

Medical Scheme Name	BONITAS	FEDHEALTH - SANTAM	FEDHEALTH - SANTAM	FEDHEALTH - SANTAM
IMPORTANT: Bonitas Medical Fund will no longer be an employer selected medical scheme from 2025. Bonitas Medical Fund reflects solely for the purpose to compare available benefits and options on Fedhealth Medical Scheme.		SIMILAR OPTION	BUY UP OPTION	BUY DOWN OPTION
Benefits	BonSave - 2025	FlexiFED 2 GRID Max Savings - 2025	flexiFED 3 GRID Max Savings - 2025	flexiFED 1 Max Savings - 2025
Contribution	Refer to the guidance letter for contributions.	Refer to the guidance letter for contributions.	Refer to the guidance letter for contributions.	Refer to the guidance letter for contributions.
Overall Annual Maximum	Unlimited	Unlimited at a network hospital	Unlimited at a network hospital	Unlimited at Network Hospitals
Hospital Benefit				
1 Private Hospital Care	Network Private Hospitals	Unlimited, at any private hospital. Fedhealth Network GP's and specialists are unlimited and paid in full. Non-network GP's, specialists and other healthcare professionals are paid up to the Fedhealth Rate.	Unlimited, at a network hospital. Fedhealth Network GP's and specialists are unlimited and paid in full. Non-network GP's, specialists and other healthcare professionals are paid up to the Fedhealth Rate.	Unlimited, at a network hospital. Fedhealth Network GP's and specialists are unlimited and paid in full. Non-network GP's, specialists and other healthcare professionals are paid up to the Fedhealth Rate.
2 Co-payment	30% Co-payment for use of non-network Hospital. Chronic: 30% use of non-formulary drugs or use of non-DSP, 19 elective procedures and Endoscopies attracts a co-payment (R1 940, R4 930, R9 130), 20% for non-DSP for Kidney Dialysis treatment and for Cancer Medication. Oncology: 30% for non-DSP and 20% co-pay once Cancer Limit is reached. R1 860 co-payment per MRI/CT scan for non PMB scans	A R15 470 co-payment on the use of non-network hospitals. A R2 500 co-payment on the use of non-network day surgery facilities. Co- payments applicable to a defined list of procedures ranging from R5 440 to R10 070	A R15 470 co-payment on the use of non-network hospitals. A R2 630 co-payment on the use of non-network day surgery facilities. Co- payments applicable to a defined list of procedures ranging from R 5,730 to R 33,490	R8 840 co-payment on voluntary use of non-network hospital. R2 630 co-payment on voluntary use of non-network day surgery facilities. Co-payments applicable to a defined list of procedures ranging from R5 440 to R10 070
3 Oncology	Unlimited for PMB. Limited to R224 100 p/f p/a for non-PMB at the DSP. Once limit is reached, a 20% co-pay will apply for continuous treatment. Pre-auth required, Sublimit of R60 680 p/b for Brachytherapy. Cancer medication subject to preferred product list and use of DSP or a 20% co-payment	Oncology is covered up to R311 900 per family per annum. Preferred ICON subject to tier 1 Primary level of care. Non-use of DSP for medication and consumables will result in a 25% co-payment.	Oncology is covered up to R350 000 per family per annum. Preferred ICON and subject to tier 1 Primary level of care.	Unlimited at PMB level of care. Preferred provider ICON (Essential Protocol) Non-use of DSP for medication and consumables will result in a 25% co-payment.
4 Organ Transplants	Unlimited, subject to pre-auth, sublimit R41 070 p/b for corneal grafts	Limited to R311 900 per annum.	Limited to R311 900 per annum	Unlimited at cost at PMB level of care. No benefit for Corneal graft
5 Dialysis	Unlimited, subject to pre-auth, DSP or 20% co-payment	Limited to R311 900 per annum up to the Fedhealth Rate at a DSP.	Limited to R311 900 up to the Fedhealth Rate at a DSP	Unlimited at cost at PMB Level of care at DSP. A 40% co-payment applies where a DSP provider is not used.
