



# Maternity Benefit 2024

## Who we are.

SAB Medical Aid (the Scheme), registration number 1209, is the medical scheme that you are a member of. This is a non-profit organisation, registered with the Council for Medical Schemes and administered by 3Sixty Health (Pty) Ltd, registration number 1978/001109/07, an accredited administration and managed care service provider.

## About this document.

This document tells you how SAB Medical Aid covers pregnancy and childbirth. Read further to understand what is included in your Maternity Benefits and how to get the most out of them.

## How we cover pregnancy and childbirth.

The Maternity Benefit covers most but not all day-to-day and in-hospital medical expenses for expectant mothers and newborns.

In order to access the Maternity Benefits listed below, you need to call us as soon as your pregnancy has been confirmed. Failing to do so could impact the payment of claims related to your pregnancy.

## Maternity Wellness Benefit.

Each of the following maternity pathology tests are covered from the Maternity Wellness Benefit. You are covered for these tests for each pregnancy, on the Essential and Comprehensive Option.

- Antiglobulin test
- Full blood count
- Platelet count
- Grouping: Rh antigen
- Blood grouping
- HIV Ab/Elisa
- Rubella-IgM: Specific antibody titer: ELISE/EMIT: Per Ag
- Quantitative Khan VDRL or other flocculation
- Beta HCG qualitative
- Beta HCG quantitative



- Hepatitis H306 surface antigen

### **Out-of-Hospital Maternity Benefits.**

**The following benefits will be available to you once you have activated your Maternity Benefit:**

- Out-of-hospital Maternity Benefits include 12 antenatal consultations with a GP, gynaecologist, or midwife and two 2D scans per pregnancy. These claims are funded at 100% of either the claimed amount or Scheme Rate, whichever is the lower amount. Using a Network Specialist will ensure you have no co-payments on your consultation claims.
- You also have access to cover for antenatal classes and post-natal care by a midwife or other registered practitioner at home or at a clinic.
- We will pay the nuchal translucency or Non-Invasive Prenatal Test (NIPT), from your Medical Savings Account (MSA).

### **In-Hospital Maternity Benefits.**

Your cover for your hospital stay depends on the type of delivery you have. You have cover for three days and two nights' hospitalisation for a normal delivery and four days and three nights for a delivery by caesarean section, when approved.

Where your cover has been confirmed, we will give you an authorisation number to use when booking your bed at the hospital.

If you need to stay in hospital longer than the number of approved days, your doctor will need to send us additional clinical information to support this.

### **We cover home births with a registered midwife.**

We pay for home births from your Major Medical Benefit. We cover the costs of a registered midwife as long as they have a valid practice number.

The midwife will be reimbursed at 100% of either the claimed amount or recommended tariff, whichever is the lower amount.



## **We cover water births in-hospital or at home.**

You have cover for a water birth in-hospital and your hospital stay will be covered for three days and two nights. If you choose to have a water birth at home, we pay for the cost of the hire of a birthing pool from your Major Medical Benefit. This must be hired by a registered provider who has a valid practice number.

If you choose to have a water birth or normal delivery at home, we will pay for care by a midwife for up to three days (including the delivery day) from your Major Medical Benefit. The midwife must be registered with a valid practice number.

## **There are certain items we do not cover.**

- Mother-and-baby packs supplied by the hospital.
- The bed booking fee that some hospitals may need you to pay.
- Your lodging or boarding fees if your baby needs to stay in-hospital for longer and you choose to stay on with the baby.
- The cost of a birthing pool for water births if you choose to hire a birthing pool from a nonregistered practitioner.

## **Essential Option**

### **Out-of-Hospital Maternity Benefit.**

All maternity claims are subject to your Overall Annual Limit.

### **In-Hospital Maternity Benefits.**

Your cover for your hospital stay depends on the type of delivery you have.

You have cover for three days and two nights' hospitalisation for a normal delivery and four days and three nights for delivery by caesarean section, when approved.

Where your cover has been confirmed, we will give you an authorisation number to use when booking your bed at the hospital.

Caesarean sections are limited to R27 287 for each confinement. This includes funding of the hospital accommodation, theatre fees, labour ward fees, drugs, dressings, and materials in a private or provincial hospital and registered medicines (prescribed by a person who is legally entitled to prescribe or were supplied by a registered midwife).



If you need to stay in hospital longer than the number of days approved, your doctor will need to send us additional clinical information to support this.

### **We cover home births with a registered midwife.**

We pay for home births from your Major Medical Benefit. We will cover the costs of a registered midwife as long as they have a valid practice number. The midwife will be reimbursed at 100% of either the cost or recommended tariff, whichever is lower.

### **We cover water births in-hospital or at home.**

You have cover for a water birth in-hospital and your hospital stay will be covered for three days and two nights.

If you choose to have a water birth at home, we will pay for the cost of the hire of a birthing pool from your Hospital Benefit. This must be hired by a registered provider who has a valid practice number.

If you choose to have a water birth or normal delivery at home, we will pay for care by a midwife for up to three days (including delivery) from your Major Medical Benefit. The midwife must be registered with a valid practice number.

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### **Contact Us.**

You can contact us on 0860 002 133 or visit our website at [www.sabmas.co.za](http://www.sabmas.co.za) for more information.

### **Complaints process**

You may lodge a complaint or query with SAB Medical Aid by addressing a complaint in writing directly to the Principal Officer. If your complaint remains unresolved, you may lodge a formal



dispute by following the Scheme's internal dispute process on the SABMAS website. 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 email [complaints@medicalschemes.co.za](mailto:complaints@medicalschemes.co.za). Customer Care Centre: 0861 123 267 / website [www.medicalschemes.co.za](http://www.medicalschemes.co.za)