



Day1 Health (Pty) Ltd is an authorised Financial Services Provider (FSP 11319), underwritten by African Unity Life Ltd. (2003/016142/06), a licensed life insurer and an authorised Financial Services Provider - FSP 8447.

The Day1 Health Plan is demarcated by CMS. This product is a Medical Insurance Product and not a Medical Aid registered by the Council for Medical Schemes DM1053A.

For more information regarding this demarcated product please visit <https://www.medicalschemes.co.za/insurers/>

VALUE PLUS PLAN COMPREHENSIVE

MEDICAL COVER
from
R665 pm



When you're looking for health insurance, it's a good idea to take a look at all the angles. You want health cover that complements your lifestyle and helps you get the best care possible compatible with your financial needs. **That's where Day1 Health comes in.**

KEY BENEFITS

Doctor Visits | Private Hospital Benefits | Ambulance

VALUE PLUS PLAN

COMPREHENSIVE

DAY TO DAY BENEFITS



DOCTOR VISITS

Consultations available via a registered Day1 Health Network Provider. Limited to 5 doctor visits per member per annum. A Pay-as-you-Go Virtual Doctor consultation platform is available for members to utilise thereafter. Pre-authorisation is required. A 1 month waiting period applies.



SPECIALIST BENEFIT

Specialist Benefit of up to R1000 per family per annum. Subject to pre-authorisation and referral from a Day1 Health Network GP. A 3 month waiting period applies.



ACUTE MEDICATION

Acute medication covered according to the Day1 Health formulary. Linked to the doctor consultation dispensed by the Day1 Health Network GP or obtained on script from a Network Pharmacy. A 1 month waiting period applies.



CHRONIC MEDICATION

Chronic medication covered according to the Day1 Health formulary. Chronic Medication is limited to R500 per member per month and up to R6000 per member per annum. A 3 month waiting period applies on chronic medication for unknown conditions and a 12 month waiting period on pre-existing conditions. All chronic medication is subject to pre-authorisation.



RADIOLOGY

Basic radiology according to the Day1 Health formulary via a Day1 Health network GP. Black and white diagnostic x-rays only. A 1 month waiting period applies.



PATHOLOGY

Basic diagnostic blood tests on referral by a Day1 Health Network GP and subject to a list of basic pathology tests approved by Day1 Health. A 1 month waiting period applies.



BASIC DENTISTRY

Basic treatment includes preventative cleaning, fillings, extractions and emergency pain and sepsis control via a Day1 Health Network Dentist. 2 visits per member per annum. Pre-authorisation is required for each visit. A 3 month waiting period applies.



OPTOMETRY (ISO LESO OPTICS)

One eye test and one set of glasses every 24 months per the specific Iso Leso Optics agreed protocol range. A 12 month waiting period applies.



OUT-OF-AREA VISITS

In the event that you cannot see your Network GP, the Plan will allow 3 "out of area" visits per family per annum to an alternative Network GP or GP of your choice, subject to pre-authorisation. A 1 month waiting period applies.

| SINGLE MEMBER | PREMIUM | COUple | PREMIUM |
|---------------------|---------|---------------------|---------|
| MEMBER ONLY | R 665 | COUPLE | R 1131 |
| MEMBER + 1 CHILD | R 931 | COUPLE + 1 CHILD | R 1397 |
| MEMBER + 2 CHILDREN | R 1197 | COUPLE + 2 CHILDREN | R 1663 |
| MEMBER + 3 CHILDREN | R 1463 | COUPLE + 3 CHILDREN | R 1929 |
| MEMBER + 4 CHILDREN | R 1729 | COUPLE + 4 CHILDREN | R 2195 |



FSP Number 11319 CMS Ref: DM1074

CONTACT 0876 100 600

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TERMS AND CONDITIONS:

Waiting periods per benefit | Maximum age limit entry on standard terms and conditions is 64 |

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Day1 Health complies with the principles of open enrolment, community rating and cross-subsidisation and does not discriminate or refuse membership on the basis of race, age, gender, marital status, ethnic or social origin, sexual orientation, pregnancy, disability, state of health, geographical location or any other means of discrimination.

HOSPITAL BENEFITS

IN-HOSPITAL ILLNESS BENEFIT

Covers up to R10,000 after the first 24 Hours in hospital, up to R 10,000 for the second day in hospital, up to R 10,000 for the third day in hospital. Thereafter R 1,500 per day up to a maximum of 21 days. A 3 month waiting period applies and a 12 month pre-existing conditions exclusion applies.

| INHOSPITAL ILLNESS BENEFITS | AMOUNT PAYABLE |
|-------------------------------------------------------------------------------------------|--------------------------------------------------|
| 1st Day in Hospital Not less than 24 hours from time of admission to time of discharge | Up to R 10 000.00 |
| 2nd Day in Hospital Payable in units of R2 500.00 for every quarter day (6 hours) | Up to R 10 000.00 payable in units of R 2 500.00 |
| 3rd Day in Hospital Payable in units of R2 500.00 for every quarter day (6 hours) | Up to R 10 000.00 payable in units of R 2 500.00 |
| Every subsequent day thereafter | R 1 500.00 |
| Maximum Benefit payable for 21 day period | Up To R 57 000.00 |

ACCIDENT/TRAUMA BENEFIT

Up to R 150,000 per single member and up to R 300,000 per family incident. Immediate cover.



MATERNITY BENEFIT

Covers up to R20,000 for the birth of a child in hospital. 12 month waiting period applies. Benefit only available to plan members (16 years and older).



FUNERAL BENEFIT

Principal member R20,000, Spouse & Child > 14 years R 10,000. Child > 6 years R 5,000. Child > 0 years > R 2,500. Stillborn > 28 weeks R1,250. A 3 month waiting period applies. (Benefit only available to plan members.)



24 HOUR EMERGENCY SERVICES AMBULANCE & PRE-AUTHORISATION (0861 144 144)

24 Hour Emergency Services, Medical Assistance and Pre-Authorisation provided by Africa Assist. Immediate cover. Guaranteed private hospital admission with preference to all Life Healthcare, Mediclinic, Africa Health Care and Clinix hospitals.



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