



Cover for pregnancy, childbirth and early
childhood

2018

Overview

Discovery Health Medical Scheme members have access to comprehensive maternity and post-birth benefits supported by access to 24/7 support, advice and guidance through the My Pregnancy and My Baby programmes on the Discovery app and website.

This document tells you about how Discovery Health Medical Scheme covers you for pregnancy, childbirth and early childhood and which benefits they are covered from. Read further to understand what is included in your benefits and how to get the most out of your maternity benefits. It's important to refer to the section *Maternity Benefits available for your plan type* for information specific to your chosen health plan.

About some of the terms we use in this document

There may be some terms we refer to in the document that you may not be familiar with. Here are the meanings of these terms.

Terminology	Description
Day-to-day benefits	These are the available funds allocated to the Medical Savings Account and Above Threshold Benefit, where applicable.
Above Threshold Benefit (ATB)	Available on the Executive, Comprehensive and Priority plans Once the claims you have sent to us add up to the Annual Threshold, we pay the rest of your claims from the Above Threshold Benefit (ATB), at the DHR or a portion of it. The Executive and Comprehensive plans have an unlimited ATB, and the Priority plans have a limited ATB.
Medical Savings Account (MSA)	Available on the Executive, Comprehensive, Priority and Saver plans We pay your day-to-day medical expenses such as GP and specialist consultations, medicine, except for registered and approved chronic medicine, radiology and pathology from the available funds allocated to your MSA. Any unused funds will carry over to the next year.
Discovery Health Rate (DHR)	This is a rate set by us at which we pay for healthcare services from hospitals, pharmacies and healthcare professionals.
Discovery HomeCare	Discovery HomeCare is a service provider that offers you quality home-based care in the comfort of your home. Discovery HomeCare is a service provider. Practice 080 000 8000190, Grove Nursing Services (Pty) Ltd registration number 2015/191080/07, trading as Discovery HomeCare.
MaPS Advisor	MaPS Advisor is a medical and provider search tool which is available on the Discovery website. The value-added service - MaPS Advisor - is brought to you by Discovery Health (Pty) Ltd; registration number 1997/013480/07, an authorised financial services provider and administrator of medical schemes.
Maternity Benefit	Comprehensive benefits for maternity and early childhood that cover certain healthcare services before and after birth.
My Pregnancy and My Baby programmes	Activate the My Pregnancy and My Baby programmes on the website or the Discovery app and gain access to immediate support, advice and tools such as: <ul style="list-style-type: none"> 24/7 doctor advice on your device

Terminology	Description
	<ul style="list-style-type: none"> • A maternity cost estimator • A pregnancy health record • A digital vaccination card • An education cost calculator. <p>My Pregnancy and My Baby programmes are brought to you by Discovery Health (Pty) Ltd; registration number 1997/013480/07, an authorised financial services provider and administrator of medical schemes.</p>
Prescribed Minimum Benefits	<p>In terms of the Medical Schemes Act of 1998 (Act No. 131 of 1998) and its Regulations, all medical schemes have to cover the costs related to the diagnosis, treatment and care of:</p> <ul style="list-style-type: none"> • An emergency medical condition • A defined list of 270 diagnoses • A defined list of 27 chronic conditions. <p>To access Prescribed Minimum Benefits, there are rules that apply:</p> <ul style="list-style-type: none"> • Your medical condition must qualify for cover and be part of the defined list of Prescribed Minimum Benefit conditions • The treatment needed must match the treatments in the defined benefits • You must use designated service providers (DSPs) in our network. This does not apply in emergencies. However even in these cases, where appropriate and according to the rules of the Scheme, you may be transferred to a hospital or other service providers in our network, once your condition has stabilised. <p>If your treatment doesn't meet the above criteria, we will pay up to 80% of the Discovery Health Rate (DHR). You will be responsible for the difference between what we pay and the actual cost of your treatment.</p>
Emergency medical condition	<p>An emergency medical condition, also referred to as an emergency, is the sudden and, at the time unexpected onset of a health condition that requires immediate medical and surgical treatment, where failure to provide medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person's life in serious jeopardy.</p> <p>An emergency does not necessarily require a hospital admission. We may ask you for additional information to confirm the emergency.</p>
Related accounts	<p>Any account other than the hospital account for in-hospital care. This could include the gynaecologist/obstetrician and anaesthetist's account.</p>
Deductible	<p>This is the amount that you must pay upfront to the hospital or day clinic. You must pay this amount from your pocket.</p>
Shortfall or co-payment	<p>Discovery Health Medical Scheme pays service providers at a set Discovery Health Rate. If the doctor's accounts are higher than this rate, you will have to pay the outstanding amount from your pocket.</p>

You get comprehensive maternity and early childhood benefits

The Maternity Benefit is available from 2018 per pregnancy per child up to two years after birth. Please refer to the *Maternity benefits available for your plan type* section for more details.

How to activate your Maternity Benefit

The Maternity and early childhood benefits will be effective from the date of activation and is activated:

- When you create your pregnancy or baby profile on www.discovery.co.za or on the Discovery app,
- When you preauthorise your pregnancy and delivery or
- When you register your baby onto the Scheme.

If your baby was born and registered onto the Scheme before 2018, you can activate the post-birth benefits by creating your baby profile on www.discovery.co.za or on the Discovery app.

You can also call us on 0860 99 88 77 or visit www.discovery.co.za to activate your Maternity and early childhood benefits, find out how you are covered and to authorise your hospital admission.

When authorising your hospital admission, remember to have the following information at hand:

- Date of the admission
- Name or practice number of the hospital or clinic
- Name and practice number of the treating doctors and anaesthetist (if available)
- ICD-10 code from your treating doctor (this is an alphanumeric code that describes your diagnosis (pregnancy))
- RPL code from your treating doctor (this is a procedure code that describes how you plan to deliver your baby).

During your pregnancy

Please refer to the *Maternity benefits available for your plan type* section for more details.

These healthcare services are covered from the Maternity Benefit at the Discovery Health Rate from the date of activation. This cover does not affect your day-to-day benefits and depends on the plan you choose. Once you have used up your Maternity Benefit, we pay for out-of-hospital healthcare expenses related to your pregnancy from your available day-to-day benefits. If you do not have day-to-day benefits, or if you have run out of funds, you must pay for these costs yourself.

Antenatal consultations

You are covered for up to 12 visits (including the urine dipstick) at your gynaecologist, GP or midwife, depending on the plan you choose.

For GP visits, members on the Smart and KeyCare Plans need to use their respective network GPs.

Ultrasound scans and prenatal screening

You are covered for up to two 2D ultrasound scans including one nuchal translucency test. 3D and 4D scans are paid up to the rate we pay for 2D scans.

You are also covered for one Non-Invasive Prenatal Test (NIPT) if you meet the clinical entry criteria.

