

Aon Member Letter 2024

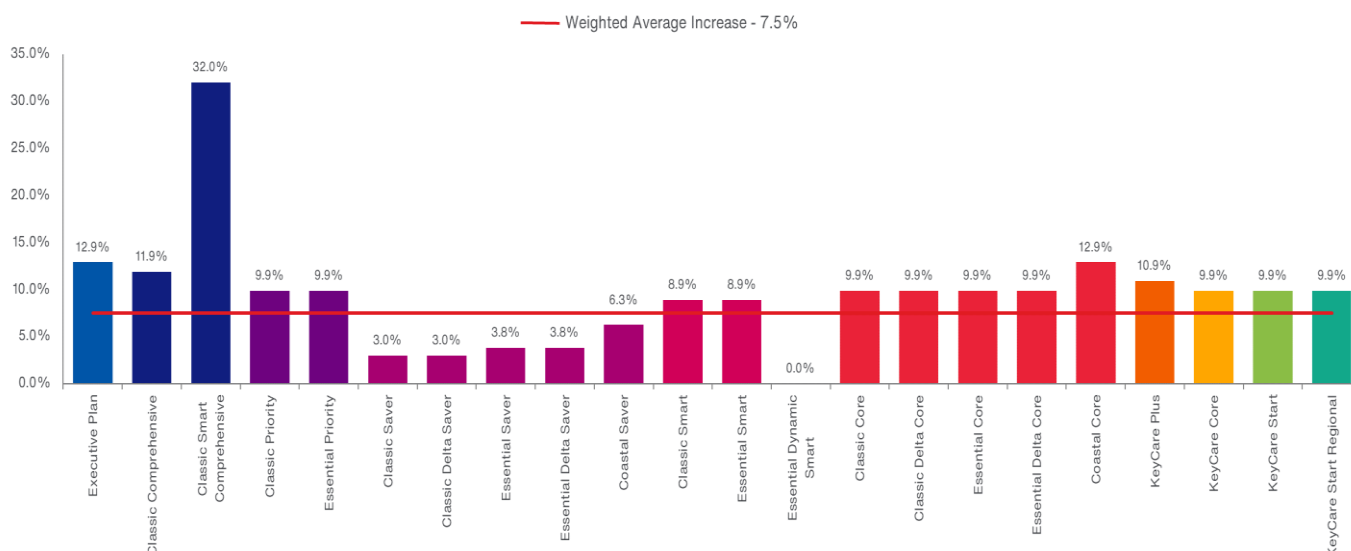
Discovery Health Medical Scheme

Dear Aon Client,

It is that time of the year for you to evaluate your current healthcare arrangements to ensure the most appropriate cover for 2024. Whether you wish to remain on your current option or change to a more suitable option for 2024, it remains Aon's responsibility to guide you through the review process. This will ensure that you make an informed decision regarding your healthcare cover for 2024.

What is the contribution increase for 2024?

Discovery Health Medical Scheme (DHMS) has announced a weighted average contribution increase of 7.5% effective 1 January 2024.



Please note that the increase on the Classic Smart Comprehensive option is much higher than the average increase. This option did not have a Medical Savings Account (MSA) in 2023. DHMS has enhanced this option for 2024 by including a 15% MSA and therefore the higher increase. Further information regarding the changes will be highlighted in this member letter. Members who are currently on Classic Smart Comprehensive who are considering changing their option due to affordability are encouraged to contact their Aon Healthcare consultant or the Aon Resolution Centre (ARC) to assist them in making an informed decision.

Key Benefit changes

- The **Comprehensive option series will be consolidated into two options**, Classic Comprehensive and Classic Smart Comprehensive.

Members who are on the **Classic Delta Comprehensive, Essential Comprehensive and Essential Delta Comprehensive** options in 2023 will be defaulted to either the Classic Comprehensive or Classic Smart Comprehensive option on the 1st of January 2024. A concession has been granted until the 31st of March 2024 for these members who wish to change to an alternative scheme.

DHMS Default Strategy:

- Members who have utilised unique benefits such as the Oncology benefit, Additional Disease List (ADL) chronic condition and the Specialised Medicine and Technology Benefit will be defaulted to the **Classic Comprehensive option**.
- Members who have not registered for one of the above benefits and utilised the Smart network will be defaulted to the **Classic Smart Comprehensive option**.
- All other members will be defaulted to the **Classic Comprehensive** option with effect 1 January 2024.

