



BONSTART PLUS

EDGE

2022

Medical Aid for South Africa

Bonitas

WHAT YOU PAY

MAIN MEMBER
R1 670

ADULT DEPENDANT
R1 587

CHILD DEPENDANT
R735

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. 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

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.

VIRTUAL CARE GP AND NURSE CONSULTATIONS	Unlimited network GP and Nurse Virtual Care consultations	
GP CONSULTATIONS	You must complete the online wellness assessment or wellness screening to access unlimited GP consultations	Authorisation required after 10th visit
	R55 co-payment per visit	2 non-network GP consultations for emergencies per family
GP-REFERRED ACUTE MEDICINE, X-RAYS AND BLOOD TESTS	Limited to R2 800 per family	Subject to the radiology and pathology formulary
	For acute medicine: <ul style="list-style-type: none"> • A 20% co-payment will apply per script • You must use a Bonitas Pharmacy Network or a 40% co-payment will apply • Subject to medicine formulary use 	
OVER-THE-COUNTER MEDICINE	Limited to R145 per event	Maximum of R690 per family, per year
	Formulary and Bonitas Pharmacy Network applies	40% co-payment for non-network use
SPECIALIST CONSULTATIONS (YOU MUST GET A REFERRAL FROM YOUR TREATING PRACTITIONER)	Limited to 2 visits per family up to R2 000	Including all acute medicine, basic radiology, specialised radiology and pathology prescribed by the specialist
	R110 co-payment per visit	Subject to GP referral
OPTOMETRY	1 eye test per beneficiary at a network provider	R55 co-payment
	Limited to R350 at a non-network provider	
BASIC DENTISTRY	1 dental consultation per beneficiary	R55 co-payment
	Managed Care protocols apply	1 annual scale and polish treatment per beneficiary
	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
GENERAL APPLIANCES (SUCH AS WHEELCHAIRS AND CRUTCHES)	R5 550 per family	
PHYSIOTHERAPY	4 consultations per beneficiary for sport-related injuries	R55 co-payment
	You must get a referral from your network GP or medical specialist	
MENTAL HEALTH	PMB only	
HIV/AIDS	Unlimited, if you register on the HIV/AIDS programme	Chronic medicine must be obtained from the Designated Service Provider, or a 30% upfront co-payment will apply

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CHRONIC BENEFITS

BonStart Plus ensures that you are covered for the **27** Prescribed Minimum Benefits listed below on the applicable formulary. 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.

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 290 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

MATERNITY CARE

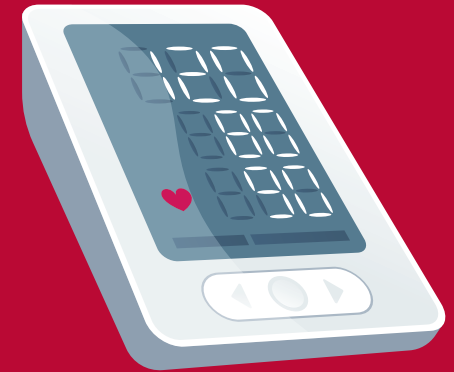
- 6 antenatal consultations with a gynaecologist, GP or midwife
- 2 2D ultrasound scans
- 1 amniocentesis
- 4 consultations with a midwife after delivery (1 of these can be used for a consultation with a lactation specialist)
- Access to 24/7 maternity advice line
- Dedicated maternity nurse/midwife 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

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

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
 - Body Mass Index
 - Glucose
 - Waist-to-hip ratio
 - Cholesterol



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PREVENTATIVE CARE

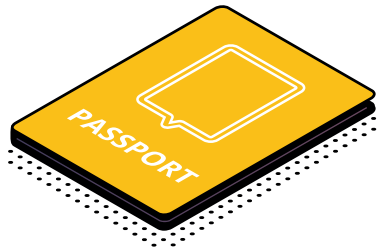
- 1 HIV test and counselling per beneficiary
- 1 flu vaccine per beneficiary
- 1 pap smear every 3 years, for women between ages 21 and 65
- Dental fissure sealants to prevent tooth decay on permanent teeth for children under 16



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

R940 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)

MANAGED CARE PROGRAMMES

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



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



CANCER

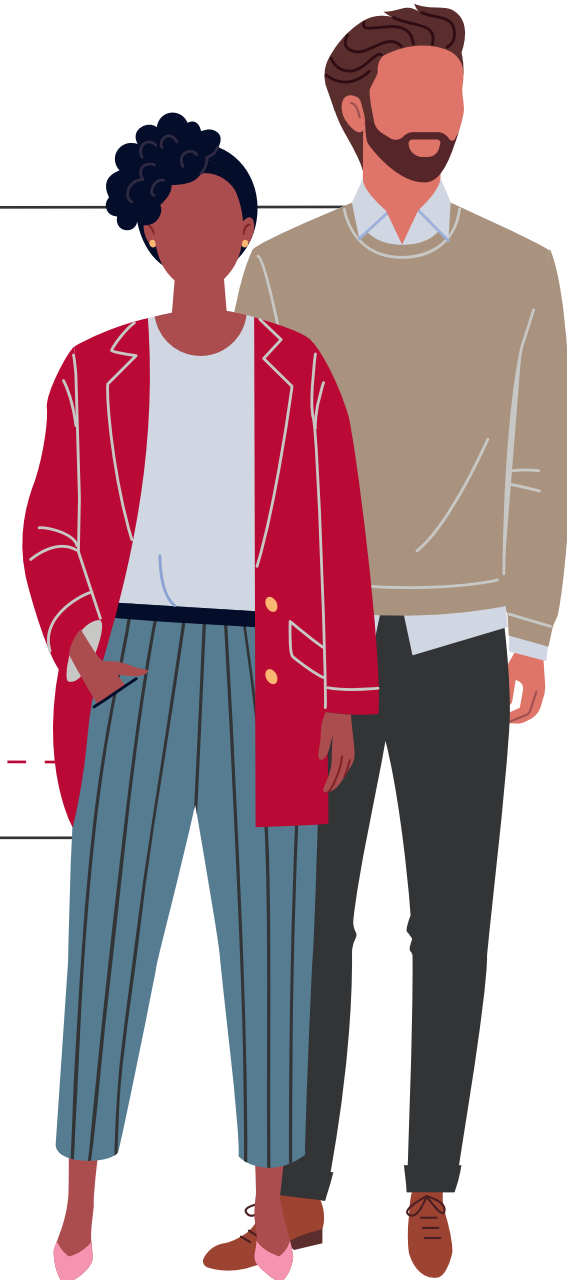
- Puts you first, offering emotional and medical support
- Liaises with your doctor to ensure your treatment plan is clinically appropriate to meet your needs
- Access to a social worker for you and your loved ones
- Uses the Bonitas Oncology Medicine Network (20% co-payment applies for use of a non-network 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



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)



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IN-HOSPITAL BENEFITS

This benefit offers cover for major medical events that result in a beneficiary being admitted to hospital. Members have access to the BonStart Hospital Network. Pre-authorisation is required. Managed Care protocols apply.

Please note: On this option you must use a hospital on the BonStart Hospital Network or you will have to pay a R10 650 co-payment.

PRIVATE HOSPITAL CARE	Unlimited, at the BonStart Hospital Network	R1 000 co-payment per admission, except for PMB emergencies
GP CONSULTATIONS	Unlimited, covered at 100% of the Bonitas Rate	
SPECIALIST CONSULTATIONS	Unlimited, covered at 100% of the Bonitas Rate	
BLOOD TESTS	Unlimited, covered at 100% of the Bonitas Rate	
BLOOD TRANSFUSIONS	Unlimited, covered at 100% of the Bonitas Rate	
X-RAYS AND ULTRASOUNDS	Unlimited, covered at 100% of the Bonitas Rate	
MRI_s AND CT SCANS (SPECIALISED RADIOLOGY)	R16 070 per family	R2 000 co-payment per scan event except for PMB
	Pre-authorisation required	
ALLIED MEDICAL PROFESSIONALS (SUCH AS DIETICIAN, SPEECH AND OCCUPATIONAL THERAPIST)	PMB only	Subject to referral by treating practitioner
	PMB only	Subject to referral by treating practitioner
PHYSIOTHERAPY AND BIOKINETICS	Unlimited on the BonStart Hospital Network	R10 650 co-payment at non-network hospitals
	Emergency approved C-sections only	Managed Care protocols apply
CHILD BIRTH	Limited to R46 290 per family except for PMB	
NEONATAL CARE	R16 070 per family (no cover for joint replacement except for PMB)	Managed Care protocols apply
INTERNAL PROSTHESIS	Pre-authorisation required	
EXTERNAL PROSTHESIS	PMB only	

