



BonClassic



If you have a family with children or perhaps your children are already all grown up and have moved out of your home, this option offers a comprehensive medical plan with a wide range of medical benefits for you and your loved ones.

Overall annual limit (OAL) – Unlimited

MONTHLY CONTRIBUTIONS



Main member

R3 260



Adult dependant

R2 799



Child dependant

R805

Your fourth and subsequent children will be covered free of charge.



IN-HOSPITAL BENEFITS

These benefits include major medical events such as hospitalisation, oncology treatment and more.



GP consultations	Unlimited, at 100% of the Bonitas Rate
Specialist consultations	Network Specialists: Unlimited, covered in full Non-network Specialists: Unlimited, covered at 100% of the Bonitas Rate
Pathology	Unlimited, at 100% of the Bonitas Rate
General radiology	Unlimited, at 100% of the Bonitas Rate
Specialised radiology	R24 850 per family, per year (in & out-of-hospital) Subject to pre-authorization
Paramedical services (Allied medical professions) - speech therapy, physiotherapy, occupational therapy, audiology, dietetics	Unlimited, at 100% of the Bonitas Rate
Prosthesis internal and external	R46 800 per family, per year ICPS is the **DSP for hip and knee replacements, a R5 000 co-payment is payable when not using the DSP
Mental health hospitalisation	R35 350 per family, per year
Take home medication (TTO)	R400 per beneficiary, per admission
Physical rehabilitation	R42 500 per family, per year
Alternatives to hospitalisation	R14 200 per family, per year

Oncology

R351 900 per family, per year at the Preferred Provider

Biological Drugs (non-oncology)

R105 200 per family, per year (10% co-payment and protocols apply)

Organ transplants

Unlimited, at 100% of the Bonitas Rate

Renal dialysis

Unlimited, at 100% of the Bonitas Rate

OUT-OF-HOSPITAL BENEFITS

These benefits cover your day-to-day medical expenses, such as GP and specialist consultations.



Main member

R5 532



Adult dependant

R4 752



Child dependant

R1 368

Savings

GP consultations	Subject to available savings
*Specialist consultations	Subject to available savings
Acute medication	Subject to available savings
General radiology	R2 680 per beneficiary, per year R4 130 per family, per year
Specialised radiology	R24 850 per family, per year (in & out-of-hospital) Subject to pre-authorization
Pathology	R2 680 per beneficiary, per year R5 890 per family, per year
Mental health consultations	R13 600 per family, per year (sub-limit to mental health hospitalisation limit and for in and out of hospital consultations)
Physical therapy	R1 320 per beneficiary, per year R2 680 per family, per year
General medical appliances	R7 000 per family, per year
Stoma care products	Included in general medical appliances limit
Hearing aids	R14 500 per family, per three year cycle (10% co-payment)
Foot orthotics	R3 900 per beneficiary, per year (10% co-payment)

Appliances - wheelchairs, CPAP machines, etc.	Included in general medical appliances limit
<i>HIV/Aids</i>	Unlimited, at 100% of the Bonitas Rate (If registered on Aid for Aids program)
<i>Paramedical services - speech therapy, occupational therapy, audiology, dietetics</i>	
Main member only	R2 550 per year
Main member + 1 dependant	R3 900 per year
Main member + 2 dependants	R4 500 per year
Main member + 3 dependants	R4 800 per year
Main member + 4 dependants or more	R5 150 per year
<i>Optometry</i>	R5 060 per family, per two year cycle
Vision examination (Iso-Leso members)	R490 per beneficiary, per two year cycle
Vision examination (Non Iso-Leso members)	R350 per beneficiary, per two year cycle
Single vision lenses (glass/plastic)	R160 per beneficiary, per lens, per two year cycle
Bifocal lenses (glass/plastic)	R350 per beneficiary, per lens, per two year cycle
Multifocal lenses (glass/plastic)	R700 per beneficiary, per lens, per two year cycle
Frames	R700 per beneficiary, per two year cycle
Contact lens materials	R1 700 per beneficiary, per two year cycle
<i>Basic dentistry</i>	R4 000 per family, per year. Covered at the Bonitas Dental Tariff (BDT)
Consultations	2 x annual check-ups per beneficiary (once in 6 months)
X-rays: Intra-oral	Benefit is subject to managed care protocols
X-rays: Extra-oral	1 x per beneficiary, per three year cycle
Oral hygiene	2 x annual scale and polish treatments per beneficiary (once in 6 months) Benefit for fissure sealants is limited to beneficiaries younger than 16 years of age Benefit for fluoride treatment is limited to beneficiaries between ages 5 & 16 years

Fillings	Benefit for fillings are granted once per tooth in 365 days Benefit for re-treatment of a tooth is subject to managed care protocols A treatment plan and x-rays may be required for multiple fillings
Root canal therapy and extractions	Benefit is subject to managed care protocols
Plastic dentures and associated laboratory costs	1 x set of plastic dentures (an upper and a lower) per beneficiary, per four year cycle Benefit is subject to managed care protocols
<i>Specialised dentistry</i>	R4 800 per family, per year. Covered at the Bonitas Dental Tariff (BDT)
Partial metal frame dentures and associated laboratory costs	2 x partial frames (an upper and a lower) per beneficiary, per five year cycle
Crown; bridge and associated laboratory costs	Subject to DENIS Designated Service Provider Network (A bridge comprises 2 or more crown units. Each crown is payable from the available crown and bridge benefit)
Implants and associated laboratory costs	Pre-authorisation is required 1 x crown per family, per year Benefit is subject to managed care protocols Benefits for crowns will be granted once per tooth, per five year cycle A treatment plan and x-rays may be requested
Orthodontics and associated laboratory costs	No benefit Pre-authorisation is required Benefit is subject to managed care protocols Orthodontic treatment is granted once per beneficiary, per lifetime Cases will be clinically assessed by using an orthodontic needs analysis. Benefit allocation is subject to the outcome of the needs analysis and funding can be granted up to 100% of BDT Benefit for Orthodontic treatment will be granted where function is impaired Benefit will not be granted where Orthodontic treatment is required for cosmetic reasons



