



2025

Marketing
Brochure

What a **GEM** worth sharing:

Healthcare designed to
meet the needs of the South
African family!

DISCOVER THE
BRILLIANCE
OF **GEMS**

The Government Employees Medical Scheme (GEMS) is a restricted medical scheme that provides accessible, affordable, and enhanced benefits to qualifying public service employees and their nominated beneficiaries. GEMS currently provides quality healthcare to almost **2.4 million beneficiaries**.

About GEMS

Our Mission

To provide all members with equitable access to **affordable and comprehensive healthcare**; promoting member wellbeing.

An excellent, sustainable and effective medical scheme that **drives transformation in the healthcare industry**, aligned with the **principles of universal healthcare coverage**.

Our Vision



Who can join the GEMS family?

GEMS is specifically designed to offer the following qualifying public service employees with healthcare cover:

- 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).

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



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

**The reason
GEMS is trusted
by almost 2.4
million people.**

GEMS pays an average of R5 billion per month towards member claims on healthcare, **which demonstrates our commitment to ensuring that we are there for you and your family when you need us the most.**

When compared with other schemes, **GEMS is 25% more affordable than any other product in the market with the same benefits.**

Contributions are based on income and family size.

Up to **100% subsidy for qualifying employees** on salary levels 1 – 5 on the Tanzanite One option (terms and conditions may apply).

Broadest definition of a beneficiary – **up to five generations can be covered!**



Close collaboration with **Trade Unions and government stakeholders.**

Know the Emerald Value Option a little better



Did you know that EVO members receive the same benefits as members on the Emerald option?

- ✓ The Emerald Value option (EVO) was created as an Efficiency Discount Option (EDO), underpinned by care coordination and the use of the GEMS Hospital Network.
- ✓ As a care-coordinated network option, EVO offers comprehensive in- and out-of-hospital benefits and a day-to-day block benefit.
- ✓ These are subject to GP nomination, GP-to-Specialist referrals, and the use of hospitals/facilities in the GEMS Hospital Network.
- ✓ Members must nominate a GP who will be their first point of care. When specialist care is required, members will need a referral letter from their nominated GP.

- ✓ This reduces the costs associated with hopping between GPs and specialists, which can lead to duplication of care and increased health expenditure.
- ✓ Members who use nominated GP networks do not incur co-payments for consultations. When members voluntarily choose to use a non-network provider, a co-payment of 30% applies.
- ✓ Members are allowed three non-nominated GP visits per family per year for cases of emergency and where nominated GPs are not accessible.



Emerald members can switch to EVO until 31 October 2025

To switch to EVO:

- ✓ Dial ***134*20018#**;
- ✓ Use the Member Portal by clicking on **"Login"** at **www.gems.gov.za**;
- ✓ Use the self-help facility by calling **0860 00 4367** and following the voice prompts;
- ✓ At a GEMS Walk-in Centre;
- ✓ Use the **GEMS Member App**;
- ✓ Send an email to **enquiries@gems.gov.za** or
- ✓ Send a fax to **0861 00 4367**.

This is subject to care coordination rules. Switching from Emerald to EVO can lower your monthly contributions by up to 16%.





Get the most out of your network options by adhering to **care coordination rules.**

1

Nominate a GP on the GEMS Network. You and your dependants can each nominate one GP to take care of all your healthcare needs.



gems
Tanzanite One



gems
Emerald Value



2

Specialist Visits. If you need specialist care, your GP will refer you to one through a referral letter as part of coordinated care. Your nominated GP should be on a network to avoid a 30% co-payment.

3

Hospital Visits. From time to time, we all may have to go to the hospital. As members on the Tanzanite One and Emerald Value options, 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 there are no GEMS network hospitals within a 50km radius of your residence and/or place of work, you may utilise the nearest hospital. The R15 000 co-payment will not apply if you utilise the non-network hospital in case of an emergency.

4

Getting more for less. Members on the Tanzanite One and Emerald Value options have access to a network of private hospitals, GP visits, and Specialist consultations, subject to adherence to care coordination rules. Members moving from Emerald to EVO experience a reduction in premiums.

Click here: to access the GEMS network hospitals.

Non-network hospital co-payments. Members on the Tanzanite One and Emerald Value options who opt not to use a hospital on the Hospital Network will have to pay a **R15 000 co-payment.**

2025 Changes

We are affordable!

GEMS is designed to provide cost-effective healthcare solutions, making it easier for public service employees to afford medical cover.

Changes to all Benefit Options:



Benefit limits have increased for all options!

An increase of **4.6%** on all In-Hospital and Out-of-Hospital monetary benefit limits.



Continuous Glucose Monitoring (CGM) and insulin pumps

The Scheme will now fund CGMs and insulin pumps, limited to one device per beneficiary **every five years for beneficiaries under 19 years with type one diabetes**, subject to the Scheme Rules.

Changes to Ruby, Emerald, EVO, and Onyx Benefit Options:



Frenectomies

Frenectomies will now be funded for in-hospital for children under the age of six, as is already the case with other dentistry procedures.



Tanzanite One and Beryl



Dental Sealants

Dental sealants will now be funded for beneficiaries **under the age of 18 years** as is the case for other benefit options, **subject to the use of a Network provider, under the Out-of-Hospital Preventative Care Services benefit.**



Family Practitioner Services

Members on the Tanzanite One and Beryl options will now have to request authorisation for out-of-hospital Family Practitioner and nurse (combined) consultations from the 16th consultation onwards.



Chronic Disease List (CDL) for all options

All options cover the following list of chronic conditions which are Prescribed Minimum Benefits (subject to managed care protocols, processes and formularies)

Addison's Disease; Asthma; Bi-polar Mood Disorder; Bronchiectasis; Cardiac Failure; Cardiomyopathy Disease; Chronic Renal Disease; Coronary Artery Disease; Chronic Obstructive; Pulmonary Disorder; Crohn's Disease; Diabetes Insipidus; Diabetes Mellitus Type 1; Diabetes Mellitus Type 2; Dysrhythmias; Epilepsy; Glaucoma; Haemophilia; HIV/AIDS; Hyperlipidaemia; Hypertension; Hypothyroidism; Multiple Sclerosis; Parkinson's Disease; Schizophrenia; Ulcerative Colitis; Rheumatoid Arthritis; Systemic Lupus Erythematosus.

Additional Chronic Disease (CDL) List

The following are payable from the Chronic Medicine Benefit (subject to managed care protocols, processes and formularies).

TANZANITE ONE

Anxiety; Attention Deficit and Hyperactivity Disorder; Depression.

BERYL

RUBY

Anxiety; Attention Deficit and Hyperactivity Disorder; Benign Prostatic Hyperplasia; Depression; Ménière's Disease; Osteoarthritis; Psoriasis; and Thrombo-Embolic Disease*.

