



Join the medical scheme that **understands**
the **needs** of the **South African family.**

DISCOVER the
BRILLIANCE
of GEMS

ABOUT GEMS

The Government Employees Medical Scheme (GEMS) is a restricted medical scheme providing accessible, affordable and rich benefits to qualifying Public Service employees and their nominated beneficiaries. GEMS currently provides quality healthcare to over 740 000 members and 1.9 million beneficiaries.



WHO CAN JOIN GEMS?

GEMS is specifically designed to offer the following qualifying Public Service employees, affordable and accessible healthcare:

- A National Department listed in Schedule 1 of the Public Service Act.
- A Provincial Department listed in Schedule 2 of the Public Service Act.
- A Provincial Administration listed in Schedule 2 of the Public Service Act.
- Organisational components listed in Schedule 3 of the Public Service Act.
- Any employer group approved by the Scheme (a list of these employers is available in Annexure A of the Scheme Rules).

Unfortunately, there are Public Service departments that cannot join the Scheme and these include:

- Uniformed members of The South African National Defence Force (SANDF).
- The National Intelligence Agency (NIA).
- The South African Secret Service (SASS).
- Uniformed members of the South African Police Service (SAPS).
- Any department where the conditions of service do not allow you to join GEMS.

The Public Service Act is available on the Department of Public Service and Administration website at **www.dpsa.gov.za**



REMEMBER: You cannot be a member or a registered dependant of more than one medical scheme at the same time.



More cover in 2021 - GEMS continues to bring rich benefits in 2021 by investing **more than R 355 million** towards the **enhancement of member benefits!**

10 FACTS ABOUT GEMS!

1. Lower contributions across open and closed schemes.
2. Contributions based on income and family size.
3. **Up to 100% subsidy for qualifying employees on salary levels 1 – 5** (terms and conditions may apply).
4. All options will include access to **SAHPRA approved COVID-19 vaccines** which will be administered in accordance with the national **COVID-19 vaccination implementation roll-out plan**, once available.
5. Broadest definition of beneficiaries – **up to 5 generations can be covered!**
6. **No late joiner penalties.**
7. **Primary Care Extender benefit** – provides an additional R780 per year for the Emerald and Emerald Value options.
8. **Largest HIV Disease Management Programme (DMP).**
9. **Close collaboration with Trade Unions and government stakeholders.**
10. GEMS provides **greater access to quality healthcare** through a wide array of networks.



Choose cover from one of our five options or the efficiency discount option

1. TANZANITE ONE

This is an entry-level network benefit option, tailored for Level 1-5 employees, subject to Network GP nomination and Specialist Referral Rules.

On Tanzanite One, you receive coordinated care – for improved healthcare outcomes!

You are required to nominate a Network GP who will coordinate all your healthcare needs! This means that you will experience far less out of pocket payments when visiting YOUR Network GP. You and each of your dependants will each nominate a GP.

All members on TANZANITE ONE have access to a Network of Hospitals! GEMS has negotiated with a number of Private hospitals that have agreed to bill at rates negotiated with them, to offer ALL members on TANZANITE ONE quality healthcare.

Using network providers and network hospitals means you will not experience out of pocket payments, allowing you to really do more for your family.

Members on Tanzanite One receive the following:

- Comprehensive In-Hospital benefits for healthcare services rendered by facilities on the GEMS Network;
- Comprehensive Out-of-Hospital benefits for healthcare services, which are typically rendered by healthcare providers on the GEMS Network, subject to Network GP Nomination and Specialist Referral Rules;
- Access to Tanzanite One GEMS network providers and obtain medicine on the applicable GEMS Formulary list, which is accessible on the GEMS website;
- Three additional non-PMB chronic conditions; and
- Access to Public Facilities.

2. BERYL

This is an entry-level network benefit option, tailored for members with limited healthcare needs.

- Offers members comprehensive In-Hospital benefits for healthcare services rendered in and by public and private hospitals;
- Comprehensive Out-of-Hospital benefits for healthcare services, which are typically rendered by healthcare providers on the GEMS Network, subject to Network GP and Specialist Referral Rules;
- Access to Beryl GEMS network providers and obtain medicine on the applicable GEMS Formulary list, which is accessible on the GEMS website;
- Three additional non-PMB chronic conditions; and
- Access to Public Facilities.

3. RUBY

This is a mid-level benefit option, tailored for members with limited to average healthcare needs who wish to enjoy a personal medical savings account.

- Offers members comprehensive In-Hospital benefits for healthcare services rendered in and by public and private hospitals;
- Comprehensive Out-of-Hospital benefits for healthcare services;
- Personal Medical Savings Account (PMSA) and Block Benefit from which some In- and Out-of-Hospital healthcare services are funded;
- Eight additional non-PMB chronic conditions; and
- Access to Public Facilities.

4. EMERALD

This is a high-level traditional option, tailored for members with average to above-average healthcare needs.

- Offers members comprehensive In-Hospital benefits for healthcare services;
- Comprehensive Out-of-Hospital benefits for healthcare services;
- A Primary Care extender benefit and a Family Practitioner Network Extender Benefit once the day-to-day block benefit is exhausted;
- Forty-one additional non-PMB chronic conditions; and
- Access to Public Facilities.

5. EMERALD VALUE

This is an efficiency discounted option of Emerald, tailored for members with average to above-average healthcare needs.

- Offers members comprehensive In-Hospital benefits for healthcare services rendered by facilities on the GEMS Network;
- Comprehensive Out-of-Hospital benefits for healthcare services, which are typically rendered by healthcare providers on the GEMS Network, subject to Network GP Nomination and Specialist Referral Rules;
- Access to Emerald GEMS network providers and obtain medicine on the applicable GEMS Formulary list, which is accessible on the GEMS website;
- Members on Emerald who switch to EVO will experience greater savings on their monthly contribution while enjoying the exact same benefits as they would on Emerald, however you must nominate a Network GP;
- A Primary Care extender benefit and a Family Practitioner Network Extender Benefit once the day-to-day block benefit is exhausted;
- Forty-one additional non-PMB chronic conditions; and
- Access to Public Facilities.

6. ONYX

This is a top-level benefit option, tailored for members with above-average to extensive healthcare needs.

- Offers members comprehensive In-Hospital benefits for healthcare services;
- Comprehensive Out-of-Hospital benefits for healthcare services;
- Forty-one additional non-PMB chronic conditions; and
- Access to Public Facilities.



