

1. Have your eyes tested. Benefits will only be granted if your refraction measurement is more than 0.5.
2. If you need glasses, the optometrist will show you which frames to choose from. The optometrist will then submit the claim to Momentum Health.
3. If you do not need glasses, the optometrist will only submit the claim for the consultation.

Please note that only 1 eye test and 1 pair of clear standard or bi-focal lenses with standard frame, per beneficiary every 2 years are allowed. Tinted lenses and contact lenses are not covered on the Ingwe Option.

Important notes

Day-to-day benefits are only available when you use the services of an Ingwe Active Primary Care Network provider.

Out-of-network, casualty and after-hours visits

The Ingwe Option covers 1 out-of-network GP, after-hours GP or casualty consultation per beneficiary per year at 100% of the Momentum Health Rate, with a maximum of 2 visits per family per year. You need to pay R100 per visit from your pocket.

You need to contact the member call centre on **0860 102 493** within 72 hours to notify us that you have used this benefit, otherwise an additional co-payment of 30% will apply and Momentum Health will be responsible for 70% of the Momentum Health Rate.

Important notes

The emergency / casualty units at the hospitals are private facilities (not part of the hospital) and may request you to pay for the service and then claim back from Momentum Health. For out-of-network doctors and emergency consultations, authorisations are valid for 1 day only.

Specialists / Physiotherapy Benefit

This option covers 2 visits per family per year, covered at 100% of the Momentum Health Rate, with a R100 co-payment per visit. Subject to referral by your Ingwe Active Primary Care Network doctor and pre-authorisation.

Your Ingwe Active Primary Care Network doctor will refer you to a specialist and give you a referral letter. Contact the member call centre on **0860 102 493** for authorisation, and to obtain a list of specialists in your area. Use the referral letter to make an appointment with the specialist. Claims must be submitted to Momentum Health for payment.

Important notes

You must obtain authorisation before your specialist appointment, and must be referred to the specialist by an Ingwe Active Primary Care Network provider. Authorisations are given on receipt of a referral letter from an Ingwe Active Primary Care Network provider and are only valid for 3 days.

Please contact Momentum Health on **0860 102 493** for authorisation for specialist and physiotherapy treatment.

Day-to-day Benefits (continued)

Which doctors, dentists and optometrists may I visit?

If you wish to change your doctor

You have access to any doctor on the Ingwe Active Primary Care Network. Visit our website on www.ingwehealth.co.za for an updated list of service / healthcare providers.

If you wish to change your option

You may only change your option in January of each year.

We pay for your chest x-ray for your study visa

Please note that your membership needs to be active in order to qualify for this benefit. You do not need to consult a doctor to get a referral, and we pay for tariff code **30100 only**.

What you need to do:

- Visit any radiologist in South Africa
- Visit our website to download the radiology request form and take it to the radiologist together with the Department of Home Affairs form

If you have any queries please email us at studenthealth@momentum.co.za or contact us on **0860 102 493**.



Chronic Benefits

You have cover for the Prescribed Minimum Benefit chronic conditions, known as the 26 Chronic Disease List, at your Ingwe Active Primary Care Network provider. Chronic medicine is subject to a list of medicine, referred to as a Network entry-level formulary.

Please follow these steps to register and get approval for Chronic Benefits:

Step 1	Step 2	Step 3
Make an appointment with your Ingwe Active Primary Care Network doctor	The doctor will evaluate your chronic medicine requirements and assist you with obtaining your chronic registration	Confirm with your doctor where your medication can be collected monthly

Important notes

Medicine that is not included in the Network's entry-level formulary will not be paid by us.

Membership

Payment of contributions

Contributions are payable in advance and must be paid to Momentum Health by the first of each month unless you are an international student and your academic institution requires payment upfront for the duration of your studies.

Debit orders are applicable to local students only and will be deducted on the 1st working day of every month.

Non-payment of contributions

Momentum Health will notify you in writing if your contributions have not been paid, and you need to let us know how the outstanding amount will be settled. If no payment is received, your membership and benefits will be suspended. If no payment is received within 14 days following the notice of suspension, your membership will be cancelled.

Adjustment of contributions

Your contribution will change when you add or remove dependants, with the annual Scheme contribution increase or if you change your option.

Important notes

Changes to your benefit option are allowed once a year, in January.

Membership (continued)

Membership number

Your membership number is shown on your membership card. You need to quote this number in all correspondence or claims that you or the healthcare providers send to us for processing and payment.

Membership card

If you need a membership card, please visit one of our on-site consultants, request a card on www.ingwehealth.co.za, call us on **0860 102 493**, or send us your membership number and personal postal address via email at mhmembership@momentum.co.za.

