

sasolmed



01 October 2026
Contribution Changes

OWN YOUR TOMORROW

Dear Sasolmed Member

SASOLMED MEMBER CONTRIBUTION INCREASE | 01 OCTOBER 2026

The Sasolmed Board of Trustees ("the Board") remains committed to protecting the long-term sustainability of the Scheme while ensuring members continue to receive high-quality healthcare cover and excellent value for money. As part of the annual contribution review process, the Board undertook a detailed assessment of the Scheme's financial position, healthcare utilisation trends, claims experience, healthcare inflation and future sustainability requirements. This review also considered the outcomes of a comprehensive independent benchmarking exercise, which compared Sasolmed's benefits and contributions with those offered by other medical schemes in the South African healthcare market.

The Board's objective remains to provide benefits that meet the healthcare needs of members while maintaining an equitable and sustainable contribution structure for current and future generations of Sasolmed members.

What did the Board of Trustees take into consideration when deciding on this year's contribution increase?

Medical schemes operate on a collective risk-pooling basis, where member contributions are used to fund healthcare claims. To ensure that claims can continue to be paid promptly and that members retain access to quality healthcare benefits, contribution levels must be reviewed annually in line with changes in healthcare costs and utilisation patterns.

In reaching its decision, the Board considered:

- Increased utilisation of healthcare services across both in-hospital and out-of-hospital benefits
- Ongoing growth in the cost of healthcare services, medicines and medical technology
- The need to ensure that contribution income remains sufficient to fund member claims and protect the Scheme's reserves
- The impact of fraud, waste and abuse on overall healthcare expenditure
- The affordability of contributions for members
- The competitiveness of Sasolmed's benefits and contributions relative to those of comparable medical schemes

How does Sasolmed compare to other medical schemes?

During the past year, Sasolmed commissioned an independent market comparison to assess the competitiveness of the Scheme's benefits and contribution structure.

The review confirmed that Sasolmed continues to deliver strong value for money when compared to many open medical schemes. Members generally enjoy access to a rich range of hospital, chronic and day-to-day benefits at contribution levels that remain competitive relative to comparable products available in the open medical scheme market.

Understanding the 2026 Contribution Changes

After careful consideration of the various factors impacting the Scheme, the Board has approved adjustments to the contribution structure effective 01 October 2026. These changes are expected to result in an **average contribution increase** of approximately **6.6%** per member when comparing the contributions received over the period 01 October 2025 to 30 September 2026 to the contributions expected to be received from 01 October 2026 to 30 September 2027.

A key change to the contribution structure for 2026 is an adjustment to the contribution percentages applicable to adult and child dependants. Contributions for dependants are calculated as a percentage of the Principal Member's contribution, and the Board has approved an **increase of 5 percentage points in the contribution percentages for both adult and child dependants**. This change reflects the fact that, on average, adult and child dependants utilise healthcare benefits at a level that exceeds the contributions historically paid on their behalf, resulting in a portion of their healthcare costs being subsidised by Principal Members. By increasing dependant contribution percentages, the Scheme moves towards a fairer allocation of healthcare costs across member categories while supporting the long-term sustainability of the Scheme.

Importantly, dependant contributions on Sasolmed remain highly competitive and continue to compare favourably with those charged by other medical schemes, where adult and child dependant contributions are often substantially higher relative to the Principal Member contribution. The revised contribution structure has also enabled the Board to moderate the increase applicable to Principal Members, with **Principal Member contribution increases ranging from as low as 0.3% to a maximum of 6.0%**, depending on income level. The overall impact at policy level will vary according to family size and dependant composition, with policies covering adult and child dependants experiencing higher increases as a result of the revised dependant contribution percentages.

Despite these changes, **the average contribution increase across the Scheme remains 6.6%**, reflecting the Board's commitment to balancing affordability, fairness and sustainability.

Sasolmed continues to offer excellent value for money, with members paying significantly less for comparable levels of cover than they would in the open medical scheme market, particularly in the case of larger family memberships.

