

MediWallet Classic

Combined Hospital Plan Benefits

Starting from R1 521^{pm}



BENEFIT	SERVICE
PRIVATE GP VISITS	Members can make use of any Medicall Healthcare Network Provider GP. Benefits include unlimited medically necessary consultation from the Network GP. 30 day waiting period applies from nominated payment date.
BASIC PATHOLOGY	Basic blood tests as requested by a Medicall Healthcare Network Provider subject to Medicall Healthcare protocols and approved list of codes. 30 day waiting period applies from the nominated payment date.
BASIC RADIOLOGY	Basic Black and White X-Rays as requested by a Medicall Healthcare Network provider, subject to Medicall Healthcare protocols and approved list of codes. 30 day waiting period applies from the nominated payment date.
ACUTE MEDICATION	Dispensed by a Medicall Healthcare Network Provider GP or prescription from a Network Pharmacy according to the Medicall Healthcare medicine formulary. 30 day waiting period applies from the nominated payment date.
CHRONIC MEDICATION	Unlimited for 26 Chronic Conditions. Subject to registration and approval from Medicall Clinical Department according to the Medicall Healthcare medicine formulary. 6 month waiting period.
OVER THE COUNTER MEDICATION (OTC)	Up to R250.00 per month. To the maximum of R2000.00 per annum, according to the Medicall Medication Formulary.
BASIC DENTISTRY	Members may choose any Medicall Healthcare Network Dentist. Benefits include consultations, fillings, extractions, infection control, cleaning and polishing of teeth. Subject to a list of approved dental codes. 3 month waiting period.
BASIC OPTOMETRY	Members may choose any Spec-Savers Optometrist. Benefits include one optical test, standard basic frame, one set of clear single vision lenses or bi-focal lenses or contact lenses (to the value of R585) every 24 months. 3 month waiting period.
SPECIALIST VISITS	Up to the R2 000 out of Network benefit limit on referral by a Network GP. The member will be required to pay for the specialist services and submit the claim to Medicall for reimbursement.
24/7 TELEPHONIC EAP BENEFITS	HEALTH ON Call: Health advice from qualified nurses. COVID 19: Trauma Counselling Support. TRAUMA Counselling: Trauma debriefing.
MEMBER ASSISTANCE PROGRAM (MAPS)	For members with chronic illnesses.

BENEFIT	SERVICE		
ACCIDENT BENEFIT**	Up to R250 000.00 per family per event. Up to the maximum of R1 000 000.00 per annum.		
ACCIDENTAL DISABILITY**	Up to a limit of R150,000 for the Principal Member only for medical care for a single event. Applicable to Permanent Disability Only.		
ILLNESS BENEFIT**	In Hospital benefit: R8 500 1st Day; R8 500 2nd Day; R8 500 3rd Day and thereafter R2 000 per day to a maximum of 21 days per member, per illness event. SUBJECT TO A 3 MONTH WAITING PERIOD. INCEPTING ON THE 1ST DAY OF THE MONTH AFTER REGISTRATION PERIOD. 12 MONTH EXCLUSION APPLICABLE ON PRE-EXISTING CONDITIONS.		
ILLNESS BOOSTER BENEFIT**	The Booster Benefit covers Pre-Authorised admission where the hospital stay is less than 24 hours. In addition, Emergency Room cover of up to R2 000 is provided where Emergency Room treatment is required with no admission into hospital. Day procedures as Pre-Authorised up to R8 500 per event. SUBJECT TO A 3 MONTH WAITING PERIOD.		
SPECIFIC ILLNESS BENEFIT**	Procedure	Waiting Period	Max Benefit
	Appendectomy	3 Months	R30 000
	Kidney Stones	12 Months	R30 000
	Ectopic Pregnancy	12 Months	R20 000
	Gall Bladder	12 Months	R35 000
	Maternity	12 Months	R30 000
	Hysterectomy	12 Months	R40 000
STATED ILLNESS BENEFIT**	Your Stated Illness benefit is limited to one Stated Illness per member per lifetime. This Life Time Stated Illness Benefit allows up to R300 000 per lifetime with a maximum of R60 000 per annum per member upon being diagnosed and Pre-Authorised. Subject to Terms and Conditions included in policy schedule. Stated Illness Benefit covering: Heart attack, Coronary Disease, Stroke, Brain Tumour, Cancer, Kidney Failure, Major Organ Transplant, Paraplegia and blindness. Pre-existing Conditions are subject to Underwriting approval. 12 MONTH WAITING PERIOD & PRE- AUTHORISATION		
24 HOUR EMERGENCY ASSIST - POWERED BY AFRICA ASSIST	Services include Pre-Authorisation & arranging R10 000 guarantee of admission in the event of an accident. Ambulance, Repatriation, Inter-Hospital Transfer and 24 Hour Medical Advice Line.		
FAMILY FUNERAL BENEFIT	Principal, Spouse and Child of 14 years and above = R10 000, Children from 6-13 years = R5 000, Children from 0-5 years = R2 500 and Foetus from 28 weeks = R1 250 SUBJECT TO A 3 MONTH WAITING PERIOD		
COOLING OFF PERIOD	Members are allowed a 31 day cooling off period. Any increase in premium will be notified to the Policyholder 31 days before such increase takes effect.		
MEDIWALLET CREDIT FACILITY	A minimum of R5 000 available credit on a MediWallet Account.		

