

The Saver Series

The Saver Series offers you extensive cover in-hospital with no overall limit. You also get access to the following:

- Cover for day-to-day claims through a Medical Savings Account
- Cover for 27 chronic conditions through the Chronic Illness Benefit
- Emergency cover when you need it most with Discovery 911.

How we cover you

When you need to go to hospital

- Call us on 0860 99 88 77 to get authorisation for your admission to hospital
- If it is an emergency go straight to hospital but call us or get someone else to call us within 12 hours
- We cover you in full if you see a specialist who participates in our Premier Rate or Classic Direct (for Classic Saver Plan) arrangements
- We cover other specialists to a maximum of 200% of the Discovery Health Rate on the Classic Saver Plan and up to a maximum of the Discovery Health Rate on the Essential and Coastal Plans.
- You have no overall limit on approved hospital admission. Some health services are limited:

Healthcare service	Your benefit
Internal medical devices and prostheses	
• Cochlear implants, auditory brain implants and processors	R100 000 for each person for each benefit
• Internal nerve stimulators	R80 000 for each person
• Hip and knee joint prostheses	R30 000 for each prosthesis for each event
• Prosthetic devices used in spinal surgery	R17 000 for each person, for each level, limited to two levels for each procedure, and one procedure for each year
Mental health benefit	21 days
Alcohol and drug rehabilitation	21 days
Terminal care benefit	R19 200 for each person
Dentistry	R10 700 for each person for each year*
Investigative scopes	No overall limit*

*We pay the first R1 600 of the hospital account from your day-to-day benefits. We pay the balance of the hospital account from the Hospital Benefit. We pay related accounts from your day-to-day benefits. A related account is any approved account for other expenses you incur during your hospital stay, other than the hospital account itself.

Network of hospitals on Coastal Saver

The Coastal Saver Plan has a network of coastal hospitals that you need to use when you go to hospital for planned procedures. If you do not use a network hospital, you will pay 30% of the hospital account. This does not apply in an emergency as you can go to any hospital in an emergency.

When you need chronic medicine

We cover 27 chronic conditions on the Saver Plans. We pay approved medicine in full if you use medicine on our medicine list. If you use any medicine that is not on our list we pay this up to a monthly amount for each condition (Chronic Drug Amount). Medicine is paid up to the Discovery Health medication rate.

We need to approve your chronic condition before it is covered from the Chronic Illness Benefit. You can visit www.discovery.co.za or call us for the application form that you and your doctor must complete.

When you need cover when travelling outside of South Africa

The International Travel Benefit covers you if you have emergency medical expenses while travelling outside South Africa. The International Travel Benefit provides cover of up to R5 million for a maximum of 90 days from the date of departure from South Africa. You pay the first R1 000 of out-of-hospital emergency claims. If an embassy needs you to take out additional travel insurance this can be arranged through your travel agent at your own cost.

When you need cover for emergency evacuations in sub-Saharan Africa (not available on the Coastal Saver Plan)

If you live in a sub-Saharan African country, we cover emergency medical evacuations from certain sub-Saharan African countries back to South Africa.

When you need day-to-day cover

Day-to-day cover refers to health services that you get out of hospital. We pay these health services from your Medical Savings Account. If it runs out, you need to pay for claims from your pocket.

Annual Medical Savings Account amounts

	Classic Saver	Essential Saver	Coastal Saver
Annual Medical Savings Account	R3 396 for a main member R2 676 for each adult R1 356 for each child ***	R1 620 for a main member R1 212 for each adult R648 for each child ***	R2 628 for main member R1 968 for each adult R1 056 for each child ***

*** We count a maximum of three children when we work out your contribution and Medical Savings Account contribution.

We pay for claims for some day-to-day expenses without using the money in your Medical Savings Account:

- GP network – If you go to a GP in our network, you will pay only R120 of the consultation fee from your Medical Savings Account. We pay the balance of the consultation fee directly to the doctor.
- Screening Benefit – If you go for certain preventive screening tests, Discovery Health will cover the claim.
- Trauma Recovery Benefit – We will cover out-of-hospital claims for your recovery after certain traumatic events.

Some of your day-to-day health services have no limit and some are limited. Here is a summary:

Day-to-day benefits

Professional services	
General practitioners*	The claims for these expenses are limited to available funds in your Medical Savings Account.
Specialists	
Allied health professionals	
Radiology and pathology (x-rays and blood tests)	
Mental health benefit (including psychologists, psychiatrists and art therapy)	
Private nursing	
Antenatal classes	
Pregnancy scans (Up to two scans per pregnancy. 3D scans covered as per 2D scans)	
Medicine	
Prescribed medicine (schedule 3 and above) Over-the-counter medicine, including prescribed schedule 0, 1 and 2 medicine and lifestyle enhancing products	The claims for these expenses are limited to available funds in your Medical Savings Account.
Appliances and equipment	
External medical items Hearing aids Optical (includes cover for spectacles, frames, contact lenses and surgery to correct refractive errors of the eye, eg excimer laser)	The claims for these expenses are limited to available funds in your Medical Savings Account.
Dentistry	There is an overall limit of R10 700** per person. Claims are paid from available funds in your Medical Savings Account.
Investigative scopes	Claims are paid from available funds in your Medical Savings Account.
MRI and CT scans	No overall limit. The first R1 600 of the scan code is paid from available funds in your Medical Savings Account. We pay the balance of the scan code from your Hospital Benefit.

*Any time that you have no day-to-day benefits available, you will pay only R120 of the consultation fee from your pocket, while Discovery Health pays the balance.

** We pro-rate this benefit according to when you join the medical scheme.

Please note:
Discovery Health does not cover certain health services. You can find a full list of these exclusions on www.discovery.co.za. More information on your cover can be found on www.discovery.co.za.

What you will pay

Family size	Classic Saver	Essential Saver	Coastal Saver
Main member	R1 133	R901	R877
Adult dependant	R892	R675	R656
Child ***	R453	R360	R352

*** We count a maximum of three children when we work out your contribution and Medical Savings Account contribution.

Discovery Health is an authorised financial services provider. This brochure is merely a summary of the key benefits and features of the Discovery Health plans, pending formal approval from the Council for Medical Schemes. Full details will be found in the Discovery Health Medical Scheme Rules. For compliance queries, email compliance@discovery.co.za