6 Maternity - Natural Birth	Unlimited, subject to authorisation	Fedhealth Network GP's and Specialists are unlimited and paid in full. Non-network GP's, Specialists and other healthcare providers are paid up to the Fedhealth Rate.	Fedhealth Network GP's and Specialists are unlimited and paid in full. Non-network GP's, Specialists and other healthcare providers are paid up to the Fedhealth Rate. Private ward cover (when available).	Unlimited. Paid in full. Non-network GP's and specialists paid up to the Fedhealth Rate.
Elective Caesarean	Unlimited, subject to authorisation	Unlimited. Paid in full. Non-network GP's and specialists paid up to the Fedhealth Rate.	Unlimited. Paid in full. Non-network GP's and specialists paid up to the Fedhealth Rate.	Unlimited. Paid in full. Non-network GP's and specialists paid up to the Fedhealth Rate
7 To take home medication	Limited to a 7 day supply up R 500 per admission	7 days of take-home medicine when discharged from hospital.	7 days of take-home medicine when discharged from hospital.	7 days of take-home medicine when discharged from hospital.
8 Psychiatric Hospitalisation	Limited to R41 190 p/f p/a in DSP, sub-limit of R20 310 p/f for in and out of hospital consultations at a DSP. Physiotherapy excluded for all Mental Health admissions	Limited to R26 400 per annum	Limited to R28 000 per annum	Unlimited at cost at PMB level of care
Radiology/Pathology/Prosthesis				
1 Basic Radiology	Unlimited, at 100% of the scheme rate	Unlimited at Fedhealth Rate	Unlimited at Fedhealth Rate.	Unlimited at Fedhealth Rate
2 MRI CT & PET Scans	Limited to R30 430 p/f p/a (in and out-of-hospital), subject to pre-auth. Co-payment of R1 860 per scan except for PMB	Unlimited at Fedhealth Rate. First R2 960 for non PMB MRI/CT scans for the member's account	Unlimited at Fedhealth Rate. First R5 500 for non PMB MRI/CT scans for the member's account.	Unlimited at Fedhealth Rate. First R4 100 for non-PMB MRI/CT scans for the member's account.
3 Pathology	Unlimited, at 100% of the scheme rate	Unlimited at Fedhealth Rate	Unlimited at Fedhealth Rate.	Unlimited at Fedhealth Rate

Medical Scheme Name	BONITAS	FEDHEALTH - SANTAM	FEDHEALTH - SANTAM	FEDHEALTH - SANTAM
Benefits	BonSave - 2025	FlexiFED 2 GRID Max Savings - 2025	flexiFED 3 GRID Max Savings - 2025	flexiFED 1 Max Savings - 2025
4 Internal Prosthesis	Limited to R41 070 p/f, subject to pre-auth & DSP apply. No benefit for joint replacement unless PMB. Surgical Procedure exclusions: All costs for services rendered in respect of back and neck surgery are excluded, unless PMB.	Unlimited at cost at PMB level of care	Limited to R65 500 per annum	Unlimited at cost at PMB level of care
Sub Acute Facilities				
1 Hospice	R21 570 p/f, Unlimited Palliative care cancer only at DSP	Limited to R34 500	Limited to R34 500	Limited to R34 500
2 Nursing	Combined with Hospice benefit	Unlimited at negotiated tariff.	Unlimited at negotiated tariff.	Unlimited at negotiated tariff.
3 Ambulance Services	Unlimited - Europ Assistance	Europ Assistance	Europ Assistance	Europ Assistance
Chronic Benefit				
27 CDL chronic conditions	Unlimited - Pharmacy Direct, if not a 30% co-payment will apply and 30% co-payment for use of non-formulary medication	Unlimited cover for conditions on the Chronic Disease List. Medication to be obtained from a DSP.	Unlimited cover for conditions on the Chronic Disease List. Medication to be obtained from a DSP.	Unlimited cover for conditions on the Chronic Disease List. Medication to be obtained from a DSP pharmacy.
