



flexi**FED**Savvy

Smart medical aid for
young South Africans
who are savvy about their
health, money and time



contents

A **fresh, affordable approach** to medical aid for a new generation



flexiFED^{Savvy} at a glance



What about **day-to-day**?



Life changes, **medical aid should adapt** too



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Benefit tables





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young people can't afford medical aid

As a younger person, you might be amongst the healthier people in the country, but since you've just started your career, you might not be able to afford private medical aid. Which, in South Africa, is an absolute must-have.

flexiFED^{Savvy} from Fedhealth – an affordable hospital plan for the digitally savvy younger generation – fills this void in the market.

With this option, Fedhealth hopes to cover young and healthy first-time medical aid members who otherwise might not join a medical scheme based on affordability challenges.

Here's why this innovative medical aid option is worth considering.



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a fresh, affordable approach to medical aid for a new generation

flexiFED^{Savvy} offers flexible medical aid cover for a generation who's looking for smarter ways to make their money (and health) go further.

flexibility – on top of receiving a hospital plan with the unique benefits for which Fedhealth has become known, members can choose one of three ways to fund day-to-day benefits if they choose to. This means that trips to the GP, over-the-counter medication or physiotherapy after a gym session gone wrong can also be covered without breaking the bank.

Priced at just R1 055 per month for a principal member, flexiFED^{Savvy} is the most affordable hospital plan in the market – without compromising on quality.

Young movers and shakers embrace technology, so they will especially enjoy the fact that flexiFED^{Savvy} is **fulfilled via self-service on digital platforms only** – no time-consuming (and frankly, boring) phone calls to a call centre.



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flexiFED^{Savvy} rates



Main Member
R1 055 per month



Adult Dependant
R1 055 per month



Child Dependant
R775 per month



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flexi**FED**^{Savvy}

From just **R1 055 p/m**
flexi**FED**^{Savvy}
gives you



Unlimited **private hospitalisation** >



Unlimited cover with network
specialists and GPs in-hospital >



Take home medication:
7 days' supply >



Chronic medicine benefit >



30 day post-hospitalisation benefit >



Unlimited trauma treatment >
in a casualty ward



Screening benefit >



Specialised radiology unlimited at
PMB level of care >

**SEE
MORE**

See the full benefit table >

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gives you



Unlimited **private hospitalisation** >

Unlimited private hospitalisation at a network hospital up to PMB level of care. Includes **3 face-to-face and unlimited virtual GP consultations out-of-hospital**



Take home medication:
7 days' supply >



Chronic medicine benefit >



30 day post-hospitalisation benefit >



Unlimited trauma treatment >
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Unlimited cover with network
specialists and GPs in-hospital >

Unlimited cover with network specialists and
GPs in-hospital: Cover for out-of-network
specialists and GPs in-hospital has a combined
limit of **R2 500 per beneficiary per year**



Chronic medicine benefit >



30 day post-hospitalisation benefit >



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Take home medication:
7 days' supply >

Take-home medication: We pay for **7 days' supply of take home medication**, to a maximum of R400 per beneficiary per admission, when the member is discharged from hospital. The medicine can either be **dispensed by the hospital** and reflect on the original hospital account, or be **dispensed by a pharmacy on the same day** that the member is discharged from hospital



30 day post-hospitalisation benefit >



Unlimited **trauma treatment** >
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Unlimited cover with network
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Take home medication:
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Chronic medicine benefit >

Chronic medicine benefit: Unlimited cover for the 27 PMB CDL conditions subject to the Basic formulary. Members need to use a DSP pharmacy to obtain their chronic medicine.



enefit >



Unlimited trauma treatment >
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Screening benefit >



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Unlimited **private hospitalisation** >



Unlimited cover with **network specialists and GPs in-hospital** >



Take home medication:
7 days' supply >



Chronic medicine benefit >



30 day post-hospitalisation benefit >

30 day post-hospitalisation benefit:
Physiotherapy, occupational therapy, speech therapy, dietician consultations, pathology & general radiology after discharge from hospital



Screening benefit >



Specialised radiology unlimited at
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**Specialised technology, unlimited at
PMB level of care** >



Unlimited private hospitalisation >



**Unlimited cover with network
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30 day post-hospitalisation benefit >



Unlimited trauma treatment >
in a casualty ward



Unlimited trauma treatment in a casualty ward
Emergency treatment, like stitches, is covered
at a casualty ward whether the member is
admitted to hospital or not. Co-pay of R850
for non-PMBs.



