

Product: Kaelo Health
Plan Type: MyHealth Plus
Insurer: Centriq

2021 Kaelo Health - MyHealth Plus

Dear Valued Policyholder,

The Kaelo Health - MyHealth Plus plan provides access to quality healthcare ensuring the very best care - as and when it is needed.

This letter is to inform you of any changes to the current Kaelo Health - MyHealth Plus plan.

2021 Product Changes

Benefit Category	Benefit	2020	Changes 2021
Primary Healthcare	General Practitioner (GP) Visits	Each visit will be limited to R1000.	When visiting a non-contracted Doctor (GP), emergency medical facility or Your Contracted Service Provider (GP) and/or Allocated Provider after hours, Insured Parties are limited to one visit per Insured Party per annum to a maximum of two per Family per annum. You may be required to pay the Doctor (GP) and claim back from the Network Provider. Each visit will be limited to R1100.
Primary Healthcare	General Practitioner (GP) Visits	Beneficiaries may change their allocated GP at any time during the year. Pre-auth is required from the seventh visit to a Network Provider contracted Doctor (GP) visit per Insured Party.	Visits must be to one of your two Allocated Providers (GPs) . You can change your allocated GP up to maximum of twice per Benefit Year. Pre-auth is required from the fifth visit to a Contracted Service Provider (GP) and/or Allocated Provider visit per Insured Party.
Primary Healthcare	Virtual General Practitioner (GP) Consultations		This benefit provides access to a Virtual Consultation via Contracted Service Provider (GP) and/or Allocated Provider to your available unlimited visits of GP consultations. Contact us on 0861 493 587 or www.kaelo.co.za .

Address: 2nd Floor, The Oval - East Wing, Wanderers Office Park, 52 Corlett Drive, Illovo, 2196
Telephone: +27 (0)861 493 587; Email: service@kaelo.co.za; Web: www.kaelo.co.za
Group Directors: J Savage, M Jordan, S Lees
Non-Executive Directors: K Bouic
Reg. No. 2008 / 019335 / 07

**This is not a Medical Scheme and the cover is not the same as that of a Medical Scheme.
This Policy is not a substitute for Medical Scheme membership.**

Kaelo Risk (Pty) Ltd is an authorised financial services provider (FSP 36931).
Underwritten by Centriq Insurance Company Limited (FSP 3417).

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Benefit Category	Benefit	2020	Changes 2021
Primary Healthcare	Nurse and Wellness Clinic Based Care	Unlimited. Limited to R210 per visit at contracted pharmacies only.	Visits per Insured Party are limited in respect of the following at a Network Provider contracted pharmacy. General colds and flu are limited to four events Bronchitis, Asthma etc. is limited to two events Diabetes is limited to two events Screening and wellness are limited to two events Testing for HIV is limited to two events.
Primary Healthcare	Specialist Benefit (Applies to MyHealth Plus and MyHealth Guardian Plus)	Claims are paid at the Agreed Rate but are limited to a maximum of R1 820 per visit with a R3 650 overall limit per Policy.	Claims are paid at the Agreed Rate but are limited to a maximum of R1 920 per visit with a R3 850 overall limit per Policy.
Medication	Acute Medication (short-term medication)	In order for the Benefit to be covered, Authorisation must be obtained per Insured Party from the seventh visit.	In order for the Benefit to be covered, Authorisation must be obtained per Insured Party from the fifth visit.
Medication	Over the Counter (OTC) Medication	The OTC Medication Benefit is limited to R130 per script to a maximum of R390 per Insured Party per annum.	The OTC Medication Benefit is limited to R140 per script to a maximum of R420 per Insured Party per annum.
Medication	Immunisation – Flu Vaccination	Was referred to as Over the Counter (OTC) Medication.	This is now referred to under Immunisation.
Medication	Immunisation – Flu Vaccination	Adults and children who are registered for Chronic Medication.	Adults and children who are registered for Chronic Medication for the following conditions: Chronic pulmonary disorders (including Asthma) Cardiovascular disorders (except isolated hypertension) Renal or Metabolic disorders (including diabetes mellitus) Patients with immunosuppression.
Radiology	Radiology	Authorisation from the seventh GP visit per Insured.	Authorisation from the fifth visit to Contracted Service Provider (GP) and/or Allocated Provider visit per Insured Party.
Maternity	Maternity	This Benefit covers two sonar scans per Pregnancy per annum per Insured Party.	This Benefit covers two sonar scans per Pregnancy per Insured Party.
Pathology	Pathology	In order for the Benefit to be covered, Authorisation is required per Insured Party from the seventh visit.	In order for the Benefit to be covered, Authorisation is required per Insured Party from the fifth visit.
Health Screening	COVID-19 Testing		The Insurer will cover the cost of the Pathology test for COVID - 19 (up to a maximum of R850) if the result is positive.
MyDoctor	Health tutorials		Removed