We pay for Non-Invasive Prenatal Test (NIPT) screening up to 100% of the Discovery Health Rate from the Maternity Benefit, subject to clinical entry criteria and if you use one of our preferred providers, Next Biosciences, Ampath Laboratories or Lancet Laboratories.

If you use any other provider you will be responsible for the difference between what is charged and what we pay. If you do not meet the clinical entry criteria for NIPT, the test will be covered from your available day-to-day benefits, up to 100% of the Discovery Health Rate.

Any additional costs such as consultations with a genetic counsellor or any other healthcare provider, and additional tests that might be needed, will be covered according to the health plan you have chosen.

Blood tests

You have cover for a defined basket of blood tests per pregnancy from the Maternity Benefit. These tests include:

- To confirm pregnancy (bHCG)
- HIV (Elisa)
- Syphilis (RPR and TPHA)
- German Measles (Rubella)
- Glucose
- Blood cross-matching (Rh antigen)
- Anaemia (Haemoglobin)
- Blood group (A, B and O antigen)

Antenatal classes with a nurse

You are covered for up to five pre- or postnatal classes up until two years after birth from the date of activation, or 12 months on KeyCare Access (including online antenatal classes) with a registered nurse. If your healthcare professional charges for a combination of classes it will count towards your allocation of five classes. You will be responsible for the difference between the amount charged and the amount the Scheme pays.

Essential registered devices

Members on the Executive and Comprehensive plans have cover for up to R5 000 for essential registered devices from the Maternity Benefit eg breast pumps and smart thermometers, with a co-payment of 25%.

For other plans, we pay external medical items like breast pumps and apnoea monitors from the available funds in your day-to-day benefits, and subject to annual benefit limits where applicable. These items must be registered products that are bought from registered providers.

If your plan does not have available day-to-day benefits or you have run out of funds, you need to pay these costs yourself.

Birth-related benefits

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

You have cover for your delivery from your Hospital Benefit, once approved. Where we confirm cover, we will give you an authorisation number to use when booking your bed at the hospital.

Private ward cover

Members on the Executive and Comprehensive Plans have private ward cover up to **R1 880 per day** for their approved hospital stay for the delivery. If you require an extended length of stay it will be covered in a general ward, once approved.

We cover home or birthing home births with a registered midwife

We pay for home births, or birthing home deliveries from your Hospital Benefit up to the Discovery Health rate. We will cover the costs of a registered midwife in our network with a valid practice number only. If you choose to use a midwife that is not in our network you will be responsible for the difference between the amount charged and what the Scheme pays.

We Cover Doulas from your Medical Savings Account

A Doula is a person who gives support, help and advice to a woman during pregnancy, as well as during and after birth. Doula services will be covered from the available funds allocated to your MSA, where applicable. If you are on a plan that does not offer a MSA you have to fund for these costs yourself.

Cover for Doulas does not accumulate or pay from the Above Threshold Benefit, where applicable.

We cover water births in hospital, at birthing homes or at home

You have cover for a water birth in hospital for the approved stay. 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 up to the Discovery Health Rate. This must be hired from a registered provider who has a valid practice number. If you choose to use a midwife that is not in our network you will be responsible for the difference between the amount charged and what the Scheme pays.

If you are on a KeyCare Plan, we will pay for the cost of the hire of a birthing pool from your Hospital Benefit up to the Discovery Health Rate. This must be hired from a registered provider who has a valid practice number. If you choose to use a midwife that is not in our network you will be responsible for the difference between the amount charged and what the Scheme pays.

Discovery HomeCare services covered from your Hospital Benefit

Discovery HomeCare is a home-based healthcare service that offers you quality care in the comfort of your home. This service is paid from the Hospital Benefit, subject to approval. As part of this service, home visits by midwives will be available to provide postnatal care to healthy mothers and babies that are discharged earlier.

Postnatal care service includes **three day visits by a midwife**, within a six-week period.

If you are interested in receiving this service, please discuss this with your treating doctor. If your doctor is in favour of this, they can call us on 0860 462 273 or email homecare@discovery.co.za and one of our qualified Discovery HomeCare consultants will contact them to arrange the service.

Cover for you and your baby up to two years after birth

You have cover for healthcare services for you and your baby for up to 2 years after birth, and 12 months on KeyCare Access, from the Maternity Benefit at the Discovery Health Rate from the date of activation. Cover from the Maternity Benefit does not affect your day-to-day benefits and depends on the plan you choose. Once you have used up your Maternity benefits, we pay for out-of-hospital healthcare expenses for you and your baby from your available day-to-day benefits. If you do not have day-to-day benefits, or if you have run out of funds, you must pay for these costs yourself.

The early childhood benefits under the Maternity benefit will be activated:

- When you create your pregnancy or baby profile on www.discovery.co.za or on the Discovery app,
- When you preauthorise your pregnancy and delivery or
- When you register your baby onto the Scheme.

If your baby was born and registered onto the Scheme before 2018, you can activate the post-birth benefits by creating your baby profile on www.discovery.co.za or on the Discovery app.

Please refer to the *Maternity benefits available for your plan type* section for more details.

GP and specialist visits

Your baby is covered for up to two visits with a GP, paediatrician or an ENT from the Maternity Benefit over the two year period, or for a 12 month period on KeyCare Access. Cover depends on the plan you choose and is available from the date of activation.

For GP visits, members on the Smart and KeyCare plans need to use their respective network GPs.

Follow-up consultation

You are covered for one post-birth consultation with a midwife, GP or gynaecologist as part of your approved hospital stay.

Cover depends on the plan you choose and is available from the date of activation. For GP visits, members on the Smart and KeyCare plans need to use their respective network GPs.

Lactation consultation

You are covered for one lactation consultation with a registered nurse or lactation specialist at the Discovery Health Rate and is available from the date of activation.

Nutrition assessment

You are covered for one nutrition assessment with a dietitian at the Discovery Health Rate and is available from the date of activation.

Mental health

You are covered for up to two mental health consultations with a counsellor or psychologist at the Discovery Health rate and is available from the date of activation.

We also pay for newborn screening from your day-to-day benefits

Newborn screening provides members with the opportunity to test their infants for genetic, metabolic and endocrine disorders. You may be referred by a paediatrician for this test. The sample is a single drop of blood from your baby's heel which will be taken in hospital after the baby's birth.

We pay for newborn screening up to 100% of the Discovery Health Rate from your MSA. Newborn screening does not accumulate or pay from the Above Threshold Benefit.

Any additional costs such as consultations with a genetic counsellor or any other healthcare provider, and additional tests that might be needed, will be covered according to the health plan you have chosen.

Please note: If your plan does not have day-to-day benefits or if you have run out of funds, you must pay for these costs yourself.

We cover medically necessary circumcisions from the Hospital Benefit

If the procedure is being done in hospital, please preauthorise by calling 0860 99 88 77. If it is done in the doctor's rooms for specified conditions, you don't need to preauthorise.

