SAMWUMED

Affordable Quality Health Care for all local government/ municipality workers.

At SAMWUMED we believe that a healthier tomorrow begins with the choices we make today. That's why we're dedicated to providing innovative solutions to support our members' wellness journey. We have been doing that since 1952.

From new and improved benefits to comprehensive healthcare programmes- our mission is to empower our members to live their best lives.

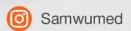
Join and Stay with SAMWUMED

SAMWUMED, here to serve those who serve others.

2025BENEFITS
BROCHURE











WELCOME TO SAMWUMED

Our mission goes beyond providing high quality healthcare services and benefits.

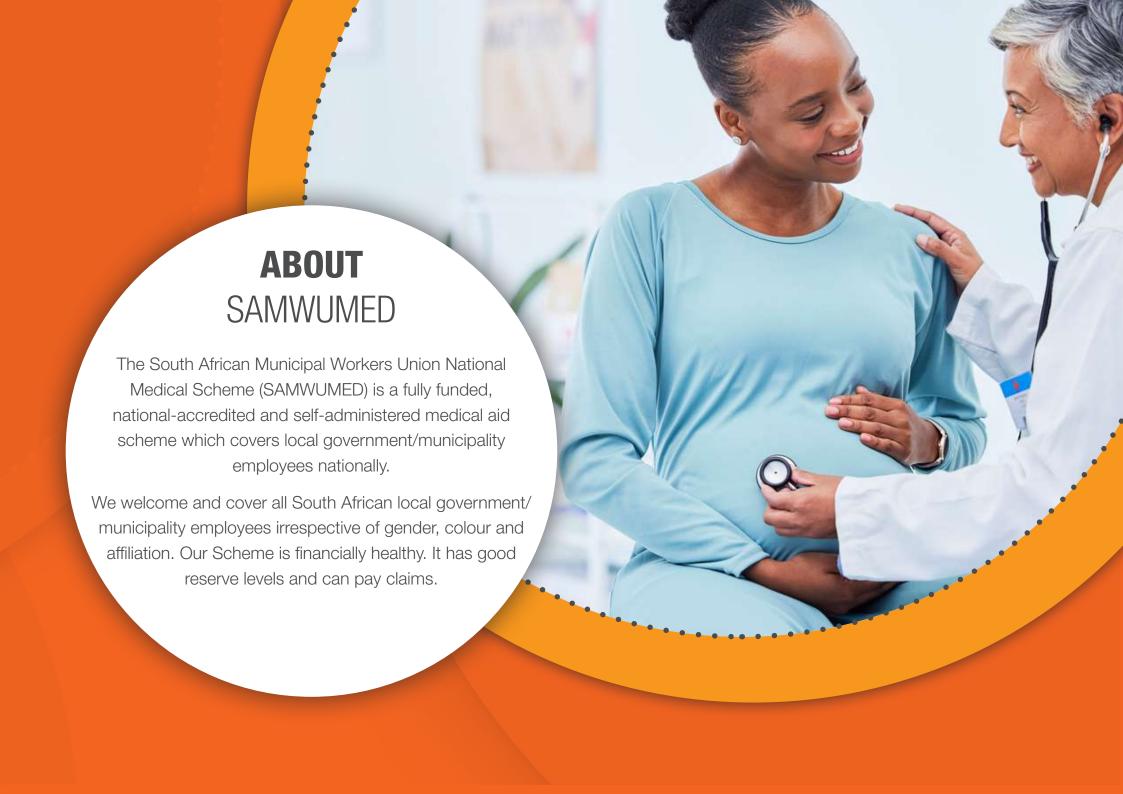
SAMWUMED is dedicated to inspiring communities to live healthy and happy lives.

By continuously reviewing and improving our products and benefits we aim to transform our members' health into a source of joy and vitality.

Your well-being is at the heart of everything we do.

Your health, Our mission! and we're here to make it a reality.





REASONS TO JOIN & STAY WITH SAMWUMED

In 2025 SAMWUMED is introducing new benefit options including a **New Savings Option**

over and above its traditional Option.

For improved care at affordable costs, the Scheme has contracted **New Providers** for dental, optometry and maternity services. Option

Members Enjoy
rich Day-to-Day and
Comprehensive
Hospital benefits.



Member well-being is at the heart of everything we do.



Members Enjoy
Comprehensive
Maternity Benefits,

including: - a baby bag
with goodies for the
mum-to-be
and baby.



Members Enjoy Free Health
Screenings and Assessments
for preventative care including
diabetes, breast & prostate cancer
HIV, and vaccinations.