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Benefit Category	Benefit	2020	Changes 2021
Medical Emergency Services	Ambulance		Limited to road transport.
Death Cover	Death Cover	R21,000	R20,000
Accident Cover	Accident Cover - Casualty Treatment (Accidental Events only)	R17 850 per event.	The Benefit payable is equal to the actual cost of the services that are provided, but only to the limit of R18 750 per event.
Accident Cover	Accident Cover - Casualty Treatment (Accidental Events only) To Take Out (TTO) Medication	Exclusion.	To Take Out (TTO) Medication in casualty is covered up to a sub-limit of R300 per event and subject to overall limit of R18 750.
Accident Cover	Accident Cover - In-Hospital Treatment (Accidental Events only)	R350 000 (buy up to R1 500 000 per event).	This Accident Cover - In-Hospital Treatment (Accidental Events only) covers emergency in-patient services which will be provided for in case of Accidental Harm to an Insured Party for in-patient hospital treatment. The following limits apply R370 000 per event or (if the buy-up option is purchased) R1 500 000 per event. The Benefit payable is equal to the actual cost of the services that are provided, subject to a maximum of R370 000 per event or (if the buy-up option is purchased) R1 500 000 per event.
Accident Cover	Accident Cover - In-Hospital treatment (Accidental Events only) To Take Out (TTO) Medication	Exclusion.	To Take Out (TTO) Medication in hospital is covered up to a sub-limit of R300 per event and subject to an overall hospital limit of R370 000 per event or (if the buy-up option is purchased) R1 500 000 per event.
Accident Cover	Accident Cover - In-Hospital treatment (Accidental Events only) Appliances	Exclusion.	Any appliances, like wheelchairs, crutches, beds or convalescing equipment is covered up to a sub-limit of R5 000 per event and is subject to overall hospital limit of R370 000 per event or (if the buy-up option is purchased) R1 500 000 per event.

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New Buy-Up Options

Health Service	Benefit	New Buy-Up Options
Pregnancy and Childbirth Cover - Optional Buy Up for compulsory groups of 100 and above	Antenatal, Delivery and Postnatal visits at a Contracted Service Provider for uncomplicated Pregnancies.	The Maternity Programme covers, Antenatal visits, the actual delivery and a post-delivery visit, at a Contracted Service Provider (GP) and/or Allocated Provider for uncomplicated Pregnancies. In order to access this Benefit you must contact the call centre to be enrolled. Once registered on the programme, you will be referred to a Network Provider Hospital closest to you for the delivery.
Pregnancy and Childbirth Cover - Optional Buy Up for compulsory groups of 100 and above Registration	Registration: <ul style="list-style-type: none"> <input type="checkbox"/> You need to register with Kaelo Health by 28 weeks Pregnant to qualify for cover <input type="checkbox"/> To register please contact the call centre on 0861 493 587 <p>The Case Manager will supply an Authorisation to the Network Provider Hospital closest to you.</p>	
Pregnancy and Childbirth Cover - Optional Buy Up for compulsory groups of 100 and above Services offered and qualifying criteria	<p>Cover for Antenatal visits with a Midwife or a Contracted Service Provider (GP) and/or Allocated Provider or Gynaecologist/Obstetrician as per approved Treatment care plan.</p> <p>Cover for natural birth or emergency caesarean sections in selected Maternity contracted hospitals across the country.</p> <p>Should a complication arise following the delivery, the baby and mother will be stabilised and then transferred to a state facility.</p> <p>Qualifying criteria:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Registration before 28 weeks of Pregnancy <input type="checkbox"/> Confirmation by a doctor that the Pregnancy is a healthy, low-risk, singleton Pregnancy (one baby) for delivery between 38 and 42 weeks <input type="checkbox"/> Having regular Antenatal checks (as per the treatment care plan) to ensure a healthy mother and baby <input type="checkbox"/> You must take responsibility for your own general health during the Pregnancy <input type="checkbox"/> Should you not attend regular visits as per the agreement, you may be removed from the Programme and you will be categorised as non-compliant. You will then be required to deliver at a state facility. 	<p>One Postnatal consultation with a Midwife or a Contracted Service Provider (GP) and/or Allocated Provider.</p> <p>To Take Out (TTO) home Medication limited to R300 per delivery.</p>

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Health Service	Benefit
Pregnancy and Childbirth Cover - Optional Buy Up for compulsory groups of 100 and above	The Programme does not cover high-risk Pregnancies and excludes cover for example: registration after 28 weeks of Pregnancies; cases where previous Pregnancies or deliveries where a complication occurred; existence of chronic health conditions like diabetes, hypertension and epilepsy; previous deliveries before 38 weeks or low-birthweight babies; pre-eclampsia (Pregnancy-related high blood pressure); multiple babies (twins or triplets); postnatal complications requiring medical care after the delivery.
Exclusions	Newborns who require specialised Treatments following delivery will be stabilised and transferred to a state facility, for example: birth asphyxia or meconium aspiration syndrome; congenital deformities or neonatal sepsis; any additional scans not covered by the Treatment plan; mother and baby packs; baby Immunisations; circumcisions; pathology outside of the Prime Cure formulary is not covered by the Treatment plan; sterilisation at any time including during emergency caesarean sections.

Important Information: Changes

Please note there have been additions and updates to some definitions. Please read in conjunction with your Policy.

Dependant Open Window Period

You are now able to add your dependants to your Kaelo Health - MyHealth Plus Policy during this open window period. No waiting periods will apply for Dependants joining with a start date of 1 January 2021. If you would like to add Dependants to your Policy, please contact your Broker.

We thank you for your ongoing support and wish you all the best for 2021.

Sincerely,
Kaelo

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