



MediPlus

2012 Summary of Benefits

Hospital Authorisation

Before you or any of your registered dependants are admitted to hospital, it is important that you “inform” the Scheme. This is called hospital pre-authorisation and it can be initiated by the member, medical practitioner or the hospital at least 72 hours before an admission or the first working day following an emergency admission.

Pre-authorisation

Pre-authorisation is a process whereby a member applies for approval on a procedure or treatment which requires hospital admission from the Scheme prior to admission. The pre-authorisation process ensures added value for both the member and the Scheme by assessing the medical necessity and appropriateness of the procedure prior to hospital admission according to clinical protocols and guidelines.

Medshield’s Hospital Benefit Management service is provided for by Medical Services Organisation (MSO).

Important information required for authorisation

- Membership number
- Patient’s name and date of birth
- Contact details
- Appropriate ICD-10 Code and Tariff Codes
- Date of admission and procedure
- Name of the attending doctor and his/her practice and telephone number
- Name of the hospital, their practice and telephone number

Call MSO on **086 000 2121** or send an email to preauth@mso.co.za or alternatively send a fax to **086 636 9067** (make sure that the above mentioned information is reflected on your fax/email).

Retrospective Authorisation

In the case of an emergency admission retrospective authorisation must be obtained within 72 hours after the hospital admission.

Important to Note

- Discuss the procedure with your doctor prior to admission.
- Ask the advantages and disadvantages of undergoing such a procedure prior to admission.
- Ask your doctor about the cost of the procedures, if possible ask the doctor to give you tariff codes for that specific procedure and contact Medshield to check if this will be covered by your available benefits limits and how much will be covered by Medshield.

Please note that the granting of an authorisation is for the Hospital or specific practice alone as any associated claims will be covered in accordance with the Scheme Rules related to your specific option.

MediPlus

IN-HOSPITAL BENEFITS

Important to note: Pre-authorisation is not a guarantee of payment, protocols will apply where required. Medical Services Organisation (MSO) is the Scheme's appointed hospital authorisation Managed Healthcare service provider.

OVERALL ANNUAL LIMIT	Unlimited
<p>HOSPITALISATION Subject to pre-authorisation by the relevant Managed Healthcare Programme.</p> <ul style="list-style-type: none"> • Accommodation • Theatre costs • Hospital equipment • Medicines • Pharmaceutical and surgical items <p>No benefits if not pre-authorised.</p>	<p>*Subject to Overall Annual Limit. R1 000 co-payment will apply to the following non-PMB:</p> <ul style="list-style-type: none"> • Removal of the wisdom teeth (unless the procedure is done in doctors rooms) • Removal of cataracts • Surgical procedures • Surgical removal of teeth • Tonsillectomies • Arthroplasties • Non-PMB medical admissions • Arthroscopies
<p>SURGICAL PROCEDURES Subject to pre-authorisation by the relevant Managed Healthcare Programme.</p>	<p>*Subject to Overall Annual Limit.</p>
<p>MEDICINE ON DISCHARGE FROM HOSPITAL Medicine to-take-out (TTO) Included in the hospital account if medicine is obtained on the day of discharge.</p>	<p>**Limited to R300 per admission. According to the Maximum Generic Pricing or Medicine Price List and Formularies.</p>
<p>MATERNITY Subject to pre-authorisation and the relevant Managed Healthcare Programme. Benefits are allocated per pregnancy.</p> <ul style="list-style-type: none"> • Confinement in-hospital • Confinement in a registered birthing unit • Confinement out of hospital 	<p>*Subject to Overall Annual Limit.</p> <ul style="list-style-type: none"> • Delivery by a general practitioner or medical specialist and the attending paediatrician and/or anaesthetist. • Up to and including 6 weeks post-natal consultation per pregnancy. • Delivery by a registered midwife. • Hire of water bath, subject to Appliance Limit. • 4 post-natal midwife consultations per pregnancy. • Delivery by a general practitioner or registered midwife. • Hire of water bath and oxygen cylinder included in Appliances Limit. • 4 post-natal midwife consultations per pregnancy.
<p>ALTERNATIVE TO HOSPITALISATION Physical Rehabilitation subject to relevant Managed Healthcare Programme for the following:</p> <ul style="list-style-type: none"> • Step-down facilities • Nursing service • Hospice 	<p>*R46 000 per family per annum. Subject to Overall Annual Limit. Treatment only available immediately following an event.</p>
<p>GENERAL MEDICAL AND SURGICAL APPLIANCES Hiring or buying of appliances, subject to pre-approval by the Scheme and the use a Preferred Provider for the following:</p> <ul style="list-style-type: none"> • Peak flow Meters, Nebulizers and Glucometers • Hearing Aids and repairs • Wheelchairs and repairs • Stoma Products • CPAP apparatus for sleep Apnoea 	<p>*R7 000 per family per annum. Subject to Overall Annual Limit and further limited to:</p> <p>*R750 per beneficiary per annum. Subject to General Medical and Surgical Appliances Limit.</p> <p>*Subject to pre-authorisation by the relevant Managed Healthcare Programme.</p>

