



2023 BENEFIT GUIDE

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OUR VISION

To be the first choice in the financial services sector, by offering excellent healthcare options based on choice, reliability, flexibility and value.

OUR MISSION

We will continue to create innovative products that fit all levels of current and future lifestyle demands, without compromise.



FUND MANAGEMENT

MEET THE TEAM



André Smit
CHAIRPERSON
(Bank Windhoek)



Elize Fahl
PRINCIPAL OFFICER



Johan du Plessis
VICE CHAIRPERSON
(First National Bank)



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Anna Shikongo
TRUSTEE
(First National Bank)



Alfred Simaskiku
TRUSTEE
(AgriBank)

MESSAGE FROM THE CHAIRPERSON

The corona virus epidemic continues to have several diverse implications and impacts on society (including in social, economic, health, environmental, and technological sectors). Some key sectors experienced a slowdown as a result of the pandemic – the medical industry is one of them. The widespread impact of the virus continues to have a great impact on the sustainability of medical aid funds.

In response to the urgent need to return the funds solvency and reduce the higher than expected claims, together with the benefit adjustments, the board resolved to increase the contributions with 10% for the 2023 benefit year.



HEALTHCARE FRAUD, WASTE AND ABUSE

Bankmed operates solely for the benefit of its members; therefore fraud, waste and abuse has a direct impact on the entire membership base of the Fund. Healthcare fraud, waste and abuse cost the healthcare industry millions, if not billions, every year. Health care fraud, waste and abuse inevitably translates into higher contributions and out-of-pocket expenses for members, as well as reduced benefits or coverage. Bankmed will continue to raise awareness in the member communication sessions and on our website. We urge members to please view and look at their remittances on a regular basis to see if claims that were submitted on your member number are valid. If there is any uncertainty, we request that the fund be contacted for more clarity or call the Methealth Fraud tip-offline.

METHEALTH FRAUD TIPOFF LINE

Methealth Namibia Administrators has a fraud tipoff line, which is available 24/7 and callers may choose to remain anonymous. The tipoff line accepts tips and complaints from all sources on potential fraud, waste, abuse and mismanagement in the medical aid industry.

To report suspected fraud or abuse, you can do any of the following:

1. Call the Methealth Fraud Tipoff Line at **08 000 0000 1**.
2. Go to the Methealth website using this link www.methealth.com.na / contact us, and go to **"Report Fraud / Irregularities"**.

AVAILABILITY OF YOUR MEMBER DATA AND BANKMED INFORMATION

If you have not yet registered on our website, simply visit the website www.bankmednamibia.com.na, and use your membership number to create your own password. Access can be obtained with your membership number and your personal unique password. Your member benefits are available immediately.

The Board of Trustees, Principal Officer and Administrators continue to strive for improved benefits, timeous services and the effective management of the Fund for the benefit of its members.

We offer our best wishes and happiness to you and your families as we all look forward to a successful 2023



André Smit
CHAIRPERSON

GENERAL FUND INFORMATION

MANAGED HEALTHCARE

Services Offered

The Managed Healthcare department is the market leader in providing professional healthcare service to Members and Funds administered by Methealth Namibia Administrators. Qualified professional nurses, pharmacists, pharmacist assistants, as well as medical and dental advisors enable the administrator to provide excellent services to the fund and its members.

The department offers the following services:

- Member and practice claims profile management,
- Ex Gratia case management,
- Medication Management Programme (Chronic Disease Management Programme and Drug Utilisation Review),
- Hospital Benefit Management (Hospital Admission Pre-authorisation, Case Management Programme and Retrospective Review);
- Roaming Case Management (review updates, length of stay and high cost cases in hospitals)
- Hospital bedside visit services,
- Dental Management Programme,
- Clinical auditing of claims, claims revision and the subsequent identification of claims tendencies and questionable practices, and
- Pro-active management of high-cost cases by identifying high-risk patients.

HIV/AIDS Management Programme

As continuous and uninterrupted treatment is critical to infected individuals, this section of the programme ensures optimum treatment for a full year within the allocated benefit per individual. To have the above-mentioned benefit, HIV/AIDS positive members in consultations with their doctors must register for the programme as soon as their tested HIV positive. For detailed information, please contact our HIV/AIDS Management Programme Case Managers at 061 375 950 during working hours.

HIV/AIDS Psycho-Social Programme

Methealth Namibia Administrators and Bankmed Namibia allocated a number that reaches our HIV/AIDS Counsellors directly. This makes the programme accessible to all members that are registered on the HIV Disease Management Programme. The HIV/AIDS counsellors can be reached via the office number 061 375950.

HOSPITAL BEDSIDE SUPPORT

Bankmed Namibia offers specialised supportive bedside assistance for members in hospital. The Patient Care Co-ordinator provides compassionate counselling that addresses members' immediate and specific needs.

CHRONIC MEDICATION PROGRAMME

Chronic medication is repetitive or life-sustaining medicine, usually prescribed for a period of six months or longer. Bankmed Namibia covers medication costs for chronic ailments listed in the fund's list of chronic conditions up to a certain maximum. Bankmed Namibia pays for only one month's supply of chronic medication at a time. If the medication you are taking does not meet the criteria for chronic medication benefits, your chronic medication claim will still be paid out, but under your prescribed acute medication benefit.