Members access

Multi-Vitamins without extra
payment, in some instances on
the medication benefit.



The Scheme has extensive healthcare

Networks

ncluding pharmacie hospitals, family practitioners, specialists, dental, optometry and renal dialysis services.





GET READY TO SMILE

We have partnered with DENIS to bring our members even **better dental services.**

To speak to an agent, please Contact DENIS on 0860 104 932 or email

customercare@denis.co.za



DENIS has been appointed by SAMWUMED in the form of a capitated agreement to provide dental risk management services to SAMWUMED from 01/08/2024.



We're easily accessible:

SAMWUMED has extended its already comprehensive communication channels to include WhatsApp for business. Members will be able to WhatsApp us for any queries for fast and effective service.

Member support and customer service is at the heart of what we do:



Through our **newly designed and revamped mobile App,** members have access to all their membership information including benefits and updates at the palm of their hands.



Our user-friendly Member portal on our interactive website members have access to their information and manage it from wherever they may be at their convenience.



For face-to-face interaction and engagement, we have expanded our network of Service Agents and Broker partners.



We are **increasing our walk-in centres** from 5 to 20 in 2025 for effective servicing and in-person consultations

WE HAVE PARTNERED WITH PPN FOR

IMPROVED OPTOMETRY SERVICES

To speak to an agent, please contact the PPN Contact Centre on

041 065 0650 or Email: info@ppn.co.za, Monday – Friday, between 08h00 and 16h30.







All claims are subject to the Validated IT lab order controls and fraud prevention measures.



NEW BENEFIT STRUCTURE

Option A:



Overall
Annual LimitUNLIMITED



Day-to-Day with Savings



Hospital Benefits



Special Programmes



Capitated
Dental & Optical
Benefits



Prevantative Care

Option B:



Overall Annual Limit-R2,021,000 per family



Day-to-Day from Risk



Special Programmes



Hospital Benefits



Capitated
Dental & Optical
Benefits



Prevantative Care

NEW BENEFITS FOR ALL OPTIONS



Family Size Increase (additional benefits for dependants up to M+8)



New Sports Injury Benefit (additional radiology, GP, Specialist and Allied Therapy sessions) funded from risk



New Weight Loss Programme for those with a BMI >30 kg/m²



New Oncology Programme with networks to reduce co-payments for members.



Additional Funding for Diabetic Nurse Educators.



Vaccinations for Whooping Cough



Expanded DBC physiotherapy network to reach more members with back pain.

BENEFITS FROM M+3 to M+



OPTION A

Increase in savings as dependants are added (15% of contributions)

OPTION B

5.2% Benefit Increase Increased from M3+ to M8+:

	GF	% Specialist Consults		Acute Medicine
Family	2024 Limit	2025 Limit	2024 Limit	2025 Limit
M+0	R4 870	R8 320	R4 350	R6 030
M+1	R7 910	R8 320	R5 730	R6 030
M+2	R10 730	R11 290	R8 760	R9 220
M+3	R13 380	R14 080	R111 540	R12 140
M+4		R17 160		R14 460
M+5		R20 140		R17 050
M+6		R23 120		R19 640
M+7		R26 100		R22 230
M+8		R29 080		R24 820

SPORTS INJURY BENEFIT

Additional basket of benefits funded from risk for sports injuries to attract young and healthy members.



1 x Radiologist visit up to R1000



1 x GP Consultation up to R600



2 x Auxiliary Consultation (physio, biokineticist etc.) up to R900



1 x Specialist Consultation up to R1500

WEIGHT LOSS PROGRAM

The core weight management intervention is a 12-week (3 month) programme with a weight management care plan inclusive of the following services. For Obese individuals' additional treatment services would be added to the existing care plan and differentiated according to obesity class:

Code description	Quantity
Initial conultation.	4
Antihropometric/body composition assessment.	
Physical work capacity.	
Individual exercise sessions.	
Group exercise sessions,per patient.	
Exercise on Isokinetic apparatus/ Isotonic/ Isometric resistance equiment.	9
Posture, gait, and activities of daily living (ADL), without equipment use.	
Passive and active range of motion exercise therapy.	
Nutritional Assessment, Counselling/treatment	2
Psychology Assessment, Counsultation, duration 11-20 minutes.	1

BENEFITS FUNDED FROM SAVINGS



Non-Surgical Procedures & Tests (In Rooms)

Includes ECG, treadmill test, aspiration of joints, etc. (Specialist referral authorization required for medical specialists). (subject to availability of savings).



Sleep Studies (In & Out-of-Hospital)

Covers diagnostic sleep disorder tests (subject to availability of savings). (subject to availability of savings).