Additional chronic conditions	Depression - R160 per beneficiary per month for Depression, subject to managed care protocols and the DSP.	No benefit	An additional list of conditions, subject to a R3200 limit per family per annum.	No benefit
Day-to-day Benefit				
Overall Annual Maximum	Available Savings and additional Scheme/Risk Benefits for basic Dentistry & 1- 2 GP consultations after savings + Supplementary Benefits + R5000 p/f Benefit Booster	Subject to available Savings and Threshold. The Threshold benefit pays for limited day-to-day expenses once claims have accumulated to the Threshold level.	Subject to available Savings and Threshold. The Threshold benefit pays for limited day-to-day expenses once claims have accumulated to the Threshold level.	Subject to available Savings, and Threshold. The Threshold benefit pays for limited day-to-day expenses once claims have accumulated to the Threshold level.
Preferred Provider	Any GP, Specialist	Fedhealth Network GP's and specialists	Fedhealth Network GP's and specialists	Fedhealth Network GP's and specialists
Medical Savings Account	25 % - PM: R11 352, AD: R8 580, C: R3 396	Annual Nominal Savings: PM: R312, AD: R264, C: R84 Annual Max Savings: M: R10 340, M+1: R19 560, M+2: R24 310, M+2+: R27 360	Annual Nominal Savings: PM: R312, AD: R288, C: R108 Annual Max Savings: M: R11 810, M+1: R22 610, M+2: R27 360, M+2+: R31 550	Annual Nominal Savings: PM: R324, AD: R240, C: R108 Annual Max Savings: M: R6 890, M+1: R12 280, M+2: R17 030, M+2+: R19 550
Annual Threshold	N/A	Threshold: M: R6 200, M+1: R11 300, M+2: R12 800, M+3: R16 400	Threshold: M: R 7,900 , M+1:R 13,700 , M+2: R 15,600 , M+3:R 18,400	Threshold: M: R5 400, M+1: R8 600, M+2: R10 500, M+3: R12 500
Self Payment Gap	N/A	Self-payment gap will vary depending on the savings allocation	Self-payment gap will vary depending on the Savings allocation	Self-payment gap will vary depending on the Savings allocation
Above Threshold Benefit	N/A	All day-to-day expenses accumulate to the Threshold level at cost. Thereafter certain claims will be paid from the Threshold Benefit. These include preventative and basic dentistry and unlimited nominated GP Visits.	All day-to-day expenses accumulate to the Threshold level at cost. Thereafter certain claims will be paid from the Threshold Benefit. These include preventative and basic dentistry and unlimited nominated GP Visits.	Unlimited Network GP once your Benefit Threshold level has been reached. Basic preventative dental subject to DSP's and protocols.
GP's and medication				
1 General Practitioners	Subject to available Savings, additional 2 GP visits for a family - 1 p/b when savings exhausted and Benefit Booster	Paid from Savings then unlimited at nominated network GP once Threshold has been reached. Each beneficiary can nominate up to 2 network GP's. Limited to two mental health consultations per beneficiary per year.	Paid from Savings then unlimited at nominated network GP once Threshold has been reached. Each beneficiary can nominate up to 2 network GP's. Limited to two mental health consultations per beneficiary per year.	Paid from Savings then unlimited at nominated network GP once Threshold has been reached. Each beneficiary can nominate up to 2 network GP's. Limited to two mental health consultations per beneficiary per year. Up to 2 network GP consultations p/b for non-nominated GP's allowed OR 2 non-network GP consultations up to Fedhealth Rate. Non-network GP's paid from savings /wallet or self-funded. Accumulates at cost to threshold level.

Medical Scheme Name	BONITAS	FEDHEALTH - SANTAM	FEDHEALTH - SANTAM	FEDHEALTH - SANTAM
Benefits	BonSave - 2025	FlexiFED 2 GRID Max Savings - 2025	flexiFED 3 GRID Max Savings - 2025	flexiFED 1 Max Savings - 2025
2 Specialists	Subject to available Savings, GP referral and the Specialist Network and Benefit Booster	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.
3 Prescribed Medication	Subject to available Savings and Benefit Booster	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.
4 Pharmacy Advised Medicine	Subject to available Savings and Benefit Booster	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.