Contact us to change your address, contact numbers or email address:

Phone: **0860 102 493**

Email: **member@momentumhealth.co.za**

Fax: **0860 111 391**

Termination of membership / Refunds

Your membership will be terminated:

- If you do not pay your contributions or amounts that you owe to us
- If Momentum Health receives notice of cancellation of group participation from your sponsor or institution
- If Momentum Health receives 1 calendar month's written notice of cancellation from you (in the case of individual members)
- If Momentum Health has evidence of abuse of the benefits offered to you as a member e.g. fraud, submission of false claims, misrepresentation or non-disclosure of medical information
- In the event of your death.

Refunds

In the event of termination of your studies or cancellation of your study permit, Momentum Health needs the following documents to process any applicable refunds:

- A letter from you requesting the refund, including the reason for the refund, plus
- A letter from your academic institution to confirm the termination or cancellation of your registration; or
- Proof of cancellation of your study permit.

Visit our website on www.ingwehealth.co.za for additional requirements to transfer the funds into your bank account.

Commencement of benefits

Your benefits start on the 1st of the month as indicated on your confirmation letter and not when you arrive in South Africa. There may be a waiting period before you and / or a dependant will be covered for benefits.

In general, depending on your membership / registration as a dependant on a previous medical scheme, the waiting periods that may be applied to local students are:

- 3 months for all medical services, or
- 12 months for pre-existing medical conditions.

Waiting periods do not apply to international student principal members, except female applicants who are pregnant at the time of joining. These members will have a 12-month exclusion on pregnancy and related conditions.

Complaints Procedure

Momentum Health is committed to ensuring that the interests of our Members are protected at all times. This includes providing appropriate and adequate systems and processes to make sure we settle your claims timeously and provide a prompt response to any queries, complaints and disputes you may have.

As the first point of call for a query, you may contact us through our call centre on **0860 11 78 59** or mail us at **member@momentumhealth.co.za**. Should your query not be resolved adequately, you may request that your query be escalated to the respective manager for intervention or resolution.

If you are still not satisfied with the intervention or resolution, you may lodge a formal complaint or dispute, either in writing or by phoning our dedicated toll-free complaints number on **0800 20 40 70** (available from 08:00 to 16:30, Mondays to Fridays), or you may request our call centre or correspondence consultant to provide you with the details of the process to be followed in order to have your query, complaint or dispute reviewed by Momentum Health.

It is essential that you follow the complaints process as outlined above to ensure that your query is timeously and efficiently resolved by Momentum Health.

An aggrieved member does however have the right to lodge a complaint against a decision of Momentum Health, such complaint can be lodged with the Council for Medical Schemes (CMS). The CMS governs the medical schemes industry and therefore your complaint should be related to your medical aid. Any beneficiary who is aggrieved with the conduct of a medical scheme can submit a complaint.

It is important to note that you should always first seek to resolve your complaints through the complaints mechanisms in place at Momentum Health as outlined above, before approaching the CMS for assistance. The CMS protects and informs members and the public about their medical scheme rights and obligations, ensuring complaints raised are handled appropriately. You can send your complaint in writing to the CMS via email at **complaints@medicalschemes.com** or via fax on **012 431 0608**. The CMS can also be reached telephonically on **0861 123 267** or you can visit **www.medicalschemes.com** for more information and for the necessary forms that will need to be completed. The CMS should send you written acknowledgement of your complaint within 3 working days of its receipt, providing the reference number and contact details of the person who will be handling your complaint. In terms of Section 47 of the Medical Schemes Act 131 of 1998, a written complaint received in relation to any matter provided for in this Act will be referred to the medical scheme. The medical scheme is obliged to respond to CMS in writing within 30 days.

Claims

The following claims have to be submitted to us:

- In-hospital claims
- Authorised casualty / emergency consultations
- Specialist claims.

Most suppliers of medical services and medication have an electronic link to Momentum Health, which allows claims to be submitted directly by the supplier to Momentum Health. In such a case, you are entitled to receive a copy of the account from the service provider, which you should use together with your statements to check the processing of these claims.

It is still your responsibility as the member to check if your claims are submitted within 4 months of treatment. If we do not receive a claim by the last day of the 4th month following the month in which the service was rendered, the claim will be stale and you will need to pay any outstanding amounts to the provider.

Information needed on an account / claim

Before you submit a claim, please check that the following information is on the account:

- your membership number
- the principal member's surname, initials and first name
- the patient's surname, initials and first name
- the treatment date
- the amount charged
- the ICD-10 code, tariff code and / or nappi code
- the service provider's name and practice number
- proof of payment if you have paid the claim.