Auxiliary Services (In & Out-of-Hospital)

Includes Occupational Therapy, Speech Therapy, Audiology, Dieticians, etc. (specialist referral authorization required). (subject to availability of savings).



Radiology:

Subject to **R3,390** per family limit per year when performed out of hospital and included in Savings account. (subject to availability of savings).



Pathology (Out-of-Hospital)

Subject to savings for out-of-hospital services. Excludes certain tariff codes which are covered elsewhere in the rules. (subject to availability of savings).



Physiotherapy & Biokinetics (Out-of-Hospital)

Subject to savings. (subject to availability of savings).

BENEFITS FUNDED FROM RISK

Hospitalisation

Unlimited benefits subject to pre-authorisation at a DSP (Scheme Network hospitals).

The following is for services rendered out of hospital but not included in Savings.



Mental Health (Out-of-Hospital)



Limited to R3,160 per family per annum or 10 non-PMB consultations per family per annum, whichever comes first.



Following sub-limits are applicable:

- Registered Counsellors: 3 consultations
- Social Workers: 3 consultations



Appliances (In & Out-of-Hospital)

- Benefits for medical appliances like hear ing aids and wheelchairs:
 - M0: R3,580
 - M1: R5,060
 - M2+: R6,420
- Subject to formularies, preferred suppliers, and scheme rules.





OVERALL ANNUAL LIMIT

Oval
OPTION A
Unlimited



Oval
OPTION B
R2,021, 000
per family per year

DAY-TO-DAY BENEFITS

Out of Hospital) Some benefits funded from Medical Savings Account, which is 15% of total	All benefits funded from Main Risk Benefit	
contributions excluding late joiner penalties.		

DAY-TO-DAY BENEFITS (Continued)

BENEFITS		OPTION A		OPTION B
GP and Specialist consultations, minor procedures and visits. Specialist consultations subject to Nominated GP referral.	SAVINGS	From available savings, family limit increases with each dependant that is added to the membership.	RISK	From risk, family limit increases as up to eight dependants are added to the membership. M0 R5,120 M1 R8,320 M2 R11,290 M3 R14,080 M4 R17,160 M5 R20,140 M6 R23,120 M7 R26,100 M8+ R29,080 R8,320 per beneficiary limit per year with a family limit of R4,320 per year for consultations with Chiropractors, Homeopaths, Naturopaths and Podiatrists. Excludes X-rays performed by Chiropractors
 Occupational Therapist, Speech Therapist, Audiologist, Dietician, Nurse and Orthoptist consultations subject to Nominated GP referral. Physiotherapy and Biokinetics consultations subject to Nominated GP referral and use of Network Providers. 		From available savings, family limit increases for each dependant that is added to the membership. From available savings, family limit increases for each dependant that is added to		From risk, R5,880 per family per year with a R2,410 limit per beneficiary per year. From risk, R5,880 limit per family per year with a R2,410 limit per beneficiary per year.
Pathology and Medical Technology subject to Nominated GP referral.		the membership. From available savings, family limit increases for each dependant that is added to the membership.		From risk, R11,740 limit per family per year, subject to Scheme Network.

DAY-TO-DAY BENEFITS (Continued)

BENEFITS		OPTION A		OPTION B
General Radiology subject to Nominated GP referral, Scheme protocols and Designated Service Provider (DSP) Networks		From available savings, limited to R3,390 per family per year if performed out-of-hospital. Unlimited if performed in-hospital.		From risk, R9,980 limit per family per year if performed out-of-hospital. Unlimited if performed in-hospital.
Specialised Radiology subject to Nominated GP referral and Scheme protocols. Pre- authorisation required for CT scans, MUGA scans, MRI scans Radio isotope studies and virtual colonography.	SAVINGS	From available savings, limited to R10,330 per family per year for both in and out-of-hospital services, subject to authorisation. Virtual colonography and Coronary Angiography limited to one per beneficiary per year. Oncology, organ and stem cell transplant, and renal dialysis radiology expenses are covered under their respective benefits and not from this limit.	RISK	From risk, limited to R15,040 per family per year for both in and out-of -hospital services, subject to authorisation. Virtual colonography and Coronary Angiography limited to one per beneficiary per year. Oncology, organ and stem cell transplant, and renal dialysis radiology expenses are covered under their respective benefits and not from this limit.

