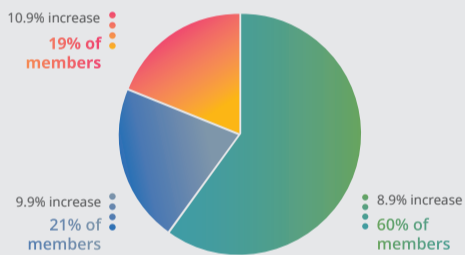




EMPLOYER NEWS

Managing the healthcare trilemma: broadening access to world-class care, maintaining affordability and enhancing benefits and services

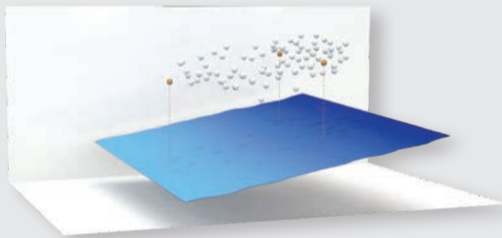
02



2020 Contribution increase

The 2020 weighted average contribution increase for Discovery Health Medical Scheme is 9.5%

05



Introducing Classic Smart Comprehensive

Efficient, comprehensive healthcare cover for families using Smart Networks

08



Enhanced Primary Care benefits and access

In 2020, Discovery Primary Care will enhance cover for primary healthcare services, and be offered to household employees

12



Healthy Company enhancements

Provide employers and employees with incentivised engagement programmes to enhance employee health and wellness

13



Discovery Coaches

Skilled healthcare professionals that enhance the healthcare and wellness experience of members

14



Discovery Gap Cover enhancements

Discovery Gap Cover in 2020 will provide increased levels of cover for in-hospital specialist tariff shortfalls

This Discoverer is intended for financial advisers only, and is presented by Discovery Health (Pty) Ltd, registration number 1997/013480/07, an authorised financial services provider, which is the administrator of the Discovery Health Medical Scheme, in terms of its contractual arrangements. This Discoverer is only a summary of the key benefits and features of the Discovery Health Medical Scheme plans, awaiting formal approval from the Council for Medical Schemes. For detailed information on all Discovery Health Medical Scheme plan options, please visit www.discovery.co.za for access to plan brochures as well as a full copy of the proposed 2020 Scheme Rules. Vitality is not part of the Discovery Health Medical Scheme. Discovery Primary Care is not a medical scheme. The cover is not the same as that of a medical scheme and is not intended to be a substitute for medical scheme membership. Discovery Primary Care is offered by Discovery Life Limited, registration number 1966/003901/06, a registered long-term insurer and an authorised financial services and registered credit provider NCR Reg No. NCRCP 355555. Discovery Vitality (Proprietary) Limited, registration number: 1999/007736/07 is an authorised financial services provider. Product rules, terms and conditions apply. Discovery Primary Care is administered by Discovery Health (Proprietary) Limited, registration number 1997/013480/07, an authorised financial services provider. Discovery Gap Cover and Discovery Supplementary Gap Cover are insurance products. They are not medical schemes and the cover is not the same as that of a medical scheme. These policies are not a substitute for medical scheme membership. Discovery Gap Cover is a short-term insurance policy, underwritten by Discovery Insure Ltd, registration number 2009/011882/06, an authorised financial services provider. Discovery Supplementary Gap Cover is a long-term insurance policy, underwritten by Discovery Life Limited. Registration number 1966/003901/06, is a registered long-term insurer, and an authorised financial services and registered credit provider, NCR Reg No. NCRCP35555. Discovery Limited. Subsidiaries of Discovery Limited are authorised financial services providers. Vitality is a separate product sold and administered by Discovery Vitality (Pty) Ltd. Registration number 1999/007736/07, an authorised financial services provider.

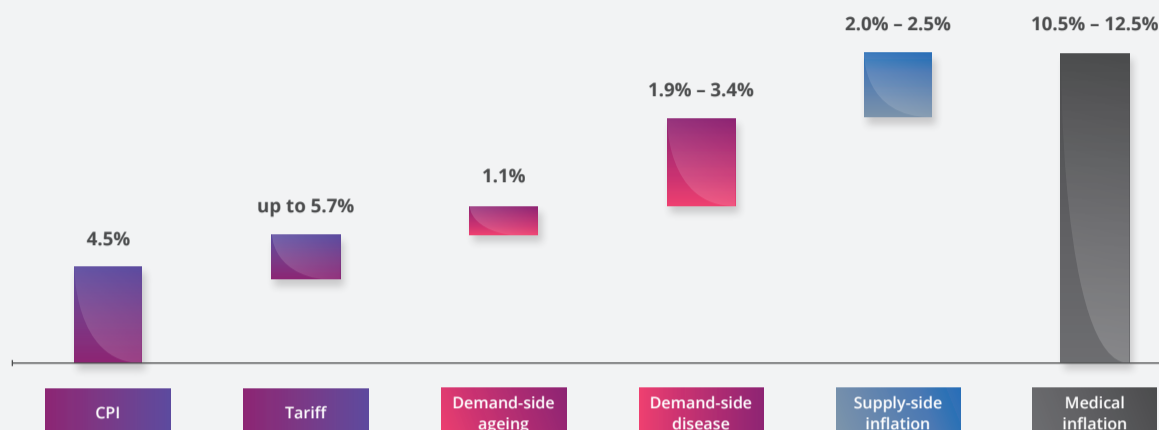
Medical inflation 2019

MEDICAL INFLATION IS DRIVEN BY TARIFF, SUPPLY AND DEMAND FACTORS

The contributions of members to the Discovery Health Medical Scheme increase year-on-year to allow for the expected increase in member claims in the following year. The expected increase is based on medical inflation, which is the observed increase in member claims over the past year. Member claims increase each year for a number of reasons, including:

- An increase in the cost of existing healthcare services, i.e. tariff increases
- An increase in the supply of hospital beds and advances in medical technology, i.e. supply-side inflation
- An increase in the amount of healthcare services used by members, i.e. demand-side inflation

Medical inflation 2019: 10.5% – 12.5%



KEY DRIVERS OF MEDICAL INFLATION

01 | INCREASE IN THE COST OF HEALTHCARE SERVICES



Each healthcare service covered by the Discovery Health Medical Scheme (e.g. doctor consultations, prescribed medicine, hospital admissions) has a predetermined price.

These prices increase annually in line with Consumer Price Inflation (CPI). As at August 2019, the forecast for CPI for 2019 was 4.5%.

The exception is medicine prices, where price increases are regulated and expected to be 5.7% for 2020.

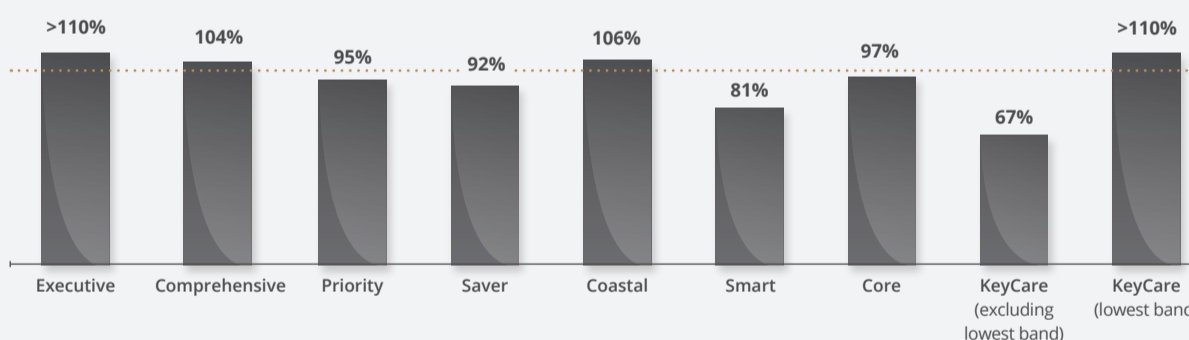
02 | PLAN SPECIFIC EXPERIENCE IMPACTS THE REQUIRED INCREASE TO ENSURE SUSTAINABILITY



Contribution increases should reflect the underlying increases in member claims for each plan.

The above average increases in claims for the Executive, Comprehensive and Coastal plans, as well as for members on the lowest income band of KeyCare Plus, has resulted in claims exceeding contributions for those plans.

Discovery Health Medical Scheme loss ratios by plan (2019 year-to-date)



03 | DEMAND-SIDE INFLATION



The 'demand' for healthcare services correlates with the health of members. If health deteriorates, demand for healthcare services increases. The health of the Scheme's membership is a function of the average age of members, and the burden of disease. As the average age of the Scheme increases, so do the claims, since ageing is typically associated with greater healthcare needs.

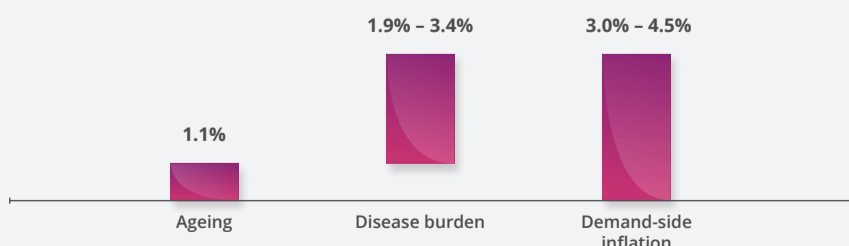
The Scheme also experiences an increase in the burden of disease, over and above what can be explained by the increase in the average age. This is due to the impact of lifestyle diseases on the health of the medical scheme population.

The average age of members increase due to:

- Existing members getting older; and
- A greater proportion of older members joining the Scheme.

The prevalence of medical conditions increases due to:

- Existing members being diagnosed with medical conditions; and
- A greater proportion of members with existing medical conditions joining the Scheme.



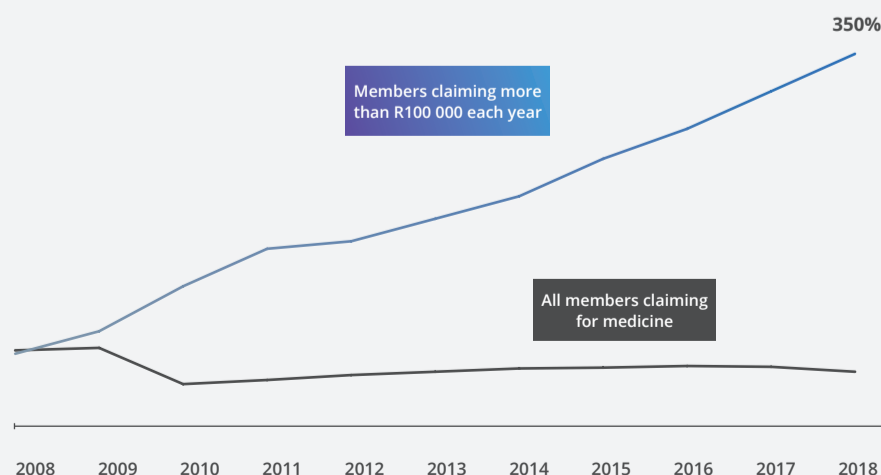
04 | SUPPLY-SIDE INFLATION



Increases in healthcare costs are also due to a greater supply of healthcare services, driven by the introduction of more hospitals and advances in medicine, medical procedures and medical technology. Unlike information technology, new medical technology in healthcare typically comes at a much higher cost than the technology it replaces.

