WE BELIEVE EVERYONE IS ENTITLED TO QUALITY HEALTHCARE.

Our products are simple and will help you access essential, yet often expensive medical treatment when you need it the most.

No matter which benefit option you take, SAMWUMED Medical Aid offers cover in full and as stipulated by Scheme Rules, for the diagnosis, treatment and care of an extensive range of medical conditions.

REASONS WHY SAMWUMED IS THE BEST MEDICAL AID FOR YOU
At SAMWUMED we keep things simple and easy, by offering two amazing products. **OPTION A** is our basic plan. **OPTION B** is our comprehensive plan. Both plans suitable for any family sizes. Choose the most suitable Option for you and your family’s needs.

SAMWUMED offers comprehensive Benefit options that will cover you for your primary and secondary medical needs including but not limited to:

**FIVE MAJOR SAMWUMED MEDICAL AID BENEFITS**

- COMPREHENSIVE PREVENTATIVE CARE BENEFITS AND EARLY DETECTION
- DAY TO DAY MEDICAL CARE
- CHRONIC ILLNESS BENEFITS
- HOSPITAL CARE
- MEDICAL EMERGENCIES

This option is suited for younger members and young families. Maybe you have young children, recently got married or planning to start a family. You and your spouse are young, fit and healthy. You enjoy the preventative care benefits programme and take responsibility for your health. You need moderate day-to-day medical care, but a comprehensive Maternity Benefit Programme and good Hospital Care are essential for your lifestyle.

This option is suited for middle and older members and their families. Getting older means you need more Day to Day Benefits, Chronic Illness Benefits and at times Hospital Care. You enjoy managing your health by taking advantage of Early Detection Tests. You’re also still responsible of taking care of your older children while they live at home as well as your extended family who are dependent on you.
COMPREHENSIVE PREVENTATIVE CARE AND EARLY DETECTION

Apart from ensuring our members do not find themselves in hospitals, the SAMWUMED Preventative Healthcare and early detection benefit provides members with an opportunity to take ownership of their own health as a means to better manage quality health outcomes which would ultimately result in lower medical aid premiums. Our amazing Preventative Healthcare Programmes includes the following screenings:

### PREVENTATIVE CARE PACKAGE

<table>
<thead>
<tr>
<th>AGE</th>
<th>SCREENING TEST</th>
<th>CONDITIONS</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults aged 18 years and older</td>
<td>Blood Pressure</td>
<td>Adults with sustained blood pressure (either treated or untreated) greater than 135/80 mm Hg or BMI in the overweight or obese ranges.</td>
<td>Up to one screening Pbpa</td>
</tr>
<tr>
<td>Adults</td>
<td>Type II diabetes</td>
<td></td>
<td>Up to one screening Pbpa</td>
</tr>
<tr>
<td>25 to 64 years</td>
<td>Total Blood Cholesterol</td>
<td>Males between 25-64 years of age. Females between 45-64 years of age. Persons with a family history of familial hypercholesterolemia, heart attacks and cholesterol problems.</td>
<td>Up to one screening Pbpa</td>
</tr>
<tr>
<td>11 to 24 years, 25 to 64 years, over 65 years old</td>
<td>Papanicolaou (Pap) test</td>
<td>Sexually active females or beginning at age 18. Chlamydia screen is recommended as part of this process. Teach clinical breast examination to &gt; 18</td>
<td>Up to one screening Pbpa</td>
</tr>
<tr>
<td></td>
<td>Chlamydia screening</td>
<td>This should be done concomitantly with Pap Smear.</td>
<td></td>
</tr>
<tr>
<td>Child bearing age</td>
<td>Folic acid</td>
<td>1 month before pregnancy and at least first 2 months of pregnancy</td>
<td>Up to 1 per month for the first 3 months of pregnancy</td>
</tr>
<tr>
<td>50 years and older</td>
<td>Faecal occult blood test</td>
<td>50 years and older (screening benefits for beneficiaries younger than 50 years subject to motivation and prior approval)</td>
<td>Up to one screening Pbpa</td>
</tr>
</tbody>
</table>

*Pbpa = per beneficiary per annum*

### MATERNITY BENEFIT PROGRAMME

Expecting moms can access the SAMWUMED Maternity Programme to help take better care of themselves and their unborn baby by taking advantage of a wide range of maternity preventative care and early detection benefits. Simply dial 0860 113 238 to register.

