



**BONSAVE**  
— & —  
**BONFIT SELECT**

SAVINGS

2022

Medical Aid for South Africa

*Bonitas*

# WHAT YOU PAY

## BONSAVE

MAIN MEMBER	ADULT DEPENDANT	CHILD DEPENDANT
R2 950	R2 284	R883

## BONFIT SELECT

MAIN MEMBER	ADULT DEPENDANT	CHILD DEPENDANT
R2 230	R1 727	R669

YOU ONLY PAY FOR A MAXIMUM OF THREE CHILDREN. DEPENDANTS WHO ARE FULL-TIME STUDENTS PAY CHILD RATES UP TO AGE 24 YEARS.

## WANT TO JOIN?

SPEAK TO YOUR **FINANCIAL ADVISOR** OR VISIT **BONITAS.CO.ZA**

## ALREADY A MEMBER? TALK TO US



**Bonitas Member App**



**bonitas.co.za/member**



**www.bonitas.co.za**



**Bonitas Medical Fund**



**@BonitasMedical**

**Please note:** Product rules, limits, terms and conditions apply. Where there is a discrepancy between the content provided in this brochure and the Scheme Rules, the Scheme Rules will prevail. The Scheme Rules are available at [www.bonitas.co.za](http://www.bonitas.co.za). Benefits have been approved by the Council for Medical Schemes. All claims are paid at the Bonitas Rate, unless otherwise stated. All benefits and limits are per calendar year, unless otherwise stated. Managed Care protocols apply.

# OUT-OF-HOSPITAL BENEFITS

These benefits provide cover for consultations with your GP or specialist, acute medicine, X-rays, blood tests and other out-of-hospital medical expenses. **Please note:** When you complete a wellness screening or online wellness assessment, you unlock the Benefit Booster which can be used to pay for out-of-hospital expenses first.

## SAVINGS

**GP CONSULTATIONS**  
(INCLUDING VIRTUAL CARE CONSULTATIONS)

**ADDITIONAL GP CONSULTATIONS**  
(INCLUDING VIRTUAL CARE CONSULTATIONS)

**SPECIALIST CONSULTATIONS**

**BLOOD AND OTHER LABORATORY TESTS**

**X-RAYS AND ULTRASOUNDS**

**ACUTE MEDICINE AND OVER-THE-COUNTER MEDICINE**

**HOMEOPATHIC MEDICINE**

**ALLIED MEDICAL PROFESSIONALS**  
(SUCH AS DIETICIAN, SPEECH AND OCCUPATIONAL THERAPIST)

**PHYSIOTHERAPY, PODIATRY AND BIKINETICS**

**OPTOMETRY**

**EYE TESTS**

**SINGLE VISION LENSES (CLEAR) OR**

## BONSAVE

MAIN MEMBER	ADULT DEPENDANT	CHILD DEPENDANT
R6 900	R5 340	R2 064

## BONSAVE

Paid from available savings

If you use all your savings for the year, your family will still get a maximum of 6 GP consultations (limited to 3 per beneficiary) paid at the Bonitas Rate

Paid from available savings | You must get a referral from your GP

Paid from available savings

Paid from available savings

Paid from available savings

Paid from available savings

Paid from available savings

Paid from available savings

Paid from available savings

1 per beneficiary, at a network provider **OR** R350 per beneficiary, at a non-network provider

100% towards the cost of clear lenses, limited to R210 per lens, per beneficiary, at a non-network provider

## BONFIT SELECT

MAIN MEMBER	ADULT DEPENDANT	CHILD DEPENDANT
R4 284	R3 312	R1 284

## BONFIT SELECT

Paid from available savings

If you use all your savings for the year, your family will still get a maximum of 2 GP consultations (limited to 1 per beneficiary) paid at the Bonitas Rate

Paid from available savings | You must get a referral from your GP

Paid from available savings

Paid from available savings

Paid from available savings

Paid from available savings

Paid from available savings

Paid from available savings

Paid from available savings

1 per beneficiary, at a network provider **OR** R350 per beneficiary, at a non-network provider

100% towards the cost of clear lenses, limited to R210 per lens, per beneficiary, at a non-network provider