An example of supply-side inflation is the number of members that claim for high-cost medicine, which has increased by 350% since 2008.

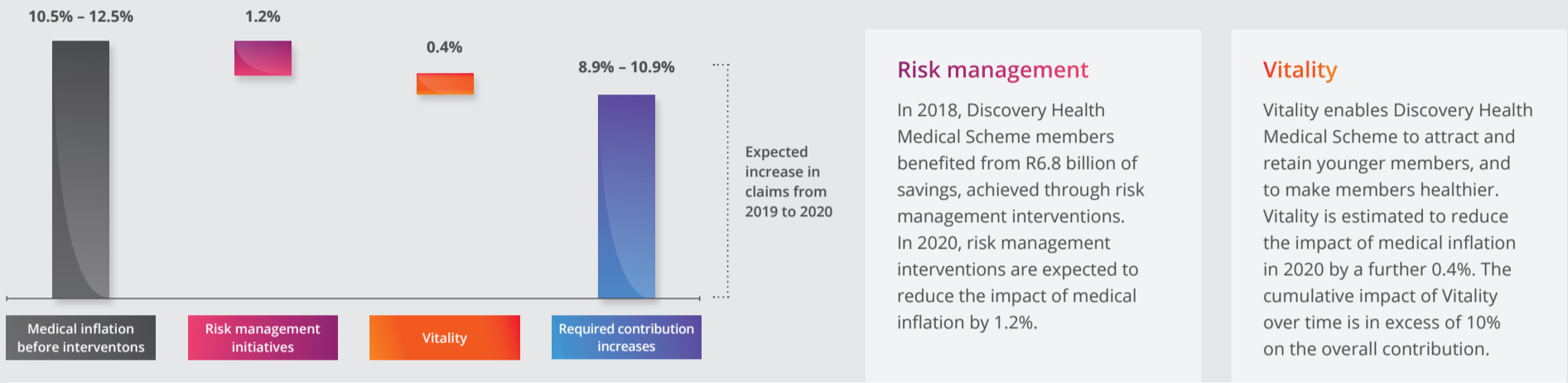
Cumulative increase in members claiming for medicine



Contribution increases 2020

REQUIRED CONTRIBUTION INCREASES FOR 2020 ARE BETWEEN 8.9% AND 10.9%

Medical inflation for 2019 is expected to be between 10.5% and 12.5%, with the variation due to plan-specific inflation. Risk management interventions by Discovery Health, and the ongoing positive impact of Vitality on members' health and the scheme's growth is expected to reduce the impact of medical inflation by 1.6% in 2020. The increase in claims from 2019 to 2020 is therefore expected to be between 8.9% and 10.9%, which informs the contribution increases for 2020.

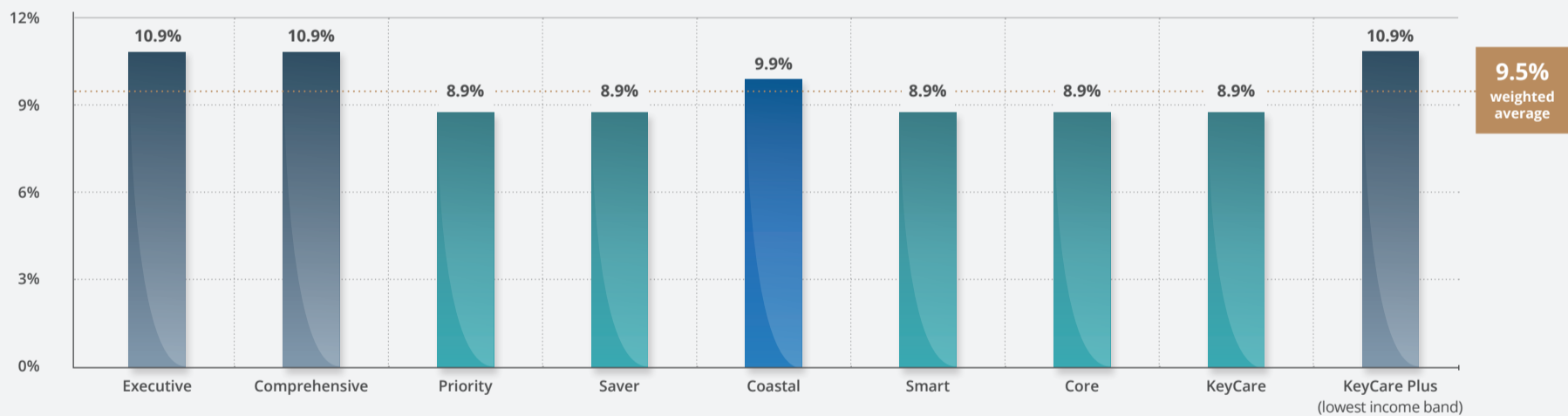


CONTRIBUTION INCREASES REFLECT UNDERLYING PLAN EXPERIENCE

The 2020 contribution increases for each plan reflects the underlying medical inflation for Discovery Health Medical Scheme, with adjustment for plan specific experience where required.

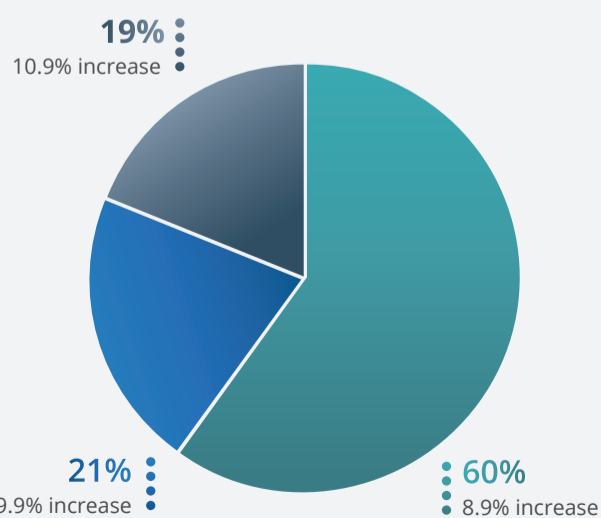
- The contributions for members of the **Priority, Saver, Smart, Core and KeyCare** plans will increase by **8.9%**.
- The contributions for members of **Coastal** plans will increase by **9.9%**, reflecting the higher claims inflation on these plans.
- The contributions for members of the **Executive, Comprehensive and lowest income band of KeyCare Plus** will increase by **10.9%**. The contribution increase reflects the significant differences in claims inflation on these plans when compared to the rest of the Discovery Health Medical Scheme plans.

THE WEIGHTED AVERAGE CONTRIBUTION INCREASE FOR DISCOVERY HEALTH MEDICAL SCHEME FOR 2020 IS 9.5%



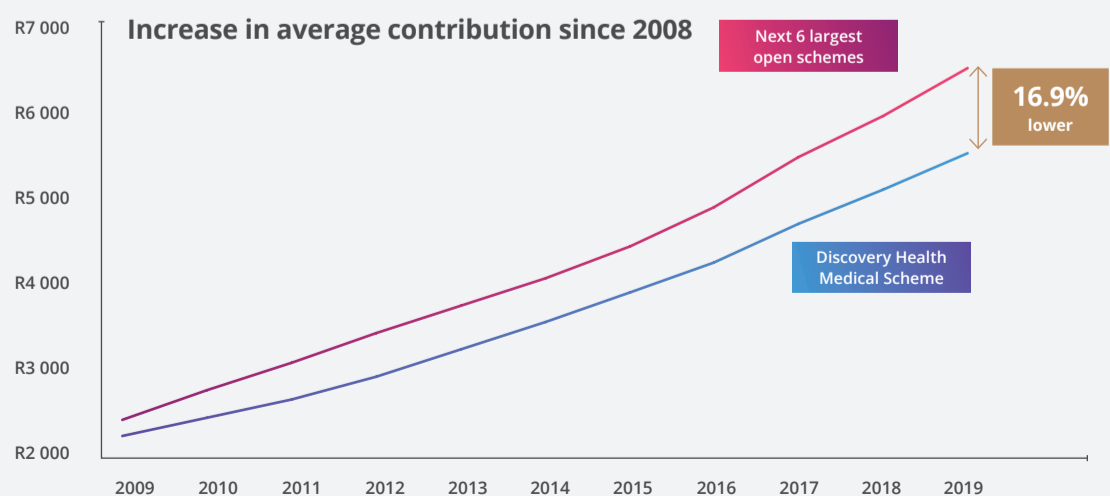
DISTRIBUTION OF CONTRIBUTION INCREASES

Distribution by membership



MAINTAINING THE COMPETITIVE POSITION OF DISCOVERY HEALTH MEDICAL SCHEME

The 2020 contribution increase will reinforce the competitive advantage that the Discovery Health Medical Scheme has built over time through contribution increases that have been consistently lower than competitors. This advantage is illustrated through the Discovery Health Medical Scheme contribution increase differential.



Success of THE SMART SERIES

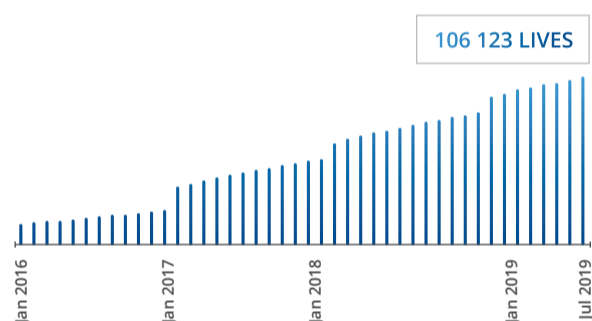
The Smart Series combines the digital capabilities of Discovery Health with smarter networks to give Discovery Health Medical Scheme members convenient access to quality healthcare at an optimal price point

The healthy growth of the Smart Series is evidence of its success.

Smart Series members benefit from convenient access and an optimal price point, while the Scheme benefits from healthy membership growth.

HEALTHY GROWTH

Since its launch in 2016, the Smart Series has grown to over 100 000 lives, and continues to attract young, healthy and digitally enabled members.

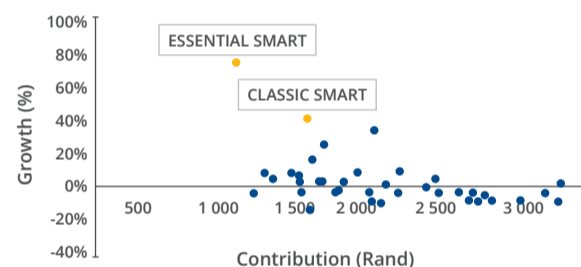


Members	Smart Series	Rest of DHMS
Average age	31.5	34.8
Pensioner ratio	3.7%	9.8%
Chronic ratio	15.9%	26.0%

x2 Smart Plan members use the Discovery App twice as often as other Discovery Health Medical Scheme members

OUTPERFORMING COMPARABLE PLANS

The Smart Series accounts for 33% of the growth in all medical scheme plans that are growing.



Avg age of Smart Series: **31.5** :: Avg age of growing plans: **34.7**

The success of the Smart Series is enabled by its unique benefit and network design.

The Smart Plan benefit design is unique. Benefits were designed around GP and hospital networks that offer members an optimal route through the healthcare system. Smart GPs use HealthID, which gives them access to a member's electronic health record (with the member's consent), and the Smart hospital network is optimised for the efficient referral pathways used by Smart GPs. Smart Series members have access to digital tools that guide them to Smart GPs, and optimise their healthcare experience. The combined plan, network and digital design of the Smart Series results in benefits that are more affordable than for comparable plans.

SMART GP NETWORK

Driving efficiency, a seamless member experience, and better quality care through the healthcare system with our Smart GP network

83% Of all Smart GPs who login use HealthID regularly

- Quick access to patient medical records for more coordinated, efficient care
- Helping providers more effectively diagnose patients, reduce medical errors, and provide safer care

SMART HOSPITAL NETWORK

Creating additional growth opportunities through expansion of the Smart hospital network

Over the course of 2019, the Smart Hospital Network was expanded to include hospitals in George, Kimberly, Richards Bay, Polokwane and Emalahleni. In 2020, the hospital network will include hospitals in an additional eight regions:

- Tzaneen
- Klerksdorp
- Welkom
- Umtata
- Newcastle
- Ballito
- Pretoria
- Cape Town

94% Of members have a Smart GP within a 10km radius

5km Average distance to a Smart GP

43 Smart Hospitals New regions for 2020

Introducing CLASSIC SMART COMPREHENSIVE

For 2020, the Discovery Health Medical Scheme has used the efficiency of the Smart Series networks, digital capabilities of Discovery Health and benefits of the Comprehensive Series to create the Classic Smart Comprehensive Plan – designed to offer efficient, comprehensive healthcare cover to families that are concerned about their known and unforeseen medical needs.



Creating efficient access to comprehensive healthcare

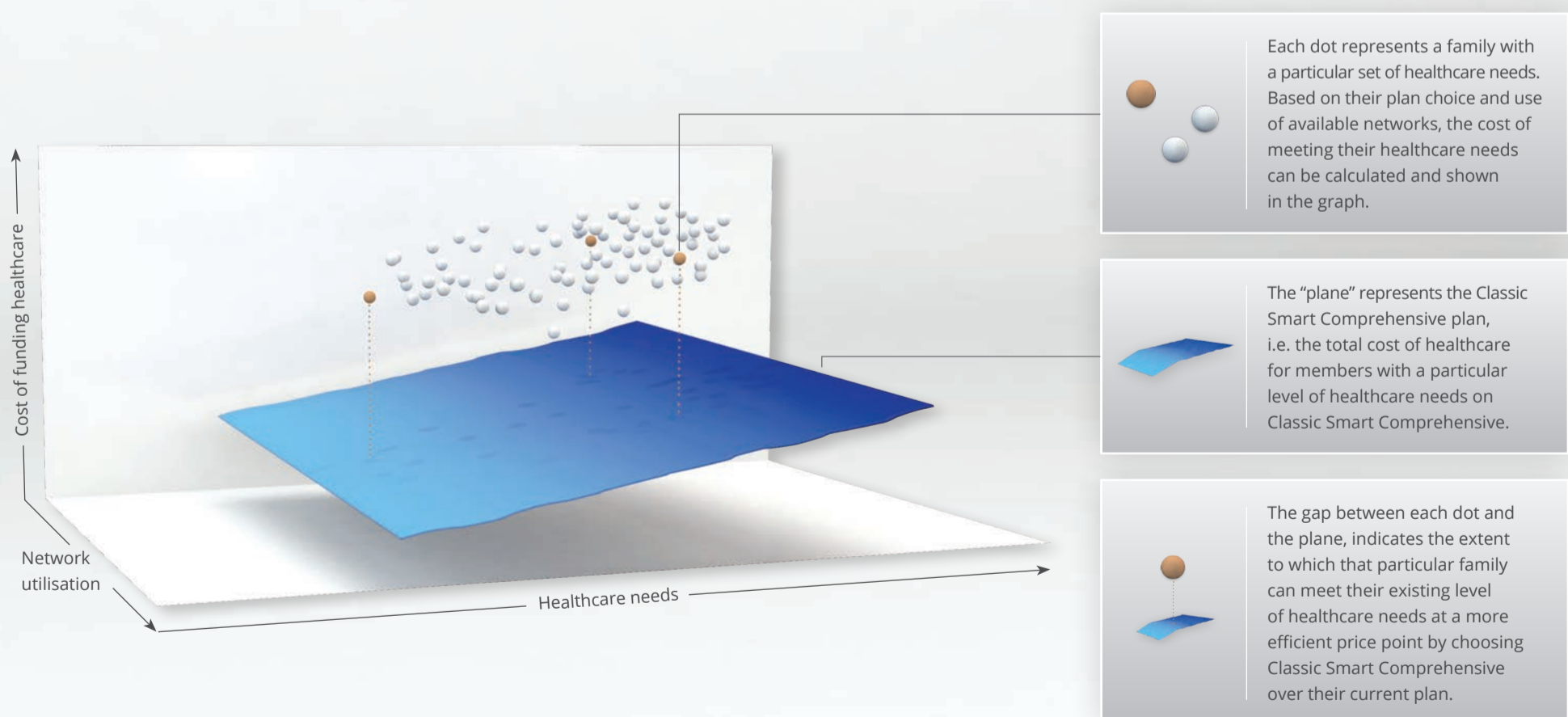
For 2020, Classic Comprehensive Zero MSA has been redesigned and renamed as Classic Smart Comprehensive. Classic Smart Comprehensive combines the Comprehensive Series and the Smart Series in a unique plan that offers:

- Extensive day-to-day benefits from the Smart Series
- Unlimited Above Threshold Benefit from the Comprehensive Series
- Comprehensive maternity benefits
- Comprehensive in-hospital, chronic and oncology benefits.

INEFFICIENT PLAN CHOICES BY MEMBERS COMPROMISE COVER AND INCREASE COST

When choosing a medical scheme plan, members typically trade off their medical needs against their financial needs. Members who want complete peace of mind that the known and unforeseen healthcare needs of their families are catered for, typically look for the most comprehensive cover they can afford. In some instances, though, members choose a plan that is more affordable, but with cover that is inadequate. As a result, they end up spending more for the same amount of healthcare than they would have spent on a plan with a higher contribution and richer cover. Ultimately, inefficient plan choices compromise the extent of cover available, without necessarily reducing the cost to the member.

For many families, Classic Smart Comprehensive will be the most efficient way to meet their healthcare needs in 2020 and beyond.



TECHNICAL DETAILS

The efficient frontier is based on out-of-hospital and chronic claims of all entities on the Comprehensive Series.

This analysis considered the out-of-hospital and chronic claims expenditure of 125 000 principal members on the Comprehensive Series in 2018, and assessed the contributions across a range of Discovery Health Medical Scheme Comprehensive options as well as the day to day medical expenses of the members. It considered the way in which these members interacted with the healthcare system through the utilisation of networks for day-to-day healthcare spend including chronic, and the total out-of-hospital healthcare needs of these members. Healthcare needs = all day-to-day healthcare spend. Network utilisation = extent to which networks were used for day-to-day healthcare spend including chronic eg. Use of network pharmacies and GPs. Cost of funding healthcare = plan contribution + any out-of-pocket day-to-day healthcare spend.

Classic Smart Comprehensive

Comprehensive hospital cover, Smart day-to-day benefits and an unlimited Above Threshold Benefit



Smart Day-to-day Benefits

Unlimited GP Consultations

The Smart Plan provides members with unlimited GP consultations at a GP in the Smart Plan network. A R55 co-payment applies for each visit.

Acute Medicine

Members have full cover for a defined list of acute medicine (Schedule 3 and above), when prescribed by a Smart GP and dispensed by a network pharmacy (including Clicks and Dis-Chem). Cover is subject to an annual limit of R2 500 per person, or R4 000 per family.

Over-the-Counter Medicine

Cover for over-the-counter medication (schedule 0-2) obtained from a network pharmacy, up to an annual limit of R800 per family per year.

Sports Injury Treatment

The Sports Injury Benefit includes defined cover for specialist consultations, basic x-rays and treatment by allied health professionals.

Dental Care and Eye Care

Cover for one defined dental check-up each year and one eye test per year through the Scheme's appointed network providers, subject to a co-payment of R55 for eye care and R110 for dental check-up.

MRI and CT Scans

Cover for out-of-hospital MRI and CT scans, subject to the first R3 040 payable by the member and the balance paid up to 100% of the Discovery Health Rate.

Smart Specialist Consultations

The Smart Specialist Benefit covers consultations with network gynaecologists, paediatricians, physicians and ENTs, including the cost of any radiology or pathology prescribed by the specialist. The benefits covers 100% of the Discovery Health Rate, up to R5 000 per person per year, or R10 000 per family per year, and is subject to referral by a Smart GP.

Unlimited Above Threshold Benefit

All Smart day-to-day benefits (excluding over-the-counter medicine) accumulate to the Annual Threshold. Once the Annual Threshold is reached, members have access to an unlimited Above Threshold Benefit, which covers the same benefits offered by a Comprehensive plan, including but not limited to:

- Unlimited GP consultations
- Unlimited specialist consultations
- Prescribed medicine*
- Allied healthcare services*
- Unlimited radiology and pathology
- Unlimited basic dentistry
- Dental appliances*
- Optometry*

*Subject to an annual limit

H Comprehensive hospital cover

Members have full cover for hospital admissions in the Smart Hospital Network, with no overall limit. Admissions outside the Smart Hospital Network are subject to a R9 650 upfront co-payment. Specialists who treat Smart Plan members in hospital are covered in full if they are on a payment arrangement. Specialists who are not on a payment arrangement, are covered up to 200% of the Discovery Health Rate.

C Chronic Illness Benefit

The Classic Smart Comprehensive Plan provides full cover for all Chronic Disease List conditions. Members will be covered up to the set monthly Chronic Drug Amount (CDA) for medicine not on the formulary.

O Comprehensive oncology cover

Oncology treatment that falls within the Prescribed Minimum Benefits is covered in full, with no co-payment. For treatment that is not Prescribed Minimum Benefits, members will have cover up to R300 000 of the member's approved cancer treatment over a 12-month cycle, after which a 20% co-payment will apply.

S Screening and prevention benefit

Members have access to comprehensive screening and prevention benefits, including an annual health check, screening for specific chronic conditions and cancers, age-specific screening for children under the age of 18, and an annual flu vaccination.

M Comprehensive maternity cover

Members on Classic Smart Comprehensive have cover for a rich set of healthcare services for maternity and early childhood paid from the Maternity Benefit aligned to that available on the Comprehensive Series. The Maternity Benefit is over-and-above the day-to-day benefits to provide families with comprehensive cover for maternity and early childhood.

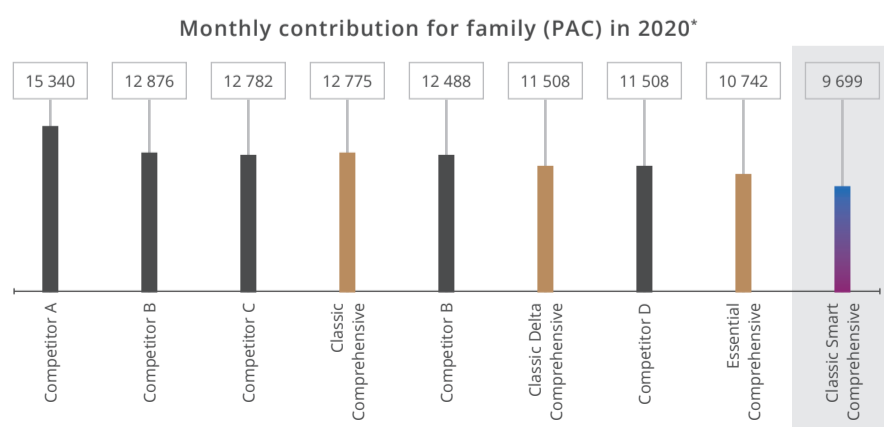
Creating an efficient price point for comprehensive cover

2020 CONTRIBUTIONS FOR CLASSIC SMART COMPREHENSIVE

	Main member	Adult	Child
Contributions	4 327	3 994	1 378
Annual Threshold amounts	23 900	23 900	800

Classic Smart Comprehensive does not offer a Medical Savings Account

COMPARISON TO PLANS WITH COMPREHENSIVE LEVELS OF COVER



*for competitors an 11% increase was assumed

2020 Benefit updates

CHANGES TO THE SPECIALISED MEDICINE AND TECHNOLOGY BENEFIT

In 2020, the scheme will introduce full cover options for the treatment of rheumatoid arthritis, ulcerative colitis and Crohn's disease funded from the Specialised Medicine and Technology Benefit. Should members voluntarily use alternative treatment for these conditions, the Scheme will only pay up to the reference price for treatment. Reference pricing will only apply to treatment authorised on or after 1 January 2020, and will not impact the funding of treatment authorised prior to 1 January 2020.

UPDATES TO FUNDING OF MRI, CT SCANS AND SCOPES FOR THE EXECUTIVE PLAN

In 2020, the Scheme will be introducing a co-payment on the Executive Plan for all out-of-hospital MRI/CT scans, scans not related to an approved admission or scans related to conservative back and neck treatment. The first R3 040 of the MRI/CT scan will be funded from the available day-to-day benefits (with accumulation to the Above Threshold Benefit) and the balance of the account from the Hospital Benefit, up to 100% of the Discovery Health Rate. Co-payments will not apply to scans forming part of Prescribed Minimum Benefit (PMB) entitlements.

In 2020, the Scheme will introduce a co-payment on the Executive Plan for endoscopic procedures performed in-hospital. The co-payment will apply to gastroscopies, colonoscopies, sigmoidoscopies and proctoscopies only. The first R4 100 in respect of the hospital account will be funded from the available day-to-day benefits (with accumulation to the Above Threshold Benefit) and the balance of the account from the Hospital Benefit, up to 100% of the Discovery Health Rate. The deductible does not apply to PMB admissions and for children under 12 years or to endoscopic procedures performed in the doctor's rooms. These endoscopic procedures will continue to fund from the Hospital Benefit as occurs today.

CHANGES TO CHRONIC ILLNESS BENEFIT

From 1 January 2020, certain formulary changes and Chronic Drug Amount updates will be applied. We have been communicating these changes with impacted members. These members will have until the end of 2019 to make changes to their treatment to avoid or reduce co-payments.

UPDATES TO LIMITS, CO-PAYMENTS, DEDUCTIBLES AND THRESHOLDS

Co-payments and deductibles are increased by 9.5%.

Benefit limits are increased by 9.5% with the exception of the following where there is no increase for 2020:

- Oncology threshold;
- Specialised Medicine and Technology Benefit limit;
- Cochlear and auditory brain implants;
- International Travel Benefit;
- Overseas Treatment Benefit;
- Hip, knee, shoulder and spinal prostheses limit;
- External Medical Items limit and
- KeyCare mobility benefit.

CHANGE TO THE ACUTE MEDICINE BENEFIT ON THE CLASSIC SMART PLAN

Acute medicine in the Classic Smart Plan will be subject to an annual benefit limit of R1 500 per member and R2 500 for a family for schedule 3 and above acute medication prescribed by a Smart network GP. The R10 co-payment per item will no longer apply, and members may use both Clicks and Dis-Chem to obtain these medicines.

CHANGES TO THE DAY-TO-DAY EXTENDER BENEFIT

In 2020, the Day-to-day Extender Benefit will cover unlimited pharmacy clinic consultations in our wellness network, as well as video call consultations with a network GP. Members will also have cover for consultations with a network GP, when referred. Consultations are unlimited for Executive, Comprehensive and Priority plans, while Saver plans have limited cover for up to 6 consultations.

UPDATES TO FUNDING OF SCOPES

In 2020, the Scheme will introduce a higher deductible per admission, where both a gastroscopy and colonoscopy are performed together as part of an admission. This change will apply to all plans except for the KeyCare plans.

UPDATES TO THE KEYCARE PLUS CASUALTY BENEFIT

In 2020, the Scheme will be introducing a limit of one casualty visit per person for elective casualty visits. The limit will not apply to emergency casualty visits or to a visit that results in an admission.

EXPANSION OF THE DELTA HOSPITAL NETWORK

In 2020 the Delta Hospital Network will be expanded to include Life Wilgers Hospital in Pretoria.

CHANGE IN ACCUMULATION OF CLAIMS FOR ACUTE PRESCRIBED MEDICINE

In 2020, accumulation to the Annual Threshold, and payment from the Above Threshold Benefit on the Executive, Comprehensive and Priority plans will be up to 50% of the Discovery Health Rate for non-preferentially priced generic and brand medication prescribed out-of-hospital. Preferentially priced generic and brand medication will continue to accumulate and fund at 100% of the Discovery Health Rate.

CLASSIC SMART COMPREHENSIVE

- All Smart risk benefits (excluding the OTC Benefit) and all self-funded benefits will accumulate to the Annual Threshold at 100% of the Discovery Health Rate. All other risk payments will not accumulate to the Annual Threshold.
- Existing Classic Comprehensive Zero MSA members will remain on Classic Smart Comprehensive on 1 January 2020.
- Members will be contacted during October 2019 regarding the change in their plan benefits and contributions for 2020, with the option to move to Classic Comprehensive in 2020 to retain their current benefits.
- A defined list of exclusion categories applies for the Acute Medicine Benefit and the Over-the-Counter Medicine Benefit.
- Classic Smart Comprehensive does not cover the Additional Disease List, the Specialised Medicine and Technology Benefit, the Extended Oncology Benefit or the Oncology Innovation Benefit.

ENHANCING ACCESS

to primary healthcare for business employees

To address the need for employers to expand access to primary healthcare, Discovery launched Primary Care in 2015.

Based on affordability and the healthcare needs of employees, employers can choose between Discovery Primary Care Activate and Discovery Primary Care Advanced.

Enhancements to Discovery Primary Care for 2020

In 2020, Primary Care for business employees has been enhanced to include benefits for nurse consultations, specialist consultations, an annual flu vaccine and HIV management, while the benefits for trauma have been increased.



Introduction of nurse-centric care

Nurses make up the largest group of healthcare service providers in South Africa and play a pivotal role in providing primary healthcare. Nurses have skills and experience to deal with primary healthcare needs, conduct screening, identify deteriorating health and promote overall patient wellness. Nurses also establish meaningful relationships with their patients and facilitate successful, long-term patient care.

In 2020, Discovery is introducing nurse-centric care to the Primary Care product range to improve access and convenience at an affordable price.

Primary Care employees will have access to unlimited pharmacy clinic consultations with a nurse in our network, supported by telemedicine consultations with a GP in our network. Employees will be able to walk into a selected retail pharmacy or book a consultation with a nurse, receive the necessary treatment and collect over-the-counter or prescribed medicine.



NURSE CONSULTATIONS

Employees on Primary Care will have full cover for unlimited consultations with nurses in our wellness network. Nurses will be able to dispense medication, refer employees for telemedicine and refer employees for face-to-face consultations with a Primary Care GP.

Advanced | Activate



ADDITION OF HIV MANAGEMENT

HIV treatment, counselling and education will be included in the Primary Care products. Cover will be provided for antiretroviral medication, multivitamins and supportive medicine, blood tests and x-rays as well as post-exposure prophylaxis medication. All HIV-related queries or cases are treated with complete confidentiality.

Advanced | Activate



GP CONSULTATIONS

The introduction of the benefit for nurse consultations allows employers to choose between two distinct pathways.

On Primary Care Advanced:

With nurse referral: Employees have cover for unlimited Primary Care GP consultations when referred by a nurse in our wellness network, and two Primary Care GP consultations per annum when not referred by a nurse.

Without nurse referral: Employees have cover for unlimited Primary Care GP consultations, without the need for a nurse referral.

Pricing for Primary Care Advanced will differ based on the referral pathway chosen by the employer.

On Primary Care Activate:

Employees have cover for unlimited Primary Care GP consultations when referred by a nurse in our wellness network and two Primary Care GP consultations per year when not referred by a nurse.

Advanced | Activate



INCREASED TRAUMA BENEFIT LIMIT

The Trauma Benefit includes access to emergency private healthcare services for a defined range of traumatic events at any private hospital. In 2020, the cover limit of R100 000 will be increased to offer employers the choice between either R300 000 or R1 million cover. Employees will also get access to two post-traumatic event counselling sessions. All existing employees on the current Trauma Benefit with a limit of R100 000 will automatically be transferred to the R300 000 limit with the 2020 Trauma Benefit.

Advanced | Activate



ADDITION OF OPTOMETRY AND DENTISTRY

Employees on Primary Care Activate will have cover for basic dentistry and optometry. Basic dentistry will include dentist consultations, fillings and tooth removals at a network dentist. Optometry will include one eye test in the optometry network and one pair of glasses or contact lenses every 24 months.

Activate



ADDITION OF SPECIALIST BENEFIT

Primary Care Advanced will include cover for specialist consultations up to R2 000 per employee and R4 000 per family, subject to two visits per person per year. A Primary Care GP must refer the employee to a specialist and they will need a reference number from Discovery before their consultation.

Advanced



ADDITION OF ANNUAL FLU VACCINE

Employees can now get a flu vaccine annually at a network pharmacy.

