

# LA Active

In-hospital and out-of-hospital cover with additional day-to-day cover.

**With LA Active as a Benefit Option you get:**



Unlimited hospital cover in private hospitals, and cover for planned procedures, such as childbirth, authorised with us.



An **ambulance or helicopter** sent to you in an emergency.



Major medical cover in hospital when you need to see a **specialist or GP**. Out-of-hospital GP and specialist visits are paid from the Medical Savings Account or Insured Procedures Benefit.



A savings account to cover your **day-to-day healthcare** needs, as well as the Insured Procedures Benefit for specific disciplines. An additional, limited basic dental benefit, paid from the Major Medical Benefit.



Cover for Prescribed Minimum Benefits from a list of conditions and medicines.



Oncology Programme for cancer treatment.



The LA Active option covers you in any hospital for emergencies and for planned hospital admissions that you have authorised with us.

## The cover you need, when you need it

### Emergency cover when you need it most

In an emergency, go straight to hospital. If you need an ambulance or helicopter, call 0860 999 911. We will send the help you need. It is important that you, a loved one or the hospital let us know of your admission within two working days after the emergency. If you don't, we can apply a R1 000 penalty that you have to pay.

### No overall hospital limit

There is no overall hospital limit. This means that even if you have to stay in hospital for a long time, or if your treatment is very expensive, your cover won't run out. Some healthcare services and procedures have limits or we may have rules on how we pay for them.

### Cover for planned hospital admissions

You have cover in any hospital. Call us at least two days before you go to hospital for preauthorisation.

### Your cover for radiology (x-rays, MRI and CT scans) and pathology

MRI and CT scans are like x-rays, but show much more detail. They are used when an x-ray doesn't show enough. If your scan is related to an approved hospital stay, it will be paid from the Major Medical Benefit with no overall limit. In-hospital x-rays and pathology will also be paid from the Major Medical Benefit with no overall limit.

In the case of out-of-hospital requests for scans, as well as in-hospital endoscopic procedures, the first R1 900 for the scan or procedure is paid from your Medical Savings Account and the rest from your Major Medical Benefit.

For endoscopic procedures (where the doctor looks inside your body with a pipe-like instrument) done out of hospital, the first R950 is paid from the Medical Savings Account or by you (if your Medical Savings Account is depleted), and the rest from the Major Medical Benefit. Out-of-hospital radiology, like x-rays or ultrasounds, as well as pathology will be limited to funds in the Medical Savings Account or Insured Procedures Benefit.

**Please note: all dentistry claims add up to the overall dentistry limit of R16 100 for each person, each year, regardless of whether the service was provided in or out of hospital**

## Unlimited healthcare services

### Most in-hospital healthcare services have no overall limit. These are:

- GPs
- Specialists
- Pathology
- Radiology
- Allied healthcare professionals like physiotherapists
- HIV cover
- Blood transfusions and blood products
- Maxillo-facial procedures
- Organ transplants

## Limited healthcare services in hospital

### These services have a limit in hospital:

<b>Mental health</b>	21 days for each person
<b>Alcohol and drug rehabilitation</b>	21 days for each person
<b>Detoxification in hospital</b>	Three days for each person
<b>Terminal care</b>	R28 550 for each person
<b>Prosthetic devices used in spinal surgery</b>	R23 000 for the first level, R46 000 for two or more levels, limited to one procedure for each person in a year
<b>Cochlear implants, implantable defibrillators, internal nerve stimulators and auditory brain implants</b>	Paid from the Major Medical Benefit up to R155 000 for each person in a year
<b>Implantable cardiac stents</b>	Limited to R10 900 for each bare metal stent and R17 300 for each drug-eluting stent
<b>Specialised dentistry in hospital</b>	The first R1 900 is paid from your Medical Savings Account and the rest from your Major Medical Benefit. Related accounts are limited to funds in the Medical Savings Account and Insured Procedures Benefit. All dental costs subject to an overall dental limit of R16 100 for each person

**Please note: all dentistry claims add up to the overall dentistry limit of R16 100 for each person, each year, regardless of whether the service was provided in or out of hospital**

## Your cover for healthcare professionals

### Cover for GPs and specialists

We will cover approved treatment in full at healthcare professionals with whom we have an agreement. Out-of-hospital visits will be paid from the Medical Savings Account or Insured Procedures Benefit. If you go to other specialists or healthcare professionals who charge more than the LA Health Rate, you must pay the rest.



## DiscoveryCare

**DiscoveryCare looks after you when you are living with a chronic (long-lasting) condition that needs ongoing management and care. Our skilled consultants help guide you to ensure you always receive the most appropriate level of care when your condition is registered on one of our care programmes.**

### Your cover for chronic conditions

You have full cover from your Major Medical Benefit for a list of chronic conditions (the Prescribed Minimum Benefit Chronic Disease List). Your treatment must be approved and you have to use the Scheme's Designated Service Providers to get payment in full. If you choose to use medicine that is not on our list, you have a set monthly amount available called the Chronic Drug Amount. Prescribed or acute medicine is paid from your Medical Savings Account or Insured Procedures Benefit at up to 90% of the LA Health Medicine Rate.

### Savings on essential care items at Dis-Chem

When you shop at Dis-Chem, ChroniCare brings you savings on a wide range of items appropriate to your needs, such as monitoring devices and diabetic footwear, that help manage your chronic condition. You can activate ChroniCare if you are registered on our Chronic Illness Benefit for one of the following chronic conditions: asthma, diabetes, high cholesterol or high blood pressure. Earn up to 25% cash back by doing a group of screening tests and activating ChroniCare at [lahealth.co.za/benefits](http://lahealth.co.za/benefits) and cover/cover for medicine/chronic medicine and clicking on the ChroniCare link. You don't immediately earn up to 25% cash back.

