



PG Group Medical Scheme
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December 2022

Dear Member

PG GROUP MEDICAL SCHEME | 2023 BENEFIT UPDATE

The 2022 membership of the PG Group Medical Scheme remained quite stable for the year.

When comparing our benefit offering with similar products available in the industry, the Scheme offers a competitive benefit structure across all income categories, giving you better access to healthcare providers and reducing your out-of-pocket expenses.

Our Scheme benefits continue to offer value for money, and through stringent financial discipline and controls exerted through providers, **the Board of Trustees was able to limit the 2023 contribution increase to 6.2% effective from 1 April 2023.** This increase is a positive development, as it is still below the industry average projected for next year. We also stay with the effective date of 1 April, despite benefit increases coming into effect from 1 January.

A decision was taken by the Board of Trustees to **change the adult dependent age from 21 to 23 years** with effect from 1 January 2023. This will accommodate those dependent's who are still studying or remain financially dependent on the principal member.

By the end of August 2022, the Scheme had accumulated funds of **R96 041 848**, which is equal to a solvency level of 109.85%. The Scheme continues to explore and implement solutions to keep contribution increases to a minimum as much as possible, so that you can continue to receive quality healthcare cover at affordable prices. The engineered administration and managed care client value proposition has indeed contributed positively towards many successful outcomes within a very volatile and dynamic medical scheme landscape.

The philosophy of the Board is to continually review the benefit structure, ensuring that you are offered the most optimal and affordable healthcare solution. To curb the spiralling cost of medication, the Scheme has implemented pro-active controls and risk management initiatives, allowing your benefits to last longer. You will continue to benefit from generous day-to-day benefits, including access to health assessments and early detection benefits.

Thank you for your continued support in 2022, and as we look ahead in the hope of returning to a normal way of life, remember that we must always stay vigilant and safe. If you are travelling this holiday period, please be safe and always carry your Scheme membership card/details with you. On behalf of the Scheme, its Board of Trustees and administrator, we wish you and your loved ones a safe and blessed festive season.

We look forward to welcoming you back in 2023, refreshed and invigorated.

Yours in good health!

Chontal Dunstan
Principal Officer
PG Group Medical Scheme

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Summary of Scheme benefits for 2023

In reviewing the benefits for 2023, the Scheme's focus is to ensure that the reserves of the Scheme remain stable, whilst continuing to provide you with a comprehensive range of benefits at an affordable contribution.

To ensure that you have a good understanding of the benefits for 2023, please take the time to thoroughly read the **PG Group Medical Scheme 2023 Member Guide** and the **DENIS 2023 Dental Benefit Information booklet**.

For your convenience, we provide a summarised version below to give you a better understanding of the benefit changes for 2023:

2023 contributions

The Board of Trustees has limited the annual contribution increase to 6.2% with effect from 1 April 2023.

2023 benefits

The overall annual limit remains **R400 000** per beneficiary, and all category sub-limits have been increased in line with inflation.

2023 medical savings account

Savings allocations will increase in line with contribution increases.

Netcare 911 emergency services

In emergency situations, **Netcare 911 (082 911)** provides ambulance services by air and road throughout South Africa.

Momentum Multiply – lifestyle and wellness rewards programme

As a qualifying PG Group Medical Scheme member, you have access to Momentum Multiply benefits for **free**.

In 2023, you will no longer have access to **Multiply Starter**. You will now have access to our exciting new wellness rewards product, **Multiply Engage – also for free!**

It's easy. Your Multiply journey will take place on the Multiply app.

With **Multiply Engage Plus**, you can multiply your partner rewards **AND** you'll start earning cashbacks. Get up to 60% back from over 70 fantastic partners when you do more to look after your health and wellness.

Look out for future communication from the Multiply team or visit multiply.co.za to learn more.

Want to learn more or chat to us?

Telephone **0861 886 600**

WhatsApp chat **0861 886 600**

Email **multiply@momentum.co.za**

Website **multiply.co.za**

Chronic medication

You may continue to obtain your chronic medication from our preferred suppliers, namely Schuin-Villa Pharmacy, Strubenvale Pharmacy, Clicks, Dis-Chem and Medipost (courier pharmacy).