If you have already paid the account and are requesting a refund, the claim has to be accompanied by:

- a copy of the receipt
- your bank account details
- a copy of your passport or identity document.

Send the claim to:

Email: **claims@momentumhealth.co.za**

Fax: **031 580 0480**

Post: **Momentum Health, Claims Department, PO Box 2338, Durban 4000**

Direct payment into your bank account for claims refunds is most convenient.

Please ensure that we have your correct banking details - contact **0860 102 493** to update your information.

Important notes

If your claim does not include all the necessary information, it may be rejected by us and will therefore cause a delay in the payment of your claim.

Outstanding claims following membership termination

Claims for expenses incurred during your membership of Momentum Health will be accepted up to 4 months after treatment as long as you received the service / treatment on or before the date your membership ended, subject to all contributions being up to date and benefits being available.

Claiming for third party injuries and motor vehicle accidents

Third party injuries are where a third party was responsible for the injury and therefore may be liable for medical expenses.

Any amount recovered from a third party or from the Road Accident Fund (in the case of motor vehicle accidents) for hospital and medical expenses must be refunded to Momentum Health, if these expenses were paid on your behalf by us.

Please remember to:

- Report the incident to the police and obtain a case number
- Phone our member call centre on **0860 102 493** for authorisation.
 - Information needed when phoning us:
 - your membership number
 - the principal member's surname, initials and first name
 - the full name(s) of the person(s) involved in the accident
 - the date of the accident/incident
 - the case number for the police report.
- In the case of a motor vehicle accident, you will be asked to sign an undertaking whether or not you will be claiming from the Road Accident Fund
- If you acknowledge that you will be claiming from the Road Accident Fund, details of this are sent to our appointed Road Accident Fund attorney
- If you have your own attorney, then our attorney would liaise with your appointed attorney
- If you need an attorney, you can use our attorney

Your attorney will liaise with the Road Accident Fund and settlement will be made to your attorney, who will in turn liaise with us to pay the refund of any medical expenses that we covered.

Health Management Programmes

These programmes are there to help you in the management of certain medical conditions and to ensure that you understand and actively participate in the management of your condition, together with your Ingwe Active Primary Care Network doctor. Some of the programmes available include cholesterol management, diabetes management, hypertension management. Contact the member call centre on **0860 102 493** to confirm the benefits available on your benefit option.

Maternity management programme

You need to phone the member call centre between the 8th and 20th week of pregnancy to ensure that you enjoy all the benefits of the Maternity management programme. Please remember to contact us on **0860 102 493** to pre-authorise for your confinement within 30 days of your delivery date. If your admission date changes, you have 48 hours from the date of admission to notify us. If you would like to make use of the doula (labour coach) benefit, it must be authorised as part of your maternity registration. The doula benefit is subject to the use of an Associated gynaecologist and is available to members wanting to have a natural delivery. The Doula must be a DOSA or WOMBS accredited Doula. Please also remember to contact the member call centre within 30 days of birth to register your baby on Momentum Health.

Important notes

We encourage members to join the programme as soon as possible to ensure optimal management. HIV is a chronic condition that can be managed.

Should you not conform to the programme protocols (conditions of plan), or choose not to join the programme, we do not have to pay for further benefits for this condition. Any related treatment thereafter will thus only be covered at State facilities, in accordance with the Prescribed Minimum Benefits.



Ingwe Option Benefit Schedule

Contributions
per month for
2017*

Member	R335
Adult	R335
Child	R210

* Based on the Ingwe Any hospital and Ingwe Active Primary Care Network benefit option, with an income of less than R650 per month.

Major Medical Benefit

General rule

You need to phone for authorisation before making use of your Major Medical Benefits, such as when you are admitted to hospital. For some conditions, like cancer, you will need to register on a Health Management Programme.

Momentum Health 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).

