

Dear Member,

BANKMED – BENEFIT FOR FOREIGN CLAIMS FROM 2018

Bankmed would like to take this opportunity to provide you with information regarding foreign cover (medical expenses incurred outside the borders of South Africa) and submission of related claims. Kindly familiarise yourself with this letter which includes important information that will assist in streamlining the payment process when submitting your claims for 2018.

FOREIGN CLAIMS BENEFIT EXPLAINED

Bankmed covers foreign claims for all plans excluding the Essential Plan, up to the same benefit limit and Rand value for each service, as would have been granted were the services to be obtained in South Africa.

Should a healthcare service have been obtained overseas, you will be required to settle the amount while overseas and claim back from Bankmed.

In the unfortunate event that you or any of your registered dependants (if applicable) require medical attention in a foreign country, kindly familiarise yourself with our foreign claims policy, as set out below. This will assist you in avoiding any surprises, inconvenience or delays.

We urge you to take out sufficient insurance to cater for situations in which the cost of a foreign claim may exceed that which we would cover in South Africa, or where it may not be covered at all (see Scheme Exclusions, below).

Certain benefits may only be available to Bankmed members through South African-based preferred provider networks, which makes taking out adequate insurance all the more important.

For example (please take note):

- Emergency/ambulance transportation is not covered outside the borders of South Africa on any of our plans, as Bankmed's contracted preferred provider (Discovery 911) does not operate in foreign countries
- Out-of-hospital General Practitioner (GP) consultations, medication and other day-to-day services which are available on all plans except the Essential Plan, exclusively through the Bankmed network of practitioners, will not be covered overseas, as these networks do not provide services in foreign countries

Therefore, it is essential for you to ensure that you have sufficient insurance in place, as this will limit your risk of uncovered expenditure while abroad.

SCHEME EXCLUSIONS

As previously mentioned, there are exclusions that apply in South Africa that may also apply to foreign claims. For example, Bankmed does not cover the cost of treatment associated with or arising from the following:

- An injury sustained by a member or dependant for which any other party may be liable
- Operations, treatment and procedures for cosmetic purposes.

Costs associated with an injury sustained by you or any of your dependants in the line of employment (for example) would not be covered as these are claimable through your employer in terms of the Compensation for Occupational Injuries and Diseases Act.

For a complete exclusion list, please visit www.bankmed.co.za. Select “Registered Rules” and then “Exclusions (Annexure C)”.

MEDICAL MOTIVATION AND PRIOR APPROVAL IS REQUIRED FOR PLANNED HOSPITAL ADMISSIONS

Hospital pre-authorisation is not required for emergency hospital admissions in foreign countries.

An emergency is defined as “the sudden and, at the time, unexpected, onset of a health condition that requires immediate medical or surgical treatment, where failure to provide medical or surgical treatment would result in impairment to bodily functions or serious dysfunction of a body organ or part, or that would place the person’s life in serious jeopardy”.

In the event of a non-emergency or planned hospital admission, you are required to obtain prior approval from Bankmed. Kindly submit the following to treatment@bankmed.co.za for approval, prior to being admitted to hospital:

1. A medical motivation from the provider who will be performing the procedure.
2. Full details as to why the services are not being obtained in South Africa.
3. A detailed description of the services to be provided.
4. Relevant ICD-10 CPT4 codes.
5. Expected costs that will be charged by the provider and by the hospital involved for each service.

Your attending doctors should be able to assist you with the above information.

Again, as foreign claims are subject to the same rate, limits and exclusions that would apply to your Bankmed claims in South Africa, we urge you to take out sufficient insurance to cover any shortfalls on claims.

PAYMENT ARRANGEMENTS ABROAD

As we do not have direct payment arrangements with healthcare professionals registered outside the borders of South Africa, you will be required to pay such practitioners directly and then claim from Bankmed.

Please include detailed accounts with your proof of payment, claim and proof of travel when submitting these to us.

REQUIRED INFORMATION FOR CLAIMS

Kindly inform all foreign healthcare practitioners (including hospitals) attending to you whilst abroad, that you will require detailed accounts from them, in English, with the following information clearly set out on every account:

1. The name, qualifications and practice type (example GP, neurosurgeon, cardiologist) of the practitioner.
2. The date on which each service was provided.
3. The full name/s and passport number of the patient.
4. The nature of illness or operation.
5. A full description of each treatment and the cost of each item.
6. The relevant ICD-10 (International Classification of Diseases – version 10) codes and CPT 4 (treatment) codes for each service provided.

Be sure to submit the following additional items with your claim:

- A certified copy of the relevant beneficiary's stamped passport (with entry and exit dates)
- Proof of your travel insurance claim and amounts settled or confirmation from your travel insurer that the amount is not claimable (if applicable).

CLAIMING PERIOD

Fully specified accounts, including all relevant information, must be submitted to Bankmed within four months of the date/s of the service rendered, in order to qualify for benefits.

NEW UPDATE – SAVE TIME BY E-MAILING YOUR FOREIGN CLAIMS TO BANKMED

To avoid the impact of postal delays, we encourage you to e-mail your foreign claims to claims@bankmed.co.za.

Please do not hesitate to contact us on +27 11 529 6616 or e-mail enquiries@bankmed.co.za should you be calling from outside South Africa, or alternatively on 0800 BANKMED (0800 226 5633) (toll free from a Telkom landline), should you have any further enquiries or requests.

We look forward to being of service to you.

Yours in good health

Bankmed Medical Scheme