Radiology & Pathology				
1 Out-Of-Hospital Basic Radiology	Subject to available Savings and Benefit Booster	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.
2 MRI CT & PET Scans	Limited to R30 430 p/f in and out of hospital, subject to pre-auth, R1 860 co-payment per scan for non PMB scans.	Unlimited at Fedhealth Rate. First R2 960 for non-PMB MRI/CT scans for the member's account.	Unlimited at Fedhealth Rate. First R5,000 for non-PMB MRI/CT scans for the member's account	Unlimited at Fedhealth Rate. First R4 100 for non-PMB MRI/CT scans for the member's account
3 Out-Of-Hospital Pathology	Subject to available Savings and Benefit Booster	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.
Dental Benefit				
1 Conservative Dentistry	Subject to Bonitas protocols and sublimits and covered at the Bonitas Dental Tariff (BDT), x-rays, fillings etc. paid from available savings	Paid from Savings or self-funded. Once Threshold level has been reached, 2 annual consultations per beneficiary incl. x-rays and scaling and polishing, fillings, extractions and root canal will also be covered. Subjected to contracted dentists, and limited list of approved procedures and protocols.	Paid from Savings or self-funded. Once Threshold level has been reached, 2 annual consultations per beneficiary incl. x-rays and scaling and polishing, fillings, extractions and root canal will also be covered. Subjected to contracted dentists, and limited list of approved procedures and protocols.	Paid from Savings or self-funded. Once Threshold level is reached, certain benefits paid from the Threshold Benefit.
2 Specialised Dentistry	Subject to available Savings	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.
Optical Benefit				
1 Examination	Paid from savings - 1 consultation per beneficiary at a network provider or R400 per beneficiary for an eye examination at a non network provider	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Limited to R1 930 per beneficiary every 24 months, paid from risk. Thereafter paid from from Savings / Wallet or self-funded. Accumulates at cost to Threshold level	Paid from Savings or self-funded. Accumulates at cost to Threshold level.
2 Lenses	Subject to available savings 100% towards the cost of clear lenses limited to Single vision lenses - R215 per lens p/b, or Bifocal lenses - R460 per lens, p/b or Multifocal lenses - R860 per lens p/b at a non- network provider .	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Limited to R1 930 per beneficiary every 24 months, paid from risk. Thereafter paid from from Savings / Wallet or self-funded. Accumulates at cost to Threshold level	Paid from Savings or self-funded. Accumulates at cost to Threshold level.
3 Frames	Subject to available Savings	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Limited to R1 930 per beneficiary every 24 months, paid from risk. Thereafter paid from from Savings / Wallet or self-funded. Accumulates at cost to Threshold level	Paid from Savings or self-funded. Accumulates at cost to Threshold level.
4 Contact Lenses	Subject to available Savings	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Limited to R1 930 per beneficiary every 24 months, paid from risk. Thereafter paid from from Savings / Wallet or self-funded. Accumulates at cost to Threshold level	Paid from Savings or self-funded. Accumulates at cost to Threshold level.
Auxiliary Services				
1 Physiotherapy	Subject to available Savings and Benefit Booster	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level..	Paid from Savings or self-funded. Accumulates at cost to Threshold level.
2 Psychiatry	R 21 570 p/f, in and out of hospital consultations (included in mental health hospitalization benefit)	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.

Medical Scheme Name	BONITAS	FEDHEALTH - SANTAM	FEDHEALTH - SANTAM	FEDHEALTH - SANTAM
Benefits	BonSave - 2025	FlexiFED 2 GRID Max Savings - 2025	flexiFED 3 GRID Max Savings - 2025	flexiFED 1 Max Savings - 2025
3 Psychology	Combined with above Psychiatry benefit	Paid from Savings or self-fund. Accumulates at cost to Threshold Level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.	Paid from Savings or self-funded. Accumulates at cost to Threshold level.
HIV/AIDS	Unlimited if registered on the HIV/AIDS programme. Chronic medicine must be obtained from the DSP	Unlimited. Aid for AIDS Management Program	Unlimited. Aid for AIDS Management Program	Unlimited. Aid for Aids Management Program.