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<b>BIFOCAL LENSES (CLEAR) OR</b>
<b>MULTIFOCAL LENSES (CLEAR)</b>
<b>FRAMES</b>
<b>CONTACT LENSES</b>
<b>GENERAL MEDICAL APPLIANCES (SUCH AS WHEELCHAIRS AND CRUTCHES)</b>
<b>EXTERNAL PROSTHESIS</b>

<b>MRIs AND CT SCANS (SPECIALISED RADIOLOGY)</b>
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<b>MENTAL HEALTH CONSULTATIONS</b>
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<b>BASIC DENTISTRY</b>
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<b>CONSULTATIONS</b>
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<b>X-RAYS: INTRA-ORAL</b>
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<b>X-RAYS: EXTRA-ORAL</b>
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<b>PREVENTATIVE CARE</b>
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<b>FILLINGS</b>
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<b>BONSAVE</b>	
100% towards the cost of clear lenses, limited to R445 per lens, per beneficiary, at a non-network provider	
100% towards the cost of clear lenses, limited to R770 per lens, per beneficiary, at a non-network provider	
Paid from available savings (subject to optometry sublimit)	
Paid from available savings (subject to optometry sublimit)	
Paid from available savings	Subject to frequency limits and Managed Care protocols
Paid from available savings	
R25 570 per family, in and out-of-hospital	Pre-authorisation required
R1 560 co-payment per scan event except for PMB	
In and out-of-hospital consultations (included in the mental health hospitalisation benefit)	Limited to R17 070 per family
Covered at the Bonitas Dental Tariff	Managed Care protocols apply
2 annual check-ups per beneficiary (once every 6 months)	
Managed Care protocols apply	
1 per beneficiary, every 3 years	
2 annual scale and polish treatments per beneficiary (once every 6 months)	Fissure sealants are only covered for children under 16 years
Fluoride treatments are only covered for children from age 5 and younger than 16 years	
Benefit for fillings is granted once per tooth, every 2 years	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	

<b>BONFIT SELECT</b>	
100% towards the cost of clear lenses, limited to R445 per lens, per beneficiary, at a non-network provider	
100% towards the cost of clear lenses, limited to R770 per lens, per beneficiary, at a non-network provider	
Paid from available savings (subject to optometry sublimit)	
Paid from available savings (subject to optometry sublimit)	
Paid from available savings	Subject to frequency limits and Managed Care protocols
PMB only	
Paid from available savings	Pre-authorisation required
In and out-of-hospital consultations (included in the mental health hospitalisation benefit)	PMB consultations only
Covered at the Bonitas Dental Tariff	Managed Care protocols apply
2 annual check-ups per beneficiary (once every 6 months)	
No benefit	
No benefit	
2 annual scale and polish treatments per beneficiary (once every 6 months)	Fissure sealants are only covered for children under 16 years
Fluoride treatments are only covered for children from age 5 and younger than 16 years	
No benefit	

All claims are paid at the Bonitas Rate, unless otherwise stated. All benefits and limits are per calendar year, unless otherwise stated. Managed Care protocols apply. Benefits have been approved by the Council for Medical Schemes.

<b>ROOT CANAL THERAPY AND EXTRACTIONS</b>
<b>SPECIALISED DENTISTRY</b>
<b>SURGERY IN THE DENTAL CHAIR</b>
<b>HOSPITALISATION (GENERAL ANAESTHETIC)</b>
<b>INHALATION SEDATION IN DENTAL ROOMS (LAUGHING GAS)</b>
<b>MODERATE/DEEP SEDATION IN DENTAL ROOMS (IV CONSCIOUS)</b>

Managed Care protocols apply	Benefit for root canal includes all teeth except primary teeth and permanent molars
Normal extractions included	Surgical extractions not covered
Managed Care protocols apply	Pre-authorisation required
For the removal of impacted wisdom teeth only	Managed Care protocols apply
Covered at the Bonitas Dental Tariff	
A co-payment of R5 000 per admission applies for the removal of impacted wisdom teeth only	Pre-authorisation required
Managed Care protocols apply	
Managed Care protocols apply	
Limited to extensive conservative dental treatment only	Managed Care protocols apply
Pre-authorisation required	

No benefit	
Managed Care protocols apply	Pre-authorisation required
No benefit	
PMB only	Pre-authorisation required
Managed Care protocols apply	A 30% co-payment applies for non-network admissions
No benefit	
Limited to extensive conservative dental treatment only	Managed Care protocols apply
Pre-authorisation required	

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# CHRONIC BENEFITS

BonSave and BonFit Select ensure that you are covered for the 27 Prescribed Minimum Benefits listed below. You must use Pharmacy Direct, our Designated Service Provider, to get your medicine. If you choose not to use Pharmacy Direct or if you choose to use medicine that is not on the formulary, you will have to pay a 40% co-payment

**BONSAVE**

**&**

**BONFIT SELECT**

## PRESCRIBED MINIMUM BENEFITS COVERED

1.	Addison's Disease
2.	Asthma
3.	Bipolar Mood Disorder
4.	Bronchiectasis
5.	Cardiac Failure
6.	Cardiomyopathy
7.	Chronic Obstructive Pulmonary Disease
8.	Chronic Renal Disease
9.	Coronary Artery Disease

10.	Crohn's Disease
11.	Diabetes Insipidus
12.	Diabetes Type 1
13.	Diabetes Type 2
14.	Dysrhythmias
15.	Epilepsy
16.	Glaucoma
17.	Haemophilia
18.	HIV/AIDS

19.	Hyperlipidaemia
20.	Hypertension
21.	Hypothyroidism
22.	Multiple Sclerosis
23.	Parkinson's Disease
24.	Rheumatoid Arthritis
25.	Schizophrenia
26.	Systemic Lupus Erythematosus
27.	Ulcerative Colitis

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# ADDITIONAL BENEFITS

We believe in giving you more value. The following benefits are in addition to your day-to-day and other benefits.

## CONTRACEPTIVES

- R1 660 per family (for women aged up to 50)
- You must use the Designated Service Provider for pharmacy-dispensed contraceptives
- If you choose not to use a Designated Service Provider, a 40% co-payment applies



## CHILDCARE

- Hearing screening for newborns, in or out-of-hospital
- Congenital hypothyroidism screening for infants under 1 month old
- Babyline - 24/7 helpline for medical advice for children under 3 years
- 2 Paediatrician or GP consultations per child under 1 year
- 1 consultations per child between ages 1 and 2
- 1 GP consultations per child between ages 2 and 12
- Immunisation according to Expanded Programme on Immunisation in South Africa up to the age of 12

## WELLNESS BENEFITS

- 1 wellness screening per beneficiary at a participating pharmacy, biokineticist or a Bonitas wellness day
- Wellness screening includes the following tests:
  - Blood pressure
  - Glucose
  - Cholesterol
  - Body Mass Index
  - Waist-to-hip ratio



## ADDITIONAL GP CONSULTATIONS

(INCLUDING VIRTUAL CARE CONSULTATIONS)

### BONSAVE

- If you use all your savings for the year, your family will still get a maximum of 6 GP consultations (limited to 3 per beneficiary) paid at the Bonitas Rate

### BONFIT SELECT

- If you use all your savings for the year, your family will still get a maximum of 2 GP consultations (limited to 1 per beneficiary) paid at the Bonitas Rate

## MATERNITY CARE

### BONSAVE

- 6 antenatal consultations with a gynaecologist, GP or midwife
- R1 280 for antenatal classes
- 2 2D ultrasound scans
- 1 amniocentesis
- 4 consultations with a midwife after delivery (1 of these can be used for a consultation with a lactation specialist)

### BONFIT SELECT

- 6 antenatal consultations with a gynaecologist, GP or midwife
- Antenatal classes paid from available savings
- 2 2D ultrasound scans
- 1 amniocentesis
- 4 consultations with a midwife after delivery (1 of these can be used for a consultation with a lactation specialist)

### Register for the maternity programme and get:

- Access to 24/7 maternity advice line
- Dedicated maternity nurse/midwife to support and advise you throughout your pregnancy
- Access to articles regarding common pregnancy concerns
- Pregnancy education emails and SMSs sent to you weekly
- Online antenatal classes to prepare you for the birth and what to expect when you get home
- Baby bag including baby care essentials



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## PREVENTATIVE CARE

- 1 HIV test and counselling per beneficiary
- 1 flu vaccine per beneficiary
- 1 mammogram every 2 years, for women over 40
- 1 pap smear every 3 years, for women between ages 21 and 65
- 1 prostate screening antigen test for men between ages 45 and 69
- 1 pneumococcal vaccine every 5 years, for members aged 65 and over
- 1 stool test for colon cancer, for members between ages 50 and 75
- Dental fissure sealants to prevent tooth decay on permanent teeth for children under 16



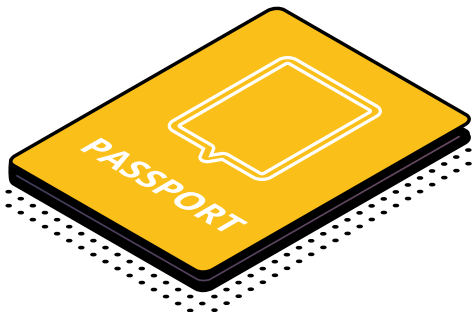
## INTERNATIONAL TRAVEL BENEFIT

*You must register for this benefit prior to departure*

- Up to R10 million cover per family for medical emergencies when you travel outside South Africa
- Additional benefit for compulsory COVID-19 test and medical quarantine up to R10 000 per person

## AFRICA BENEFIT

- In and out-of-hospital treatment covered at 100% of the Bonitas rate
- Subject to authorisation



# NEW

*Replaces Wellness Extender*



## BENEFIT BOOSTER

*Available after completing a wellness screening or online wellness assessment*

R1 310 per family which can be used for out-of-hospital claims for:

- GP and specialist consultations
- Acute and over-the-counter medicine
- Biokineticist and physiotherapist consultations and treatment
- Paramedical services such as dietician, speech and occupational therapy consultations and treatment
- Alternative healthcare such as homeopathic consultations and treatment and acupuncture
- Non-surgical procedures and tests e.g. wart removal
- X-rays
- Blood tests

*Child dependants can access the Benefit Booster once an adult beneficiary has completed a wellness screening or online wellness assessment*

*(All claims are paid at the Bonitas Rate)*

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# MANAGED CARE PROGRAMMES

We believe in giving you more value. The following benefits are in addition to your day-to-day and other benefits.



## HOME-BASED CARE (provided by Quro Medical Services)

Our home-based care offers:

- An alternative to general ward admission, allowing you to receive quality, safe healthcare in the comfort of your home
- Care for any acute condition deemed appropriate by your treating doctor i.e. pneumonia, COVID-19, Blood clots (DVT)
- A team of trained healthcare professionals that'll bring all the essential elements of hospital care to your home
- Remote Patient Monitoring including an admission cycle of 5 days, 24/7 vital signs monitoring, continuous virtual visits and clinical support, continuous care from a doctor, short-term oxygen (as prescribed) and ambulance services
- Hospital-at-Home – this includes remote patient monitoring, daily visits for 3 days, blood tests, wound dressings, medication/fluids via a drip, allied healthcare services and physiotherapy (as prescribed)



## DIABETES MANAGEMENT

- Empowers you to make the right decisions to stay healthy
- Provides cover for the tests required for the management of diabetes as well as other chronic conditions
- Offers access to diabetes doctors, dieticians and podiatrists
- Gives access to a dedicated Health Coach to answer any questions you may have
- Offers a personalised care plan for your specific needs
- Helps you track the results of the required tests
- Provides education to help you understand your condition better



## BACK AND NECK

- Helps manage severe back and neck pain
- Includes assistance from doctors, physiotherapists and biokineticists
- Gives access to a home care plan to maintain long-term results
- Highly effective and low-risk, with an excellent success rate
- Offers a personalised treatment plan for up to 6 weeks, including assistance from doctors, physiotherapists and biokineticists
- We cover the cost of the programme
- Uses the DBC network
- Access to the eDBC app for digital coaching solutions and home-based care - including two exercise sessions a week



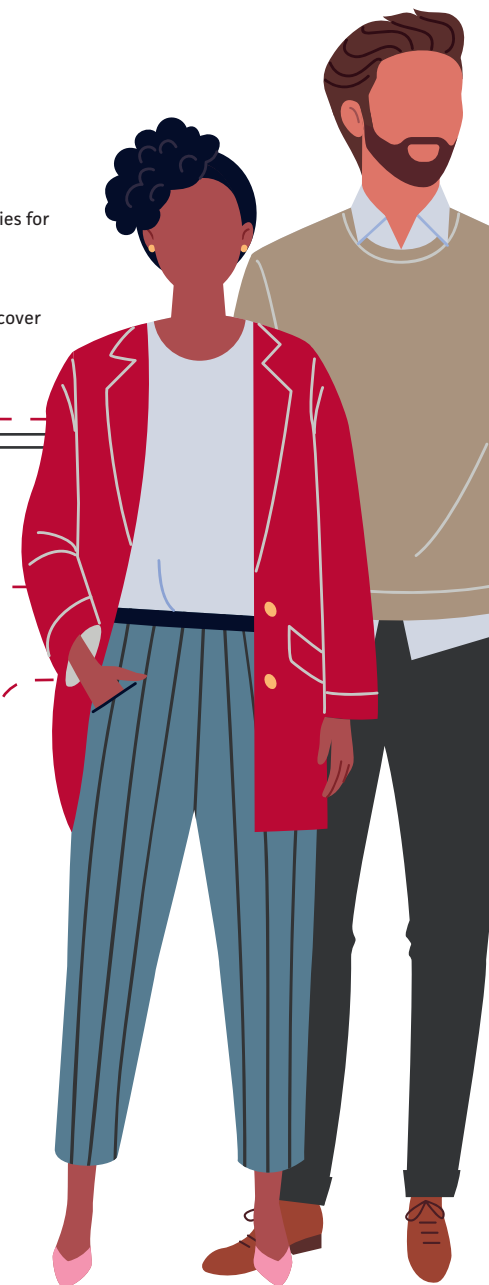
## CANCER

- Puts you first, offering emotional and medical support
- Liaises with your doctor to ensure your treatment plan is clinically appropriate to meet your needs
- Access to a social worker for you and your loved ones
- Uses the Bonitas Oncology Medicine Network (20% co-payment applies for use of a non-network provider)
- Delivers cost-effective care of the highest quality
- Matches the treatment plan to your benefits to ensure you have the cover you need
- Uses the Bonitas Oncology Network of specialists



## HIV/AIDS

- Provides you with appropriate treatment and tools to live a normal life
- Treatment and prevention of opportunistic infections such as pneumonia, TB and flu
- Offers HIV-related consultations to visit your doctor to monitor your clinical status
- Offers access to telephonic support from doctors
- Covers medicine to treat HIV (including drugs to prevent mother-to-child transmission and infection after sexual assault or needle-stick injury)
- Covers regular blood tests to monitor disease progression, response to therapy and to detect possible side-effects of treatment
- Gives ongoing patient support via a team of trained and experienced counsellors
- Helps in finding a registered counsellor for emotional support



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# IN-HOSPITAL BENEFITS

## BONSAVE

This benefit offers cover for major medical events that result in a beneficiary being admitted to hospital. Members have access to cover at a private hospital.

Pre-authorisation is required. A co-payment may apply to specific admissions and/or procedures. Managed Care protocols apply.

## BONFIT SELECT

This benefit offers cover for major medical events that result in a beneficiary being admitted to hospital. Members have access to cover at a private hospital.

Pre-authorisation is required. A co-payment may apply to specific admissions and/or procedures. Managed Care protocols apply.

Please note: On the BonFit Select option you must use a hospital on the BonFit Select Network or you will have to pay a 30% co-payment.

<b>SPECIALIST CONSULTATIONS/TREATMENT</b>
<b>GP CONSULTATIONS/TREATMENT</b>
<b>BLOOD TESTS AND OTHER LABORATORY TESTS</b>
<b>X-RAYS AND ULTRASOUNDS</b>
<b>MRI<sub>s</sub> AND CT SCANS</b> (SPECIALISED RADIOLOGY)
<b>CATARACT SURGERY</b>
<b>ALLIED MEDICAL PROFESSIONALS</b> (SUCH AS DIETICIAN, SPEECH AND OCCUPATIONAL THERAPIST)
<b>PHYSIOTHERAPY, PODIATRY AND BIOKINETICS</b>
<b>INTERNAL PROSTHESIS</b>
<b>MENTAL HEALTH HOSPITALISATION</b>

Unlimited, network specialists covered in full at the Bonitas Rate	Unlimited, non-network specialists paid at 100% of the Bonitas Rate
Unlimited, covered at 100% of the Bonitas Rate	
Unlimited, covered at 100% of the Bonitas Rate	
Unlimited, covered at 100% of the Bonitas Rate	
R25 570 per family, in and out-of-hospital	Pre-authorisation required
R1 560 co-payment per scan event except for PMB	
You must use a Designated Service Provider, or a R6 230 co-payment will apply	
Subject to available savings, except for PMB	Covered at the Bonitas Rate
Subject to referral by treating practitioner	
Subject to available savings, except for PMB	Covered at the Bonitas Rate
Subject to referral by treating practitioner	
R34 520 per family (no cover for joint replacement except for PMB)	Managed Care protocols apply
R34 610 per family	No cover for physiotherapy for mental health admissions

Unlimited, network specialists covered in full at the Bonitas Rate	Unlimited, non-network specialists paid at 100% of the Bonitas Rate
Unlimited, covered at 100% of the Bonitas Rate	
Unlimited, covered at 100% of the Bonitas Rate	
Unlimited, covered at 100% of the Bonitas Rate	
R17 270 per family	Pre-authorisation required
R1 560 co-payment per scan event except for PMB	
You must use a Designated Service Provider, or a R6 230 co-payment will apply	
Subject to available savings, except for PMB	Covered at the Bonitas Rate
Subject to referral by treating practitioner	
Subject to available savings, except for PMB	Covered at the Bonitas Rate
Subject to referral by treating practitioner	
PMB only	Managed Care protocols apply
R34 610 per family	No cover for physiotherapy for mental health admissions
You must use a Designated Service Provider or a 30% co-payment will apply	

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<b>TAKE-HOME MEDICINE</b>
<b>PHYSICAL REHABILITATION</b>
<b>ALTERNATIVES TO HOSPITAL</b> (HOSPICE, STEP-DOWN FACILITIES)
<b>PALLIATIVE CARE</b> (ONCOLOGY ONLY)
<b>CANCER TREATMENT</b>
<b>CANCER MEDICINE</b>
<b>ORGAN TRANSPLANTS</b>
<b>KIDNEY DIALYSIS</b>
<b>HIV/AIDS</b>
<b>DAY SURGERY PROCEDURES</b> (APPLIES TO SELECTED PROCEDURES)

<b>PROCEDURE CO-PAYMENTS</b> (SUBJECT TO PRE-AUTHORISATION)
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<b>BONSAVE</b>	
Limited to a 7-day supply up to R420 per hospital stay	
R54 360 per family	
R18 130 per family	Managed Care protocols apply
Unlimited	Including hospice/private nursing, home oxygen, pain management, psychologist and social worker support
R344 500 per family, unless PMB	Sublimit of R51 000 per beneficiary for Brachytherapy
Subject to MPL and preferred product list	You must use a Designated Service Provider, or a 20% co-payment will apply
Unlimited	Sublimit of R34 520 per beneficiary for corneal grafts
Unlimited	You must use a Designated Service Provider, or a 20% co-payment will apply
Unlimited, if you register on the HIV/AIDS programme	Chronic medicine must be obtained from Designated Service Provider
You must use a network day hospital or a R2 290 co-payment will apply	

<b>R1 630 co-payment</b>	<b>R4 140 co-payment</b>	<b>R8 150 co-payment</b>
<ol style="list-style-type: none"> <li>Colonoscopy</li> <li>Conservative Back Treatment</li> <li>Cystoscopy</li> <li>Facet Joint Injections</li> <li>Flexible Sigmoidoscopy</li> <li>Functional Nasal Surgery</li> <li>Gastroscopy</li> <li>Hysteroscopy (not Endometrial Ablation)</li> <li>Myringotomy</li> <li>Tonsillectomy and Adenoidectomy</li> <li>Umbilical Hernia Repair</li> <li>Varicose Vein Surgery</li> </ol>	<ol style="list-style-type: none"> <li>Arthroscopy</li> <li>Diagnostic Laparoscopy</li> <li>Laparoscopic Hysterectomy</li> <li>Percutaneous Radiofrequency Ablations (Percutaneous Rhizotomies)</li> </ol>	<ol style="list-style-type: none"> <li>Laparoscopic Pyeloplasty</li> <li>Laparoscopic Radical Prostatectomy</li> <li>Nissen Fundoplication (Reflux Surgery)</li> </ol>