See the full benefit table >

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Screening benefit >

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Spe
PM

Screening benefit: Includes cervical cancer screening (Pap smear and HPV PCR test), flu immunisation, HIV finger prick test, smoking cessation programme, health risk assessments



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Specialised radiology: Out-of-hospital specialised radiology is
subject to day-to-day benefits





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flexiFED^{Savvy}

MORE for just
R1 055 p/m



Unlimited virtual GP consults
and 3 in-person consults



Virtual mental wellness support



Stress and anxiety benefit



Upgrade within 30 days
of a life-changing event



Female contraceptives:
oral & injectable contraceptives
paid from Risk



Add optional **R5 050 annual Savvy Savings**
for even more day-to-day cover or



You tell us how much Savvy Savings
to add to your cover up to a maximum of
R6 310 per annum

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what about day-to-day?

You can choose how you want to fund your day-to-day in **one of 3 ways** on your **flexiFED^{Savvy}** plan:



1 Use flexiFED^{Savvy} as a **Hospital Plan** with unlimited virtual GP visits and 3 face-to-face GP visits

The member funds all his/her own additional out-of-hospital expenses.

R1 055 p/m



3 Use flexiFED^{Savvy} as a **Hospital Plan with Day-to-day Savings Back-up Plan**

If the member needs funds for day-to-day medical expenses, **they can access their back-up Fedhealth Savings**. They will only pay for the portion they use – interest free over 12 months.

Fedhealth Savings available (principal member):
R6 310 p/a

The amount the member uses will be divided by 12 and added to their hospital plan contribution.



2 Use flexiFED^{Savvy} as a **Savings Plan**

The member wants mostly a hospital plan, but likes the idea of having savings in case it's needed. **Similar to other schemes**, the member starts paying back this day-to-day benefit from the start of the year in equal portions every month.

Fedhealth Savings available (principal member):
R5 050 p/a

$R1\ 055 + R421 =$
R1 476 p/m

See the full benefit table





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What about **day-to-day**?

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life changes, medical aid should adapt too

We know that life can change at the blink of an eye. That's why, on most Fedhealth options, members are allowed to change to a higher option with more appropriate benefits within 30 days of a life-changing event or diagnosis, such as pregnancy or a serious illness.



flexiFED^{Savvy} is no exception, so you can enjoy the peace of mind that should your circumstances change, your medical aid cover can change along with it.

See the full benefit table 





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We designed **flexiFED^{Savvy}** especially for young and healthy first-time entrants into the medical aid market, but there is a flexi**FED** option to take care of every South African based on their health needs and family composition.



flexiFED^{Savvy} SAVVY SINGLES

Emergency and planned procedure hospital cover



Oncology



Maternity, infants & children



Chronic



Mental Health



flexiFED 1 YOUNG SINGLES

Emergency and planned procedure hospital cover



Oncology



Maternity, infants & children



Chronic



Mental Health



flexiFED 2 FAMILY START-UPS

Emergency and planned procedure hospital cover



Oncology



Maternity, infants & children



Chronic



Mental Health



flexiFED 3 GROWING FAMILIES

Emergency and planned procedure hospital cover



Oncology



Maternity, infants & children



Chronic



Mental Health



flexiFED 4 MATURE FAMILIES

Emergency and planned procedure hospital cover



Oncology



Maternity, infants & children



Chronic



Mental Health



Fedhealth offers a **10% GRID** or **25% Elect** monthly discount on flexiFED 1, 2, 3 and 4. Please note that GRID and Elect discounts are not currently available on flexiFED^{Savvy}.