DAY-TO-DAY BENEFITS (Continued)

BENEFITS		OPTION A		OPTI	ON B
Acute medicine, which includes Over the Counter (OTC) medicine	SAVINGS	From available savings, family limit increases for each dependant that is added to the membership.	RISK	to eigl members M0 M1 M2 M3 M4 M5 M6 M7 M8+ Subje R6,03 an OT	risk, family limit increases as up ht dependants are added to the pership: R4,580 R6,030 R9,220 R12,140 R14,460 R17,050 R19,640 R22,230 R24,820 ct to the Scheme's medicine list. 30, per beneficiary limit per year with TC limit of R3,400, per family per and a sub-limit R240 per claim.



CAPITATED BENEFITS

BENEFITS

CAPITATED SERVICES

Dentistry

Basic Dentistry subject to Scheme protocols.
 For queries, benefit confirmations, a list of network dentists or to file claims, contact
 DENIS at 0860 104 932 or email customercare@denis.co.za

OPTION A

Not funded from savings.

Benefit available as follows:

M0 R4,460 M1 R5,310 M2 R7,400 M3+ R8,910

Includes consultations, X-rays, cleanings, fillings and restorative treatment, extractions, treatment for pain and sepsis, dentures and associated laboratory treatment. Two check-ups per beneficiary per year (once every 6 months); one extra oral X-rays per beneficiary in a 3-year period, fissure sealant and fluoride treatment limited to beneficiaries younger than 16 years of age, fillings granted once per tooth in 720 days, one set of plastic dentures (an upper and a lower) per beneficiary in a 4-year period, two partial metal frames (an upper and a lower) per beneficiary in a 5-year period. Orthodontic treatment limited to individuals between the ages of 9 and 18 years for functional impairment once per

OPTION B

Do not accumulate to the OAL.

Benefit available as follows:

M0 R9,520 M1 R10,930 M2 R12,710 M3+ R14,310

Includes consultations, X-rays, cleanings, fillings and restorative treatment, extractions, treatment for pain and sepsis, dentures and associated laboratory treatment. Two check-ups per beneficiary per year (once every 6 months); one extra oral X-rays per beneficiary in a 3-year period, fissure sealant and fluoride treatment limited to beneficiaries younger than 16 years of age, fillings granted once per tooth in 720 days, one set of plastic dentures (an upper and a lower) per beneficiary in a 4-year period, two partial metal frames (an upper and a lower) per beneficiary in a 5-year period. Orthodontic treatment limited to individuals between the ages of 9 and 18 years for functional impairment once per beneficiary per lifetime and one beneficiary per calendar vear.

Ca

beneficiary per lifetime and one beneficiary per calendar year.

CAPITATED BENEFITS (Continued)

BENEFITS		OPTION A		OPTION B
 Advanced Dentistry subject to Scheme protocols and pre-authorisation. For queries, benefit confirmations, a list of network dentists or to file claims, contact DENIS at 0860 104 932 or email customercare@denis.co.za. 		Limited to Prescribed Minimum Benefits (PMB) level of care.		Includes comprehensive root canal treatment, crown and bridge work including associated laboratory costs, implants and bone regeneration, orthodontics, periodontics, maxillo-facial surgery and oral pathology.
Optical subject to Scheme protocols and PPN Network. 2-Year benefit cycle from date of service. To access your benefits, view your claim status, lodge a claim or locate the closest PPN Network Optician available 24/7, please visit www.ppn.co.za. If you prefer, email PPN with any queries at info@ppn.co.za, or call 041 065 0650.	Ca	One composite eye test per beneficiary per benefit cycle limited to R755 at Network Provider and R400 at Non-Network Provider. One pair of clear single vision spectacle lenses limited to R215 at Non-Network Provider or clear flat top bifocal spectacle lenses limited to R460 at Non-Network Provider or clear multifocal spectacle lenses limited to R810 at Non-Network Provider. Lenses covered in full at PPN Network Provider. Frame and/or lens enhancements per beneficiary limited to R1,080 at non-network provider and R1,350 at PPN Network Provider. No benefit for readers or contact lenses.	Ca	One composite eye test per beneficiary per benefit cycle limited to R755 at Network Provider and R400 at Non-Network Provider. One pair of clear single vision spectacle lenses limited to R215 at Non-Network Provider or clear flat top bifocal spectacle lenses limited to R460 at Non-Network Provider or clear multifocal spectacle lenses limited to R810 at Non-Network Provider. Lenses covered in full at PPN Network Provider. Frame and/or lens enhancements per beneficiary limited to R1,408 at non-network provider and R1,760 at PPN Network Provider. Contact lenses limited to R3,000 per beneficiary. No benefit for readers.



MAIN RISK BENEFITS

BENEFITS

RISK

Chronic Medicine To use these benefits, your doctor must register your condition by calling 0860333387 or emailing samwumedcmm@medscheme.co.za.
 Funding is subject to protocols, formularies, pre-authorisation, and case management.