Circumcisions that are not medically necessary are covered from the available funds in your day-to-day benefits. If your plan does not have a day-to-day benefit or you have run out of funds, you must pay these costs yourself. Members on the Classic Comprehensive Zero MSA Plan have cover from the Above Threshold Benefit once the Annual Threshold is reached.

Items we do not cover

There are certain items we do not cover

- Mother and baby packs that hospitals supply
- The bed-booking fee that some hospitals may require you to pay
- Your lodging or boarding fees if your baby needs to stay in hospital for longer and you choose to stay on

Getting the most out of your maternity benefits

Activate the My Pregnancy and My Baby programmes on the Discovery app or website

In addition to unlocking your maternity and early childhood benefits by activating the My Pregnancy or My Baby programme on the Discovery app or website you also gain access to immediate support, advice and tools such as:

- 24/7 doctor advice on your device
- A maternity cost estimator
- A pregnancy health record
- A digital vaccination card
- An education cost calculator.

Tell us about your pregnancy

It is important to notify us of your pregnancy so that you always know how we cover you for your pregnancy-related healthcare services, whether these are received in or out of hospital.

You can call us on 0860 99 88 77 or visit www.discovery.co.za to activate your Maternity and early childhood benefits, find out how you are covered and to authorise your hospital admission. When you do, remember to have the following information at hand:

- Date of the admission
- Name or practice number of the hospital or clinic
- Name and practice number of the treating doctors and anaesthetist (if available)
- ICD-10 code from your treating doctor (this is an alphanumeric code that describes your diagnosis (pregnancy))
- RPL code from your treating doctor (this is a procedure code that describes how you plan to deliver your baby).

Use healthcare providers who we have a payment arrangement with for full cover in hospital

You have full cover for in-hospital claims from healthcare providers who we have a payment arrangement with, and up to 100% of the Discovery Health Rate (based on your plan type) for other healthcare professionals.

To find a healthcare provider we have a payment arrangement with, use the MaPS Advisor on www.discovery.co.za

Avoid a co-payment or deductible on your hospital account if you are on the KeyCare, Smart, Coastal or Delta plans

If you are on a KeyCare, Smart, Coastal or Delta plan, you must use a network hospital for your childbirth to avoid a co-payment or deductible or having to pay the entire account yourself. For more information on the network hospitals for your plan type, go to our website at www.discovery.co.za

Adding newborns to Discovery Health Medical Scheme

Register your baby within 30 days of the birth

To ensure all medical treatment for your baby is covered it is advisable to register your baby on your medical aid within 30 days from the date of birth.

Your baby will be registered from their date of birth, however contributions will only be charged from the first day of the month following the birth.

We allow up to 90 days for the baby to be added from the date of birth, after which we may apply certain conditions to your baby's registration with the Scheme. If the baby is added after 90 days, or within 90 days of birth but not from the date of birth, waiting periods may be applied.

Include your baby's ID number

It is compulsory to include a newborn's ID number when a member adds their newborn baby to their Discovery Health Medical Scheme membership. Having this identity number will make sure Discovery Health Medical Scheme keeps up-to-date and complete records for members' health policy, which is important for delivering the best service.

Maternity benefits available for your plan type

Executive Plan

These healthcare services for maternity and early childhood are covered from the Maternity Benefit at the Discovery Health Rate and from the date of activation. This cover does not affect your day-to-day benefits.

Benefits will be activated when your pregnancy or baby profile is created in the Discovery app, on our website www.discovery.co.za, when you preauthorize your delivery or when you register your baby onto the Scheme. These benefits are available from 2018 per pregnancy per child up to two years after birth. Once these limits are used up, we pay for out-of-hospital healthcare expenses related to your pregnancy from the available funds in your Medical Savings Account. We will also pay for this from your Above Threshold Benefit once you have reached your Annual Threshold.

<p>Antenatal consultations</p> <p>You are covered for up to 12 consultations at your gynaecologist, GP or midwife covered from the Maternity Benefit at the Discovery Health Rate.</p>	<p>Pre- and postnatal care</p> <p>You have cover for up to five pre- or postnatal classes up until two years after birth, with a registered nurse. You are also covered for one lactation consultation with a registered nurse or lactation specialist from the Maternity Benefit at the Discovery Health Rate.</p>
<p>Prenatal screening</p> <p>You are covered for one nuchal translucency and Non Invasive Prenatal Testing (NIPT) screening subject to clinical entry criteria from the Maternity Benefit at the Discovery Health Rate.</p>	<p>Essential registered devices</p> <p>You have cover of up to R5 000 for essential registered devices, for example breast pumps and smart thermometers. You are responsible for a 25% co-payment.</p>
<p>Ultrasound scans</p> <p>You are covered for up to two 2D ultrasound scans from the Maternity Benefit at the Discovery Health Rate. 3D and 4D scans are paid up to the rate we pay for 2D scans.</p>	<p>GP and specialist care after birth</p> <p>Your baby under the age of two years is covered for two visits to a GP, paediatrician or an ENT from the Maternity Benefit at the Discovery Health Rate.</p>
<p>Blood tests</p> <p>Cover for a defined basket of blood tests per pregnancy from the Maternity Benefit at the Discovery Health Rate.</p>	<p>Other healthcare services</p> <p>You are covered for one flu vaccination during your pregnancy. You also have access to postnatal care which includes a postnatal consultation, a nutritional assessment with a dietitian and two mental healthcare consultations with a counsellor or psychologist.</p>

Antenatal classes or consultations with a nurse

Cover for up to five pre- or postnatal classes (including online classes) or consultations with a registered nurse from the Maternity Benefit.

Once these have been used, we pay antenatal classes from the available funds in your Medical Savings Account and Above Threshold Benefit once you reach your Annual Threshold. A maximum of R1 670 per member for each pregnancy will add up to your Annual Threshold.

Medicines for morning sickness, iron supplements and folic acid

We pay for medicines and supplements that are taken during the pregnancy only from the available funds in your Medical Savings Account. Schedule 0, 1 and 2 medicines and vitamin and mineral supplements do not add up to your Annual Threshold.

Antiretroviral medicines

We pay for approved HIV medicines to prevent mother-to-child transmission of HIV from your Hospital Benefit. Please refer to the HIVCare Programme brochure on our website or call us on 0860 99 88 77.

We cover normal deliveries or water births at home or birthing home with a registered midwife

If you choose to have a water birth or normal delivery at home or birthing home, we will pay for care from a midwife for your approved delivery from your Hospital Benefit. The midwife must be registered with a valid practice number.

For a water birth at home, we will pay for the cost of the hire of a birthing pool from your Hospital Benefit at the Discovery Health Rate. If you use a midwife within our network, the birthing pool is included in the agreed rate. This must be hired from a registered provider who has a valid practice number.

