

1

Always **open**
and **review** your
claims statement

2

Verify that the
information
is correct

3

Should there be
any discrepancies
or should you
have any questions,
contact Bankmed
on 0800 BANKMED
(0800 226 5633)

4

Review the
**"IMPORTANT
INFORMATION"**
at the bottom of your first
page of the claims statement.
This may contain important
Scheme information.

Understanding Your Claims Notifications and Claims Statement

Understanding your claims notification and claims statement enables you to manage your benefits and limits proactively. Bankmed provides members with a claims statement which details every claim from a hospital, your doctor or other Healthcare Professionals, the costs thereof, and your remaining benefits. Claim statements are issued every two weeks, should you or your provider have submitted claims for payment.

Bankmed continuously strives to make it easy for you to manage your benefits. Your claims statement is a critical tool which confirms the status of your claims, at a glance.

The differences between a Claim Statement and a Claim Notification


Claims Statement

A claim statement is issued by Bankmed every two weeks and provides concise yet detailed information about all claims submitted during the statement period. This document is printer friendly for you to print, should you require a hard copy.

Claims Notification

The claim notification is a summary of claims submitted during the previous week and is sent to members via e-mail only as it serves as a precursor to the claim statement. The claim notification is merely a summary of claims paid during the prior week and is not considered printer friendly.

Claim Statement summary page



1 Statement Number: 1
12 January 2017

2 Mr Joe Soap
58 Lorem Street
Consectetur Adipiscing
1234

3 Your plan details:
Member Joe Soap
Membership number 123456789
Plan Type BANKMED COMPREHENSIVE

Day to Day Medical Savings Account balance as at 10 January 2017: **4** R 13,045.27

SUMMARY STATEMENT
This section is an overview of your claims statement. It reflects the totals from your detailed statement on the following page.

Total claims:	1,286.37
Claims payable:	1,246.82
- To you by the Scheme	0.00
- To Service Providers	1,246.82
Claims not paid by the Scheme:	39.55
- For your own account - please reimburse your Service Provider	39.55
Claims paid from:	1,246.82
- Your Day to Day Medical Savings Account (MSA)	0.00
- The Medical Scheme	1,246.82

- 1** The statement number confirms the total number of statements issued by the Scheme for the benefit year.
- 2** The principal member's address.
- 3** The principal member's membership number and chosen Plan type.
- 4** The Medical Savings Account (MSA) balance as at statement date (only applicable to Plans with an MSA).
- 5** The *total claims* section confirms the summarised submitted claim values, to whom the claims will be refunded and whether any shortfalls are payable by the member.
- 6** The *claims paid from* section shows the summarised submitted claim values and the associated benefit from which they have been paid, i.e. funded by the Scheme or funded from MSA.

Page 1 of your Claims Statement

DETAILED STATEMENT																
This page provides detailed information about your recent claims.											Member Number: 123456789 Statement Date: 12 January 2017					
Your claims details						Claims paid from			Claims paid to		Claims not paid					
Treatment date	Patient and Provider Information		Procedure code	Claims ref	Amount claimed	Benefit Approved (Scheme Rate)	MSA*	Savings from previous years	Medical Scheme	You by the Scheme	Service provider	Member Portion	Portion not payable***	Tax deductible amount**	RC	Pmt ref
Part paid claims																
28Dec2016	Savita - Kamet Pharmacy		CHRON	5JcTfm	85.30	85.30	0.00	0.00	85.30	0.00	85.30	0.00	0.00	0.00	541	
			CHRON		141.41	141.41	0.00	0.00	101.86	0.00	101.86	39.55	0.00	39.55	671	
			CHRON		229.41	229.41	0.00	0.00	229.41	0.00	229.41	0.00	0.00	0.00	574	
			CHRON		53.56	53.56	0.00	0.00	53.56	0.00	53.56	0.00	0.00	0.00	574	
			CHRON		47.67	47.67	0.00	0.00	47.67	0.00	47.67	0.00	0.00	0.00	574	
			CHRON		146.93	146.93	0.00	0.00	146.93	0.00	146.93	0.00	0.00	0.00		
			CHRON		383.01	383.01	0.00	0.00	383.01	0.00	383.01	0.00	0.00	0.00	574	
			CHRON		199.08	199.08	0.00	0.00	199.08	0.00	199.08	0.00	0.00	0.00	574	
					1,286.37			0.00		0.00	1,246.82	39.55	0.00			
					1,286.37			0.00		0.00	1,246.82	39.55	0.00			
Other transactions																
01Jan2017	**Int On Accrued Bal				0.00	0.00	-24.74	-24.74	0.00	0.00	0.00	0.00	0.00	0.00		
	**ASA Transfer				0.00	0.00	0.00	-1,893.94	0.00	0.00	0.00	0.00	0.00	0.00		
	**MSA Change				0.00	0.00	6,408.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
	**MSA Change				0.00	0.00	1,893.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
	**Int On Accrued Bal				0.00	0.00	-5.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
					0.00			-1,918.68		0.00	0.00	0.00	0.00			
Total for this statement					1,286.37		-1,918.68	1,246.82	0.00	1,246.82	39.55	0.00	39.55			
MSA* = Medical Savings Account																
Portion not payable*** = The Amount for which neither you nor the Scheme is responsible.																
Reason Code (RC)																
541 We have accepted the price your provider submitted as this price is lower than the calculated amount.																
574 Claim paid from your Prescribed Minimum Benefits.																
671 Medicine not paid in full. Rules for medicine management have been applied. You are responsible for paying the rest.																