Advanced | Activate

2020 Pricing

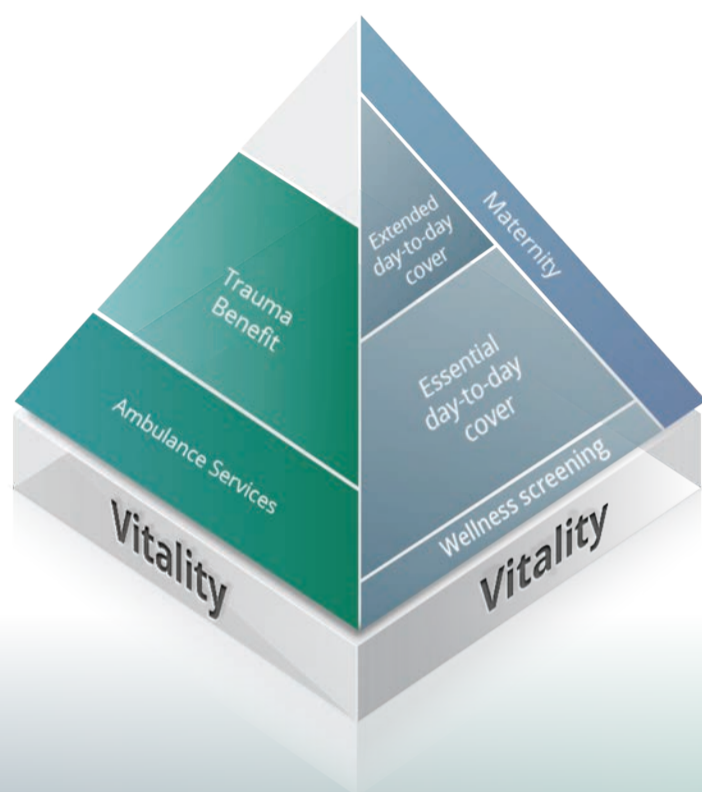
Primary Care starts from R186 per month for business employees. Pricing is dependent on the employer's unique circumstances, including the compulsory or voluntary nature of Primary Care membership, and the geographic location and demographic profile of employees.

Indicative monthly fees, including VAT

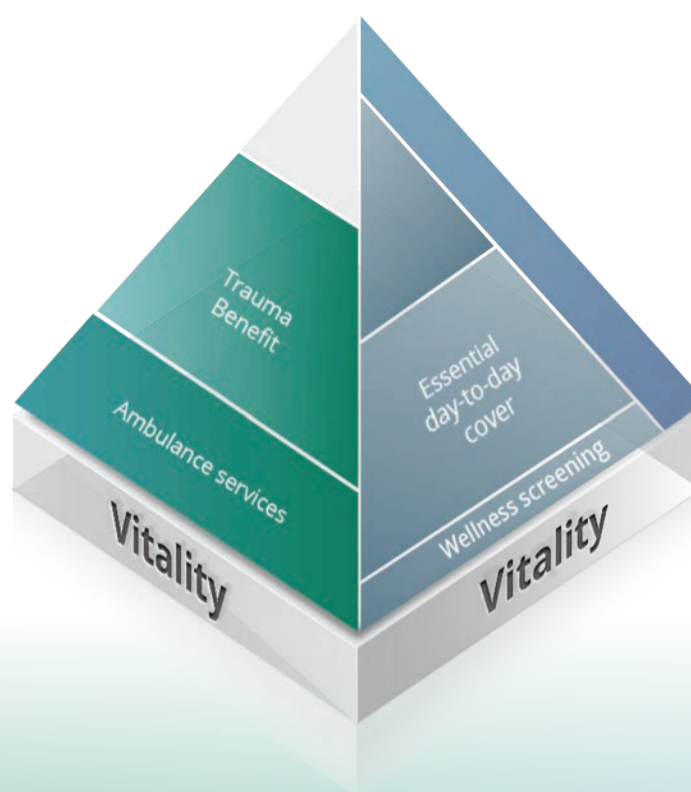
	PRIMARY CARE ACTIVATE	PRIMARY CARE ADVANCED		TRAUMA BENEFIT	
		WITH NURSE REFERRAL	WITHOUT NURSE REFERRAL	R300 000 LIMIT	R1 000 000 LIMIT
Employee	R186	R269	R316	R63	R88
Spouse	R186	R269	R316	R63	R88
Adult	R186	R269	R316	R63	R88
Child	R186	R173	R204	R36	R59

2020 Primary Care product range for business employees

DISCOVERY PRIMARY CARE ADVANCED



DISCOVERY PRIMARY CARE ACTIVATE



PRIMARY CARE ADVANCED

	(WITHOUT NURSE REFERRAL)	(WITH NURSE REFERRAL)	
Essential day-to-day cover	Unlimited network GP visits	✓	✓ If referred by a nurse Two network GP visits each year without being referred by a nurse
	Unlimited network nurse visits	✓	✓
	Medical procedures performed in network GP rooms	✓	✓
	Day-to-day prescription medicine	✓	✓
	HIV management	✓	✓
	Basic optometry	✓	✓
	Basic dentistry	✓	✓
	Annual flu vaccine	✓	✓
Ambulance services	✓	✓	
Extended day-to-day cover	Specialist benefit	✓	✓
	Cover for defined chronic medicine	✓	✓
	Basic pathology and radiology	✓	✓
	Maternity	✓	✓
Wellness screening	✓	✓	
Up to R5 000 funeral cover	✓	✓	
Optional Trauma Benefit	✓	✓	

New benefits

PRIMARY CARE ACTIVATE

	(WITHOUT NURSE REFERRAL)	(WITH NURSE REFERRAL)	
Essential day-to-day cover	Unlimited network GP visits	✓	✓ If referred by a nurse Two network GP visits each year without being referred by a nurse
	Unlimited network nurse visits	✓	✓
	Medical procedures performed in network GP rooms	✓	✓
	Day-to-day prescription medicine	✓	✓
	HIV management	✓	✓
	Basic optometry	✓	✓
	Basic dentistry	✓	✓
	Annual flu vaccine	✓	✓
Ambulance services	✓	✓ If the Trauma Benefit is selected	
Extended day-to-day cover	Specialist benefit	✗	✗
	Cover for defined chronic medicine	✗	✗
	Basic pathology and radiology	✗	✗
	Maternity	✗	✗
Wellness screening	✓	✓	
Up to R5 000 funeral cover	✓	✓	
Optional Trauma Benefit	✓	✓	

Enhanced benefits

Discovery Primary Care is not a medical scheme. The cover is not the same as that of a medical scheme and is not intended to be a substitute for medical scheme membership. Discovery Primary Care is offered by Discovery Life Limited, registration number 1966/003901/06, a registered long-term insurer and an authorised financial services and registered credit provider NCR Reg No. NCRCP 355555. Discovery Vitality (Proprietary) Limited, registration number: 1999/007736/07 is an authorised financial services provider. Product rules, terms and conditions apply. Discovery Primary Care is administered by Discovery Health (Proprietary) Limited, registration number 1997/013480/07, an authorised financial services provider.

Introducing DISCOVERY PRIMARY CARE FOR HOUSEHOLD EMPLOYEES

Quality primary healthcare cover for household employees from **R249** per month

Expanding access to private primary healthcare

In South Africa today, there are approximately 1.2 million household employees working and caring for thousands of families. Less than 1% of these employees have access to private healthcare.

Research shows that despite the minimum wage being raised in 2019, most household employees are still unable to cover their basic living expenses such as food, housing and transport, with access to private healthcare for themselves and their families remaining out of reach.



1.2 million household employees in South Africa



Approximately **0.3%** of household employees have access to private healthcare

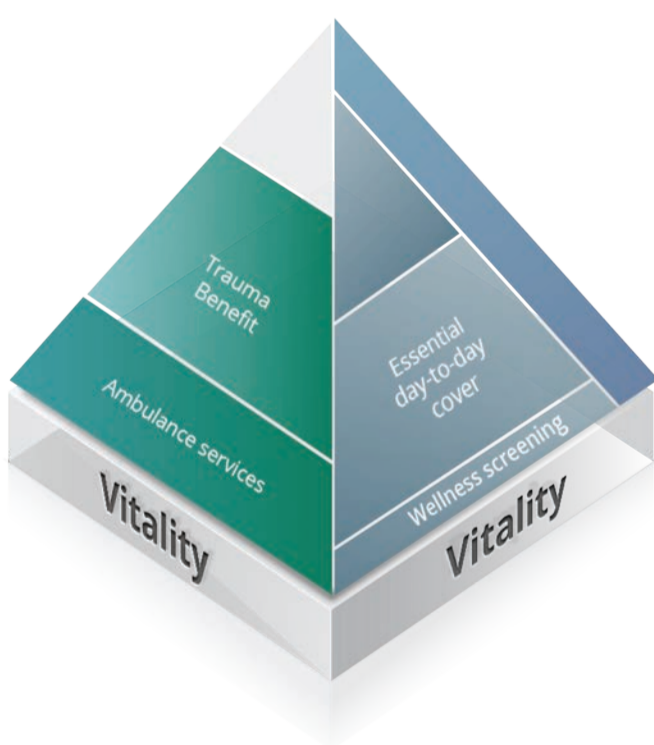


The cost of a private GP consultation is up to **10%** of household employees' monthly income

Source: Stats SA QLFS, Stats SA QES

Discovery Primary Care Activate for household employees

In 2020, employers will have the opportunity to buy Primary Care Activate for their household employees from R249 per month. Primary Care Activate will provide employees with essential day-to-day healthcare benefits like nurse and GP consultations, dentist and optometrist visits as well as funeral cover, wellness screenings and HIV management. For an additional premium, employers can include the Trauma Benefit. The Trauma Benefit includes access to emergency private healthcare services for a defined range of traumatic events at any private hospital and two post-traumatic event counselling sessions. Primary Care Activate can also be extended to dependants of the employees.