Hospital provider	Any private hospital
Overall limit	R1 190 000 per family per year
Consultations and visits	Associated specialists covered in full Non-Associated specialists covered up to 100% of the Momentum Health Rate
High and intensive care	10 days per admission
Renal dialysis	Limited to Prescribed Minimum Benefits at State facilities
Oncology	Limited to Prescribed Minimum Benefits at State facilities
Organ transplants	Limited to Prescribed Minimum Benefits at State facilities
In-hospital dentistry	Not covered. Maxillo-facial trauma covered at State facilities, subject to Prescribed Minimum Benefits
Maternity confinements (limit for hospital account only). Caesarean sections: Only emergency caesareans are covered	R25 800 for uncomplicated delivery R37 800 for complicated delivery
Please note that a 12-month pregnancy exclusion will apply to	female members who are pregnant when joining the Scheme
Neonatal intensive care	R54 200 per confinement
Medical and surgical appliances in-hospital (support stockings, knee and back braces etc.)	R4 650 per family
Prosthesis – internal (including knee and hip replacements, permanent pacemakers, implantable devices, etc.)	Limited to Prescribed Minimum Benefits at State facilities
Prosthesis – external (artificial arms or legs etc.)	Limited to Prescribed Minimum Benefits at State facilities
Mental health - including psychiatry and psychology - drug and alcohol rehabilitation)	Limited to Prescribed Minimum Benefits at State facilities 21-day sub-limit applies to drug and alcohol rehabilitation
MRI and CT Scans	Limited to Prescribed Minimum Benefits
Take-home medicine	7 days' supply
Medical rehabilitation and step-down facilities	R11 260 per beneficiary
Private nursing and Hospice	Not covered
Immune deficiency related to HIV	Subject to registration on the HIV/Aids Management Programme at preferred provider
Anti-retroviral treatment HIV related admissions	R30 200 per family R32 200 per family
Specialised Procedures (refer to page 19 for a list of procedures covered)	Certain Specialised Procedures/Treatment covered, when clinically appropriate, in- or out-of-hospital

Ingwe Option Benefit Schedule

Chronic Benefit

General rule

Benefits are only available at your Ingwe Active Primary Care Network provider, and are subject to a list of medicines referred to as the Network entry-level formulary.

Provider	Ingwe Active Primary Care Network
Cover	Cover for 26 conditions, according to the Chronic Disease List as contained in the Prescribed Minimum Benefits (see page 29 for a list of conditions covered)

Day-to-day Benefit

General rule

Benefits are only available at your Ingwe Active Primary Care Network provider, and are subject to the rules and provisions set by the the network, commonly referred to as protocols. This benefit is also subject to the network's list of applicable tariff codes.

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	Ingwe Active Primary Care Network
Acupuncture, Homeopathy, Naturopathy, Herbolgy, Audiology, Occupational and Speech therapy, Chiropractors, Dieticians, Biokinetics, Orthoptists, Osteopathy, Audiometry, Chiropody and Podiatry	Limited to Prescribed Minimum Benefits at State facilities
Mental health (including 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 call us for pre-authorisation if you need to 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 Ingwe Active, Primary Care Network GP. However, please note all visits from the 11th visit onwards must be pre-authorised
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). Maximum of 2 visits per family per year. R100 co-payment applies per visit
Specialists	2 visits per family per year. Covered at 100% of the Momentum Health Rate with a R100 co-payment per visit. Subject to referral by your Ingwe Active Primary Care Network provider, and pre-authorisation
Physiotherapy	Included in the specialist limit above
Optical and optometry (contact lenses and refractive eye surgery not covered)	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 blood sugar or cholesterol tests)	Specific list of pathology tests covered
Radiology - basic (such as x-rays)	Specific list of black and white x-rays covered. We also cover the radiology report and chest x-ray for your study visa
MRI and CT scans	Limited to Prescribed Minimum Benefits at State facilities
Prescribed medication	Subject to a list of medicines, referred to as a prescribed formulary
Over-the-counter medication	Not covered

Chronic Conditions

26 conditions are covered according to the Chronic Disease List in the Prescribed Minimum Benefits.

- **Cardiovascular**
Cardiac dysrhythmias, Cardiac failure, Cardiomyopathy, Coronary artery disease, Hyperlipidaemia, Hypertension
- **Dermatology/Skin disorder**
Systemic lupus erythematosus
- **Endocrine**
Addison's disease, Diabetes insipidus, Diabetes mellitus Type 1, Diabetes mellitus Type 2, Hypothyroidism
- **Gastro-intestinal**
Crohn's disease (excluding biologicals such as Revellex*), Ulcerative colitis
- **Haematology**
Haemophilia
- * These are examples of medication not covered
- **Musculo-skeletal**
Rheumatoid arthritis (excluding biologicals such as Revellex and Enbrel*)
- **Neurology**
Multiple sclerosis (excluding biologicals such as Avonex*, subject to protocols), Epilepsy, Parkinson's disease
- **Ophthalmology**
Glaucoma
- **Psychiatric**
Schizophrenia, Bipolar mood disorder
- **Renal**
Chronic renal disease
- **Respiratory**
Asthma, Chronic obstructive pulmonary disease, Bronchiectasis

Specialised Procedures

The following list is a guideline of the procedures/treatment covered from the Major Medical Benefit, irrespective of whether the procedure is performed in- or out-of-hospital. Pre-authorisation is required, regardless of where the procedure is performed. It is important to note that this is not the complete list of all the procedures that we cover. Should you need clarity on whether a procedure is covered, please contact us on **0860 102 493** to confirm.