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MENTAL HEALTH HOSPITALISATION	PMB only	You must use a Designated Service Provider
	No cover for physiotherapy for mental health admissions	
TAKE-HOME MEDICINE	Limited to a 7-day supply up to R390 per hospital stay	
PHYSICAL REHABILITATION	R50 600 per family	Pre-authorisation required
ALTERNATIVES TO HOSPITAL (HOSPICE, STEP-DOWN FACILITIES)	R16 880 per family	Pre-authorisation required
	Managed Care protocols apply	
PALLIATIVE CARE (ONCOLOGY ONLY)	Unlimited	Includes hospice/private nursing, home oxygen, pain management, psychologist and social worker support
	Managed Care protocols apply	
CATARACT SURGERY	You must use a Designated Service Provider, or a R6 000 co-payment will apply	
DENTISTRY	PMB only	
CANCER TREATMENT	PMB only	Pre-authorisation required
	You must use a Designated Service Provider, or a 30% upfront co-payment will apply	
CANCER MEDICINE	Subject to MPL and preferred product list	You must use a Designated Service Provider, or a 20% co-payment will apply
ORGAN TRANSPLANTS	PMB only	Pre-authorisation required
	You must use a Designated Service Provider, or a 30% upfront co-payment will apply	
KIDNEY DIALYSIS	PMB only	Pre-authorisation required
	You must use a Designated Service Provider, or a 30% upfront co-payment will apply	
HIV/AIDS	Unlimited, if you register on the HIV/AIDS programme	Chronic medicine must be obtained from the Designated Service Provider, or a 30% upfront co-payment will apply
DAY SURGERY PROCEDURES (APPLIES TO SELECTED PROCEDURES)	You must use a network day hospital or a R10 650 co-payment will apply	

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PROCEDURE CO-PAYMENTS
(SUBJECT TO PRE-AUTHORISATION)

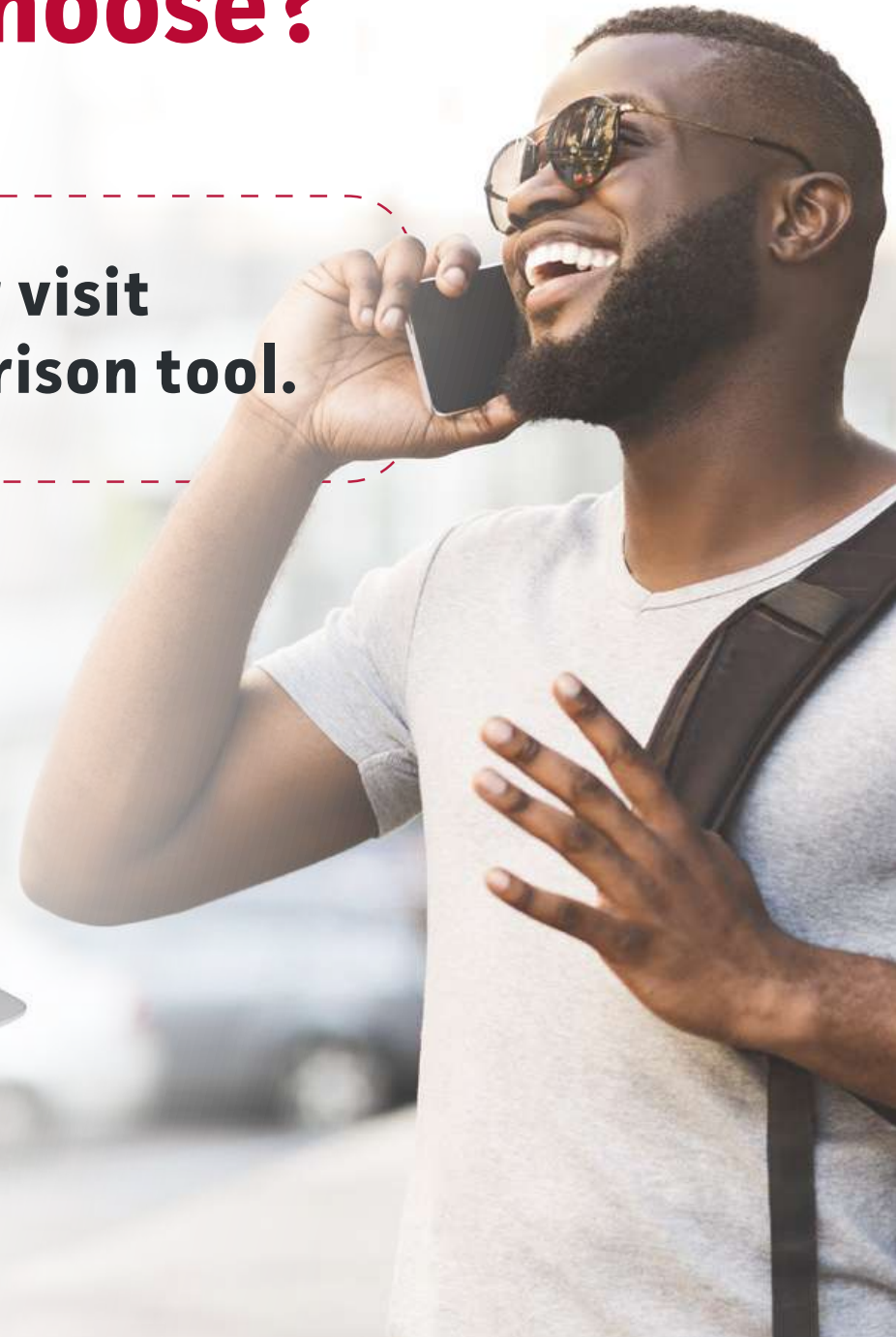
SURGICAL PROCEDURES THAT ARE NOT COVERED