LIST OF CHRONIC CONDITIONS

The following chronic conditions are recognised by the Fund:

Acne / Addison's Disease / Allergic Rhinitis / Alzheimer's Disease / Anaemia (including iron supplements) / Angina / Ankylosing Spondylitis / Anorexia Nervosa / Asthma / Attention Deficit Disorder (ADD) / Barrett's Oesophagus / Benign Prostatic Hyperplasia / Bipolar Mood Disorder / Bronchiectasis / Bulimia Nervosa / Cancer / Cardiac Arrhythmias / Cardiomyopathy / Chronic Bronchitis / Chronic Obstructive Pulmonary Disease (COPD) / Chronic Renal Disease / Congestive Cardiac Failure / Conn's Syndrome / Coronary Artery Disease / Crohn's Disease / Cushing's Syndrome / Cystic Fibrosis / Deep Vein Thrombosis / Dermatomyositis / Diabetes Mellitus / Insipidus / Eczema / Emphysema / Endocarditis / Epilepsy / Glaucoma / Gout / Hyperuricaemia / Haemophilia / Hypercholesterolaemia (full lipogram results required) / Hypertension / Hypoparathyroidism / Ischaemic Heart Disease / Major Depression / Menopause (Hormone Replacement Therapy) / Migraine (Prophylactics) / Motor Neuron Disease / Multiple Sclerosis / Muscular Dystrophy / Myasthenia Gravis / Narcolepsy / Obsessive Compulsive Disorder / Osteoporosis (Bone density test required) / Paget's Disease of the Bone / Pancreatic Disease / Panic Disorder / Paraplegia and Quadriplegia (Associated Medicine) / Parkinson's Disease / Peripheral Vascular Disorders / Pituitary Adenoma.

EMERGENCY EVACUATION SERVICES

The fund offers emergency air and road ambulance evacuation services to Bankmed Namibia members. All air ambulance flights and long-distance road ambulance transport services are covered for the SADC Region. The cover provides the most effective and efficient emergency evacuation services. All emergency services for life-sustaining conditions that require emergency transport are covered. Please note that members can make use of any registered emergency evacuation provider in Namibia of their choice.

Where the service provider chosen by the member has an agreement for direct payment with Bankmed Namibia, the process will be:

1. The member contacts the ambulance or evacuations provider,
2. The provider contacts the fund for pre-authorisation,
3. The service is delivered to the member,
4. The evacuation provider submits the claim to the fund for settlement,
5. The Fund settles the claim directly with the provider.

Where the service provider chosen by the member does not have an agreement for direct payment with Bankmed Namibia, the process will be:

1. The member contacts the ambulance or evacuations provider,
2. The service is delivered to the member, then
3. The member submits the claim to the fund for settlement at the fund's prescribed tariffs.

The member shall remain liable for any amount more than the fund's prescribed tariffs and more than the member's available benefit.



SELF-MEDICATION

Self-medication is medicine that can be obtained from the pharmacy for minor ailments. These are medicines that have a scheduling status of 0 - 2. Self-medication can be utilised when you know what your ailment is and what medication to use for your condition; for example, having a headache or a cold. You can visit your nearest pharmacy and buy the medication to treat yourself. You will, however, still need to get advice from the pharmacist before buying any medicine for self-medication.

Please remember that medicine for self-medication should not be used for lengthy periods of time and if your condition persists, you should consult your doctor. Your pharmacist can claim the self-medication directly from the fund.

COVERED EXTERNAL MEDICAL APPLIANCES

The following external medical appliances are covered by the fund (a prescription from a medical practitioner is required):

Orthopaedic Footwear (only if prescribed by an orthopaedic surgeon and part of Case Management) / Deep Vein Thrombosis Stockings / Crutches / Walking Frame / Aid (only if used as part of Case Management) / Cervical Collars / Back, Leg, Arm and Neck Braces / Arch Supports and Inner Soles / Oxygen (only if used as part of Case Management) / Oxygen Cylinders (only if used as part of Case Management) / Oxygen Refill (only if used as part of Case Management) / Oxygen Accessories (only if used as part of Case Management) / Oxygen Concentrators (only if used as part of Case Management) / Nebuliser / Humidifier / Peak Flow Meter (only if used as part of Case Management) / Glucometers / Blood Pressure Apparatus / Medic Alert Registration / Traction Apparatus / Mastectomy Brassiere and Prosthesis / Pressure Bandage for Burns / Peripheral Nerve Stimulator for Chronic Pain (only if used as part of Case Management) / Stoma Accessories (only if used as part of Case Management) / CPAP Apparatus for Sleep Apnea (only if used as part of Case Management) / CPAP monitor (only if used as part of Case Management) / Toilet Seat Raisers / Mouth Guard (up to a maximum of N\$ 400 per beneficiary per annum) / wig for cancer / Urinal or Bedpan.

ADDITIONAL BENEFITS AT NO EXTRA COST

Additional Hospital Benefit

What is the Additional Hospital Benefit (AHB)?

The Additional Hospital Benefit provides for an amount payable over and above the scheduled fee payable for all doctors performing any kind of procedure whilst the member is in hospital. Normally this excess is payable by the member, but Bankmed Namibia realises what the possible financial implications can be for a member who must pay this amount from his/her own pocket. To assist, Bankmed Namibia pays the NAMAFA Tariff +100%. Bankmed Namibia is one of the only funds offering members this benefit at no extra cost.

How is AHB Paid?

Contracted-in doctors are paid directly from Bankmed Namibia when the doctor submits the claim.

Doctors that are not contracted-in

The doctor is paid the normal medical aid fund tariff (NAMAFA tariff) directly from Bankmed Namibia. This, however, does not prevent the doctor from charging more than the medical aid tariff. The account from the doctor for the additional amount will be sent to the member who will now have the following responsibility:

STEP 1

Before having a medical procedure done in hospital, ask your doctor whether he/she will be charging more than medical aid fund tariff.

STEP 2

After the procedure has been done and you were charged more than the medical aid fund tariff, please get a copy of the account directly from your doctor.

STEP 3

Fill in the claim form, which is available from any Methealth Namibia Administrators client service office, as well as from your doctor, or visit our website (www.methealth.com.na). Please ensure that the form is completed correctly to enable Bankmed Namibia to process your AHB claim without any delays.

