

WORLD HEALTH ORGANISATION (WHO) GLOBAL OUTBREAK BENEFIT 2024

Overview

From time to time, there are viruses, or diseases, that affect world health. These outbreaks are closely monitored by the World Health Organization (WHO) and are, depending on the severity and spread, declared as epidemics that place the global population's health at risk.

We recognise the importance of being prepared for these public health emergencies. Through careful benefit design and in support of public health initiatives, aimed at containing and mitigating the spread of such outbreak diseases, our members now have access to supportive benefits during the outbreak period. The outbreak is actively monitored by a dedicated team within the Administrator's office, Discovery Health. They closely assess the evolution and progression of such outbreaks. Having a timely and effective response to global epidemics helps to improve the health outcomes for our members.

This document explains the cover and support we provide to you when faced with a WHO-recognised epidemic.

WHO Global Outbreak Benefit

The WHO Global Outbreak Benefit is available to all members of the LA Health Medical Scheme during a declared outbreak period. This benefit ensures members have access to the out-of-hospital management and appropriate supportive treatment, as long as they meet the Scheme's Benefit entry criteria. The WHO Global Outbreak Benefit provides cover, for a defined basket of healthcare services related to COVID-19 and monkeypox.

Understanding COVID-19

The World Health Organization (WHO) confirmed that the outbreak of coronavirus disease (COVID-19) was a public health emergency of international concern (PHEIC). With many countries around the world confirming an outbreak, LA Health Medical Aid Scheme continues to take proactive steps to respond effectively to COVID-19 infections in South Africa. COVID-19 is a disease caused by a type of coronavirus.

The vast majority of people who contract COVID-19 experience only mild symptoms, potentially including fever, a cough and shortness of breath. In a small percentage of people, it may result in severe disease and even death. Detailed information about the prevention and transmission of COVID-19 is available on www.lahealth.co.za

How you are covered from the WHO Global Outbreak Benefit

When are you covered?

The WHO Global Outbreak Benefit is available for the WHO-recognised outbreak period. Healthcare services covered by this benefit are subject to the Scheme's benefit entry criteria. Outside the outbreak period, your chosen health plan benefits will apply.

How you are covered?

This benefit, available on all options, is covered by the Scheme for cases of outbreak diseases and out-of-hospital healthcare services related to COVID-19 and does not affect your day-to-day benefits, where applicable.

What you are covered for?

This benefit offers cover for out-of-hospital management and appropriate supportive treatment of global World Health Organization (WHO) recognised disease outbreaks and out-of-hospital healthcare services related to COVID-19.

The basket of care includes:

- Screening consultations with a network GP (either virtual consultations, telephonic or face-to-face)
- COVID-19 PCR screening tests
- A defined basket of pathology tests for COVID-19 positive members
- A defined basket of x-rays and scans for COVID-19 positive members
- A defined basket of physiotherapy treatment for COVID-19 positive members
- A defined basket of mental health consultations/treatment for COVID-19 positive members

Cover is subject to the Scheme's preferred providers (where applicable), protocols and the treatment meeting the Scheme's entry criteria and guidelines. Any recommended treatment and healthcare services that are not included in the basket of care are covered according to the benefits available on your chosen benefit option or in accordance with Prescribed Minimum Benefits, where applicable.

In-hospital treatment related to COVID-19, for approved admissions, are covered from the Hospital Benefit based on your chosen benefit option and in accordance with Prescribed Minimum Benefits (PMB), where applicable.

COVID-19 vaccine

The overall aim of the COVID-19 vaccines are to prevent COVID-19-related disease and deaths, and to prevent transmission between individuals. Even if you get the virus, the vaccine is believed to help prevent you from getting seriously ill. The vaccine contains weakened or inactive parts of the virus which

teach or stimulate the body's immune system to recognise the virus as a "threat" when it attacks, and to promptly fight the virus.

It typically takes a few weeks after vaccination for the body to build protection (immunity) against the COVID-19 virus. That means it is possible a person could still get COVID-19 just after vaccination; this is because the vaccine has not had enough time to provide protection. Sometimes after vaccination, the process of building immunity can cause symptoms, such as fever; these symptoms are normal and are a sign that the body is building immunity.

Vaccines are critical in the battle against COVID-19, but as we learn how they work best, it is still important to continue to protect yourself by washing your hands regularly, wearing a mask and practicing safe social distancing.

Administration of the COVID-19 vaccines is covered in accordance with the National Department of Health COVID-19 guidelines. All South Africans have access to the COVID-19 vaccines and boosters which are provided by the National Department of Health to public sector facilities and private service providers free of charge.

You will be required to register on the National Department of Health's Electronic Vaccination Data System (EVDS), and make use of one of the accredited vaccination sites. The list of accredited facilities will be published by the National Department of Health. Read more about the COVID-19 vaccine in the "please add scheme relevant FAQ document".

