

NEWSLETTER ISSUE 4 JUNE/JULY 2017

Dear Member

In this edition of our newsletter we update you on when the Scheme's call centre is open for calls, inform you of the requirements for obtaining authorisation for hospitalisation and remind you why it's important to obtain the flu vaccine this winter.

Also look out for information on the difference between acute and chronic medication, how to register your chronic medication and why it's not always a good idea to insist on original, brand-name medication. We welcome any suggestions that you may have on articles or member benefits you would like to see published in future newsletters. Please send your suggestions to the Scheme Fund Manager, **Eugene Eakduth**, by fax to **0861 64 77 75** or by email to **eugene.eakduth@momentum.co.za**.

Until our next issue, enjoy the read!

The Scheme's call centre is open Monday to Friday

You can contact the PG Group Medical Scheme call centre on **0860 00 50 37** from Monday to Friday between 08:30 and 16:30. The call centre is at its busiest between 10:00 and 12:00.

In the event that you are unable to get through to us at that time, call us back later in the day or email your enquiry to **info@pggmeds.co.za**.

Remember that you can submit claims via email to claims@pggmeds.co.za.



How to obtain authorisation for hospital

To obtain authorisation for admission to hospital, phone us on **0860 00 50 37** from Monday to Friday between 08:30 and 16:30 and follow the voice prompts. You can also send us a request via email to **info@pggmeds.co.za** or **hrmpgg@metropolitan-preauth.co.za**.

Who can obtain authorisation?

You or your doctor can contact our call centre to obtain an authorisation.

What are the requirements for an authorisation?

If you require authorisation for hospitalisation, please have the following information ready when you contact us:

- your membership or ID number
- the name and surname of the person who will be admitted (including a dependant code if you have more than one family member with the same name)
- the date of admission and the proposed date of the operation or treatment





- the treating doctor's name and telephone and practice numbers
- the name or practice number of the hospital
- ICD-10 diagnosis and procedure codes
- for X-rays such as CT, MRI or bone density scans or similar radiological procedures, we'll need the name of the radiology practice and procedure tariff codes.

The importance of pre-authorisation for hospitalisation

In order for a medical scheme to cover the cost of staying in hospital, the doctor's fees to attend to you while in hospital, as well as other medical costs, you must first get a pre-authorisation number. Authorisation for hospitalisation is not given automatically. A medical scheme has to assess the need for hospitalisation based on the doctor's findings. This could mean that the patient's condition will require further evaluation in a hospital setting or surgery. If a medical scheme finds that the request is without merit, it can decline the authorisation. In such instances, unauthorised admission to hospital will not be covered by the Scheme and you will be liable for all costs incurred while in hospital.

Important: Authorisation will be required for a planned or emergency hospital admission, specialised radiology and certain procedures. Failure to use the authorisation number when you claim will mean that the Scheme will not pay for services rendered in hospital and you will be liable for these costs.

Emergency treatment

If you are admitted to hospital after you received treatment in an emergency room, the costs will generally be covered. However, if your condition is less serious than you or your doctor thought and your admission is not covered as an emergency under prescribed minimum benefits, you will not be allowed to stay in hospital. If this is the case, the emergency room fees will be paid from your day-to-day benefits, i.e. your medical savings account. If you are <u>admitted</u> to hospital for a planned procedure, you will need to obtain an authorisation within 24 to 48 hours and in the case of an emergency, you can get an authorisation number from us after being admitted.

Source: http://www.iol.co.za/personal-finance/how-medical-schemes-treat-emergencies-1636725

Have your contact details changed?

Help us to keep in touch!

Please notify us when your contact details, such as your postal or email address or cell or any other phone numbers, change.

Updating your details is as simple as giving us a call on **0860 00 50 37**. We will ask you a few questions to verify your identity, but we will be sure to do this as quickly as possible, knowing that your time is valuable to you.

REMEMBER: If you are unable to contact us directly and need someone else to speak to us on your behalf, we will need you to complete a member consent form before we can accept instructions from, or share your information with anyone else. This measure is in place to protect you against people who may try access your information without authorisation.