Hospitalisation for your delivery

Hospital account

You have private ward cover for your delivery up to of R1 880 for each day that is approved in hospital. If the cost of the private ward is above the limit, you will be responsible to pay the difference.

You have cover for hospitalisation for your delivery from the Hospital Benefit if approved. We pay the hospital account from your Hospital Benefit up to the Discovery Health Rate.

You have cover for a water birth in hospital. The midwife must be registered with a valid practice number.

Remember, if your treating doctor is in favour of you and your baby being discharged earlier, you may qualify for the postnatal care service in the comfort of your home. This service is brought to you by Discovery HomeCare.

How we pay the accounts related to the hospitalisation

We pay all related accounts such as those from your gynaecologist/obstetrician, midwife, anaesthetist and other approved healthcare services, from your Hospital Benefit.

You can benefit by using healthcare professionals who we have an arrangement with because we will cover their approved procedures in full. We pay specialists up to 300% of the Discovery Health Rate.

We pay GPs and other approved healthcare services up to 200% of the Discovery Health Rate and radiology and pathology at 100% of the Discovery Health Rate.

How we pay for medicines to take home

We pay for any prescribed medicines (Schedule 3 and above) you need to take home from the available funds in your Medical Savings Account and Above Threshold Benefit. These will count towards the annual limit for prescribed medicines:

Single member	R35 400
With one dependant	R41 500
With two dependants	R47 500
With three or more dependants	R53 600

Treatment for neonatal jaundice

If your baby needs phototherapy for neonatal jaundice, we will pay for the phototherapy lights from the Hospital Benefit as long as you call us to authorise this. Please ask the treating doctor for the treatment codes so that we can give you an authorisation number for this treatment.

Comprehensive Plan

These healthcare services for maternity and early childhood are covered from the Maternity Benefit at the Discovery Health Rate and from the date of activation. This cover does not affect your day-to-day benefits.

Benefits will be activated when your pregnancy or baby profile is created in the Discovery app, on our website www.discovery.co.za, when you preauthorise your delivery or when you register your baby onto the Scheme. These benefits are available from 2018 per pregnancy per child up to two years after birth. Once these limits are used up, we pay for out-of-hospital healthcare expenses related to your pregnancy from the available funds in your Medical Savings Account. We will also pay for this from your Above Threshold Benefit once you have reached your Annual Threshold.

<p>Antenatal consultations</p> <p>You are covered for up to 12 consultations at your gynaecologist, GP or midwife covered from the Maternity Benefit at the Discovery Health Rate.</p>	<p>Pre- and postnatal care</p> <p>You have cover for up to five pre- or postnatal classes up until two years after birth, with a registered nurse. You are also covered for one lactation consultation with a registered nurse or lactation specialist from the Maternity Benefit at the Discovery Health Rate.</p>
<p>Prenatal screening</p> <p>You are covered for one nuchal translucency and Non Invasive Prenatal Testing (NIPT) screening subject to clinical entry criteria, from the Maternity Benefit at the Discovery Health Rate.</p>	<p>Essential registered devices</p> <p>You have cover of up to R5 000 for essential registered devices, for example breast pumps and smart thermometers. You are responsible for a 25% co-payment.</p>
<p>Ultrasound scans</p> <p>You are covered for up to two 2D ultrasound scans from the Maternity Benefit at the Discovery Health Rate. 3D and 4D scans are paid up to the rate we pay for 2D scans.</p>	<p>GP and specialist care after birth</p> <p>Your baby under the age of two years is covered for two visits to a GP, paediatrician or an ENT from the Maternity Benefit at the Discovery Health Rate.</p>
<p>Blood tests</p> <p>Cover for a defined basket of blood tests per pregnancy from the Maternity Benefit at the Discovery Health Rate.</p>	<p>Other healthcare services</p> <p>You are covered for one flu vaccination during your pregnancy. You also have access to postnatal care which includes a postnatal consultation, a nutritional assessment with a dietitian and two mental healthcare consultations with a counsellor or psychologist.</p>

Antenatal classes or consultations with a nurse

Cover for up to five pre- or postnatal classes (including online classes) or consultations with a registered nurse from the Maternity Benefit.

Once these have been used, we pay antenatal classes from the available funds in your Medical Savings Account and Above Threshold Benefit once you reach your Annual Threshold. A maximum of R1 670 per member for each pregnancy will add up to your Annual Threshold.

Medicines for morning sickness, iron supplements and folic acid

We pay for medicines and supplements that are taken during your pregnancy only from the available funds in your Medical Savings Account. Schedule 0, 1 and 2 medicines and vitamin and mineral supplements do not add up to your Annual Threshold. If you are on the Classic Comprehensive Zero MSA Plan, you must pay for these costs.

Antiretroviral medicines

We pay for approved HIV medicines to prevent mother-to-child transmission of HIV from your Hospital Benefit. Please refer to the *HIVCare* Programme brochure on our website or call us on 0860 99 88 77.

We cover normal deliveries or home births or birthing home with a registered midwife

If you choose to have a water birth or normal delivery at home or birthing home, we will pay for care from a midwife from your Hospital Benefit. The midwife must be registered with a valid practice number. For 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 from a registered provider who has a valid practice number.

Hospitalisation for your delivery

You have private ward cover for your delivery up to of R1 880 for each day that is approved in hospital. If the cost of the private ward is above the limit, you will be responsible to pay the difference.

You have cover for hospitalisation for your delivery, if approved. We pay the hospital account from your Hospital Benefit up to the Discovery Health Rate.

You have cover for a water birth in hospital. The midwife must be registered with a valid practice number.

If you are on the Classic and Essential Delta Comprehensive network option: You must use a Delta network hospital. If you go to a hospital not on the Delta Hospital Network, an upfront payment of R7 650 applies for admissions. Please note this amount is not refundable.

Remember, if your treating doctor is in favour of you and your baby being discharged earlier, you may qualify for the post-natal care service in the comfort of your home. This service is brought to you by Discovery HomeCare.

How we pay the accounts related to the hospitalisation

We pay all related accounts such as those from your gynaecologist/obstetrician, midwife, anaesthetist and other healthcare services from your Hospital Benefit. You can benefit by using healthcare professionals who we have a payment arrangement with because we will pay their approved procedures in full.

We pay GPs, other healthcare professionals and specialists who we do not have an arrangement with up to 200% of the Discovery Health Rate on the Classic Comprehensive and Classic Comprehensive Zero MSA Plans and up to 100% of the Discovery Health Rate on the Essential Comprehensive Plan.

We pay for radiology and pathology and other approved healthcare services up to 100% of the Discovery Health Rate. If any of these providers charge more than what we cover, you will have to pay the difference yourself.

