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MediCore

# 2021 Benefits & Contribution Adjustments

BENEFIT DESCRIPTION	
Alternatives to Hospitalisation: Physical Rehabilitation	Limit increased to <b>R40 600</b> per family
Alternatives to Hospitalisation: Terminal Care Benefit	Sub-limit increased to <b>R37 300</b> per family
Family Practitioner Consultations and Visits: Out-of-Hospital Includes Telephonic and Video Consultations *Medshield Family Practitioner (FP) Network applies	<b>2 visits</b> per beneficiary from the Overall Annual Limit
Contraceptive Medication (Birth Control)	Limit increased to <b>R180</b> per month per female beneficiary
Flu Vaccine	Limit increased to <b>R100</b> per beneficiary
Maxillo-Facial and Oral Surgery	Limit increased to <b>R12 250</b> per family
Medication: Discharge from Hospital - TTO	Limit increased to <b>R350</b> per admission
Mental Health: In-Hospital	Limit increased to <b>R35 400</b> per family
Physiotherapy: In-Hospital	Limit increased to <b>R2 650</b> per beneficiary
Prosthesis and Devices Internal	Limit increased to <b>R34 000</b> per family
Prosthesis and Devices Internal: Hips and Knees	Sub-limit increased to <b>R32 000</b> per beneficiary
Specialised Radiology (In and Out-of-Hospital)	Limit increased to <b>R9 550</b> per family



**MEDSHIELD**  
medical scheme

MEDICORE	MONTHLY CONTRIBUTION
Principal Member	R2 763
Adult Dependand	R2 337
Child*	R639

\*Contribution rate is applicable to the member's first, second and third biological or legally adopted children only, excluding students.

THE FOLLOWING SERVICES WILL ATTRACT UPFRONT CO-PAYMENTS:	
Non-PMB Specialised Radiology	10% upfront co-payment
Non-PMB Internal Prosthesis and Devices	25% upfront co-payment
Voluntary use of a non-Medshield Network Hospital	25% upfront co-payment
Voluntary use of a non-Medshield Network Hospital - Mental Health	25% upfront co-payment
Voluntary use of a non-Medshield Network Hospital - Organ, Tissue and Haemopoietic stem cell (Bone marrow) transplant	25% upfront co-payment
Voluntary use of a non-DSP for HIV & AIDS related medication	40% upfront co-payment
Voluntary use of a non-DSP or a non-Medshield Pharmacy Network	40% upfront co-payment
Voluntarily obtained out of formulary medication	40% upfront co-payment
Voluntary use of a non-ICON provider - Oncology	40% upfront co-payment
Voluntary use of a non-DSP provider - Chronic Renal Dialysis	40% upfront co-payment

IN-HOSPITAL PROCEDURAL UPFRONT CO-PAYMENTS FOR NON-PMB	
Endoscopic procedures (refer to <b>Addendum B</b> )	R2 000 upfront co-payment
Hernia Repair (except in infants)	R3 000 upfront co-payment
Laparoscopic procedures	R4 000 upfront co-payment
Arthroscopic procedures	R4 000 upfront co-payment
Nissen Fundoplication	R5 000 upfront co-payment
Hysterectomy	R5 000 upfront co-payment
Functional Nasal surgery	R5 000 upfront co-payment
Back and Neck surgery	R8 000 upfront co-payment

Please note: Failure to obtain an authorisation prior to hospital admission or surgery and/or treatment (except for an emergency), will attract a 20% penalty, in addition to the above co-payments.

The Medshield Specialist Network list shall be as designated in writing by the Scheme from time to time.

Medshield Medical Scheme Rules indicate that a member is entitled to change from one benefit option to another provided that the change is made with effect 1 January of any financial year, therefore mid-year option changes are not permitted.