



Hospital Option

Risk

Chronic

Guardian

Risk Benefit - Hospitalisation

Private hospitals

Including:

Surgical operations & procedures
 Theatre fees
 Labour and recovery wards
 Ward accommodation
 Medicine dispensed and used in hospital
 Intensive care and high care units
 Visits and consultations by a GP
 X-rays and pathology
 Physiotherapy
 Ultrasound scans (other than for pregnancy)
 Blood transfusions

Unlimited
Subject to Scheme Protocols

100% of Scheme Rate
 100% of Scheme Rate
 100% of Scheme Rate
 100% of Scheme Rate
 100% of Scheme Rate

Medicine received on discharge from hospital

Maximum of 7 days' supply

Professional fees i.e. surgeon and anaesthetist, including visits and consultations by a specialist

100% of Scheme Rate

Provincial hospitals

Diagnosis and treatment in respect of the Prescribed Minimum Benefits (PMB) package (as per government regulations)

Unlimited
Subject to Scheme Protocols

Casualty / emergency visits

Clinician and facility fees only
(Clinician paid at 100% Scheme Rate)

Limited to R1 200
per family per annum

Risk Benefit - Maternity

Confinements (normal vaginal delivery)

Length of stay: 3 days & 2 nights

Confinements (caesarean section)

Length of stay: 4 days & 3 nights

Neonatal Intensive Care

Subject to Scheme Protocols

Elective caesarean section

No Benefit

ResoBaby Maternity Programme (Registration required)

Consultations (midwife, GP, or specialist)
2 x 2D scans
Baby care products at preferred pharmacy network

Included
2 Specialist visits, 7 GP visits
Subject to Scheme Protocols
R 350

Risk Benefit - Other Risk Benefits

Psychiatric disorders

Limited to Network Provider and subject to PMB

Cochlear implants and all related thereto

No Benefit

Organ transplants

Limited to PMB at a provincial hospital and Regulation 8(3) of the Act

Internal prostheses

Limited to R45 000 per family per annum
Subject to prosthesis sub-limits

Oncology

Oncologist, chemotherapy, radiotherapy, oncology – related blood tests

Unlimited, subject to ICON network and protocols, pre-authorisation required

HIV / AIDS

Primary care including Voluntary Counselling and Testing and treatment
Hospitalisation if member is compliant on the HIV Management Programme

HIV Management Programme - Careworks
Private Network Provider hospitals and subject to Scheme Protocols and PMB
Limited to provincial facility

Hospitalisation if member is not registered and compliant on the HIV Management Programme

Haemodialysis

Covered at Network Provider and subject to PMB

Trauma counselling Assault, rape, hijacking and armed robbery	3 psychologist visits per beneficiary per annum and subject to Scheme Protocol R 500 per visit
Dental treatment in hospital	Impacted wisdom teeth Extensive treatment for children younger than 5 years of age Member liable for dentist / maxillofacial surgeon account Pre-authorization is required and protocols apply 100% of Scheme Rates

Risk Benefit - Other Insured Benefits

External medical appliances Subject to prescription by a registered healthcare practitioner and obtained from a supplier registered with the Board of Healthcare Funders (BHF)	R2 950 per family per annum Subject to PMB and appliance sub-limits
Home nursing	No Benefit
Hospice, rehab and step down facility	R17 700 per family per annum 100% of Scheme Rate
Specialised radiology (In and out of hospital) (CT, MRI, PET and Nuclear Medicine scans)	R8 000 per family per annum (In and Out of hospital) 100% of Scheme Rate
Video EEG for epilepsy surgery	No Benefit
Emergency evacuation and ambulance services (Europ Assistance) Limited to preferred provider	100% of Scheme Rate
International cover	Limited to emergency medical cover up to 30 days / R2 million per beneficiary per incident

Chronic Medication Benefit

25 PMB Chronic Disease List (CDL) conditions	Included Subject to Hospital chronic formulary
Resolution additional chronic conditions	No Benefit

Note:

- Authorisation must be obtained in advance from the Scheme for all hospitalisation and other insured benefits
- No benefits shall be granted for (1) the replacement of existing External Medical Appliance items, without satisfactory proof that the existing item is obsolete, (2) costs of maintenance, spares or accessories
- Hospice, rehab and step down facility: Includes accommodation and visits by a medical practitioner, except where inclusive global fees are applicable.
- Other insurer benefits are pro-rated for members joining during the course of the year
- Chronic medication:
 - Should be obtained from Preferred Provider Pharmacies to avoid processing co-payments
 - Is restricted to formularies, clinical entry criteria and disease management protocols where applicable
 - Requires a script from a person legally entitled to prescribe and the relevant ICD 10 diagnosis code
 - Must be registered by the doctor or pharmacy through Swift Online (SOL) on 0800 132 345
 - Reference pricing and Maximum Medical Aid Price (MMAP®) may apply

Guardian Benefit - Preventative Care

Limited to (Excludes consultation)	R2 950 per family per annum, Scheme Rate applies
Blood pressure Blood sugar Cholesterol Body mass index	R 90 per beneficiary over the age of 18 years only at pharmacy
HIV test	1 Test per beneficiary per annum
Mammogram	1 Test per beneficiary per annum over the age of 25 years
Pap smears	1 Test per beneficiary per annum
PSA testing	1 Test per beneficiary per annum over the age of 45 years
Vaccinations	1 Flu vaccination per beneficiary per annum Childhood immunisations as recommended by the Department of Health up to 18 months HPV (cervical cancer) vaccine –1 course (3 doses per registered schedule) per female beneficiary per life between 9 and 46 years of age
Pharmacist benefit Pharmacist prescribed medication	R 300 per family per annum Formulary applies
Health Assist (Nurse helpline)	Call 0861 112 162

Contributions

	Hospital
Principal Member	R 899
Adult Dependant	R 718
Child Dependant	R 285

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