EMERALD VALUE OPTION

EMERALD

ONYX

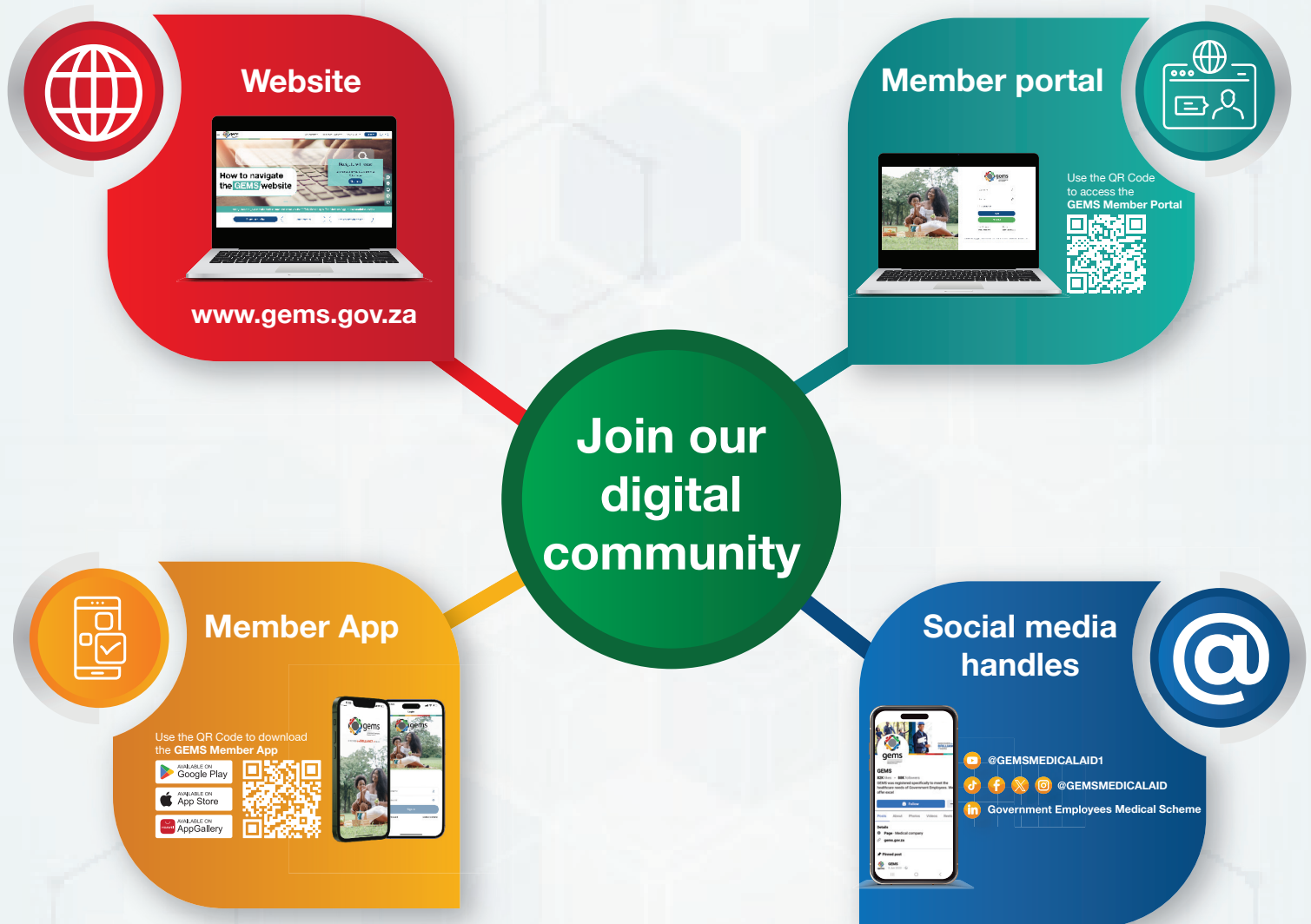
Acne; Allergic Rhinitis; Alzheimer's Disease; Ankylosing Spondylitis; Anorexia Nervosa; Anxiety Attention Deficit and Hyperactivity Disorder; Barrett's Esophagus; Benign prostatic hyperplasia; Bulimia Nervosa; Delusional Disorder; Dementias, including (but not limited to) Multi-infarct, Subcortical Vascular and Alcohol; Depression; Dermatitis; Eczema; Gastro Oesophageal Reflux Disease; Generalised Anxiety Disorder; Gout; Huntington's Disease. Hypoparathyroidism; Hypothyroidism; Interstitial Lung Disease; Ménière's Disease; Menopause; Myasthenia Gravis; Narcolepsy; Neuropathies; Obsessive Compulsive Disorder; Osteoarthritis; Osteopenia; Osteoporosis; Paget's Disease; Post-Traumatic Stress Syndrome; Psoriasis; Stroke; Systemic Sclerosis; Thrombocytopenic Purpura; Thrombo-Embolic Disease; Tourette's Syndrome; Valvular Heart Disease; and Zollinger-Ellison Syndrome.



Member Value Communication Channels

Our self-help digital channels provide easy access to GEMS information.

They also offer a richer user experience to our members, allowing you to update your information, view benefits and documents, submit claims, and manage your membership, all at your fingertips!










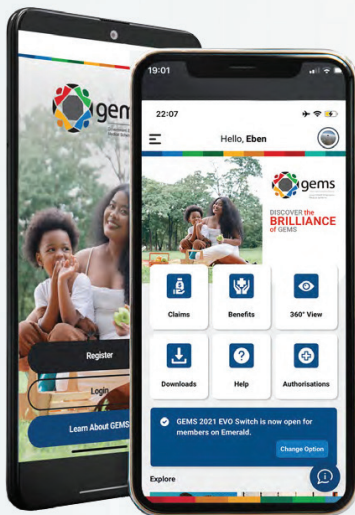
Mobile App and Member Portal

Download the mobile Member App or register on the Member Portal and experience the BRILLIANT features!

You can do the following on these channels:

-  Update your personal details under the profile section.
-  Don't have your membership card? Login and access your digital membership card.
-  Filter your claims - You can now submit a claim, view your claims history and download your claims statement.
-  Benefit management - Manage and view your benefit usage, access your documents (member certificate or tax certificate), request a new card, and view your option and dependent(s) information.
-  Documents - Download your personal health record, tax certificates, and membership certificate.

ACCESS THIS AND MORE ON THE MEMBER PORTAL AND MOBILE APP. DOWNLOAD THE MOBILE APP OR CREATE YOUR ACCOUNT FOR THE MEMBER PORTAL TODAY.



AVAILABLE ON
 Google Play

AVAILABLE ON
 App Store

AVAILABLE ON
 AppGallery



Use the QR Code
to access the
GEMS Member Portal

How we stay connected with you



GEMS News

GEMS has an interactive digital platform called GEMS News which provides news updates and Scheme communication to all members and stakeholders.

This is available to all members and is shared on our website and social media platforms.

Quarterly G-Health Digital Magazine

Our quarterly issue of G-Health Digital Magazine is an effective way for us to keep our members informed and involved with the Scheme. The digital magazines are distributed to our members on a quarterly basis and shared on our website and social media platforms.



GEMS Day Events

GEMS places a high priority on the well-being of every member. In light of this, GEMS continues to hold both physical and virtual GEMS days to inform our members about the value of their health and well-being. We also make use of this chance to inform members about the various GEMS options and benefits. The topics discussed during the GEMS days are carefully selected based on the feedback from our members and with the aim to cover what is topical during that period.

GEMS G-POD

Experience the full offering of the digital era with our newly launched GEMS podcast series, G-Pod! Members can learn about maximising their benefits, how medical aids work, and why over **2.3 million people** trust GEMS for their healthcare needs.

Tune in on YouTube, Spotify, or Apple Podcasts, and subscribe for future episodes!



A FINANCIAL PERSPECTIVE

Your 2025 monthly contributions

GEMS is pleased to announce that member contributions for 2025 will only increase by an estimated average of R438, subject to the average family size across our benefit options. This adjustment is necessary to ensure the Scheme's long-term sustainability. It is important to note that GEMS' contributions are 25% lower than other medical schemes for the average family. Your increase will also be dependent on your salary band and the number of beneficiaries registered.* The tables below show the full contributions for the year 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



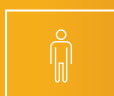
R0 - R10 989.00	R1 546	R1 221	R666
R10 989.01 - R15 421.00	R1 620	R1 298	R718
R15 421.01 - R26 418.00	R1 824	R1 444	R804
R26 418.01 +	R2 134	R1 806	R1 022

EMERALD VALUE



R0 - R16 549.00	R3 374	R2 578	R1 254
R16 549.01 - R28 581.00	R3 734	R2 894	R1 407
R28 581.01 +	R4 183	R3 216	R1 567

BERYL



R0 - R10 989.00	R1 744	R1 740	R979
R10 989.01 - R15 421.00	R1 893	R1 878	R1 080
R15 421.01 - R26 418.00	R2 185	R2 185	R1 226
R26 418.01 +	R2 624	R2 624	R1 489

EMERALD



R0 - R16 549.00	R4 030	R3 070	R1 496
R16 549.01 - R28 581.00	R4 460	R3 448	R1 676
R28 581.01 +	R5 001	R3 834	R1 870

RUBY



R0 - R16 549.00	R3 605	R2 705	R1 395
R16 549.01 - R28 581.00	R4 015	R3 015	R1 565
R28 581.01 +	R4 445	R3 350	R1 725

Please note: 20% of contributions on the Ruby Option will go towards the Personal Medical Savings Account.

