

Summary of benefits

PRIMARY HEALTHCARE

GP consultations and services	Flexicare Core	Flexicare Plus
Nurse consultations	Unlimited cover for primary care clinic network nurse consultations at 100% of the Agreed Rate.	No cover
Virtual consultations	Unlimited cover for virtual consultation via the Discovery website covered at 100% of the Agreed Rate. Virtual consultations available through the Online Platform without a nurse referral.	Unlimited cover for virtual consultation via the Discovery website covered at 100% of the Agreed Rate. Virtual consultations available through the Online Platform without a nurse referral.
Doctor consultations (via nurse referral or directly when using the Online Intercare Platform - for Flexicare Core members)	Unlimited cover for face-to-face network General Practitioner (GP) consultations at 100% of the Agreed Rate in the following instances: When a referral for a face-to-face visit is requested by the virtual GP during the primary care clinic visit. When you have a virtual GP consultation through the Intercare Online Platform and there is a need for a face- to-face GP referal.	Unlimited cover for network doctor (GP) consultations at 100% of the Agreed Rate. You can substitute your network doctor visit with a virtual consultation, meaning doctor visits can either be face-to-face or virtual. Risk management protocols apply. Ability to change an allocated network doctor twice per year

GP consultations and services	Flexicare Core	Flexicare Plus		
Specialist consultations	No cover	Cover for 1 out-of-hospital specialist consultations per member per year, at the agreed rate up to a R2,000 benefit limit: Consultations with a network specialist are covered up to R1,400 which includes a R1,300 consultation fee and a R100 SOAP note for referral where appropriate/needed. Members who are referred for radiology or pathology post the network specialist consultation, will access R600 for diagnostic tests with accumulation to the overall R2,000 benefit limit. If the treatment costs more than the benefit limit, the member will be responsible for the difference. Consultations with a non-network specialists will only be paid up to 100% of the Discovery Health Rate and member will be responsible for the difference. Members who are referred for radiology or pathology post the non-network specialist consultation, will be covered subject to the availability of funds. Members are required to pay for the specialist visit and radiology/pathology services out of pocket (at the time of the consult) and thereafter submit their claim to Discovery for reimbursement. If a member visits a specialist, network or non-network, and is not referred for radiology/pathology during the first visit and subsequently visits another specialist, both the consultation and referrals for radiology/pathology		
Dentistry	No cover	from the second visit will not be funded as the benefit would be depleted with the first consultation. Full mouth examination, preventive treatments, cleaning, scaling, polishing, restorations, treatment of pain and sepsis, infection control and extractions at a network		
Optometry (eye care)	No cover	dentist Cover for one eye test every year in the optometry network and one pair of glasses (no contact lenses) every 24 months		
Pathology (blood tests)	Only when referred by a network GP after a nurse consultation. 100% of the Agreed Rate. Limited to approved pathology codes. Must be requested by a network doctor (GP) and performed by a network pathologist	100% of the Agreed Rate. Limited to approved pathology codes. Must be requested by a network doctor (GP) and performed by a network pathologist		
Radiology (X-rays)	Only when referred by a network GP after a nurse consultation. 100% of the Agreed Rate for black-and-white X-rays and soft-tissue ultrasounds. Must be requested by a network doctor (GP) and performed by a network radiologist	100% of the Agreed Rate for black-and-white X-rays and soft- tissue ultrasounds. Must be requested by a network doctor (GP) and performed by a network radiologist		
Maternity benefits	Only when referred by a network GP after a nurse consultation. Unlimited network doctor visits throughout the pregnancy. Unlimited acute medicine in line with a defined medicine list prescribed or dispensed by a network doctor and collected from a network pharmacy. Essential blood and screening tests through a network pathologist when referred by a network doctor. Two ultrasound scans for each pregnancy at a network provider (first ultrasound between week 10 and 14, and the second between week 20 and 24)	Unlimited network doctor visits throughout the pregnancy. Unlimited acute medicine in line with a defined medicine list prescribed or dispensed by a network doctor and collected from a network pharmacy. Essential blood and screening tests through a network pathologist when referred by a network doctor. Two ultrasound scans for each pregnancy at a network provider (first ultrasound between week 10 and 14, and the second between week 20 and 24)		
HIV management	Access to HIV treatment, counselling and education. Cover for antiretroviral medicine, multivitamins and support	·		
COVID-19 testing	Only when referred by a network GP after a nurse consult For confirmed positive COVID-19 results: Cover for one positive COVID-19 test, with access to out-of-hospital management and appropriate supportive treatment, including diagnostic testing, basic chest X-rays and prescribed medicine	For confirmed positive COVID-19 results: Cover for one positive COVID-19 test, with access to out-of-hospital management and appropriate supportive treatment, including diagnostic testing, basic chest X-rays and prescribed medicine		