10%
OFF
WITH GRID >

25%
OFF
WITH ELECT >



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10% OFF
WITH GRID

GRID SAVE 10%

Full cover at network hospitals

In exchange, for planned procedures members must use Fedhealth's Private Hospital Network, which includes over 120 top private hospitals. They can still use a non-network hospital if they wish, but will then have to pay a R15 470 co-payment. The co-payment doesn't apply in case of emergencies.



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flexiFED^{Savvy} SAVVY SINGLES

Emergency and planned procedure hospital cover



Oncology



Maternity, infants & children



Chronic



Mental Health



flexiFED 1 YOUNG SINGLES

Emergency and planned procedure hospital cover



Oncology



Maternity, infants & children



Chronic



Mental Health



flexiFED 2 FAMILY START-UPS

Emergency and planned procedure hospital cover



Oncology



Maternity, infants & children



Chronic



Mental Health



flexiFED 3 GROWING FAMILIES

Emergency and planned procedure hospital cover



Oncology



Maternity, infants & children



Chronic



Mental Health



flexiFED 4 MATURE FAMILIES

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Chronic



Mental Health



Fedhealth offers a **10% GRID** or **25% Elect** monthly discount on flexiFED 1, 2, 3 and 4. Please note that GRID and Elect discounts are not currently available on flexiFED^{Savvy}.

10% OFF
WITH GRID

25% OFF
WITH ELECT

ELECT SAVE 25%

Full cover at any private hospital with a co-payment for elective surgery

In exchange, members will be charged a fixed excess of R15 470 on all hospital admissions, except for emergencies. This excess only applies to the hospital bill; they could still have co-payments on out-of-network specialists, a procedure co-payment or shortfalls because benefit limits have been exceeded.



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hospital cover

In-hospital benefit

This benefit covers all treatments and procedures that have to be done in a hospital. All limits are per family per year unless otherwise stated.

Overall annual limit (OAL)	Unlimited at Fedhealth network hospitals only. R9 050 co-payment on voluntary use of non-network hospitals will apply
Healthcare Professional Tariff in hospital (HPT)	
Fedhealth Network GPs and Specialists	Covered unlimited. Paid in full
Non-network GPS and specialists	Covered up to the Fedhealth Rate. Limited to R2 500 per beneficiary per year
Prescribed Minimum Benefits (PMB): Treatment for PMB conditions can be funded in two ways:	To have the treatment for PMB conditions covered in full, you will have to use Fedhealth Network GPs & specialists. Should you choose not to make use of network providers, the Scheme will only refund treatment up to the Fedhealth Rate for non-network GPs & specialists. You will have a shortfall should the healthcare professional charge more
Hospitalisation costs: accommodation in a general ward, high care ward and intensive care unit, theatre fees, medicine, material and hospital apparatus	Unlimited at negotiated tariff at network hospitals only
Additional medical services (dietetics, occupational therapy and speech therapy)	Paid from day-to-day unless PMB level of care
Alternatives to hospitalisation:	
Nursing services, private nurse practitioners & nursing agencies	Unlimited at cost at PMB level of care
Sub-acute facilities, physical rehabilitation facilities	Unlimited at cost at PMB level of care
Ambulance Services	Unlimited with Europ Assistance
Appliances, external accessories and orthotics	Unlimited at cost at PMB level of care
Blood, blood equivalents and blood products	Unlimited
Cataract surgery (Voluntary use of non-contract providers)**	R7 520 co-payment on voluntary use of non-contracted provider
Immune deficiency related to HIV infection	Unlimited at cost at PMB level of care
Maternity - Healthcare Professional Tariff in-hospital (HPT)	
Fedhealth Network GPs and Specialists (e.g. Gynaecologists & Paediatricians)	Unlimited at cost at PMB level of care. R9 050 co-payment on elective non-PMB c-sections
Non-network GPs and Specialists	Covered up to the Fedhealth Rate. Limited to R2 500 per family per year
Other Healthcare Professionals	Covered up to the Fedhealth Rate

**Contracted providers: Must use NHN and ICPS for cataract surgery. Voluntary use of non-contracted provider will result in co-payment