The impact of the change on your own contribution payable will depend on **your own income** (benefit value, control amount or pension), and the **number and type of dependants** (adult or child) you have registered on Sasolmed over the period 01 October 2026 to 30 September 2027.

Additional Affordability for Restricted Network Option Members

To further support affordability and provide members with greater choice, the Board has approved an additional 5% contribution differential between the Comprehensive Option and the Restricted Network Option. This is in addition to the existing differential of approximately 10%, resulting in Restricted Network Option members paying contributions that are approximately 15% lower than those on the Comprehensive Option. Members on the Restricted Network Option continue to enjoy access to the same core benefits and overall level of cover, with the lower contribution made possible through the use of designated service providers and managed healthcare pathways. These arrangements enable the Scheme to manage healthcare costs more effectively while maintaining access to quality healthcare services. The enhanced differential strengthens the value proposition of the Restricted Network Option, providing members with a more affordable contribution level while supporting the Scheme's long-term sustainability.

Approved contribution structure effective 01 October 2026

Considering the above, effective 01 October 2026, the Board has approved the following changes to the contribution structure:

The monthly salary scale (**minimum and maximum** benefit value / control amount or pension) to calculate the Principal Member's contribution **will remain unchanged** as follows:

- Minimum benefit value / control amount or pension will increase from R8 480 to **R8 950**
- Maximum benefit value / control amount or pension will increase from R34 155 to **R36 035**

The percentage applied to the benefit value / control amount or pension to calculate the **Principal Member** contribution will **decrease** by **0.64%** on the Comprehensive Network Option and **1.08%** on the Restricted Network Option

The percentage applied to the Principal Member's contribution to calculate an **adult dependant** contribution is **85%**

The percentage applied to the Principal Member's contribution to calculate a **child dependant** contribution is **25%**

The practical application of these changes can be seen in the table below.

Approved contribution structure effective 01 October 2026

The contribution table effective from 01 October 2026 is provided below. The percentages and amounts as of September 2026, are provided in brackets for ease of comparison.

		 COMPREHENSIVE OPTION	 RESTRICTED NETWORK OPTION
Principal Member	Contribution as a % of monthly benefit value / control amount or pension, subject to a minimum of R8 950 per month (was R8 480) and a maximum of R36 035 per month (was R34 155)	17.21% (was 17.85%)	15.12% (was 16.20%)
Adult	Relative to the Principal Member's contribution	85% (was 80%)	85% (was 80%)
Child	Relative to the Principal Member's contribution	25% (was 20%)	25% (was 20%)

Calculate your new total monthly contribution using the contribution calculator

Log-in to the Sasolmed website and [click here](#) to use our contribution calculator to calculate contribution changes based on your income, and addition or removal of any dependants.

Remember to deduct any subsidy you may receive, depending on your conditions of employment or retirement

Benefit changes for 2027

To ensure the Scheme's sustainability, contribution changes will be accompanied by various benefit adjustments for 2027. Details regarding benefit changes will be shared with you in the coming months, including your 2027 Benefit and Contribution Schedule and information on how to exercise your choice between the Comprehensive or Restricted Network Options.

To help members better understand the value offered by Sasolmed and the contribution changes effective 01 October 2026, members are encouraged to attend a webinar on 25 September 2026, where the Scheme's value proposition, market competitiveness and contribution increase will be discussed in more detail. These topics will also be covered during the Sasolmed year-end member roadshows taking place in November 2026, providing further opportunity for members to engage with and better understand the changes.

Additional information has been included in the linked Frequently Asked Questions (FAQ) document, which can be accessed [here](#).

Yours in Health,

Dr Biren Valodia
Sasolmed Board of Trustees | Chairperson

Disclaimer: As per Section 31(2) of the Act, it is essential to note that any amendments, rescissions, or additions to the rules of the medical scheme are only deemed valid once they have been approved by the Registrar. Furthermore, in compliance with Section 29(1)(l), medical schemes are required to provide their members with advanced written notice of any impending alterations to their contributions and benefits. In their communication with members, medical schemes are required to incorporate a disclaimer, specifying that the amendments will only be valid once approved by the Registrar.

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