* 100% of the negotiated fee, or, in the absence of such fee, 100% of the lower of the cost or Scheme Tariff, or Uniform Patient Fee Schedule for Public Hospitals.

** 100% of the lower of the cost to the supplier plus the negotiated mark-up; or the negotiated dispensing fee for Pharmacy Preferred Providers for medicines as approved by the Scheme.

IN-HOSPITAL BENEFITS

<p>OXYGEN THERAPY EQUIPMENT Subject to pre-authorisation by the relevant Managed Healthcare Programme and use of a Preferred Provider.</p>	<p>*Subject to Overall Annual Limit.</p>
<p>HOME VENTILATORS In-and-out of hospital Subject to pre-authorisation by the relevant Managed Healthcare Programme and use of a Preferred Provider.</p>	<p>*Subject to Overall Annual Limit.</p>
<p>LONG LEG CALLIPERS Subject to pre-approval by the Scheme and use of a Preferred Provider.</p>	<p>*Subject to Prosthesis Limit. No co-payment applied.</p>
<p>BLOOD, BLOOD EQUIVALENTS AND BLOOD PRODUCTS The use of blood equivalents is subject to pre-authorisation by the relevant Managed Healthcare Programme, including the emergency transportation of blood.</p>	<p>*Subject to Overall Annual Limit.</p>
<p>MEDICAL PRACTITIONER CONSULTATIONS AND VISITS During hospital admission, including Medical and Dental Specialist or General Practitioner.</p>	<p>*Subject to Overall Annual Limit.</p>
<p>BASIC DENTISTRY Subject to pre-authorisation by the relevant Managed Healthcare Programme and Dental Protocols.</p>	<p>*Subject to Overall Annual Limit.</p> <p>General anaesthetics for conscious sedation and hospitalisation for dental work will only be granted for:</p> <ul style="list-style-type: none"> • Beneficiaries under the age of 8 years • Bony impactions of the third molars • Removal of teeth and roots • Removal of wisdom teeth • Exposure of teeth for orthodontic reason and • Suturing of traumatic wounds
<p>SLEEP STUDIES In-and-out of hospital, subject to pre-authorisation by the relevant Managed Healthcare Programme.</p> <ul style="list-style-type: none"> • Diagnostic Polysomnograms • CPAP Titration 	<p>*Subject to Annual Medical Expenses Limit.</p> <p>*Subject to Overall Annual Limit.</p>
<p>ONCOLOGY BENEFITS Subject to registration on the relevant Managed Healthcare Programme, pre-authorisation and submission of a Treatment Plan.</p> <ul style="list-style-type: none"> • Oncology Medicine • Radiology and Pathology • PET and PET-CT Service must be obtained from a credential specialised practice. 	<p>*Subject to Overall Annual Limit. Including post active treatment for 12 months.</p> <p>**R230 000 per family per annum. Subject to Overall Annual Limit.</p> <p>*Related radiology and pathology services. Subject to Overall Annual Limit.</p> <p>*Subject to Overall Annual Limit. 10% upfront co-payment. Limited to 1 scan per beneficiary per annum.</p>
<p>SPECIALISED DRUGS FOR ONCOLOGY, NON-ONCOLOGY, AND BIOLOGICAL DRUGS Subject to registration on the relevant Managed Healthcare Programme, pre-authorisation and submission of a Treatment Plan.</p> <ul style="list-style-type: none"> • Marcular Degeneration 	<p>**R100 000 per family per annum. Subject to Oncology Medicine Limit with a 20% upfront co-payment.</p> <p>*R40 000 per family per annum.</p>