- **ENT**
Grommets, Myringotomy, Tonsillectomy
- **General Surgery**
Drainage of subcutaneous abscess, Biopsy of breast lump, Open hernia repairs, Lymph node biopsy, Removal of extensive skin lesions
- **Gynaecology**
Dilatation and curettage, Incision and drainage of Bartholin's cyst, Marsupialisation of Bartholin's cyst, Tubal Ligation
- **Obstetrics**
Childbirth in non-hospital
- **Oncology** (subject to Prescribed Minimum Benefits at State facilities)
Chemotherapy, Radiotherapy
- **Orthopaedic**
Carpal tunnel release, Ganglion surgery
- **Renal** (subject to Prescribed Minimum Benefits at State facilities)
Dialysis
- **Urology**
Prostate biopsy

Please note that the cost of an anaesthetist (if any) for out-patient procedures is only covered if approved by Momentum Health.

Glossary of Terms contained in this brochure

1. **Emergency medical condition:** Emergency medical condition means the sudden and, at the time, unexpected onset of a health condition that requires immediate medical or surgical treatment, where failure to provide medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part, or would place the person's life in serious jeopardy
2. **Prescribed Minimum Benefits** is a list of benefits for which all medical schemes in South Africa have to provide cover in terms of the Medical Schemes Act 131 of 1998. The Scheme is allowed to stipulate medication formularies, protocols and Designated Service Providers from which all members should obtain Prescribed Minimum Benefits, in order for members to enjoy full cover for these benefits. Momentum Health's Designated Service Providers for Prescribed Minimum Benefits on the Ingwe Option are the Ingwe Active Primary Care Network providers, Associated Specialists and State facilities. Treatment for Prescribed Minimum Benefits is subject to authorisation and the Scheme's clinical protocols (see definition below).
3. **Momentum Health Rate:** Every year Momentum Health negotiates with medical care providers like GPs, Specialists and Hospitals to determine the amount the Scheme will pay per treatment. This is called the Momentum Health Rate. On the Ingwe Option, the Scheme pays 100% of the Momentum Health Rate, which means the Scheme will pay up to the amount agreed for the treatment. Where doctors charge more than the agreed upon rate for the treatment, you may need to pay the difference.
4. **Chronic Disease List** is a list of 26 chronic conditions for which all medical schemes in South Africa have to provide cover in terms of the Medical Schemes Act 131 of 1998.
5. **Provider definitions:**
 - a **Network providers:** Momentum Health has agreements in place with certain providers of healthcare services. You need to obtain your Chronic and Day-to-day Benefits from an Ingwe Active Primary Care Network provider
 - b **State:** State hospitals are public facilities which you need to use for some of your benefits, such as oncology.
 - c **Associated specialists:** Momentum Health has negotiated agreements with Associated Specialists. In-hospital accounts for Associated Specialists are covered in full.
6. **Formularies:** A formulary is a list of medicine covered on your option, from which a doctor can prescribe medicine for your chronic condition.
7. **Clinical protocol:** Momentum Health uses evidence-based treatment principles, called clinical protocols, to determine and manage benefits for specific conditions.
8. **Clinically appropriate:** Treatment that is in line with the clinical protocols (see definition above) for your condition.
9. **Out-patient facility:** A treatment centre where medical procedures can be done without the patient being admitted to hospital.
10. **Pre-authorisation:** Pre-authorisation is when you call the Scheme to let us know you are about to receive medical treatment. The Scheme will confirm whether you are covered for the expected treatment, and at what rate your option covers such treatment. You will receive a pre-authorisation number which you need to provide to the doctor.
11. **Sub-limit:** A sub-limit is a limit that applies in addition to the overall limit on a specific benefit. For example, the Ingwe Option provides an overall annual limit on Major Medical Benefits, within which a sub-limit for maternity confinements applies.
12. **Out-of-hospital procedures:** These are procedures that are not performed in a hospital. For example, they could be performed in your doctor's rooms or out-patient facility.

Exclusions

Prescribed Minimum Benefits

Notwithstanding the limitations and exclusions set out below, beneficiaries shall be entitled to the Prescribed Minimum Benefits.

