

LA Comprehensive

Extensive in-hospital and out-of-hospital cover with wide-ranging day-to-day cover.

With LA Comprehensive as a Benefit Option you get:



Unlimited private hospital cover



Cover for Chronic Illness Benefit for Prescribed Minimum Benefits and other conditions



Access to specialised and advanced technology and medicine



A high savings account to cover your day-to-day healthcare needs and the Above Threshold Benefit to cover you when the savings account has run out



Certainty of cover for GP consultation fees, blood tests and day-to-day generic medicines



Cover for medical emergencies when travelling in and outside South Africa



Oncology Programme for cancer treatment.





Your cover in hospital

We cover you in any private hospital for emergencies and for planned hospital admissions that you have authorised with us. There is no overall limit.

Unlimited hospital cover

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. Limits, clinical guidelines and policies apply to some healthcare services and procedures in 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

Limited healthcare services in hospital

Only the following healthcare services have a limit each year in hospital:

Mental health	21 days for each person
Alcohol and drug rehabilitation	21 days for each person
Detoxification in hospital	Three days for each person
Prosthetic devices used in spinal surgery	R23 000 for the first level, R46 000 for two or more levels, limited to one procedure for each person, a year
Cochlear implants, implantable defibrillators, internal nerve stimulators and auditory brain implants	Paid from the Major Medical Benefit up to R155 000 for each person in a year
Implantable cardiac stents	Limited to R10 900 for each bare metal stent and R17 300 for each drug-eluting stent
Dentistry	Limits apply (see the section "Your cover for dental treatment")

Your cover for healthcare professionals

Full cover for specialists who have an agreement with us

We will cover approved treatment in full at healthcare professionals who have an agreement with us. These healthcare professionals are also the designated providers for Prescribed Minimum Benefits. Out-of-hospital visits will be paid from the Medical Savings Account or Above Threshold Benefit. If you go to other specialists or healthcare professionals who charge more than the LA Health Rate, you must pay the rest.

Your cover for investigations

Radiology, pathology and endoscopic procedures

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 MRI or CT scan (in hospital or out of hospital) is referred by a specialist, it will be paid from the Major Medical Benefit with no overall limit. In-hospital x-rays, ultrasounds and pathology (like blood tests) are paid from the Major Medical Benefit with no overall limit.

Endoscopic procedures (where the doctor looks inside your body with a pipe-like instrument) will also be paid from the Major Medical Benefit with no overall limit – whether done in hospital or out of hospital. Out-of-hospital radiology, including x-rays and ultrasounds, and out-of-hospital pathology will be paid from the Medical Savings Account or Above Threshold Benefit.

Your cover for dental treatment

From severe oral surgery to basic dentistry

Maxillo-facial procedures (certain severe infections, jaw-joint replacements, cancer-related and certain trauma-related surgery, cleft-lip and palate repairs) are paid from the Major Medical Benefit with no overall limit. In the case of specialised dentistry in hospital, the first R1 900 is paid from your Medical Savings Account and the rest

from your Major Medical Benefit. Related non-hospital accounts are limited to funds in the Medical Savings Account or Above Threshold Benefit. Basic dentistry out of hospital is paid from and limited to funds in the Medical Savings Account or Above Threshold Benefit. All dental costs are subject to an overall dental limit of R21 300 for each person.



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 extensive cover for a comprehensive list of chronic conditions. You have full cover for approved medicine on the Scheme's medicine list. If you choose to use medicine that is not on our list, you have a set monthly amount available. We pay medicine up to 90% of the LA Health Rate, up to the following limits:

- M: R3 575
- M1: R7 200
- M2: R8 335
- M3: R9 470
- M4: R10 265
- M5+: R11 285

We need to approve your chronic condition before it is covered from the Chronic Illness Benefit.

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, which helps 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 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 medical technology and expensive medicine

On LA Comprehensive you have cover for a defined list of the latest treatments through the Specialised Medicine and Technology Benefit, subject to authorisation. This benefit is paid at the LA Health Medicine Rate up to R228 000 for each person in a year. Specific rules and a co-payment of up to 20% of the cost of the medicine or technology may apply. Please call us to see whether your treatment qualifies.

Your cover for cancer treatment

On LA Comprehensive all Prescribed Minimum Benefit claims are paid in full without a co-payment. Our Oncology Programme covers the first R456 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 treatment. You might also have to make other co-payments if your healthcare professional charges more than 100% of the LA Health 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 where 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 Above Threshold Benefit.



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 money left in your medical savings, we will transfer the money to your new medical scheme or give you the savings back if you are moving to a scheme without a savings account.

The Above Threshold Benefit

Your Benefit Option has an Above Threshold Benefit, which gives you extra cover at the LA Health Rate or a percentage of it when your claims add up to a set amount called the Annual Threshold. If an LA Comprehensive member runs out of funds in the Medical Savings Account before the medical expenses add up to the Annual Threshold, it causes a Self-payment Gap. This means you have to pay for your daily medical expenses from your own pocket until these expenses reach the Annual Threshold.

Unlimited cover on key day-to-day healthcare services

On LA Comprehensive, we pay these healthcare services from your Medical Savings Account or Above Threshold Benefit, with no limit during that year:

- GPs
- Pathology
- Physiotherapy
- Auxilliary services
- Specialists
- Radiology
- Optometry consultations

Medical Savings Account and Above Threshold Benefit

Some of your day-to-day benefits have limits. These are not separate benefits. These limits apply to claims paid from your Medical Savings Account or Above Threshold Benefit:

- **Nurse practitioners** – paid up to a limit of R7 500 per family from the Medical Savings Account or Above Threshold Benefit
- **Ultrasounds** – limited to the cost of two 2D scans per pregnancy, paid from Medical Savings Account or Above Threshold Benefit
- **Antenatal classes** – limited to R1 075 per person and paid from Medical Savings Account or Above Threshold Benefit
- **Prescribed/acute medicine** – paid at 90% of the LA Health Medicine Rate from the Medical Savings Account or Above Threshold Benefit, but limited to:
 - **Medicine bought over-the-counter** (schedule 0,1 and 2 and generic or non-generic, whether prescribed or not) – limited to funds in Medical Savings Account up to 100% of the cost.
 - **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) – limited to R19 550 per family with a sub-limit of R13 050 per family for hearing aids from the Medical Savings Account or Above Threshold Benefit.

Member	Member + 1	Member + 2	Member + 3	Member + 4
R6 695	R8 565	R10 320	R11 910	R13 610

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 Comprehensive – monthly contributions including Medical Savings Account for 2013

 Member	 Adult	 Child dependant	 Maximum for child dependants
R4 189	R3 200	R1 016	R3 048



For more details, visit www.lahealth.co.za or speak to your LA Health broker.