NOTE

Always contact the GEMS emergency contact center **(0800 44 4367)** if you:

- Need an ambulance or emergency services.
- Are not sure if you need an ambulance or not.
- Need afterhours advice about the nearest hospital from the scene of the incident.





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Summary of New Benefit enhancements for 2021





Benefit enhancement	Benefit Affected	Description of change	Out-of-Hospital	In-Hospital	Tanzanite One	Beryl	Ruby	Emerald Value	Emerald	Onyx
Industrial and Educational Psychology	Mental Health Benefit	Funding to a sub-limit of R2 366 per family per annum will be provided for mental health services by Educational and Industrial Psychologists	✓	✓	✓	✓	✓	✓	✓	✓
Joint revision surgery	Prosthesis Benefit	This additional benefit will assist members who need to have joint replacement and joint revision surgery in the same calendar year	✗	✓	✓	✓	✓	✓	✓	✓
Advanced radiology	Advanced Radiology Benefit	Funding to an enhanced sub-limit of R12 480 is meant to ensure that the cost of a member's first CT or MRI scan is funded in the event that such cost should exceed the general sub-limit of R8320	✓	✓	New enhanced Funding	Higher sub-limits already exists	Higher sub-limits already exists	Higher sub-limits already exists	Higher sub-limits already exists	Higher sub-limits already exists
Vaccines	Preventative Care Benefit	This benefit enhancement will provide members with access to all other vaccinations (in addition to the existing Influenza, Pneumococcal and HPV vaccinations), where clinically appropriate, subject to a financial limit of R780 per Beneficiary per annum.	✓	✓	✓	✓	✓	✓	✓	✓
Root canal treatment	Dental Benefit	Funding of one (1) clinically indicated root canal treatment only per Beneficiary per annum.	✓	✗	✓	✓	Already exists	Already exists	Already exists	Already exists
Periodontal Programme	Dental Benefit	The introduction of a Periodontal Programme, which benefits are limited to the benefits comprising the programme subject to a Beneficiary's registration on the programme, pre-authorisation, managed care protocols and processes, and use of the Scheme's Dental DSP/ Network	✓	✗	✓	✓	Periodontal treatment funding already exists	Periodontal treatment funding already exists	Periodontal treatment funding already exists	Periodontal treatment funding already exists
Dispensing Doctor Scripts to Pharmacy	Prescribed Medication and injection material benefit	The introduction of a limit for Acute Medical Conditions where a prescription is provided by a dispensing GP, but dispensed by a DSP/Network Pharmacy. This is limited to three (3) scripts of up to R208 each per Beneficiary per annum	✓	✗	✓	✓	✗	✗	✗	✗
Chronic medicine for additional Chronic Disease List	Prescribed Medication and injection material benefit	*A significant increase in the limit for non-PMB chronic medical conditions per Beneficiary per annum * Tanzanite One increased from R1 000 to R3 640 * Beryl increased from R2 000 to R4 576	✓	✗	✓	✓	Average annual increase applied	Average annual increase applied	Average annual increase applied	Average annual increase applied
Dementia	Prescribed Medication and injection material benefit	The chronic medicine benefit has been extended to other types of dementia not only limited to dementia in Alzheimers	✓	✗	✗	✗	✓	✓	✓	✓
Maternity Vitamins	Formularies and Lists	An increase from R85 to R165 for maternity vitamins. Limited to 9 months repeat scripts. Beneficiaries must be registered on the maternity programme.	✓	✗	✓	✓	✓	✓	✓	✓
Gender reassignment surgery	N/A	Funding for gender reassignment surgery is now provided to patients who suffer from a condition known as gender dysphoria.	✗	✓	✓	✓	✓	✓	✓	✓





A FINANCIAL PERSPECTIVE





The tables below show the full contributions for the year 2021 and do not include any subsidies, which you may qualify for. If you qualify for a subsidy, your employer will pay part of the contribution and you will be required to pay the balance.





TANZANITE ONE			
			
R0 - R9 728.00	R1 163	R919	R500
R9 728.01 - R13 651.00	R1 219	R976	R539
R13 651.01 - R23 386.00	R1 296	R1 026	R572
R23 386.01 +	R1 517	R1 283	R726

BERYL			
			
R0 - R9 728.00	R1 312	R1 308	R735
R9 728.01 - R13 651.00	R1 423	R1 412	R812
R13 651.01 - R23 386.00	R1 553	R1 553	R872
R23 386.01 +	R1 865	R1 865	R1 058

RUBY			
			
R0 - R14 650.00	R2 710	R2 035	R1 050
R14 650.01 - R25 301.00	R3 020	R2 270	R1 175
R25 301.01 +	R3 345	R2 520	R1 295
(Please note: 20% of Ruby contributions go towards the Personal Medical Savings Account)			

EMERALD VALUE			
			
R0 - R14 650.00	R2 537	R1 938	R943
R14 650.01 - R25 301.00	R2 808	R2 176	R1 058
R25 301.01 +	R3 146	R2 419	R1 178




EMERALD			
			
R0 - R14 650.00	R3 030	R2 308	R1 125
R14 650.01 - R25 301.00	R3 354	R2 593	R1 261
R25 301.01 +	R3 760	R2 883	R1 406

ONYX			
			
R0 - R14 650.00	R5 228	R4 004	R1 572
R14 650.01 - R31 216.00	R5 442	R4 143	R1 707
R31 216.01 +	R5 875	R4 516	R1 905

* Total contribution is based on the current family size and salary information provided.

* Subsidy contribution portion: these figures are only a guide, member to contact his/her HR office to confirm subsidy receivable.

* Kindly note that GEMS does not determine the subsidy as the subsidy is determined solely by the employer.

		
Member Refers to a 'Member' (i.e. a principal member)	Adult Refers to any 'Adult Dependant'	Child Refers to any 'Child Dependant'



DID YOU KNOW?

As a Public Service employee, you may qualify for a subsidy from your employer when you join GEMS which could result in further savings to your pocket? A subsidy is an amount your employer pays towards the cost of GEMS. If you qualify for a subsidy, your employer will pay a portion of your contribution each month and you will pay the rest. The amount depends on the size of your family. Your HR practitioner can help you better understand how you qualify for a subsidy.

DISCOVER THE BRILLIANCE OF GEMS THROUGH TWO OF OUR FLAGSHIP OPTIONS AND ENJOY RICH AND AFFORDABLE BENEFITS!

The Tanzanite One option brings with it:

- Comprehensive cover for both in-hospital and out-of-hospital benefits.
- Qualifying public service employees on income level 1-5 continue to enjoy up to 100% subsidy from their employer.

This means you could be getting so much more without paying a single cent!