Alternatively, visit www.pggmeds.co.za for a list of pharmacies that are registered on the Momentum Health Solutions network of pharmacies to find one close to you. Please bear in mind that both Dis-Chem and Clicks Direct Medicines also offer courier services.

The next time you visit one of these retailers, ask about this service at the pharmacy counter.

Dental Information Systems (DENIS) – Dental benefits

- Two annual check-ups per beneficiary once every six months
- Two scale and polish treatments per beneficiary once every six months
- Root canal therapy and extractions
- Three crowns per family per year; benefit is granted once per tooth in a five-year period – subject to pre-authorisation
- Two implants (**R2 865** per implant) per beneficiary in a five-year period – subject to pre-authorisation
- Orthodontics for beneficiaries younger than 18 years; includes a benefit of **R16 450** per beneficiary per lifetime – subject to pre-authorisation
- Periodontics, conservative and non-surgical dentistry – subject to pre-authorisation
- Maxillofacial surgery – subject to pre-authorisation.

Please note: Shortfalls will be paid automatically from your available positive medical savings account.

Preferred Provider Negotiators (PPN) – Optical benefits

Once you have claimed for any of the products below, you may only do so again after 24 months.

In and out of network	
Frame and/or lens enhancements	R1 485 for frames and/or lens enhancements per beneficiary at a PPN provider and R1 114 per beneficiary at a non-PPN provider every two years
One pair of clear Aquity® single-vision lenses; or	R215 per lens
One pair of clear Aquity® bifocal lenses; or	R460 per lens
One pair of base multifocal lenses	R810 per lens
OR	
Contact lenses	R2 115
Contact lens re-examination (subject to the Scheme rules, and can only be claimed in six-monthly intervals)	R255 x 3

In addition to the above benefits, beneficiaries have access to the following:

Network benefits

- One composite consultation, inclusive of refraction, tonometry and visual field screening, artificial intelligence screening and either spectacles or contact lenses. These claims will be paid at 100% of the prescribed benefit limits.
- Ready-made readers: two pairs (in a two-year cycle) – **R150** per pair in lieu of spectacle lenses.

Out-of-network benefits

- One consultation paid at **R365** for either spectacles or contact lenses.

It is in your best interest to find an optometrist who forms part of the PPN network – please visit www.ppn.co.za. During the consultation process, please remember to inform the optometrist that any shortfalls may be paid from your available savings.

Managed healthcare programmes

YourLife Programme (new third-party provider for 2023)

With effect from 1 January 2023, the HIV programme provider (currently Lifesense Disease Management) will change to the YourLife Programme, as managed by Momentum Health Solutions.

You and your beneficiaries have access to benefits for the treatment and management of HIV/AIDS, which focusses on the overall wellness of HIV-positive individuals.

Oncology Risk Management Programme

All members diagnosed with cancer need to register on the programme to ensure that individual treatment plans for chemotherapy, radiotherapy, pathology and radiology are pre-authorised according to clinical protocols. This will enable oncology-related claims to be paid from the correct benefit.

Renal Management Programme

All patients with impaired kidney/renal function need to register on the programme to ensure detailed treatment plans and protocols are adhered to.

Maternity Programme

It is important to register on the programme as soon as your pregnancy is confirmed by your doctor in the first trimester (weeks 0 to 13).

Once enrolled on the programme, you will enjoy the following benefits:

- 12 antenatal consultations
- two antenatal ultrasound scans (one before and one after 24 weeks)
- two visits to a paediatrician in baby's first year.

Pre-authorisation for hospitalisation

Please ensure that you obtain pre-authorisation for hospitalisation, where required. Failure to obtain pre-authorisation may result in you being liable for the full cost of the hospitalisation and any related costs, such as specialist, physiotherapy and pathology services.

It is also important to note that an authorisation number confirms that benefits are available and guarantees your admission to hospital; however, it is not a guarantee of payment.