

Benefit option choice 2022

Please complete this form in print and email it to membership@medihelp.co.za

- You should complete this form only if you want to change to another option with effect from 1 January 2022.
- The cut-off date to inform us of your new benefit option is 30 November 2021 for civil servants (Persal) and 17 December 2021 for other members.
- Late requests will **NOT** be considered.

1. Your information

Please complete your details in full.

Initials and surname	_____	Tel No. (W)	Code _____	No. _____
Email address	_____	Tel No. (H)	Code _____	No. _____
Member number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
ID/passport number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Cell phone number	_____	
Residential address	_____			
Postal address	_____			

2. Your benefit option for 2022

NB: Please select **only one** option.

Vital options

- MedMove!
- MedVital (Prime 1)
- MedVital Elect (Prime 1 Network)

Savings options

- MedAdd (Prime 2)
- MedAdd Elect (Prime 2 Network)
- MedSaver (Unify)

Comprehensive options

- MedPrime (Prime 3)
- MedPrime Elect (Prime 3 Network)
- MedElect
- MedElite (Elite)
- MedPlus (Plus)

3. Utilisation of savings account funds

3.1 MedAdd Elect, MedAdd and MedSaver

Please indicate your preference. If you do not select an option, Medihelp will pay all qualifying medical expenses from your savings account:

- Pay all qualifying day-to-day and hospital related medical expenses from my savings account.
- Pay only selective qualifying day-to-day medical expenses from my savings account (excluding certain in-hospital expenses such as co-payments).

3.2 MedPrime Elect, MedPrime and MedElite

3.2.1 If you choose MedPrime Elect, MedPrime or MedElite, all qualifying day-to-day medical services will first be paid from your savings account. Any savings account funds not used in 2022 will accumulate and will be available for the payment of medical expenses.

3.2.2 Should you change from MedAdd Elect, MedAdd or MedSaver to MedPrime Elect, MedPrime or MedElite, all accumulated savings account funds will be transferred to your cumulative medical savings account on MedPrime Elect, MedPrime or MedElite. The cumulative savings account funds will be available annually from January.

3.2.3 Should you have accumulated savings account funds available in the future, please indicate your choice. If you do not select an option, Medihelp will pay all qualifying medical expenses from your cumulative savings account:

- Pay all qualifying day-to-day and hospital related medical expenses from my cumulative savings account.
- Pay only selective qualifying day-to-day medical expenses from my cumulative savings account (excluding certain in-hospital expenses such as co-payments).

4. Declaration by members who change to a network option (MedMove!, MedVital Elect, MedAdd Elect, MedElect, MedPrime Elect)

I confirm that I am aware that the following may apply, depending on my benefit option:

1. I will be liable for co-payments if I do not use Medihelp's hospital network, designated service providers (DSPs) and formulary medicine.
2. I'm responsible for registering my prescribed minimum benefit (PMB) conditions with Medihelp and my PMB chronic medicine must be pre-authorised by Medihelp. Medihelp uses a DSP for PMB chronic medicine and a formulary applies. I will be responsible for a co-payment* on my PMB chronic medicine should I fail to obtain this medicine from the DSP or deviate from the formulary for my benefit option.
3. My treating specialists should form part of Medihelp's DSP specialist network in order to prevent co-payments on PMB treatments.
4. I must use Medihelp's hospital network for all planned hospital admissions. If there is no network hospital available near my place of residence, I will need to travel to the nearest network hospital to obtain medical services. If I use a non-network hospital instead, I will be liable for a co-payment*, unless the treatment required is in respect of an emergency medical condition** which warrants the involuntary use of a non-network hospital. I further note that in an emergency medical situation, authorisation for the hospital admission should be obtained on the first workday after the admission if I am unable to obtain the authorisation on the day of admission.

* Please refer to your benefit option's guide/brochure for all applicable co-payments.

** Please refer to your benefit option's guide/brochure for the definition of an emergency medical condition.

Member's signature

Date

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