- Coordinated care. You will now have a dedicated GP with access to a network of private hospitals - irrespective of the admission type.
- Full access to a Network of Private Hospitals.
- Unlimited GP and Specialist consultations – subject to adherence to care coordination rules.

EVO is the best performing option on GEMS!

With amongst the lowest monthly contribution increase of all our options at only **4.25%** - it makes brilliant sense for you to stay on the EVO!

- It is the option that minimizes your exposure to out of pocket payments.

Get the most out of our network options by adhering to the **principles of coordinated care network options**. If you belong to **Tanzanite One** or **EVO**, then these are the steps to follow...

STEP 1: Nominate a GP on the GEMS Network. You and your dependants must nominate your own GP – it's flexible!

STEP 2: Visiting a GP. Coordinated care means your GP manages your healthcare for improved health outcomes and there are no out of pocket payments when you visit your nominated doctor.

STEP 3: Specialist Visits. If you need specialist care, your GP will refer to one as part of coordinated care. The Specialist Referral rule for Tanzanite One and EVO requires that beneficiaries request pre-authorisation by submitting a fully completed request form when the referral is from a non-nominated provider, before authorisation can be provided.

STEP 4: Hospital Visits. From time to time, we all may have to go to the hospital. As Tanzanite One and EVO members, your family must use a hospital on the GEMS network. There are a number of network hospitals to choose from (you can find the full list on the GEMS website at www.gems.gov.za). If you don't have a GEMS Network hospital within 50km of your place of residence in an emergency, don't stress. You can still use the nearest hospital.

STEP 5: Authorisations. If you move to Tanzanite One or EVO, you won't need a new authorisation from GEMS to keep up with chronic treatments you're on already.

STEP 6: Getting more for less. Members on Tanzanite One have full access to a network of private hospitals and unlimited GP and Specialist consultations subject to adherence to care coordination rules. Members moving from Emerald to EVO experience reduction in premiums.



IMPORTANT NOTE

Don't visit a non-nominated GP, or you may have to make a 30% out of pocket payment. You can use a non-network hospital if:

- You're on a trip and there's no network hospital nearby;
- In case of a medical emergency;

OR

The specialised care you need isn't available at the nearest network hospital. Use of non-network hospitals may result in a co-payment of up to R12 000 per admission.

DISEASE MANAGEMENT PROGRAMMES

Programmes that look after you and your family's wellbeing.

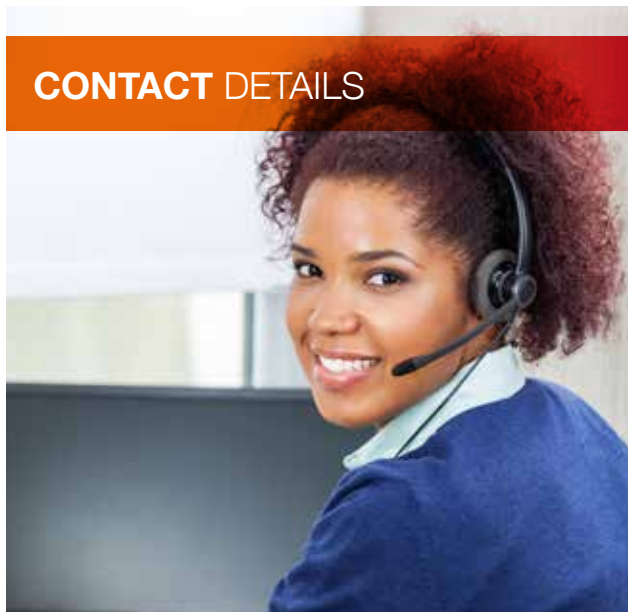
What care and disease management programmes does GEMS offer?

- Chronic Back and Neck Rehabilitation (CBNR) Programme.
- Chronic Medicine Management for PMB and non-PMB conditions.
- Dental Management
- Emergency Services
- Maternity Programme
- Oncology Management
- Optometry Management
- HIV Management Programme
- Wellness Programme

What are the benefits of being on a care or disease management programme?

1. You will receive healthcare support and advice, provided by the GEMS Personal Healthcare support team and qualified nurses, who will help you better manage your health and chronic condition.
2. Added support in your relationship with your doctor and the care you receive from him/her.
3. Assistance with following the treatment prescribed for your condition.

CONTACT DETAILS



Make use of the multi-function **GEMS** Member App to interact with the Scheme at home or on the go to make your life easier.



GEMS Contact Centre
0860 00 4367



Fax
0861 00 4367



Web
www.gems.gov.za



Email
enquiries@gems.gov.za



Client Liason Officers
clo@gems.gov.za



Postal Address
GEMS, Private Bag X782
Cape Town, 8000



GEMS Emergency Services
0800 444 367



GEMS Fraud Hotline
0800 212 202
gems@thehotline.co.za



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[@GEMS1GEMOFASHEME](https://www.facebook.com/GEMS1GEMOFASHEME)





Twitter
[@GEMS_Number1](https://twitter.com/GEMS_Number1)

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TANZANITE ONE

In-Hospital Benefits	
Prescribed minimum benefits (PMBs)	✓ % PMB C U
Annual hospital benefit (public and private hospitals, registered unattached theatres, day clinics and psychiatric facilities)	✓ Limited to R260 000 for non-PMB/family/year % PMB MC P C H
Alcohol and drug dependencies	✓ % PMB MC P
Allied health services	✓ Limited to R1 664 /family and R1 040 /beneficiary/year % PMB MC P H
Alternatives to hospitalisation (sub-acute hospitals and private nursing)	✓ % PMB MC P
Blood transfusion	✓ % PMB A P C
Dental services (conservative, restorative and specialised)	✓ Limited to one (1) root canal treatment/beneficiary/year, which includes one (1) emergency Out-of-Network visit/beneficiary/year, subject to PMBs Includes periodontal programme paid from risk, subject to periodontal treatment benefits % PMB A P H
Emergency services (casualty department)	✓ % PMB A P C
GP and Specialist services	✓ % PMB MC P H
Mental health	✓ R10 400 /beneficiary/year Further shared sub-limit with out-of-hospital Mental Health of R2 366 /family/year for services by Educational and Industrial Psychologists % PMB MC P C
Oncology (chemotherapy and radiotherapy)	✓ % PMB A P C H
Organ and tissue transplants	✓ R23 017 /beneficiary for corneal grafts % PMB MC P
Pathology and Medical Technology	✓ % PMB MC A P H
Physiotherapy	✓ R2 600 /beneficiary/year % PMB P C
Medical and surgical appliances and prostheses	✓ Limited to R27 434 /family/year for prostheses generally and R27 434 /family/year for joint revisions only % PMB P H
Radiology (advanced)	✓ Sub-limit of R8 320 , or R12 480 if R8 320 sub-limit is exceeded with first CT/MRI scan/beneficiary/year (shared) % PMB A P C H
Radiology (basic)	✓ % PMB A H
Renal dialysis	✓ % PMB MC A P C H
Surgical procedures (including maxillofacial surgery)	✓ Maxillofacial surgery subject to sub-limit of R24 012 % PMB A P H