STEP 4

Attach your doctor's account to the claim form.

STEP 5

Submit your claim form with the doctor's account attached to any Methealth Namibia Administrators client service office.

No AHB claims will be paid if the claim form is submitted four (4) months or more after the date on which the procedure was done. The member can claim first and then pay the doctor when the money has been received from Bankmed Namibia.

EXCLUSIONS

The benefit for mental health has been removed from the list of exclusions, and psychometric tests with clinical motivation provided will no longer be excluded.

LIFESTYLE MANAGEMENT PROGRAMME

Making healthy decisions every day is a constant process of living a healthy lifestyle. Living a more balanced and healthier lifestyle demands dedication, therefore we want to support you overcome the poor behaviours that put you at risk for unnecessary health issues.

The Bankmed Lifestyle Programme can assist you in obtaining overall health and wellness. Members suffering from the following lifestyle diseases can join the programme:

- High blood pressure
- Diabetes mellitus
- High cholesterol
- Cardiovascular disease
- Gout
- Obesity and/or
- Iron deficiency detection

The Lifestyle Management program is created to help members make better lifestyle decisions to prevent or slow the advancement of chronic diseases and learn how to take advantage of all the community services that are available to further reduce risk. With a holistic perspective in mind, lifestyle management seeks to comprehend how people might transform unhealthy habits into good ones by:

- To get more active. (through exercise, encouraging hiking, swimming etc)
- Reducing the risk of heart attack, stroke, diabetes, cancer, and many other preventable chronic diseases
- Achieve and maintain a healthier weight
- Improve blood pressure and cholesterol values
- Manage stress better
- Improving mental health
- Trauma Counselling
- Quit Smoking
- Choose healthier foods (healthy eating plan)
- Master other health issues important to individuals

The Lifestyle Management program also keeps providing members with convenient access to standard medical check-ups. One of the most important investments a company can make in its employees is a Corporate Lifestyle Management program, which enables companies to support the physical and mental health of their staff.



Book a Lifestyle Management Day

- Employer group contacts the Lifestyle Management department and request a corporate lifestyle screening.
- Appointment / dates are scheduled to ensure maximum staff attendance.
- The Lifestyle Management team will go to the employer group and perform the basic general screenings: random glucose, random blood cholesterol, blood pressure, weight, waist circumference and calculate the Body mass index (BMI).

During the screenings each member will receive a full consultation on their results; and if any health irregularities are identified, the following procedure is followed:

- Referral from the Lifestyle management department to see a dietician or biokinetics.
- Referral to a general practitioner for medication management.
- Health advice is given to staff with regards to healthy lifestyle choices and exercise.

The Lifestyle Management team's mission is to consistently offer members and employer groups pertinent information on healthy lifestyle choices, how to work with medical specialists to achieve a healthier lifestyle, and how to raise awareness of mental health and other health-related concerns.

PREVENTATIVE HEALTHCARE

What is preventative healthcare?

Prevention is always preferable to treatment. Instead of attempting to take care of yourself while you are already ill, it is about taking care of yourself regularly to maintain your health. The most effective means of ensuring long-term health and fitness are preventative medical services. In order to maintain the best possible health, it involves being aware of your body and mind, recognizing any symptoms you may experience, and taking appropriate action when necessary.

How can it work for me?

Preventive measures such as early detection, a healthy lifestyle and taking care of yourself will keep you healthy and well for many years to come. Not only could you feel better and be more productive, but you could live a long and productive life.

How do I do it?

A few ways in which preventative healthcare can be implemented are:

- Following a healthy diet.
- Exercising regularly and keeping fit.
- Being mindful and reducing stress.
- Taking care of your mental health.
- Taking the necessary vitamins and minerals.
- Early detection – getting tested on a regular basis or as prescribed by your healthcare practitioner.
- Joining the Bankmed Namibia Lifestyle program.

Bankmed's Lifestyle Management program aims to help members maintain a healthy lifestyle with initiatives such as healthy lifestyle programs, healthy eating and exercise tips, diabetes management programs, mental health workshops and counseling on issues such as alcohol use, to support smoking cessation and depression. The aim is to support members in taking preventive measures to improve their general health.

BENEFIT OPTIONS OVERVIEW

ESSENCE

- Comprehensive range of benefits
- 100% of NAMAFA Tariffs
- High chronic medication benefits
- Good individual benefit amounts
- Competitive contributions
- Available to all Bankmed Members

PRIME

- Comprehensive range of benefits
- Comprehensive hospitalisation benefits
- 100% of NAMAFA Tariffs
- N\$ 1 560 000 overall annual cover per Family
- Good individual benefit amounts
- Competitive contributions
- Available to all Bankmed Members

CARE

- Adequate range of benefits
- 100% of NAMAFA Tariffs
- N\$ 780 000 overall annual cover per Family
- Promotes use of primary healthcare facilities (clinics)
- Limited individual benefit amounts
- Limited private hospitalisation

ESSENCE HOSPITAL

- Comprehensive range of benefits
- Comprehensive hospitalisation benefits
- 100% NAMAFA Tariffs
- Competitive contributions
- Available to all Bankmed Members



