

EXTERNAL MEDICAL ITEMS BENEFIT

DISCOVERY HEALTH MEDICAL SCHEME
2022





Overview

This document tells you more about how the External Medical Items (EMI) Benefit works and how to apply for additional cover if you have a severe, complex condition that requires additional External Medical Items (EMI).

About some of the terms we use in this document

There may be some terms we refer to in the document that you may not be familiar with. Here are the meanings of these terms.

TERMINOLOGY	DESCRIPTION
Above Threshold Benefit (ATB)	<p>Available on the Executive, Comprehensive and Priority plans</p> <p>Once the day-to-day claims you have sent to us add up to the Annual Threshold, we pay the rest of your day-to-day claims from the Above Threshold Benefit (ATB), at the Discovery Health Rate (DHR) or a portion of it, where applicable. The Executive and Comprehensive plans have an unlimited ATB, and the Priority plans have a limited ATB.</p>
Annual Threshold	<p>Available on the Executive, Comprehensive and Priority plans</p> <p>We set the Annual Threshold amount at the beginning of each year. The number and type of dependants (spouse, adult or child) on your plan will determine the amount.</p> <p>The Annual Threshold is an amount that your claims need to add up to before we pay your day-to-day claims from the Above Threshold Benefit (ATB).</p>
Discovery Health Rate (DHR)	This is a rate we pay for healthcare services from hospitals, pharmacies, healthcare professionals and other providers of relevant health services.
External Medical Item (EMI)	An External Medical Item (EMI) acts as a substitute or assists parts of the body that are missing or non-functional. Use of these items is usually recommended by a variety of medical professionals such as medical doctors, physiotherapists, occupational therapist, prosthetist and orthotists as well as other allied healthcare professionals.
Home Monitoring Device Benefit	This benefit gives you access to a range of essential and registered home monitoring devices for certain chronic and acute conditions. Approved cover for these devices will not affect your day-to-day benefits.
Medical Savings Account (MSA)	<p>Available on the Executive, Comprehensive, Priority and Saver plans</p> <p>The Medical Savings Account (MSA) is an amount that is allocated to you at the beginning of each year or when you join the Scheme. You pay this amount back in equal portions as part of your monthly contribution. We pay your day-to-day medical expenses such as GP and specialist consultations, acute medicine, radiology and pathology from the available funds allocated to your MSA. Any unused funds will carry over to the next year. Should you leave the Scheme or change your plan partway through the year and have used more of the funds than what you have contributed, you will need to pay the difference to us.</p>

The External Medical Items (EMI) Benefit at a glance

We pay for external medical items from your Medical Savings Account (MSA) and Above Threshold Benefit (ATB) subject to your available funds and subject to the overall annual External Medical Items (EMI) limit, which depends on your chosen health plan.

The Classic Smart Comprehensive Plan does not have a Medical Savings Account (MSA) and so there is no benefit for external medical items until you reach the Annual Threshold. After this, we pay claims from the Above Threshold Benefit (ATB), up to the overall annual External Medical Items (EMI) limit.

We pay for external medical items up to an annual limit on the Executive, Comprehensive and Priority Plans

External medical items are funded at 100% of the Discovery Health Rate (DHR) up to an overall annual limit, depending on the chosen health plan. Please refer to benefits available on the Benefits available for your plan section to see the limits applicable to your health plan.



External medical items with a frequency limit

Certain categories of external medical items have a frequency limit. The limit will be prorated if a beneficiary joins after 1 January.

PRODUCT CATEGORY	FREQUENCY LIMIT
APAPs (Automatic Positive Airway Pressure) CPAPs (Continuous Positive Airway Pressure) VPAPs (Variable Positive Airway Pressure)	One every three (3) years
Apnoea and movement monitors	One per year
Blood pressure monitors	One per year
Breast pump	One per year
Commode	One per year
Crutches	Two individual crutches or one pair per year
Glucometers	One per year
Hoist	One every two (2) years
Insulin pump (entry level and sensor augmented pumps)	One every four (4) years
Nebulisers	One per year
Portable oxygen concentrator	One every three (3) years
TytoHome device	One every five (5) years
Walkers	One every three (3) years
Wheelchairs, scooters and other specialised appliances for members with physical disability	One every three (3) years

Preferred suppliers for external medical items

The table below contains a list of preferred suppliers for selected external medical items.