Dentistry	
Maxillo-facial surgery	Unlimited at PMB level of care, subject to approval
In-hospital dentistry benefit for children under 7	No benefit
Oncology: oncologist consultations, visits, treatment and materials for chemotherapy and radiotherapy, approved medication, radiology and pathology	Unlimited at cost at PMB level of care at designated service provider * and paid at Essential protocol. 25% co-payment applies where a DSP provider is not used. Chemotherapy, as well as medicine and consumables directly associated with the treatment of cancer, should be obtained from the Oncology Pharmacy Network and in accordance to the oncology Preferred Product List (PPL) – non-use of these will result in a 25% co-payment.
Organ transplant including immunosuppression medication	Unlimited at cost at PMB level of care
Corneal graft	No benefit
Pathology, radiology (general)	Unlimited subject to negotiated rates for DSP or up to the Fedhealth Rate for non-DSP
Physiotherapy	Unlimited subject to referral by a medical practitioner, pre-authorisation and treatment protocols
Psychiatric services: accommodation in a general ward, procedures, ECT, materials and hospital equipment, consultations and visits, medicines and injection material	Unlimited at cost at PMB level of care
Renal dialysis (chronic): consultations, visits, all services, materials and medicines associated with the cost of renal dialysis	Unlimited at cost at PMB level of care at Designated Service Provider (DSP).
Childhood illness specialised drug benefit (up to the age of 18)	No benefit
Specialised radiology	Unlimited at PMB level of care
Spinal surgery	No benefit unless PMB level of care
Terminal care benefit	No benefit unless PMB level of care

*Designated Service Provider (DSP) is ICON - Independent Clinical Oncology Network



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chronic disease benefit

Chonic disease benefit

Cover for conditions that require long-term medication or can be life-threatening.

Limit	Unlimited cover for conditions on the Chronic Disease List (CDL)
Conditions covered	See list below
Formulary	Basic formulary
Pharmacy	Members need to use a DSP pharmacy to obtain their chronic medicine. DSP's are: Dis-Chem Courier, Clicks Courier and Pharmacy Direct. Subject to a 25% co-payment for non-use of DSP
HIV/AIDS medicine benefit including treatment for mother-to-child-transmission, rape & post-exposure prophylaxis	
Limit	Unlimited

CHRONIC DISEASE LIST (CDL)

Addison's Disease, Asthma, Bipolar Mood Disorder, Bronchiectasis, Cardiac Failure, Cardiomyopathy, COPD/ Emphysema/ Chronic Bronchitis, Chronic Renal Disease, Coronary Artery Disease, Crohn's Disease, Diabetes Insipidus, Diabetes Mellitus type 1 & 2, Dysrhythmias, Epilepsy, Glaucoma, Haemophilia, Hyperlipidaemia, Hypertension, Hypothyroidism, Multiple Sclerosis, Parkinson's Disease, Rheumatoid Arthritis, Schizophrenia, Systemic Lupus Erythematosus, Ulcerative Colitis

prosthesis benefit

External	Unlimited at cost at PMB level of care
Internal	
Aorta Stent Grafts	Unlimited at cost at PMB level of care
Bone lengthening devices, carotid stents, embolic protection devices, other approved spinal implantable devices and intervertebral discs, peripheral arterial stent grafts, spinal plates and screws	Unlimited at cost at PMB level of care
Cardiac pacemakers, cardiac stents, cardiac valves	Unlimited at cost at PMB level of care
Detachable platinum coils	Unlimited at cost at PMB level of care
Elbow, hip, knee and shoulder replacement	Unlimited at cost at PMB level of care
Total ankle replacement	Unlimited at cost at PMB level of care
Intraocular lenses (per lens)	Unlimited at cost at PMB level of care
* Combined benefit limit for all unlisted internal prosthesis	Unlimited at cost at PMB level of care

screening benefit

General		
Flu vaccination	All lives	1 every year
HIV finger prick test	All lives	1 every year
Women's Health		
Cervical cancer screening (Pap smear)	Women; ages 21 to 65	1 every 3 years
HPV PCR test	Women; ages 21 to 65	1 every 5 years
Health risk assessments		
Wellness screening (BMI, blood pressure, finger prick cholesterol & glucose tests)	All lives	1 every year
Preventative screening (waist-to-hip ratio, body fat %, flexibility, posture & fitness)	All lives	1 every year



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day-to-day benefit

Day-to-day benefits - Under the day-to-day benefit, we cover services like physiotherapy and dentistry.