<b>BONFIT SELECT</b>	
Limited to a 7-day supply up to R420 per hospital stay	
R54 360 per family	
R18 130 per family	Managed Care protocols apply
Unlimited	Including hospice/private nursing, home oxygen, pain management, psychologist and social worker support
R165 500 per family, unless PMB	Sublimit of R51 000 per beneficiary for Brachytherapy
Subject to MPL and preferred product list	You must use a Designated Service Provider, or a 20% co-payment will apply
Unlimited	PMB only for corneal grafts
Unlimited	You must use a Designated Service Provider, or a 20% co-payment will apply
Unlimited, if you register on the HIV/AIDS programme	Chronic medicine must be obtained from Pharmacy Direct
You must use a network day hospital or a R4 570 co-payment will apply	

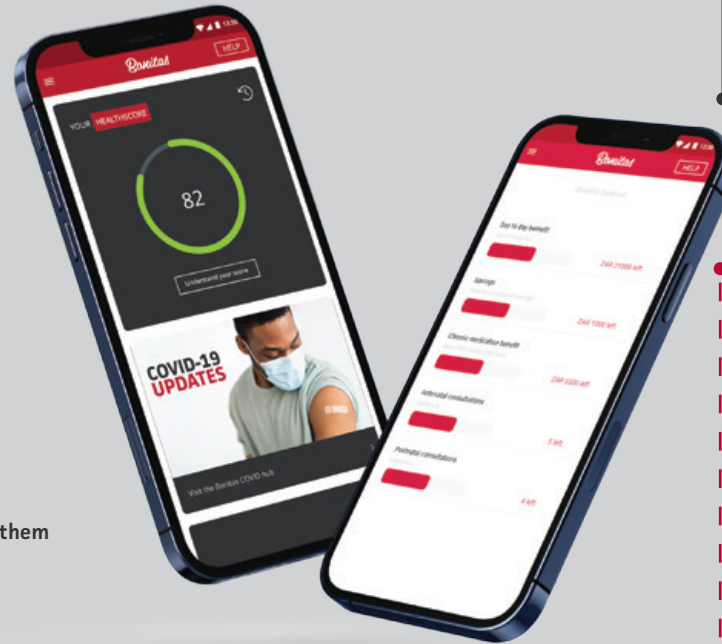
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# DOWNLOAD THE NEW BONITAS MEMBER APP

## MANAGING YOUR MEDICAL AID IS EASY

With the new app you can:

- Check your benefits
- Find a network provider
- Have a virtual consultation with a GP
- See the balance of your Medical Savings Account
- Submit your medication script to Pharmacy Direct for delivery
- Chat to a call centre agent
- Access and download your documents i.e. tax certificates and monthly statements
- Save and access information for emergency contacts
- Access your digital membership card
- Update important information for you and everyone on your plan
- Create a medicine list with the medicine scanner and get reminders of when to take them



**GET IN TOUCH WITH  
US ON WHATSAPP  
0600 702 491**

This easy and reliable platform gives you another self-service channel to access your medical aid information and get in touch with us.

You can:

- Get your statements
- Save your electronic membership card
- View claims for the last 90 days
- Download your tax certificate or certificate of membership
- Chat live to resolve queries



## AMP UP YOUR WELLNESS!

AMP is a brand-new section in the app which aims to change the health and wellness behaviour of our members and beneficiaries, guiding you to a healthier you. It's absolutely free and available to all members and beneficiaries who are 18 years and older.

- Create your own avatar
- Get a health score for yourself and each of your dependants
- Receive nudges to educate and guide you to a healthier lifestyle
- Earn badges (and bragging rights!) for completing health questionnaires or a health risk assessment
- Get access to bespoke eating plans from EatForLife
- Access virtual gym sessions
- Access the AVO store which offers:
  - Lifestyle rewards
  - Discounted deals from more than 20 000 different merchants
  - 1% cashback on all purchases
  - Free delivery on orders over R450

**DOWNLOAD NOW!**