ONYX



R0 - R16 549.00	R6 988	R5 350	R2 101
R16 549.01 - R35 263.00	R7 272	R5 537	R2 283
R35 263.01 +	R7 852	R6 035	R2 547

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

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



Salary level

Refers to monthly salary



Member

Refers to Principal member



Adult

Refers to any Adult Dependant



Child

Refers to any Child Dependant

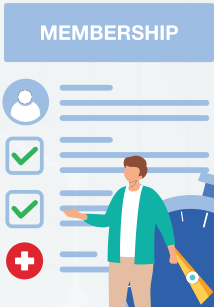


Kindly note that the payroll cut-off date for the January 2025 salary payment run is 16 December 2024. All option changes or remuneration updates processed on or after 16 December 2024 will result in an arrear deduction or refund from your February 2025 salary.

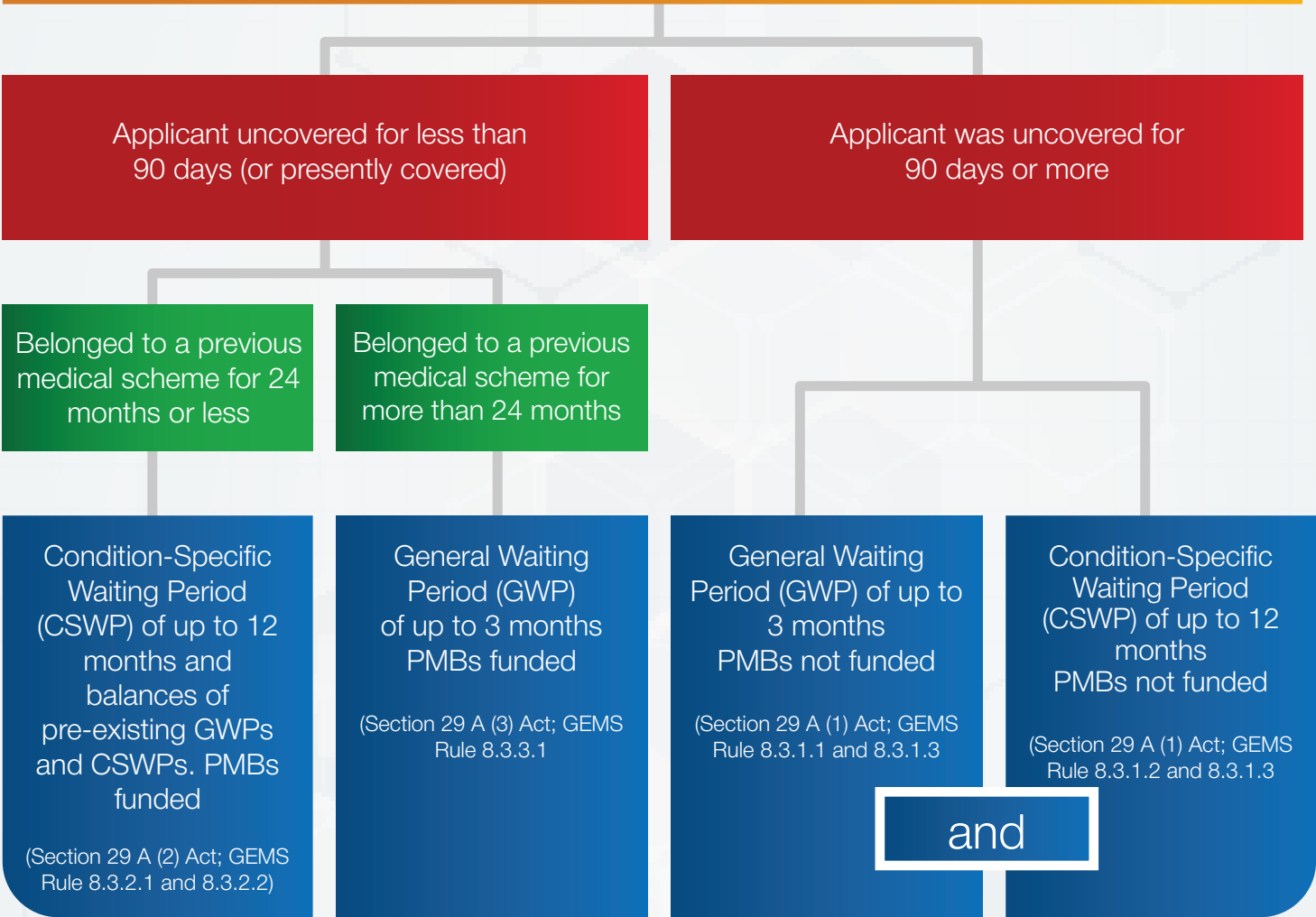


Understanding Underwriting

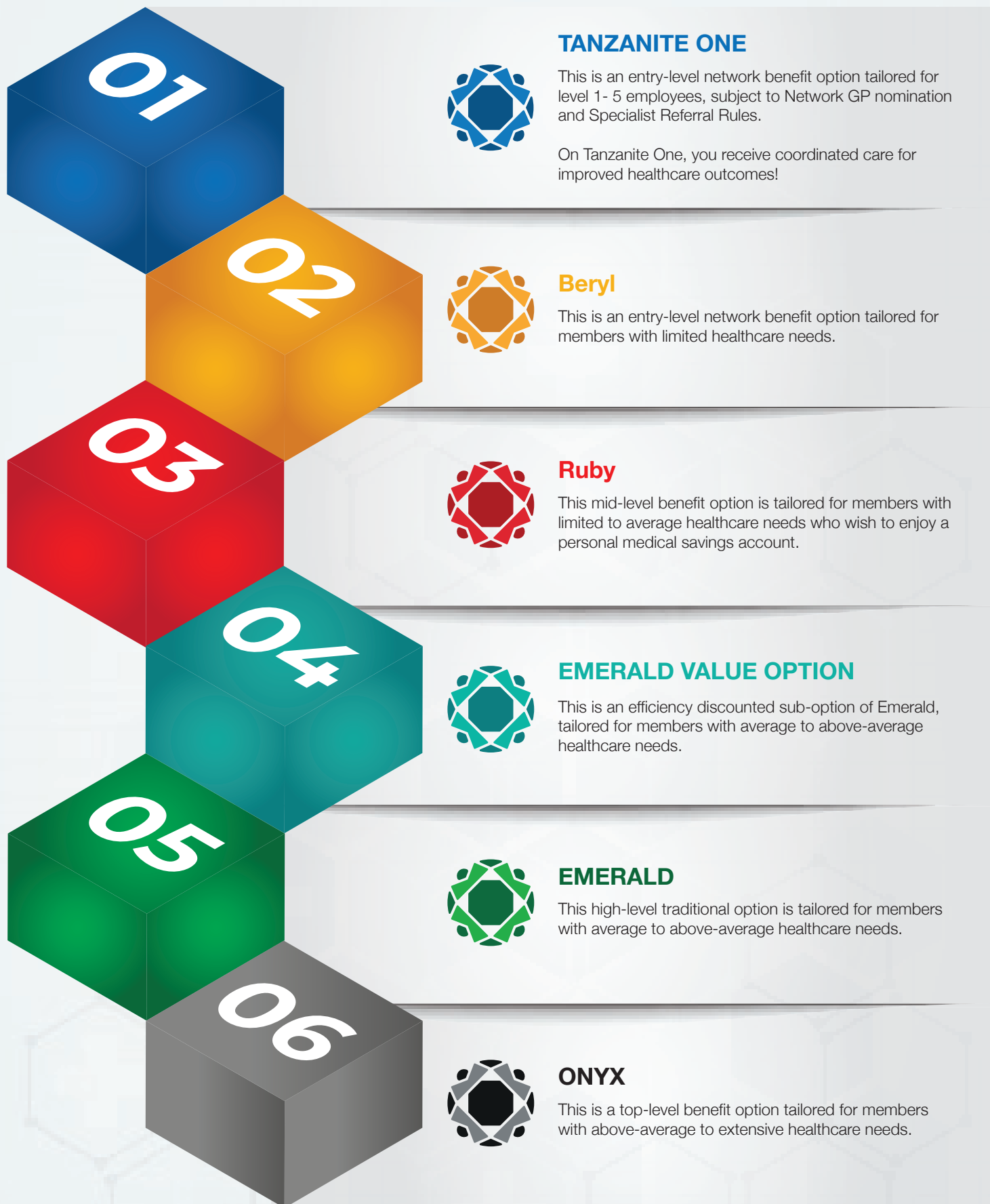
If I am subjected to underwriting,
which waiting period will apply?



New applicants will be tested for waiting periods and applicable late joiner penalties.



Our Benefit Options





Choose a cover from one of our five options or the EVO sub-option



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 your dependants will each nominate a GP. Your GP will refer you to a specialist when required (this means that you cannot visit a specialist without a GP referral letter, otherwise a 30% penalty will be applied). 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 benefits:

- 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.
- Access to public healthcare facilities.



- 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.
- Access to public healthcare facilities.



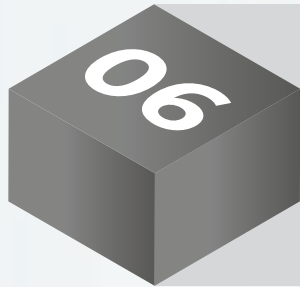
- Offers members comprehensive In-Hospital benefits for healthcare services rendered in and by public and private hospitals.
- Comprehensive Out-of-Hospital benefits for healthcare services.
- Personal Medical Savings Account (PMSA) and Block Benefit from which some In- and Out-of-Hospital healthcare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



- 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 same benefits as they would on Emerald; however, you must nominate a Network GP.
- A Primary Care Extender benefit for GP consultations, medicine claims and pathology claims.
- Cover for forty-one additional non-PMB chronic conditions.
- Access to public healthcare facilities.



- Offers members comprehensive In-Hospital benefits for healthcare services.
- Comprehensive Out-of-Hospital benefits for healthcare services.
- A Primary Care extender benefit for GP consultations, medicine claims and pathology claims.
- Cover for forty-one additional non-PMB chronic conditions.
- Access to public healthcare facilities.



- Offers members comprehensive In-Hospital benefits for healthcare services.
- Comprehensive Out-of-Hospital benefits for healthcare services.
- Cover for forty-one additional non-PMB chronic conditions.
- Access to public healthcare facilities.









NOTE

Always contact the GEMS emergency contact centre on **0800 44 4367** if you:

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

IN-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
In-Hospital Benefits	R316 308 per family per annum. Subject to sub-limits    
Public Hospitals, Private Hospitals, Registered Unattached Theatres, Day Clinics and Psychiatric Facilities	Non-network hospital co-payment R15 000 per hospital admission.    
Surgical Procedures	R29 213 per family per annum.    
Advanced Radiology	Sub-limit of R10 122 or R15 183 if R10 122 sub-limit is exceeded with first CT/MRI scan per beneficiary per annum shared with out-of-hospital advanced radiology.    
Physiotherapy	R3 164 per beneficiary per event. Subject to annual In-hospital limit.    
Post Hip, Knee and Shoulder Replacement or Revision Physiotherapy	R7 044 per beneficiary per event shared with out-of-hospital post hip, knee and shoulder replacement or revision physiotherapy.    
Organ and tissue transplants	R28 001 per beneficiary per annum for corneal grafts (imported corneal grafts subject to managed care protocols).    
Prostheses	Sub-limit of R37 227 per family per annum for prostheses generally, plus R37 227 for joint revision only. Shared sub-limit with out-of-hospital prosthetics and appliances of R6 164 for foot orthotics and prosthetics with sub-limit of R1 761 for orthotic shoes, foot/ankle/shoe inserts and levellers per beneficiary per annum. Crutches limited to R701 per beneficiary per annum. Wheelchairs limited to R7 716 per beneficiary every 24 months. Hearing aids limited to R6 314 per beneficiary every 36 months. One (1) CPAP device limited to R8 761 per beneficiary every 36 months. Three (3) pairs of compression stockings of up to R584 per pair per beneficiary per annum. One (1) pulse oximeter of up to R467 per family per annum. One (1) knee brace and one (1) back brace of up to R3 499 per brace per beneficiary per annum.    
Mental Health	R12 652 per beneficiary per annum. Further shared sub-limit with out-of-hospital mental health of R2 879 per family per annum for services by educational and industrial psychologists.    
Allied Health Services	R2 025 per family and R1 266 per beneficiary, per annum.    
Prescribed minimum benefits (PMBs)	   
Alcohol and drug dependencies	    
Alternatives to hospitalisation (sub-acute hospitals and private nursing)	    
Blood transfusion	     

IN-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Emergency services (casualty department)	✓ % PMB A P C
GP and Specialist services	✓ % PMB MC P H
Renal dialysis	✓ % PMB MC A P C H
Radiology (basic)	✓ % PMB A H
Pathology and Medical Technology	✓ % PMB MC A P H
Oncology (chemotherapy and radiotherapy)	✓ % PMB A P C H

TANZANITE ONE

OUT-OF-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Family Practitioner Services Consultations, visits and all other Family Practitioner services not specifically provided for.	Unlimited consultations with nominated network family practitioners subject to medical necessity and managed care protocols and processes. However, consultations: Sixteenth (16th) and subsequent consultations subject to pre-authorization. ✓ MC U C
Preventative Care Services	Vaccinations (excluding influenza vaccinations, HPV vaccinations and pneumococcal vaccinations) limited to R950 per beneficiary per annum. ✓ MC U C
Dental Services 1. Clinically indicated root canal treatments 2. Periodontal programme	1: Limited to one (1) root canal treatment per beneficiary per annum, which includes one (1) emergency out-of-network visit per beneficiary per annum, subject to PMBs. 2: Paid from Risk, but limited to periodontal programme benefits. ✓ MC U C
	1: Unlimited, but limit of R738 per family per annum for homeopathic medicine, and prescription by a dispensing Family Practitioner, dispensed by a DSP/Network Pharmacy: Limited to three (3) scripts of up to R253 each per beneficiary per annum. 2: R4 429 per beneficiary per annum for non-PMB chronic conditions listed in Annexure D of the GEMS rules (no benefit for non-PMB chronic conditions not listed in Annexure D of the GEMS rules). 3: R120 per beneficiary per event and R334 per beneficiary per annum. 4: Limited to R3 757 per beneficiary per annum. ✓ MC U C
Advanced Radiology	Sub-limit of R10 122 or R15 183 if R10 122 sub-limit is exceeded with first CT/MRI scan per beneficiary per annum shared with in-hospital advanced radiology. ✓ MC U C
Optical Services	R1 519 per beneficiary every 2nd year. Post cataract surgery, optical PMB entitlement limited to R1 744 for both lens and frame with a sub-limit of R293 for the frame. ✓ MC U C
Allied Health Services	Limit of R2 025 per family, and R1 266 per beneficiary, per annum, shared with out-of-hospital other professional health services, physiotherapy, audiology, occupational therapy and speech therapy. ✓ MC U C
Post Hip, Knee and Shoulder Replacement or Revision Physiotherapy	R7 044 per beneficiary per event shared with in-hospital post hip, knee and shoulder replacement or revision physiotherapy. ✓ MC U C
Radiology (basic)	✓ % PMB MC U F
Screening services	✓ % PMB P
Primary care extender	✗
Pathology and Medical Technologists	✓ % PMB F

TANZANITE ONE

OUT-OF-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Medical and Surgical Appliances and Prostheses	<p>R8 761 per family.</p> <p>Shared sub-limit with in-hospital prosthetics of R6 164 for foot orthotics and prosthetics with sub-limit of R1 761 for orthotic shoes, foot/ankle/shoe inserts and levellers per beneficiary per annum.</p> <p>Crutches limited to R701 per beneficiary per annum.</p> <p>Wheelchairs limited to R7 716 per beneficiary every 24 months.</p> <p>Hearing aids limited to R6 314 every 36 months.</p> <p>One (1) CPAP device limited to R8 761 every 36 months.</p> <p>Three (3) pairs of compression stockings of up to R584 per pair per beneficiary per annum.</p> <p>One (1) pulse oximeter of up to R467 per Family per annum.</p> <p>One (1) knee brace and one (1) back brace of up to R3 499 per brace per beneficiary per annum.</p> <p>Continuous Glucose Monitors (CGM) and Insulin Pumps limited to:</p> <ul style="list-style-type: none"> • R59 531 per family per annum. • One (1) device per Beneficiary every sixty (60) months since month of receipt of device. • R28 324 per Beneficiary per annum for consumables. <p>Type one (1) diabetics aged below 19 years.</p> <p>✓ MC U C</p>
Mental Health	<p>Limit of R6 326 per beneficiary, per annum.</p> <p>Further shared sub-limit with in-hospital mental health of R2 879 per family per annum for services by educational and industrial psychologists.</p> <p>✓ MC U C</p>
Infertility	<p>Non-network hospital co-payment R15 000 per hospital admission.</p> <p>✓ MC U C</p>
Circumcision	<p>Limited to global fee of R1 994 per beneficiary.</p> <p>✓ MC U C</p>
Personal Medical Savings Account (PMSA)	✗
Audiology, occupational therapy and speech therapy	<p>✓ % PMB MC</p>
Block benefit (day-to-day benefit)	✗
Emergency assistance (road and air)	<p>✓ % PMB MC</p>
General Practitioner (GP) and Specialist services	<p>✓ % PMB MC F</p>
GP network extender benefit (for beneficiaries with chronic conditions registered on a DMP)	✗
Infertility	<p>✓ % PMB MC P C</p>
Maternity (ante- and post-natal care). Subject to registration on the programme	<p>Subject to Maternity Programme Protocols</p> <p>✓ % PMB MC</p>



Available



Not Available

















































% 100% Scheme rates apply PMB Limited to PMBs MC Subject to managed care rules

SUB Subject to other sub-limits, refer to the GEMS Rules 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 H Subject to annual hospital limit

U Unlimited, refer to Scheme rules F Subject to referral by network GP

IN-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
In-Hospital Benefits	R1 460 702 per family per annum.    
Surgical Procedures	Maxillofacial surgery, subject to an annual sub-limit of R29 213 per family.    
Advanced Radiology	R28 226 per family per annum.    
Physiotherapy	R6 344 per beneficiary per event. Subject to annual In-hospital limit.    
Post Hip, Knee and Shoulder Replacement or Revision Physiotherapy	R7 044 per beneficiary per event.    
Organ and Tissue Transplants	Limit of R824 901 per beneficiary per annum and a sub-limit of R28 001 per beneficiary per annum for corneal grafts (imported grafts subject to managed care protocols).    
Prostheses	R43 823 per family per annum for prostheses generally, plus R43 896 for joint revision only. Shared sub-limit with out-of-hospital prosthetics of R6 164 for foot orthotics and prosthetics with sub-limit of R1 761 for orthotic shoes, foot/ankle/shoe inserts and levellers per beneficiary per annum. Crutches limited to R701 per beneficiary per annum. Wheelchairs limited to R7 761 per beneficiary every 24 months. Hearing aids limited to R11 223 per beneficiary every 36 months. One (1) CPAP device limited to R13 328 per beneficiary every 36 months. Three (3) pairs of compression stockings of up to R584 per pair per beneficiary per annum. One (1) pulse oximeter of up to R467 per family per annum. One (1) knee brace and one (1) back brace of up to R3 499 per brace per beneficiary per annum.    
Renal Dialysis	R292 135 per family per annum.    
Oncology (Chemo and Radiotherapy)	R292 135 per family per annum.    
Mental Health	R23 523 per beneficiary per annum less the beneficiary's usage of the R13 272 under C19: mental health. Further shared sub-limit with out-of-hospital mental health of R2 879 per family per annum for services by educational and industrial psychologists.    
Medical Technologists	R29 213 per family per annum.    
Allied Health Services	Sub-limit of R2 830 per beneficiary, and R4 255 per family, per annum.    



BERYL

IN-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Prescribed minimum benefits (PMBs)	✓ % PMB C U
Alcohol and drug dependencies	✓ % PMB MC P
Alternatives to hospitalisation (sub-acute hospitals and private nursing)	✓ % PMB MC P
Blood transfusion	✓ % PMB A P C
Emergency services (casualty department)	✓ % PMB A P C
GP and Specialist services	✓ % PMB MC P H
Radiology (basic)	✓ % PMB A H
Pathology and Medical Technology	✓ % PMB MC A P H

OUT-OF-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Family Practitioner Services 1. DSP/Network providers 2. Voluntary use of out-of-network providers	1: Unlimited consultations, visits and approved minor procedures at DSP/Network providers, subject to medical necessity and managed care protocols and processes. Consultations: Sixteenth (16th) and subsequent consultations per Beneficiary per annum, subject to pre-authorization 2: R1 445 per event, limited to three visits per beneficiary per annum. ✓ MC U C
Preventative Care Services	Vaccinations (excluding influenza vaccinations, HPV vaccinations and pneumococcal vaccinations) limited to R950 per beneficiary per annum. ✓ MC U C
Specialist Services	Limited to 5 consultations or R5 255 per family, and 3 consultations or R3 505 per beneficiary per annum. ✓ MC U C
	1: Unlimited, but limit of R738 per family per annum for homeopathic medicine, and prescription by a dispensing family practitioner, dispensed by a DSP/Network pharmacy: limited to three (3) scripts of up to R253 each per beneficiary per annum. 2: R5 567 per beneficiary per annum for non-PMB chronic conditions listed in Annexure D of the GEMS rules (no benefit for non-PMB chronic conditions not listed in Annexure D of the GEMS rules). 3: R120 per beneficiary per event and R334 per beneficiary per annum. 4: Female contraceptives limited to R3 757 per Beneficiary per annum ✓ MC U C
Advanced Radiology	R28 226 per family per annum. ✓ MC U C
Optical Services	R1 924 per beneficiary every 2nd year. Post cataract surgery, optical PMB entitlement limited to R1 744 for both lens and frame with a sub-limit of R293 for the frame. ✓ MC U C
Allied Health Services	Shared limit of R2 830 per beneficiary, and R4 255 per family, per annum. ✓ MC U C
Other Professional Health Services	Sub-limit of R2 128 per family for social workers and registered counsellors. ✓ MC U C
Post Hip, Knee and Shoulder Replacement or Revision Physiotherapy	R7 044 per beneficiary per annum. ✓ MC U C
Personal Medical Savings Account (PMSA)	✗
Audiology, occupational therapy and speech therapy	✓ % PMB MC P C
Block benefit (day-to-day benefit)	✗
Dental services (conservative, dentistry including acute medicine)	✓ % PMB MC
Emergency assistance (road and air)	✓ % PMB MC
General Practitioner (GP) and Specialist services	✓ % PMB MC
GP network extender benefit (for beneficiaries with chronic conditions registered on a DMP)	✗



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OUT-OF-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Medical and Surgical Appliances and Prostheses	<p>R14 606 per family.</p> <p>Shared sub-limit with in-hospital prosthetics of R6 164 for foot orthotics and prosthetics with sub-limit of R1 761 for orthotic shoes, foot/ankle/shoe inserts and levellers per beneficiary per annum.</p> <p>Crutches limited to R701 per beneficiary per annum.</p> <p>Wheelchairs limited to R7 716 per beneficiary every 24 months.</p> <p>Hearing aids limited to R11 223 every 36 months.</p> <p>One (1) CPAP device limited to R13 328 every 36 months.</p> <p>Three (3) pairs of compression stockings of up to R584 per pair per beneficiary per annum.</p> <p>One (1) pulse oximeter of up to R467 per family per annum.</p> <p>One (1) knee brace and one (1) back brace of up to R3 499 per brace per beneficiary per annum.</p> <p>Continuous Glucose Monitors (CGM) and Insulin Pumps limited to:</p> <ul style="list-style-type: none"> • R59 531 per family per annum. • One (1) device per Beneficiary every sixty (60) months since month of receipt of device. • R28 324 per Beneficiary per annum for consumables. <p>Type one (1) diabetics aged below 19 years.</p> <p>✓ MC U C</p>
Mental Health	<p>R13 272 per family per annum.</p> <p>Further shared sub-limit with in-hospital mental health of R2 879 per family per annum for services by educational and industrial psychologists.</p> <p>✓ MC U C</p>
Infertility	<p>Non-network hospital co-payment R15 000 per hospital admission.</p> <p>✓ MC U C</p>
Circumcision	<p>Global fee of R1 994 per beneficiary.</p> <p>✓ MC U C</p>
Infertility	<p>✓ % PMB MC P C</p>
Radiology (basic)	<p>✓ % PMB MC U F</p>
Screening services	<p>✓ % PMB P</p>
Primary care extender	<p>✗</p>
Pathology and Medical Technologists	<p>✓ % PMB P F</p>
Maternity (ante- and post-natal care). Subject to registration on the programme	<p>Subject to Maternity Programme Protocols</p> <p>✓ % PMB MC</p>



Available



Not Available
















% 100% Scheme rates apply PMB Limited to PMBs MC Subject to managed care rules

SUB Subject to other sub-limits, refer to the GEMS Rules 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 H Subject to annual hospital limit

U Unlimited, refer to Scheme rules F Subject to referral by network GP

IN-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Advanced Radiology	R29 694 per family per annum.  MC U C
Physiotherapy	R6 673 per beneficiary per annum.  MC U C
Post Hip, Knee and Shoulder Replacement or Revision Physiotherapy	R7 044 per beneficiary per event. Limited to 10 post-surgery physiotherapy visits, shared with block benefit.  MC U C
Organ and Tissue Transplants	R824 901 per beneficiary per annum. R28 001 per beneficiary per annum for corneal grafts.  MC U C
Prostheses	R56 131 per family per annum shared with Medical and Surgical Appliances and Prostheses generally, plus R56 131 for joint revisions only. Shared sub-limit with out-of-hospital prosthetics of R6 164 for foot orthotics and prosthetics with sub-limit of R1 761 for orthotic shoes, foot/ankle/shoe inserts and levellers per beneficiary per annum. Crutches limited to R701 per beneficiary per annum. Wheelchairs limited to R7 716 per beneficiary every 24 months. Hearing aids limited to R11 223 per beneficiary every 36 months. One (1) CPAP device limited to R13 328 per beneficiary every 36 months. Three (3) pairs of compression stockings of up to R584 per pair per beneficiary per annum. One (1) pulse oximeter of up to R467 per family per annum. One (1) knee and one (1) back brace of up to R3 499 per brace per beneficiary per annum  MC U C
Renal Dialysis	R353 521 per beneficiary per annum.  MC U C
Oncology (Chemo and Radiotherapy)	R445 453 per family per annum R336 702 per family for biological and similar specialised medicines.  MC U C
Mental Health	R24 746 per family per annum. Further shared sub-limit with out-of-hospital mental health of R2 879 per family per annum for services by educational and industrial psychologists.  MC U C
Prescribed minimum benefits (PMBs)	 % PMB U C
Annual hospital benefit (public and private hospitals, registered unattached theatres, day clinics and psychiatric facilities)	 % PMB MC P
Alcohol and drug dependencies	 % PMB MC P
Alternatives to hospitalisation (sub-acute hospitals and private nursing)	 % PMB MC P
Blood transfusion	 % PMB A P C
GP and Specialist services	 % PMB MC P
Pathology and Medical Technology	 % PMB MC A P

OUT-OF-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Block Benefits	R3 009 per family per annum.  MC U C
Dental Services	R4 489 per beneficiary per annum, excluding dental sealants for beneficiaries under the age of 18 years.  MC U C
	1: Subject to PMSA and limit of R738 per family per annum for homeopathic medicine. 2: Unlimited, but subject to PMB legislation. 3: Subject to PMSA and limited to R251 per beneficiary per event.  MC U C
Advanced Radiology	R29 694 per family per annum.  MC U C
Optical Services	Frame sub-limit: R1 636 per beneficiary once members are claiming from Block Benefit. Post cataract surgery, optical PMB entitlement limited to R1 744 for both lens and frame with a sub-limit of R293 for the frame.  MC U C
Post Hip, Knee and Shoulder Replacement or Revision Physiotherapy	R7 044 per beneficiary per annum.  MC U C
Medical and Surgical Appliances and Prostheses	Shared limit with in-hospital prosthesis of R56 131 per family per annum. Sub-limit of R21 901 per family per annum. Shared sub-limit with in-hospital prosthetics of R6 164 for foot orthotics and prosthetics with sub-limit of R1 761 for orthotic shoes, foot/ankle/shoe inserts and levellers per beneficiary per annum. Crutches limited to R701 per beneficiary per annum. Wheelchairs limited to R7 716 per beneficiary every 24 months. Hearing aids limited to R11 223 every 36 months. One (1) CPAP device limited to R13 328 every 36 months. Three (3) pairs of compression stockings of up to R584 per pair per beneficiary per annum. One (1) pulse oximeter of up to R467 per family per annum. One (1) knee brace and one (1) back brace of up to R3 499 per brace per beneficiary per annum. Continuous Glucose Monitors (CGM) and Insulin Pumps limited to: • R59 531 per family per annum. • One (1) device per beneficiary every sixty (60) months since month of receipt of device. • R28 324 per Beneficiary per annum for consumables. Type one (1) diabetics aged below 19 years.  MC U C
	1: Vaccinations (excluding influenza vaccinations, HPV vaccinations and pneumococcal vaccinations) limited to R950 per beneficiary per annum.  MC U C
Emergency assistance (road and air)	 % PMB MC
Infertility	 % PMB MC P C
Primary care extender	
Screening services	 % PMB P



RUBY

OUT-OF-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Mental Health	<p>Limited to PMSA.</p> <p>Shared sub-limit with B18: mental health of R2 879 per family per annum for services by educational and industrial psychologists.</p> <p>Limited to one (1) individual psychologist consultation and one (1) group psychologist consultation per day.</p> <p>✓ MC U C</p>
Infertility	<p>Non-network hospital co-payment R15 000 per hospital admission.</p> <p>✓ MC U C</p>
Circumcision	<p>Global fee of R1 994 per beneficiary.</p> <p>✓ MC U C</p>
Maternity (ante- and post-natal care). Subject to registration on the programme	<p>Subject to Maternity Programme Protocols</p> <p>✓ % PMB MC</p>