**Please note ChroniCare will be available from March 2013.**

### Your cover for cancer treatment

On LA Active we cover cancer treatment in full if it is a Prescribed Minimum Benefit. Our Oncology Programme covers the first R228 000 of approved cancer treatment over a 12-month cycle. Cover is unlimited once cancer treatment costs go over this amount, but you will need to pay 20% of the cost of all further non-PMB treatment. You might have to make other co-payments if your healthcare professional charges above the Scheme rate.

For PET scans, there is no limit in a 12-month cycle. These scans must be preauthorised and done at a Designated Service Provider, otherwise you may have to pay in R2 750. Stem cell transplants have no overall limit at the Designated Service Provider, but will be limited to R1 million if done elsewhere.

Please call us to register on the Oncology Programme to qualify for these benefits.

## Your cover for additional benefits

### Screening and Prevention Benefit

If you go for certain tests to check your health, it will be paid from the Major Medical Benefit. These screening tests at a network pharmacy include blood glucose, blood pressure, cholesterol, and body mass index. We pay R135 for all or one of the listed screening tests if performed at the same time. Or we will pay R135 for a flu vaccination. We also cover mammograms, Pap smears, PSA (a prostate screening) and HIV screening tests at other providers from the Major Medical Benefit. Consultations, other related costs and procedures are paid from the Medical Savings Account or the Insured Procedures Benefit (if applicable).

### Renal care

Dialysis and other renal care-related treatment and educational care (including authorised related medicine) have no overall limit, subject to a treatment plan and use of the Scheme's Designated Service Provider, Dialysis Network. Co-payments will apply if the network is not used.

### Maternity Benefit

If you are pregnant, the Maternity Benefit covers your hospitalisation in full, subject to preauthorisation. Out-of-hospital GP and specialist consultations, pregnancy scans and blood tests are limited to funds in your Medical Savings Account or Insured Procedures Benefit. Antenatal classes and ultrasounds are limited to funds in your Medical Savings Account only.



## Your cover for day-to-day medical expenses

We pay for some daily medical expenses from your day-to-day benefits. Examples of these expenses are doctors' visits, prescribed medicine, dentistry and other treatments you receive outside the hospital.

### The Medical Savings Account

If you do not use your medical savings, we add interest to it and carry it over to the next year. If you leave the Scheme and you have medical savings left over, we will transfer the savings to your new medical scheme or give you the money back if you are moving to a scheme without a savings account.

### The Insured Procedures Benefit

On LA Active, this benefit pays for certain healthcare costs when your medical savings runs out. All payments from this benefit add up to the yearly limit. This limit depends on the number of people in your family. The Insured Procedures Benefit pays for:

- Acute medicine, including over the counter medicine from schedule 0 to 3
- GP visits
- Specialist visits
- Optometry (eye care)
- Radiology (x-rays)
- Pathology (blood tests)
- Dentistry

### The Medical Savings Account

We pay these claims from your available funds:

- **Other healthcare services** (acousticians, biokineticists, chiropractors, counsellors, dietitians, homeopaths, nurses, occupational therapists, physiotherapists, podiatrists, psychologists, psychometrists, social workers, speech and language therapists and audiologists)
- **External medical items like crutches, wheelchairs, hearing aids, stoma bags etc.** (excluding oxygen rental, which is covered in full at the Scheme's Designated Service Provider, subject to preauthorisation)

### Basic dentistry out of hospital

We pay the first R2 610 for the family from the Major Medical Benefit. After that we pay for basic and specialised dentistry from the Medical Savings Account or Insured Procedures Benefit.

All basic and specialised dentistry payments are subject to the overall annual dentistry limit of R16 100 per person for in- and out-of-hospital dentistry.

## Save on self-medication at Clicks

With MedSaver, you can earn up to 25% cash back on self-medication at any Clicks Pharmacy, whether you pay for it or claim for it. Activate MedSaver by going to [lahealth.co.za/benefits and cover/cover for medicine/prescribed medicine](http://lahealth.co.za/benefits-and-cover/cover-for-medicine/prescribed-medicine) and clicking on the MedSaver link.

## What the Scheme does not cover

There are certain medical expenses the Scheme does not cover. We call these exclusions. LA Health will not cover the direct or indirect consequences of the following, except as stipulated in the Prescribed Minimum Benefits:

- Cosmetic procedures, for example otoplasty for jug ears, portwine stains, blepharoplasty (eyelid surgery), keloid scars, hair removal, nasal reconstruction (including septoplasties, osteotomies and nasal tip surgery) and enamel micro abrasion
- Breast reductions and implants
- Obesity
- Frail care
- Infertility
- Wilfully, self-inflicted illness or injury
- Injuries sustained during participation in a willful and material violation of the law
- Injuries sustained during willful participation in war, terrorist activity, riot, civil commotion, rebellion or insurrection
- Experimental, unproven or unregistered treatment or practices
- Search and rescue
- Any costs where a third party is legally responsible
- CT angiogram of the coronary vessels and CT colonoscopy
- Facility fees at casualty facilities.

## LA Active – monthly contributions including Medical Savings Account for 2013

 <b>Member</b>	 <b>Adult</b>	 <b>Child dependant</b>	 <b>Maximum for child dependants</b>
R1 863	R1 254	R618	R1 854



For more details, visit [www.lahealth.co.za](http://www.lahealth.co.za) or speak to your LA Health broker.