



# TOP TIPS TO AVOID CO-PAYMENTS ON YOUR MEDICINE

Being ill and feeling miserable is bad enough – having to then pay a significant portion of the medicine prescribed by your doctor from your own pocket can only make you feel worse. The good news is that you can avoid co-payments on your acute medicine.

# Knowledge is power



**SCHEME MEDICINE BENEFITS:** This is how medicine claims are covered under the different plans:

COMPREHENSIVE

COMPREHENSIVE  
SELECT

VALUE



## MEDICINE

Routine (acute) medicine	<b>R4 470</b> per beneficiary, and further limited per family to: Member: <b>R4 470</b> Member +1: <b>R7 100</b> Member +2: <b>R8 700</b> Member +3+: <b>R10 700</b>	Subject to specific formulary; no limit if Network GP or pharmacy supplies the medicines, otherwise payable from the available day-to-day benefit limit.
Pharmacy-advised therapy	Subject to acute medication benefit limit above.	<b>R149</b> per event, limited to 5 events per year and payable from the available day-to-day benefit limit.

## Let's unpack some of the terms around medicine benefits...

**ROUTINE (ACUTE) MEDICINE:** This is medicine **prescribed by a healthcare professional** such as your GP or dentist.

**PHARMACY-ADVISED THERAPY:** This is a very limited benefit to cover medicine that a **pharmacist may advise** you to use if your doctor is not available to give you a prescription, such as something to treat serious nausea or diarrhoea. This benefit does not cover, for example, routine painkillers you may buy from the shelf.

**FORMULARY:** Members must ensure that their prescribed medicine is in the formulary. The formulary is a list of safe and cost-effective medicine, including both brand name and **generic medicine**, that are used to treat certain medical conditions.

**GENERIC MEDICINE:** Generic medicines are interchangeable with the original brand name product, as it contains the same active ingredient, have the same dosage strength, and is as effective as the original medicine. They are generally between 20% and 40% less expensive than the original brand medicines, as they are usually produced after patent rights on the original medicines have expired.

# Putting your knowledge to use

MEMBERS ON

COMPREHENSIVE

&

COMPREHENSIVE  
SELECT



Use the **Member Portal** to monitor your usage of your Routine (acute) medicine benefit limits. Remember that even though the Member Portal and your statement may show available limit for medicines some claims might not have been processed yet, which could reduce the available benefits



You can stretch your medicine benefit limit (and minimise out-of-pocket costs even after your medicine benefit limit has been depleted) by ensuring that you are prescribed a **generic alternative** for acute medical conditions, or that the pharmacist dispenses a generic alternative to what the doctor has prescribed.

## MEMBERS ON

## VALUE

Before getting a prescription medicine from your Network GP (and having the pharmacy fill it), ask yourself the following:

