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Benefit Changes: The information below is a guide to the benefits that have changed for 2026. Please consult the Schedule of Benefits for details on these benefits.

- The Savvy Options are subject to use of the Savvy Designated Service Provider Network (DSPN) for hospitalisation. Voluntary use of a non-network hospital will result in a co-payment of R14 000. Voluntary use of a non-network hospital for a specified day procedure on the Savvy Options, will result in co-payment of R5 000.
- The ProSelect Option is subject to use of the ProSelect Designated Service Provider Network (DSPN) for hospitalisation. Voluntary use of a non-network hospital will result in a co-payment of R14 000. Voluntary use of a non-network hospital for a specified day procedure on the ProSelect Option, will result in co-payment of R5 000.
- The ProSecure Plus, ProSecure and ProActive Plus (Premium Options) are subject to the use of the Day Procedure Designated Service Provider Network (DSPN) for specified day procedures. Use of a non-network hospital will result in a co-payment of R5 000.





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| Tariffs | All Profmed Tariffs  | 000 | Increased       |
|---------|--|-----|-----------------|-----|-----------------|-----|-----------------|-----|-----------------|-----|-----------------|
| 1E3     | Oncology<br>Includes all costs related to<br>treatment, consultations,<br>investigations and drugs, excluding<br>hospitalisation                             | 000 | Limit increased |
| 1E4     | Rehabilitation   | 000 | Limit increased |
| 1E5(a)  | Out-patient care in lieu of<br>hospitalisation<br>Treatment in a registered sub-<br>acute facility or at home by an<br>appropriately registered practitioner | 000 | Limit increased |
| 1E5(b)  | Out-patient care in lieu of<br>hospitalisation<br>Wound care:<br>Treatment at home, including<br>surgicals, by an appropriately<br>registered practitioner   | 000 | Limit increased |
| 1E6(a)  | Mental health treatment<br>In-hospital   | 000 | Limit increased |



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1E6(b)	Mental health treatment Out-of-hospital consultations	000	Limit increased	000	Limit increased	000	Limit increased	000	Limit increased	000	Limit increased
1E8	Orthopaedic surgery Hospitalisation		No change		No change		No change		No change		Co-payment introduced
1F1(b)	Physiotherapy Out-of-hospital Post-operative, available up to 6 weeks after related hospital procedure	000	Limits increased	000	Limits increased	000	Limits increased		N/A		N/A
1F4	Internal surgical devices Major	000	Limit increased	000	Limit increased	000	Limit increased	000	Limit increased	000	Limit increased
1F5(c)	Cataract surgery only Intraocular lenses	000	Limit increased	000	Limit increased	000	Limit increased	000	Limit increased	000	Limit increased
1G3	Functional orthognathic surgery Includes all costs related to the admission and procedure, e.g. all medical practitioner fees, hospitalisation, etc.	000	Limit increased		N/A		N/A		N/A		N/A
2A2	Preventative Care: Consultations	000	Tariff increased	000	Tariffs increased	000	Tariff increased	000	Tariff increased	000	Tariff increased
2A6	Malaria prophylaxis Includes over-the-counter and prescribed medication only	000	Limit increased	000	Limit increased	000	Limit increased	000	Limit increased	000	Limit increased



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2A7	Tobacco and alcohol counselling, screening and brief intervention: Telephonic or face-to-face counselling	000	Tariff increased	000	Tariff increased	000	Tariff increased	000	Tariff increased	000	Tariff increased
2B2	Human papilloma virus (HPV) vaccine Males 9 to 27 years of age. Includes initial vaccination and two follow- up booster vaccinations, where applicable	NI	NEW BENEFIT		BENEFIT NEW BENEFIT		NEW BENEFIT		NEW BENEFIT		W BENEFIT
2C1/ 2D1	Bone densitometry	000	Tariff increased	000	Tariff increased	000	Tariff increased	NEW BENEFIT		NEW BENEFIT	
2C6	Contraceptives	000	Limit increased	000	Limit increased	000	Limit increased	000	Limit increased	000	Limit increased
3	Amplifire This benefit is an additional R2 750 cover for out-of-hospital expenses listed in section 5	000	Limit increased	000	Limit increased	000	Limit increased	000	Limit increased	000	Limit increased
4	Chronic Medication (Additional Disease List)		No change – benefit unlimited	000	Limits increased	000	Limits increased		No change		No change
5	Annual overall day-to-day limit	000	Limits increased	000	Limits increased	000	Limits increased	000	Limits increased		W BENEFIT onsultations for GP's
5A6	MRI, radio-isotope and CT scans	000	Tariff increased	000	Tariff increased	000	Tariff increased	000	Limits increased		N/A



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5B1	Prescribed acute medication	000	Limits increased	No change						
5B2	Over-the-counter medication	000	Limit increased	No change						
5C1(a)	External prostheses and appliances Sub-limit for hearing aid	000	Limits increased	000	Limits increased	000	Limits increased	000	No change	No change
5C1(b)	External prostheses and appliances: Other	000	Limit increased	000	Limit increased	000	Limit increased		No change	No change
5C2	Supplementary services	000	Limits increased	000	Limits increased	000	Limits increased		W BENEFIT otherapists only)	No change
5C3	Alternative health practitioners	000	Limits increased		No change		No change		No change	No change
5D2(c)	Frames	000	Limit increased	000	Limit increased	000	Limit increased		N/A	N/A
5D3	Contact lenses (clear)	000	Limit increased	000	Limit increased	000	Limit increased		N/A	N/A
5D4	Refractive eye surgery	000	Limit increased		N/A		N/A		N/A	N/A
5E	Dentistry (Including Conservative and Advanced Dentistry)	000	Limits increased	000	Limits increased	000	Limits increased		Limits increased	Limits increased



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6A10	Ante-natal exercises by registered healthcare practitioner
6A11	Prescribed medication during pregnancy

000	Limit increased	000	N/A	000	N/A		N/A		N/A
000	Limit increased	000	Limits increased	000	Limits increased	000	Limits increased	000	N/A