Procedural treatment		Flexicare Core	Flexicare Plus		
Medical procedures in doctor's room only	Only in an network GP's rooms. Cover for a defined list of medical procedures that can be performed in a network doctor's rooms, such as biopsies, wound care and stitching		Cover for a defined list of medical procedures that can be performed in an network GP's rooms, such as biopsies, wound care and stitching		
	Code	Description	Code	Description	
	0206	Intravenous treatment, intravenous infusions, insertion of cannula – chargeable once every 24 hours	1228	General practitioner's fee for taking of an ECG only: Without effort: ½ (item 1232)	
	0244	Repair of nail bed	1229	General practitioner's fee for taking of an ECG only: With or without effort: ½ (item 1233)	
	0255	Drainage of abscess	1232	Electrocardiogram: Without effort	
	0259	Removal of foreign body	1233	Electrocardiogram: With and without effort	
	0300	Stitching of wound	1234	Effort electrocardiogram with the aid of a spe cial bicycle ergometer, monitoring apparatus and availability of associated apparatus	
	0301	Stitching of additional wound	1235	Multistage treadmill test	
	0307	Excision and repair	1236	Electrocardiogram without effort: Under 4 years old	
	0308	Each additional small procedure done at the same time	1996	Bladder catheterisation: Male (not at operation)	
	0316	Fine-needle aspiration for soft tissue (all areas)	1997	Bladder catheterisation: Female (not at operation)	
	0317	Aspiration of cyst or tumour	2133	Circumcision: Clamp procedure	
	0321	Biopsy or excision of cyst, benign tumour, aberrant breast tissue, duct papilloma	2137	Circumcision: Surgical excision other than by clamp or dorsal slit, any age	
	0887	Limb cast (excluding aftercare)	2139	Circumcision: Dorsal slit of prepuce (independent procedure)	
	0922	Removal of foreign bodies requiring incision	3615	Routine obstetric ultrasound at 10 to 20 week gestational age, preferable at 10 to 14 weeks gestational age to include nuchal translucency assessment	
	1136	Nebulisation (in rooms)	3617	Routine obstetric ultrasound at 20 to 24 week to include detailed anatomical assessment	
	1192	Peak expiratory flow only			
Medicine					
Day-to-day medicine	part of the network	Medication can be prescribed and dispensed by the nurse as part of the primary care clinic consultation. A referral to the network GP will be done by the nurse in instances where the medication can only be prescribed by a GP		Cover for medicine on our list if a network doctor prescribe it or gives it to you	
		cation must be on the medicine list (formulary) for dicine and will be available without a co-payment			
Over-the-counter (OTC) medicine		Cover for self-medication on our list, up to R160 per policy per year, up to R80 bi-annual limit, at a network pharmacy		r self-medication on our list, up to R115 per quarte mum of R460 per member per year, at a network y	
Chronic medicine	Cover for HIV medicine on the defined medicine list at a network pharmacy			r chronic medicine on the defined medicine list for ic conditions (including HIV) at a network pharmac	
Screening and prevention					
Flu vaccine	Cover for a flu vaccine once a year from a network pharmacy				
Wellness screening	Cover for one wellness screening per year at a network pharmacy or wellness day. Screening includes blood pressure, blood glucose (blood sugar), cholesterol and body mass index (BMI). You can have an HIV test done at the same time				

You will not need to pay for approved treatments received from a network provider. However, if you use a provider that is not a part of the network, or if an unapproved treatment is provided, you will be responsible for 100% of the costs.