 Available
 Not Available
 % 100% Scheme rates apply PMB Limited to PMBs MC Subject to managed care rules DSP DSP Subject to the use of a Designated Service Providers
 A Subject to the service being related to admissions under the annual hospital benefit P Pre-authorisation is needed C 100% of cost, subject to PMB legislation
 SUB Subject to other sub-limits, refer to the GEMS Rules H Subject to annual hospital limit U Unlimited, refer to Scheme rules F Subject to referral by network GP

TANZANITE ONE



Out-of-Hospital Benefits	
Personal Medical Savings Account (PMSA)	✗
Allied health services	✓ Limit of R1 040 /beneficiary and R1 664 /family % PMB F
Audiology, occupational therapy and speech therapy	✓ % PMB MC P C F
Block benefit (day-to-day benefit)	✗
Chronic Back and Neck Rehabilitation Programme	✓ Subject to registration on Chronic Back and Neck Rehabilitation Programme % PMB MC
Circumcision	✓ Global limit of R1 639 /beneficiary including post-op care within 1 month of procedure % PMB MC P C H
Dental services (conservative, dentistry including acute medicine)	✓ % PMB MC
Emergency assistance (road and air)	✓ % PMB MC
GP and Specialist services	✓ % PMB MC F
GP network extender benefit	✗
HIV infection, AIDS and related illness	✓ Subject to registration on the HIV Disease Management Programme % PMB MC
Infertility	✓ % PMB MC P C
Maternity (ante- and post-natal care)	✓ Subject to Maternity Programme protocols % PMB MC
Medical and surgical appliances and prostheses	✓ Limited to R7 201 /family/year % PMB MC
Mental health (Consultations, assessments, treatments and/or counselling by GP, Psychiatrist or Psychologist)	✓ R5 200 /beneficiary/year Further shared sub-limit with in-hospital Mental Health of R2 366 /family/year for services by Educational and Industrial Psychologists % PMB MC
Optical services (eye examinations, frames, lenses, permanent or disposable contact lenses and acute medicine)	✓ Limit of R1 248 /beneficiary for every 2 years % PMB MC
Pathology and Medical Technologists	✓ % PMB F
Physiotherapy	✓ Included in Allied Health services % PMB MC P C F
Prescribed medicine and injection material	✓ R607 family limit/family/year for homeopathic medicine. Limited to R99 /beneficiary/event, and R274 /beneficiary/year, Contraceptives limited to R3 088 /beneficiary/year % PMB MC C
Preventative care services	✓ All other vaccinations (in addition to the existing Influenza, Pneumococcal and HPV vaccinations), where clinically appropriate, subject to a financial limit of R780 per Beneficiary per annum. % PMB MC C
Primary care extender	✗
Screening services	✓ % PMB MC P
Radiology (advanced)	✓ Sub-limit shared with in-hospital limit of R8 320 , or R12 480 if R8 320 sub-limit is exceeded with first CT/MRI scan/beneficiary/year % PMB A P C
Radiology (basic)	✓ % PMB MC U F
Renal dialysis	✓ If a non-network provider is voluntarily used, a co-payment of 30% will be applied per event % PMB MC

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BERYL

In-Hospital Benefits	
Prescribed minimum benefits (PMBs)	✓ % PMB C U
Annual hospital benefit (public and private hospitals, registered unattached theatres, day clinics and psychiatric facilities)	✓ Limited to R1 200 671 for non-PMB/family/year % PMB MC P C H
Alcohol and drug dependencies	✓ % PMB MC P
Allied health services	✓ Limited to R3 498 /family and R2 326 /beneficiary/year (shared) % PMB MC P H
Alternatives to hospitalisation (sub-acute hospitals and private nursing)	✓ % PMB MC P
Blood transfusion	✓ Sub-limit of R24 012 /family/year % PMB A P C
Dental services (conservative, restorative and specialised)	✓ Limited to one (1) root canal treatment/beneficiary/year, which includes one (1) emergency Out-of-Network visit/beneficiary/year, subject to PMBs Includes periodontal programme paid from risk, subject to periodontal treatment benefits % PMB A P H
Emergency services (casualty department)	✓ % PMB A P C
GP and Specialist services	✓ % PMB MC P H
Mental health	✓ Sub-limit of R19 336 /beneficiary/year less the beneficiary's usage of the sub-limit of R10 909 /family/year out of hospital Further shared sub-limit with out-of-hospital Mental Health of R2 366 /family/year for services by Educational and Industrial Psychologists % PMB MC P C
Oncology (chemotherapy and radiotherapy)	✓ Sub-limit of R240 130 /family/year % PMB A P C H
Organ and tissue transplants	✓ R678 054 /beneficiary/year, R23 017 /beneficiary for corneal grafts % PMB MC P
Pathology and Medical Technology	✓ % PMB MC A P H
Physiotherapy	✓ R5 215 /beneficiary/year % PMB P C
Medical and surgical appliances and prostheses	✓ Limited to R36 022 /family/year for prostheses generally and R36 022 /family/year for joint revisions only % PMB MC P H
Radiology (advanced)	✓ Sub-limit of R23 201 (shared) % PMB A P C H
Radiology (basic)	✓ % PMB A H
Renal dialysis	✓ Sub-limit of R240 130 /beneficiary/year for chronic renal dialysis % PMB MC A P C H
Surgical procedures (including maxillofacial surgery)	✓ Maxillofacial surgery subject to sub-limit of R24 012 % PMB A P H

 Available
 Not Available

% 100% Scheme rates apply
 PMB Limited to PMBs
 MC Subject to managed care rules
 DSP DSP Subject to the use of a Designated Service Providers
 A Subject to the service being related to admissions under the annual hospital benefit
 P Pre-authorisation is needed
 C 100% of cost, subject to PMB legislation
 SUB Subject to other sub-limits, refer to the GEMS Rules
 H Subject to annual hospital limit
 U Unlimited, refer to Scheme rules
 F Subject to referral by network GP