Benefits available to you from the WHO Global Outbreak Benefit

These healthcare services are covered from the WHO Global Outbreak Benefit up to a maximum of 100% of the LA Health Rate. This cover does not affect your day-to-day benefits. These benefits are available up to the limits set out by the Scheme. You may apply for additional cover from the Scheme, where clinically appropriate.	
Risk assessment	You can understand your risk status at any point in time by completing the COVID-19 risk assessment available via www.lahealth.co.za or by calling us and following the prompts to complete the COVID-19 risk assessment. The assessment is a set of questions which determines if you may be presenting with symptoms suggestive of COVID-19 disease or may have been exposed to COVID-19 infection and need a consultation with a doctor.
Screening consultation	You are covered for COVID-19 screening consultations. You can choose to either access a virtual, telephonic or face-to-face screening consultation with a network provider. Virtual and telephone consultations provide a safe alternative to face-to-face consultations for patients and doctors, and contributes to the important containment measures that will continue to reduce the impact of the outbreak.
COVID-19 screening PCR tests	Members on LA Comprehensive, LA Active, LA Focus and LA Core have access to two COVID-19 PCR tests. Members on LA KeyPlus will have access to two

	of these tests. These tests are per beneficiary, per annum, and are covered regardless of the outcome of the test. Screening tests are funded in full from the WHO Global Outbreak Benefit. This includes pre-admission PCR testing for approved hospital admissions, subject to referral by a doctor.
Diagnostic and follow up consultations for COVID-19 positive members	You have access to a defined basket of diagnostic and follow up consultations if you are diagnosed with COVID-19, up to the LA Health Rate.
X-rays and scans	You have access to a defined basket of x-rays and scans up to the LA Health Rate.
Supportive medicines list	We pay for defined supportive medicines prescribed by your doctor for symptom management and treatment of COVID-19, up to the LA Health Rate.
In-hospital	Your hospital admission is subject to approval and preauthorisation. Sub-limits and clinical guidelines apply to certain healthcare services in hospital. In-hospital treatment related to COVID-19, for approved admissions, are covered from the Hospital Benefit based on your chosen benefit option and in accordance with Prescribed Minimum Benefits (PMB), where applicable.
Physiotherapy	You have access to a defined basket of physiotherapy treatments up to the LA Health Rate.
Mental Health	You have access to a defined basket of mental health consultations/ treatment up to the LA Health Rate.

Once you have used up the benefits available from the WHO Global outbreak benefit, we pay for out-of-hospital healthcare expenses related to COVID-19 from your available Day-to-day benefits, where applicable.

How to access the WHO Global Outbreak Benefit

To access the benefits outlined above, as part of the WHO Global Outbreak Benefit, you must meet the Scheme's Benefit entry criteria.

The following criteria need to be met before claims will be paid from the WHO Outbreak Benefit:

- The disease needs to be a WHO recognised outbreak disease;
- Cover is for diseases during a declared outbreak period;
- May be subject to use of preferred providers, where applicable;
- Subject to completing the Scheme's risk assessment and referral process for screening and testing;
- Subject to the Scheme's treatment guidelines and protocols.

Am I covered if I am in a waiting period?

The Scheme resolved to change its approach to underwriting for the duration of the outbreak, specifically for cover related to COVID-19.

Members who are diagnosed with COVID-19 after joining the Scheme will have access to cover for COVID-19, even if they are subject to a waiting period at the time of being diagnosed with COVID-19.

Members that are diagnosed with COVID-19 before joining the Scheme, are subject to normal underwriting rules and waiting periods, and will not have access to the cover.

In an emergency

If you have an emergency, call Discovery 911 on 082 911. You can request ambulance services, or go straight to hospital.

Understanding Long COVID-19

Long COVID is the term commonly used to describe signs and symptoms that continue or develop after acute COVID-19 illness. It includes both ongoing symptomatic COVID-19 (from four to 12 weeks) and post COVID-19 syndrome (12 weeks or more). Some symptoms may only start for the first time three to four weeks after the acute COVID-19 infection.

Common symptoms of Long COVID-19 include:

- Fatigue
- Persistent loss of smell and taste
- Shortness of breath
- Joint or muscle pains
- Persistent cough
- Headaches
- Difficulty thinking or concentrating (sometimes referred to as “brain fog”)

Other symptoms that have been reported include chest or stomach pain, fast-beating or pounding heart (also known as heart palpitations), pins-and-needles, diarrhoea, sleep problems, fever, dizziness on standing (light-headedness), body rash, mood changes, changes in menstrual cycles.

Illness severity can range from mild to critical:

- Mild to moderate – mild symptoms, mild pneumonia, occurs in approximately 80% of cases
- Severe - difficulty breathing, requiring oxygen, generally results in an hospital admission
- Critical - requiring intensive care.

Benefit activation:

Members who have been identified through qualifying claims will be allocated the benefit depending on their severity levels. You can also apply for the benefit by using the PMB application form.

How you are covered when diagnosed with monkeypox

This benefit, available on all options, is covered by the Scheme for cases of outbreak diseases and out-of-hospital healthcare services related to monkeypox and does not affect your day-to-day benefits, where applicable.

This benefit offers cover for out-of-hospital management and appropriate supportive treatment of global World Health Organization (WHO) recognised disease outbreaks and out-of-hospital healthcare services related to the management of monkeypox.

The basket of care for confirmed cases includes:

- A diagnostic PCR screening test
- Two consultations with a dermatologist or GP
- Supportive medicine formulary for pain management.

Cover is subject to the Scheme's preferred providers (where applicable), protocols and the treatment meeting the Scheme's entry criteria and guidelines. Any recommended treatment and healthcare services that are not included in the basket of care are covered according to the benefits available on your chosen benefit option or in accordance with Prescribed Minimum Benefits (PMBs), where applicable.

In-hospital treatment related to monkeypox treatment and/or complications for approved admissions are covered from the Hospital Benefit based on your chosen health plan and in accordance with Prescribed Minimum Benefits (PMB), where applicable.

Contact us

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Complaints process

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

Once the Scheme's internal processes are exhausted, and the issues remains unresolved, you may 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 / complaints@medicalschemes.co.za / 0861 123 267/ www.medicalschemes.co.za