



Advanced Illness Benefit

Who we are

Bankmed Medical Scheme (referred to as 'the 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 Advanced Illness Benefit (AIB) provides members who have an advanced illness access to comprehensive palliative care provided by a multidisciplinary team in the comfort of their own home or in a hospice facility.

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 meanings of these terms.

Terminology	Description
Day-to-day benefits	These are the available funds allocated to your Plan's applicable out-of-hospital benefits. Depending on the Plan you choose, you may have cover for a defined set of day-to-day benefits.
Scheme Rate	This is the rate we pay for healthcare services from hospitals, pharmacies, Healthcare Professionals, and other Providers of relevant health services.
ICD-10 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 Organisation (WHO).

Your Healthcare Professional is required to register you for cover on the Advanced Illness Benefit

To register, your Healthcare Professional is required to complete the Advanced Illness Benefit form and e-mail it to AIB@bankmed.co.za. The application form is available on our website www.bankmed.co.za

Access to the Advanced Illness Benefit is voluntary and is subject to clinical entry criteria

This benefit funds for palliative care for members in advanced stages of illness, where curative treatment has ceased and there is a palliative care plan to address symptoms related to the disease. If your application is approved, you will have access to the benefits offered by the Advanced Illness Benefit.

The Advanced Illness Benefit at a glance

Members on the Advanced Illness Benefit have access to the following:

Support from a dedicated care co-ordinator

A dedicated care co-ordinator, who is a registered nurse, will contact you (or your family member) once we have registered you on the Advanced Illness Benefit. The care co-ordinator will support you and your family and will work closely with your GP and/or specialist to ensure you always receive the best of care.

Personalised support and counselling

Members registered on the Advanced Illness Benefit and their family will have access to counselling services for support during this difficult time.

Comprehensive home-based services

Members registered on the Advanced Illness Benefit (AIB) will have access to personalised services such as:

- Medical care by palliative care trained Healthcare Professionals
- Rental of home oxygen concentrator and back up cylinder
- Pain management and symptom control
- Psychosocial support from social workers, counsellors or psychologists trained in palliation

The following services are subject to additional authorisation and managed care entry criteria may apply:

- Home based visits from a nurse specialising in palliative care
- Hiring/rental of specific equipment
- Hospice care at home and in-patient units, where available
- Limited radiology and pathology

Access to limited home nursing and in patient hospice care

Members enrolled on AIB have access to home nursing or in patient hospice care, for a limited duration, subject to authorisation and managed care criteria.

Access to specialised telephonic support

Members registered on the Advanced Illness Benefit can contact 011 529 6797 during working hours for assistance with Advanced Illness Benefit related authorisations, oxygen or benefit and claims related enquiries.



Your cover on the Advanced Illness Benefit

The Advanced Illness Benefit pays for services provided by a multidisciplinary team

We will pay for healthcare services provided by any of the Healthcare Professionals represented in the palliative multidisciplinary team, according to a specific basket of care and the agreed individual member care plan. These costs will not affect your day-to-day benefits and will be paid at the Scheme Rate from your Hospital Benefit.

Palliative care must be accessed from providers who are registered with the Board of Healthcare Funders

Bankmed will pay for these healthcare services or treatments if the application is approved, and you use appropriately registered Healthcare Professionals (with a valid Board of Healthcare Funders (BHF) registration number) who use valid tariff codes for the healthcare service or treatment.

Upon successful enrolment on to the benefit, the Palliative doctor may bill a once off fee for advanced care planning, thereafter a monthly management fee can be billed to ensure continued support whilst enrolled on the programme.

We need the appropriate ICD-10 codes on accounts

All accounts for palliative care must have a relevant and correct ICD-10 code (diagnosis code) for us to pay it from the correct benefit. To ensure there is no delay in paying your Healthcare Professionals' accounts, please notify the team managing your treatment (or your loved one's treatment) about this requirement.

Nominating a person to assist you

Where you, as the patient, choose to nominate someone to assist you with managing your medical aid, complete a Third Party Consent application form. This form is available on www.bankmed.co.za. Should you, at any stage, wish to revoke consent for sharing of information, you may notify us accordingly.

For more information on the Advanced Illness Benefit, visit www.bankmed.co.za or e-mail AIB@bankmed.co.za

Contact us

Kindly contact 0800 Bankmed (0800 226 5633) or e-mail enquiries@bankmed.co.za

Complaints process

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

