



Mental Health Care Programme 2022

Who we are

Bankmed Medical Scheme, registration number 1279, is a non-profit organisation, registered with the Council for Medical Schemes. Discovery Health (Pty) Ltd (referred to as “the administrator”) is a separate company and an authorised financial services provider (registration number 1997/013480/07), which takes care of the administration of your membership for the Scheme.

Overview

The Mental Health Care Programme, together with your Healthcare Professional, will help you actively manage episodes of Major Depression. This programme gives you and your Healthcare Professional access to tools and benefits to monitor and manage your condition and ensure you get high quality coordinated healthcare and the best outcomes. This document gives you more information about the Mental Health Care Programme. This programme is available on all Bankmed Medical Scheme Plans.

About some of the terms we use in this document

There may be some terms we refer to in the document that you may not be familiar with. Here are the definitions of these terms.

Terminology	Description
Designated Service Provider (DSP)	A Healthcare Professional (for example doctor, specialist, pharmacist or hospital) who we have an agreement with to provide treatment or services at a contracted rate.
Emergency medical condition	An emergency medical condition, also referred to as an emergency, is the sudden and, at the time unexpected onset of a health condition that requires immediate medical and surgical treatment, where failure to provide medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person's life in serious jeopardy. An emergency does not necessarily require a hospital admission. We may ask you for additional information to confirm the emergency.
HealthID	HealthID is an app that gives your Healthcare Professional fast, up-to-date access to your health information. Once you have given consent, your Healthcare Professional can use HealthID to access your medical history, gain insight into the benefits of your health Plan, make referrals to other Healthcare Professionals, study your blood test results, and write electronic prescriptions and referrals.
ICD-10 diagnosis code	A clinical code that describes diseases and signs, symptoms, abnormal findings, complaints, social circumstances and external causes of injury or diseases, as classified by the World Health Organization (WHO).
Premier Plus GP	A Premier Plus GP is a network GP who has contracted with us to provide you with high quality healthcare for your condition.
Prescribed Minimum Benefits (PMBs)	In terms of the Medical Schemes Act of 1998 (Act No. 131 of 1998) and its Regulations, all medical schemes have to cover the costs related to the diagnosis, treatment and care of: <ul style="list-style-type: none"> • An emergency medical condition • A defined list of 271 diagnoses • A defined list of 26 chronic conditions To access Prescribed Minimum Benefits, there are rules that apply: <ul style="list-style-type: none"> • Your medical condition must qualify for cover and be part of the defined list of Prescribed Minimum Benefit conditions • The treatment needed must match the treatments in the defined benefits • You must use Designated Service Providers (DSPs) in our network. This does not apply in emergencies. However, even in these cases, where appropriate and according to the Rules of the Scheme, you may be transferred to a hospital or other service providers in our network, once your condition has stabilised. If you do not use a DSP we will pay up to 80% of the Scheme Rate. You will be responsible for the difference between what we pay and the actual cost of your treatment. If your treatment doesn't meet the above criteria, we will pay according to your Plan benefits.
Scheme Rate	This is a rate set by us. We pay for healthcare services from hospitals, pharmacies, Healthcare Professionals and other providers of relevant health services at this rate.
Selective serotonin re-uptake inhibitor (SSRI)	Selective serotonin re-uptake inhibitors are a class of antidepressant medications that includes Fluoxetine, Paroxetine, Citalopram, Escitalopram, Sertraline and Fluvoxamine.



How to join the Mental Health Care Programme

A Premier Plus GP or a Psychologist in the Mental Health Care Programme network can enrol you on the programme; provided you give consent.

Visit www.bankmed.co.za to find a Healthcare Professional on the network.

Your Premier Plus GP and Psychologist will work with you to manage your condition

The Mental Health Care Programme gives you and your Healthcare Professional access to tools and benefits to monitor and manage your condition and to ensure you have access to coordinated care.

Your Healthcare Professional can track your progress on a personalised dashboard on HealthID. This will help to identify which areas require attention so that your Healthcare Professional can improve the management of your condition.

The Mental Health Care Programme runs over a six month period but can be extended to 12 months, where clinically appropriate, by your enrolling Healthcare Professional through the HealthID platform.

Benefits available on the Mental Health Care Programme

When enrolled on the Mental Health Care Programme you will have access to the following benefits;

- Up to three consultations (virtual or face-to-face) with your enrolling Premier Plus GP.
- Psychotherapy consultations.
- When enrolled by a Premier Plus GP, you have access to antidepressant medication if you are on the Comprehensive, Traditional, Plus and Basic Plans. Members on the Essential and Core Saver Plans do not have access to antidepressant medication from this Programme.
 - Members on the Comprehensive, Traditional and Plus Plans need to follow the MediKredit authorisation process to get their antidepressant medication funded from the Additional Disease List benefit
 - Members on the Basic Plan have access to antidepressant medication in the SSRI class up to a monthly amount of R80.00

Contact us

You can call us on 0800 BANKMED (0800 226 5633) or visit www.bankmed.co.za for more information.

Complaints process

You may lodge a complaint or query with Bankmed Medical Scheme directly on 0800 BANKMED (0800 226 5633) or address a complaint in writing to the Principal Officer. Should your complaint remain unresolved, you may lodge a formal dispute by following Bankmed Medical Scheme's internal disputes process.

Members, who wish to approach the Council for Medical Schemes for assistance, may do so in writing to: Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch-Hazel Avenue, Eco Park, Centurion, 0157 or via e-mail at complaints@medicalschemes.co.za. Customer Care Centre: 0861 123 267/ website www.medicalschemes.co.za.

