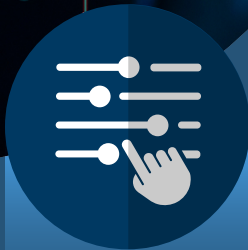


sasolmed



2027

Benefit Changes

OWN YOUR TOMORROW

Dear Sasolmed Member

Your 2027 benefits and what is changing

Following the significant benefit design changes introduced for 2026 to safeguard the long-term sustainability of Sasolmed, the Board of Trustees is pleased to announce a number of positive enhancements effective 01 January 2027.

The 2026 changes placed the Scheme on a stronger and more sustainable footing, creating an opportunity to focus on initiatives that enhance member value, improve access to preventative healthcare, strengthen care coordination and respond to member feedback.

As a result, the 2027 benefit year introduces several enhancements, including improved preventative care benefits, expanded funding for selected healthcare services, greater flexibility within existing benefits and the introduction of a new Integrated Care Programme to support members with complex healthcare needs.

These enhancements form part of the Scheme's ongoing commitment to providing relevant, high-quality healthcare benefits while maintaining the long-term financial sustainability of Sasolmed for current and future generations of members.

These updates also help us curb fraud, waste and abuse (FWA) and ensure that your contributions are used for appropriate, quality care for all members.

Summary of changes for 2027

- **Integrated Care Programme:** The Integrated Care Programme is centred on the creation and implementation of personalised care plans for members expected to utilise or members who are currently utilising a large amount of healthcare services and resources. The programme uses sophisticated predictive models to identify members who are expected to be among the top 1% of claimants over the next 12 months. It also involves the development of personalised care plans and targeted interventions, including care coordination, multidisciplinary team reviews, pre- and post-admission support, and psychosocial support, among others. These interventions are designed to optimise care for these members while reducing avoidable healthcare costs
- **Self-sampling cancer screening kits:** The Scheme will fund self-sampling kits for cervical and colorectal cancer screening. Members may collect the kit directly from a participating pathology laboratory
- **Mirena devices for contraception:** Mirena devices will also be funded for contraceptive purposes from the Acute Medicine limit, up to 100% of the Scheme's Medicine Reference Price. A 20% member co-payment will apply to the device. It is important to note that if selecting a Mirena device, no other contraception will be covered for the five year lifespan of the Mirena device
- **Oral-hygiene visits:** Two oral-hygiene visits will remain available per calendar year, but the minimum interval between visits will reduce from 180 days to 60 days
- **RSV prevention:** Beyfortus will replace Synagis under the funding protocol. Funding will extend to all beneficiaries younger than one year during the annual RSV season from February to June, subject to the approved protocol
- **Blood pressure monitors:** Funding will be reinstated through the Home Devices benefit for members registered on the relevant managed-care programmes, subject to clinical supervision and clinical review
- **Income Verification for Adult Dependants:** External income verification checks will be introduced for New Dependants over the age of 23 as well as annual verification for existing dependants over the age of 23 years of age

Additional member enhancements

As part of Sasolmed's ongoing commitment to enhancing the member experience, all dental benefit enquiries, treatment authorisations and benefit-related queries for both Sasolmed Options will continue to be managed by the Dental Risk Company (DRC). This provides members with access to specialised dental benefit support and consistent service. Members can simply call the Sasolmed contact centre and select the dental enquiries option to be connected directly to the DRC team for assistance.

What you need to do next

- 1. Check your Network Option:** If you are on the Restricted Network Option and live or work outside a hub, and/or you do not use digital tools, please carefully consider the Option you select.
[Click here](#) to view the Option Comparison Guide to help you make the right decision.
- 2. Nominate/confirm your PGP:** Use the [Sasolmed App](#) to nominate your PGP on the Restricted Option GP Network (Get care → My care team → Preferred GP (Nominate)).
- 3. Check your providers:** Choose Dental/Optometry providers in the applicable network to avoid co-payments or no cover for voluntary out-of-network use (particularly on the Restricted Network Option).
- 4. Know your limits:** Some benefit limits are now consolidated. Review the 2027 [Member Guide](#) and [Benefit and Contribution Schedule](#) (Log in and go to the "Find a document" tab on [sasolmed.co.za](#)).

Option change deadline

Option change cut-off:

If you wish to change your Network Option for 2027, the change must be done by 11 December 2026. If you do not make your Option change by this date, you will remain on your current Option for 2027.

[Click here to change your Option](#)

Where to get help

Sasolmed App/Website:

Log in, go to "Find a document" for the 2027 Member Guide and Benefit and Contribution Schedule.

Customer Services:

Call [0860 002 134](#) (or chat [011 292 7306](#), Mon–Fri 08:00–17:00, excl. public holidays) or enquiries@sasolmed.co.za. We are here to help you choose the right Option and understand your benefits.

Yours in health,

Ms Merinda Moodie
Acting Principal Officer, Sasolmed

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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