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IN-HOSPITAL BENEFITS

<p>ORGAN, TISSUES AND HAEMOPOIETIC STEM CELL (BONE MARROW) TRANSPLANTATION Subject to pre-authorisation by the relevant Managed Healthcare Programme.</p> <p>Includes the following services:</p> <ul style="list-style-type: none"> • Immuno-Suppressive Medication • Post Transplantation Biopsies and Scans • Related Radiology and Pathology 	<p>*R140 000 per family per annum. Subject to Overall Annual Limit.</p> <p>Organ harvesting is limited to the Republic of South Africa. No benefits for donor search cost. Haemopoietic stem cell (bone marrow) transplantation is limited to allogenic and autologous grafts derived from South African Bone Marrow Registry.</p>
<p>PATHOLOGY AND MEDICAL TECHNOLOGY Subject to pre-authorisation by the relevant Managed Healthcare Programme.</p>	<p>*Subject to Overall Annual Limit.</p>
<p>PHYSIOTHERAPY Subject to pre-authorisation by the relevant Managed Healthcare Programme.</p>	<p>*Subject to Overall Annual Limit.</p>
<p>PROSTHESIS AND DEVICES INTERNAL Surgically Implanted Device. Subject to pre-authorisation by the relevant Managed Healthcare Programme.</p>	<p>*R29 000 per family per annum. Subject to Overall Annual Limit. 25% upfront co-payment applicable to all non-PMB Prosthesis.</p>
<p>PROSTHESIS EXTERNAL Subject to pre-authorisation by the relevant Managed Healthcare Programme, Clinical protocols and the use of a Preferred Provider. Includes Ocular Prosthesis.</p>	<p>*Subject to Prosthesis and Devices Internal Limit. No co-payment applicable to external Prosthesis.</p>
<p>GENERAL RADIOLOGY Subject to pre-authorisation by the relevant Managed Healthcare Programme.</p>	<p>*Subject to Overall Annual Limit.</p>
<p>SPECIALISED RADIOLOGY In-and-out of hospital. Subject to pre-authorisation by the relevant Managed Healthcare Programme.</p> <ul style="list-style-type: none"> • CT scan • MUGA scans • MRI scans • Radio isotope studies CT colonoscopy (only in credentialed practices). <p>• Interventional radiology replacing surgical procedures</p>	<p>*R7 800 per family per annum. Subject to Overall Annual Limit. 10% upfront co-payment for non-PMB and non-emergency cases. Limited to 1 per family per annum combined.</p> <p>*Subject to Overall Annual Limit.</p>
<p>RENAL DIALYSIS Haemodialysis and peritoneal dialysis Subject to pre-authorisation by the relevant Managed Healthcare Programme. This benefit includes the following: Material, Medication, related Radiology and Pathology services.</p>	<p>*R175 000 per family per annum. Subject to Overall Annual Limit.</p>
<p>NON-SURGICAL PROCEDURES AND TESTS Subject to pre-authorisation by the relevant Managed Healthcare Programme.</p>	<p>*Subject to Overall Annual Limit.</p>
<p>MENTAL HEALTH Subject to hospital pre-authorisation by the relevant Managed Healthcare Programme.</p> <ul style="list-style-type: none"> • Rehabilitation for substance abuse • In-hospital Consultations and visits, Procedures, Assessments Therapy, Treatment and/or Counselling 	<p>*R26 000 per family per annum. PMB level of care. Up to a maximum of 3 days if patient admitted by a General Practitioner. Subject to Overall Annual Limit.</p> <p>*Subject to Mental Health Benefit Limit. Limited to 1 rehabilitation programme per beneficiary per annum.</p> <p>*Subject to Mental Health Limit.</p>

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** 100% of the lower of the cost to the supplier plus the negotiated mark-up; or the negotiated dispensing fee for Pharmacy Preferred Providers for medicines as approved by the Scheme.