OPTION A

Not funded from savings.

Option A covers 26 Chronic Disease List conditions plus depression, GORD, and gout. Covered CDL conditions include Addison's, asthma, bipolar, bronchiectasis, heart failure, cardiomyopathy, COPD, chronic kidney disease, coronary disease, Crohn's, diabetes, dysrhythmias, epilepsy, glaucoma, haemophilia, HIV, high cholesterol, hypertension, hypothyroidism, Multiple Sclerosis, Parkinson's, rheumatoid arthritis, schizophrenia, lupus, and ulcerative colitis. Your doctor should inform you about medication exclusions and prescribe from our formulary to avoid a 25% co-payment. Choose a listed pharmacy and consider generics to prevent extra co-payments.

OPTION B

Main Risk

Accumulates to the OAL.

Option B covers 26 Chronic Disease List conditions plus depression, GORD, gout, eczema and menopause. Covered CDL conditions include Addison's disease. asthma, bipolar disorder, bronchiectasis, heart failure, cardiomyopathy, COPD, chronic kidney disease, coronary disease, Crohn's disease, diabetes, dysrhythmias, epilepsy, glaucoma, haemophilia, HIV, high cholesterol, hypertension, hypothyroidism, Multiple Sclerosis, Parkinson's disease, rheumatoid arthritis. schizophrenia, lupus, and ulcerative colitis. Your doctor should inform you about medication exclusions and prescribe from our formulary to avoid a 25% co-payment. Choose a listed pharmacy and consider generics to prevent extra co-payments.

Main Risk

BENEFITS		OPTION A		OPTION B
Oncology (cancer treatment) Contact 0860333387 or cancerinfo@medscheme.co.za to access this benefit, which requires adherence to health protocols and pre-approval.	Main Risk	Option A offers unlimited PMB cancer coverage. Voluntary use of a nonnetwork facility or non-Designated Service Provider for oncology medication and consumables will incur a 25% co-payment. PET scans can only be performed at accredited practices and require additional authorisation. Post-chemo/radiotherapy chronic conditions aren't covered. Oncology medication is subject to Medicine Price List (MPL) and Preferred Product List, while the evolving Oncology Specialised Drug List covers various advanced therapies.	Main Risk	Option B offers unlimited PMB cancer coverage and up to R384,500 annually for non-PMB cancers. Voluntary use of a non-network facility or non-Designated Service Provider for oncology medication and consumables will incur a 25% co-payment. PET scans can only be performed at accredited practices and require additional authorisation. Post-chemo/radiotherapy chronic conditions aren't covered. Oncology medication is subject to Medicine Price List (MPL) and Preferred Product List, while the evolving Oncology Specialised Drug List covers various advanced therapies.
 Ambulance services in the event of a life-threatening emergency necessitating an ambulance for transport to a hospital, please contact 082911. 	Š	Ambulance services are covered in full when authorized by Netcare911 .	Š	Ambulance services are covered in full when authorized by Netcare911 .
 Hospital authorise your hospitalisation at least three working days before a planned admission or on the first working day following an emergency admission by calling 0860333387 or email samwumed. authorisations@medscheme.co.za to. For a list of network hospitals and doctors, visit www. samwumed.org or call us at 0860104117 for assistance. 		Your family has unlimited cover for hospitalisation. Avoid a R1,000 co-payment by authorising your admission. Use our network doctors and hospitals that charge scheme rates to avoid extra 25% co-payments. For planned admissions, ask your admitting doctor for the names of all healthcare providers who will be involved with your care to ensure that they are on our network.		Your family is covered for hospitalisation up to your overall annual limit of R2,021,000. Avoid a R1,000 co-payment by authorising your admission. Use our network doctors and hospitals that charge scheme rates to avoid extra 25% co-payments. For planned admissions, ask your admitting doctor for the names of all healthcare providers who will be involved with your care to ensure that they are on our network.

BENEFITS

 Maternity Register on our maternity programme to receive a maternity bag in your third trimester by calling 021 003 0256 or emailing Samwumed@Tshela.co.za.

- Mental Health In Hospital PMB protocols apply. Subject to clinical motivation and authorisation
- Mental Health Out of Hospital PMB protocols apply. Subject to clinical motivation and authorisation

OPTION A

Main Risk

Our maternity benefits include folic acid and iron support in the first trimester, up to eight midwife antenatal visits, and two yearly 2D ultrasounds per person. Use network doctors and approved hospitals to avoid a 25% co-payment fee. Pre-authorise your child's birth at either a registered birthing facility for natural delivery with a midwife and receive four midwife postnatal appointments or at a network hospital with a network doctor and receive a six-week post-birth checkup. Note that there's an annual R32,950 limit for Caesarean sections per family unless PMB level of care.