ESSENCE

BANKMED ESSENCE | SUMMARY OF BENEFITS | Effective 01 JANUARY 2023

OVERALL ANNUAL BENEFIT (OVERALL ANNUAL LIMIT)			N\$1 600 000 per Beneficiary N\$2 400 000 per Family
CATEGORY A: HOSPITALISATION BENEFIT		% NAMAFA TARIFF	Pre-authorization: 100% of tariff will be paid out Without Pre-authorization: No benefit will be paid out except in the case of emergency hospital admissions and emergencies after-hours, weekends and public holidays. Sub-limits are not Pro-rated OVERALL ANNUAL LIMIT
Additional Hospital Benefit Cover: GP's and Specialists In-hospital services are paid up to a MAXIMUM of 200% of NAMAFA Tariff			
1.	Hospitalisation (Subject to Pre-authorization)		Overall Annual Limit
	1.1 Accommodation & Theatre	100%	Sub-limit 1
	1.2 Accommodation other than a recognised hospital/medical institution (Subject to prior approval & Accommodation Expenses Reimbursement Policy)		Limited to N\$600 per day per Family (Applicable to RSA only) (Maximum of 2 days) Sub-limit 1
	1.3 Blood Transfusions	100%	Sub-limit 1
	1.4 Intensive and High Care - Maximum of 3 days then motivation	100%	
	1.5 Medicine, fixed tariff procedures, hospital apparatus and To Take Out Medicine (7 days supply only)	100%	
	1.6 Radiology & Pathology (in hospital) - Additional Hospital benefit Cover excluded	100%	
	1.7 Physiotherapy - Additional Hospital Benefit Cover excluded		
	1.7.1 Physiotherapy (in hospital)	100%	Sub-limit 1.7
	1.7.2 Physiotherapy (post rehabilitation) - Additional benefit once the patient is out of hospital (Subject to prior approval)	100%	Limited to N\$6 000 per family (Benefit available within 3 months from hospital discharge) Sub-limit 1.7
2.	Specialised Radiology Procedures (in & out of hospital) - Additional Hospital Benefit Cover excluded - Referral from a medical specialist only (referral from GP acceptable in places where there is no medical specialist) (Subject to prior approval)		Overall Annual Limit
	2.1 MRI & CT Scans	100%	Limited to N\$35 000 per Family Sub-limit 2
	2.2 Nuclear Medicine	100%	Sub-limit 2
3.	General Practitioners and Specialists (in- hospital services, procedures & operations) - Additional Hospital Benefit Cover included	100%	Overall Annual Limit
4.	Internal Appliances & Materials (Subject to pre-authorization)	100% of cost	Subject to Bankmed Namibia Internal Prosthesis Protocol Overall Annual Limit
	4.1 Artificial Eyes	100% of cost	Limited to N\$16 430 per Beneficiary every 4 years (2020/2023) Sub-limit 4
	4.2 Artificial Limb	100% of cost	Limited to N\$32 860 per Beneficiary every 4 years (2020/2023) Sub-limit 4
	4.3 Other Internal Appliances & Materials	100% of cost	Sub-limit 4
5.	Dialysis (Subject to Case Management and MHC Guidelines)	100%	Overall Annual Limit
6.	Oncology (Subject to Case Management and MHC Guidelines)	100%	Limited to N\$750 000 per Beneficiary Overall Annual Limit
	6.1 Consultations and Procedures Out-of-Hospital	100%	Sub-limit 6
	6.2 MRI/CT Scans & Other Specialised Radiology Procedures In & Out-of-Hospital - Additional Hospital Benefit Cover excluded - Referral from medical specialist only	100%	
	6.3 Radiation Oncology (Referral from medical specialist only)	100%	
	6.4 Oncology Medication (Chemotherapy, Radiotherapy and Hormone Therapy)	100%	
	6.5 Hospitalisation and Related Procedures In-Hospital	100%	
7.	Organ Transplant - Including immunosuppressant drugs (Subject to Case Management and MHC Guidelines)	100%	Overall Annual Limit
8.	Private Nursing / Frail Care / Hospice (Subject to pre-authorization)	100%	Limited to N\$37 250 per Family Overall Annual Limit
9.	Frail Care / Hospice (Subject to pre-authorization)	100%	Sub-limit 8