Impacted members are strongly advised to contact their Aon Healthcare consultant or the Aon Resolution Centre (ARC) to assist them in making an informed decision.

- **Oncology:**
 - The co-payment on the **Oncology Innovation Benefit**, for a defined list of oncology drugs, has been increased from 25% to 50% on the Classic Comprehensive option. Members currently accessing one of the drugs on the defined list on their current approved treatment plan will be grandfathered. The new funding rules for these drugs will only apply for NEW treatment plans approved from 1 January 2024.
 - All other drugs that form part of this benefit that fall outside of the defined list will maintain a 25% co-payment.
- **Chronic Illness Benefit, Chronic Drug Amount and Formulary Changes:**
 - All members registered on the **Chronic Illness Benefit** for their Prescribed Minimum Benefit (PMB) chronic condition will be required to **nominate a primary care GP** for the management of their chronic illness on all options.
 - Members can nominate their primary network GP via the Discovery App, the Discovery Client Services call centre or their chosen network GP. Should a member with a registered chronic condition choose not to nominate a primary care network GP, or voluntarily choose to consult with a GP other than their nominated network GP, they will attract a 20% co-payment.
 - This does not affect the cover for prescribed chronic medicines for chronic illnesses managed by Specialists, or for medicine prescribed during consultations relating to acute conditions.

Please note that:

- The above is not applicable to members on the Executive option.
- Impacted members will receive further communication from DHMS on the GP nomination process.
- KeyCare and Smart members must nominate a GP within the respective Smart GP network.
- Nominated GPs can be changed 3 times per year.
- One out-of-area visit to a non-nominated primary care GP will be covered if the member has nominated their primary care GP.

- **Introduction of the Home-Based Hospital network**

- In 2021, Discovery launched the Discovery Hospital at Home benefit to provide patients with home-based hospital care for conditions that can safely and effectively be treated while the patient remains at home.
- Patients are afforded peace of mind that the highest possible safety and quality standards are maintained in the home-setting through expert clinical teams and cutting-edge digital technologies that allow for continuous patient monitoring. The Discovery Hospital at Home professionals work closely with emergency medical services to deploy an emergency response team should a patient's health status deteriorates.
- From 2024, DHMS will introduce a **Home-Based Hospital network** as a Designated Service Provider for members on the **KeyCare**, **Smart** and **Delta** options for a list of low-acuity conditions, namely:
 - Pneumonia
 - Diabetes
 - Chronic obstructive pulmonary disease
 - Stable heart failure
 - Diabetes
 - Deep Vein thrombosis
 - Cellulitis
 - Urinary tract infection
- Members will need to meet the following strict eligibility criteria before being admitted to the Home-Based Hospital network:
 - Must be 18 years or older.
 - Need hospital-level care that can be given in a general ward.
 - Live within 30 kilometres of a hospital with an emergency room (casualty unit).
 - Live in Cape Town, Durban, Pietermaritzburg, Johannesburg or Pretoria.
 - Have enough family support to be safe at home.
 - Have running water and electricity within the home.
- It must be noted that some patients that meet the above requirements will still not be eligible for treatment if their condition meets any of the **exclusion criteria or condition specific criteria**. For example, if the member is pregnant or needs critical care, they cannot be treated at home. The

member's treating Physician will determine the patient's eligibility and suitability for the programme.

- Pre-authorisation will be a requirement prior to admission as this unlocks risk-based funding for approved devices and healthcare services for those who meet the clinical and benefit criteria. The doctor can choose which facility the patient is admitted into, including Mediclinic at Home, Discovery Hospital at Home or Quro Medical. Should a patient or the doctor opt-out of home-based care in cases where the patient meets the eligibility criteria, then a R5 000 deductible will be imposed.

- **The KeyCare hospital network has been changed for 2024 for the following reasons:**

- Replacement of network hospitals where efficient alternatives exist.
- All hospitals removed are within 20 km's of another KeyCare hospital.
- Some of the hospitals experienced a low take-up of KeyCare Specialists, resulting in co-payments for members and some providers removed their obstetrics services and members were therefore unable to utilise these facilities for maternity events.