7 Confirmation of member number and statement date.

8 Your claim details section provides a breakdown of claims submitted in more detail. This section confirms the treatment date, the patient and provider name, the procedure code submitted by the provider, the claims reference number, the total amount paid and what the associated Scheme Rate is for that particular treatment.

9 The Claims paid from section confirms the individual values paid relative to the claim submitted and the associated benefit from which they have been funded, i.e. funded by the Scheme or funded from MSA.

10 The Claims paid to section confirms the reimbursement value and to whom this reimbursement will be paid, i.e. member or Healthcare Professional.

11 Claims not paid makes reference to a shortfall that the member may be required to pay (Member Portion) or a portion that's not payable by you or the Scheme. In this section, you will also note the RC (reason code) column which provides a reference number. This reference number is the reason code used to detail the reason for non-payment. Reason codes are detailed in 13 of this statement.

12 This row of information details the total value of all claims submitted during this statement period and summarises what has been claimed, paid and not paid.

13 These are the descriptions associated with claim Reason Codes (RC) within the statement which show the reason for a payment decision on a particular claim.

Page 2 of your Claims Statement

14

YOUR TRANSACTIONS SO FAR THIS YEAR

This page shows you the total of your transactions to date for specific benefits.

Member Number: 123456789

Statement Date: 12 January 2017

15

Tax deductible amount**	
Claimable Tax Amount for this statement	39.55
Tax claimable to date	154.77

Note :The calculation does not include all claim transactions.

16

Description	Current year savings	Previous year savings	Total
Current year savings (upfront available)	6,408.00	0.00	6,408.00
Unused savings from previous year/s	0.00	6,607.04	6,607.04
Claims paid from savings	0.00	0.00	0.00
Interest earned	5.49	24.74	30.23
Available Savings (incl. upfront)	6,413.49	6,631.78	13,045.27

14 This page of your claims statement shows the total transactions for the full benefit year for specific benefits claimed.

15 The *Tax deductible amount* is confirmed in more detail

Row 1: This row summarises the total *Claimable Tax Amount*

Row 2: This is the amount that you may claim from the South African Revenue Service (SARS).

16 This section will only be presented to members who have chosen a Plan with an Medical Savings Account (MSA) component and summarises the Medical Savings Account (MSA) and Accumulated Savings Account (ASA) balances and overall transactions during the current benefit year on an accumulated basis. This table also confirms available balances as at the statement date.

Claim Notifications

Your claim notification provides you with:

- An overview of the claims processed during the previous week for your membership
- Detail as to how these claims have affected your remaining available benefits
- Provides assistance in tracking your claims and available benefits
- Kindly note that this is an abridged version of your claims statement. Please do not print, as all of this information will be reflected in your claims statement.

Bankmed
your good health

Dear Etbmjhhmbdmh

This e-mail contains details of your most recent processed claim. You will also see how this impacts the status of your day-to-day benefits, which includes a breakdown of limits used in this benefit year.

Summary of your claims

Pharmacy Claimed Paid to	Clicks Pharmacy - Forest Hill R754.36 claimed for date of healthcare service 2016/05/03 R754.36 will be paid to the healthcare professional on 2016/05/11 click here for more information
---------------------------------	--

Benefit limits and usage

This section provides only a summary of the benefit limits used. For a complete list of benefits and limits on your plan type, kindly refer to your Benefit and Contribution Schedule or visit www.bankmed.co.za

To change the e-mail address at which you receive your claims and other notices, [click here](#)

Kindly [click here](#) should you not wish to receive an update each time we process one of your claims. Should you cancel this service, there will be no communication to keep you updated when we handle your claims.

Yours in good health

Bankmed Medical Scheme

Disclaimer
This message and any attachments are confidential and intended solely for the addressee. If you have received this message in error, please notify Bankmed Medical Scheme immediately, telephone number 0800 226 5633. Any unauthorised use, alteration or dissemination of the contents of this email is strictly prohibited. In no event will Bankmed Medical Scheme or the sender be liable in any manner whatsoever to any person for any loss or any direct, indirect, special or consequential damages arising from use of this email or any linked website, including, without limitation, from any lost profits, business interruption, loss of programmes or other data that may be stored on any information handling system or otherwise from any assurance that this email is virus free even if Bankmed Medical Scheme is expressly advised of the possibility of such damages. Bankmed Medical Scheme; registration number 1279.

Bankmed Medical Scheme. Registration number 1279. Administered by Discovery Health (Pty) Ltd registration number 1997/013480/07. An authorised financial services provider

This is only a summary. For more information, you need to click on the "click here" block.



0800 BANKMED (**0800 226 5633**)



enquiries@bankmed.co.za



www.bankmed.co.za



Bankmed App