Out-of-Hospital Benefits	
Personal Medical Savings Account (PMSA)	✗
Allied health services	✓ Limit of R2 326 /beneficiary and R3 498 /family % PMB F
Audiology, occupational therapy and speech therapy	✓ % PMB MC P C F
Block benefit (day-to-day benefit)	✗
Chronic Back and Neck Rehabilitation Programme	✓ Subject to registration on Chronic Back and Neck Rehabilitation Programme % PMB MC
Circumcision	✓ Global limit of R1 639 /beneficiary including post-op care within 1 month of procedure % PMB MC P C H
Dental services (conservative, dentistry including acute medicine)	✓ % PMB MC
Emergency assistance (road and air)	✓ % PMB MC
GP and Specialist services	✓ % PMB MC
GP network extender benefit	✗
HIV infection, AIDS and related illness	✓ Subject to registration on the HIV Disease Management Programme % PMB MC
Infertility	✓ % PMB MC P C
Maternity (ante- and post-natal care)	✓ Subject to Maternity Programme protocols % PMB MC
Medical and surgical appliances and prostheses	✓ Limited to R12 007 /family/year % PMB MC
Mental health (Consultations, assessments, treatments and/or counselling by GP, Psychiatrist or Psychologist)	✓ Sub-limit of R10 909 /family/year Further shared sub-limit with in-hospital Mental Health of R2 366 /family/year for services by Educational and Industrial Psychologists % PMB MC
Optical services (eye examinations, frames, lenses, permanent or disposable contact lenses and acute medicine)	✓ Limit of R1 581 /beneficiary for every 2 years % PMB MC
Pathology and Medical Technologists	✓ % PMB P F
Physiotherapy	✓ Included in Allied Health services % PMB MC P C F
Prescribed medicine and injection material	✓ R607 family limit/family/year for homeopathic medicine. Limited to R99 /beneficiary/event, and R274 /beneficiary/year, Contraceptives limited to R3 088 /beneficiary/year % PMB MC C
Preventative care services	✓ All other vaccinations (in addition to the existing Influenza, Pneumococcal and HPV vaccinations), where clinically appropriate, subject to a financial limit of R780 per Beneficiary per annum. % PMB MC
Primary care extender	✗
Screening services	✓ % PMB MC P
Radiology (advanced)	✓ Sub-limit shared with in-hospital limit of R23 201 /family/year % PMB A P C
Radiology (basic)	✓ % PMB MC U F
Renal dialysis	✓ If a non-network provider is voluntarily used, a co-payment of 30% will be applied per event % PMB MC

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RUBY

In-Hospital Benefits	
Prescribed minimum benefits (PMBs)	✓ % PMB C U
Annual hospital benefit (public and private hospitals, registered unattached theatres, day clinics and psychiatric facilities)	✓ % PMB MC P C H
Alcohol and drug dependencies	✓ % PMB MC P
Allied health services	✓ Limited to PMSA and Block benefit % PMB MC P
Alternatives to hospitalisation (sub-acute hospitals and private nursing)	✓ % PMB MC P
Blood transfusion	✓ % PMB A P C
Dental services (conservative, restorative and specialised)	✓ Shared limit with out-of-hospital benefit of R3 690 /beneficiary/year Includes periodontal programme paid from risk, subject to periodontal treatment benefits % PMB A P H
Emergency services (casualty department)	✓ Paid from out-of-hospital GP services for non-PMB and unauthorised events % PMB A P C
GP and Specialist services	✓ % PMB MC P
Mental health	✓ R20 341 /family/year Further shared sub-limit with out-of-hospital Mental Health of R2 366 /family/year for services by Educational and Industrial Psychologists % PMB MC P C
Oncology (chemotherapy and radiotherapy)	✓ Sub-limit of R366 154 /family/year % PMB A P C
Organ and tissue transplants	✓ R678 054 /beneficiary/year, R23 017 /beneficiary/year for corneal grafts % PMB MC P
Pathology and Medical Technology	✓ % PMB MC A P
Physiotherapy	✓ R5 486 /beneficiary/year % PMB P C
Medical and surgical appliances and prostheses	✓ Limited to R46 139 /family/year (shared) generally, plus R46 139 /family/year for joint revisions only % PMB MC P
Radiology (advanced)	✓ Sub-limit of R24 408 (shared) % PMB A P C
Radiology (basic)	✓ % PMB A
Renal dialysis	✓ Sub-limit of R290 588 /beneficiary/year for chronic dialysis % PMB MC A P C
Surgical procedures (including maxillofacial surgery)	✓ Unlimited, includes maxillofacial surgery % PMB A P

 Available
 Not Available

% 100% Scheme rates apply
 PMB Limited to PMBs
 MC Subject to managed care rules
 DSP DSP Subject to the use of a Designated Service Providers
 A Subject to the service being related to admissions under the annual hospital benefit
 P Pre-authorisation is needed
 C 100% of cost, subject to PMB legislation
 SUB Subject to other sub-limits, refer to the GEMS Rules
 H Subject to annual hospital limit
 U Unlimited, refer to Scheme rules
 F Subject to referral by network GP



Out-of-Hospital Benefits	
Personal Medical Savings Account (PMSA)	✓ 20% of total annual gross contributions made by member during the financial year % PMB
Allied health services	✓ Subject to PMSA and block benefit % PMB
Audiology, occupational therapy and speech therapy	✓ Subject to PMSA and block benefit % PMB
Block benefit	✓ R2 474/family/year % PMB
Chronic Back and Neck Rehabilitation Programme	✓ Subject to registration on Chronic Back and Neck Rehabilitation Programme % PMB MC
Circumcision	✓ Global limit of R1 639/beneficiary including post-op care within 1 month of procedure % PMB MC P C H
Dental services (conservative, dentistry including acute medicine)	✓ Shared with in-hospital limit of R3 690/beneficiary/year % PMB MC
Emergency assistance (road and air)	✓ % PMB MC
GP and Specialist services	✓ Limited to PMSA % PMB MC
GP network extender benefit	✓ For beneficiaries with chronic conditions registered on the disease management programme, 1 additional consultation at network GP once PMSA and block benefit are exhausted % PMB MC
HIV infection, AIDS and related illness	✓ Subject to registration on the HIV Disease Management Programme % PMB MC
Infertility	✓ % PMB MC P C
Maternity (ante- and post-natal care)	✓ Limited to PMSA, subject to Maternity Programme protocols % PMB MC
Medical and surgical appliances and prostheses	✓ Limited to R46 139/family/year % PMB MC
Mental health (Consultations, assessments, treatment and/or counselling by GP, Psychiatrist or Psychologist)	✓ Limited to PMSA Further shared sub-limit with in-hospital Mental Health of R2 366/family/year for services by Educational and Industrial Psychologists % PMB MC
Optical services (eye examinations, frames, lenses, permanent or disposable contact lenses and acute medicine)	✓ Limited to PMSA and block benefit % PMB MC
Pathology and Medical Technologists	✓ Subject to PMSA and block benefit % PMB
Physiotherapy	✓ Subject to PMSA and block benefit % PMB
Prescribed medicine and injection material	✓ Subject to PMSA and limited to R206/beneficiary/event and a limit of R607/family/year for homeopathic medicine % PMB MC C
Preventative care services	✓ All other vaccinations (in addition to the existing Influenza, Pneumococcal and HPV vaccinations), where clinically appropriate, subject to a financial limit of R780 per Beneficiary per annum. % PMB MC
Primary care extender	✗
Screening services	✓ % PMB MC P
Radiology (advanced)	✓ Sub-limit shared with in-hospital limit of R24 408/family/year % PMB A P C
Radiology (basic)	✓ Subject to PMSA % PMB MC
Renal dialysis	✓ If a non-network provider is voluntarily used, a co-payment of 30% will be applied per event % PMB MC