Understand the need for the flu vaccine this winter

Every year, as the weather starts to cool down and the days get shorter, we know that flu season is on its way. Fortunately, you can safeguard yourself by getting a flu vaccine.

Did you know that that the South African economy loses more than R2 billion every year due to lost or reduced productivity in the workplace and that the average person misses 4.5 days of school or work because of colds and flu? Although the symptoms of colds and flu seem similar, they are quite different conditions. The **flu** is a viral infection that causes respiratory tract infections, while a cold just causes a runny nose, nasal congestion and a sore throat.

The World Health Organisation estimates that flu causes between 250 000 and 500 000 deaths annually. So safeguard you and your family from catching the flu by looking after your personal hygiene and getting the flu vaccine.

Every year a new flu vaccine is formulated, as the flu virus mutates over time. Sometimes you get the flu vaccine, but still get sick. This happens when the vaccine you received is not for the exact virus you have. However, the vaccine should still be administered so that you have some protection against becoming extremely ill. You don't need a prescription for the flu vaccine and can have it done at most pharmacies.



Did you know?

The PG Group Medical Scheme covers the cost of one flu vaccine per beneficiary from your wellness benefit, so you do not pay for it from your medical savings account.

Source: http://www.health24.com/Medical/Flu/Preventing-flu/do-i-really-need-the-flu-shot-20170328

Prescribed minimum benefit (PMB) alerts

Q: What is the purpose of PMBs?

A: PMBs were created to ensure that medical scheme beneficiaries have continuous healthcare. This means that even if a member's benefits for the year have run out, medical schemes have to pay for the treatment of PMB conditions. It also allows for minimum healthcare to everybody who needs it, regardless of their age, state of health or the medical scheme option they are registered on. PMBs also have a part to play in ensuring that medical schemes remain financially healthy. When beneficiaries receive good care on an ongoing basis, their general wellness improves, resulting in fewer serious conditions that are expensive to treat.

Q: Can medical schemes prescribe protocols and formularies for PMB conditions?

Medical schemes can prescribe PMB treatment protocols to manage their risk. However, should medical schemes make use of formularies, they must be developed on the basis of evidence-based medicine, taking cost-effectiveness and affordability into account, while also being on par with the gazetted algorithms for chronic diseases and the public sector protocols for the diagnosis treatment pairs.

Source: http://www.medicalaid.co.za/medicalaid/pmbsandchronicdiseases.aspx



Difference between chronic and acute medication

Acute conditions are of a short-term nature and usually span days or weeks, ending in either recovery or death, whereas untreated chronic conditions tend to become worse in the long run, without the possibility of recovery, causing discomfort, pain, incapacity or even death.

Colds, flu, cystitis (bladder infection), pneumonia and otitis media (middle-ear infection) are typical acute conditions. Bacterial infections are most often acute. While some viral conditions such as chickenpox or measles are acute, viral illnesses such as herpes or AIDS, are chronic. Fungal infections may also be acute or chronic. Injuries and conditions for which first aid is needed are acute, though their results may become chronic or disabling if they are not treated immediately and effectively. Illnesses such as diabetes, arthritis, autoimmune diseases, eczema, allergies, endocrine dysfunction, asthma, heart disease and cancer are considered chronic conditions. The word chronic indicates that length of time is a factor in the illness. Chronic diseases tend to be long term, while acute diseases tend to run a more rapid course. Chronic conditions, though long term, may have an initial acute phase or at other times become sharply worse for a limited period.

An **example** of an **acute medication** is **Amoxicillin** – an antibiotic that can be used to treat flu or respiratory tract infection.

An **example** of a **chronic medication** is **Prexum** – used to treat high blood pressure.

Source: http://www.homeopathycenter.org/homeopathy-today/dynamic-medicine-acute-and-chronic-prescribing-whats-difference

How do I register my chronic medication?

You have the following options to apply to register you chronic medication:

- Your doctor can call our call centre on 0860 00 50 37 anytime between 08:30 and 16:30 from Monday to Friday to authorise your medication.
- Alternatively, you or your doctor can fax the prescription for your chronic medication to us on **031 580 0597** or via email to pggmrm@mhg.co.za.