#### PREVENTION MATERNITY BENEFITS

- **Folic Acid Supplementation**: Receive for up to 3 Months
- **Ante Natal Consultations**: Receive Up To 8 Consultations Per Pregnancy
- **Vitamin Supplements**: Receive for up to 9 Months
- **HIV Screening**: Receive Up To 1 Test Per Pregnancy

#### EARLY DETECTION MATERNITY BENEFITS

- **HIV Screenings**: Receive Up To 1 Test Per Pregnancy
- **Papanicolaou PAP Smear**: Receive Up To 1 Pap Smear Per Pregnancy
- **Ultrasound**: Receive Up To 2 Scans Per Pregnancy

### EMPOWER WITH KNOWLEDGE

Packed with useful information and handy tips to maintain a healthy lifestyle, SAMWUMED members will receive a free print copy of the SAMWUMED Journal magazine bi-annually. Our publication promises to keep the entire family informed by offering relevant content relating to the health needs of SAMWUMED members.
**ALTERNATIVE HEALTH CARE**
Podiatrist Homeopath Naturopath Chiropractor
Included with GP consultations and visits.
Practitioners to be registered with the Health Professions Council of SA or Allied Health Professionals Council of South Africa.

**AMBULANCE SERVICES**
Road and Air
Designated Service Provider only.
Unlimited for emergency assistance only—case managed, and protocols apply.

**APPLIANCES**
Medical Surgical
M R 2,360.00
M1 R 3,310.00
M2 R 4,230.00
Subject to the submission of a clinical motivation with correct Tariff codes and costing for pre-authorisation by the Scheme.
Limits and cycles as per the Scheme’s list of approved appliances apply.

**DENTISTRY**
Basic (DSP only)
M R 2,930.00
M1 R 3,500.00
M2 R 4,860.00
M3+ R 5,860.00
Basic dentistry includes fillings, root canal treatments, scaling & polishing, extractions, fissure sealants, dentures and repairs (subject to prescribed cycles).

**GP CONSULTATIONS, VISITS AND PROCEDURES**
Doctor’s rooms or home
Family per annum receives up to:
M R 2,650.00
M1 R 4,540.00
M2 R 5,760.00
M3+ R 7,450.00
Beneficiary limit of
R 4,540.00 per annum.
Emergency treatment and procedures
Sub-limit of R 990.00 per family, per annum. This sub-limit is included with the GP consultations, visits and procedures limit.

**INFERTILITY**
Only PMB conditions.
Subject to State hospitals for Hysterosalpingogram (HSG) and Diagnostic Dilatation and Curettage (DD&C), State Protocols Apply.

**MEDICATION**
Prescribed, Dispensed or Acute
M R 1,500.00
M1 R 2,950.00
M2 R 4,420.00
M3+ R 5,900.00
Sub-limit of R 2,950.00 per beneficiary per annum.
Includes alternative healthcare medication as prescribed and must be registered with the Medicines Control Council; injections and related materials. Subject to Medicine Formularies and Exclusion Lists.

Primary Healthcare Benefit Programme
Condition specific benefits, sub limits and treatment plans apply.
Remind your pharmacist to include the appropriate ICD-10 diagnostic codes with all claims for this Programme. Limited to listed conditions and number of incidents per beneficiary per year as outlined below:

- Stomach pain, heartburn, indigestion (including reflux), 2
- Acute gastroenteritis: vomiting and diarrhea, 2
- Upper and lower respiratory tract infections, 3
- Oral and topical candidiasis: thrush/fungal or yeast infections, 2
- Helminthic infestation: worms, 2
- Headache, 4
- Bacterial conjunctivitis: eye infection, 2
- Urinary tract infection (acute uncomplicated cystitis), 1
- Urticaria: skin rashes, insect bites and stings, 2
- Treatment of wounds and/or infections of the skin/subcutaneous tissues (excl. post-operative wound care), 1
### MEDICATION

**Chronic Medication**
- Subject to Chronic Disease List (CDL) and Chronic Formulary and protocols apply.
- DTP medication not obtained from state subject to co-payment.
- Chronic medication not on the Chronic Formulary will incur a 25% co-payment.