Hospitals impacted:

Changing from **partial cover to full cover** network status:

- Gauteng: NHN Zuid-Afrikaans Hospital
- KZN: Lenmed Shifa Hospital and Midlands Medical Centre

The following hospitals have been **removed** from the network:

- Gauteng: Mediclinic Muelmed (nearest hospital is Mediclinic Medforum)
- Western Cape: Netcare Kuilsriver Hospital (obstetrics removed) – nearest hospital is Mediclinic Louis Leipoldt
- Gauteng: Louis Pasteur Hospital (nearest hospital is Mediclinic Medforum)
- Gauteng: Arwyp Medical Centre (nearest hospital is Life the Glynnwood Hospital)

Changing from **full cover network to cardiac referral network** status:

- KZN: Netcare St Anne's Hospital (nearest hospital is Midlands Specialist Private Hospital)

Benefit Enhancements

DHMS has announced numerous innovative changes to the Discovery App by introducing the following:

- **New Virtual Urgent Care benefit**

- Members will have access to a dedicated panel of Emergency Room Doctors providing immediate virtual care for urgent medical conditions, 24/7. Members will be able to speak to a doctor within minutes, order and receive their medication.
- Appropriate urgent care consultations (as defined by the treating doctor) will be funded by the scheme in full on all options. Non-urgent care will be funded from member's available day-to-day benefits.
- Members without available day-to-day benefits will still be able to utilise the service through self-funding. The consultation fee for non-urgent care is R250, any time of the day.

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- Prescribed medicine and subsequent referrals will be funded according to the member's chosen option.
 - KeyCare Start Regional members must access urgent care through the KeyCare on-line Practice.
 - **Virtual Physical Therapy** – this platform allows for a flexible approach to physical rehabilitation, depending on a patient's individual needs.
 - Members will have access to a combination of virtual consultations and self-guided sessions according to a personalised recovery option to complement in-person consultations with a Physiotherapist, Chiropractor or Biokineticist.
 - Virtual Physical Therapy will be funded from the member's available day-to-day benefits, and self-funded by members on options without day-to-day benefits.
 - **Mental Wellbeing Assessment Benefit** - All members now have access to a quick and easy mental wellbeing assessment via the Discovery Health app. Once completed, the assessment results and clinical data are used to evaluate the member's mental health risks and provides risk-funded interventions for at-risk members.
 - **Digital Therapeutics for Mental Health** – DHMS is partnering with Silvercloud to deliver a medical scheme funded digital therapeutics product.
 - The platform provides convenient access through the Discovery app to evidence-based mental health therapy. Eligible members, 18 years or older, will have access to the Silvercloud platform for 12 months at a once-off cost of R1 850.
 - Members not enrolled on the MHCP (Mental Health Care Programme), MHRPP or OHPMB (out of hospital Prescribed Minimum Benefit), will have access with the appropriate referral to Silvercloud, either through available day-to-day benefits or self-funded.
 - The modules on this platform focus on early intervention against depression or depression with anxiety. This benefit is a new risk-funded benefit through the Mental Health Care Programme.
 - **Personal Health Pathways** - In 2024, all eligible members will have access to personal health pathways through the Discovery Health app.
 - It includes an intuitive WhatsApp journey, making it easy for member to know what will have the biggest impact on their long-term health.
 - Completing certain actions will not only have a positive impact on members' health but will also reward and incentivise members to stay engaged.
 - **In 2024, the Classic Smart Comprehensive option will be enhanced:**
 - By adding a 15% Medical Savings Account (15% of total contribution) to member's day-to-day benefits.
 - Members will still have access to unlimited GP consultations in the Smart network, with a R65 co-payment. The co-payment may be funded from the Medical Savings Account.
 - The child dependant rate on the Classic Smart Comprehensive will be reduced by 17.9% to align with the Classic Comprehensive contribution.

Some key differences between the Classic Comprehensive and Classic Smart Comprehensive option benefits.

Option	Oncology Benefit	Oncology Extender Benefit	Specialised Medicine and Technology Benefit	Day-to day Extender Benefit	Medical Savings Account
Classic Comprehensive	R500 000	Yes	Yes	Yes	25% total annual contribution
Classic Smart Comprehensive	R375 000	No	No	No	15% total annual contribution