IN-HOSPITAL BENEFITS

<p>HIV & AIDS Subject to registration on the relevant Managed Healthcare Programme. Including the following:</p> <ul style="list-style-type: none"> • Anti-retroviral and related medicines • HIV/AIDS related pathology and consultations • National HIV Counselling and Testing (HCT) 	<p>*Subject to protocols and use of a Designated Service Provider (DSP). **Any out of formulary PMB medication that is voluntarily obtained from provider other than the DSP will have 40% upfront co-payment.</p>
<p>INFERTILITY INTERVENTIONS AND INVESTIGATIONS Subject to pre-authorisation by the relevant Managed Healthcare Programme and Protocols. (Refer to the notes section for a list of procedures and blood tests).</p>	<p>*Subject to Overall Annual Limit.</p>
<p>MAXILLO-FACIAL AND ORAL SURGERY Subject to pre-authorisation by the relevant Managed Healthcare Programme and Dental Protocols. Non-elective surgery only.</p>	<p>*R12 250 per family per annum. Subject to Overall Annual Limit. Oral Surgery subject to Annual Medical Expense Limit.</p>
<p>REFRACTIVE SURGERY Subject to pre-authorisation by the relevant Managed Healthcare Programme and Dental Protocols.</p>	<p>*R7 000 per family per annum. Subject to Overall Annual Limit.</p>

AMBULANCE SERVICES

Services rendered by Europ Assistance 24 hour Help line – **086 100 6337 (002711 991 8055)** for members outside the borders of South Africa).

<ul style="list-style-type: none"> • Emergency Medical Services (EMS) Subject to pre-authorisation and the use of Europ Assistance. 	<p>Unlimited. 100% of the negotiated fee or 100% of the cost or tariff whichever is the lesser. Subject to Overall Annual Limit.</p>
<ul style="list-style-type: none"> • Ambulance inter-hospital transfers Subject to pre-authorisation and the use of Europ Assistance. 	<p>*R1 500 per family per annum.</p>

CHRONIC MEDICATION

<p>Subject to registration and approval on the Chronic Medicine Management Programme and Restrictive Formulary applicable. Restricted to one month's supply unless Scheme approval is obtained.</p>	<p>R9 300 per family per annum. R4 650 500 per beneficiary per annum. Subject to Overall Annual Limit. Maximum Generic Price or Medicine Price List and Formularies apply. Any out of formulary PMB medication voluntarily obtained or PMB medication voluntarily obtained for a provide other than the Medshield Pharmacy Network will have a 40% upfront co-payment.</p>
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OUT OF HOSPITAL BENEFITS

<p>ANNUAL MEDICAL EXPENSE LIMIT</p>	<p>M = R3 800 M+1 = R5 300 M+2 = R6 000 M+3 = R6 700 M+4 or more = R7 300</p>
<p>GENERAL PRACTITIONER VISITS</p>	<p>*Limited to the following and accumulating to the Overall Annual Limit. M = 9 visits M+1 = 11 visits M+2 = 13 visits M+3 = 15 visits M+4 = 17 visits M+5 = 19 visits</p>
<p>MEDICAL SPECIALIST CONSULTATIONS</p>	<p>*Limited to and included in the Annual Medical Expense Limit.</p>
<p>ANTENATAL CONSULTATIONS Pregnancy related consultations</p>	<p>*12 Ante-natal consultations per pregnancy. Subject to Overall Annual Limit.</p>