**PAT: Over-the-counter medicine**
- Family per annum receives up to R 590.00.
- Sub-limit of R 120.00 per day.
- Subject to Medicine Formularies and Exclusion Lists.
- Included with prescribed, dispensed or acute medication limit.

### OPTICAL

**Frames/Lenses/Contact Lenses**
- R 4,180.00 per family, subject to prescribed cycles.
  - Sub-limit of R 1,790.00 per beneficiary per annum.
- Ophthalmologist visit subject to referral from Optometrist or GP.
- Exclusions apply, including but not limited to repairs. Spectacle lenses and contact lenses cannot be obtained simultaneously.

**Frames**
- Frames: Beneficiary receives up to R680.00.

**Lenses**
- White lenses: 100% of the lower cost or Optical Assistant Tariff. Photochromic lenses: 100% of the lower cost or Scheme Tariff up to a maximum of R 330.00 per pair and subject to a prescription of +0.50/-0.50 and above.
- Fixed or gradient tints up to 35%: 100% of the lower costs or Optical Association’s Tariff.

### MENTAL HEALTH SUBSTANCE DEPENDENCY

**Consultations/visits and procedures.**
- 100% of cost at DSP per family, per annum.
  - Included with In-Patient benefit.
  - Limited to PMB Conditions only.
- Clinical motivation required for authorisation of continued consultations after first two initial assessments.

**Hospitalisation**
- Referral from an Employee Assistance Programme (EAP) or GP required for substance dependency.
- Referral from specialist required for mental health conditions.
- PMB conditions unlimited at State Hospitals.

### OPTICAL (continued...)

**Eye Tests**
- Beneficiary per annum receives up to one consultation.
  - Subject to family limit.

### OUT-PATIENT BENEFITS

**Consultations, visits and procedures**
- M  R 1,270.00
- M1  R 1,690.00
- M2+  R 2,120.00
  - Subject to State Out-Patient facilities.

### PATHOLOGY

**Out-of-Hospital**
- Included with Specialist Benefit
- R 2,930.00 per family, per annum.
- Included with In-Patient benefit.

**In-Hospital**
- Clinical motivation required for authorisation of continued consultations after first two visits.
  - R 1,740.00 per family, per annum.
  - Included with In-Patient benefit.

### PHYSIOTHERAPY

**Out-of-Hospital**
- Included with Specialist benefit.
- Limited to PMB Conditions only.

**In-Hospital**
- Clinical motivation required for authorisation of continued consultations after first two visits.
  - R 1,740.00 per family, per annum.
  - Included with In-Patient benefit.

### PROSTHESSES

**Internal**
- R 22,750.00 per family, per annum.
  - Included with In-Patient benefit.
  - Subject to the submission of a clinical motivation and costing for pre-authorisation by the Scheme.
  - DSP is the State facility for joint replacements.

**External (including artificial eyes and limbs)**
- R 11,670.00 per family, per annum.
  - Included with In-Patient benefit.
  - Subject to the submission of a clinical motivation and costing for pre-authorisation by the Scheme.

### RADIOLOGY

**GENERAL**
- (In and Out-of-hospital)
  - R 1,470.00 per family, per annum
  - Includes two ultrasounds per pregnancy.
  - Limited to PMB conditions only.

**SPECIALISED**
- R 7,080.00 Included with In-Patient benefit.
  - Limited to PMB protocols only.

### REMEDIAL THERAPY

**Occupational, Speech Therapy, Audiology & Dieticians**
- Included with Specialist benefit for In- or Out-of-hospital treatment.