Benefit Limit Increases

- From 1 January 2024, the **chronic medication formulary** will be updated, and a **General Reference Price** will be introduced where a generic alternative exists for Chronic Disease List (CDL) medicine. Medicine on the formulary list will be funded in full however, non-formulary medication will only be funded up to the Chronic Drug Amount (CDA) according to the member's chosen option, subject to the Discovery Health Rate or General Reference Price, whichever is applicable.
- Therapeutic Reference Price** will also be introduced on the **Specialised Medicine and Technology Benefit for biologic therapies**.
- Generic reference pricing for chemotherapy** and supportive **oncology medicine** will be introduced, where a generic alternative exists. Oncology approved medicine will be paid up to the maximum of the Discovery Health Rate (DHR) or Generic Reference Price, whichever is applicable, and subject to the Oncology Threshold.
- DHMS will be communicating the Chronic and Oncology formulary changes to the impacted members. Members will have until the end of 2023 to make changes to their treatment, if necessary, to avoid or reduce co-payments that may result from the changes.
- Co-payments, deductibles, and benefit limits will be increased in line with the relevant inflation on 1 January 2024, except for the following benefits:
 - Oncology benefit thresholds
 - International Travel Benefit
 - Overseas Treatment Benefit
 - Specialised Medicine and Technology Benefit
 - Surgical and appliance items including hip, knee and shoulder joint prosthesis, and external medical appliances.
- Spinal prosthesis** limits will be updated where a non-network is utilised.
- The Medical Savings Account and Above Threshold Benefit on the Executive, Comprehensive and Priority options will increase in line with the option-specific contribution increases.
- The KeyCare income bands will remain the same for 2024.

Benefit Reductions

- Economic pressures from rising interest rates, stagnant growth and high levels of consumer price inflation have placed substantial financial strain on affordability for members. DHMS has increased contributions on Saver plans ranging from by 3.0% - 6.3% which is below the weighted average contribution increase for 2024. To achieve the lower contributions increases on Saver plans, DHMS announced a reduction of 5% in annual medical savings allocations.

The table below depicts the impact of the reduction on the Medical Savings Account (MSA)

Option	2023 MSA %	2024 MSA %	Main Member Annual MSA 2023	Main Member Annual MSA 2024	Difference in main members' annual MSA
Classic Saver	25%	20%	R11 955	R10 020	-R1 935
Classic Delta Saver	25%	20%	R9 552	R8 016	-R1 536
Essential Saver	15%	10%	R5 691	R4 008	-R1 683
Essential Delta Saver	15%	10%	R4 536	R3 192	-R1 344
Coastal Saver	20%	15%	R7 575	R6 144	-R1 431

Option	2023 MSA %	2024 MSA %	Adult Annual MSA 2023	Adult Annual MSA 2024	Difference in Adult annual MSA
Classic Saver	25%	20%	R9 426	R7 908	-R1 518
Classic Delta Saver	25%	20%	R7 539	R6 336	-R1 203
Essential Saver	15%	10%	R4 266	R3 012	-R1 254
Essential Delta Saver	15%	10%	R3 429	R2 412	-R1 017
Coastal Saver	20%	15%	R5 691	R4 632	-R1 059

OPTION	2023 MSA %	2024 MSA %	Child Annual MSA 2023	Child Annual MSA 2024	Difference in Child MSA
Classic Saver	25%	20%	R4 785	R4 020	-R765
Classic Delta Saver	25%	20%	R3 828	R3 216	-R612
Essential Saver	15%	10%	R2 274	R1 596	-R678
Essential Delta Saver	15%	10%	R1 815	R1 284	-R531
Coastal Saver	20%	15%	R3 063	R2 484	-R579

*2023 MSA indicated in the table above is a combination of January to March and April to December 2023 savings allocation due to the mid-year increase applied for 2023.

During 2023 members on the Comprehensive series had an unlimited Above Threshold Benefit. DHMS has announced a **usage limit on the Above Threshold Benefit** on the Comprehensive series for 2024:

	Member	Adult	Child
Classic Comprehensive	R 35 000	R 35 000	R 8 500
Classic Smart Comprehensive	R 30 000	R 30 000	R 7 500

Although there has been a decrease in the MSA, it is important to remember DHMS will be enhancing the risk-funded day-to-day benefit offering in 2024 for key benefit categories where members would have utilised MSA funds for those benefits.

These enhancements include:

- Mental health preventative screening and access to the Cognitive Behavioural therapy (iCBT).
- Emergency cover through the virtual urgent care platform.
- **KeyCare Series:**
 - KeyCare Plus - **secondary GP** allocation has been removed.
 - The **out-of-network GP consultations** for Keycare Plus, KeyCare Start and KeyCare Start Regional have been reduced to one consultation per annum, with a network nurse or healthcare provider at a network pharmacy clinic.
 - Tonsillectomies, Myringotomies and Adenoidectomies will be added to the KeyCare Series **exclusions list**, with cover provided in the case of emergencies or Prescribed Minimum Benefit (PMB) treatment.