10.	Psychiatric Treatment – hospitalisation (Subject to pre-authorisation) - Referral from Psychiatrist only (Referral by GP acceptable in places where there is no Psychiatrist)	100%	Limited to N\$31 700 per Family Overall Annual Limit
11.	Alcoholism / Drug Addiction (Subject to prior approval and MHC Guidelines)	100%	Sub-limit 10
12.	Refractive Surgery (all-inclusive) (Subject to pre-authorisation & MHC Guidelines)	100%	Limited to N\$35 000 per Beneficiary (Once off benefit) Overall Annual Limit
13.	Phakic Implants (lens Implant) (all-inclusive) (Subject to pre-authorisation)	100%	Sub-limit 12
14.	Reconstructive Surgery (Medical necessity only) (Subject to pre-authorisation and strict MHC Guidelines)	100%	Overall Annual Limit
	14.1 Consultation and Procedure	100%	Limited to N\$14 300 per Family Sub-limit 14
	14.2 Hospitalisation	100%	Limited to N\$15 000 per Family Sub-limit 14
15.	Dental Surgery - Additional Hospital Benefit Cover Excluded (Subject to pre-authorisation)		Overall Annual Limit
	15.1 Dental Implants – Hospitalisation	100%	Limited to N\$9 500 per Beneficiary Limited to N\$16 750 per Family Sub-limit 15
	15.2 Maxillo Facial & Oral Surgery (Non-Elective) All-inclusive (Including dental extractions for children less than 10 years old and wisdom teeth extractions)	100%	Limited to N\$133 250 per Family Sub-limit 15
	15.3 Maxillo-Facial & Oral Surgery (Elective) Hospitalisation	100%	Limited to N\$19 000 per Family Sub-limit 15
16.	Maternity		Overall Annual Limit
	16.1 Confinement (all-inclusive) (Limited to 1 confinement per year for dep. other than the spouse) (Subject to pre-authorisation)	100%	Sub-limit 16
	16.2 Ante-natal Consultation - Additional Hospital Benefit Cover excluded	100%	Limited to 12 consultations per Beneficiary (Pro-rated from date of joining) Sub-limit 16
	16.3 Ante-natal / Post-natal Classes & Education Additional Hospital Benefit Cover excluded	100%	Limited to 6 sessions per Beneficiary per pregnancy (Pro-rated from date of joining) Sub-limit 16
	16.4 Sonar Scans - Additional Hospital Benefit Cover excluded	100%	Limited to 3 scans per Beneficiary per pregnancy Sub-limit 16
	16.5 Tests for chromosomal and foetal abnormalities - Additional Hospital Benefit Cover excluded	100%	Sub-limit 16
	16.6 Midwifery Service - Additional Hospital Benefit Cover excluded	100%	
17.	Insertion of Intrauterine Device w/ hormone (All-inclusive) (Subject to Prior approval)	100%	Limited to N\$6 250 per Beneficiary (Pro-rated from date of joining) Overall Annual Limit
18.	Stomatotherapy (All-inclusive) (Subject to Prior approval)	100%	Limited to N\$28 750 per Family Overall Annual Limit
19.	Ambulance & Evacuation Services (Subject to prior approval)		Overall Annual Limit
	19.1 Emergency Ambulance & Flights (Subject to prior approval)	100%	Unlimited Benefit
	19.2 Ambulance/Inter-hospital transfer (Subject to prior approval)	100%	Sub-limit 19
	19.2.1 Metropolitan (In-Town)	100%	Limited to N\$5 500 per Beneficiary Sub-limit 19.2
	19.2.2 Long Distance (>100km)	100%	Sub-limit 19.2
	19.3 Other Transport Transport benefit for medical services available only in RSA (Subject to prior approval and Travel Expenses Re-imburement Protocol)	60% of cost	Limited to N\$9 800 per Family Sub-limit 19
20.	International Medical Travel Insurance - Medical cover when travelling to foreign countries - For emergency cases only (not for elective surgery or procedure)	100% of cost	N\$10 000 000 per incident
CATEGORY B: DAY TO DAY BENEFITS		COVER % NAMA F TARIFF	Limited to N\$13 250 per Beneficiary Limited to N\$26 500 per Family
21.	General Practitioners & Specialists	100%	Sub-limit 21
	21.1 Consultations/Visits (out-of-hospital, including casualties)	100%	
	21.2 Procedures/Services (out-of-hospital)	100%	
	21.3 Materials and Disposable Items	100%	
	21.4 Radiology & Pathology (including Radiography, Sonography, Medical Laboratory Technology and Chemical Biochemistry) (Referral from Medical Practitioner)	100%	

22.	Dentistry		Limited to N\$14 250 per Family (excluding Orthodontics benefit) Limited to N\$10 500 per Beneficiary (excluding Orthodontics benefit)
	22.1 Basic Dentistry (Including Dental Therapy)	100%	Sub-limit 22
	22.2 Specialised / Advanced Dentistry	100%	
	22.3 Dental Implants		
	22.3.1 Consultation & Procedure (in-hospital)	100%	Limited to N\$14 000 per Family
	22.3.2 Consultation & Procedure (in-Practice)	150%	Limited to N\$18 500 per Family
	22.3.3 Implant Component	100%	Limited to N\$7 500 per Beneficiary Limited to N\$14 500 per Family Limited to N\$3 500 per dental implant component
	22.4 Maxillo-Facial and Oral Surgery (Elective) In-Hospital and In-Practice	100%	Sub-limit 22
	22.5 Orthodontics	100%	Limited to N\$18 000 per Beneficiary (once-off benefit)
23.	Medicine & Injections		Limited to N\$27 900 per Beneficiary Limited to N\$54 000 per Family
	23.1 Acute Medicine Paid at Maximum Namibia Medicine Price List on generics	80%	Limited to N\$7 800 per Beneficiary Limited to N\$15 600 per Family Sub-limit 23
	23.2 Chronic Medicine Paid at Maximum Namibia Medicine Price List on generics	80%	Limited to N\$18 450 per Beneficiary Limited to N\$36 400 per Family Sub-limit 23
	23.3 Chronic Medicine (Pensioners) Paid at Maximum Namibia Medicine Price List on generics	95%	
	23.4 Essential Vaccination / Immunization (As per WHO Guidelines) Paid at Maximum Namibia Medicine Price List on generics	100%	Sub-limit 23
	23.5 Vitamins, Multivitamins, Minerals, homeopathic/natural/herbal medicine (Excluding supplementation during pregnancy and lactation, injections and haematinics. If prescribed, will be paid on the Acute Medicine benefit limit)	80%	Limited to N\$500 per Beneficiary Limited to N\$950 per Family Limited to N\$150 per script per beneficiary Sub-limit 23.1
	23.5 Self Medication Paid at Maximum Namibia Medicine Price List on generics	90%	Limited to N\$1 760 per Beneficiary Limited to N\$2 340 per Family Limited to N\$223 per script per beneficiary per day Sub-limit 23
24.	Specified Illness Conditions (Subject to pre-authorisation)		Limited to N\$34 550 per Beneficiary
	24.1 HIV/AIDS (As per National Guidelines for Antiretroviral Therapy)		
	24.1.1 Medicine Paid at Maximum Namibia Medicine Price List on generics	100%	Sub-limit 24
	24.1.2 First Full HIV Consultation / Assessment	N\$480	Once off benefit Sub-limit 24
	24.1.3 Consultation (after the first full HIV consultation / assessment)	N\$425	Limited to 6 consultations per Beneficiary Sub-limit 24
	24.1.4 HIV Counseling	100%	Limited to N\$1 350 per Beneficiary Sub-limit 24
	24.1.5 Pathology Tests (Subject to prior approval)	100%	Limited to N\$7 800 per Beneficiary Sub-limit 24
	24.1.6 HIV Resistance Test (Subject pre-authorisation)	100%	Sub-limit 24
	24.2 Prevention of Mother-to-Child Transmission (PMTCT)	100%	Sub-limit 2 As per National Guidelines
	24.3 Post-Exposure Prophylaxis (PEP)	100%	Sub-limit 24 As per National Guidelines
24.4 Pre-Exposure Prophylaxis (PrEP)	100%		
25.	Primary Health Care Services		Limited to N\$1 500 per Beneficiary Limited to N\$2 500 per Family
	25.1 Consultations & Procedures	100%	Sub-limit 25
	25.2 Medicine & Injections Paid at Maximum Namibia Medicine Price List on generics	80%	Sub-limit 23.1

