

## Medical Scheme Policy - SPF - Group Office - GTI

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## 1. General information

In accordance with the Medical Schemes Act (Act No. 131 of 1998), nobody may be a member of two medical schemes at the same time.

Sanlam offers two medical schemes for employees which is Bonitas and Fedhealth.

Membership to Bestmed where available to Sanlam employees prior to January 2018. These options are not available to new employees. The choice to move from Bestmed to one of the noted schemes are available.

### 1.1. Medical scheme membership for Sanlam employees

As a Sanlam employee:

- Sanlam's terms and conditions of employment stipulate that **membership of a medical scheme is compulsory**.
- You must either be the principal member of Sanlam's medical scheme of choice, Bonitas, or Fedhealth, or a dependant member of your spouse's/partners\* registered medical scheme.  
\* Spouse is defined as the spouses of employees who are married; or spouses/partners in the case of co-habiting if the relationship is registered as a de facto marriage.
- You may not be a principal member of another medical scheme, unless you were a dependant on your spouse's medical scheme, and by his/her passing away you became the principal member of that scheme. This concession, however, only applies if the employer of the deceased is subsidising the membership in some way. If not, the employee must become a member of Bonitas, or Fedhealth.
- In the case of dependent membership the scheme must be subject to the oversight of the Council for medical Schemes and may not be an insurance-type product.

**Proof of continued dependent membership** must be provided **annually** by submitting an active member certificate to Sanlam Group HR Support Services.

### 1.2. Guidelines for new members

- Membership comes into effect on the first of the month in case of an appointment and ends on the last day of the month in the case of termination of service; also where the appointment or termination is in the middle of the month.
- Medical scheme premiums in the case of new membership (e.g. new appointments) will be recovered in arrears.
- New applications must be sent to Sanlam Group HR Support Services (HRSS) the 7<sup>th</sup> of every month for processing by Bonitas or Fedhealth.
- Bonitas or Fedhealth will allocate a membership number to you within 48 hours of receipt of the complete documentation.
- Bonitas or Fedhealth undertakes to send a membership card to you within two weeks of receipt of the documentation.
- If you need to visit a doctor, pharmacy or hospital before receipt of the card, Bonitas or Fedhealth will provide you with a membership certificate. Contact Client care line (0860 122 340) and general e-mail address ([info@simekahealth.co.za](mailto:info@simekahealth.co.za)).

## 1.3. General guidelines

- Bonitas and Fedhealth are administered by Medscheme.
- Bestmed is administered by Bestmed.
- Any medical scheme changes (e.g. births, marriages or divorces) must be sent to HRSS. Bonitas, Fedhealth and Bestmed will accept no changes unless received via HRSS.
- Option changes take place only once a year during November with effective date of 1 January the following year.
- No membership information regarding premiums, options, etc. is updated at HRSS.
- Full information is available from Bonitas, Fedhealth and Bestmed.
- HRSS is, however, the collection point for medical scheme documentation.
- Bonitas, Fedhealth and Bestmed is responsible for informing employees of any changes in the rules, benefits and premiums.
- All documentation of movement between Bonitas, Fedhealth and Bestmed (new application or cancellation) must be sent directly to Simeka Health (Sanlam Medical aid Broker).
- Forms or documentation regarding application, cancellation or dependants, etc. is available on the Sanlam Intranet (go to Wealthsmiths - My Medical scheme).

## 1.4. Taxability of medical premiums

Medical scheme contributions are managed as an after-tax deduction to which tax relief applies.

You get a tax credit for your monthly contributions on the following maximum values:

Principle member	R319
First dependant	R319
Additional dependants	R215 each

## 2. General rules

### 2.1. Births

#### 2.1.1. Documents required

To register a child for medical purposes, the following documents must be submitted to HRSS:

- A certified copy of the proof of registration of birth, a birth certificate or a certified copy of the adoption order.
- Form for amendment of member's record at Bonitas, Fedhealth, or Bestmed.
- Affidavit as proof of fatherhood if a male employee is an unmarried father.

## **2.1.2. Unmarried father**

If an unmarried father wants to register his child as a dependant under his medical scheme, he must provide an affidavit containing the following information:

- Full names and date of birth / Identity number of declarant.
- Full names and dates of birth of dependants.
- Relationship between declarant and dependants.

## **2.1.3. Adoption**

The same procedure as in the case of a birth is followed, but in the case of an adoption an adoption certificate or affidavit is accepted as proof.

## **2.1.4. Guardianship**

If you obtained guardianship of a child, you may only place the child as a dependant under the medical scheme if an official document (court order) is provided.