Financial and Demographic				
1 Date of information	2023-11-01	2023-11-01	2023-11-01	2023-11-01
2 Principal Members	Scheme - 353 763 (40 607)	Scheme - 62 859 (4 161)	Scheme - 62 859 (2 321)	Scheme - 62 859 (17 563)
3 Administrator	Medscheme Holdings (Pty) Ltd	Medscheme Holdings (Pty) Ltd	Medscheme Holdings (Pty) Ltd	Medscheme Holdings (Pty) Ltd
4 Scheme (Option) age profile	Average age - 35.5 (32); Pensioner % - 11% (7.2%)	Average age - 42.3 (39.3); Pensioner % - 20.7% (16.5%)	Average age - 42.3 (47.9); Pensioner % - 20.7% (30.9%)	Average age - 42.3 (33.3); Pensioner % - 19.10% (7.1%)
5 Solvency ratio	41.3%	43.39%	43.39%	43.39%
6 Past Scheme increases	2022 - 4.8%, 2023 - 5.9%, 2024 - 6.9%, 2025 - 10.2%	2022 - 5.5%, 2023 - 8.8%, 2024 - 10.8%, 2025 - 12.4%	2022 - 5.5%, 2023 - 8.8%, 2024 - 10.8%, 2025 - 12.4%	2022 - 5.5%, 2023 - 8.8%, 2024 - 10.8%, 2025 - 12.4%
Contribution				
Descriptions				
Plan Description	The BonSave Plan offers unlimited private network hospital cover. Guaranteed Cover in hospital for specialists up to 100% of the Bonitas rate. Cover for chronic medicine for 28 Chronic Disease List conditions. The savings account for consultations and acute medicine. Maternity benefits and annual wellness screening and R5 000 for Benefit Booster. Cover for medical emergencies when travelling.	The FlexFed 2 Grid option is for family start-ups. Benefits include unlimited hospitalisation on the network, Chronic medication, Oncology, Rich Maternity benefits, childhood benefits which include HPV Vaccine for girls between the ages 9 to 14, mental health, preventative screening and a day-to day benefit consisting of savings and a Threshold Benefit. Trauma treatment in a casualty ward.	The flexiFed 3 GRID option is for growing families. Benefits include unlimited hospitalisation at a network of hospitals, Chronic medication, Oncology, enhanced maternity benefit and customised childhood benefits which include HPV Vaccine for girls between the ages 9 to 16, mental health, preventative screening and a day-to day benefit consisting of savings and a Threshold Benefit. Trauma treatment in a casualty ward.	The FlexiFed 1 option is for young singles. Benefits include hospitalisation, oncology, chronic, maternity, mental health, preventative screening and a day-to-day benefit consisting of Savings, and Threshold Benefit. Trauma treatment in a casualty ward.
High Level Description	Network In hospital cover to 100% - Medical savings Account 25% of contribution - day to day paid from savings except for Basic Dental benefits that is paid from risk. 28 Chronic conditions. Maternity benefit paid from risk. Supplementary benefits that is paid from risk.	Unlimited at a network hospital. Co-payments apply for the voluntary use of non-network hospitals, non-use of day surgery networks for certain day procedures. 27 Chronic Conditions. Medication must be on the formulary list and obtained from a DSP. Day-to day cover consists of savings and a Threshold Benefit.	Unlimited at any network hospital. Co-payments apply for the non- use of non-use of day surgery networks for certain day procedures. 27 Chronic Conditions plus an additional chronic disease list. Medication must be on the formulary list and obtained from a DSP. Day-to day cover consists of savings and a Threshold Benefit.	Unlimited at network hospitals. Co-payments apply for the voluntary use of non-network hospitals, non-use of day surgery networks for certain day procedures. 27 Chronic Conditions. Medication must be on the formulary list and obtained from a DSP. Day-to day cover consists of Fixed or Flexible savings, and a Threshold Benefit.
E & OE. Although care is taken to represent the benefits and rates correctly, errors and omissions could occur. In case of any conflict, the Rules of the affected Scheme prevail.				