All healthcare services offered by Primary Care Activate are covered in full at the point of care with no upfront payments required

ESSENTIAL DAY-TO-DAY BENEFITS

Nurse visits

Access to unlimited network nurse visits

GP visits

Access to unlimited network GP visits if referred by a nurse. Two network GP visits each year without being referred by a nurse

Medical procedures

Access to a defined list of medical procedures performed in a network GP's room

Basic dentistry

Cover for dentist visits, fillings and tooth removals at a dentist in the network

Basic optometry

Cover for one eye test in the optometry network and one pair of glasses or contact lenses every 24 months

Flu vaccine

Access to an annual flu vaccine at a network pharmacy

HIV management

Access to HIV treatment, counselling and education. Cover for antiretroviral medication, multivitamins and supportive medicine, blood tests and x-rays as well as post-exposure prophylaxis medication. All HIV-related queries or cases are treated with complete confidentiality

Wellness screening

Access to a holistic set of wellness screenings including blood pressure, blood glucose (blood sugar), cholesterol and body mass index (BMI) tests

AMBULANCE SERVICES

If the Trauma Benefit is selected, access to Netcare 911 ambulance services

OPTIONAL TRAUMA BENEFIT

Access to emergency private healthcare services for a defined range of traumatic events at any private hospital. Cover limits of either R300 000 or R1 million are available. Employees get access to two post-traumatic event counselling sessions

Treatment for the following trauma conditions is covered:

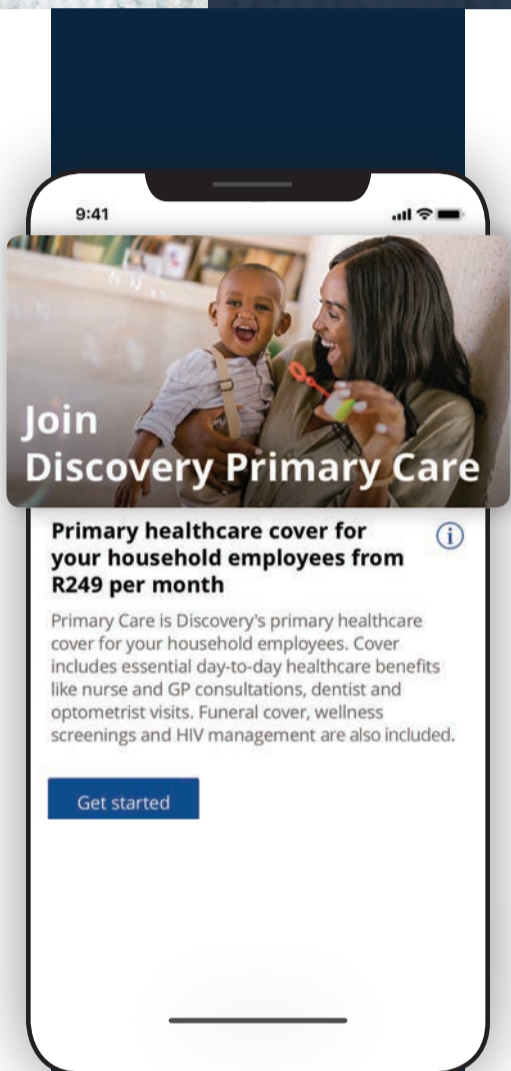
- Burns
- Head injuries, chest injuries or severe fractures as a result of a fall
- Loss of an arm, hand, leg or foot
- Near drowning
- Poisoning or a serious allergic reaction that may cause death
- Injuries resulting from a crime, sexual assault, a fall, a car accident or an injury at work

FUNERAL COVER

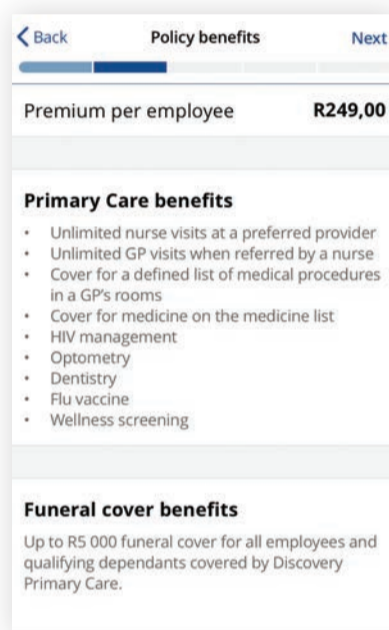
Up to R5 000 funeral cover for all employees and qualifying dependants who are covered by Discovery Primary Care

Seamless application process

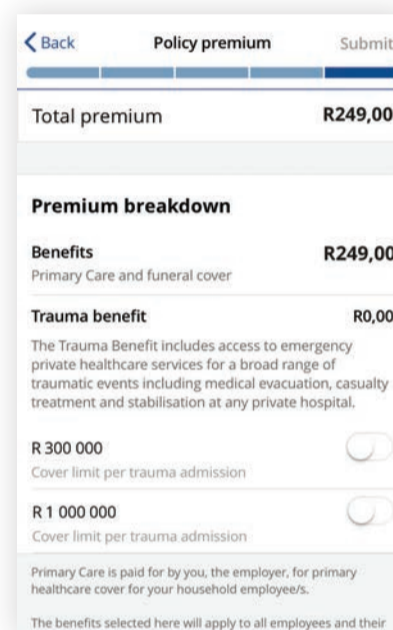
Financial advisers can complete an application for the household employees on the Financial Advisor Zone or household employers can apply on the Discovery app



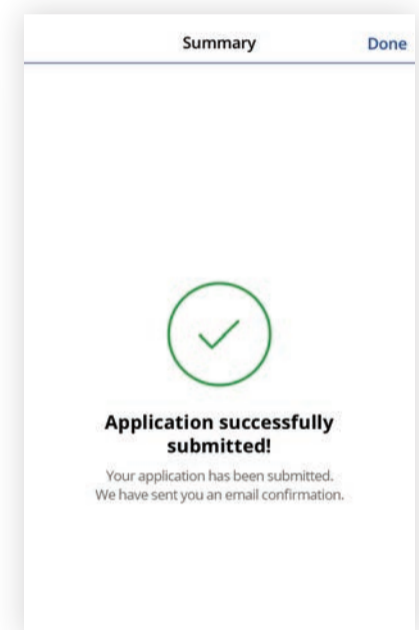
Enter employee and dependant details



Select benefits



Submit application



Fully digital experience

Simple process

No additional paperwork

FOR ADVISERS

Product activation available on FAZ from **October 2019**
Product go-live: **1 January 2020**



FOR HOUSEHOLD EMPLOYERS

Product activation available on the Discovery app and website from **1 January 2020**
Product go-live: **1 January 2020**



2020 Pricing

Indicative monthly fees, including VAT

	PRIMARY CARE ACTIVATE	TRAUMA BENEFIT	
		R300 000 limit	R1 000 000 limit
Employee	R249	R63	R88
Spouse	R249	R63	R88
Adult	R249	R63	R88
Child	R249	R36	R59

TECHNICAL DETAILS

- Eligibility
 - Cover is only available for household employees who work in a private household, which includes cleaners, gardeners, drivers, people who take care of children, the aged, the sick, the frail or the disabled, and domestic workers employed by an employment service. Farm workers are not eligible
 - Household employees need to be legally employed, a South African resident or have a valid work permit
 - Household employees and their dependants cannot be members of a medical scheme and have the Primary Care product at the same time
- Household employers can add the spouse(s) and dependants of their household employees to the Primary Care policy at an additional cost
- Household employees and their dependants will be subject to a three-month general waiting period from the policy commencement date
- Household employers purchasing Primary Care for household employees do not have to be a Discovery client
- Premium increases are effective 1 January each year
- Household employers and employees will be able to find Primary Care network providers on the Discovery website

Discovery Primary Care is not a medical scheme. The cover is not the same as that of a medical scheme and is not intended to be a substitute for medical scheme membership. Discovery Primary Care is offered by Discovery Life Limited, registration number 1966/003901/06, a registered long-term insurer and an authorised financial services and registered credit provider NCR Reg No. NCRCP 355555. Discovery Vitality (Proprietary) Limited, registration number: 1999/007736/07 is an authorised financial services provider. Product rules, terms and conditions apply. Discovery Primary Care is administered by Discovery Health (Proprietary) Limited, registration number 1997/013480/07, an authorised financial services provider.

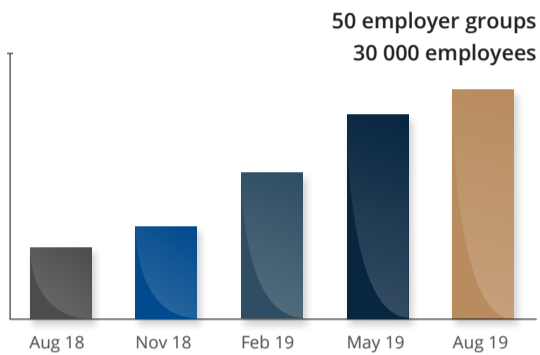
DISCOVERY HEALTHY COMPANY MAKING EMPLOYEES HEALTHIER

Healthy Company is Discovery's digitally-enabled, comprehensive employee assistance programme that proactively supports employees

EMPLOYER GROWTH



Since Healthy Company launched in 2018, it has been taken up by 50 employers, covering more than 30 000 employees

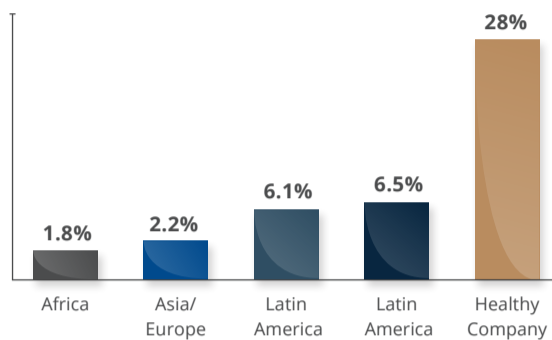


PROGRAMME UTILISATION



Healthy Company's programme design is driving utilisation that is significantly higher than global benchmarks for employee assistance programmes (EAP)

Global EAP utilisation benchmarks



Source: 2016 CGP International EAP Utilisation Report

EMPLOYEE ENGAGEMENT



Despite the high levels of engagement with Healthy Company, engagement in physical wellbeing lags behind other areas of engagement

Percentage of total interactions



Healthy Company 2020

Discovery research has shown that employees who are physically active on a regular basis are more productive than their peers. In 2020, Healthy Company will address the lower levels of employee engagement in physical wellbeing. Employees will be incentivised to get active regularly, and have access to tools and benefits to help them track their activities. In addition, Healthy Company will provide employers with tools to drive employee engagement.

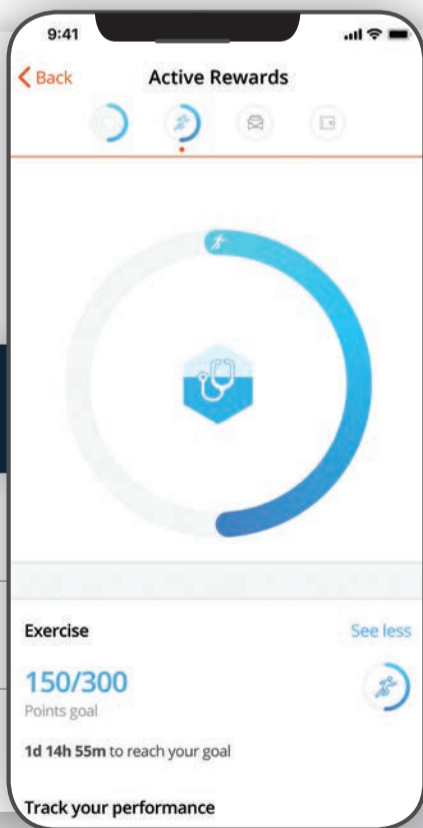
INTRODUCING VITALITY HEALTH TRACKER FOR HEALTHY COMPANY

Vitality Active Rewards is a powerful catalyst for positive behavioural change and rewards members for getting active. In South Africa, more than 500 000 people use Vitality Active Rewards on a daily basis.

From 2020, Healthy Company will help employees get active, by providing them with free access to the Vitality Health Tracker and a benefit for a fitness tracking device. They will also have access to Healthy Company Goals, which will reward them for regularly engaging with Healthy Company to improve and sustain healthy behaviours.

Access to the Exercise Ring

All Healthy Company members will get free access to the Exercise Ring and earn Discovery Miles for achieving their weekly goals, up to an annual limit.



Access to Healthy Company Goals

All members of Healthy Company get free access to Healthy Company Goals. Employees are allocated three goals each quarter and earn Discovery Miles for completing these goals, up to an annual limit.

Activities include:

- Completing a Health Check
- Achieving fitness goals
- Completing all Healthy Company assessments
- Tracking their mood on the mood tool

SUPPORT FOR EMPLOYERS TO DRIVE EMPLOYEE WELLBEING

Individuals spend approximately one third of their adult life at work, so employers have a key role to play in influencing employee wellbeing.

In 2020, Healthy Company will be enhanced to include a range of tools and programmes to help employers support their employees along their wellbeing journey.

WELLNESS CALENDAR AND SELF-SERVICE TOOLS

which enable employers to conduct wellness campaigns, assist in seamlessly onboarding employees, submit queries and make bookings for workshops and wellness days on the Employer Zone on www.discovery.co.za

HEALTHY COMPANY WELLNESS ADVISERS

will guide employers along their company's wellness journey. Wellness Advisers will assist employers in identifying Wellness Champions within the company who will be trained to drive employee engagement

WORKSHOPS AND TRAINING PROGRAMMES

focusing on a range of topics across the four dimensions of wellbeing which can be accessed online or on-site

TECHNICAL DETAILS

- Pricing of Healthy Company is based on the employer's unique circumstances, including the size and demographic profile of employees. For employer groups where a high proportion of employees are members of a medical scheme administered by Discovery Health or are members of Discovery Primary Care, price discounts may apply based on integration with these products

Discovery Health (Pty) Ltd; registration number 1997/013480/07, an authorised financial services provider, an administrator of medical schemes.



Get up to 50% off a Huawei Band 2 Pro



- 01 | Employees need to activate the device benefit under Vitality Active on the Discovery app
- 02 | Select the Huawei Band 2 Pro fitness device
- 03 | Generate a voucher for an upfront discount
If they generate the voucher before completing their health check they will get 25% off
If they generate the voucher after completing their health check, they will get 50% off
- 04 | Once the voucher is generated, employees will be able to redeem it for their device at Sportsmans Warehouse

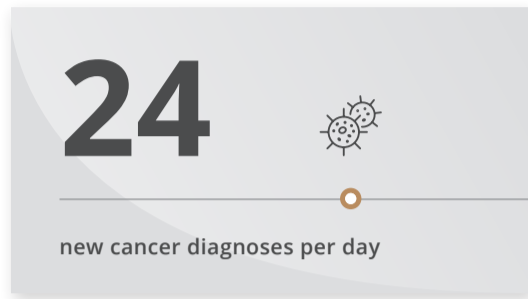
INTRODUCING DISCOVERY COACHES

Supporting members through their healthcare journeys

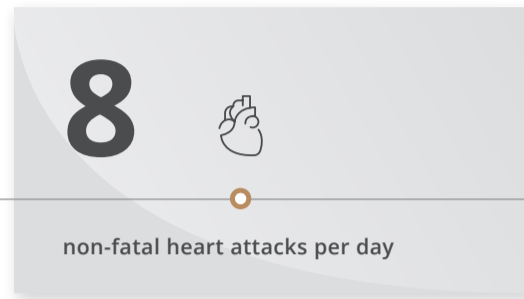


LARGE NUMBERS OF DISCOVERY HEALTH MEDICAL SCHEME MEMBERS EXPERIENCE LIFE-CHANGING EVENTS EVERY DAY

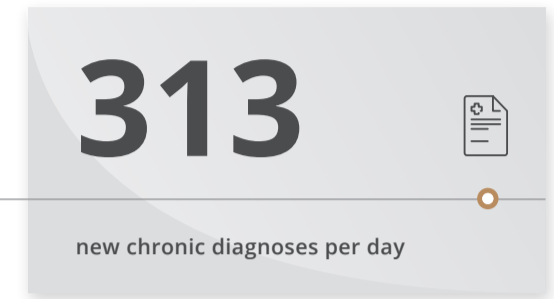
ONCOLOGY



CARDIAC



CHRONIC



Dealing with life-changing health events or the ongoing management of a chronic disease can be a significant burden. Apart from understanding the impact on their health and the treatment required for their condition, members have to consider the associated lifestyle changes and navigate their way through an unfamiliar healthcare system.

Life-changing diagnoses require complex medical intervention. The greater the complexity and frequency of care, the more important it is to coordinate this care. Discovery Health has extensive experience in guiding members with complex medical conditions through their healthcare journeys.

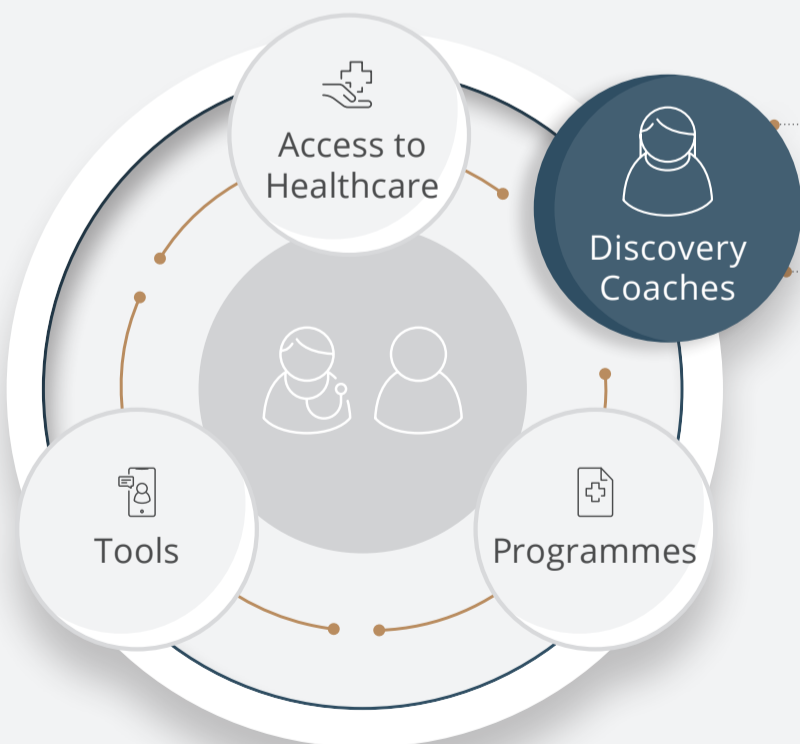
In 2020, Discovery will utilise this experience and enhance the healthcare journeys of members through the introduction of Discovery Coaches.

Discovery Coaches

When Discovery Health Medical Scheme members experience a life-changing event, they have immediate access to:

- comprehensive benefits that fund their access to healthcare;
- sophisticated managed care programmes that ensure compliance with treatment protocols and clinical guidelines; and
- digital tools that support them and their doctor with relevant clinical information.

In 2020, Discovery Coaches will enhance this access for specific conditions and programmes, to provide relevant support to the member through their healthcare journey.



HIGHLY SKILLED AND CAPABLE RESOURCES

Discovery Coaches are qualified in a health-related field such as psychology, nutrition and health coaching.



FUNCTIONS OF DISCOVERY COACHES

- Motivational interviewing to understand member motivation for behavior change
- Goal setting and tracking to help members set and reach realistic but challenging goals
- Education on condition, benefits and interventions, importance of lifestyle changes and self-management
- Referral and onboarding to the relevant existing Discovery interventions



HEALTH COACHES WILL BE DEPLOYED ACROSS SPECIFIC HIGH-RISK PROGRAMMES

CARDIAC PROGRAMME

Lifestyle, clinical rehabilitation and emotional support programme for members who recently had a heart attack

ONCOLOGY PROGRAMME

Education, emotional support and navigation programme for members recently enrolled on the Oncology Benefit

DIABETES PROGRAMME

Lifestyle and clinical programme for members recently diagnosed with Type 2 diabetes

Benefits for members

- Better-quality care through a coordinated approach across multiple providers within the healthcare system
- Better management of their holistic health and wellbeing
- Improved understanding of their medical scheme benefits
- Support and guidance through human interaction in their time of need

Benefits for Discovery Health Medical Scheme

- Clinically appropriate care without unnecessary healthcare costs
- Reduced service interactions and increased engagement with existing tools
- Healthier members with lower healthcare costs and improved satisfaction levels

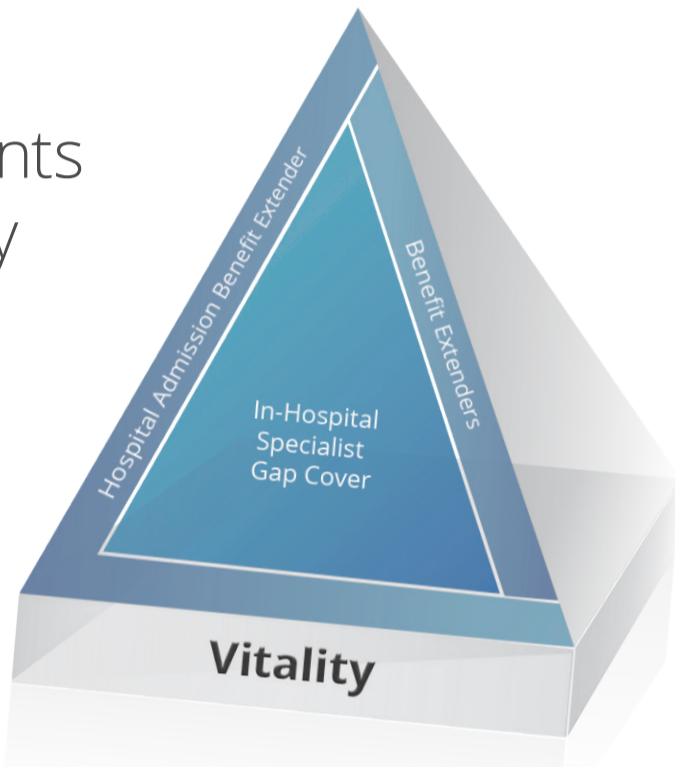
Benefits for doctors

- Better patient outcomes
- Reduced administration burden
- Increased members' adherence to treatment guidelines and benefit protocols

GAP COVER

Your employees can get Discovery Gap Cover from as little as R100 per month to cover shortfalls on in-hospital and cancer related claims. They can choose from Discovery Gap Comprehensive, and Discovery Gap Core, based on their medical needs and Discovery Health Medical Scheme plan choice.

2020 Enhancements to Discovery Gap Cover



In-hospital Specialist Gap Cover

On Gap Comprehensive the In-hospital Specialist Gap Cover will pay your employees up to 500% of the medical Scheme Rate when their approved in-hospital specialist claim is higher than what the medical scheme pays the specialist. On Discovery Gap Core, the cover has been increased to 250%.

INCREASED TO 500%



Hospital Admission Benefit Extender

In 2020, the Hospital Admission Benefit Extender amount has been adjusted to reflect the higher reimbursement rate.

On Discovery Gap Comprehensive the Hospital Admission Benefit Extender has been enhanced to include a private ward benefit limited to five nights per person per year, where the shortfall between the general ward fee and the private ward fee will be covered.