Available



Not Available



100% Scheme rates apply



Limited to PMBs



Subject to managed care rules



Subject to other sub-limits, refer to the GEMS Rules



Subject to the service being related to admissions under the annual hospital benefit



Pre-authorisation is needed



100% of cost, subject to PMB legislation



Subject to annual hospital limit



Unlimited, refer to Scheme rules



Subject to referral by network GP



EMERALD & EMERALD VALUE

IN-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Public Hospitals, Private Hospitals, Registered Unattached Theatres, Day Clinics and Psychiatric Facilities	Non-network hospital co-payment R15 000 per hospital admission. ✓ MC U C
Advanced Radiology	R29 694 per family per annum. ✓ MC U C
Physiotherapy	R6 673 per beneficiary per annum. ✓ MC U C
Post Hip, Knee and Shoulder Replacement or Revision Physiotherapy	R7 044 per beneficiary per event. Limited to 10 post-surgery physiotherapy visits, shared with block benefit. ✓ MC U C
Organ and Tissue Transplants	R824 901 per beneficiary per annum. Sub-limit of R28 001 per annum for corneal grafts. ✓ MC U C
Prostheses	R56 131 per family per annum shared with Medical and Surgical Appliances and Prostheses generally, plus R56 131 for joint revision only. Shared sub-limit with out-of-hospital prosthetics and appliances of R6 164 for foot orthotics and prosthetics with sub-limit of R1 761 for orthotic shoes, foot/ankle/shoe inserts and levellers per beneficiary per annum. Crutches limited to R701 per beneficiary per annum. Wheelchairs limited to R7 716 per beneficiary every 24 months. Hearing aids limited to R11 223 per beneficiary every 36 months. One (1) CPAP device limited to R13 328 per beneficiary every 36 months. Three (3) pairs of compression stockings of up to R584 per pair per Beneficiary per annum. One (1) pulse oximeter of up to R467 per Family per annum. One (1) knee brace and one (1) back brace of up to R3 499 per brace per beneficiary per annum. ✓ MC U C
Renal Dialysis	R353 521 per beneficiary per annum ✓ MC U C
Oncology (Chemo and Radiotherapy)	Limit of R494 945 per family per annum. Sub-limit of R336 702 per family for biological and similar specialised medicines. ✓ MC U C
Mental Health	R24 746 per family per annum. Further shared sub-limit with out-of-hospital mental health of R2 879 per family per annum for services by educational and industrial psychologists. ✓ MC U C
Allied Health Services	R2 128 per family per annum. ✓ MC U C
Other Professional Health Services	Sub-limit of R1 652 per family for social workers and registered counsellors. ✓ MC U C



EMERALD & EMERALD VALUE

IN-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Prescribed minimum benefits (PMBs)	✓ % PMB U C
Alcohol and drug dependencies	✓ % PMB MC P
Alternatives to hospitalisation (sub-acute hospitals and private nursing)	✓ % PMB MC P U
Blood transfusion	✓ % PMB A P C U
GP and Specialist services	✓ % PMB MC P U
Pathology and Medical Technology	✓ % PMB MC A P U
Radiology (basic)	✓ % PMB A U
Surgical procedures (including maxillofacial surgery)	✓ % PMB A P U



EMERALD & EMERALD VALUE

OUT-OF-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Day to day Block Benefit	R6 173 per beneficiary and R12 351 per family per annum. ✓ MC U C
Primary Care Extender Benefit	The additional benefit of R2 063 per beneficiary per annum ✓ MC U C
Physiotherapy	R3 066 per beneficiary and R6 132 per family per annum. ✓ MC U C
Post Hip, Knee and Shoulder Replacement or Revision Physiotherapy	R7 044 per beneficiary per event. ✓ MC U C
Audiology, Occupational Therapy and Speech Therapy	R3 011 per beneficiary and R6 034 per family per annum. Sub-limit of R2 424 per beneficiary and R4 840 per family per annum. ✓ MC U C
Pathology and Medical Technology	R3 011 per beneficiary and R6 034 per family per annum. ✓ MC U C
Dental Services	R6 900 per beneficiary, excluding dental sealants for beneficiaries under the age of 18 years. ✓ MC U C
Optical Services	R3 099 per beneficiary every 2nd year OR every two (2) years; and R5 942 per family per annum. Frames not to exceed R1 636 . Post cataract surgery, optical PMB entitlement limited to R1 744 for both lens and frame with a sub-limit of R293 for the frame. For Beneficiaries with Keratoconus, the family and beneficiary limits specified hereinabove shall be subject to an additional optometry booster benefit of R2 751 per family per annum for scleral contact lenses. ✓ MC U C
Basic Radiology	R4 930 per beneficiary and R9 034 per family per annum. ✓ MC U C
	1: R4 950 per beneficiary, and R14 847 per family, per annum, subject to limit of R738 for homeopathic and alternative medicine per family per annum. 2: R14 847 per beneficiary and R29 897 per family per annum. 3: R1 247 per beneficiary per annum, R334 event limit. Family limit R1 994 per annum. 4: R3 757 per beneficiary per annum. ✓ MC U C
Advanced Radiology	R29 694 per family per annum. ✓ MC U C



EMERALD & EMERALD VALUE

OUT-OF-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Mental Health	<p>R24 746 per family per annum (shared with in-hospital mental health B18).</p> <p>R7 338 sub-limit for out-of-hospital psychologist consultations.</p> <p>Further shared sub-limit with B18: mental health of R2 879 per family per annum for services by educational and industrial psychologists.</p> <p>✓ MC U C</p>
Medical and Surgical Appliances and Prostheses	<p>R56 131 per family per annum.</p> <p>R21 901 for medical and surgical appliances per family per annum.</p> <p>Shared sub-limit with in-hospital prosthetics of R6 164 for foot orthotics and prosthetics with sub-limit of R1 761 for orthotic shoes, foot/ankle/shoe inserts and levellers per beneficiary per annum.</p> <p>Crutches limited to R701 per beneficiary per annum.</p> <p>Wheelchairs limited to R7 716 per beneficiary every 24 months</p> <p>Hearing aids limited to R11 223 every 36 months.</p> <p>One (1) CPAP device limited to R13 328 every 36 months.</p> <p>Three (3) pairs of compression stockings of up to R584 per pair per beneficiary per annum.</p> <p>One (1) pulse oximeter of up to R467 per family per annum.</p> <p>One (1) knee brace and one (1) back brace of up to R3 499 per brace per beneficiary per annum.</p> <p>Continuous Glucose Monitors (CGM) and Insulin Pumps limited to:</p> <ul style="list-style-type: none"> • R59 531 per family per annum. • One (1) device per Beneficiary every sixty (60) months since month of receipt of device. • R28 324 per Beneficiary per annum for consumables. <p>Type one (1) diabetics aged below 19 years</p> <p>✓ MC U C</p>
	<p>1: Vaccinations (excluding influenza vaccinations, HPV vaccinations and pneumococcal vaccinations) limited to R950 per beneficiary per annum.</p> <p>✓ MC U C</p>
Infertility	<p>Non-network hospital co-payment R15 000 per hospital admission.</p> <p>✓ MC U C</p>
Circumcision	<p>Global fee of R1 994 per beneficiary.</p> <p>✓ MC U C</p>
Personal Medical Savings Account (PMSA)	<p>✗</p>
Emergency assistance (road and air)	<p>✓ % PMB MC</p>
Infertility	<p>✓ % PMB MC P C</p>
Screening services	<p>✓ % PMB P</p>
Maternity (ante- and post-natal care). Subject to registration on the programme	<p>Subject to Maternity Programme Protocols</p> <p>✓ % PMB MC</p>