Limited to PMB level of care and to a maximum of 21 days or 15 outpatient contacts per year.

Limited to **R3,160** per family per year. Unlimited for PMB level of care or when registered on the Mental Health Programme.

OPTION B

Our maternity benefits include folic acid and iron support in the first trimester, up to eight midwife antenatal visits, and three yearly 2D ultrasounds per person. Use network doctors and approved hospitals to avoid a 25% co-payment fee. Pre-authorise your child's birth at either a registered birthing facility for natural delivery with a midwife and receive four midwife postnatal appointments or at a network hospital with a network doctor and receive a six-week post-birth checkup. Note that there's an annual R35,250 limit for Caesarean sections per family unless PMB level of care

Limited to PMB level of care and to a maximum of 21 days or 15 outpatient contacts per year.

Limited to **R5,260** per family per year. Unlimited for PMB level of care or when registered on the Mental Health Programme.

Main Risk

BENEFITS

• Appliances Subject to clinical motivation and authorisation

OPTION A

Option A covers medical and surgical devices, including orthotics, within a yearly limit based on your number of Dependant numbers:

R3,580 MO M1 R5,060 M2+ R6,420

Mobility aids like crutches, walking frames, slings, and collars are covered without prior approval up to the yearly limit. Immobilisation splints for limbs are also covered every year, and foot-related orthotics every two years without pre-authorisation. However, oxygen therapy, CPAP devices, certain boots and braces, incontinence and stoma products require pre-authorisation. Blood pressure monitors and other medical devices have a four-year cycle but need chronic medicine authorization, while costly items like hearing aids, manual wheelchairs and spinal braces also need authorisation and have a four-year cycle. There is no funding for electric wheelchairs and scooters.

OPTION B

Main Risk

Option B covers medical and surgical devices, including orthotics, within an annual family limit of R 7,890. Mobility aids like crutches, walking frames, slings, and collars are and immobilisation splints are funded without prior approval. Foot-related orthotics are funded every two years without pre-authorisation. However, oxygen therapy, CPAP devices, certain boots and braces, incontinence and stoma products require pre-authorisation. Blood pressure monitors and other medical devices have a four-year cycle but need chronic medicine authorization, while costly items like hearing aids, manual wheelchairs and spinal braces also need authorisation and have a four-year cycle. There is no funding for electric wheelchairs and scooters.

Main Risk

BENEFITS

- Internal Prostheses and Devices Clinical motivation, quotations from at least three providers and pre-authorisation are required to access these benefits. The Scheme maintains the right to procure prostheses on behalf of members and to deduct the members' allocated benefits.
- External Prostheses and Devices Clinical motivation, quotations from at least three providers and pre-authorisation are required to access these benefits. The Scheme maintains the right to procure prostheses on behalf of members and to deduct the members' allocated benefits.

OPTION A

Main Risk

There is an annual family limit of R34,560 for internal prostheses. This includes temporary prostheses and any related apparatus, such as bone cement, bone graft substitutes, and bone anchors. Use our preferred providers for hip and knee replacement prostheses to avoid a R10,000 co-payment for voluntary out-of-network use.

An annual family benefit of R25,700 is in place for external prosthetics, including artificial eyes, limbs, breast prosthetics and bras. The scheme also has the discretion to directly procure the needed appliance, which may be charged against the member's entitlement. An annual limit of R18,020 per beneficiary is in place for artificial iris implants.

OPTION B

Main Risk

There is an annual family limit of R35,250 for internal prostheses. This includes temporary prostheses and any related apparatus, such as bone cement, bone graft substitutes, and bone anchors. Use our preferred providers for hip and knee replacement prostheses to avoid a R10,000 co-payment for voluntary out-of-network use.

An annual family benefit of R30,000 is in place for external prosthetics, including artificial eyes, limbs, breast prosthetics and bras. The scheme also has the discretion to directly procure the needed appliance, which may be charged against the member's entitlement. An annual limit of R18,020 per beneficiary is in place for artificial iris implants.

SAMWUMED CARES WELLNESS (PREVANTATIVE CARE) PROGRAMME

Apart from ensuring our members do not find themselves in hospitals, the SAMWUMED Cares Wellness (Prevantative Care) Programme and early detection benefit, provides members with an opportunity to take ownership of their own health. Our amazing Programmes includes the following screenings:

Age: 18 yrs and older

Screening Test: Blood Pressure

2025 Benefit: Up to one screening, per

beneficiary per year.

