

The Screening and Preventative Care Benefit

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 of the Scheme.

The tests that the Preventative Care Benefit covers

Having these specific tests (up to the specified number) does not affect your day-to-day benefits and you should not have any out-of-pocket expenses.

Mammograms

One mammogram every two years*, paid up to a maximum of the LA Health Rate or yearly screening for high-risk members.

In addition, high risk members also have access to additional tests where they meet the clinical entry criteria. These tests are:

- A breast MRI scan
- BRCA testing (once-off) for those with a genetic risk.

Consultations and related costs are paid from your available day-to-day benefits.

Once you have reached the frequency limit for these tests, any additional screening and preventative test will be paid from your available day-to-day benefits.

Pap smear

One Pap smear every three years*, paid up to a maximum of the LA Health Rate. We provide yearly screening for high-risk members so that they can schedule their regular follow ups for appropriate screening. You must be referred by an appropriate provider for the test.

Prostate-Specific Antigen (PSA) test

One test a year, paid up to a maximum of the LA Health Rate. You must be referred by an appropriate provider for the test.

HIV blood tests

This includes Rapid, ELISA and Western blot tests.

The Preventative Care Benefit provides unlimited cover for HIV screening tests, paid up to a maximum of the LA Health Rate.

*If you had your screening mammogram and/or Pap smear done in 2023 and are not at high risk, your next mammogram and/or Pap smear will pay from the Preventative Care Benefit in 2025 or 2026 respectively.

Colorectal Screening

You have access to one Faecal Occult or Immunochemical test, every 2 years, if you are between 45 and 75 years old.

If you meet criteria, as high risk, you will have further access to one Colonoscopy screening for colorectal cancer.

Pharmacy Screening Benefit

You have cover for the following group of tests at any pharmacy in the Scheme's Network:

- Blood glucose
- Blood pressure
- Cholesterol
- Body mass index or weight assessment
- One LDL Cholesterol test for members at risk each year

The Scheme will pay for all of these tests if you have it done on the same day, or for any one of them if it is done separately.

OR

The Scheme will pay for one flu vaccination per year for each of the registered beneficiaries.

If you are registered for one of the following chronic conditions, the Scheme will pay for a Flu vaccine even if you have already used your Pharmacy Screening Benefit:

- Asthma
- Bronchiectasis
- Cardiac failure
- Cardiomyopathy
- Chronic obstructive pulmonary disease (COPD)
- Chronic renal disease
- Coronary artery disease
- Diabetes (Types 1 and 2)
- HIV

Screening for Seniors

You qualify for one Senior Vitality Health Check and one seasonal flu vaccine each year if you are older than 65 years.

Kids Screening

You have cover for the following growth assessment tests for children up to 18 years old, at any network pharmacy, paid up to the LA Health Rate.

- Weight assessment (Body Mass Index), including counselling when necessary
- Basic hearing test
- Basic dental screening

- Milestone tracking for children between the ages of 2 and 8 years.

How to get the most out of the benefits available to you

Find a pharmacy in the network on www.lahealth.co.za > Find a healthcare professional.

You must have all of the screening tests done at the same time at a network pharmacy and you can choose where to have your screening tests done. However, if you choose not to use a network provider, we will pay from the Day-to-day benefits up to the Scheme Rate, if available, and any shortfalls will be for your own pocket.

What this benefit may expose you to

The preventive tests, including the mammogram, Pap smear, Prostate Specific Antigen and HIV tests are paid up to the LA Health Rate. You will be responsible for any shortfall if the healthcare provider charges more than the LA Health Rate.

The Screening and Preventative Care Benefit does not cover the cost of any related consultations. Consultations are covered from the available funds in your Day-to-day benefits.

If you have a Pap smear or mammogram done, and the outcome of the test is related to a Prescribed Minimum Benefit condition, the Scheme will pay for the consultation without using your day-to-day benefits.

The Screening and Preventative Care Benefit covers one of each type of test in a year with the exception of HIV blood tests, which are unlimited. Further tests will be paid from your available Day-to-day benefits.

An appropriately registered healthcare professional must do these preventative screenings. You can visit any pathologist or radiologist to have the tests done.

Contact us

For further information call us on 0860 103 933 or visit us at www.lahealth.co.za.

Complaints process

You may 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 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 / www.medicalschemes.co.za