Contributions 2024

[Click here](#) to access the 2024 contribution table.

2024 Minimum Self-Payment Gaps (SPG)

	Executive	Classic Comprehensive	Classic Smart Comprehensive
Member	R 4 330	R 3 706	R 15 922
Adult/Spouse	R 4 330	R 5 062	R 16 918
Child	R 776	R 496	R 2 500
	Classic Priority	Essential Priority	
Member	R 7 098	R 14 754	
Adult/Spouse	R 4 754	R 10 814	
Child	R 1 308	R 4 368	

Vitality

Key Benefit Changes

- **HealthyFood** is one of Vitality's flagship benefits. It is being enhanced by introducing **Checkers and Checkers Sixty60** as a new partner. Members can choose an **in-store and online grocery partner** for maximum rewards through Checkers, Checkers Sixty60, PicknPay, PicknPay ASAP, Woolworths and Woolies DASH. This benefit will be introduced in the latter part of 2024.
- **Exercise anywhere with Vitality Fitness.** From 2024 individual exercise needs will be addressed with Vitality Fitness, an integrated exercise ecosystem. Members can discover different types of fitness facilities and workouts, book and pay for classes seamlessly in the app, join the gym instantly (at a reduced, up to R499, activation fee) and engage with fitness facilities and earn Vitality points. Members also get up to 24 free visits a year to utilise at any facility in the expanded Vitality Fitness network.
- Encouraging engagement with the **Vitality Health Check.** From 1 January 2024 members can earn 5 000 Vitality points for completing a Vitality Health Check. Additional Vitality points will be rewarded for having 2 or more results in range. The rewards structure will be standardised across Vitality benefits by making the Vitality Age assessment and Vitality Health Check the cornerstone of unlocking higher discounts.
- **Vitality Travel**
 - This benefit will be linked to Discovery Bank. Members must activate their zero monthly fee Discovery bank account to access the Vitality travel benefits.
 - New members joining Vitality will no longer have a 3-month waiting period applied to the travel benefit.
 - Prior to COVID-19, members were required to book international flights 6 weeks in advance to get the full Vitality Health and Money discount. This booking rule will be reinstated from January 2024. Vitality members can still receive a 10% discount on all bookings made less than 6 weeks from the departure date.
- Members can get up to 40% off when spending Discovery Miles online or in-store, in the Active Rewards Mall or when purchasing airline or prepaid products and services through Discovery Bank.

New and enhanced Benefits

- Cardio fitness measures how well the heart, lungs and muscles use oxygen during exercise. Next year, members will automatically earn up to 10 000 **Vitality points based on the VO₂ max** estimates on their Apple, Garmin, or Samsung fitness device.
- Members will also be able to **earn Vitality fitness points** for 15-minute high-intensity workouts, as well as for light-intensity workouts longer than 60 minutes.
- From December 2023, new Discovery Health Medical Scheme members who sign up for Vitality will have **immediate access to Vitality benefits and rewards**.
- New Discovery Health Medical Scheme members joining Vitality get to enjoy Vitality for free from the month they join, as well as the following 2 months.

- From November 2023, the **new Discovery Vitality Padel benefit** will give members advanced booking access and a 20% discount at Africa Padel courts across South Africa.
- From 1 January 2024, Vitality members will still get up to 50% off a fitness device and Nike performance gear. However, the Discovery Bank boost falls away.
- From October 2023, members can pay with Discovery Miles in the Takealot app.
- By the end of 2023, Vitality members will be able to activate their Vitality HealthyFood benefit on WhatsApp. New Vitality members will receive a prompt to activate their benefits through WhatsApp upon joining. Members can also start the process themselves using Ask Discovery on WhatsApp.

It is important to note that we are not accredited to advise on Discovery Bank products and benefits.

Vitality Rates 2024

	Single Member	Member with one dependent	Member with two or more dependents
Vitality	R 359	R 439	R 509
KeyFIT	R 77	R 99	R 115
Both Vitality and KeyFIT	R 395	R 485	R 535
Vitality Active	Main member: R 129	Per Adult: R 79	

Gap Cover

Aon strongly supports the purchasing of gap cover to compliment your medical scheme benefits and to reduce your out-of-pocket exposure for in-hospital events. We recommend that you speak to your Aon Healthcare consultant to assist you in selecting the correct gap cover option.