### SPECIALIST CONSULTATIONS, VISITS AND PROCEDURES

**Out-of-Hospital**
- Family per annum receives up to:
  - M  R 3,390.00
  - M1  R 5,020.00
  - M2  R 6,800.00
  - M3+  R 10,050.00
  - Beneficiary limit of R 5,020.00 per annum.
  - Subject to referral from a General Practitioner.
### Specialist Consultations, Visits and Procedures (continued...)

<table>
<thead>
<tr>
<th>Category</th>
<th>Sub-Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HOSPITALISATION</strong></td>
<td>In-Hospital</td>
<td>Included with In-Patient Benefit</td>
</tr>
<tr>
<td><strong>IN-PATIENT</strong></td>
<td></td>
<td><strong>R 500,000.00 per family per annum</strong> Subject to pre-authorisation.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Unlimited benefits for PMB conditions subject to pre-authorisation at a DSP State Facility as DSP for joint replacements, cardiac and abdominal surgery Laparoscopic surgery excluded. &quot;Take Home&quot; medication limited to 7 days’ supply.</td>
</tr>
<tr>
<td><strong>ALTERNATIVES TO HOSPITALISATION</strong></td>
<td>Private nursing Frail care Hospice Step-down facility</td>
<td>Included with In-Patient benefit.</td>
</tr>
<tr>
<td><strong>BLOOD TRANSFUSION SERVICES</strong></td>
<td></td>
<td>Included with In-Patient benefit.</td>
</tr>
<tr>
<td><strong>RENAL DIALYSIS</strong></td>
<td></td>
<td>Included with In-Patient benefit. Subject to State hospitals. PMB only.</td>
</tr>
<tr>
<td><strong>ORGAN TRANSPLANT</strong></td>
<td></td>
<td>Scheme Rules and treatment plans apply. PMB Conditions only Pre authorisation required</td>
</tr>
<tr>
<td>Out-of-Hospital</td>
<td></td>
<td>Medication to be obtained from State hospitals.</td>
</tr>
<tr>
<td>In-Hospital</td>
<td></td>
<td>Included with In-Patient Benefit. Subject to State Hospitals.</td>
</tr>
<tr>
<td><strong>ONCOLOGY</strong></td>
<td></td>
<td>Subject to pre-authorisation PMB Conditions only</td>
</tr>
<tr>
<td>Out-of-Hospital</td>
<td></td>
<td>Subject to Overall Annual Limit and State hospitals.</td>
</tr>
<tr>
<td>In-Hospital</td>
<td></td>
<td>Included with In-Patient benefit and subject to State hospitals.</td>
</tr>
</tbody>
</table>

**Overall Annual Limit**

**R 500,000.00 per family per annum.**
**ALTERNATIVE HEALTH CARE**
- Podiatrist
- Homeopath
- Naturopath
- Chiropractor

Included with GP and specialist consultations and visits limit. Practitioners to be registered with the Health Professions Council of SA or Allied Health Professionals Council of South Africa.

**AMBULANCE SERVICES**
- Road and Air

Preferred Service Provider only: Netcare 911

Unlimited for emergency assistance only – case managed and protocols apply.

**APPLIANCES**
- Medical
- Surgical

R 4,880.00 per family, per annum.

Subject to the submission of a clinical motivation with correct Tariff codes and costing for pre-authorisation by the Scheme.

Limits and cycles as per the Scheme’s list of approved appliances apply.

**DENTISTRY**
- Basic (DSP only)
  - M: R 6,270.00
  - M+1: R 7,180.00
  - M+2: R 8,380.00
  - M+3: R 9,400.00

Basic dentistry: Fillings, root canal treatments, scaling & polishing, extractions, fissure sealants, dentures and repairs (subject to prescribed cycles).

Advanced dentistry: Clinical motivation required for pre-authorisation from Scheme. Orthodontics, crown and bridge work or any procedure that requires anaesthetics.

Exclusions: Hospitalisation costs for removal of wisdom teeth or treatment for children under the age of 7 paid from the hospitalisation benefit.

Dental procedure costs paid from dentistry benefit.

Exclusions: cosmetic dentistry such as veneers and implants is excluded.

**GP AND SPECIALIST CONSULTATIONS & VISITS**
- Rooms or home

Family limit, per year.