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EMERALD VALUE OPTION

In-Hospital Benefits	
Prescribed minimum benefits (PMBs)	✓ % PMB C U
Annual hospital benefit (public and private hospitals, registered unattached theatres, day clinics and psychiatric facilities)	✓ % PMB MC P C U
Alcohol and drug dependencies	✓ % PMB MC P
Allied health services	✓ Shared limit with in-hospital benefit of R1 749 /family/year % PMB MC P
Alternatives to hospitalisation (sub-acute hospitals and private nursing)	✓ % PMB MC P U
Blood transfusion	✓ % PMB A P C U
Dental services (conservative, restorative and specialised)	✓ Shared limit with out-of-hospital benefit of R5 672 /beneficiary/year Includes periodontal programme paid from risk, subject to periodontal treatment benefits % PMB A P
Emergency services (casualty department)	✓ Paid from out-of-hospital GP services for non-PMB and unauthorised events % PMB A P C
GP and Specialist services	✓ % PMB MC P U
Mental health	R20 341 /family/year Further shared sub-limit with out-of-hospital Mental Health of R2 366 /family/year for services by Educational and Industrial Psychologists % PMB MC P C
Oncology (chemotherapy and radiotherapy)	✓ Sub-limit of R406 836 /family/year % PMB A P C
Organ and tissue transplants	✓ R678 054 /beneficiary/year, R23 017 /beneficiary/year for corneal grafts % PMB MC P
Pathology and Medical Technology	✓ % PMB MC A P U
Physiotherapy	✓ R5 486 /beneficiary/year % PMB P C
Medical and surgical appliances and prostheses	✓ Limited to R46 139 /family/year (shared) generally, plus R46 139 /family/year for joint revisions only % PMB MC P
Radiology (advanced)	✓ Sub-limit of R24 408 (shared) % PMB A P C
Radiology (basic)	✓ % PMB A U
Renal dialysis	✓ Sub-limit of R290 588 /beneficiary/year for chronic dialysis % PMB MC A P C
Surgical procedures (including maxillofacial surgery)	✓ % PMB A P U

 Available
 Not Available
 % 100% Scheme rates apply PMB Limited to PMBs MC Subject to managed care rules DSP DSP Subject to the use of a Designated Service Providers
 A Subject to the service being related to admissions under the annual hospital benefit P Pre-authorisation is needed C 100% of cost, subject to PMB legislation
 SUB Subject to other sub-limits, refer to the GEMS Rules H Subject to annual hospital limit U Unlimited, refer to Scheme rules F Subject to referral by network GP

EMERALD VALUE OPTION



Out-of-Hospital Benefits	
Personal Medical Savings Account (PMSA)	✗
Allied health services	✓ Shared limit with in-hospital Allied health services of R1 749 % PMB
Audiology, occupational therapy and speech therapy	✓ Shared limit of R2 476 /beneficiary/year and R4 961 /family/year shared with pathology and medical technology, sub-limit of R1 991 /beneficiary and R3 978 /family/year % PMB
Block benefit (day-to-day benefit)	✓ Limited to R5 074 /beneficiary and R10 152 /family/year, subject to GP nomination and specialist referral rules % PMB
Chronic Back and Neck Rehabilitation Programme	✓ Subject to registration on Chronic Back and Neck Rehabilitation Programme % PMB MC
Circumcision	✓ Global limit of R1 639 /beneficiary including post-op care within 1 month of procedure % PMB MC P C H
Dental services (conservative, dentistry including acute medicine)	✓ Shared with in-hospital limit of R5 672 /beneficiary/year % PMB MC
Emergency assistance (road and air)	✓ % PMB MC
GP and Specialist services	✓ Shared limit with day-to-day block benefit % PMB MC F
GP network extender benefit	✓ For beneficiaries with chronic conditions registered on the disease management programme, 2 additional consultation at network GP once block benefit is exhausted % PMB MC P
HIV infection, AIDS and related illness	✓ Subject to registration on the HIV Disease Management Programme % PMB MC
Infertility	✓ % PMB MC P C
Maternity (ante- and post-natal care)	✓ Subject to Maternity Programme protocols % PMB MC
Medical and surgical appliances and prostheses	✓ Limited to R46 139 /family/year % PMB MC
Mental health (Consultations, assessments, treatments and/or counselling by GP, Psychiatrist or Psychologist)	✓ Sub-limit shared with in-hospital benefit of R20 341 /family/year Further shared sub-limit with in-hospital Mental Health of R2 366 /family/year for services by Educational and Industrial Psychologists % PMB MC
Optical services (eye examinations, frames, lenses, permanent or disposable contact lenses and acute medicine)	✓ Limit of R2 548 /beneficiary for every 2 years % PMB MC
Pathology and Medical Technologists	✓ Shared sub-limit with Audiology, occupational therapy and speech therapy of R2 476 /beneficiary and R4 961 /family/year. % PMB F
Physiotherapy	✓ Shared with day-to-day block benefit limit, sub-limit of R2 520 /beneficiary and R5 040 /family/year % PMB MC P
Prescribed medicine and injection material	✓ Limit of R4 068 /beneficiary and R12 203 /family/year, sub-limit of R607 for homeopathic medicine/family/year - Chronic medical conditions, limit of R12 203 /beneficiary and R24 574 for non-PMB conditions/family/year. Event limit of R274 /beneficiary. Sub-limit of R1 025 /beneficiary/year. Annual family limit of R1 639 . Contraceptives sub-limit of R3 088 /beneficiary/year % PMB MC C
Preventative care services	✓ All other vaccinations (in addition to the existing Influenza, Pneumococcal and HPV vaccinations), where clinically appropriate, subject to a financial limit of R780 per Beneficiary per annum. % PMB MC
Primary care extender	✓ Shared limit with GP services, pathology, medical technology and prescribed medication, R780 additional benefit/beneficiary/year once the block benefit or specific sub-limits are exhausted % PMB MC
Screening services	✓ % PMB MC P
Radiology (advanced)	✓ Sub-limit shared with in-hospital limit of R24 408 /family/year % PMB A P C
Radiology (basic)	✓ Sub-limit of R4 052 /beneficiary and R7 426 /family/year % PMB MC U F
Renal dialysis	✓ If a non-network provider is voluntarily used, a co-payment of 30% will be applied per event % PMB MC

