

SABMAS Newsletter

Issue 1, January/February 2018



Your *benefits* and *website*

Happy new year to you all. I hope you celebrated the start of 2018 in good spirits with family and friends. Now that we're in the new year, it's a good chance to look ahead and think about what the year may bring us.

Let's start by looking back. At the end of last year we sent you the 2018 Benefit Guide, which explains what benefits you have as well as the limits to your cover. If you haven't already, please read through it to make sure you understand your benefits.

Remember, the website has tools to help you manage your membership. These include checking your available benefits, finding a Healthcare Provider, submitting claims, and finding the documents you need.

We look forward to looking after your healthcare needs this year.

Khanya

Khanya Sibiya
Principal Officer

Use your *benefits* wisely

On behalf of the Trustees I would like to wish all our members a very happy and healthy New Year!

The new year also marks the beginning of a new benefit cycle. While it's tempting to have all kinds of medical services done at the beginning of the year when your limits reset, a little bit of planning can make a big difference when it comes to making sure your benefits last you and your family the whole year.

Start the year by going for a health assessment at Clicks or Dis-Chem so that you know your general health status. The Scheme pays for the tests in full. The assessment also does not add up to your overall limit if you are on the Essential Option.

Both the Comprehensive and Essential Options have limits to your Day-to-day Benefits. While it is not always possible to predict when you or your family may become ill and need to visit your GP, there are ways to make your benefits last longer including not going to see a specialist unless your GP recommends it and using Healthcare Providers in our SAB Medical Aid Scheme Networks. Read more about making your benefits last in our Tips for getting the most out of your membership article.

Werna

Werna Oberholzer
Chairman

Tips for getting the most out of your membership

It's the beginning of a new year, which means your limits and sub-limits for the year have been reset. Although it might feel like you have plenty of funds for the year ahead, it's good to plan ahead and make sure those limits last for as long as possible so you don't run out of benefits before the end of 2018. If you're on the Comprehensive Option, we help you by allocating your savings to your Medical Savings Account every quarter. No matter your benefit option, follow these tips to make sure you get the most out of your benefits.

Use the SABMAS Provider Networks

SAB Medical Aid has payment agreements with certain specialists and other Healthcare Providers. We call them network Healthcare Providers. Healthcare Providers in our network charge a rate in line with the agreements set out between them and SABMAS. So when you visit them, you know you are seeing a doctor who meets our quality standards and asks a fair rate.

You can also ask your specialist to work with specialists in our network if you need to go to hospital. To find a doctor in our network, log in to www.sabmas.co.za and click on **DOCTOR VISITS/Find a Healthcare Provider**.

See your GP first

If you have concerns about your health, visit your GP to discuss your health and coordinate your care for the year. According to the Council for Medical Schemes, care coordinated by GPs decreases your chance of being hospitalised.

Ask your doctor about generic medicine

Don't be afraid to ask your doctor for the most cost-effective medicine that will work. Sometimes a more expensive medicine has a generic version that works just as well. A wide variety of medicine is available to treat many conditions – the most expensive medicine isn't always the best medicine.



Register for the Chronic Illness Benefit if you have a chronic condition

You don't need to reach your day-to-day limits by using the benefits for a long-lasting condition. Instead, register for the Chronic Illness Benefit if you have one of the 27 conditions on the Prescribed Minimum Benefits Chronic Disease List. If you are on the Comprehensive Option, you have cover for additional chronic conditions. Refer to www.sabmas.co.za / **BENEFITS AND COVER / Chronic medicine** for more information.

Once you are registered, we will not use your day-to-day benefits to pay for medicine or for the treatment we recommend. Remember to visit a healthcare provider in our network to avoid having to pay a part of the bill yourself. There might be limits and conditions to the cover. Please read your approval carefully to see what we cover.

To register, simply ask your doctor or pharmacist to call us on **0860 002 133** to apply for chronic cover.



What is pre-authorisation and why do you need it?

Pre-authorisation is when you contact the Scheme to confirm benefits before you go to hospital for a planned procedure, or have certain procedures and tests done in a doctor's rooms.

When you contact us, we check if the procedure is allowed according to the Scheme Rules and what benefits are available. Your pre-authorisation tells you what SAB Medical Aid will pay for. If you do not contact us for pre-authorisation, you may have to pay for the procedure and the hospital stay yourself.

How to apply

Your doctor will be able to give you all the information you need to get pre-authorisation. To get pre-authorisation, call 0860 002 133.

We will ask you for the following information:

- Membership number
- Name of admitting doctor
- Name of hospital
- Diagnosis
- The diagnostic codes (called ICD-10 codes)
- Procedure to be performed – with relevant tariff codes.

