

## Trauma Recovery Extender Benefit – 2021

### Who we are

LA Health Medical Scheme (referred to as 'the Scheme'), registration number 1145, is a non-profit organisation, registered with the Council for Medical Schemes. Discovery Health (Pty) Ltd (referred to as 'the administrator') is a separate company and an authorised financial services provider (registration number 1997/013480/07). We take care of the administration of your membership for the Scheme.

### How we cover Trauma Recovery Extender Benefit

The Trauma Recovery Extender Benefit is available up until the end of each calendar year, on all the LA Health benefit options, including the LA KeyPlus Benefit Option.

### Overview

This document tells you about the Trauma Recovery Extender Benefit. Read further to understand how the benefit works, which healthcare services are covered and details about the criteria that applies to qualify for the benefit.

### About some of the terms we use in this document

There may be some terms we refer to in the document that you may not be familiar with. We give you the meaning of these terms.

Terminology	Description
<b>Allied, therapeutic and psychology healthcare professional</b>	This is a registered medical professional other than a doctor or dentist who provides support services and/or rehabilitation services that are aimed at improving the physical, psychological, emotional and social wellbeing of members.
<b>LA Health Rate</b>	This is the rate that LA Health Medical Scheme sets for paying claims from healthcare professionals and other services.
<b>Above Threshold Benefit</b>	This benefit (where applicable) gives you further day-to-day cover when your Medical Savings Account runs out and when your day-to-day claims add up to a set rand amount, the Annual Threshold.
<b>FIMS</b>	Functional Independent Measure Scale. This is a universal measure of activities of daily living.

### The Trauma Recovery Extender Benefit at a glance

**The Trauma Recovery Extender Benefit helps to extend your day-to-day cover**

The Trauma Recovery Extender Benefit helps to preserve the funds in your Medical Savings Account after certain traumatic events by giving you access to cover for certain day-to-day treatment after you are discharged from hospital. The benefit pays the day-to-day medical care costs of the traumatic event in the year it happened and in the year after it happened, without using the funds in your Medical Savings Account. This applies if you are on a benefit option that offers the benefit.

You will not qualify for the Trauma Recovery Extender Benefit if the traumatic event happened in a previous benefit year while you were on a benefit option that did not offer this benefit or while you were a member of another medical scheme.

You have to be a member of LA Health at the time that the trauma happened, to qualify for cover from the Trauma Recovery Extender Benefit.

The benefit covers only the claims for the member who is registered for the benefit and claims that are related to the original diagnosis after the specific trauma.

### Members must meet the clinical entry criteria to access cover on the Trauma Recovery Extender Benefit

The Trauma Recovery Extender Benefit pays for certain day-to-day medical costs resulting from any of the following:

Trauma condition	To qualify for the benefit
Crime-related injury, Conditions related to a near-drowning, Poisoning, Severe anaphylactic (allergic) reaction	The condition requires an ICU stay of five days or more.
Paraplegia (paralysis of the lower half of the body affecting both legs, due to blunt force injury to the spinal cord) Quadriplegia/Tetraplegia (paralysis of both arms and legs due to blunt force injury to the spinal cord) Hemiplegia (paralysis of the left or right side of the body due to injury to parts of the brain)	Severe lessening of the strength or effectiveness of the limbs, shown by loss of reflexes, numbness and loss of motion in the spine. We use Beta or FIMS score indications to measure the severity of the physical trauma.
Severe burns	15% of the surface area has full thickness burns.
External and internal head injuries	The condition requires an ICU stay of five days or more. We use Beta or FIMS score indications to measure the severity of the physical trauma.
Loss of limb	Trauma-related loss of limb due to direct blunt force trauma

### Members who qualify have automatic access to the Trauma Recovery Extender Benefit

Day-to-day costs you are covered for	Professional medical services
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Allied, therapeutic and psychology healthcare services	Acousticians, Biokineticists, Chiropractors, Counsellors, Dietitians, Homeopaths, Nurses, Occupational therapists, Physiotherapists, Podiatrists, Psychologists, Psychometrists, Social workers, Speech-language therapists and audiologists
Prescribed medicine	Schedule 3 and above
Radiology	Including X-rays and scans
Pathology	Blood tests and other tests done in the laboratory
Medical devices and limb prostheses	External devices including wheelchairs and hearing aids

### **FOR MEMBERS ON THE LA KEYPLUS BENEFIT OPTION**

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When we have authorised it, we cover some medical expenses if you or your family experience serious trauma, for specific events. The benefit is paid up to the end of the year following the one in which the traumatic event occurred.

We cover the following:

- We pay accounts for specialists, GPs and other healthcare professional claims, including pathology and radiology up to 100% of the LA Health Rate. If you use a healthcare professional who we have a payment arrangement with, the agreed rate will apply and we will pay them direct.
- You have unlimited specialist visits for the treatment after the trauma (these do not add up to the Specialist Benefit).
- You will have unlimited radiology and pathology cover and no medicine lists (formularies) apply. All other day-to-day services remain the same for cover from the Trauma Recovery Extender Benefit.
- Prescribed medicine (schedule 3 to 7), visits to psychiatrists or psychologists, allied and therapeutic healthcare professionals private nursing, hearing aids, other external appliances and prosthetic limbs are covered up to specific limits. Medicine not on the medicine list (formulary) will be paid up to 75% of the LA Health Rate.

Note:

You must visit your chosen GP and make sure your treating specialist/healthcare professional is on the Scheme's network – look on the 'Find a Healthcare Professional' tool on the LA Health website at [www.lahealth.co.za](http://www.lahealth.co.za)

### **CERTAIN HEALTHCARE SERVICES ARE NOT COVERED ON THE TRAUMA RECOVERY EXTENDER BENEFIT**

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- The Trauma Recovery Extender Benefit does not cover the cost of dentistry, optometry, antenatal classes or over-the-counter (schedule 0, 1 and 2) medicine.
- The general scheme exclusions apply to the Trauma Recovery Extender Benefit.

- The Trauma Recovery Extender Benefit only covers medical claims that are related to the trauma.

## **ABOUT HOW WE PAY ACCOUNTS FROM THE TRAUMA RECOVERY EXTENDER BENEFIT**

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- The Trauma Recovery Extender Benefit provides cover up to the LA Health Rate, unless stated otherwise, from your Major Medical Benefit.
- The co-payment for MRI or CT scans that normally applies will not apply to scans that form part of treatment covered from the Trauma Recovery Extender Benefit.
- We will pay prescribed medicine (that is schedule 3 and above) from the benefit according to your benefit option. We pay medicine on the medicine list (formulary) up to 100% of the LA Health Rate for medicine. For medicine that is not on the medicine list (formulary), we will pay up to 75% of the LA Health Rate for medicine on all benefit options.

## **Contact us**

Tel: 0860 103 933 • PO Box 652509 Benmore 2010 • [www.lahealth.co.za](http://www.lahealth.co.za)

## **Complaints process**

You may lodge a complaint or query with LA Health Medical Scheme directly on 0860 103 933 address a complaint in writing to the Principal Officer at the Scheme's registered address. Should your complaint remain unresolved, you may lodge a formal dispute by following the LA Health Medical Scheme internal disputes process.

You may, as a last resort, approach the Council for Medical Schemes for assistance.

Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch-Hazel Avenue, Eco Park, Centurion, 0157 / 0861 123 267 / [complaints@medicalschemes.co.za](mailto:complaints@medicalschemes.co.za) / [www.medicalschemes.co.za](http://www.medicalschemes.co.za).