What information is required to register your chronic medication?

You will need the following information to apply to register your chronic medication:

- your membership number, ID number and relevant dependant and ICD-10 diagnosis codes
- the medication name, strength and quantity, as well as the prescribing doctor's practice number and a copy of the prescription
- registration for certain conditions may require diagnostic test results, such as total cholesterol – LDL (low-density lipoprotein) and HDL (high-density lipoprotein) tests, glucose tests and an examination of the thyroid (depending on your condition), and letters of motivation. You can give us a call on 0860 00 50 37 and speak to one of our consultants for more information.

What do I do if there's a co-payment on my chronic medication?

If you find that you have to make a co-payment on the medication your doctor prescribed because it costs more than the price the Scheme covers, you can ask your pharmacist to change it to a generic medication that the Scheme covers in full. Visit **www.pggmeds.co.za** to find the Scheme's medicine formulary (list of pre-approved prescribed medication). If there is a co-payment on your medication because it isn't in the formulary, you can discuss possible alternatives with your prescribing doctor or contact a consultant on **031 580 0597** for more info.

What should I do if my chronic medication changes?

If your doctor decides to change your medication, you'll need to contact us. The quickest and simplest way to do this is for your doctor to inform us telephonically on **0860 00 50 37** or via email at **pggmrm@mhg.co.za.** Alternatively, forward us your new prescription for processing.



Continued overleaf ightarrow

How do I make co-payments on my medication from my medical savings account?

Co-payments on medication can only be made from your savings account upon your request. You can contact our call centre on **0860 00 50 37** to request this or you can put your request in writing and email it to **info@pggmeds.co.za**.

Example of generic medication pricing and co-payments

Crestor 20 mg, 30 tablets, is sold for approximately R401.67. This medication must be taken for a condition called hyperlipidaemia. The co-payment on this item is approximately R177.32, as there are cheaper generic medicines available, such as Zuvamor 20 mg tablets. If the generic medication is taken as an alternative, the costs will be paid in full.

Example of formulary reference pricing and co-payments______

Isoptin 40 mg, 30 tablets, costs approximately R33.13. This medication must be taken for high blood pressure. The co-payment on this item is approximately R15.69, as the medication is not on the Scheme's formulary. There is generic medication that can be taken instead, such as Vasomil and if the generic medication is purchased, it will be paid in full.

Examples of non-preferred medication chosen in formulary

- These types of medication do not have generic equivalents available; in such cases the Scheme will pay up to a reference price only. There are other therapeutic equivalents in the same formulary that you can choose, but your doctor will need to register these and provide us with a prescription. Note that formulary reference pricing only applies to non-preferred medication in the formulary.
- Therapeutic equivalents are medication that do not have the same active ingredient as generic medication, however they can be used to treat the same condition. Therapeutic medication cannot be substituted, as they do not have the same active ingredients as generic medication, and therefore need to be prescribed by a doctor. Only generic medication can be substituted by an alternative generic without a prescription, as it contains the same active ingredient.
- These types of medication have to be prescribed by a doctor as the therapeutic equivalent does not have the same active ingredients compared to the medication that the member was using, which resulted in a co-payment.
- Here is an example of medication that does not have generic equivalents available: Abilify 15 mg, 30 tablets, is usually prescribed for the treatment of bipolar mood disorder. The item costs approximately R1372.22 and the Scheme will pay a



limited amount of approximately R430.23 for the medication. You will be liable for the difference in cost, which is an amount of R941.99. If you choose to take a cheaper medication, your doctor will have to change the prescription to a therapeutic equivalent. The therapeutic equivalent will not have the same active ingredient as Abilify, but it can also be used to treat bipolar mood disorder.

Should I insist on original, brand-name medication?

Do you worry that generic medication is not as good as the original, brand-name versions? It's a common misconception that could be costing you money. We all know generic medicines are cheaper than the originals, but do you still opt for the original when the pharmacist offers you the generic version?