Available



Not Available




































% 100% Scheme rates apply PMB Limited to PMBs MC Subject to managed care rules

SUB Subject to other sub-limits, refer to the GEMS Rules 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 H Subject to annual hospital limit

U Unlimited, refer to Scheme rules F Subject to referral by network GP

IN-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
In-Hospital Benefits	Sub-limits as provided for in Scheme Rules
Advanced Radiology	R37 123 per family per annum.  MC  
Physiotherapy	R6 673 per beneficiary per annum.  MC  
Post Hip, Knee and Shoulder Replacement or Revision Physiotherapy	R7 044 per beneficiary per event. Limited to 10 post-surgery physiotherapy visits, shared with block benefit.  MC  
Organ and Tissue Transplants	R824 901 per beneficiary per annum. Sub-limit of R28 001 per annum for corneal grafts.  MC  
Prostheses	R75 823 per family per annum shared with medical and surgical appliances and prostheses generally, plus R75 823 per family per annum for Joint revisions only. Shared sub-limit with out-of-hospital prosthetics and appliances of R6 164 for foot orthotics and prosthetics with sub-limit of R1 761 for orthotic shoes, foot/ankle/shoe inserts and levellers per beneficiary per annum. Crutches limited to R701 per beneficiary per annum. Wheelchairs limited to R7 716 per beneficiary every 24 months. Hearing aids limited to R11 223 per beneficiary every 36 months One (1) CPAP device limited to R13 328 every 36 months. Three (3) pairs of compression stockings of up to R584 per pair per beneficiary per annum. One (1) pulse oximeter of up to R467 per family per annum. One (1) knee brace and one (1) back brace of up to R3 499 per brace per beneficiary per annum.  MC  
Renal Dialysis	R353 521 per beneficiary per annum.  MC  
Oncology (Chemo and Radiotherapy)	R649 619 per family per annum. R439 078 per family for biological and similar specialised medicines.  MC  
Mental Health	R51 966 per family per annum. Further shared sub-limit with out-of-hospital mental health of R2 879 per family per annum for services by educational and industrial psychologists.  MC  
Other Professional Health Services	Sub-limit of R1 652 per family for social workers and registered counsellors.  MC  
Prescribed minimum benefits (PMBs)	 % PMB   DSP
Alcohol and drug dependencies	 % PMB MC 
Alternatives to hospitalisation (sub-acute hospitals and private nursing)	 % PMB MC  



ONYX

IN-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Pathology and Medical Technology	✓ % PMB MC A P U
Radiology (basic)	✓ % PMB A U
Surgical procedures (including maxillofacial surgery)	✓ % PMB A P U
GP and Specialist services	✓ % PMB MC P
Blood transfusion	✓ % PMB A P C U



ONYX

OUT-OF-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Day-to-day Block Benefit	R12 986 per beneficiary and R25 973 per family per annum. ✓ MC U C
Other Professional Health Services	Sub-limit of R1 652 per family for social workers and registered counsellors ✓ MC U C
Post Hip, Knee and Shoulder Replacement or Revision Physiotherapy	R7 044 per beneficiary per event. ✓ MC U C
Mental Health	Shared sub-limit with B18: mental health of R2 879 per family per annum for services by educational and industrial psychologists. ✓ MC U C
Female contraceptives	R4 707 per family per annum. ✓ MC U C
Dental Services	R12 310 per beneficiary per annum, excluding dental sealants for beneficiaries under the age of 18 years. ✓ MC U C
Prescribed Medication and Injection Therapy 1. Acute Medical Conditions 2. Chronic Medical Conditions 3. Self-medication	1: R8 343 per beneficiary, and R23 368 per family, per annum, subject to limit of R738 for homeopathic and alternative medicine per family per annum. 2: R25 353 per beneficiary and R51 966 per family per annum. 3: R1 521 per beneficiary per annum, R415 event limit, Family limit R2 519 per annum. ✓ MC U C
Advanced Radiology	R37 123 per family per annum. ✓ MC U C
Optical Services	R3 659 per beneficiary every 2nd years; and R7 033 annual limit per family. Limit of R2 645 per frame. Post cataract surgery, optical PMB entitlement limited to R1 744 for both lens and frame with a sub-limit of R293 for the frame. For Beneficiaries with Keratoconus, the family and beneficiary limits specified hereinabove shall be subject to an additional optometry booster benefit of R2 751 per family per annum for scleral contact lenses. ✓ MC U C
Medical and Surgical Appliances and Prostheses	Shared limit with in-hospital internal prostheses (B14) of R75 823 per annum. Sub-limit of R25 349 for medical and surgical appliances per family per annum. Shared sub-limit with in-hospital prosthetics of R6 164 for foot orthotics and prosthetics with a sub-limit of R1 761 for orthotic shoes, foot/ankle/shoe inserts and levellers per beneficiary per annum. Crutches limited to R701 per beneficiary per annum. Wheelchairs limited to R7 716 every 24 months. Hearing aids limited to R11 223 every 36 months. One (1) CPAP device limited to R13 328 every 36 months. Three (3) pairs of compression stockings of up to R584 per pair per beneficiary per annum. One (1) pulse oximeter of up to R467 per family per annum. One (1) knee brace and one (1) back brace of up to R3 499 per brace per beneficiary per annum. Continuous Glucose Monitors (CGM) and Insulin Pumps limited to: • R59 531 per family per annum. • One (1) device per Beneficiary every sixty (60) months since month of receipt of device. • R28 324 per Beneficiary per annum for consumables. Type one (1) diabetics aged below 19 years. ✓ MC U C



ONYX

OUT-OF-HOSPITAL BENEFITS

SERVICE/BENEFIT	2025
Preventative Care Services All vaccinations	1: Vaccinations (excluding influenza vaccinations, HPV vaccinations and pneumococcal vaccinations) limited to R950 per beneficiary per annum. ✓ MC U C
Infertility	Non-network hospital co-payment R15 000 per hospital admission. ✓ MC U C
Circumcision	Global fee of R1 994 per beneficiary. ✓ MC U C
Personal Medical Savings Account (PMSA)	✗
Emergency assistance (road and air)	✓ % PMB MC
Infertility	✓ % PMB MC P C
Primary care extender	✗
Screening services	✓ % PMB P
Maternity (ante- and post-natal care). Subject to registration on the programme	Subject to Maternity Programme Protocols ✓ % PMB MC

- ✓ Available ✗ Not Available % 100% Scheme rates apply PMB Limited to PMBs MC Subject to managed care rules
 SUB Subject to other sub-limits, refer to the GEMS Rules 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 H Subject to annual hospital limit
 U Unlimited, refer to Scheme rules F Subject to referral by network GP

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Client Liaison Office (CLO)

Driving empowerment through education.

The CLO unit drives member education sessions and workshops to empower members and improve understanding of benefits, Scheme rules and processes.

Need a personal touch to make you feel valued and understood, visit our walk-in centres. **To find the list, visit www.gems.gov.za**

Our CLOs and Walk-in centres are situated in all 9 provinces.



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Government Employees
Medical Scheme



Disclaimer

This brochure contains a summary of the healthcare benefits offered by GEMS for the year 2025 and the required monthly contributions/premiums associated therewith ("2025 GEMS Benefits and Contributions").

The 2025 GEMS Benefits and Contributions forms part of the GEMS Rules, which are subject to the approval of the Council for Medical Schemes ("CMS"). In the event of a discrepancy between the wording of this brochure and that of the published GEMS Rules, the latter will take precedence. For the full version of the 2025 GEMS Benefits and Contributions, kindly refer to Annexures B, C, D, E, F and G of the GEMS Rules, which may be found on the GEMS website at www.gems.gov.za. You may also contact us directly on **0860 00 4367** to request a copy.