26.	Auxiliary Services (Supplementary Services)		Limited to N\$11 750 per Beneficiary Limited to N\$17 500 per Family
	26.1 Art Therapy	100%	Sub-limit 26
	26.2 Audiology/Speech Therapy	100%	
	26.3 Biokinetics	100%	Limited to N\$5 250 per beneficiary Sub-limit 26
	26.4 Chinese Medicine 26.4.1 Consultation & Procedure 26.4.2 Medicine	100% 80%	Limited to N\$1 500 per Family Sub-limit 26 Sub-limit 23.1
	26.5 Chiropractor 26.6.1 Consultation & Procedure 26.6.2 Medicine	100% 80%	Sub-limit 26 Sub-limit 23.1
	26.6 Clinical Psychology / Psychological Counsellor	100%	Limited to N\$5 250 per beneficiary Sub-limit 26
	26.7 Clinical Technology	100%	
	26.8 Dietician	100%	Sub-limit 26
	26.9 Hearing Aid Acoustician	100%	
	26.10 Homeopathy/Naturopathy/ Phytotherapy 26.10.1 Consultation & Procedure 26.01.2 Medicine	100% 80%	Sub-limit 26 Sub-limit 23.1
	26.11 Occupational Therapy	100%	
	26.12 Orthotist/Prosthetist	100%	Sub-limit 26
	26.13 Physiotherapy	100%	Limited to N\$5 250 per beneficiary Sub-limit 26
	26.14 Podiatry/Chiropody	100%	Sub-limit 26
26.16 Social Worker (Motivation required)	100%	Limited to N\$5 250 per beneficiary Sub-limit 26	
27.	Wheelchair (Subject to prior approval) - Inclusive of repair & maintenance	100% of cost	Limited to N\$13 250 per Beneficiary every 4 years (2023/2026)
28.	Appliances (External) (Subject to MHC guidelines)	80%	Limited to N\$4 500 per family
29.	Hearing Aids Apparatus (Subject to prior approval) - Inclusive of repair & maintenance	100% of cost	Limited to N\$30 000 per Family every 3 years (2023/2025)
30.	Medical Devices for Diabetes Management (Subject to prior approval and MHC Guidelines)		
	30.1 Insulin Pumps	80% of cost	Limited to N\$40 000 per Beneficiary every 4 years (2020/2023)
	30.2 Continuous Glucose Monitoring System / Glucose Reader)	80% of cost	Limited to N\$20 000 per Beneficiary
	30.3 Diabetes Related Consumables	80% of cost	Limited to N\$36 000 per Beneficiary
31.	Optical		N\$3 700 per Beneficiary limited to every 2 years (excluding frames) (2023/2024) N\$7 400 per Family (excluding frames)
	31.1 Eye Test	100%	Limited to one eye test per Beneficiary per annum Sub-limit 31
	31.2 Bi-focal / Multi-focal Lenses	100%	Limited to N\$1 000 per beneficiary every two years (2023/2024) (In addition to Sub-limit 31)
	31.3 Contact lenses/Spectacle lenses	100%	Sub-limit 31
	31.4 Frame	100% of cost	Limited to N\$1 400 per Beneficiary every 4 years (2021/2024)

CONTRIBUTION TABLE				
Income Band		Family Structure		
From	To	Member	Adult	Child
0	3 100	2,207	1,772	387
3 101	3 990	2,357	1,898	413
3 991	5 160	2,525	2,017	438
5 161	6 070	3,090	2,464	531
6 071	8 150	3,334	2,681	575
8 151	10 220	3,561	2,859	622
10 221	15 200	3,753	3,005	656
15 201	20 310	3,927	3,153	694
20 311	25 460	4,113	3,300	719
25 461	30 600	4,280	3,432	751
30 601	40 600	4,323	3,474	756
40 601	50 510	4,369	3,505	767
50 511+		4,422	3,530	781

CONTRIBUTION TABLES

- 1.1 PRINCIPAL MEMBER's SUBSCRIPTIONS shall be paid based on either income based on 70% of total cost to company or the age of the PRINCIPAL MEMBERS as shown above and below respectively. All Members of Recognised Institutions (including PENSIONERS) shall pay SUBSCRIPTIONS based on either income or age but not both.
- 1.2 The Member's portion and the Recognised Institution's portion of the subscriptions as show above is payable monthly in advance and shall be paid to the FUND by no later than the seventh day of the month in respect of which they are due.
- 1.3 If a PRINCIPAL MEMBER's SUBSCRIPTIONS are in arrears for more than 7 (seven) days, the FUND will impose interest at the current prime rate (according to the Fund's bankers) minus 5% per annum, on the subscription payable in the month thereafter for as long as the contribution is outstanding.
- 1.4 If a PRINCIPAL MEMBER's SUBSCRIPTIONS are in arrears for more than 30 (thirty) the BENEFITS of such PRINCIPAL MEMBER shall be suspended pending full payment of all arrear SUBSCRIPTIONS.
- 1.5 Membership to the Fund is mandatory for all Members of Recognised Institutions, except where an employee belongs to his or her spouse's medical aid fund.
- 1.6 PENSIONER CONTRIBUTIONS
Upon retirement, the member's premium will be calculated based on 60% of the member's last Total Cost to Company paid by the member's employer. In the case of members retired who are on age-based tables, contributions will continue to be on aged based contributions.