You don't need pre-authorisation in a medical emergency

In a medical emergency, call Netcare 911 on 082 911. If you are admitted to hospital in a medical emergency, you don't need pre-authorisation. However, you or the hospital still need to let us know within 48 hours of admission.

Sometimes, your doctor or the hospital will get authorisation for you. If they do this, ask them for a copy of all the information they gave us. You also need to check what we will cover. Visit www.sabmas.co.za for more information.

Are your details **up to date?**

This time of year there are many 'new year, new you' articles about. You don't have to change yourself for 2018, but we would like to know if your details have changed. We only use your contact details to send you important updates about the Scheme and your membership. You need to receive this information to get the most out of your benefits. If you do not use your work email address or don't have access to a computer at work, please provide your personal email address when you update your details.

You can update your contact details by logging in to www.sabmas.co.za or by calling us on 0860 002 133.



SAB Medical Aid is passionate about delivering excellent service to its members and we rely on your feedback to tell us how we're doing.

We may send you an email or SMS after you contact us, to ask that you rate our service in one of two ways:

- Please let us know if your query was resolved, which is a simple 'yes' or 'no'
- Please rate your recent interaction on a scale of 1 (bad) to 10 (excellent) with us

We will review your responses in order to determine how we can improve on what we are doing, and if you have mentioned a specific concern we will be in touch with you.

Annual General Meeting for 2017 - feedback

The Scheme's Annual General Meeting (AGM) for 2017 was held on 22 June 2017, with a continuation meeting held on 18 August 2017. The AGM is a formal meeting held in terms of the Rules of the Scheme, and as such Mr Aslett, the Chairman of the Scheme at the time, managed the meeting accordingly. Apart from dealing with the formalities required of such a meeting, Mr Aslett highlighted the following items to the members:

- The change in Principal Officer, with Belinda Phillips stepping out of the role and Khanya Sibiyi, replacing her.
- The change in administrators from MMI to Discovery Health, effective 01 July 2017.
- The change in Trustees serving on the Board, with there being 6 new trustees on the Board.

At the AGM held on 22 June 2017, Mr Nathan Sampson was elected as a Trustee; Ngubane and Company was re-elected as the external auditors of the Scheme for the 2017 financial year; and the Annual Financial Statements (AFS) for 2016 as presented were adopted by the AGM. The highlights of the AFS was that the Scheme ended 2016 with a solvency level of 75.3% after making a R18.4m surplus, with the claims ratio being 95.1%.

At the meeting of 18 August 2017, the Minutes of the 2016 AGM were approved subject to a written objection raised by a member present being submitted to the Scheme and appended to the Minutes. An alternative proposal

that all trustees be remunerated was tabled at the AGM continuation. The meeting resolved that the policy be referred back to the Audit Risk and Remuneration Committee for further consideration, taking into account the proposal that was tabled at the meeting.

Four motions were put to the AGM to consider:

- Change in the composition of the Board of Trustees to reduce the number of employer appointed trustees and have specific labour appointed trustees – as a result of the proxy forms only being able to be used for matters listed on them, the motion was not carried
- All Board members to be remunerated equally for managing the affairs of the Scheme – this matter was referred to the Audit, Risk, and Remuneration Committee to deliberate upon, as stated above – the motion was therefore not carried
- No confidence in the Board of Trustees – this motion was withdrawn
- Allocation of a budget for FAWU's NEF to source and pay for expertise – this motion was withdrawn

The meeting was closed by the Chairman after he thanked the members for attending and the Trustees for their commitment in making the Scheme a success.



Our website saves you time; **it's all there online**

At the end of last year we sent you all kinds of information about your benefits for this year. Luckily you don't have to dig through your emails or rely on your memory to know what benefits you have available. You also don't have to wait for office hours to call us. Visit www.sabmas.co.za for immediate access to you and your family's Scheme details and tools to find a Healthcare Provider, submit your claims and even view your medical history.

Check what benefits are available

You don't have to wonder about your benefit limits and only find out once you've visited the doctor. Log in to check what benefits you and your family have used, what benefits are available and if limits apply to your cover.

Easy application forms

We've grouped our forms and benefit information together on the **Find a document** page. The link is under the **MY PROFILE** tab and the landing page. This makes it easy to find out how benefits work and then apply for them immediately without having to wait for business hours.

Find a Healthcare Provider in our network

Doctors in our network offer quality care at reasonable rates. We pay them directly so you have to pay out of pocket, as little as possible. Our website makes it easy to find one near you. Click on the **DOCTOR VISITS** tab and **Going to see a Healthcare Provider**.