## **2.1.5. Custody of a child**

If you have merely obtained custody of a child, the child may not be placed on the medical scheme as a dependant.

## **2.1.6. Medical cover**

Medical cover operates from the date of birth if you notify HRSS within 30 days of the birth.

## **2.1.7. Registration of new or additional dependant**

According to the Medical Aid Policy (Bonitas, Fedhealth and Bestmed), a birth must be registered within 30 days. Therefore when your child is born, the application to place the baby on your medical scheme must be submitted within 30 days from the date of birth.

This will result in the following:

- Baby is placed on the fund from date of birth; however, premium is only payable from the next month. This is only applicable if the baby is registered within 30 days of date of birth. The increased premium also has to be paid from that month.

## **2.1.8. Registration after 30 days**

If your baby is not registered with Bonitas, Fedhealth or Bestmed within 30 days of birth, the additional dependant will be registered from the date on which the scheme received the application.

The increased premium will only be applicable from the date of registration.

As member, you will be held responsible for the doctors' bills from the birth up to and including the registration date.

It is therefore extremely important that registration takes place within 30 days of birth.

## 2.2. Marriage

### 2.2.1. General rules

If your spouse wants to register as a dependant under your medical scheme (Bonitas, Fedhealth, or Bestmed), he/she must provide proof that membership of a previous medical scheme has been cancelled.

If your spouse is unemployed, an affidavit must be submitted that he/she does not belong to a medical scheme.

If you marry a divorced person with children from a previous marriage, you can register that person, as well as the children, as dependants under your scheme. Proof must be submitted that the children are not covered by their legal parent's medical scheme.

Medical scheme contributions are payable in arrears for a full calendar month.

Should you decide to be a dependant member on your spouse's registered medical scheme membership ceases from the first of the following month if the cancellation was not submitted to HRSS (Bonitas, Fedhealth, or Bestmed) 30 days before the event, otherwise it ceases from the date on which the scheme receives the application for cancellation.

If you cancel your membership in the middle of the month, you must pay the full premium for that month.

### 2.2.2. Documents required

The following documents must be submitted to HRSS for medical purposes, if a staff member marries:

- Form for amendment of member's record for Bonitas, Fedhealth, or Bestmed medical scheme, or application for membership if the staff member joins the medical scheme for the first time.
- Certified copy of the marriage certificate.
- Notification of Marriage form (AE1904)

### 2.2.3. Registration and cancellation

According to the Medical Aid Policy (Bonitas, Fedhealth, or Bestmed): A marriage must be registered within 30 days.

The application to register a spouse under the medical scheme must therefore be made within 30 days of the marriage ceremony.

Cancellation of membership to the medical scheme must be submitted to HRSS in writing 30 days before the date of the marriage ceremony.

## 2.2.4. Increased premium

- If you get married, an increased premium is paid in respect of your spouse from the month in which the marriage took place (if Bonitas, Fedhealth, or Bestmed receives notice within 30 days) and the spouse is registered as a dependant under your scheme with Sanlam.

*Example:* Date of marriage is 24 May 2018. Increased premium (if notice is received within 30 days) is from 1 June 2018.

*Example:* Date of marriage is 1 June 2018. Increased premium is from 1 June 2018.

- If your spouse is not registered with the scheme within 30 days, he/she will be registered from the date on which the scheme received the application.

## 2.3. Divorce

### 2.3.1. Documents required

The following documents must be sent to HRSS for medical purposes if you are getting a divorce:

- Complete certified copy of divorce order (not only the front page of the order).
- Form for amendment of your record for Bonitas, Fedhealth, or Bestmed if dependants change for medical purposes.
- Bonitas, Fedhealth, or Bestmed application form if you apply for membership of the medical scheme.

### 2.3.2. Medical cover

Medical cover changes from the date of divorce if you notify us within 30 days of the event.

### 2.3.3. Removal of dependants

- Medical Aid Policy (Bonitas, Fedhealth or Bestmed): If a spouse must be removed as a medical dependant because of divorce, 30 days' notice must be given to Bonitas, Fedhealth or Bestmed.
- If this is not done within 30 days, the ex-spouse is removed as dependant with effect from the date on which Bonitas, Fedhealth or Bestmed received the cancellation.

### 2.3.4. Premium

*Example:* If you belong to the medical scheme and divorce on 10 May 2018, your ex-spouse will be removed from the scheme with effect from 1 June 2018. You will therefore have to pay the premium for the month in which you divorced.

The premium will decrease from the following month if 30 days' notice of the official divorce date was given.