BANKMED PRIME | SUMMARY OF BENEFITS | Effective 01 JANUARY 2023

OVERALL ANNUAL BENEFIT (OVERALL ANNUAL LIMIT)			N\$1 040 000 per Beneficiary N\$1 560 000 per Family
CATEGORY A: HOSPITALISATION BENEFIT		% NAMAFA TARIFF	Pre-authorisation: 100% of tariff will be paid out Without Pre-authorisation: No benefit will be paid out except in the case of emergency hospital admissions and emergencies after-hours, weekends and public holidays. Sub-limits are not Pro-rated OVERALL ANNUAL LIMIT
Additional Hospital Benefit Cover: GP's and Specialists In-hospital services are paid up to a MAXIMUM of 200% of NAMAFA Tariff			
1.	Hospitalisation (Subject to Pre-authorisation)		Overall Annual Limit
1.1	Accommodation & Theatre	100%	Sub-limit 1
1.2	Accommodation other than a recognised hospital/medical institution (Subject to prior approval & Accommodation Expenses Reimbursement Policy)	100% of cost	Limited to N\$600 per day per Family (Applicable to RSA only) (Maximum of 2 days) Sub-limit 1
1.3	Blood Transfusions	100%	Sub-limit 1
1.4	Intensive and High Care - Maximum of 3 days then motivation	100%	
1.5	Medicine, fixed tariff procedures, hospital apparatus and To Take Out Medicine (7 days supply only)	100%	
1.6	Radiology & Pathology (in hospital) - Additional Hospital benefit Cover excluded	100%	
1.7	Physiotherapy - Additional Hospital Benefit Cover excluded		Sub-limit 1.7
1.7.1	Physiotherapy (in hospital)	100%	
1.7.2	Physiotherapy (post rehabilitation) - Additional benefit once the patient is out of hospital (Subject to prior approval)	100%	
2.	Specialised Radiology Procedures (in & out of hospital) - Additional Hospital Benefit Cover excluded - Referral from a medical specialist only (referral from GP acceptable in places where there is no medical specialist) (Subject to prior approval)		Overall Annual Limit
2.1	MRI & CT Scans	100%	Limited to N\$23 900 per Family Sub-limit 2
2.2	Nuclear Medicine	100%	Sub-limit 2
3.	General Practitioners and Specialists (in- hospital services, procedures & operations) - Additional Hospital Benefit Cover included	100%	Overall Annual Limit
4.	Internal Appliances & Materials (Subject to pre-authorisation)		Subject to Bankmed Namibia Internal Prosthesis Protocol Overall Annual Limit
4.1	Artificial Eyes	100% of cost	Limited to N\$6 250 per Beneficiary every 4 years (2020/2023) Sub-limit 4
4.2	Artificial Limb	100% of cost	Limited to N\$18 500 per Beneficiary every 4 years (2020/2023) Sub-limit 4
4.3	Other Internal Appliances & Materials	100% of cost	Sub-limit 4
5.	Dialysis (Subject to Case Management and MHC Guidelines)	100%	Overall Annual Limit
6.	Oncology (Subject to Case Management and MHC Guidelines)	100%	Limited to N\$600 000 per Beneficiary Overall Annual Limit
6.1	Consultations and Procedures Out-of-Hospital	100%	Sub-limit 6
6.2	MRI/CT Scans & Other Specialised Radiology Procedures In & Out-of-Hospital - Additional Hospital Benefit Cover excluded - Referral from medical specialist only	100%	
6.3	Radiation Oncology (Referral from medical specialist only)	100%	
6.4	Oncology Medication (Chemotherapy, Radiotherapy and Hormone Therapy)	100%	
6.5	Hospitalisation and Related Procedures In-Hospital	100%	Overall Annual Limit
7.	Organ Transplant - Including immunosuppressant drugs (Subject to Case Management and MHC Guidelines)	100%	Overall Annual Limit
8.	Private Nursing / Frail Care / Hospice (Subject to pre-authorisation)	100%	Limited to N\$23 800 per Family Overall Annual Limit
9.	Frail Care / Hospice (Subject to pre-authorisation)	100%	Sub-limit 8
10.	Psychiatric Treatment - hospitalisation (Subject to pre-authorisation) - Referral from Psychiatrist only (Referral by GP acceptable in places where there is no Psychiatrist)	100%	Limited to N\$20 800 per Family Overall Annual Limit

