

Hearing Aid Benefit 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

The Appliance Benefit gives members cover for the purchase of hearing aids. This document gives you details about the available benefits according to your chosen network option.

About some of the terms we use

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

Terminology	Description
Beneficiary	A member and/or dependant registered with Sasolmed.
Direct co-payment	This is an amount that you need to pay towards a healthcare service. The amount can vary by the type of covered healthcare service, place of service or if the amount the healthcare provider charges is higher than the tariff we cover. If the direct co-payment amount is higher than the amount charged for the healthcare service, the cost of the healthcare service will be for your own cost.
Co-payment	Sasolmed pays service providers at the set Scheme Tariff. If the service providers charge more than the Scheme Tariff, the outstanding amount will be for your own cost.
Scheme Tariff	This is a Tariff that we pay for healthcare services from hospitals, pharmacies, healthcare providers and other providers of relevant health services.
Prescribed Minimum Benefits (PMB)	In terms of the Medical Schemes Act of 1998 (Act No. 131 of 1998) and its Regulations, all medical schemes must cover the costs related to the diagnosis, treatment and care of:

- An emergency medical condition
- A defined list of 271 diagnoses
- A defined list of 27 chronic conditions

To access PMBs there are rules defined by the Council for Medical Schemes (CMS) that apply:

- 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.

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.

If your treatment doesn't meet the above criteria, we will pay according to your network option.

Hearing aids

Hearing aids are limited to R25 300 for per beneficiary every 36 months, starting from 1 January 2022. Members are responsible for a R1 000 direct member co-payment for each purchase within the 36-month cycle.

Claims for hearing aids will be paid at 100% of the Scheme Tariff, up to the benefit limit. When the benefit limit is depleted, there will be no further benefits unless approved as PMBs.

The limit amount available over the 36 months is the same, whether you get single or bilateral hearing aids, or get these at different times. The limit does not increase when you get bilateral hearing aids.

Hearing aid repairs and reprogramming

The benefit for hearing aid repairs and reprogramming is limited to R2,525 for each member every 36 months, starting from 1 January 2022.

Claims for hearing aid repairs and reprogramming will be paid at 100% of the Scheme Tariff, up to the benefit limit. When the benefit limit is depleted, there will be no further benefits unless approved as PMBs.

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 your query or complaint is not resolved to your satisfaction, address a complaint in writing to the Principal Officer at the Scheme's registered address. Please be sure to include the reference number obtained through your direct contact with the Scheme.

Should your complaint still remain unresolved, you may lodge a formal dispute by following the Sasolmed internal disputes process, which is 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**.