- M: R 3,290.00
- M+1: R 5,290.00
- M+2: R 7,240.00
- M+3: R 9,020.00

Beneficiary limit of R 5,290.00 per annum.

**GP AND SPECIALIST PROCEDURES & TESTS**
- Rooms or home

R 6,840.00 per family, per annum.

**INFERTILITY**
- PMB conditions only

Subject to State hospitals for Hysterosalpingogram (HSG) and Diagnostic Dilatation and Curettage (DD&C). State protocols apply.

**MEDICATION**
- Prescribed, dispensed or acute

R 2,950.00 per beneficiary, per annum. Includes alternative healthcare medication as prescribed and must be registered with the Medicines Control Council; injections and related materials.

Subject to Medicine Formularies and Exclusion Lists.

Chronic Medication

Subject to Chronic Disease List (CDL) and Chronic Formulary and protocols apply.

DTP medication not obtained from state subject to co-payment.

Chronic medication not on the Chronic Formulary will incur a 25% co-payment.

Chronic Medication for Gout, GORD, Depression and Menopause will be added to the chronic formulary.
**MEDICATION**

Primary Healthcare Benefit Programme

Condition specific benefits, sub limits and treatment plans apply. Remind your pharmacist to include the appropriate ICD-10 diagnostic codes with all claims for this Programme.

- Limited to listed conditions and number of incidents per beneficiary per year as outlined below:
  - Stomach pain, heartburn, indigestion (including reflux), 3
  - Acute gastroenteritis: vomiting and diarrhoea, 3
  - Upper and lower respiratory tract infections, 4
  - Oral and topical candidiasis: thrush/fungal or yeast infections, 3
  - Helminthic infestation: worms, 2
  - Headache, 6
  - Bacterial conjunctivitis: eye infection, 2
  - Urinary tract infection (acute uncomplicated cystitis), 2
  - Urticarial: skin rashes, insect bites and stings, 2
  - Treatment of wounds and/or infections of the skin/subcutaneous tissues (excl. post-operative wound care), 2

**OPTICAL**

Frames/Lenses/Contact Lenses

Receive up to R 1,180.00 per family, per annum. Subject to Medicine Formularies and Exclusion Lists, included with prescribed, dispensed or acute medication limit.

- Sub-limit of R 150.00 per day.
- White lenses: 100% of the lower of cost or Optical Assistant tariff. Photochromic lenses: 100% of the lower of cost or Optical Assistant Tariff.
- Fixed or gradient tints up to 35%; 100% of the lower of costs or Optical Assistant Tariff.
- Contact lenses with a prescription reading of ≤-0.75 or ≥+1.00 and above: 100% of the lower of costs or Optical Assistant Tariff up to a maximum of R 2,070.00 per beneficiary, subject to a two year cycle.
- Eye tests: Beneficiary per annum receives up to one consultation. Subject to family limit.

**MENTAL HEALTH SUBSTANCE DEPENDENCY**

Consultations, visits and procedures. Include with In-Patient benefit. Clinical motivation required for authorisation of continued consultations after first two initial assessments. Limited to PMB only.

**PATHOLOGY**

In-and-Out-of-Hospital

- R 5,900.00 per family, per annum.

**PHYSIOTHERAPY**

In-and-Out-of-Hospital

- R 3,870.00 per family, per annum. Sub-limit of R 1,580.00 per beneficiary, per annum. Clinical motivation required for authorisation of continued consultations after two visits.

**PROSTHESES**

Internal

- R 23,210.00 per family, per annum. Included with In-Patient benefit. Subject to the submission of a clinical motivation and costing for pre-authorisation by the Scheme.

External (including artificial eyes and limbs)

- R 13,610.00 per family, per annum. Included with In-Patient benefit. Subject to the submission of a clinical motivation and costing for pre-authorisation by the Scheme.
### ADDITIONAL BENEFITS

**SAMWUMED PRIMARY HEALTHCARE BENEFIT PROGRAMME**

This unique benefit offers SAMWUMED members peace of mind should a member deplete his/her annual medicine benefit. In partnership with our pharmacy network, SAMWUMED has created a formulary (a specific list of most cost effective medicines) available over the counter for the 10 most common ailments.

