Ideal for

first-time buyers of medical aid



From **R1638** per month



Day-to-day benefits



Network GP visits (R130 co-payment per visit)



Radiology, pathology, and acute medicine R1700



Selfmedication R510



check-ups



Added insured benefits



Contraceptives R1400/R1900



Preventive care

Health tests and screenings

Core benefits



Trauma and emergency medical cover



Quality private hospitalisation



Care for 271 PMB diagnoses and all CDL conditions



Specialised radiology in hospital

National networks of quality, private hospitals, and GPs



Main member		Med Move!
Dependant	8	R1 638
Child dependant <26 years	8	R1 638

MedMove is ideal for young career starters with essential cover at quality private facilities, and preventive care benefits





Monthly contributions

	Monthly income
	R901+
Main member	O R1636
Dependant	O R1636
Child dependant	R1636

Day-to-day benefits

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Network virtual GP consultations during nurse visits	Member pays the first R130 per virtual network GP consultation (no co-payment for nurse visits)
Network GP consultations	Member pays the first R130 per visit (visit 1-10 only) 11th visit onward - only listed conditions (R130 co-payment for visits not applicable) Authorisation required after the sixth visit
Specialist consultations	R1 000 per family per year at network specialists
Physiotherapy	Member pays the first R130 per visit Two visits per family
Self-medication	R105 per event, up to R510 per family
Acute medicine, standard radiology and pathology (Ampath, Lancet, and PathCare Vermaak)	R1 700 per family
Eye test (PPN network)	One consultation per person per 24-month cycle Member pays the first R130 per consultation
Dental check-up (DRC network)	One routine check-up Member pays the first R130 per consultation
Post-hospital care for speech therapy, occupational therapy, and physiotherapy	R2 300 per member and R3 300 per family

Added insured benefits

These benefits are provided in addition to your insured day-to-day benefits. They are activated when you register on HealthPrint, Medihelp's free wellness programme for members, on the Member Zone. Your health screening results from Dis-Chem or Clicks will automatically upload to your health record on HealthPrint.

Health screening tests	One combo health screening (blood glucose, cholesterol, BMI, and blood pressure measurement)
Preventive care benefits	A flu vaccine A Pap smear every three years
Contraceptives	Oral/injectable/implantable contraceptives - R110 per month, up to R1 400 per year Intra-uterine device - R1900 every 60 months
Supporting wellness	Cancer programme HIV/Aids programme

Core benefits

In-hospital treatment and life-essential services (insured benefits)		
Hospitalisation	Network hospitals Day procedure network applies to all day procedures Member pays a R1 750 co-payment (PMB admission excluded)	
Neonatal hospitalisation	R53 500 per family	
Trauma that necessitates hospitalisation	PMB	
Childbirth	РМВ	
Specialised radiology	MRI and CT imaging in hospital R13 600 per family (co-payment applies) Angiography PMB	
Standard radiology, pathology (Ampath, Lancet, and PathCare Vermaak) and medical technologist services	Unlimited when admitted to a network hospital	
Radiography	R1 250 per family per year	
Emergency transport (Netcare 911)	(Country of residence: RSA, Lesotho, Eswatini, Mozambique, Zimbabwe, Namibia, and Botswana)	
Treatment of life-threatening conditions	Unlimited Includes 271 PMB and 26 Chronic Diseases List (CDL) conditions	
PMB medicine	PMB only	
Oxygen	РМВ	
Mental health (psychiatric treatment)	PMB	
Cancer treatment	РМВ	
Organ transplants	РМВ	
Palliative care	R20 700 per family	
Other core benefits	PMB only Including renal dialysis, hospice, subacute care, and private nursing services as an alternative to hospitalisation	

Important

This is only a summary of the available benefits and co-payments that may apply to certain benefits. Please consult the registered Rules of Medihelp and the Member guide for more details. In case of a dispute, the Rules of Medihelp will apply (subject to approval by the Council for Medical Schemes). Certain added insured benefits are not available if the patient has registered the medical condition for PMB or chronic medicine benefits, as the treatment is no longer considered as preventive care.