Submit claims

If you visit a Healthcare Provider in our network, you don't have to claim since the Healthcare Provider will send us the claim. If you visit a Healthcare Provider we don't have an agreement with, and you pay cash upfront, you can send us claims through the website. It's quick and convenient, and means you don't have to wonder if your claim reached us.

Head on over to
www.sabmas.co.za and make
managing your medical aid
so much easier!

Invest 10 minutes in your wellness, it's on us!

You can't tell how healthy someone is just by how they look. In the same way, you can't tell how healthy you are just by how you feel. Luckily, a simple health assessment made up of a few simple tests, a scale and a measuring tape can give you a snapshot of your health and identify and prevent possible problems before you even show the first symptoms. It's important to have the tests done each year so you can see how your measures change.

As a member of SAB Medical Aid, you and your dependants automatically have cover for one health assessment a year at a Clicks or Dis-Chem. The Scheme pays for the tests in full if you have them all done at the same time. You can also have an HIV test done at the same time.

So don't wait, take 10 minutes to know your health.

“ Your cholesterol, blood pressure, blood sugar and body mass index can show if you are slowly developing conditions like high blood pressure, diabetes or have the early signs of heart disease. The earlier you detect and treat these conditions, the healthier you will be. ”

Love your heart

No matter how you feel about Valentine's Day, there's no denying that hearts pop up everywhere in February. So why not take the time to appreciate your heart a little since it's the engine that keeps you running? Here are some tips to keep your heart healthy and happy.

Feed your heart

You recharge your heart by eating and drinking. Having the occasional candy heart won't hurt you, but balance is key.

Keep your heart happy by:

- Avoiding processed and packaged food since they are often high in sugar and fat
- Cutting down on sugary drinks and fruit juice – drink water or dilute fruit juice instead
- Swapping sweets for delicious, fresh fruit
- Eating five portions (each portion is about a handful) of fruit and vegetables a day
- Packing your own lunches at home, to avoid getting take away food.

Move to the beat

There's nothing like exercising to get your blood pumping, which is very good for your heart and health.

Step away from your desk and exercise:

- Start slow and then work your way up to 30 minutes of moderate-intensity exercise five times a week
- Walk, play, dance or do housework, they all count
- Be more active every day and make small changes like taking the stairs or walking instead of driving
- If you are unsure or concerned, ask your GP before starting with an exercise plan.

Don't smoke

If you don't smoke, don't start. If you smoke, your heart would like you to smoke less or quit. If you want to quit smoking, speak to your GP. If they write a prescription for smoking cessation products, we pay for it from your available Day-to-day Benefits.

When you quit:

- Your risk of coronary heart disease goes down significantly after two years
- Your risk of cardiovascular disease is the same as a non-smoker's after 15 years
- You look after other people's hearts since second-hand smoke can also cause heart disease in non-smokers.

“ Start working on your heart's health today. ”

What we have in store for 2018

We hope you've had a restful and relaxing December and are ready for the new year. We want to share some information with you on what to expect in 2018; we're holding Trustee elections and a reminder of some of the changes to our benefits

Trustee elections

As per our Scheme Rules, member elected trustees hold office for a period of 4 years. It is therefore time for trustee elections again in 2018. Please remember that the Board consists of 10 trustees, 5 of whom are member elected. You can start thinking of candidates for the Board of Trustees so long. Please expect a call for nominations in March, and watch the space for further updates and communication.



Benefit changes for 2018

A new year feels like a fresh start, and it's easy to file information from the previous year away as finished. We'd therefore like to remind you about some of the changes to your benefits for 2018.

We've changed how we pay claims

As long as you have benefits available:

- If the Healthcare Provider charges at the Scheme Rate, we pay them directly
- If the Healthcare Provider charges more than the Scheme Rate, we pay the Scheme Rate to the Healthcare Provider, and you have to pay the rest of the account yourself
- If you pay the Healthcare Provider yourself and then send us the account with proof of payment, we pay you back at the Scheme Rate.

Contraceptives

On the Comprehensive Option, we cover all contraceptive products and devices up to R1 980 a year for female beneficiaries.

Additional cover for medicine from the acute medicine limit

We will provide additional cover on both Benefit Options, from your acute medicine limit for benefits that were exclusions before. These are only applicable for those items prescribed by a registered Healthcare Provider:

We now cover:

- Medicines used specifically to treat abuse and/or dependence on psychoactive substances including alcoholism
- Anti-malaria medication
- Stimulant laxatives
- Antidiarrheal micro-organisms.

Please read through *Your guide to SAB Medical Aid Benefits 2018* to find out what benefits you have available.