- **Stomach pain:** Heartburn, indigestions and reflux
- **Headache**
- **Acute gastroenteritis:** vomiting and diarrhoea
- **Bacterial Conjunctivitis and eye infections**
- **Upper and lower respiratory tract infections**
- **Urinary tract infections including acute uncomplicated cystitis**
- **Oral and topical candidiasis:** thrush and fungal or yeast infections
- **Urticarial:** Skin rashes, usually due to an allergic reaction, insect bites and stings
- **Helminthic infestations:** tape worm
- **Wound care and skin infections (excluding post-operative care)**

Subject to Scheme tariffs, members can access these from your approved pharmacist without paying extra money.

### CHRONIC MEDICINE BENEFITS

A chronic condition is a persistent or otherwise long-lasting illness that may be longer than three months or lifelong. SAMWUMED will cover for the diagnosis, treatment and care of 26 chronic conditions.

SAMWUMED works with Mediscor to give members the best advice on the use of their chronic medication, as well as ensure that their chronic benefits are correctly allocated.

You treating doctor will need to call our Managed Care Provider, Mediscor on **0860 119 553** to register for your Chronic Medication.

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>SUB-CATEGORY</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>RADIOLOGY RADIOGRAPHY</td>
<td>GENERAL</td>
<td><strong>R 5,900.00 per family, per annum.</strong></td>
</tr>
<tr>
<td></td>
<td>In-and-Out of Hospital</td>
<td></td>
</tr>
<tr>
<td>SPECIALISED</td>
<td>In-and-Out of Hospital</td>
<td><strong>R 11,630.00 per family, per annum</strong> MRI/CAT or similar. Scans limited. Subject to pre-authorisation from the Scheme. Limited to 2 scans per family per annum.</td>
</tr>
<tr>
<td>REMEDIAL THERAPY</td>
<td>Occupational, Speech Therapy, Audiology &amp; Dieticians.</td>
<td><strong>R 3,870.00 per family, per annum.</strong> In-and-Out of Hospital.</td>
</tr>
<tr>
<td>HOSPITALISATION</td>
<td>IN-PATIENT</td>
<td><strong>R 1,000,000.00 per family, per annum.</strong> Subject to pre-authorisation and registration with Clinical Disease Management Programme for asthma, cardiovascular disease, diabetes, and cancer, where applicable. State Facility as DSP for joint replacements, cardiac and abdominal surgery. Unlimited benefits for PMB conditions subject to pre-authorisation at a DSP. “Take Home” medication limited to 7 days’ supply.</td>
</tr>
<tr>
<td></td>
<td>Subject to pre-authorisation.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ALTERNATIVES TO HOSPITALISATION</td>
<td>Included with In-Patient benefit.</td>
</tr>
<tr>
<td>BLOOD TRANSFUSION SERVICES</td>
<td>Private nursing Frail care Hospice Step-down facility</td>
<td>included with In-Patient benefit.</td>
</tr>
<tr>
<td>RENAL DIALYSIS</td>
<td>Included with In-Patient benefit. Subject to State hospitals. PMB only.</td>
<td></td>
</tr>
<tr>
<td>ORGAN TRANSPLANT</td>
<td>Scheme Rules and treatment plans apply. PMB conditions only. Pre-authorisation required. Subject to Overall Annual Limit and State hospitals. Medication to be obtained from State hospitals. Included with In-Patient benefit. Subject to State hospitals.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Out-of-Hospital</td>
<td></td>
</tr>
<tr>
<td></td>
<td>In-Hospital</td>
<td></td>
</tr>
<tr>
<td>ONCOLOGY</td>
<td>Subject to pre-authorisation and registration with Disease Management Programme. PMB conditions only. Non-PMB subject to <strong>R 100,000.00</strong> Subject to Overall Annual Limit and State hospitals. Included with In-Patient benefit and subject to State hospitals.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Out-of-Hospital</td>
<td></td>
</tr>
<tr>
<td></td>
<td>In-Hospital</td>
<td></td>
</tr>
<tr>
<td>Overall Annual Limit</td>
<td><strong>UNLIMITED</strong></td>
<td></td>
</tr>
</tbody>
</table>
HOSPITAL CARE

When you need hospital treatment or an operation, SAMWUMED will cover you for approved medical expenses when you are in hospital. The comprehensive hospital benefit cover ensures you are taken care of should you or your loved ones land up in a hospital.