Benefits Excluded

General exclusions mentioned in this paragraph are not affected by any specific exclusions. Unless otherwise decided by the Scheme (and with the express exception of medicine or treatment approved and authorised in terms of any health management programme contracted to the Scheme), expenses incurred in connection with any of the following will not be paid by the Scheme:

1. All costs incurred during waiting periods and for conditions which existed at the date of application for membership of the Scheme but were not disclosed;
2. All costs that exceed the annual maximum allowed for the particular category as set out in Annexure B of the Scheme Rules, for the benefit to which the beneficiary is entitled in terms of the rules;
3. Injuries or conditions sustained during willful participation in a riot, civil commotion, war, invasion, terrorist activity or rebellion;
4. Professional speed contests or professional speed trials (professional defined as where the beneficiary's main form of income is derived from partaking in these contests);
5. Costs incurred as a result of failure to carry out the instructions of a medical doctor or dentist;
6. Health care provider not registered with the recognised professional body constituted in terms of an Act of parliament;
7. Holidays for recuperative purposes, whether deemed medically necessary or not, including headache and stress relief clinics;
8. All costs for treatment if the efficacy and safety of such treatment cannot be proved;
9. All costs for operations, medicine, treatments and procedures for cosmetic purposes or for personal reasons and not directly caused by or related to illness, accident or disease. This includes the costs of treatment or surgery related to transsexual procedures;
10. Obesity;
11. Costs for attempted suicide that exceed the Prescribed Minimum Benefits limits;
12. Breast reduction and breast augmentation, gynaecomastia, otoplasty and blepharoplasty;
13. Medication not registered by the Medicine Control Council;
14. Costs for services rendered by any institution, nursing home or similar institution not registered in terms of any law (except a State facility/hospital);
15. Gum guards and gold used in dentures;
16. Frail care;
17. Travelling expenses, excluding benefits covered by Emergency rescue and International cover;
18. All costs, which in the opinion of the Medical Assessor are not medically necessary or appropriate to meet the health care needs of the patient;
19. Appointments which a beneficiary fails to keep;
20. Circumcision, unless clinically indicated, and any contraceptive measures or devices;
21. Reversal of Vasectomies or tubal ligation (sterilisation);
22. Injuries resulting from narcotism or alcohol abuse except for the Prescribed Minimum Benefits;
23. Infertility treatment that is included as Prescribed Minimum Benefits will be covered in State facilities;
24. The cost of injury and any other related costs as a result of scuba diving to depths below 40 metres and cave diving.



complementary
products for
students
2017

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You can choose to make use of additional products available from Momentum Group (Momentum), a division of MMI Group Limited, to seamlessly enhance your medical aid. These voluntary complementary products range from a world-class wellness and rewards programme, Multiply, to Hello Doctor.

Please note that Momentum is not a medical scheme, and is a separate entity to Momentum Health.

You can be a member of Momentum Health without taking any of the complementary products that Momentum offers.



5 FREE benefits just for you

1 Multiply Starter

With Momentum's wellness and rewards programme, you can get healthier, more active and financially well. Plus enjoy great savings from more than 60 partners.

2 Hello Doctor

Enjoy instant access to qualified medical doctors via your mobile phone.

3 International Travel

Enjoy a R5 million international travel benefit for medical emergencies when you leave South Africa for a maximum period of 90 consecutive days.

4 Repatriation of mortal remains

We will ensure that your loved ones are not faced with a major financial burden should you pass away while you are in South Africa for your studies. A maximum benefit of R50 000 per repatriation applies.

5 Mobi App

The mobi app gives you easy access to healthcare and membership information on your cellphone when you are not sure what to do.



Access to **3 MORE** benefits just for you

1 HealthSaver

The easy way to put money away to cover additional healthcare expenses when you need it.

2 Multiply Provider and Premier

Pay an additional monthly contribution to unlock more benefits and savings.

3 GapCover

Why worry about potential shortfalls for in-hospital procedures and other healthcare related expenses not covered by your option when you can enjoy Momentum GapCover?

FREE Multiply Starter

Multiply your wellness

It's time to live a life more multiplied. We'll help you give more: to your loved ones, to yourself and to doing the things you love. To us, this is the true state of well-being.

Get moving

Have more fun

Live well, eat well

Enjoy new places

Enjoy a healthier life

Shop for gadgets

Step 1 Register online

- Go to www.momentum.co.za.
- Click on the register tab.
- Create an account as a client.
- Complete your online profile and choose a username and password.
- You will get an activation email at the address supplied.
- Keep your username and password in a safe place.
- Click on the Multiply tab to access our wellness tools.