How we pay for medicines to take home

We will pay for any prescribed medicines (Schedule 3 and above), you need to take home from the available funds in your Medical Savings Account and Above Threshold Benefit. These costs will count towards the annual limit for prescribed medicines:

	Classic	Essential
Single member	R28 850	R18 600
With one dependant	R33 900	R22 600
With two dependants	R39 350	R27 200
With three or more dependants	R44 900	R29 700

If you are on the Classic Comprehensive Zero MSA Plan, you have cover from your Above Threshold Benefit once you reach your Annual Threshold.

Treatment for neonatal jaundice

If your baby needs phototherapy for neonatal jaundice, we will pay for the phototherapy lights from the Hospital Benefit as long as you call us to authorise this with us. Please ask the treating doctor for the treatment codes so we can give you an authorisation number for this treatment.

Priority Series

These healthcare services for maternity and early childhood are covered from the Maternity Benefit at the Discovery Health Rate and from the date of activation. This cover does not affect your day-to-day benefits.

Benefits will be activated when your pregnancy or baby profile is created in the Discovery app, on our website www.discovery.co.za, when you preauthorise your delivery or when you register your baby onto the Scheme. These benefits are available from 2018 per pregnancy per child up to two years after birth. Once these limits are depleted, we pay for out-of-hospital healthcare expenses related to your pregnancy from the available funds in your Medical Savings Account. We will also pay for this from your limited Above Threshold Benefit once you have reached your Annual Threshold.

Antenatal consultations	Pre- and postnatal care
You are covered for up to 8 consultations at your gynaecologist, GP or midwife covered from the Maternity Benefit at the Discovery Health Rate.	You have cover for up to five pre- or postnatal classes up until two years after birth, with a registered nurse. You are also covered for one lactation consultation with a registered nurse or lactation specialist from the Maternity Benefit at the Discovery Health Rate.
Prenatal screening	GP and specialist care after birth
You are covered for one nuchal translucency and Non Invasive Prenatal Testing (NIPT) screening subject to clinical entry criteria from the Maternity Benefit at the Discovery Health Rate.	Your baby under the age of two years is covered for two visits to a GP, paediatrician or an ENT from the Maternity Benefit at the Discovery Health Rate.
Ultrasound scans	Other healthcare services
You are covered for up to two 2D ultrasound scans from the Maternity Benefit at the Discovery Health Rate. 3D and 4D scans are paid up to the rate we pay for 2D scans.	You are covered for one flu vaccination during your pregnancy. You also have access to postnatal care which includes a postnatal consultation, a nutritional assessment with a dietitian and two mental healthcare consultations with a counsellor or psychologist.
Blood tests	
Cover for a defined basket of blood tests per pregnancy from the Maternity Benefit at the Discovery Health Rate.	

Antenatal classes or consultations with a nurse

Cover for up to five pre- or postnatal classes (including online classes) or consultations with a registered nurse from the Maternity Benefit.

Once these have been used, we pay from the available funds in your Medical Savings Account and limited Above Threshold Benefit once you reach your Annual Threshold. A maximum of R1 670 per member for each pregnancy will add up to your Annual Threshold.

Medicines for morning sickness, iron supplements and folic acid

We pay for medicines and supplements that are taken during your pregnancy only from the available funds in your Medical Savings Account. Schedule 0, 1 and 2 medicines and vitamin and mineral supplements do not add up to your Annual Threshold.

Antiretroviral medicines

We pay for approved HIV medicines to prevent mother-to-child transmission of HIV from your Hospital Benefit. Please refer to the HIVCare Programme brochure on our website or call us on 0860 99 88 77.

We cover normal deliveries or births at home or a birthing home with a registered midwife

If you choose to have a water birth or normal delivery at home or birthing home, we will pay for care from a midwife for your approved delivery from your Hospital Benefit. The midwife must be registered with a valid practice number.

For a water birth at home, we will pay for the cost of the hire of a birthing pool from your Hospital Benefit at the Discovery Health Rate. This must be hired from a registered provider who has a valid practice number.

Hospitalisation for your delivery

You have cover for hospitalisation for your delivery from the Hospital Benefit if approved. We pay the hospital account from your Hospital Benefit up to the Discovery Health Rate.

You have cover for a water birth in hospital. The midwife must be registered with a valid practice number.

Remember, if your treating doctor is in favour of you and your baby being discharged earlier, you may qualify for the postnatal care service in the comfort of your home. This service is brought to you by Discovery HomeCare.

How we pay for accounts related to the hospitalisation

We pay for all related accounts such as those from the gynaecologist/obstetrician, midwife, anaesthetist and other healthcare services from your Hospital Benefit.

You can benefit by using healthcare providers who we have a payment arrangement with because we will pay for their approved procedures in full.

We pay GPs, other healthcare professionals and specialists who we don't have an arrangement with up to 200% of the Discovery Health Rate on the Classic Priority Plan and up to 100% of the Discovery Health Rate on the Essential Priority Plan.

We pay for radiology and pathology and other approved healthcare services up to 100% of the Discovery Health Rate.

If any of these providers charge more than what we cover, you will have to pay the difference yourself.

How we pay for medicines to take home

We will pay for any prescribed medicines (schedule 3 and above) you need to take home from the available funds in your Medical Savings Account and limited Above Threshold Benefit. These will count towards the annual limit for prescribed medicines:

	Classic	Essential
Single member	R18 600	R13 250
With one dependant	R22 600	R15 700
With two dependants	R27 200	R18 550
With three or more dependants	R29 700	R22 550

Treatment for neonatal jaundice

If your baby needs phototherapy for neonatal jaundice, we will pay for the phototherapy lights from the Hospital Benefit as long as you call us to authorise this with us. Please ask the treating doctor for the treatment codes so we can give you an authorisation number for this treatment.

Saver Series

These healthcare services for maternity and early childhood are covered from the Maternity Benefit at the Discovery Health Rate and from the date of activation. This cover does not affect your day-to-day benefits.

Benefits will be activated when your pregnancy or baby profile is created in the Discovery app, on our website www.discovery.co.za, when you preauthorise your delivery or when you register your baby onto the Scheme.

These benefits are available from 2018 per pregnancy per child up to two years after birth. Once these limits are used up, we pay for out-of-hospital healthcare expenses related to your pregnancy from the available funds in your Medical Savings Account.