Age: 18 yrs and older

Screening Test: Type II Diabetes

2025 Benefit: Up to one screening per

beneficiary aged 18 years and older per year.

Age: 18 yrs and older

Screening Test: Papanicolaou (Pap) Test 2025 Benefit: Up to one screening per female beneficiary per year within a

2-year cycle.

Age: 18 yrs and older

Screening Test: Chlamydia Screening 2025 Benefit: Up to one screening per female beneficiary per year within a

2-year cycle.

Age: Child-bearing age

Age: From age 20

Screening Test: Folic Acid

every year for high risk members.

2025 Benefit: Up to 1 per month for the first 3

Screening Test: Total Blood Cholesterol

2025 Benefit: Up to one test for all adults at

least once from the age of 20 years old and

months of pregnancy

Age: 50 yrs and older

Screening Test: Faecal Occult Blood Test
2025 Benefit: Up to one screening per

beneficiary per year.

Age: Over the age of 50 until the age of 70

Screening Test: Mammogram

2025 Benefit: Up to one screening per female beneficiary every two years over the

age of 50 until age of 70 years.

Age: 65 yrs to 70 yrs

Screening Test: Bone Density Test **2025 Benefit:** Up to one test for male

beneficiaries aged 70 years and older and one test for female beneficiaries aged 65 years and

older per year.

SAMWUMED CARES WELLNESS (PREVANTATIVE CARE) PROGRAMME continued

Age: All ages

Screening Test: HIV

2025 Benefit: One test per beneficiary per

year.

Age:

Screening Test: Flu Vaccine

2025 Benefit: Up to one vaccination per

beneficiary per year.

Age: 2 yrs to 65 yrs

Screening Test: Pneumococcal Vaccine **2025 Benefit:** Up to one vaccination per beneficiary 65 years and older and for beneficiaries aged 2 to 64 years who are at risk of serious pneumococcal disease per lifetime.

Age: All beneficiaries

Screening Test: Health Risk Assessment **2025 Benefit:** Up to one assessment per

beneficiary per year.

Age:

Screening Test: Cytology

2025 Benefit: One test per beneficiary,

every three years.

Age:

Screening Test: HIV Counselling & Tests **2025 Benefit:** Unlimited based on clinical and PMB protocols per beneficiary

per year.

Age: Female

Screening Test: HPV Vaccine

2025 Benefit: Up to one vaccination per female beneficiary between age 9 and 14 years per annum. 3 doses per benficiary

between 15 and 26 years.

Age: New-borns

Screening Test: Hearing Test **2025 Benefit:** One hearing test per new-born baby before 6 weeks of age.

Age: Less than 1 month old
Screening Test: TSH Screening

2025 Benefit: Up to 1 test per new born

less than 1 month old per year.

Age:

Screening Test: Child Immunisation **2025 Benefit:** As per Immunisations prescribed by the South African Expanded Immunisation Programme.

Age: 7 yrs to 64 yrs

Screening Test: Pertussis (Whooping

Cough) Booster

2025 Benefit: Up to one vaccination per beneficiary between age 7 and 64 and 1 vaccine per pregnancy in the third trimester

Age: 45 yrs to 70 yrs

Screening Test: Prostate Antigen Test **2025 Benefit:** Up to one test per year per

male beneficiary aged between

45 - 70 years.



2025 CONTRIBUTION 100% TABLES

Option A 2025

Salary Band	Principal Member	Adult Dep	Child Dep	Member +Spouse	Member +Spouse +1 Child
R0 - R4 220	R1 728,00	R1 728,00	R609,00	R3 456,00	R4 065,00
R4 221 - R6 810	R2 040,00	R2 040,00	R716,00	R4 080,00	R4 796,00
R6 811- R10 490	R2 598,00	R2 598,00	R907,00	R5 196,00	R6 103,00
R10 491+	R2 853,00	R2 853,00	R1006,00	R5 706,00	R6 712,00

Option A 2025 ANNUAL UPFRONT MEDICAL SAVINGS

Salary Band	R0 - R4 220	R4 221 - R6 810	R6 811- R10 490	R10 491+
Principal Member	R3 108,00	R3 672,00	R4 680,00	R5 136,00
Adult Dependant	R3 108,00	R3 672,00	R4 680,00	R5 136,00
Child Dependant	R1 092,00	R1 284,00	R1 632,00	R1 812,00
Member + Spouse	R6 216,00	R7 344,00	R9 360,00	R10 272,00
Member+ Spouse + 1 Child	R7 308,00	R8 628,00	R10 992,00	R12 084,00
Member+Spouse + 2 Children	R8 400,00	R9 912,00	R12 624,00	R13 896,00
Member + Spouse + 3 Children	R9 492,00	R11196,00	R14 256,00	R15 708,00