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OUT OF HOSPITAL BENEFITS

<p>PREGNANCY RELATED SCANS AND TESTS</p>	<p>*Subject to Annual Medical Expenses, and further limited to the following:</p> <ul style="list-style-type: none"> • Two 2D Scans per pregnancy. • One Amniocentesis pre pregnancy.
<p>CASUALTY/EMERGENCY VISITS</p> <ul style="list-style-type: none"> • Facility fee • Consultation • Medicine 	<p>*Subject to Annual Medical Expenses.</p> <p>If retrospective-authorisation for emergency is obtained from the relevant Managed Healthcare Programme within 72 hours, benefits will be subject to Overall Annual Limit.</p> <p>*Subject to General Practitioner's visits Limit.</p> <p>**R300 per script.</p>
<p>MEDICINES AND INJECTION MATERIAL</p> <ul style="list-style-type: none"> • Acute Medicine • Pharmacy Advised Therapy (PAT) 	<p>**Subject to Annual Medical Expense Limit.</p> <p>**Limited to:</p> <p>M0 = R400 M+1 = R750 R160 per script.</p>
<p>BASIC DENTISTRY</p> <p>Subject to pre-authorisation by the relevant Managed Healthcare Programme. According to the Dental Managed Healthcare and Protocols.</p> <p>For the following services:</p> <ul style="list-style-type: none"> • Removal of teeth and roots • Removal of wisdom teeth • Exposure of teeth for orthodontic reasons • Treatment of oral and associated conditions • Suturing of traumatic wounds • Plastic dentures and denture repairs 	<p>*Subject to Overall Annual Limit.</p> <p>General anaesthetics for conscious sedation and hospitalisation for dental work will only be granted for:</p> <ul style="list-style-type: none"> • Beneficiaries under the age of 8 years • Bony impactions of the third molars
<p>ADVANCED DENTISTRY</p> <p>Subject to pre-authorisation by the relevant Managed Healthcare Programme. Refer to the notes section for a list of services.</p>	<p>*Subject to Annual Medical Expense Limit.</p>
<p>MENTAL HEALTH</p> <p>Subject to pre-authorisation by the relevant Managed Healthcare Programme and Protocols.</p> <ul style="list-style-type: none"> • Consultations and visits, Procedures, Assessments Therapy, Treatment and/or Counselling 	<p>*Subject to Mental Health Limit.</p>
<p>OPTICAL BENEFITS</p> <p>Subject to relevant Optometry Managed Care Programme and Protocols.</p> <ul style="list-style-type: none"> • Optometric refraction (Eye test) • Spectacles and Contact Lenses <ul style="list-style-type: none"> • Single vision lenses • Bifocal lenses • Varifocal lenses • Lens add-ons • Contact lenses • Low vision Appliances (subject to Scheme approval). • Frames <ul style="list-style-type: none"> Includes repair costs • Readers <ul style="list-style-type: none"> If supplied by a registered Optometrist, Ophthalmologist, Supplementary Optical Practitioner or a registered pharmacy. 	<p>*Subject to Overall Annual Limit and further limited to:</p> <p>M0 = R1 000 M1+ = R1 850</p> <p>*Limited to 1 eye test per beneficiary per annum.</p> <p>*Subject to Optical Benefit Limit.</p> <p>One pair per beneficiary every two years.</p> <p>R660 per beneficiary every two years. Included in the Optical Benefit.</p> <p>R120 per beneficiary per annum.</p>

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OUT OF HOSPITAL BENEFITS

PATHOLOGY AND MEDICAL TECHNOLOGY	*Subject to Annual Medical Expense Limit.
PHYSIOTHERAPY, BIKINETICS AND CHIROPRACTICS	*Subject to Annual Medical Expense Limit.
GENERAL RADIOLOGY	*Subject to Annual Medical Expense Limit.
SPECIALISED RADIOLOGY	*Subject to the In-Hospital Specialised Radiology Benefit Limit.
PROCEDURES AND TESTS IN PRACTITIONERS' ROOMS <ul style="list-style-type: none"> • Procedures and tests • Non-surgical procedures Subject to pre-authorisation by the relevant Managed Healthcare Programme. • Routine diagnostic Endoscopic products Subject to pre-authorisation by the relevant Managed Healthcare Programme. 	<ul style="list-style-type: none"> *Subject to Annual Medical Expense Limit. *Subject to Overall Annual Medical Limit. No authorisation subject to Annual Medical Expense Limit.
MIRENA DEVICE Subject to pre-approval by the Scheme and clinical protocols. In doctors rooms only.	*Subject to Medical Expense Limit.
ADDITIONAL MEDICAL SERVICES Refer to the Notes section for a list of services.	*Subject to Annual Medical Expense Limit.
ALTERNATIVE HEALTHCARE SERVICES Alternative treatment received from the following registered medical practitioners: <ul style="list-style-type: none"> • Acupuncturist • Homeopath • Naturopath • Osteopath • Phytotherapist 	*Subject to Annual Medical Expense Limit.