<p>Antenatal consultations</p> <p>You are covered for up to 8 consultations at your gynaecologist, GP or midwife covered from the Maternity Benefit at the Discovery Health Rate.</p>	<p>Pre- and postnatal care</p> <p>You have cover for up to five pre- or postnatal classes up until two years after birth, with a registered nurse. You are also covered for one lactation consultation with a registered nurse or lactation specialist from the Maternity Benefit at the Discovery Health Rate.</p>
<p>Prenatal screening</p> <p>You are covered for one nuchal translucency and Non Invasive Prenatal Testing (NIPT) screening subject to clinical entry criteria from the Maternity Benefit at the Discovery Health Rate.</p>	<p>GP and specialist care after birth</p> <p>Your baby under the age of two years is covered for two visits to a GP, paediatrician or an ENT from the Maternity Benefit at the Discovery Health Rate.</p>
<p>Ultrasound scans</p> <p>You are covered for up to two 2D ultrasound scans from the Maternity Benefit at the Discovery Health Rate. 3D and 4D scans are paid up to the rate we pay for 2D scans.</p>	<p>Other healthcare services</p> <p>You are covered for one flu vaccination during your pregnancy. You also have access to postnatal care which includes a postnatal consultation, a nutritional assessment with a dietitian and two mental healthcare consultations with a counsellor or psychologist.</p>
<p>Blood tests</p> <p>Cover for a defined basket of blood tests per pregnancy from the Maternity Benefit at the Discovery Health Rate.</p>	

Antenatal classes or consultations with a nurse

Cover for up to five pre- or postnatal classes (including online classes) or consultations with a registered nurse from the Maternity Benefit. Once these have been used, we pay from the available funds in your Medical Savings Account

Medicine for morning sickness, iron supplements and folic acid

We pay for medicines and supplements that are taken during your pregnancy from the available funds in your Medical Savings Account. If these accounts are more than the money you have available in your Medical Savings Account, you must pay these costs.

Antiretroviral medicines

We pay for approved HIV medicines to prevent mother-to-child transmission of HIV from your Hospital Benefit. Please refer to the *HIVCare* Programme brochure on our website or call us on 0860 99 88 77.

We cover normal deliveries or births at home or a birthing home with a registered midwife

If you choose to have a water birth or normal delivery at home or birthing home, we will pay for care from a midwife for your approved delivery from your Hospital Benefit. The midwife must be registered with a valid practice number.

For a water birth at home, we will pay for the cost of the hire of a birthing pool from your Hospital Benefit at the Discovery Health Rate. This must be hired from a registered provider who has a valid practice number

Hospitalisation for your delivery

You have cover for hospitalisation for your delivery from the Hospital Benefit, if approved. We pay the hospital account from your Hospital Benefit up to the Discovery Health Rate.

You have cover for a water birth in hospital. The midwife must be registered with a valid practice number.

Remember, if your treating doctor is in favour of you and your baby being discharged earlier, you may qualify for the post-natal care service in the comfort of your home. This service is brought to you by Discovery HomeCare.

If you are on the Classic and Essential Delta Saver network option: You must use a Delta network hospital. If you go to a hospital not on the Delta Hospital Network, an upfront payment of R7 650 applies for admissions. Please note this amount is not refundable.

If you are on the Coastal Saver Plan: If you don't go to a coastal network hospital, we will pay up to a maximum of 70% of the hospital account and you must pay the difference.

How we pay the accounts related to the hospitalisation

We pay all related accounts such as those from the gynaecologist/obstetrician, midwife, anaesthetist and other healthcare services from your Hospital Benefit. You can benefit by using healthcare professionals who we have a payment arrangement with because we will pay their approved procedures in full.

We pay GPs other healthcare professionals and specialists who we don't have a payment arrangement with up to 200% of the Discovery Health Rate on the Classic Saver Plan and up to 100% of the Discovery Health Rate on the Essential and Coastal Saver Plans.

We pay for radiology and pathology and other approved healthcare services up to 100% of the Discovery Health Rate.

If any of these providers charge more than what we cover, you will have to pay the difference yourself.

How we pay for medicines to take home

We pay for any prescribed medicines (schedule 3 and above) you need to take home from the available funds in your Medical Savings Account. If these accounts are more than the money you have available in your Medical Savings Account, you must pay these costs.

Treatment for neonatal jaundice

If your baby needs phototherapy for neonatal jaundice, we will pay for the phototherapy lights from the Hospital Benefit as long as you call us to authorise this with us. Please ask the treating doctor for the treatment codes so we can give you an authorisation number for this treatment.

Smart Series

These healthcare services for maternity and early childhood are covered from the Maternity Benefit at the Discovery Health Rate and from the date of activation. We pay for pregnancy related GP consultations in the Smart GP network.

Benefits will be activated when your pregnancy or baby profile is created in the Discovery app, on our website www.discovery.co.za, when you preauthorise your delivery or when you register your baby onto the Scheme. These benefits are available from 2018 per pregnancy per child up to two years after birth. Once these limits are used up, we pay for out-of-hospital healthcare expenses related to your pregnancy from the relevant and available day-to-day benefits.

<p>Antenatal consultations</p> <p>You are covered for up to 8 consultations at your gynaecologist, Smart network GP or midwife covered from the Maternity Benefit at the Discovery Health Rate.</p>	<p>Pre- and postnatal care</p> <p>You have cover for up to five pre- or postnatal classes up until two years after birth, with a registered nurse. You are also covered for one lactation consultation with a registered nurse or lactation specialist from the Maternity Benefit at the Discovery Health Rate.</p>
<p>Prenatal screening</p> <p>You are covered for one nuchal translucency and Non Invasive Prenatal Testing (NIPT) screening subject to clinical entry criteria from the Maternity Benefit at the Discovery Health Rate.</p>	<p>GP and specialist care after birth</p> <p>Your baby under the age of two years is covered for two visits to a Smart network GP, paediatrician or an ENT from the Maternity Benefit at the Discovery Health Rate.</p>
<p>Ultrasound scans</p> <p>You are covered for up to two 2D ultrasound scans from the Maternity Benefit at the Discovery Health Rate. 3D and 4D scans are paid up to the rate we pay for 2D scans.</p>	<p>Other healthcare services</p> <p>You are covered for one flu vaccination during your pregnancy. You also have access to postnatal care which includes a postnatal consultation, a nutritional assessment with a dietitian and two mental healthcare consultations with a counsellor or psychologist.</p>
<p>Blood tests</p> <p>Cover for a defined basket of blood tests per pregnancy from the Maternity Benefit at the Discovery Health Rate.</p>	

Medicines for morning sickness, iron supplements and folic acid

Prescribed medicine for the Classic Smart Plan

You have cover for prescribed acute medicine from your nominated pharmacy network (Clicks or Dis-Chem) if prescribed by your Smart network GP. You will pay an amount of R10 per item for covered items when using your nominated pharmacy. If the prescribed item is on the exclusion list, you will be responsible for the full payment.

A limit of 12 prescriptions per person per year will apply. If you join the Scheme after January, this limit is adjusted proportionally according to the number of months left in the year.

If you are on the **Essential Smart Plan** you responsible for paying costs related to prescribed medicine.

Over-the-counter medicine

You have cover for over-the-counter medicines obtained from your network pharmacy, up to an annual limit of R600 per family per year on the Classic Smart Plan and R400 per family per year on the Essential Smart Plan.

