

DAY-TO-DAY BENEFITS ON DIFFERENT PLANS

+ Medical Savings Account (MSA)

| *More than a member. More with Bankmed.*

CORE SAVER, COMPREHENSIVE AND PLUS PLANS

A Medical Savings Account (MSA) is used to pay for healthcare you receive while you are not admitted to hospital. We use these funds to pay for medical costs like GP visits, X-rays (radiology), medication, and blood tests (pathology).

At the beginning of the year, we give you full access to a yearly amount. You pay the amount back without interest as part of your monthly contributions.

If you join Bankmed after 1 January, we work out your MSA amount for the rest of the year by multiplying the monthly amount you contribute towards your MSA by the number of months left in the year.

MAKING YOUR MEDICAL SAVINGS ACCOUNT (MSA) LAST

Only you and your treating Healthcare Professional can decide what treatment you need. Discuss with your Healthcare Professional to ensure you get the best value for money and treatment.

Pace yourself

Work out a budget just as you would with a savings account at the bank.

Know how much you have available for the year and plan for important check-ups over the year. Use pharmacies or clinic services that offer free blood pressure tests or give flu shots. (We pay for the flu vaccine from your **Insured Benefit**, so you do not use the funds in your MSA).



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STATEMENT

Plan	Medical Savings Account	Day-to-day benefits
Plus	Yes	<p>We pay day-to-day claims from your Medical Savings Account until you reach the Annual Threshold  ANNUAL THRESHOLD AND ABOVE THRESHOLD BENEFIT </p> <p>Once you reach the Annual Threshold, you gain access to the Above Threshold Benefit, which gives more cover if you have high out-of-hospital expenses</p>
Comprehensive	Yes	<p>We use the funds in your MSA to pay for GP and specialist consultations, acute medication (medication you have to take for a short time), blood tests (pathology) and X-rays (radiology)</p> <p>Unlimited cover from the Insured Benefit for procedures performed by GPs or specialists in their rooms, and basic dentistry (such as dentist consultations, teeth cleaning and fillings)</p> <p>We only pay the full cost if you use Healthcare Professionals in our network; otherwise you may incur a co-payment</p> <p>Cover from the Insured Benefit up to a set limit for advanced dentistry, orthodontics and other specified categories. When you reach the limit, we start paying from the available funds in your MSA</p>
Traditional	No	<p>We pay from the Insured Benefit for GP and specialist consultations, acute medication (short-term medication), X-rays (radiology), blood tests (pathology), basic dentistry, advanced dentistry and orthodontics up to the Plan limit</p> <p>Unlimited cover from the Insured Benefit for procedures performed by GPs and specialists in their rooms</p> <p>We only pay the full cost if you use Healthcare Professionals in our network; otherwise you may have to pay part of the cost yourself</p> <p>Limited cover for eye test and glasses or contact lenses every two years</p>
Core Saver	Yes	<p>Unlimited cover for Prescribed Minimum Benefits (PMBs) if you use GPs or specialists in our networks and get the recommended care for the condition. You have to register on the Chronic Illness Benefit for chronic conditions</p> <p>Prescribed Minimum Benefits  PRESCRIBED MINIMUM BENEFITS </p> <p>We pay for two consultations for non-PMB conditions from the Insured Benefit. Once this is used up, we pay for day-to-day benefits from the available funds in your MSA</p> <p>We use the available funds to pay for non-PMBs such as dentistry, orthodontics, eye care, and acute medication (short-term medication you have to take for a short time) that a Healthcare Professional prescribes</p> <p>Members on this Plan have limited cover from the Insured Benefit for acute medication a pharmacist prescribes and gives you</p>
Basic	No	<p>Unlimited cover for primary healthcare services such as GP consultations, acute medication (short-term medication you have to take for a short time) on our medicine list (formulary) and basic dentistry from Healthcare Professionals in our network</p> <p>Limited benefits for eye care from the Bankmed Optometry Network every two years</p> <p>We offer other benefits up to a limit if you get them from a Bankmed Entry Plan Network GP or this GP refers you to someone else (writes a letter saying you should see another Healthcare Professional in our network)</p> <p>No benefit for advanced dentistry or orthodontic treatment</p>
Essential	No	Cover limited to Prescribed Minimum Benefits