Perhaps you do it because you're worried that the generic might not be manufactured to the same standards as the original. You are not alone – the fact that generic medication is up to 80% cheaper than brand-name medication can sometimes make consumers wonder whether they are buying an inferior or less effective product.

The facts about generic medication compared to the original medication

The World Health Organisation (WHO) assures us that, while generic medication may be a copy of the original, it is 100% interchangeable with the original or 'innovator' medication. More simply put, it contains the exact same ingredients, making it what is called a 'bio-equivalent'. In South Africa, the Medicines Control Council (MCC) employs a team of doctors, scientists and pharmacists who check generic medication to ensure its safety, quality and effectiveness. The beauty of generic medication is that it is so much more affordable, putting it within reach of poorer people who would not be able to buy the original medication.

Source: http://www.health24.com/Medical/Meds-and-you/Generics/are-generics-inferior-to-original-medication-20160317



Keep calm and stay the course

Your PG Group Medical Scheme membership gives you access to Multiply Starter at no cost to you. At Multiply, one of our key focus areas is helping our members with their financial wellness. No one said it would be easy. The road to financial wellness can get bumpy at times, especially when external factors, which we cannot control, threaten to derail our journey. We may worry about how South Africa's foreign debt downgrade to 'junk status' will impact our financial plans.

What could 'junk status' mean?

While no one can accurately predict the exact impact of 'junk status', the general consensus across experts is that, over time, the following could occur:

- A weaker rand, which is likely to result in a rise in the cost of petrol, transport and imported food.
- Higher inflation, which may result in an increase in interest rates. This will mean higher interest payments on loans (house, car, personal) and negative credit card balances, leaving less money for day-to-day living.
- Salary increases, which do not keep pace with inflation.
- Taxes could rise, as the government seeks additional funds to cover the increased cost of debt.
- Higher interest rates will make companies' cost of borrowing higher, which may result in lower economic growth and possibly job losses.

What is 'junk status'?

In a nutshell, the downgrade to 'junk status' means that certain rating agencies believe the chances of the South African government being able to repay foreign debt is lower, so it will be harder for government to borrow money and the cost of borrowing money, the interest rate they pay, will increase.

Get on top of your money situation

While the picture may not be pretty, it is clear that now, more than ever, you need to be on top of your money situation, so you can handle any 'bumps' and remain committed to your long-term goals. This is where we can help. MyScore is the perfect tool to measure your financial progress. Simply log in to your Multiply profile and complete your financial wellness questionnaire. Make sure you budget on a monthly basis. Reduce debt as far as possible. Be prepared for disruptive, unexpected developments through insurance or emergency savings.

If you don't already have one, put a financial plan in place and remember to review your plan, at least on an annual basis and particularly when your circumstances change. If you want to start small you can use the Multiply saving calculator available on the Multiply website. This will ensure that your financial goals are still relevant and that your plans align behind your goals. It may all sound a bit daunting but you are not alone! Speak to a **financial adviser** for professional advice on how to tackle these challenges.

Multiply Starter members have the option to upgrade to the Multiply Provider or Multiply Premier Multiply Provider and Premier members earn points for their yearly financial check-up with a financial adviser.

| | Single membership | Family membership |
|-------------------|-------------------|-------------------|
| Multiply Provider | 80 points | 160 points |
| Multiply Premier | 150 points | 300 points |

To upgrade to **Multiply Provider** or **Premier** membership SMS "ioin" to 40717 or call us on 0861 100 789 or visit www.momentum.co.za/multiply to apply online.

Access the Multiply Savings calculator at www.momentum.co.za/multiply.

MMI Multiply [Pty] Ltd. 268 West Avenue. Centurion. 0157. PO Box 7400. Centurion. 0046. South Africa. Tel +27 [0]12 671 8911. Fax +27 [0]12 675 3911. multiply@momentum.co.za, www.momentum.co.za/multiply. MMI Multiply (Pty) Ltd (Reg. No. 1971/006353/07) is a subsidiary of MMI Group Limited, an authorised financial services and credit provider.