Discovery Emergency Cover



This extensive emergency cover pairs perfectly with the comprehensive primary healthcare benefits accessed through the Flexicare product, ensuring employees have cover for their day-to-day healthcare needs and financial certainty in the unfortunate case of an accident, emergency or unforeseen hospital admission.

Discovery Emergency Cover

OPTIONAL DISCOVERY EMERGENCY COVER, OFFERED BY DISCOVERY INSURE

	EMERGENCY CORE	EMERGENCY PLUS	EMERGENCY MAX
Emergency Cover package detail	Cover for emergency healthcare services, including casualty and in-hospital treatment, for a broad range of accidental and traumatic events	Cover for accidents and trauma, the stabilisation and treatment of any emergency condition in a casualty facility, including admission and treatment for heart attacks and strokes.	Cover for accidents and trauma, the stabilisation and treatment of any emergency condition in a casualty facility and the admission and treatment of a defined list of emergency conditions including heart attacks and strokes.
Conditions covered	Cover for casualty and in-hospital treatment for the following accidental and traumatic events: 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 car accident or an injury at work.	Cover for the in-hospital treatment of defined accidental and traumatic events. Cover for any medical emergency condition in a casualty facility, including hospital admission for the treatment of heart attacks and strokes R200 co-payment when using network facility R250 co-payment when using a non-network facility This co-payment will be refunded if the claimant is diagnosed with a heart attack or stroke	 Cover for the in-hospital treatment of defined accidental and traumatic events. Cover for any medical emergency condition in a casualty facility, including hospital admission for the treatment of heart attacks and strokes. The casualty co-payment of R200 at a network facility or R250 outside of the network, will be refunded if the claimant is diagnosed with one of the qualifying emergency in-hospital conditions. Admission and treatment for the following additional emergency conditions: Acute appendicitis, acute asthma, ectopic pregnancy, acute inflammation of gall bladder, fit or seizure, acute pneumonia, kidney stones, acute renal failure, pulmonary embolism.
Differentiating benefits	Discovery Emergency Core provides affordable cover for the unforeseen costs of private ambulance transport and emergency medical treatment for trauma and accidents.	Discovery Emergency Plus ensures access to quality healthcare at a private casualty facility for swift evaluation and assistance. Employees have cover for emergency transport and treatment for defined trauma conditions, including admission for heart attacks and strokes.	Discovery Emergency Max provides ultimate peace of mind for a defined list of trauma conditions, assessment and stabilisation in casualty as well as in-hospital cover for 9 of the most likely high-cost emergency admissions facing the workforce.
Cover limits	R400,000 and R1million limit	R400,000 and R1million limit	R400,000 and R1million limit, a sublimit of R400,000 will apply to the nine defined conditions.
Pre and post emergency event support		Counselling Take-home essions medicine	Voucher for groceries or personal care items