Step 2 Start shopping

- Login to www.momentum.co.za.
- Click on Multiply.
- Click on the Online Shop.
- Start shopping or get vouchers for Edgars, Jet, takealot.com, The Pro Shop, Cycle Lab and more.

Step 3 Get calling for your deals at the travel desk

- Call 0861 100 155 or email traveldeskmultiplier.co.za
- Quote your membership number
- Get your quote



Get in touch

SMS "Join" to 40717 or to find out more, call **0861 88 66 00**.

The discounts depend on your Multiply status. Terms and conditions apply to all Multiply benefits.





**+ PLUS over
60 more partners**

		+	+	+
		Multiply Starter	Multiply Provider	Multiply Premier
Groceries at Pick n Pay			Multiply your Smart Shopper points up to 4x	Multiply your Smart Shopper points up to 10x
Clothing and back-to-school with Edgars, CNA, Jet and other Edcon stores			Up to 25% off gift cards	Up to 40% off gift cards
Fitness with Virgin Active and Planet Fitness		10% off monthly membership fees	10% off monthly membership fees	Up to 25% off monthly membership fees
Health and nutrition from Dis-Chem		Up to 4.5% back in Dis-Chem points	Up to 10% back in Dis-Chem points	Up to 25% back in Dis-Chem points
Flights with Mango		7.5% off flights	Up to 15% off flights	Up to 50% off flights
Movies with Nu Metro		Movies for as little as R40 at Nu Metro Cinemas	Movies for as little as R27 at Nu Metro Cinemas	Movies for as little as R22 at Nu Metro Cinemas

How much?

	+	+	+
	Multiply Starter	Multiply Provider	Multiply Premier
Single member	Free	R65	R195
Family of 2	Free	R85	R235
Family of 3 or more	Free		R265
Per adult dependant	Free	R10	
Children under 19	Free	Free	

FREE Hello Doctor



Access to a doctor, anytime, anywhere!

You get free access to Hello Doctor, a mobile-phone-based service that gives you access to doctors and counsellors, anytime, anywhere. Get expert health advice from qualified medical doctors and counsellors at absolutely no cost to you!

When you join Momentum Health, Hello Doctor will email/SMS you your username and password. The next step is to download the app and log in and access the various easy-to-use health services. Hello Doctor doesn't charge you any service fees. All you need is data or a WiFi connection to use the app. Hello Doctor will even call you, so you don't have to use your airtime. Simply dial *120*1019# and follow the prompts to connect with a doctor or counsellor through any mobile phone.

Hello Doctor offers you:

- **Doctor / Counsellor access:** Speak to a doctor or counsellor over the phone, or chat via text message. All consultations are completely private and confidential.
- **Health education:** Get free daily advice with Hello Doctor's Health Tips and health coaching.
- **Symptom checker:** Not sure what's wrong? Plug in your symptoms and Hello Doctor will give you a list of possible conditions. You can then discuss your results directly with a doctor.

No waiting rooms, no queues, no problems. Go on, download the app, log in with the details Hello Doctor sends you, and enjoy instant health advice at the touch of a button.



FREE Mobi App

Always in touch

Momentum's mobi app lets you use your phone's GPS to find healthcare providers nearest to you. You can also check and enquire about your benefits at a glance, as well as submit and track your claims.



Download it from the Play Store for Android phones, or App Store. Blackberry users can access our mobisite at momentumhealth.mobi.



FREE International Travel

Peace of mind when you travel outside of SA

Your international travel benefit begins from the time you leave South Africa and continues for a maximum of 90 consecutive days, as long as your membership is active. The benefit covers emergency medical expenses incurred as a result of an unexpected illness or injury during an international journey, and is underwritten by Hollard. The period of cover is effective for 90 days, from when you pass through passport control leaving South Africa.

Email travelinsurance@hollardti.co.za or contact **(011) 351 4531** if you need a travel certificate.



Your benefit

- R5 million emergency medical cover (including repatriation, evacuation and transportation)
- R300 000 terrorism extension cover
- A R1 300 co-payment (levy) applies per emergency claim

Remember to get authorisation for emergency medical expenses incurred above R5 000.

For assistance, contact **0861 127 332**, or email assist@europassistance.co.za.

For more information, visit www.ingwehealth.co.za and click on "Special benefits".

Certain terms and conditions apply to this benefit.

FREE Repatriation of mortal remains

Unburden your loved ones when it matters most

Should you pass away in South Africa, a case manager at Thom Kight & Co will make all the arrangements with your family or loved ones to repatriate your mortal remains.