R2 550 co-payment (Applies in addition to non-network hospital co-payment)	
1. Arthroscopy (when done as part of a surgical procedures)	
2. Laparoscopic Hysterectomy	
Back and neck surgery	Joint replacement surgery
Correction of Hallux Valgus	Functional nasal surgery
Varicose vein surgery	Oesophageal reflux and hernia repair surgery
Non-cancerous breast conditions	Gastrosopies, colonoscopies and all other endoscopies
Nail disorders	Knee and shoulder surgery
Skin disorders, including benign growths and lipomas	In-hospital dental surgery
Healthcare services for which admission to hospital is not necessary	

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Not sure which plan to choose?

Speak to your financial advisor or visit www.bonitas.co.za and try our comparison tool.

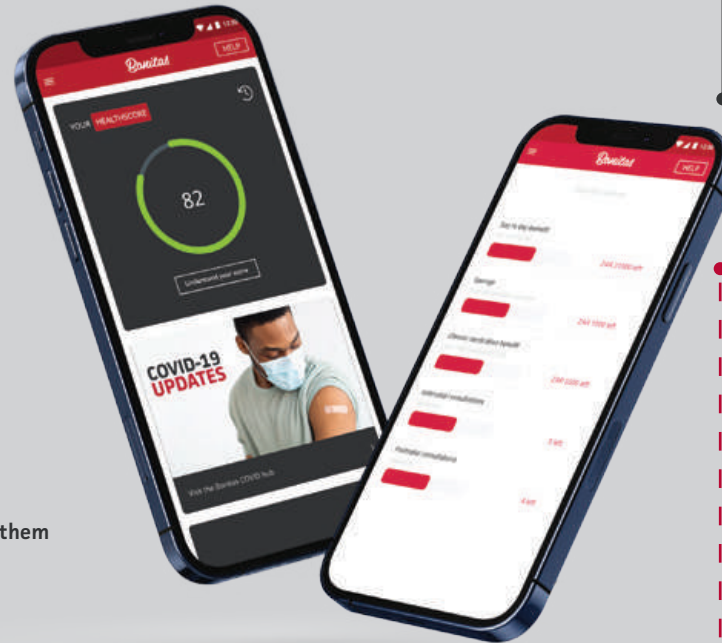


DOWNLOAD THE NEW BONITAS MEMBER APP

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!

