

IN HOSPITAL BENEFITS INCLUDING ALL MAJOR MEDICAL EXPENSES

CATEGORY	LIMIT	Benefit Parameters
Hospitalisation	Unlimited 100% at the Suremed Scheme Tariff	Pre-authorisation required prior to admission failing which, a levy of R1 000 per admission shall apply. Including accommodation, medication, materials and operating theatres. Medication on discharge (TTO's) R500 PB per event.
Emergency Services	Unlimited	Emergency transport only. Pre-authorisation required by phoning ER24 on 084 124.
Hospitalisation Alternatives	R21 000 PMF	Pre-authorisation required prior to treatment. Private nursing and Step-down facilities.
GP's and Specialists	Unlimited 125% of the Suremed Scheme Tariff	Consultations and Procedures.
Maternity	Unlimited	Pre-authorisation required prior to admission. Confinements including accommodation, medication, materials, anaesthetist, gynaecologist and paediatrician. Caesarean Section only if clinically necessary, if not, paid up to vaginal deliveries.
Mental Health	R16 800 PMF	Benefit limit includes all hospital and doctors' costs.
Organ Transplant	R157 500 PMF PMB's covered at 100% at a DSP	Pre-authorisation required. All services In-and-Out of hospital, including anti-rejection medication and harvesting.
Prosthesis (Surgical)	R36 750 PB	Spinal fusion limited to 2 levels per year to a maximum of R26 250 PB. Intra-ocular lenses limited to R2 625 per lens. Mesh limited to R8 400 PB. Subject to Scheme protocols.
Physiotherapy In Hospital	R5 933 PB. Unless a Prescribed Minimum Benefit (PMB)	
General Radiology & Pathology	Unlimited	Blood tests, x-rays, etc.
In-hospital dentistry	R11 235 PMF	Benefit for general anaesthetic for dental work for patients under the age of 12 years and impacted wisdom teeth. Benefit limit includes all hospital and doctors' costs. Subject to Suremed protocol and pre-authorisation.
Compassionate Care Benefit	R21 000 PMF. PMB's unlimited at a DSP	Limited to end of life costs only. Pre-authorisation required.

MAJOR MEDICAL EXPENSES

CATEGORY	LIMIT	Benefit Parameters
Chronic Medication	Unlimited (Only covers conditions on the Chronic Disease List (CDL) refer to the relevant section in this benefit summary)	Subject to Pre-authorisation , formulary and managed care protocols.
Dialysis	Unlimited PMF PMB's covered at 100% at a DSP	Pre-authorisation / case and treatment management required. All services In-and-Out of hospital, including medication and materials associated with the cost of Renal Dialysis.
HIV/AIDS	Unlimited	Subject to Lifesense protocols.
Oncology	Limited to R262 500 PMF Benefits Pre-authorised through ICON PMB's covered at 100% at a DSP	Pre-authorisation required. All services In-and-Out of hospital including medication and chemicals during the active treatment period.
Specialised Radiology	R17 745 PMF	Pre-authorisation required. In-and-Out of hospital MRI, CT Scans, etc. Paid at 80% if unauthorised.

PB = Per Beneficiary PMF = Per Member Family PMB = Prescribed Minimum Benefits

This information is a guide only and does not replace the rules of the Scheme. In the event of any discrepancy between the summary and the rules, the rules will prevail. All benefits are covered at the Suremed Scheme Tariff based on the National Health Reference Price List (NHRPL) unless otherwise stated. All benefits are annualised unless specified and pro-rated according to joining date. Subject to final Board approval and registration by the CMS.

NAVIGATOR

2026 Benefits & Contributions

DAY-TO-DAY EXPENSES Subject to available Personal Medical Savings Account (PMSA) at cost.
Plus overall day-to-day limit: R14 394 PB limited to R28 238 PMF subject to sub limits paid at 100% of Scheme rates.