Funeral cover

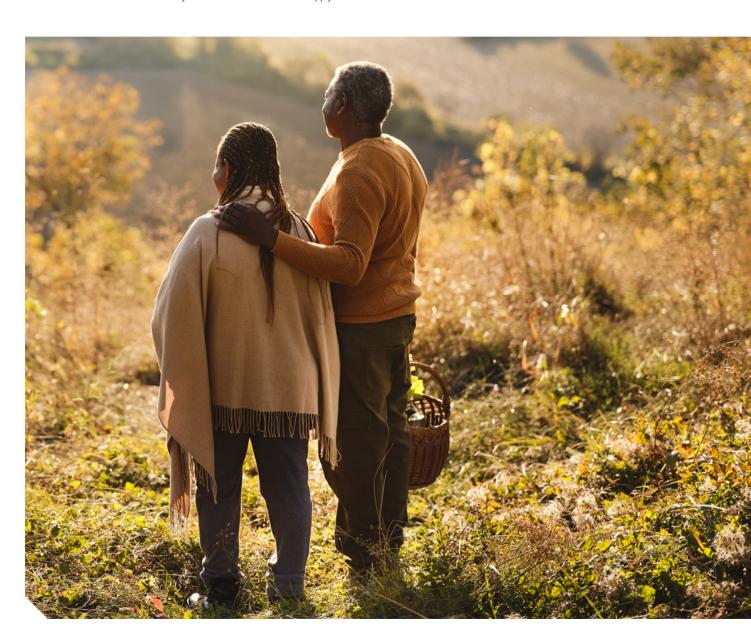
OPTIONAL FUNERAL BENEFIT OFFERED BY DISCOVERY GROUP RISK (UNDERWRITTEN BY DISCOVERY LIFE)

Discovery Life provides your employees with funeral cover. This funeral cover provides up to R5,000 for the employee, up to three spouses, and five children younger than 21 years.

We only cover employees and dependants who are younger than 65 years. The dependants must be active on Flexicare.

Family funeral benefit amount		
Main member	R5,000	
Spouse aged from 16 to below 65	R5,000	
Child aged 15 to below 21	R5,000	
Child aged 6 to below 15	R2,500	
Child aged 0 to child aged below 6	R1,500	
Stillborn (death of foetus after 26 weeks)	R620	

^{*}Child dependants over the age of 21 do not have access to funeral cover unless they are a full-time student under the age of 24 or incapacitated and unable to maintain themselves due to a disability. Benefit terms and conditions apply.



ACCESSING YOUR BENEFITS

FINDING A HEALTHCARE -**PROVIDER**

Visit www.discovery.co.za to find a healthcare provider in our network

VISITING A HEALTHCARE **PROVIDER**

When you visit your doctor, pharmacy, dentist or optometrist, you need to take your your digital or physical membership card and either your ID, passport or driving licence with you so that your healthcare provider can confirm that you are a Flexicare member. Confirm with your healthcare provider that your treatment or medicine is on our list of benefits.

ACCESSING MATERNITY COVER

To access your maternity benefits you need to visit your doctor(GP) first, they will refer for the necessary blood tests or scans and will be able to prescribe your day-to-day medicine.



Scan this code below to access your Flexicare digital tools and support



- USSD service: *120*DISCO# or *120*34726#
- Call: 0860 44 47 79
- Email: flexicare@discovery.co.za
- WhatsApp us on 0860 444 779 and get in touch whenever you need information or have questions on Flexicare.
- Claims can be submitted to: claims@discovery.co.za

If you have any complaints, please email flexicareescalations@discovery.co.za.

If you still have concerns, you can contact Discovery's Group Compliance.

■ Email: compliance@discovery.co.za.

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Add us on 0860 44 47 79 and get in touch questions about Flexicare.



CALL CENTRE

0860 44 47 79



Underwritten by Auto&General Flexicare 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. Flexicare and Auto&General Accident Cover is administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07 an authorised financial services provider and underwritten by Auto & General Insurance Company Limited, registration number 1973/016880/06, a licensed non-life insurer and financial services provider. Terms, conditions and limits apply.

Discovery Vitality (Proprietary) Limited, registration number: 1999/007736/07. Terms, conditions and limits apply.

Discovery Emergency Cover is administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07 an authorised financial services provider. Terms, conditions and limits apply. Discovery Emergency Cover is a non-life insurance policy, underwritten by Discovery Insure Ltd, registration number 2009/011882/06, a licensed non-life insurer and an authorised financial services provider.

The Funeral Benefit is a life insurance policy, underwritten by Discovery Life Limited. Registration number 1966/003901/06, a licensed life insurer and an authorised financial services and registered credit provider, NCR registration number NCRCP3555. Flexicare is a separate non-life insurance policy and is not conditional on the purchase of a Funeral Benefit policy.