Repatriation is arranged when the deceased's body is more than 100km from the place of residence, within South Africa and neighbouring countries, including international repatriations. The maximum benefit of **R50 000** applies per repatriation and excludes funeral expenses.

For more information, contact **0860 102 493** or visit www.ingwehealth.co.za and click on "Special benefits".

Certain terms and conditions apply to this benefit.



HealthSaver

Save for additional healthcare expenses

The HealthSaver account helps you to save and provide for additional healthcare expenses you might need to access. You may use positive balances in your account for any healthcare related expenses such as over the counter medication from a pharmacy.

- + You can choose to:
 - have your HealthSaver account activated, without having to pay contributions into it or
 - pay a lump sum or monthly amount that suits your needs (minimum of R100 per month).
- Any positive balances will be paid out to you when you leave the Scheme.

GapCover

Avoid surprises

Why worry about potential shortfalls for in-hospital procedures and other healthcare related expenses not covered by your option when you can enjoy Momentum GapCover?

Visit www.ingwehealth.co.za and click on "Special benefits" for more information.

Benefits +	How much? +
Shortfall benefit	R77 per month
Accidental death and disability benefit	Covers the shortfall between what a specialist medical practitioner charges in-hospital and for certain out-of-hospital procedures and what the medical scheme pays, up to twice the amount paid by the medical scheme and a maximum of the shortfall amount
Lump sum hospitalisation benefit	Benefit of R25 000 for accidental death or accidental permanent and total disability. Subject to one claim per insured per lifetime
Dental benefit	Lump sum benefit of R25 000 for long-term hospitalisation of more than 30 consecutive days. Excluding newborns. Subject to one claim per insured per policy year
Casualty benefit	Benefit of R2 000 per tooth repaired as a result of accidental injury to the mouth. Subject to a maximum of 5 teeth (or R10 000) per policy per year
Waiting periods	Covers the facility fee, consultations, medications, radiology and pathology associated with admissions to the emergency room, at a registered hospital casualty facility due to an accident. Limited to one casualty visit and up to R5 000 per policy per calendar year. The benefit will be reduced by any amount paid by the medical scheme from the hospital benefit if the insured person is admitted into hospital following the treatment in the casualty facility
	The following waiting periods are applicable: 3-month waiting period for all claims, 9-month waiting period for certain procedures and 12-month waiting period for claims relating to pregnancy, birth and cancer. Visit www.ingwehealth.co.za for more information.

Contact details

Customer Care	0860 102 493
Hospital Pre-Authorisation	0860 102 493
Emergency Evacuation	082 911
Health Advice Line	0860 102 493
Email Enquiries	studenthealth@momentum.co.za
Email Claims	claims@momentumhealth.co.za
Website	www.ingwehealth.co.za
Mobisite	momentumhealth.mobi
Repatriation of Mortal Remains	0860 102 493
Europ Assistance SA:	
International Travel	0861 127 332
E-mail for certificate	travelinsurance@hollandti.co.za
Fraud Hotline	0860 006 672

If you suspect that fraud or abuse has occurred, or you have become aware of potential fraud or abuse that may affect Momentum Health, please call the toll-free Fraud Hotline number anonymously on **0860 006 672**. This service is managed by a third party and the caller's identity is fully protected

Regional contact details

Gauteng

Johannesburg
101 De Korte Street
Braamfontein
Johannesburg
+27 11 381 2000

Centurion
268 West Avenue
Centurion
Pretoria
+27 12 671 8749

269 West Avenue
Meersig Building
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Centurion
Pretoria
+27 12 671 8749

Loftus Versfeld Stadium
1st Floor Northern
Pavilion
Kirkness Street
Arcadia
+27 12 341 1405 / 6

Kwa-Zulu Natal

Umhlanga
1-3 Canegate Road
La Lucia Ridge
Umhlanga
+27 31 573 4000

Western Cape

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2nd Floor Birkdale 2
River Park Offices
Liesbeek Parkway
Mowbray
+27 87 351 2065

Eastern Cape

Port Elizabeth
Block B, Ground Floor
Metropolitan
Office Park 279
Cape Road
Newton Park
Port Elizabeth
Tel: +27 41 363 0455

Free State

Bloemfontein
9 Office Park
Cnr. President Reitz &
3rd Ave
+27 51 448 4632

International contact details

National Call Centre Number: +27 31 573 4041

Momentum Health



Member call centre 0860 102 493
Emergency evacuation 082 911
Fraud hotline 0860 006 672



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Council for Medical Schemes



Customer Care Centre 0861 123 267



information@medicalschemes.com



www.medicalschemes.com