Please note:

- This list is subject to change. Up to date benefit guides are available at all times on www.discovery.co.za under Medical Aid > Manage your health plan > Find important documents and certificates. Should you be required to contact one of the below-mentioned service providers, please confirm that the relevant service provider is still a preferred supplier for Discovery Health Medical Scheme.
- Not all products supplied by these suppliers are preferred items. Please contact us for the specific list of preferred products. Claims for non-preferred products, purchased from a preferred or non-preferred provider will be paid up to the applicable Discovery Health Rate (DHR). The DHR for non-preferred items may be lower than the purchase price of these items. If you are purchasing a non-preferred item such as a breathing device, walker, wheelchair, scooter or other specialised mobility appliance, insulin pumps please contact us to confirm the DHR that is applicable.



PREFERRED ITEMS	NETWORK PROVIDERS	NETWORK PROVIDER CONTACT DETAILS
Mobility and specialised appliances: <ul style="list-style-type: none"> • Standard wheelchair • Lightweight wheelchair • Motorised wheelchair • Specialised appliances such as customised wheelchairs • Activity chairs • Gait trainers • Buggies • Standing frames • Scooters • Walkers 	CE Mobility	086 023 6624
	Chairman Industries	011 624 1223/1224
	Shonaquip	021 797 8239
	MedOp (Practice number: 0057940)	011 827 5893
Breathing devices: <ul style="list-style-type: none"> • APAP machines • CPAP machines • VPAP/BI Level machines 	Ecomed	011 955 5710
	VitalAire	086 111 4578
	Oxygen and General	011 234 7373
	SSEM Mthembu	011 430 7000
	HealthySleep	012 492 6275
	Airo Health Care	011 463 0361
	Breathing devices through Resmed distributors:	
	Sleep Easy Equipment – Johannesburg	011 465 7351/6939
	Sleepnet – Cape Town, Durban and part of Johannesburg	021 551 0325
	Resqbreeze – Johannesburg	083 510 5179
	Netcocare – Cape Town	0861 275 337
	Fountains Circle Medical – Pretoria	012 362 4142/6009
	CPAP Essentials/The CPAP Shop	012 346 0309
	Garden Route Sleep Lab – Mossel Bay	083 262 2307
	Jan Le Roux Pieterse – Bloemfontein	083 324 9151
	SK & A Medical – Mpumalanga	084 707 0008
	Maries CPAP Solutions - Pietermaritzburg	033 394 6456
	Medisleep solutions Bloemfontein	082 572 9899
Portable oxygen concentrator	Ecomed	011 955 5710
	VitalAire	086 111 4578
	Airo Health Care	011 463 0361



PREFERRED ITEMS	NETWORK PROVIDERS	NETWORK PROVIDER CONTACT DETAILS
	Oxygen and General	011 234 7373
Purchase insulin pumps	Roche Diabetes Care	086 069 7867
	Medtronic	012 426 4000
Rental Insulin pumps	Vitalaire	086 111 4578 www.vitalaire.co.za
TytoHome	Southern Rx	086 074 2761 (or after hours) www.southernrx.co.za
	MedXpress	www.discovery.co.za or choose Medical aid > Find a healthcare provider on the Discovery app.
	SSEM Mthembu	011 430 7000

External Medical Items (EMI) Extender Benefit

If you are on the Executive or a Comprehensive Plan you can apply for additional cover from the External Medical Items (EMI) Extender Benefit. The External Medical Items (EMI) Extender benefit gives members with specific, severe, complex medical conditions extended cover for clinically appropriate and cost effective external medical items as determined by Discovery Health Medical Scheme, subject to the Scheme's guidelines and managed care criteria.

The External Medical Items (EMI) Extender Benefit is only available after you reach your overall annual External Medical items (EMI) benefit limit and you apply for cover. The benefit covers a defined list of external medical items to be obtained from a preferred supplier. Items not on the defined list will not be covered from the EMI Extender Benefit.

The frequency limit stated above will also apply to items covered from the EMI Extender Benefit.

The application form must be completed by your treating healthcare professional e.g. physician or neurologist and must be accompanied by a physical assessment performed by an occupational therapist or physiotherapist. We also need a quotation of the required external medical item.

We will consider applications for extended cover for the below conditions and products categories. All cases will be reviewed on individual merit and on a case-by-case basis, with the severity of the condition and disability taken into account:

Qualifying conditions:

- Hemiplegia or Paraplegia
- Quadriplegia or Tetraplegia
- Cerebral Palsy
- Motor Neuron Disease
- Parkinson's disease (and other movement disorders of the basal ganglia)
- Connective tissue disorder
- Severe injuries resulting in severe disability
- Spinal-muscular atrophy
- Muscular Dystrophy

Product categories covered:

- Wheelchairs
- Standard wheelchairs
- Lightweight wheelchairs
- Motorised wheelchairs
- Specialised appliances
- Wheelchair accessories e.g.: cushions, arm rests, foot rests, side panels etc.