We have partnered with Medscheme as our Hospital and Oncology Benefit Management Service Provider to manage your hospital care. For all hospital pre-authorisations members can call 0860 33 33 87.

Unless an emergency, members will need to contact Medscheme no less than 72 Hours before the procedure to get authorisation for their admission to hospital.

FIND OUT HOW AFFORDABLE IT IS FOR YOU AND YOUR FAMILY

SAMWUMED OPTION A – EFFECTIVE 01 JANUARY 2016

This table represents a 100% contribution by member and excludes subsidy arrangements with employer.

<table>
<thead>
<tr>
<th>Salary Bands</th>
<th>Principal Member</th>
<th>Adult Dep.</th>
<th>Child Dep.</th>
<th>Member + Spouse</th>
<th>Member + Spouse + 1 Child</th>
<th>Member + Spouse + 2 Children</th>
<th>Member + Spouse + 3 Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>R1 - R2 500</td>
<td>913</td>
<td>1 826</td>
<td>2 147</td>
<td>2 468</td>
<td>2 789</td>
<td></td>
<td></td>
</tr>
<tr>
<td>R 2 501 - R 3 500</td>
<td>995</td>
<td>1 990</td>
<td>2 341</td>
<td>2 692</td>
<td>3 043</td>
<td></td>
<td></td>
</tr>
<tr>
<td>R 3 501 - R 4 500</td>
<td>1 079</td>
<td>2 158</td>
<td>2 536</td>
<td>2 914</td>
<td>3 292</td>
<td></td>
<td></td>
</tr>
<tr>
<td>R 4 501 - R 5 500</td>
<td>1 161</td>
<td>2 322</td>
<td>2 729</td>
<td>3 136</td>
<td>3 543</td>
<td></td>
<td></td>
</tr>
<tr>
<td>R 5 501 - R 7 000</td>
<td>1 245</td>
<td>2 490</td>
<td>2 927</td>
<td>3 364</td>
<td>3 801</td>
<td></td>
<td></td>
</tr>
<tr>
<td>R 7 001 - R 8 500</td>
<td>1 334</td>
<td>2 668</td>
<td>3 137</td>
<td>3 606</td>
<td>4 075</td>
<td></td>
<td></td>
</tr>
<tr>
<td>R 8 501 +</td>
<td>1 429</td>
<td>2 858</td>
<td>3 362</td>
<td>3 866</td>
<td>4 370</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SAMWUMED OPTION B – EFFECTIVE 01 JANUARY 2016

This table represents a 100% contribution by member and excludes subsidy arrangements with employer.

<table>
<thead>
<tr>
<th>Salary Bands</th>
<th>Principal Member</th>
<th>Adult Dep.</th>
<th>Child Dep.</th>
<th>Member + Spouse</th>
<th>Member + Spouse + 1 Child</th>
<th>Member + Spouse + 2 Children</th>
<th>Member + Spouse + 3 Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>R1 - R4 000</td>
<td>1 466</td>
<td>514</td>
<td>2 392</td>
<td>3 446</td>
<td>3 960</td>
<td>4 474</td>
<td></td>
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<tr>
<td>R 4 001 - R 5 000</td>
<td>1 568</td>
<td>549</td>
<td>3 136</td>
<td>3 685</td>
<td>4 234</td>
<td>4 783</td>
<td></td>
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<tr>
<td>R 5 001 - R 6 000</td>
<td>1 638</td>
<td>574</td>
<td>3 276</td>
<td>3 850</td>
<td>4 424</td>
<td>4 998</td>
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<tr>
<td>R 6 001 - R 7 000</td>
<td>1 670</td>
<td>585</td>
<td>3 340</td>
<td>3 925</td>
<td>4 510</td>
<td>5 095</td>
<td></td>
</tr>
<tr>
<td>R 7 001 - R 10 000</td>
<td>1 705</td>
<td>598</td>
<td>3 410</td>
<td>4 008</td>
<td>4 606</td>
<td>5 204</td>
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<tr>
<td>R 10 001 - R 13 000</td>
<td>1 796</td>
<td>610</td>
<td>3 592</td>
<td>4 202</td>
<td>4 812</td>
<td>5 422</td>
<td></td>
</tr>
<tr>
<td>R 13 001 +</td>
<td>1 891</td>
<td>623</td>
<td>3 782</td>
<td>4 405</td>
<td>5 028</td>
<td>5 651</td>
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</tbody>
</table>
This table represents what a member will pay if they qualify for a 60% subsidy.