	HOSPITAL PLAN	SAVINGS PLAN	DAY-TO-DAY SAVINGS BACK-UP PLAN
Annual day-to-day funds	R0	R5 050 per family	R6 310 per family
Network GP	Unlimited virtual consultations and 3 face-to-face consultations per beneficiary paid from Risk		
Non-network GPs	2 consultations per family, subject to the 3 face-to-face visits		
Pathology	Unlimited for 30 days after discharge from hospital. Must be linked to admission and must obtain an auth	Unlimited for 30 days after discharge from hospital. Must be linked to admission and must obtain an authorisation or paid from available day-to-day funds	
General radiology	Unlimited for 30 days after discharge from hospital. Must be linked to admission and must obtain an auth	Unlimited for 30 days after discharge from hospital. Must be linked to admission and must obtain an authorisation or paid from available day-to-day funds	
Physiotherapy	Unlimited for 30 days after discharge from hospital. Must be linked to admission and must obtain an auth	Unlimited for 30 days after discharge from hospital. Must be linked to admission and must obtain an authorisation or paid from available day-to-day funds	
Virtual Mental Wellness	2 virtual consults per beneficiary with a registered counsellor for Stress and Anxiety	2 virtual consults per beneficiary with a registered counsellor for Stress and Anxiety	
		Additional benefits paid from available day-to-day funds	
Appliances, external accessories and orthotics: Hearing aids, wheelchairs etc	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Alternative healthcare: Acupuncture, homeopathy, naturopathy, osteopathy and phytotherapy (including prescribed medication)	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Additional medical services: Audiology, dietetics, genetic counselling, hearing aid acoustics, occupational therapy, orthoptics, podiatry, private nursing*, psychologists, social workers, speech therapy; Physical therapy (Biokinetics, Chiropractics and Physiotherapy)	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Dentistry Advanced: inlays, crowns, bridges, mounted study models, metal base partial dentures, osseo-integrated implants, orthognathic surgery, oral surgery, orthodontic treatment, periodontists, prosthodontists and dental technicians	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Dentistry (Basic)	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Maternity benefit	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Optometry	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Over-the-counter medication:	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Pathology	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Physical therapy: Chiropractics, biokinetics & physiotherapy	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Prescribed medication	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Radiology Specialised	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Specialists excluding Psychiatrists			
Fedhealth Network Specialists	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Non-Network Specialists	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Specialists: Psychiatrists			
Fedhealth Network Psychiatrists	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	
Non-Network Psychiatrists	Self-funded; unless PMB level of care	Paid from Fedhealth Savings; unless PMB level of care	



FEDHEALTH

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A **fresh, affordable approach** to medical aid for a new generation

flexiFED^{Savvy} at a glance

What about **day-to-day?**

Life changes, medical aid should adapt too

Other flexi**FED** options

additional information

Need more information on a specific Fedhealth benefit, programme, service or provider?

We've got you covered. Just click on the relevant link below to find out more.

[ZOOM on 30-Day Post-Hospitalisation Benefit >](#)

[ZOOM on Aligned Serious Illness Benefit >](#)

[ZOOM on All about dependants >](#)

[ZOOM on Alternatives to Hospitalisation Benefit >](#)

[ZOOM on Chronic Medicine Benefit >](#)

[ZOOM on Emergency Assistance >](#)

[ZOOM on Emergency Treatment in a Casualty Ward >](#)

[ZOOM on Option Upgrades >](#)

[ZOOM on Self-Service Channels >](#)

[ZOOM on Specialist Referral >](#)

[ZOOM on the Contraceptive Benefit >](#)

[ZOOM on the Hospital at Home Benefit >](#)

[ZOOM on the MediTaxi Benefit >](#)

[ZOOM on the Mental Health Benefit >](#)

[ZOOM on the Oncology Benefit >](#)

[ZOOM on the October Health Mental Health App >](#)

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