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EMERALD

In-Hospital Benefits	
Prescribed minimum benefits (PMBs)	✓ % PMB C U
Annual hospital benefit (public and private hospitals, registered unattached theatres, day clinics and psychiatric facilities)	✓ % PMB MC P C U
Alcohol and drug dependencies	✓ % PMB MC P
Allied health services	✓ Shared limit with in-hospital benefit of R1 749 /family/year % PMB MC P
Alternatives to hospitalisation (sub-acute hospitals and private nursing)	✓ % PMB MC P U
Blood transfusion	✓ % PMB A P C U
Dental services (conservative, restorative and specialised)	✓ Shared limit with out-of-hospital benefit of R5 672 /beneficiary/year Includes periodontal programme paid from risk, subject to periodontal treatment benefits % PMB A P
Emergency services (casualty department)	✓ Paid from out-of-hospital GP services for non-PMB and unauthorised events % PMB A P C
GP and Specialist services	✓ % PMB MC P U
Mental health	R20 341 /family/year ✓ Further shared sub-limit with out-of-hospital Mental Health of R2 366 /family/year for services by Educational and Industrial Psychologists % PMB MC P C
Oncology (chemotherapy and radiotherapy)	✓ Sub-limit of R406 836 /family/year % PMB A P C
Organ and tissue transplants	✓ R678 054 /beneficiary/year, R23 017 /beneficiary/year for corneal grafts % PMB MC P
Pathology and Medical Technology	✓ % PMB MC A P U
Physiotherapy	✓ R5 486 /beneficiary/year % PMB P C
Medical and surgical appliances and prostheses	✓ Limited to R46 139 /family/year (shared) generally, plus R46 139 /family/year for joint revisions only % PMB MC P
Radiology (advanced)	✓ Sub-limit of R24 408 (shared) % PMB A P C
Radiology (basic)	✓ % PMB A U
Renal dialysis	✓ Sub-limit of R290 588 /beneficiary/year for chronic dialysis % PMB MC A P C
Surgical procedures (including maxillofacial surgery)	✓ Unlimited, includes maxillofacial surgery % PMB A P U

 Available
 Not Available
 % 100% Scheme rates apply PMB Limited to PMBs MC Subject to managed care rules DSP DSP Subject to the use of a Designated Service Providers
 A Subject to the service being related to admissions under the annual hospital benefit P Pre-authorisation is needed C 100% of cost, subject to PMB legislation
 SUB Subject to other sub-limits, refer to the GEMS Rules H Subject to annual hospital limit U Unlimited, refer to Scheme rules F Subject to referral by network GP



Out-of-Hospital Benefits	
Personal Medical Savings Account (PMSA)	✗
Allied health services	✓ Shared limit with in-hospital Allied health services of R1 749 % PMB
Audiology, occupational therapy and speech therapy	✓ Shared limit of R2 476 /beneficiary/year and R4 961 /family/year shared with pathology and medical technology, sub-limit of R1 991 /beneficiary and R3 978 /family/year % PMB
Block benefit (day-to-day benefit)	✓ Limited to R5 074 /beneficiary and R10 152 /family/year % PMB
Chronic Back and Neck Rehabilitation Programme	✓ Subject to registration on Chronic Back and Neck Rehabilitation Programme % PMB MC
Circumcision	✓ Global limit of R1 639 /beneficiary including post-op care within 1 month of procedure % PMB MC P C H
Dental services (conservative, dentistry including acute medicine)	✓ Shared with in-hospital limit of R5 672 /beneficiary/year % PMB MC
Emergency assistance (road and air)	✓ % PMB MC
GP and Specialist services	✓ Shared limit with day-to-day block benefit % PMB MC F
GP network extender benefit	✓ For beneficiaries with chronic conditions registered on the disease management programme, 2 additional consultation at network GP once block benefit is exhausted % PMB MC P
HIV infection, AIDS and related illness	✓ Subject to registration on the HIV Disease Management Programme % PMB MC
Infertility	✓ % PMB MC P C
Maternity (ante- and post-natal care)	✓ Subject to Maternity Programme protocols % PMB MC
Medical and surgical appliances and prostheses	✓ Limited to R46 139 /family/year % PMB MC
Mental health (Consultations, assessments, treatments and/or counselling by GP, Psychiatrist or Psychologist)	✓ Sub-limit shared with in-hospital benefit of R20 341 /family/year Further shared sub-limit with in-hospital Mental Health of R2 366 /family/year for services by Educational and Industrial Psychologists % PMB MC
Optical services (eye examinations, frames, lenses, permanent or disposable contact lenses and acute medicine)	✓ Limit of R2 548 /beneficiary for every 2 years % PMB MC
Pathology and Medical Technologists	✓ Shared sub-limit with Audiology, occupational therapy and speech therapy of R2 476 /beneficiary and R4 961 /family/year. % PMB
Physiotherapy	✓ Shared with day-to-day block benefit limit, sub-limit of R2 520 /beneficiary and R5 040 /family/year % PMB MC P
Prescribed medicine and injection material	✓ Limit of R4 068 /beneficiary and R12 203 /family/year, sub-limit of R607 for homeopathic medicine/family/year - Chronic medical conditions, limit of R12 203 /beneficiary and R24 574 for non-PMB conditions/family/year. Event limit of R274 /beneficiary. Sub-limit of R1 025 /beneficiary/year. Annual family limit of R1 639 . Contraceptives sub-limit of R3 088 /beneficiary/year % PMB MC C
Preventative care services	✓ All other vaccinations (in addition to the existing Influenza, Pneumococcal and HPV vaccinations), where clinically appropriate, subject to a financial limit of R780 per Beneficiary per annum. % PMB MC
Primary care extender	✓ Shared limit with GP services, pathology, medical technology and prescribed medication, R780 additional benefit/beneficiary/year once the block benefit or specific sub-limits are exhausted % PMB MC
Screening services	✓ % PMB MC P
Radiology (advanced)	✓ Sub-limit shared with in-hospital limit of R24 408 /family/year % PMB A P C
Radiology (basic)	✓ Sub-limit of R4 052 /beneficiary and R7 426 /family/year % PMB MC U F
Renal dialysis	✓ If a non-network provider is voluntarily used, a co-payment of 30% will be applied per event % PMB MC