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** 100% of the lower of the cost to the supplier plus the negotiated mark-up; or the negotiated dispensing fee for Pharmacy Preferred Providers for medicines as approved by the Scheme.

WELLNESS BENEFITS

Preventative care, aimed at encouraging members to take care of their health and wellbeing by going for specified health consultations.

Subject to Overall Annual Limit, thereafter subject to Annual Medical Expense Limit. This benefit excludes consultations for the following services:

<ul style="list-style-type: none"> • Flu vaccination** • Pap smear* • Bone Densitometry Scan* • Child Immunisations** 	Limited to 1 vaccination per beneficiary 18 years and older per annum up to R70 .	
	Limited to 1 per female beneficiary 13 years and older per annum.	
	Limited to 1 per beneficiary per annum.	
	Age specific immunisation, in line with the Medshield's Medicine Exclusion List Medicine Price List.	
	At birth	Tuberculosis (BCG) and Polio (OPV).
	6 weeks	Polio (OPV), Diphtheria, Tetanus, Whooping Cough (DTP), Hepatitis B, Haemophilus influenza B (HIB), Rotavirus, Pneumococcal.
	10 weeks	Polio, Diphtheria, Tetanus, Whooping Cough (DTP), Hepatitis B, Haemophilus influenza B (HIB), Rotavirus, Pneumococcal
	14 weeks	Polio, Diphtheria, Tetanus, Whooping Cough (DTP), Hepatitis B, Haemophilus influenza B (HIB), Pneumococcal.
18 months	Measles, Pneumococcal, Polio, Diphtheria, Tetanus, Whooping Cough (DTP), Measles or Measles, Mumps and Rubella (MMR)	
6 years	Polio – Diphtheria and Tetanus (DT)	
12 years	Diphtheria and Tetanus (DT)	

MONTHLY CONTRIBUTIONS

Principal Member	R1 665
Adult Dependant	R1 170
Child	R360

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Notes

LIST OF PROCEDURES WHICH WILL NOT INCUR CO-PAYMENTS

- Maternity
- Mental Health
- Organ and Haemopoietic stem cell (bone marrow) and transplantation and immune suppressive medication
- Renal dialysis Chronic
- Refractive surgery (on options with this benefit)

ADDITIONAL MEDICAL SPECIALISTS

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| <ul style="list-style-type: none">• Audiology• Dietetics• Genetic Counselling• Hearing Aid Acoustics | <ul style="list-style-type: none">• Occupational Therapy• Orthoptics, Podiatry• Private Nurse Practitioners |
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INFERTILITY INTERVENTIONS AND INVESTIGATIONS

Limited to interventions and investigations as prescribed by the Regulations to the Medical Schemes' Act 131 of 1998 in Annexure A paragraph 9, code 902M.

This benefit will include the following procedures and interventions:

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| <ul style="list-style-type: none">• Hysterosalpingogram• Laparoscopy• Surgery (uterus and tubal)• Manipulation of the ovulation defects and deficiencies• Semen analysis volume• County; mobility morphology; MAR-test• Day3 FSH/LH Oestradiol; Thyroid function (TSH)• Proclatin | <ul style="list-style-type: none">• Rubella• HIV• VORL• Chlamydia• Day 21 Progesterone Basic counselling and advice on sexual behaviour• Temperature charts• Treatment of local infections |
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NON-SURGICAL PROCEDURES IN PRACTITIONERS ROOMS

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| <ul style="list-style-type: none">• Tonsillectomy• Vasectomy• Prostate needle biopsy | <ul style="list-style-type: none">• Circumcision• Breast fine needles biopsy |
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ROUTINE DIAGNOSTIC ENDOSCOPIC PROCEDURES

