

IN HOSPITAL BENEFITS INCLUDING ALL MAJOR MEDICAL BENEFITS:

CATEGORY	LIMIT	Benefit Parameters
Emergency Services	Unlimited	Emergency transport only. Pre-authorisation required by phoning ER24 on 084 124.
Hospitalisation	Unlimited, and covered at 100% of the scheme rates at any Netcare hospital	Pre-authorisation required prior to admission, failing which a levy of R500 per admission shall apply. Including accomodation, medication, materials and opertaing theatres. TTO's is 7 days of medication.
Planned procedures in a Day Clinic	Planned procedures are covered at 100% of the scheme rates	Pre-authorisation is needed before the admission. You will pay an upfront payment of R2 000 for a list of planned procedures not done in a day clinic.
Hospitalisation alternatives (Step-down facilities and hospice)	R12 867 PMF	Pre-authorisation required prior to treatment. Excludes frail care facilities.
Specialised Radiology	R11 160 PB and R15 000 PMF	Pre-authorisation required. In-and-Out of hospital MRI, CT Scans, etc.
In-hospital Dentistry	Benefit for general anaesthetic for patients under the age of 12 years and impacted wisdom teeth.	Pre-authorisation required.
Prostheses	R32 214 PMF	Pre-authorisation required prior to admission.
Maxillofacial surgery	Covered at 100% of the Agreed Rate and limited to Prescribed Minimum Benefit conditions only and subject to pre-authorisation.	Surgery must be performed at a DSP hospital. Limited to R19 000 per family per annum.

MAJOR MEDICAL BENEFITS

CATEGORY	LIMIT	Benefit Parameters
GP Visits	8 consultations per beneficiary	Authorisation required after the 8th consultation.
Casualty	1 visit per dependant, or 2 visits per family per annum at any registered emergency medical facility. R1 230 per event.	Paid at cost, including the consultation and any related accounts such as X-rays, blood tests and medicine, up to a total limit.
Specialist Benefit	R4 000 PB	Pre-authorisation required.
Flu Injections	One flu injection per dependant per annum	At a network healthcare provider or pharmacy.

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

SHUTTLE

2026 Benefits & Contributions

DAY-TO-DAY BENEFITS

CATEGORY	LIMIT	Benefit Parameters
Acute Medicine	Unlimited - Prescribed by network GP. Medication is paid in accordance with a medication formulary	R350 per dependant. Up to a maximum of R120 per event, with a maximum of three (3) events per year.
Contraceptives	R2 210 PMF.	Limited to R170 script limit PMF.
Chronic Medication	Unlimited and covered at 100% of the Chronic Disease List (CDL)	Subject to pre-authorisation formulary and managed care protocols.
HIV/AIDS	Unlimited	Subject to managed care protocols.
Dentistry - General	Unlimited through Primary Care Network	Subject to PC network approved dental codes, codes available on the Suremed website.
Dentistry - Advanced	Includes 1 set of acrylic dentures PMF per 24-month cycle, paid at 80% of scheme rates.	Subject to PC network providers.
Optical	Paid at 100% scheme rates through Primary Care Network optical provider.	1 Eye test PB per year. 1 pair of spectacles PB per 24-month cycle. Lenses limited to R2 500 PB. Frames valued at R840. Contact lenses - no benefit.
Basic Radiology	Unlimited referred from network provider.	Black and white X-rays and soft tissue ultrasounds are covered at 100% of the scheme rate.
Pathology	Unlimited	Covered at 100% of scheme rates.
Maternity Benefit	Includes cover for: - Up to eight visits to a gynaecologist, GP or midwife - Antenatal vitamins up to R120 per month for nine months - Two 2D ultrasound scans per pregnancy - Basket of blood tests - Delivery in a Netcare hospital - One six-week post-natal consultation	Benefits are available upon registration into the Maternity Programme. Pre-authorisation is required through MomentumTYB.

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

Monthly Income	Principal Member	Adult Dependant	Child Dependant
R0 - R9 000	R1 505	R1 505	R805
R9 001 - R13 000	R1 976	R1 976	R1 029
R13 001 - R17 000	R2 837	R2 837	R1 459
R17 001 - R30 000	R3 029	R3 029	R1 533
R30 000+	R3 225	R3 225	R1 647