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Discovery Health Medical Scheme, registration number 1125, is regulated by the Council for Medical Schemes and administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07, an authorised financial services provider. Find a healthcare provider, Discovery MedXpress and Discovery app are brought to you by Discovery Health (Pty) Ltd; registration number 1997/013480/07, an authorised financial services provider and administrator of medical schemes.



- Hoists
- Posture support appliances i.e. Standing frames
- Scooters

Preferred suppliers

- CE Mobility - 086 023 6624
- Chairman Industries - 011 624 1223 or 1224
- MedOp - 011 827 5893
- Shonaquip - 021 797 8239

How we pay accounts from the External Medical Items (EMI) Extender Benefit

When your application is approved for the External Medical Items (EMI) Extender Benefit we will fund your claims up to the Discovery Health Rate (DHR) for approved items. If your healthcare provider charges more than the Discovery Health Rate (DHR), you will need to pay the difference.

How to apply for the External Medical Items (EMI) Extender Benefit

You can complete the External Medical Items Extender Benefit application form available at www.discovery.co.za under Medical aid > Manage your health plan > Find important documents and certificates. The completed application form can be sent to us by:

- Email: Clinicalhelp@discovery.co.za
- Post: Discovery Health, PO Box 784262, Sandton, 2146.

For more information on the External Medical Items (EMI) Extender Benefit, please visit www.discovery.co.za.

Benefits available for your plan type

EXECUTIVE PLAN

External medical items are covered from available funds allocated to your Medical Savings Account (MSA) and the Above Threshold Benefit (ATB), subject to the limit of R60 550 per family per year. These are not separate benefits. Limits apply to claims paid from your Medical Savings Account (MSA), paid by you and paid from the Above Threshold Benefit (ATB). If you join the Scheme after January, your allocation will be prorated. You will not get the full R60 550, because it is calculated by counting the remaining months of the year.

You will have to pay claims for external medical items if the funds allocated to your Medical Savings Account (MSA) are used up before you reach the Annual Threshold. Point-of-care medical devices not approved for cover from the Home Monitoring Device Benefit are paid at 100% of the Discovery Health Rate (DHR) from the available funds allocated to your Medical Savings Account (MSA) and will accumulate and pay up to 75% of the DHR from the Above Threshold Benefit (ATB), subject to the annual External Medical Items limit. Please refer to [Connected Care for Healthcare at Home benefit guide](#) for more information on the Home Monitoring Device Benefit.

The External Medical Items (EMI) Extender Benefit is paid from the Hospital Benefit and is available after the annual External Medical Item (EMI) Benefit limit has been reached and we approved additional cover.

COMPREHENSIVE SERIES

On the [Classic Comprehensive and Classic Delta Comprehensive plans](#) external medical items are covered from the available funds allocated to your Medical Savings Account (MSA) and the Above Threshold Benefit (ATB), subject to the limit of R60 550 per family per year. If you join the Scheme after January, your allocation will be prorated. You will not get the full R60 550, because it is calculated by counting the remaining months of the year.

You will have to pay claims for external medical items if the funds allocated to your Medical Savings Account (MSA) are used up before you reach the Annual Threshold. Point-of-care medical devices not approved for cover from the Home Monitoring Device Benefit are paid at 100% of the Discovery Health Rate (DHR) from the available funds allocated to your Medical Savings Account (MSA) and will accumulate and pay up to 75% of the DHR from the Above Threshold Benefit (ATB), subject to the annual External Medical Items (EMI) benefit limit.



On the [Classic Smart Comprehensive Plan](#), you have to pay for external medical items until you reach the Annual Threshold. We will pay for external medical items once you reach your Annual Threshold from the Above Threshold Benefit (ATB) subject to the External Medical Items (EMI) limit. If you join the Scheme after January, you will not get the full R60 550, because it is calculated by counting the remaining months of the year.

Point-of-care medical devices not approved for cover from the Home Monitoring Device Benefit will accumulate and pay up to 75% of the DHR from the Above Threshold Benefit (ATB). Point-of-care medical devices not approved for cover from the Home Monitoring Device Benefit are paid at 100% of the Discovery Health Rate (DHR) from the available funds allocated to your Medical Savings Account (MSA) and will accumulate and pay up to 75% of the DHR from the Above Threshold Benefit (ATB), subject to the annual External Medical Items (EMI) benefit limit. Please refer to [Connected Care for Healthcare at Home benefit guide](#) for more information on the Home Monitoring Device Benefit.