GENERAL

ENTRY AGE	Maximum age 64.
VAT	Inclusive.
ANNUAL AMENDMENTS	Changes between the plans are allowed annually on the 1st of January, with notice of change to Medical Healthcare confirmed no later than the 30th of November the preceding year.
NETWORK	Medical Healthcare – National Coverage.
ENQUIRIES	Emergencies and Hospital Pre-Authorisation: 0860 007 722 Medical Healthcare Network: 010 443 8777 MediWallet: 087 2100 336

GENERAL EXCLUSIONS

- Any services obtained by a non-Network supplier, other than those mentioned in this agreement;
- Travel expenses;
- Cosmetic treatment;
- Reports, examinations and tests for insurance policies or legal reason;
- Injuries arising from Professional Sports, bungee or parachute jumps;
- Accommodation in an old age home, general care institution, spa or health resort;
- Treatment & Medication of HIV/ AIDS;
- Treatment for obesity, alcohol or drug abuse;
- Treatment and operations of choice;
- Treatment of Tuberculosis other than general health management at a GP level;
- Acupuncture, bio-kinetics, chiropractors, herbalists, naturopaths or homeopaths;
- Injuries sustained during participation in strikes, illegal picketing, riots or physical altercation;
- Nutritional supplements, tonics, stimulants, vitamins and minerals;
- Contraceptives and devices to prevent pregnancy;
- Stimulant laxatives;
- Treatment for infertility and sexual dysfunction;
- Non-Emergency Root Canal treatment, dentures and other advanced dentistry;
- Services in respect of the treatment of any sickness/ condition or injury sustained by a member for which any other party may be liable;
- Mental illness or mentally related diseases; and
- Investigative procedures both in and out of hospital.

PACKAGE OPTIONS	PER MONTH*	
	18-55	56-64
ENTRY AGE (YEARS)		
Single	R1 521	R1 749
Single + 1	R2 011	R2 311
Single + 2	R2 491	R2 862
Single + 3	R3 003	R3 452
Single + 4	R3 456	R3 974
Couple	R2 969	R 3 412
Couple + 1	R3 449	R3 965
Couple + 2	R3 911	R4 497
Couple + 3	R4 275	R4 916
Couple + 4	R4 629	R5 325
5th Child	R464	R464

Added to your 1st month debit order will be a once off fee of R110 for your Welcome Pack delivery.

REGISTRATION PERIOD (ONE MONTH)

The Registration Period is one month and dependent on your selected debit date, which can be one of the following: 1st, 5th, 15th 25th or the last day of the month. For debit orders on the 1st or the 5th, the Registration Period is the same month as the debit date. For debit orders after the 5th, the Registration Period commences on the 1st of the following month for a period of 30 days. Cover and applicable waiting periods begin on the completion of the Registration Period.

TERMS AND CONDITIONS

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This is not a medical scheme and the cover is not the same as that of a medical scheme. This is not a substitute for a medical scheme membership.



How it Works

PRIMARY HEALTHCARE



Our Day to Day services are provided through the Medical Healthcare Provider Network. The Provider Network consists of the largest independent national network of over 10 000 healthcare service providers that include: GP's, Dentists, Optometrists and Pharmacies and related services. Members are required to make use of the Medical Healthcare Network Providers. The list of these service providers can be found either on www.mediwallet.co.za or alternatively you can contact us. Members will be required to produce membership card/certificate and ID when using a Medical Healthcare Network Provider. Pre-Authorisation is required by members. Dial 0860 007 722 (found on the Membership Card).

ILLNESS / ACCIDENT / EMERGENCY - PRE-AUTHORISATION: DIAL 0860 007 722



Medical Healthcare/Africa Assist have agreements with most Private Hospitals in South Africa. In the case of any hospital or emergency room admittance, Pre-Authorisation is required by members. Dial 0860 007 722 (found on the Membership Card). In the event of an accident Members have 48 hours within which to notify your Pre-Authorisation Department. Should a Member be referred by their GP, they will be supplied with an admission letter that will need to be submitted to the Pre- Authorisation Department.

Quick and Simple Sign Up

Select your Plan



Choose your MediWallet Medical Classic Combined Hospital Plan.

Get in touch



Complete your details and ensure everything is correct before submitting your information.

Process



All checks are complete and the underwriting process is followed

Acceptance



You will receive confirmation of your successful signup and registration.

Payments



Your monthly premium will be debited on your selected date.

Membership Card



Your Membership card will be sent to you with your MediWallet credit facility loaded.