<table>
<thead>
<tr>
<th>Salary Bands</th>
<th>Principal Member</th>
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<th>Child Dep.</th>
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<th>Member + Spouse + 2 Children</th>
<th>Member + Spouse + 3 Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>R1 - R4 000</td>
<td>586.40</td>
<td>586.40</td>
<td>205.60</td>
<td>1 172.80</td>
<td>1 378.40</td>
<td>1 584.00</td>
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<tr>
<td>R 4 001 - R 5 000</td>
<td>627.20</td>
<td>627.20</td>
<td>219.60</td>
<td>1 254.40</td>
<td>1 474.00</td>
<td>1 693.60</td>
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<tr>
<td>R 5 001 - R 6 000</td>
<td>655.20</td>
<td>655.20</td>
<td>229.60</td>
<td>1 310.40</td>
<td>1 540.00</td>
<td>1 769.60</td>
</tr>
<tr>
<td>R 6 001 - R 7 000</td>
<td>668.00</td>
<td>668.00</td>
<td>234.00</td>
<td>1 336.00</td>
<td>1 570.00</td>
<td>1 804.00</td>
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<tr>
<td>R 7 001 - R 10 000</td>
<td>682.00</td>
<td>682.00</td>
<td>239.20</td>
<td>1 364.00</td>
<td>1 603.20</td>
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<tr>
<td>R 10 001 - R 13 000</td>
<td>718.40</td>
<td>718.40</td>
<td>244.00</td>
<td>1 436.80</td>
<td>1 680.80</td>
<td>1 924.80</td>
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<tr>
<td>R 13 001 +</td>
<td>756.40</td>
<td>756.40</td>
<td>249.20</td>
<td>1 512.80</td>
<td>1 762.00</td>
<td>2 011.20</td>
</tr>
</tbody>
</table>

It’s simple to become a member of SAMWUMED

1. Request and complete an application form from our Sales and Servicing and Broker Consultants or via your HR office.
2. Submit your application with photo copies of ID.
3. You will receive an SMS from SAMWUMED to confirm receipt of your application.
4. You will receive your SAMWUMED Welcome Pack which includes your Membership Guide and Membership Card.

What documents do I need to become a member?

- Copies of South African ID/Birth certificates
- A sworn affidavit proving financial dependency
- Legal documents of adopted/foster children

Who is SAMWUMED?

The South African Municipal Workers Union National Medical Scheme (SAMWUMED) is a medical aid scheme that provides cost efficient, quality healthcare for individuals who are employed in local government and supporting local government agencies.

Having been formed by the South African Municipal Workers Union (SAMWU), the Scheme sees its role not only as a facilitator for healthcare transactions, but as a guardian to ensure fairness for its members as well as a defender of healthcare rights for the whole of South Africa.

SAMWUMED is a self-administered Medical Scheme that maintains a prudent contribution policy, whilst providing rich benefits for its members.

*Disclaimer:*

This brochure is prepared and distributed for purposes of providing you with essential information to help you select the best benefit option for you and your family. It is not a full guide to the Scheme Rules and Benefits and does not supersede the Scheme Rules. All contributions and benefit options presented in the 2016 Brochure are subject to the approval of the Council for Medical Schemes. Kindly familiarise yourself with your chosen benefit option and note where pre-authorisations, motivations or letters of referral are required to access benefits.