

DISEASE PREVENTION PROGRAMME 2024

Who we are

Sasolmed (referred to as 'the Scheme'), registration number 1234, is a non-profit organisation registered with the Council for Medical Schemes. Discovery Health (Pty) Ltd (referred to as 'the Administrator') is a separate company and an authorised financial services provider (registration number 1997/013480/07). Discovery takes care of the administration of your membership for the Scheme.

Overview

Risk factors for cardiometabolic syndrome include high blood pressure, elevated blood sugar, abnormal cholesterol, elevated blood triglycerides, high body-mass-index (BMI) and increased abdominal or waist circumference measures. Members living with one or more of these risk factors have a higher chance of developing diabetes and cardiovascular disease and suffering a stroke or heart attack. Sasolmed offers a Disease Prevention Programme designed to support members who are at risk of developing diabetes or cardiovascular disease to improve health outcomes and quality of life.

About some of the terms we use in this document

Here is a list of some of the terms that you may not be familiar with, along with their meanings:

TERMINOLOGY	DESCRIPTION
Chronic Disease List	A defined list of chronic conditions we cover according to the Prescribed Minimum Benefits (PMBs).
Chronic Illness Benefit	The Chronic Illness Benefit (CIB) covers you for a defined list of chronic conditions. You need to apply to have your medicine and treatment covered for your chronic condition.
Emergency medical condition	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. An emergency does not necessarily require a hospital admission. We may ask you for additional information to confirm the emergency. An emergency does not necessarily require a hospital admission. We may ask you for additional information to confirm the emergency.
HealthID	HealthID is an online digital platform that gives your healthcare provider fast, up-to-date access to your health information. Once you have given consent, your healthcare provider can use HealthID to access your medical history, make referrals to other healthcare providers and check your relevant test results
ICD-10 diagnosis code	A clinical code that describes diseases, signs and symptoms, abnormal findings, complaints, social circumstances and external causes of injury or diseases, as classified by the World Health Organisation (WHO).
Premier Plus GP	A Premier Plus GP is a network GP who has contracted with us to provide you with coordinated care for defined chronic conditions.

TERMINOLOGY	DESCRIPTION
Prescribed Minimum Benefits (PMB)	<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 271 diagnoses • A defined list of 27 chronic conditions <p>To access PMBs there are rules defined by the Council for Medical Schemes (CMS) that apply:</p> <ul style="list-style-type: none"> • Your medical condition must qualify for cover and be part of the defined list of PMB conditions • The treatment needed must match the treatments in the defined treatment basket • You must use DSP where applicable. <p>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. If you do not use a DSP, we will pay up to the Scheme Tariff. The difference between what we pay and the actual cost of your treatment will be for your own cost.</p> <p>If your treatment doesn't meet the above criteria, we will pay according to your network option.</p>

Disease Prevention Programme

This programme, together with your Premier Plus GP, supported by your Health Coach and a dietitian in our network, will help you actively manage your risk of developing a chronic condition. The programme gives you additional benefits to monitor and manage your health and to ensure you get high-quality coordinated healthcare and improved outcomes.

How to join the Disease Prevention Programme

Our predictive model uses your health risk assessment results, health claim patterns, family history and other information to determine if you are at risk of developing diabetes. If you meet the Scheme's eligibility criteria for the programme:

- A Health Coach will get in touch with you to explain how the programme works
- A Premier Plus GP can enrol you on the Disease Prevention Programme through HealthID if you give them consent to do so
- Members on the Restricted Network Option must be enrolled by a Premier Plus GP who is also your Preferred General Practitioner (PGP).

Visit sasolmed.co.za to find a healthcare provider in the network.

Your Premier Plus GP will work with you to manage your condition

The Disease Prevention Programme is based on clinical and lifestyle guidelines. Through the programme, you, your Health Coach and your Premier Plus GP can agree on key goals and track your progress.

This will help to identify which areas require attention so that you and your Premier Plus GP can improve the management of your condition.

Members who join the Disease Prevention Programme will have access to the following additional benefits:

- An additional consultation with your Premier Plus GP

- Two consultations with a dietitian in our network, to ensure that you get the best nutrition advice to optimise your health. The dietitian is a skilled healthcare provider that is experienced in tailoring a nutritional plan for you
- Cover for a defined set of blood tests
- Diabetes medicine (metformin) if prescribed by your Premier Plus GP
- Access to a Health Coach for 12 months. Your Health Coach will offer clinical support to help you track, monitor, change and improve your health and quality of life.

To enjoy full cover for the consultations and tests on the programme, please ask your healthcare provider to claim the most appropriate code from the table below and include the appropriate ICD-10 diagnosis code on the claim:

PROCEDURE OR TEST DESCRIPTION	PROCEDURE OR TEST CODE	NUMBER OF PROCEDURE OR TESTS WE COVER
GP Consultations	0191 0192 0193	2
Dietician visits	84200 or 84201 or 84202 or 84203 or 84204	2
Fasting glucose	4057 or 54057	2
Creatinine	4032 or 54032	1
Cholesterol	4026 or 54026 or 4027 or 54027 or 4028 or 54028, or 4147 or 54147	1

Can anyone join the Disease Prevention Programme?

The programme uses an advanced predictive model to identify members who are eligible. This is based on your preventative care assessment results. Members whose assessment results indicate a high risk of developing diabetes may be eligible for the programme. From there your Premier Plus GP may enrol eligible members on the programme.

What is the goal of the programme?

The goal of the programme is to reduce your risk of developing diabetes. This may be in the form of addressing a high glucose level with a healthy food plan, exercise and if applicable, appropriate medicines. During or at the end of the programme, your Premier Plus GP will guide you on the next steps for you to take which may include continuing with the changes you have made to your diet and exercise or continuing with the medicine prescribed. Alternatively, you may be diagnosed with diabetes.

What happens if I am diagnosed with diabetes during the 12-month programme?

Your Premier Plus GP will help to register you for diabetes cover on the Chronic Illness Benefit (CIB), which will give you access to benefits to manage your condition. You can then enrol in the Diabetes Care Programme to access support for your condition. You can learn more about these programmes on our website sasolmed.co.za.

Complaints process

You may lodge a complaint or query with Sasolmed directly on **0860 002 134** or send an email to enquiries@sasolmed.co.za. If the query or complaint remains unresolved, you may address a complaint in

writing to the Principal Officer. Please be sure to include the reference number obtained through the process with the Administrator.

Should your complaint still not be resolved to your satisfaction, you may lodge a formal dispute by following the Scheme's internal disputes process, as explained on the website at sasolmed.co.za.

You may, as a last resort, approach the Council for Medical Schemes for assistance: Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch-Hazel Avenue, Eco Park, Centurion, 0157 / **0861 123 267** / complaints@medicalschemes.co.za / www.medicalschemes.co.za

Contact us

You can find other important information on our website at sasolmed.co.za or contact us on 0860 002 134.