

UPGRADING YOUR HEALTH PLAN DURING THE YEAR

DISCOVERY HEALTH MEDICAL SCHEME

2022





Upgrading your health plan during the year:

Where we allow upgrades

Discovery Health Medical Scheme (DHMS or the Scheme) allows for certain plan movements at any time during the year. Although we do not allow moving to a higher plan during the year, there are exceptional circumstances where we may consider these requests. Please note, however, if there is any break in membership, the change will not be seen as a plan change, but considered a new application. In these cases, we may ask for medical information in order to determine or apply underwriting.

We allow movement to a higher plan in the following scenarios:

Year-end revision

 Members may move to any health plan during the year-end revision process, which takes place from October to December. These changes take effect on 1 January each year.

Marriage or divorce

When a member of the Scheme marries another member of the Scheme, we allow movement to any plan, even if it is a higher plan. This only applies if they are on separate memberships, in which case one may change to the other's health plan. The requirements for such a change are:

- A marriage certificate and request for the change submitted within three months of the marriage date.
- The effective date of the upgrade must be within three months of marriage.

Note: If there is a customary marriage, there must be proof of marriage provided e.g. Affidavit

When a member gets divorced and the spouse can no longer be a dependant on the main member's health plan, the spouse may change to his or her own preferred health plan. The requirements for such a change are:

- A new application, submitted with the legal documents declaring the divorce.
- The date of divorce must be within three months of the new application.
- Copies of the dissolution certificates for Civil Unions and Customary Marriage certificates will be accepted as proof of divorce.
- A letter from the religious leader confirming the dissolution of a religious marriage (e.g. Muslim marriage) will be accepted as proof of divorce.

Employer subsidy or employer groups

- In situations where both spouses or partners receive an employer subsidy, being on separate memberships may make financial sense. However, if one of the parties no longer has access to the employer subsidy, they may transfer to the other party's membership, regardless if the movement is to a higher plan.
- A spouse is the dependant to whom the main member is married or is in a union recognised under any law or custom or enjoys a relationship similar to that of legally married spouses.
- A partner is a person with whom the member has a committed and serious relationship similar to a marriage or recognised as a union or partnership by law, based on objective criteria of mutual dependency and a shared and common household, irrespective of the gender of either party.
- The spouse or partner must send a letter from the employer's Human Resources department, stating that they previously had access to the benefit and that it is no longer available. This could be because of resignation or retrenchment, or because the employer no longer offers the subsidy.
- It is the individual's responsibility to give reasonable proof. The request and start date must be submitted within three months of the date the subsidy ended.
- If a member belongs to an employer group that only offers subsidies for certain plan types and he or she changes employment, we will allow a transfer and a plan upgrade to a higher plan. However, this



- can only happen as soon as we have received details about the subsidy and change of employment. The member has one month from the effective date of the transfer to change their plan.
- If an existing member of the Scheme transfers to an employer group (more than ten employees) as a new employee where it is compulsory to join DHMS, the member may change their health plan. The member has one month from the effective date of the transfer to change their plan.

Becoming an adult dependant

- An adult dependant with cover on a parent's health plan may change and become a main member on their own health plan at any time once financially independent.
- An adult dependant is defined in the Scheme Rules as a person other than the spouse or life partner of the member, and who is:
 - Wholly or partly dependent on the member for financial support
 - Registered in terms of the Scheme Rules as an adult dependant
 - The member's child and aged 21 years or older.



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 giving you the highest standard of service and your feedback is important to us. You have the following channels 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 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 can escalate your complaint to the Principal Officer of Discovery Health Medical Scheme. You can 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 can lodge a formal dispute. You can find more information of the Scheme's dispute process on our website.

4 STEP 4 - TO CONTACT THE COUNCIL FOR MEDICAL SCHEMES:

The Council for Medical Schemes regulates Discovery Health Medical Scheme. You can 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 Office Park, 420 Witch-Hazel Avenue,
 Eco Park, Centurion 0157
- <u>complaints@medicalschemes.co.za</u>
- 0861 123 267
- www.medicalschemes.co.za