Only one family member may commence orthodontic treatment in a calendar year. Benefit for fixed comprehensive treatment is limited to individuals between ages 9 & 18 years.

Pre-authorisation is required. Benefit is subject to managed care protocols.

Maxillo-facial surgery

Surgery in the dental chair

Benefit is subject to managed care protocols.

Hospitalisation (general anaesthetic)

Pre-authorisation is required. A co-payment of R2 000 per hospital admission applies. Admission protocols apply. General anaesthetic benefits are available for children under the age of 5 years for extensive dental treatment. General anaesthetic benefits are available for the removal of impacted teeth. Benefit is subject to managed care protocols.

Laughing gas in dental rooms

Benefit is subject to managed care protocols.

IV conscious sedation in rooms

Pre-authorisation is required. Benefit is subject to managed care protocols. Benefit is limited to extensive dental treatment.

Scheme exclusions

Please refer to the last section herein for exclusions and www.bonitas.co.za for Scheme rules & exclusions.

* Subject to the specialist network.

**Designated Service Provider

CHRONIC BENEFITS

These offer cover for conditions that require medication on an ongoing basis.

BonClassic offers generous and extensive cover for the below 49 chronic conditions.

Cover is limited to R9 700 per beneficiary and R20 100 per family, per year on the Restrictive Formulary. This is subject to pre-authorisation. A 40% co-payment will be required if you decide to use a non-DSP to obtain your medication. Pharmacy Direct is the **DSP for chronic medication.

Once this amount is depleted, you will still be covered for the 27 Prescribed Minimum Benefits, highlighted below, subject to the use of in-formulary medicine.

1. Addison's Disease	18. Diabetes Insipidus	34. Multiple Sclerosis
2. Alzheimer's Disease	19. Diabetes Type 1	35. Obsessive Compulsive Disorder
3. Ankylosing Spondylitis	20. Diabetes Type 2	36. Osteoporosis
4. Asthma	21. Dysrhythmias	37. Paget's Disease
5. Attention Deficit Disorder (In 5-18 Year Olds)	22. Eczema	38. Panic Disorder
6. Barrett's Oesophagus	23. Epilepsy	39. Parkinson's Disease
7. Benign Prostatic Hypertrophy	24. Gastro-Oesophageal Reflux Disorder	40. Polyarteritis Nodosa
8. Bipolar Mood Disorder	25. Generalised Anxiety Disorder	41. Post-Traumatic Stress Syndrome
9. Bronchiectasis	26. Glaucoma	42. Pulmonary Interstitial Fibrosis
10. Behcet's Disease	27. Gout	43. Rheumatoid Arthritis
11. Cardiac Failure	28. Haemophilia	44. Schizophrenia
12. Cardiomyopathy	29. HIV/Aids	45. Scleroderma
13. Chronic Obstructive Pulmonary Disease	30. Hyperlipidaemia	46. Systemic Lupus Erythematosus
14. Chronic Renal Disease	31. Hypertension	47. Tourette's Syndrome
15. Coronary Artery Disease	32. Hypoparathyroidism	48. Ulcerative Colitis
16. Crohn's Disease	33. Hypothyroidism	49. Zollinger-Ellison
17. Depression		



SUPPLEMENTARY BENEFITS

At Bonitas, we believe in giving you more. These additional benefits provide cover in or out of hospital

Maternity care	
Per event:	12 x ante-natal consultations 2 x 2D scans 4 x post-natal consultations with a midwife R1 100 for ante-natal classes 1 x amniocentesis
Preventative care	
Women's health	Subject to **DSP 1 x mammogram - female members between ages 50 & 74 years, per two year cycle 1 x pap smear - female members between ages 21 & 65 years, per three year cycle 1 x annual HIV test per beneficiary, per year 1 x annual Flu vaccine per beneficiary, per year
General health	
Cardiac health	1 x full Lipogram - members 20+ years of age, per five year cycle
Elderly health	1 x lifetime Pneumococcal vaccine - members 65+ years of age 1 x Faecal Occult blood test - members between ages 50 & 75 years, per beneficiary, per year
	1 x lifetime Bone Density screening - female members 65+ years of age
Wellness screening benefit	
	1 x assessment per beneficiary, per year at a **DSP
	Limited to : Blood pressure test Glucose test Cholesterol test Body mass index Waist to hip ratio assessment

Wellness extender

R1 400 per family, per year

Subject to registration and completion of a health risk assessment per beneficiary

Beneficiary may then choose from the following:

GP consultation

Biokineticist consultation

Dietician consultation

Physiotherapy consultation

Wearable devices (subject to approval)

Smoking cessation program (subject to approval)