CATEGORY	LIMIT	Benefit Parameters
Acute Medication	Subject to available PMSA thereafter a sub limit of R3 323 PB within the overall Day-to-Day limit.	Over the Counter medication (OTC) limited to R168 per prescription per month to a maximum of R1 496 per year. Included in the overall acute medication limit.
Alcoholism and Drug Dependacy	Subject to available PMSA thereafter a sub limit of R1 628 PB within the overall Day-to-Day limit.	Pre-authorisation required prior to treatment. All treatment including accommodation, medication, materials and visits.
Paramedical, Auxiliaries & Mental Health	Subject to available PMSA thereafter from the Day-to-Day limit.	Audiology, Dietetics, Hearing aid acoustics, Homeopathy, Podiatry, Speech therapy, Social workers. Clinical and counselling psychology.
Ambulance Services	Unlimited if ER24 is used.	
Appliances	Subject to available PMSA thereafter a sub limit of R2 625 PMF within the overall Day-to-Day limit. R4 200 PMF Oxygen	Hearing aids: per 3 year cycle limited to R5 250 CPAP machine: per 3 year cycle limited to R5 250 Nebulisers/Humidifiers: limited to R525 Glucometers: per 3 year cycle limited to R525 Back support: limited to R2 625 Orthotics: limited to R1 050 Subject to Suremed protocols and pre-authorisation.
Dentistry (Basic)	Subject to available PMSA from the Day-to-Day limit.	Fillings, extractions, etc.
Dentistry (Advanced)	Subject to available PMSA thereafter a sub limit of R5 040 PB within the overall Day-to-Day limit.	Crowns, bridges, orthodontics, inlays, dental technician fees, osseointegrated implants.
GP's and Specialists (Out of Hospital)	Subject to available PMSA thereafter from the Day-to-Day limit.	Consultations and visits. Including casualty / emergency room visits.
Maternity	Included in benefit parameters. Subject to early registration on Maternity Programme.	2 x 2D scans per pregnancy, includes 9 Ante-natal consultations and R390 for Ante-natal classes. 1 Post-natal consultation with GP / Specialist / Mid-wife / Ante-natal Vitamins: R68 per month for 9 months.
Optical	Subject to available PMSA thereafter a sub limit of R1 418 PB. Limited to R3 549 PMF within the overall Day-to-Day limit.	Benefit for 1 pair of spectacles per beneficiary every two years or contact lenses every year.
Physiotherapy	Subject to available PMSA thereafter from the Day-to-Day limit.	Includes physiotherapy, chiropractics and biokinetics.
Pathology and General Radiology	Subject to available PMSA thereafter from the Day-to-Day limit.	Blood tests, x-rays, etc.
Preventative Care and Wellness	Subject to available PMSA thereafter a sub limit of R1 166 PB. Limited to R2 205 PMF within the overall Day-to-Day limit.	Covers Mammograms, Pap Smears, Prostate check-ups and Tonometry.

Contact Numbers:

CUSTOMER CARE

Telephone	041 395 4545
WhatsApp	086 008 0888
Fax	086 008 0888
E-mail	086 743 0677
Member Claims Submissions	info@suremedhealth.co.za
Provider Claims Submissions	claims@suremedhealth.co.za
Website	providerclaims@suremedhealth.co.za
Physical Address	www.suremedhealth.co.za
Postal Address	7 Lutman Street, Richmond Hill, Port Elizabeth P.O. Box 1672, Port Elizabeth, 6000

PHARMACY BENEFIT MANAGEMENT (PBM)

(CHRONIC MEDICATION AUTHORISATION)

Telephone	041 395 4482
Fax	086 680 8855
E-mail	chronic@suremedhealth.co.za

CLINICAL RISK MANAGEMENT (CRM)

(PRE-AUTHORISATION)

Telephone	041 395 4545
Fax	086 008 0888
E-mail	086 686 5503

DISEASE MANAGEMENT/HIV AND AIDS AND WELL BEING TEAM

Telephone	086 010 3228
Fax	086 599 4511
E-mail	wellbeing@suremedhealth.co.za

EMERGENCY TRANSPORT

ER24	084 124
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At Suremed Health our focus is on providing our members with clinical and financial solutions to ensure that you receive the most efficient and cost effective medical care possible. To make the task of clearly understanding the procedures and benefits as easy as possible we have selected a number of very important pieces of information which you should read through and keep on hand for easy reference.

If there is any aspect you do not understand please refer to your broker or to the Scheme's administrators. We would like to ensure that your association with the Scheme is a long, healthy and pleasant experience.

Complaints and Disputes

Members should inform the Scheme at info@suremedhealth.co.za or the scheme's administrator, escalations@suremedhealth.co.za in writing of any complaints or disputes. Members may also report any dispute with the Scheme to the Council for Medical Schemes at: share call 0861 123 267, email complaints@medicalschemes.com, www.medicalschemes.com or at their postal address: Block, Eco Glades 2 Office Park, 420 Witch-Hazel Street, Centurion, 0157.

CONTRIBUTIONS 2026

	Principal Member	Adult Dependant	Child Dependant
Risk	R4 759	R3 731	R1 391
Savings	R577	R445	R186
Total	R5 336	R4 176	R1 577