INCLUDES PRIVATE WARD

TECHNICAL DETAILS

- The enhanced benefits described are effective from 1 January 2020.
- In 2020, the 24-month gap application waiting period has been removed for the following:
 - Members on Essential and Coastal plans may apply for Discovery Gap Cover at any time
 - Members with Discovery Gap Cover who downgrade to an Essential or Coastal plan, may continue their gap cover policy. Underwriting will apply to any new medical conditions that the policyholder or any of the dependants have developed since the gap policy's inception date
- Discovery Gap Cover is subject to a regulated overall annual benefit limit of R160 000 per person per year.
- Discovery Gap Cover premiums will increase by 9.9% for members on Discovery Health Medical Scheme Essential and Coastal plans, and by 8.9% for members on Executive or Classic plans.

Discovery Gap Cover is an insurance product. This is not a medical scheme and the cover is not the same as that of a medical scheme. This policy is not a substitute for medical scheme membership. Discovery Gap Cover is a short-term insurance policy, underwritten by Discovery Insure Ltd, registration number 2009/011882/06, an authorised financial services provider. Product rules, terms and conditions apply.

MEET MICHELLE

Michelle and her family have been on Discovery Health Medical Scheme Classic Smart Plan for the last 2 years, and purchased Discovery Gap Comprehensive 18 months ago. The family is on Vitality, and have achieved Gold status.

Michelle gave birth to a baby boy in a hospital in the Smart Hospital Network and elected to stay in a private ward.

BEFORE THE ADMISSION

Michelle consulted with a gynaecologist eight times throughout her pregnancy for check-ups and ultrasound scans funded as part of the Maternity Benefit on the Classic Smart Plan.

In her last trimester Michelle consulted the gynaecologist twice. The gynaecologist charged R2 220 per consultation which is 293% of the Scheme Rate, leaving a total shortfall of R2 925 which the Hospital Admission Benefit Extender covered in full.

DURING THE ADMISSION

For the delivery, the gynaecologist charged 540% of the Scheme Rate while the anaesthetist charged 398%. The Classic Smart Plan covers specialist claims in-hospital up to 200% of the medical Scheme Rate, which paid for the first R9 790 of the gynaecologist's bill, R3 717 of the anaesthetist's bill and covered the paediatrician in full. The In-hospital Specialist Gap Cover benefit paid for the outstanding shortfall of R20 322. The total hospital account, including private ward cover, came to R24 242. The Scheme paid R20 392 of the account as there is no private ward benefit on the Classic Smart Plan, and the Hospital Admission Benefit Extender covered the shortfall of R3 850.

In total Discovery Gap Comprehensive covered R27 097 of the hospital costs, which Michelle would have had to fund herself.

SUMMARY OF COVER THROUGH THE HOSPITAL EPISODE

		Claimed	Paid from			Total paid (Scheme and Discovery Gap Cover)
			Discovery Health Medical Scheme	In-hospital Specialist Gap Cover	Hospital Admission Benefit Extender	
Pre-admission	Gynaecologist (293% of Scheme Rate)	4 440	1 515		2 925	4 440
	Gynaecologist (540% of Scheme Rate)	26 432	9 790	16 642		26 432
In-hospital	Anaesthetist (398% of Scheme Rate)	7 396	3 717	3 679		7 396
	Paediatrician	3 156	3 156			3 156
	Hospital (no private ward benefit)	24 242	20 392		3 850	24 242
		65 666	38 570	20 322	6 775	65 666

Paid from Gap Cover
27 097

Zero shortfall

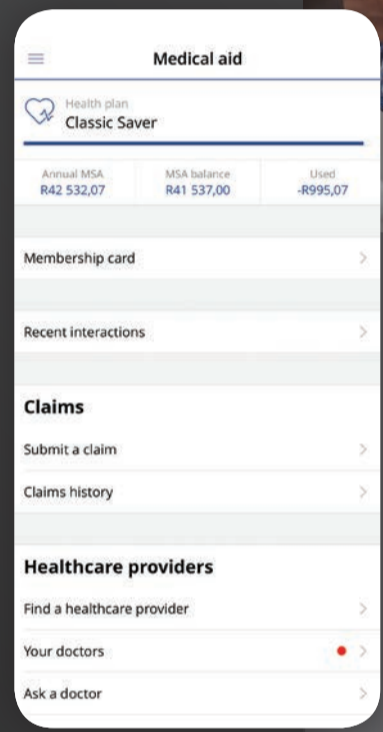
Enhanced DIGITAL HEALTHCARE experience for members

Intuitive app navigation

DISCOVERY APP

The Discovery app empowers members to manage their health through self-directed tools and provides the information they need to navigate the healthcare system more effectively. The Discovery app utilisation continues to increase and provides a seamless member experience.

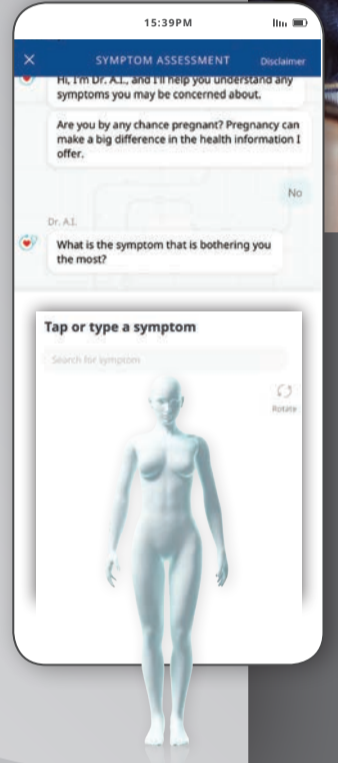
We have enhanced the navigation and functionality to make it easier for members to manage their health and their health plan, to find doctors, track claims and find important documents.



Improved access to quality care

AI-POWERED SYMPTOM CHECKER

The DrConnect functionality on the Discovery app uses state-of-the-art technology and now includes a new AI-powered symptom checker. This technology facilitates self-diagnosis and assists with triage by recommending when to seek emergency care, non-emergency medical care or self-care – so channelling people to credible content and a deeper understanding of the best steps to take next.



Empowering members with claims information

CLAIMS NOTIFICATION AND HOSPITAL SUMMARY

We have enhanced the Daily Claims Notification sent to members, which provides an overview of claims received, processed and how they are paid for, both out-of-hospital and after a hospital event. This notification has been intuitively designed to improve how this information is displayed to members.

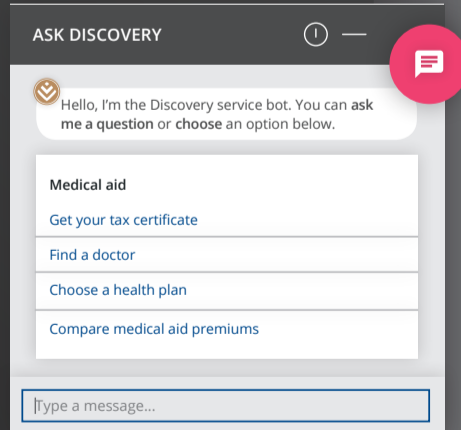


Real-time digital self-service

ASK DISCOVERY

Ask Discovery, our chat bot, available on the website makes it possible for members to get real-time answers to their product-related questions.

Our chat bot is continuously being enhanced and can now carry out a number of transactions related to a member's policy such as finding healthcare professionals, updating details and sending specific policy documents directly via email.



DISCOVERY HEALTH MEDICAL SCHEME

2020 CONTRIBUTIONS

Series	Plan	Contributions				Contributions to Medical Savings Account				Total contributions			
		Main member	Adult	Child**	Child**	Main member	Adult	Child**	Child**	Main member	Adult	Child**	Child**
Executive	Executive Plan	5 443	5 443	1 039	1 814	1 814	1 814	346	7 257	7 257		1 385	
	Classic Comprehensive	4 466	4 225	891	1 488	1 408	1 408	297	5 954	5 633		1 188	
Comprehensive	Classic Delta Comprehensive	4 022	3 808	802	1 340	1 269	1 269	267	5 362	5 077		1 069	
	Essential Comprehensive	4 253	4 022	857	750	709	709	151	5 003	4 731		1 008	
	Essential Delta Comprehensive	3 831	3 619	769	676	638	638	135	4 507	4 257		904	
	Classic Smart Comprehensive	4 327	3 994	1 378	No Medical Savings Account				4 327	3 994		1 378	
Priority	Classic Priority	2 861	2 256	1 145	953	752	752	381	3 814	3 008		1 526	
	Essential Priority	2 787	2 191	1 114	491	386	386	196	3 278	2 577		1 310	
Saver	Classic Saver	2 468	1 947	989	822	649	649	329	3 290	2 596		1 318	
	Classic Delta Saver	1 971	1 557	792	657	519	519	264	2 628	2 076		1 056	
	Essential Saver	2 223	1 667	891	392	294	294	157	2 615	1 961		1 048	
	Essential Delta Saver	1 773	1 339	712	312	236	236	125	2 085	1 575		837	
Smart	Coastal Saver	2 087	1 570	843	521	392	392	210	2 608	1 962		1 053	
	Classic Smart	1 954	1 542	781	No Medical Savings Account				1 954	1 542		781	
Core	Essential Smart	1 400	1 400	1 400	No Medical Savings Account				1 400	1 400		1 400	
	Classic Core	2 449	1 931	980	No Medical Savings Account				2 449	1 931		980	
	Classic Delta Core	1 960	1 545	784	No Medical Savings Account				1 960	1 545		784	
	Essential Core	2 104	1 577	846	No Medical Savings Account				2 104	1 577		846	
	Essential Delta Core	1 681	1 265	675	No Medical Savings Account				1 681	1 265		675	
	Coastal Core	1 946	1 462	774	No Medical Savings Account				1 946	1 462		774	
KeyCare*	KeyCare Plus 0 - 8 550	1 207	1 207	439	No Medical Savings Account				1 207	1 207		439	
	KeyCare Plus 8 551 - 13 800	1 659	1 659	468	No Medical Savings Account				1 659	1 659		468	
	KeyCare Plus 13 801+	2 450	2 450	656	No Medical Savings Account				2 450	2 450		656	
	KeyCare Core 0 - 8 550	949	949	245	No Medical Savings Account				949	949		245	
	KeyCare Core 8 551 - 13 800	1 183	1 183	292	No Medical Savings Account				1 183	1 183		292	
	KeyCare Core 13 801+	1 809	1 809	410	No Medical Savings Account				1 809	1 809		410	
	KeyCare Start 0 - 9 150	914	914	550	No Medical Savings Account				914	914		550	
KeyCare Start 9 151 - 13 800	1 538	1 538	601	No Medical Savings Account				1 538	1 538		601		
KeyCare Start 13 801+	2 394	2 394	650	No Medical Savings Account				2 394	2 394		650		

* Income verification will be conducted for the lower income bands. Income is considered as: The higher of the main member or registered spouse or partner's earnings, commission and rewards from employment; interest from investments; income from leasing of assets or property; distributions received from a trust, pension and/or provident fund; receipt of any financial assistance received from any statutory social assistance programme.

** We count a maximum of three children when we work out the monthly contribution and annual Medical Savings Account.