Antiretroviral medicines

We pay for approved HIV medicines to prevent mother-to-child transmission of HIV from your Hospital Benefit. Please refer to the HIVCare Programme brochure on our website or call us on 0860 99 88 77.

We cover normal deliveries or births at home or birthing home with a registered midwife

If you choose to have a water birth or normal delivery at home or birthing home, we will pay for care from a midwife for your approved delivery from your Hospital Benefit. The midwife must be registered with a valid practice number.

For 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 from a registered provider who has a valid practice number.

Hospitalisation for your delivery

You have cover for hospitalisation for your delivery from the Hospital Benefit, if approved. We pay the hospital account from your Hospital Benefit up to the Discovery Health Rate.

You have cover for a water birth in hospital. The midwife must be registered with a valid practice number.

Smart Plans: You must use a hospital in your network. If you go to a hospital not on the network, an upfront payment of R8 800 applies for planned admission. Please note this amount is not refundable.

Remember, if your treating doctor is in favour of you and your baby being discharged earlier, you may qualify for the post-natal care service in the comfort of your home. This service is brought to you by Discovery HomeCare.

How we pay the accounts related to the hospitalisation

We pay for all related accounts such as those from the gynaecologist/obstetrician, midwife, anaesthetist and other healthcare services from your Hospital Benefit. You can benefit by using healthcare professionals who we have a payment arrangement with because we will pay their approved procedures in full.

We pay GPs, other healthcare professionals and specialists who we don't have a payment arrangement with up to 200% of the Discovery Health Rate on the Classic plan and 100% on the Discovery Health Rate on the Essential plan.

We pay for radiology and pathology and other approved healthcare services up to 100% of the Discovery Health Rate.

If any of these providers charge more than what we cover, you will have to pay the difference yourself.

How we pay for medicines to take home

You are responsible for paying these out-of-hospital healthcare services.

Treatment for neonatal jaundice

If your baby needs phototherapy for neonatal jaundice, we will pay for the phototherapy lights from the Hospital Benefit as long as you call us to authorise this with us. Please ask the treating doctor for the treatment codes so we can give you an authorisation number for this treatment.

Core Series

These healthcare services for maternity and early childhood are covered from the Maternity Benefit at the Discovery Health Rate and from the date of activation.

Benefits will be activated when your pregnancy or baby profile is created in the Discovery app, on our website www.discovery.co.za, when you preauthorise your delivery or when you register your baby onto the Scheme. These benefits are available from 2018 per pregnancy per child up to two years after birth. Once these limits are depleted, you will have to pay for out-of-hospital healthcare expenses related to your pregnancy.

<p>Antenatal consultations</p> <p>You are covered for up to 8 consultations at your gynaecologist, GP or midwife covered from the Maternity Benefit at the Discovery Health Rate.</p>	<p>Pre- and postnatal care</p> <p>You have cover for up to five pre- or postnatal classes up until two years after birth, with a registered nurse. You are also covered for one lactation consultation with a registered nurse or lactation specialist from the Maternity Benefit at the Discovery Health Rate.</p>
<p>Prenatal screening</p> <p>You are covered for one nuchal translucency and Non Invasive Prenatal Testing (NIPT) screening subject to clinical entry criteria from the Maternity Benefit at the Discovery Health Rate.</p>	<p>GP and specialist care after birth</p> <p>Your baby under the age of two years is covered for two visits to a GP, paediatrician or an ENT from the Maternity Benefit at the Discovery Health Rate.</p>
<p>Ultrasound scans</p> <p>You are covered for up to two 2D ultrasound scans from the Maternity Benefit at the Discovery Health Rate. 3D and 4D scans are paid up to the rate we pay for 2D scans.</p>	<p>Other healthcare services</p> <p>You are covered for one flu vaccination during your pregnancy. You also have access to postnatal care which includes a postnatal consultation, a nutritional assessment with a dietitian and two mental healthcare consultations with a counsellor or psychologist.</p>
<p>Blood tests</p> <p>Cover for a defined basket of blood tests per pregnancy from the Maternity Benefit at the Discovery Health Rate.</p>	

Medicines for morning sickness, iron supplements and folic acid

You are responsible for paying these costs.

Antiretroviral medicines

We pay for approved HIV medicines to prevent mother-to-child transmission of HIV from your Hospital Benefit. Please refer to the HIVCare Programme brochure on our website or call us on 0860 99 88 77.

We cover normal deliveries or births at home or a birthing home with a registered midwife

If you choose to have a water birth or normal delivery at home or birthing home, we will pay for your approved delivery from your Hospital Benefit. The midwife must be registered with a valid practice number.

For a water birth at home, we will pay for the cost of the hire of a birthing pool from your Hospital Benefit at the Discovery Health Rate. This must be hired from a provider who has a registered practice number.

Hospitalisation for your delivery

You have cover for hospitalisation for your delivery from the Hospital Benefit, if approved. We pay the hospital account from your Hospital Benefit up to the Discovery Health Rate.

You have cover for a water birth in hospital. The midwife must be registered with a valid practice number.

Remember, if your treating doctor is in favour of you and your baby being discharged earlier, you may qualify for the post-natal care service in the comfort of your home. This service is brought to you by Discovery HomeCare.

If you are on the Classic and Essential Delta Core network option: You must use a Delta network hospital. If you go to a hospital not on the Delta Hospital Network, an upfront payment of R7 650 applies for admissions. Please note this amount is not refundable.

If you are on the Coastal Core Plan: If you don't go to a coastal network hospital, we will pay up to a maximum of 70% of the hospital account and you will need to pay the difference.

How we pay the accounts related to the hospitalisation

We pay for all related accounts such as those from the gynaecologist/obstetrician, midwife, anaesthetist and other healthcare services from your Hospital Benefit. You can benefit by using healthcare professionals who we have a payment arrangement with because we will pay their approved procedures in full.

We pay GPs, other healthcare professionals and specialists who we don't have a payment arrangement with up to 200% of the Discovery Health Rate on the Classic Core Plan and up to 100% of the Discovery Health Rate on the Essential and Coastal Core Plans.

We pay for radiology and pathology and other approved healthcare services up to 100% of the Discovery Health Rate.

If any of these providers charge more than what we cover, you will have to pay the difference yourself.

How we pay for medicines to take home

You are responsible for paying these out-of-hospital healthcare services.

Treatment for neonatal jaundice

If your baby needs phototherapy for neonatal jaundice, we will pay for the phototherapy lights from the Hospital Benefit as long as you call us to authorise this with us. Please ask the treating doctor for the treatment codes so we can give you an authorisation number for this treatment.

KeyCare Plans

These healthcare services for maternity and early childhood are covered from the Maternity Benefit at the Discovery Health Rate and from the date of activation. This cover does not affect your day-to-day benefits.