2025 CONTRIBUTION 100% TABLES

Option B 2025

Salary Band	Principal Member	Adult Dep	Child Dep	Member +Spouse	Member +Spouse +1 Child
R0 - R6 270	R2 916,00	R2 916,00	R1 023,00	R5 832,00	R6 855,00
R6 271- R8 650	R3 528,00	R3 528,00	R1 239,00	R7 056,00	R8 295,00
R8 651- R16 000	R3 616,00	R3 616,00	R1 271,00	R7 232,00	R8 503,00
R16 001+	R3 998,00	R3 998,00	R1 317,00	R7 996,00	R9 313,00

SAMWUMED HEALTHCARE PROGRAMMES



Mental Health Programme - Tel: 0860 33 33 87

SAMWUMED covers its members for mental health and substance abuse dependency (drug abuse), including hospitalisation. The benefits apply to consultations or visits as well as procedures.

How to access this benefit:

To register your mental health condition, simply call **0860 106 155 or email membercare@medscheme.co.za** to find out whether you meet the criteria for this programme.



Chronic Medicine Management
Programme – Tel: 0860 33 33 87,
Email: samwumedcmm@medscheme.co.za

The Programme is aimed at helping our members and their dependents who suffers from chronic illnesses to receive their Chronic Medication un-interrupted.

How to access this benefit:-

Registering on the Chronic Medicine Management (CMM) Programme

To be able to access this benefit, Members and their dependents have to register on the Programme. Register Telephonically: Call CMM between 08:30am and 4pm on 0860 33 33 87 and select the chronic option.

SAMWUMED HEALTHCARE PROGRAMMES



HIV Management Programme

- Tel: 0860 100 646,

Email: afa@afadm.co.za

SAMWUMED offers Members and beneficiaries with HIV/AIDS complete HIV disease management assistance under its AID for AID (AfA) Programme.

How to access this benefit:-

If you are diagnosed with HIV, your doctor must contact Aid for AIDS to register you on the HIV Management Programme. The details are:

Tel: 0860 100 646 or 083 410 9078

Email: afa@afadm.co.za



Cancer Disease Management Programme – Tel: 0860 100 572, Email: cancerinfo@medscheme.co.za

This programme us aimed at helping our members and their dependents suffering from Cancer to get the right treatment to manage their disease and also improve the quality of their lives.

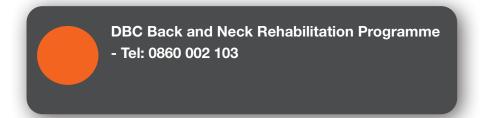
How to access this benefit:-

Pre-Authorisation

Pre authorisation is the process where the treatment process is approved first before it is provided. This is to ensure that there is value through the planned intervention.

The treating doctor can call **0860 100 572** for patient pre authorisation.

SAMWUMED HEALTHCARE PROGRAMMES



The DBC (Documentation Based Care) back and neck rehabilitation programme is a physiotherapy and rehabilitation programme that helps members and dependents who suffer primarily from back and neck problems.

How to access the programme:-

Accessing the Programme

Members can access the programme through various ways, for example:

- If admitted to hospital with back or neck surgery (for example a spinal fusion), pain management (for example a rhizotomy) or specialised radiology (for example an MRI scan)
- A member may also contact the Member Contact Centre on 0860 106 155 or email: membercare@medscheme.co.za should they experience chronic, ongoing back or neck pain.



GoSmokeFree Programme - Tel: 0860 33 33 87

Are you struggling with smoking, SAMWUMED has a programme to help members to stop smoking for their own health.

How to access the programme

SAMWUMED members quality for up to one course per beneficiary per lifetime.

Please consult with your local pharmacy to confirm if they offer the service.



SAMWUMED

Real Heritage. Real People. Real Health Care.

We have Consultants nation wide. For more information please visit www.samwumed.org or Download SAMWUMED Mobile App.

Cnr Trematon & Lascelles Streets, Athlone, Cape town, 7760

Telephone: 021 697 9000 Contact centre: 0860 104 117

www.samwumed.org

Do you have a complaint against SAMWUMED? Send your complaint to: complaints@samwumed.org or Contact Council for Medical Schemes (CMS) on:

(086) 673 2466 (fax), complaints@medicalschemes.co.za or by post The Council for Medical Schemes Complaints Unit, Private Bag X34, Hatfield, 0028