The External Medical Items (EMI) Extender Benefit is paid from the Hospital Benefit and is available after the annual External Medical items (EMI) Benefit limit has been reached and we approved additional cover.

On the [Essential Comprehensive and Essential Delta Comprehensive plans](#), external medical items are covered from available funds allocated to your Medical Savings Account (MSA) and Above Threshold Benefit (ATB), subject to the limit of R40 550 per family per year. If you join the Scheme after January, your allocation will be prorated. You will not get the full R60 550, because it is calculated by counting the remaining months of the year.

You will have to pay claims for external medical items if the funds allocated to your Medical Savings Account (MSA) are used up before you reach the Annual Threshold. Point-of-care medical devices not approved for cover from the Home Monitoring Device Benefit are paid at 100% of the Discovery Health Rate (DHR) from the available funds allocated to your Medical Savings Account (MSA) and will accumulate and pay up to 75% of the DHR from the Above Threshold Benefit (ATB), subject to the annual External Medical Items (EMI) benefit limit.

The External Medical Items (EMI) Extender Benefit is paid from the Hospital Benefit and is available after the annual External Medical items (EMI) Benefit limit has been reached and we approved additional cover.

PRIORITY SERIES

On the [Classic Priority plan](#), external medical items are covered from the available funds in your Medical Savings Account (MSA) and limited Above Threshold Benefit (ATB), subject to the External Medical Items (EMI) limit of R40 550 per family per year and the available funds in the limited Above Threshold Benefit (ATB). If you join the Scheme after January, your allocation will be prorated. You will not get the full R60 550, because it is calculated by counting the remaining months of the year.

On the [Essential Priority plan](#), External Medical Items are covered from available funds in your Medical Savings Account (MSA) and limited Above Threshold Benefit (ATB), subject to the External Medical Items (EMI) limit of R27 250 per family per year and the available funds in the limited Above Threshold Benefit (ATB). If you join the Scheme after January, your allocation will be prorated. You will not get the full R60 550, because it is calculated by counting the remaining months of the year.

Point-of-care medical devices not approved for cover from the Home Monitoring Device Benefit are paid at 100% of the Discovery Health Rate (DHR) from the available funds allocated to your Medical Savings Account and will accumulate and pay up to 75% of the DHR from the Above Threshold Benefit (ATB), subject to the annual External Medical Items (EMI) benefit limit. Please refer to [Connected Care for Healthcare at Home benefit guide](#) for more information on the Home Monitoring Device Benefit.

SAVER SERIES

External medical items are covered from the available funds allocated to your Medical Savings Account (MSA).



SMART SERIES

Not covered on these plans.

CORE SERIES

Not covered on these plans.

KEYCARE SERIES

Not covered on these plans.



Contact us

Tel (members): 0860 99 88 77, Tel (health partners): 0860 44 55 66

Go to www.discovery.co.za to Get Help or ask a question on WhatsApp. Save this number 0860 756 756 on your phone and say "Hi" to start chatting with us 24/7.

PO Box 784262, Sandton, 2146. 1 Discovery Place, Sandton, 2196.

Complaints process

Discovery Health Medical Scheme is committed to providing you with the highest standard of service and your feedback is important to us. The following channels are available for your complaints and we encourage you to follow the process:

1 | STEP 1 – TO TAKE YOUR QUERY FURTHER:

If you have already contacted the Discovery Health Medical Scheme and feel that your query has still not been resolved, please complete our online complaints form on www.discovery.co.za. We would also love to hear from you if we have exceeded your expectations.

2 | STEP 2 – TO CONTACT THE PRINCIPAL OFFICER:

If you are still not satisfied with the resolution of your complaint after following the process in Step 1 you are able to escalate your complaint to the Principal Officer of the Discovery Health Medical Scheme. You may lodge a query or complaint with Discovery Health Medical Scheme by completing the online form on www.discovery.co.za or by emailing principalofficer@discovery.co.za.

3 | STEP 3 – TO LODGE A DISPUTE:

If you have received a final decision from Discovery Health Medical Scheme and want to challenge it, you may lodge a formal dispute. You can find more information of the Scheme's dispute process on the website.

4 | STEP 4 – TO CONTACT THE COUNCIL FOR MEDICAL SCHEMES:

Discovery Health Medical Scheme is regulated by the Council for Medical Schemes. You may contact the Council at any stage of the complaints process, but we encourage you to first follow the steps above to resolve your complaint before contacting the Council. Contact details for the Council for Medical Schemes: Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch-Hazel Avenue, Eco Park, Centurion 0157 | complaints@medicalschemes.co.za | 0861 123 267 | www.medicalschemes.co.za