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ONYX

In-Hospital Benefits	
Prescribed minimum benefits (PMBs)	✓ % PMB C U
Annual hospital benefit (public and private hospitals, registered unattached theatres, day clinics and psychiatric facilities)	✓ % PMB MC P C
Alcohol and drug dependencies	✓ % PMB MC P
Allied health services	✓ Subject to day-to-day block benefit % PMB MC P
Alternatives to hospitalisation (sub-acute hospitals and private nursing)	✓ % PMB MC P U
Blood transfusion	✓ % PMB A P C U
Dental services (conservative, restorative and specialised)	Shared limit with out-of-hospital benefit of R10 119 /beneficiary/year ✓ Includes periodontal programme paid from risk, subject to periodontal treatment benefits % PMB A P
Emergency services (casualty department)	✓ Paid from out-of-hospital GP services for non-PMB and unauthorised events % PMB A P C
GP and Specialist services	✓ % PMB MC P
Mental health	R42 715 /family/year ✓ Further shared sub-limit with out-of-hospital Mental Health of R2 366 /family/year for services by Educational and Industrial Psychologists % PMB MC P C
Oncology (chemotherapy and radiotherapy)	✓ Sub-limit of R533 976 /family/year % PMB A P C
Organ and tissue transplants	✓ R678 054 /beneficiary/year, R23 017 /beneficiary/year for corneal grafts % PMB MC P
Pathology and Medical Technology	✓ % PMB MC A P U
Physiotherapy	✓ R5 486 /beneficiary/year % PMB P C
Medical and surgical appliances and prostheses	✓ Limited to R62 326 /family/year (shared) generally, plus R62 326 /family/year for joint revisions only % PMB MC P
Radiology (advanced)	✓ Sub-limit of R30 514 (shared) % PMB A P C
Radiology (basic)	✓ % PMB A U
Renal dialysis	✓ Sub-limit of R290 588 /beneficiary/year for chronic dialysis % PMB MC A P C
Surgical procedures (including maxillofacial surgery)	✓ % PMB A P U

 Available
 Not Available
 % 100% Scheme rates apply PMB Limited to PMBs MC Subject to managed care rules DSP DSP Subject to the use of a Designated Service Providers
 A Subject to the service being related to admissions under the annual hospital benefit P Pre-authorisation is needed C 100% of cost, subject to PMB legislation
 SUB Subject to other sub-limits, refer to the GEMS Rules H Subject to annual hospital limit U Unlimited, refer to Scheme rules F Subject to referral by network GP

Out-of-Hospital Benefits

Personal Medical Savings Account (PMSA)	✗	
Allied health services	✓	Shared limit as per day to day block benefit % PMB
Audiology, occupational therapy and speech therapy	✗	
Block benefit (day-to-day benefit)	✓	Includes GP and specialist services, basic radiology, pathology, allied health services, physiotherapy, occupational therapy and speech therapy, mental health, maternity and contraceptives. Limited to R10 674 /beneficiary and R21 350 /family/year % PMB
Chronic Back and Neck Rehabilitation Programme	✓	Subject to registration on Chronic Back and Neck Rehabilitation Programme % PMB MC
Circumcision	✓	Global limit of R1 639 /beneficiary including post-op care within 1 month of procedure % PMB MC P C H
Dental services (conservative, dentistry including acute medicine)	✓	Shared with in-hospital limit of R10 119 /beneficiary/year % PMB MC
Emergency assistance (road and air)	✓	% PMB MC
GP and Specialist services	✓	Shared limit with day-to-day block benefit % PMB MC F
GP network extender benefit	✓	For beneficiaries with chronic conditions registered on the disease management programme, 1 additional consultation at network GP once block benefit is exhausted % PMB MC P
HIV infection, AIDS and related illness	✓	Subject to registration on the HIV Disease Management Programme % PMB MC
Infertility	✓	% PMB MC P C
Maternity (ante- and post-natal care)	✓	Subject to Maternity Programme protocols % PMB MC
Medical and surgical appliances and prostheses	✓	Limited to R62 326 /family/year % PMB MC
Mental health (Consultations, assessments, treatments and/or counselling by GP, Psychiatrist or Psychologist)	✓	Shared with day-to-day block benefit limit Further shared sub-limit with in-hospital Mental Health of R2 366 /family/year for services by Educational and Industrial Psychologists % PMB MC
Optical services (eye examinations, frames, lenses, permanent or disposable contact lenses and acute medicine)	✓	Limit of R3 008 /beneficiary for every 2 years % PMB MC
Pathology and Medical Technologists	✓	Shared sub-limit day-to-day block benefit % PMB
Physiotherapy	✓	Shared with day-to-day block benefit limit % PMB MC P
Prescribed medicine and injection material	✓	Limit of R6 858 /beneficiary and R19 208 /family/year, sub-limit of R607 for homeopathic medicine/family/year - Chronic medical conditions, limit of R20 840 /beneficiary and R42 715 for non-PMB conditions/family/year. Event limit of R341 /beneficiary. Sub-limit of R1 250 /beneficiary/year. Annual family limit of R2 070 % PMB MC C
Preventative care services	✓	All other vaccinations (in addition to the existing Influenza, Pneumococcal and HPV vaccinations), where clinically appropriate, subject to a financial limit of R780 per Beneficiary per annum. % PMB MC
Primary care extender	✗	
Screening services	✓	% PMB MC P
Radiology (advanced)	✓	Sub-limit shared with in-hospital limit of R30 514 /family/year % PMB A P C
Radiology (basic)	✓	Shared sub-limit with day-to-day block benefit % PMB MC U F
Renal dialysis	✓	If a non-network provider is voluntarily used, a co-payment of 30% will be applied per event % PMB MC