Microsite

At Aon, we shape decisions for the better – to protect and enrich the lives of people around the world. We have pleasure in sharing the Aon on-line microsite platform for Discovery Health Medical Scheme, which has been developed to provide you with essential information to make better decisions regarding your medical scheme and gap cover requirements.

To access the microsite please <https://eb.aon.co.za/transnet/>

Virtual Year-End Training Session

Aon will be conducting virtual training sessions on the relevant information pertaining to the 2024 medical scheme options. These sessions will elaborate on medical scheme benefit changes, enhancements, and contribution increases.

Please note that the virtual sessions as stipulated below will not include specifics regarding your subsidy or participation policy.

Presentation dates are as follows:

Date	Time	Virtual Platform /	Language
6 November 2023	09:00	Webex/Teams	English
8 November 2023	13:00		English
14 November 2023	13:00		English
16 November 2023	09:00		English

Please follow these steps to register for a WebEx training session:

- Please use a Chrome or Firefox browser to register
- [Click here](#) to register for a training session.
- Select your preferred date, complete all your details and press “**Submit**”.
- You will receive an e-mail confirmation that says ‘*You are now registered*’ – click on the “*Add to Calendar*” link, a page will open with a small box on the top right saying Downloads – Click on the *Open File link* and a calendar invitation will open that you can save for this session. This invitation includes the WebEx link.

On the day of the event:

- Open your calendar invitation
- Click on the **https link** provided and follow the instructions, if needed.
- If you have trouble accessing the webinar through the calendar invitation, please copy the link and open it in your Chrome or Firefox browser.

Your HR contact / Aon contact will send through a meeting invitation with a link to join a virtual meeting.

We look forward to welcoming you at the Aon virtual year-end session.

When will in-person training sessions be held?

Aon will be conducting training sessions on the relevant information pertaining to the 2024 medical scheme option changes. These sessions will elaborate on the changes, enhancements and contribution increases.

The dates for these sessions will be communicated by your HR department.

How do I book an individual session with the Aon Consultant to discuss my personal circumstances?

If you have attended a training session and still cannot decide whether you need to change your existing option, despite having read all the information, please contact the Aon Resolution Centre (ARC).

It is important to attend a session prior to contacting the ARC.

The Aon consultant will either be available on the day of the training session, or your HR department will advise when the consultant will be available for a one-on-one session.

Where do I get more information and who can I contact if I have any questions?

The DHMS Call Centre can be contacted for the clarification of benefit changes and contribution increases and the **Aon Resolution Centre (0860 100 404)** or email on **arc@aon.co.za** will also be available to provide advice on option selections for 2024.

DHMS Call centre: 0860 99 88 77

DHMS WhatsApp number: 0860 756 756

DHMS online option change?

If you want to change your option for 2024 you need to action the changes online via the Discovery Member portal. The advantage with an on-line option change is that it eliminates the error associated with a paper process. You can make online option changes up until 31 December 2023.

You can change your health option effective 1 January 2024 online by logging onto the DHMS member portal on the website following the below steps:

- Log into www.discovery.co.za and click on 'Medical Aid' and choose the 'Manage your health plan.'
- Scroll down to change your health plan, click on it, and follow the prompts.

Or the mobile app on a smart device following the below steps: (Remember to download the new mobile application)

- Log into Discovery mobile app and click on 'My cover'.
- Scroll down to manage plan.
- Click on change your plan and follow the prompts.

Your health option change will be confirmed as successful when you see a message with a reference number. Please keep record of this reference number in case you have queries with regards to the option change.

Must I complete an option change form?

If you could not make your option selection online, please notify Discovery Health Medical Scheme in writing by no later than 30 November 2023 by completing the attached option change form.

Must I complete a KeyCare option change form?

If you want to change your current option to a KeyCare option for 2024, you need to complete a separate KeyCare application form (Choosing KeyCare as my health option) and submit it to Discovery Health Medical Scheme.

If none of the above applies to you, you do not need to do anything. If you do nothing, then you will remain on your current option for 2024.

It is important to note that no late changes will be accepted.

Connect with us

We focus on communication and engagement, across insurance retirement and health, to advise and deliver solutions that create great client impact.

We partner with our client and seek solutions for their most important people and HR challenges.

We have established presence on social media to engage with our audiences on all matter related to risk and people.

For more information from Aon Employee Benefits on healthcare, retirement benefits and a wide range of topics feel free to go to www.aon.co.za

Aon Employee Benefits – Healthcare

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