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| <ul style="list-style-type: none">• Upper and lower gastro-intestinal fibre-optic endoscopy• 24 hour oesophageal PH studies• Cystoscopy• Oesophageal motility studies | <ul style="list-style-type: none">• Fibre-optic Colonoscopy• Sigmoidoscopy• Urethroscopy• Hysteroscopy |
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DENTAL PROCEDURES AND SERVICES

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| <ul style="list-style-type: none">• Inlays• Crowns• Bridges• Orthodontic treatment• Maxillo-Facial Surgery | <ul style="list-style-type: none">• Mounted study models• Metal base partial dentures• Oral medical procedure• Osseo-integrated implants and orthognathic surgery (Functional correction of malocclusions) |
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DESIGNATED SERVICE PROVIDERS FOR CHRONIC MEDICATION

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| <ul style="list-style-type: none">• Pharmacy Direct• Chronic Medicine Dispensary• Clicks Direct Medicines | <ul style="list-style-type: none">• State and• All registered pharmacies on the Medshield Pharmacy Network |
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Important Information & Contact Details

Contact Centre

Contact Number: 086 000 2120 or
002711 716 7450 for members outside the
borders of South Africa
Facsimile: 011 399 2465
email: member@medshield.co.za
Medshield website: www.medshield.co.za
Postal Address: PO Box 4346, Randburg, 2125

Hospital Authorisation

Contact Number: 086 000 2121 or
002711 259 5026 for members outside the
borders of South Africa
Facsimile: 086 636 9067
email: preauth@mso.co.za

Aid for AIDS (AfA) HIV and AIDS Management Programme

Contact Number: 086 010 0646 / 27
Facsimile: 080 060 0773
email: afa@afadm.co.za
Website: www.aidforaids.co.za
SMS details to 083 410 9078

Diseases Management Programme

(Asthma, diabetes and coronary heart disease management)
Contact Number: 086 000 2121
email: dm@mso.co.za

Emergency Services (Europ Assistance South Africa (Pty) Ltd

Contact Number: 086 100 6337 or
002711 991 8055 for members outside the
borders of South Africa

Oncology Disease Management Programme

Contact Number: 086 000 2121
Facsimile: 086 634 0460
email: oncology@mso.co.za

Chronic Medicine Management

Contact Number: 086 010 0608 or
002721 466 1919 for members outside the
borders of South Africa
Facsimile: 080 022 3670
email: cmm@medscheme.co.za

Send accounts to:

General Claims submission

Medshield Medical Scheme
PO Box 4346
Randburg
2125

Or drop off at:

296 Kent Avenue
Randburg
Johannesburg
Facsimile: 011 3992465
email: member@medshield.co.za or
provider@medshield.co.za

Hospital Claims submission

Medical Services Organisation
Private Bag x 152
Bryanston
2021

or drop off at:

Building 15 Healthcare Park
Woodlands Drive
Woodmead
Johannesburg
Facsimile: 086 636 9070
email: medshieldclaims@mso.co.za

The Scheme's website is constantly updated, visit www.medshield.co.za.

The Rules of the Scheme can be downloaded from the Scheme website www.medshield.co.za



Medshield Medical Scheme | PO Box 4346, Randburg, 2125 | www.medshield.co.za

Medshield Distribution Offices

Gauteng	Johannesburg	(011) 549 1000
KwaZulu-Natal	Durban	(031) 581 7480
Western Cape	Cape Town	(021) 418 3139
Eastern Cape	Port Elizabeth/ East London	(041) 373 1717
	Mthatha	(047) 532 2873 / 2877
North West Province	Mafikeng	(018) 381 7642 / 43
Mpumalanga	Nelspruit	(013) 752 2728

Medshield Medical Scheme banking details

Bank	Nedbank
Branch	Rivonia
Bank code	196905
Account number	1969125969

DISCLAIMER: This brochure acts as a summary and does not supersede the Registered Rules of the Scheme. All benefits are determined in accordance with the Registered Rules of the Scheme which may exclude certain treatments. It is the member's responsibility to familiarise themselves with the Registered Scheme Rules.