Benefits will be activated when your pregnancy or baby profile is created in the Discovery app, on our website www.discovery.co.za, when you preauthorise your delivery or when you register your baby onto the Scheme. These benefits are available from 2018 per pregnancy per child up to two years after birth, and up to 12 months on KeyCare Access. Once these limits are used up, we pay for out-of-hospital healthcare expenses related to your pregnancy from the relevant and available day-to-day benefits.

<p>Antenatal consultations</p> <p>You are covered for up to 8 consultations at your gynaecologist, chosen network GP or midwife covered from the Maternity Benefit at the Discovery Health Rate.</p>	<p>Pre- and postnatal care</p> <p>You have cover for up to five pre- or postnatal classes up until two years after birth, 12 months on KeyCare Access, with a registered nurse. You are also covered for one lactation consultation with a registered nurse or lactation specialist from the Maternity Benefit at the Discovery Health Rate.</p>
<p>Prenatal screening</p> <p>You are covered for one nuchal translucency and Non Invasive Prenatal Testing (NIPT) screening subject to clinical entry criteria from the Maternity Benefit at the Discovery Health Rate.</p>	<p>GP and specialist care after birth</p> <p>Your baby under the age of two years is covered for two visits to your chosen network GP, paediatrician or an ENT from the Maternity Benefit at the Discovery Health Rate. On KeyCare Access specialist cover is subject to your baby being born onto the Scheme and up to 12 months after birth.</p>
<p>Ultrasound scans</p> <p>You are covered for up to two 2D ultrasound scans from the Maternity Benefit at the Discovery Health Rate. 3D and 4D scans are paid up to the rate we pay for 2D scans.</p>	<p>Other healthcare services</p> <p>You are covered for one flu vaccination during your pregnancy. You also have access to postnatal care which includes a postnatal consultation, a nutritional assessment with a dietitian and two mental healthcare consultations with a counsellor or psychologist.</p>
<p>Blood tests</p> <p>Cover for a defined basket of blood tests per pregnancy from the Maternity Benefit at the Discovery Health Rate.</p>	

Medicines for morning sickness, iron supplements and folic acid

This is subject to medicine on the KeyCare formulary (medicine list). If you use medicine that is not on the formulary, you will be responsible for paying these costs.

Antiretroviral medicines

We pay for approved HIV medicines to prevent mother-to-child transmission of HIV from your Hospital Benefit. Please refer to the HIVCare Programme brochure on our website or call us on 0860 99 88 77.

We cover normal deliveries or water births at home or birthing home with a registered midwife

If you choose to have a water birth or normal delivery at home or birthing home, we will pay for the approved delivery from your Hospital Benefit. The midwife must be registered with a valid practice number. For a water birth at home, we will pay for the cost of the hire of a birthing pool up to a maximum of the Discovery Health Rate from your Hospital Benefit. This must be hired from a registered provider who has a valid practice number.

Hospitalisation for your delivery

Contact us to confirm your benefits before you are admitted.

KeyCare Plans cover only normal vaginal deliveries, not elective or chosen caesarean sections. We will pay delivery by caesarean section only if it is medically necessary and we have approved it.

If you are on the KeyCare Plus or KeyCare Core Plan: We cover you in any private hospital for emergencies and trauma. You have full cover for planned and authorised hospital admissions in the KeyCare Full Cover Hospital network and up to 70% of the Discovery Health Rate in the Partial Cover Hospital network.

You must be admitted to a hospital in the KeyCare Hospital Network. If you choose to have your baby at a hospital that is not in this network, you will be responsible for paying these claims.

If you are on the KeyCare Access Plan: We cover childbirth and care for your baby up to 12 months for planned admission in the KeyCare Access Hospital Network. All other hospital care is covered in our contracted network of state facilities.

Provided your baby was born onto the Scheme and is a registered dependant, we will cover your baby in the KeyCare Access Hospital Network for 12 months after the birth, for planned admissions. There is no overall hospital limit so your cover won't run out.

After 12 months your registered baby has unlimited cover in our contracted network of state facilities.

Remember, if your treating doctor is in favour of you and your baby being discharged earlier, you may qualify for the post-natal care service in the comfort of your home. This service is brought to you by Discovery HomeCare.

We cover water births in hospital

You have cover for a water birth in hospital. The midwife must be registered with a valid practice number. We pay for the cost of the hire of a birthing pool up to a maximum of the Discovery Health Rate.

How we pay the accounts related to the hospitalisation

We pay for all related accounts such as those from the gynaecologist/obstetrician, midwife, anaesthetist and other healthcare services from your Hospital Benefit. You can benefit by using healthcare professionals who we have a payment arrangement with because we will pay their approved procedures in full.

If you are having a water birth, we pay for the cost of the hire of a birthing pool up to a maximum of R1 048.

We pay GPs, other healthcare professionals and specialists who we don't have a payment arrangement with up to 100% of the Discovery Health Rate.

How we pay for medicines to take home

If the take-home medicine is on the hospital account, we will pay for any prescribed medicine you need to take home up to R150. If these accounts are more than R150 you must pay these costs. If your doctor gives you a prescription for medicines you need to take after you leave the hospital, you must pay for these costs.

Treatment for neonatal jaundice

If your baby needs phototherapy for neonatal jaundice, we will pay for the phototherapy lights from the Hospital Benefit as long as you call us to authorise this with us. Please ask the treating doctor for the treatment codes so we can give you an authorisation number for this treatment.

If you are on a KeyCare Access plan, we will only cover this in a KeyCare Access Network Hospital.

Contact us

You can call us on 0860 99 88 77 or visit www.discovery.co.za for more information.

Complaints process

The following channels are available for your complaints and we encourage you to follow the process:

Step 1 – To take your query further: If you have already contacted the Discovery Health Medical Scheme and feel that your query has still not been resolved, please complete our online complaints form on www.discovery.co.za. We would also love to hear from you if we have exceeded your expectations.

Step 2 – To contact the Principal Officer: If you are still not satisfied with the resolution of your complaint after following the process in Step 1 you are able to escalate your complaint to the Principal Officer of the Discovery Health Medical Scheme. You may lodge a query or complaint with Discovery Health Medical Scheme by completing the online form on www.discovery.co.za or by emailing principalofficer@discovery.co.za.

Step 3 – To lodge a dispute: If you have received a final decision from Discovery Health Medical Scheme and want to challenge it, you may lodge a formal dispute. You can find more information of the Scheme's dispute process on the website.

Step 4 – To contact the Council for Medical Schemes: Discovery Health Medical Scheme is regulated by the Council for Medical Schemes. You may contact the Council at any stage of the complaints process, but we encourage you to first follow the steps above to resolve your complaint before contacting the Council. Contact details for the Council for Medical Schemes: Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch-Hazel Avenue, Eco Park, Centurion 0157 | complaints@medicalschemes.com | 0861 123 267 | www.medicalschemes.com