11.	Alcoholism / Drug Addiction (Subject to prior approval and MHC Guidelines)	100%	Sub-limit 10
12.	Refractive Surgery (all-inclusive) (Subject to pre-authorisation & MHC Guidelines)	100%	Limited to N\$23 000 per Beneficiary (once-off benefit) Overall Annual Limit
13.	Phakic Implants (lens Implant) (all-inclusive) (Subject to pre-authorisation)	100%	Sub-limit 12
14.	Reconstructive Surgery (Medical necessity only) (Subject to pre-authorisation and strict MHC Guidelines)	100%	Overall Annual Limit
	14.1 Consultation and Procedure	100%	Limited to N\$7 000 per Family Sub-limit 14
	14.2 Hospitalisation	100%	Limited to N\$7 500 per Family Sub-limit 14
15.	Dental Surgery - Additional Hospital Benefit Cover Excluded (Subject to pre-authorisation)		Overall Annual Limit
	15.1 Dental Implants – Hospitalisation	100%	Limited to N\$9 000 per Beneficiary Limited to N\$15 750 per Family Sub-limit 15
	15.2 Maxillo Facial & Oral Surgery (Non-Elective) All-inclusive (Including dental extractions for children less than 10 years old and wisdom teeth extractions)	100%	Limited to N\$90 750 per Family Sub-limit 15
	15.3 Maxillo-Facial & Oral Surgery (Elective) Hospitalisation	100%	Limited to N\$13 000 per Family Sub-limit 15
16.	Maternity		Overall Annual Limit
	16.1 Confinement (all-inclusive) (Limited to 1 confinement per year for dep. other than the spouse) (Subject to pre-authorisation)	100%	Sub-limit 16
	16.2 Ante-natal Consultation - Additional Hospital Benefit Cover excluded	100%	Limited to 12 consultations per Beneficiary (Pro-rated from date of joining) Sub-limit 16
	16.3 Ante-natal / Post-natal Classes & Education Additional Hospital Benefit Cover excluded	100%	Limited to 6 sessions per Beneficiary per pregnancy (Pro-rated from date of joining) Sub-limit 16
	16.4 Sonar Scans - Additional Hospital Benefit Cover excluded	100%	Limited to 3 scans per Beneficiary per pregnancy Sub-limit 16
	16.5 Tests for chromosomal and foetal abnormalities - Additional Hospital Benefit Cover excluded	100%	Sub-limit 16
	16.6 Midwifery Service - Additional Hospital Benefit Cover excluded	100%	
17.	Insertion of Intrauterine Device w/ hormone (All-inclusive) (Subject to Prior approval)	100%	Limited to N\$6 250 per Beneficiary (Pro-rated from date of joining) Overall Annual Limit
18.	Stomatotherapy (All-inclusive) (Subject to Prior approval)	100%	Limited to N\$22 800 per Family Overall Annual Limit
19.	Ambulance & Evacuation Services (Subject to prior approval)		Overall Annual Limit
	19.1 Emergency Ambulance & Flights (Subject to prior approval)	100%	Unlimited Benefit
	19.2 Ambulance/Inter-hospital transfer (Subject to prior approval)	100%	Sub-limit 19
	19.2.1 Metropolitan (In-Town)	100%	Limited to N\$3 550 per Beneficiary Sub-limit 19.2
	19.2.2 Long Distance (>100km)	100%	Sub-limit 19.2
	19.3 Other Transport Transport benefit for medical services available only in RSA (Subject to prior approval and Travel Expenses Re-imbursment Protocol)	60% of cost	Limited to N\$9 800 per Family Sub-limit 19
20.	International Medical Travel Insurance - Medical cover when travelling to foreign countries - For emergency cases only (not for elective surgery or procedure)	100% of cost	N\$10 000 000 per incident

CATEGORY B: DAY TO DAY BENEFITS		COVER % NAMA TARIFF	Sub-limits are pro-rated from date of joining, except Optical Benefit. OVERALL ANNUAL LIMIT
21.	General Practitioners & Specialists	100%	Limited to N\$8 500 per Beneficiary Limited to N\$16 500 per Family
	21.1 Consultations/Visits (out-of-hospital, including casualties)	100%	Sub-limit 21
	21.2 Procedures/Services (out-of-hospital)	100%	
	21.3 Materials and Disposable Items	100%	
	21.4 Radiology & Pathology (including Radiography, Sonography, Medical Laboratory Technology and Chemical Biochemistry) (Referral from Medical Practitioner)	100%	

22.	Dentistry		Limited to N\$8 750 per Beneficiary (excluding Orthodontics benefit) Limited to N\$11 000 per Family (excluding Orthodontics benefit)
	22.1 Basic Dentistry (Including Dental Therapy)	100%	Sub-limit 22
	22.2 Specialised / Advanced Dentistry	100%	
	22.3 Dental Implants		
	22.3.1 Consultation & Procedure (in-hospital)	100%	Limited to N\$11 500 per Family
	22.3.2 Consultation & Procedure (in-Practice)	150%	Limited to N\$15 000 per Family
	22.3.3 Implant Component	100%	Limited to N\$5 250 per Beneficiary Limited to N\$11 500 per Family Limited to N\$2 500 per dental implant component
	22.4 Maxillo-Facial and Oral Surgery (Elective) In-Hospital and In-Practice	100%	Sub-limit 22
22.5 Orthodontics	100%	Limited to N\$11 000 per Beneficiary (once-off benefit)	
23.	Medicine & Injections 23.1 Acute Medicine Paid at Maximum Namibia Medicine Price List on generics	80%	Limited to N\$16 350 per Beneficiary Limited to N\$30 900 per Family
	23.2 Chronic Medicine Paid at Maximum Namibia Medicine Price List on generics	80%	Limited to N\$9 100 per Beneficiary Limited to N\$16 150 per Family Sub-limit 23
	23.3 Chronic Medicine (Pensioners) Paid at Maximum Namibia Medicine Price List on generics	95%	
	23.4 Essential Vaccination/ Immunization (As per WHO Guidelines) Paid at Maximum Namibia Medicine Price List on generics	100%	Sub-limit 23
	23.5 Vitamins, Multivitamins, Minerals, homeopathic/natural/herbal medicine (Excluding supplementation during pregnancy and lactation, injections and haematinics. If prescribed, will be paid on the Acute Medicine benefit limit)	80%	Limited to N\$300 per Beneficiary Limited to N\$550 per Family Limited to N\$150 per script per beneficiary Sub-limit 23.1
	23.6 Self Medication Paid at Maximum Namibia Medicine Price List on generics	90%	Limited to N\$1 300 per Beneficiary Limited to N\$2 025 per Family Limited to N\$187 per script per beneficiary per day Sub-limit 23
24.	Specified Illness Conditions (Subject to pre-authorisation)		Limited to N\$34 550 per Beneficiary
	24.1 HIV/AIDS (As per National Guidelines for Antiretroviral Therapy) 24.1.1 Medicine Paid at Maximum Namibia Medicine Price List on generics	100%	Sub-limit 24
	24.1.2 First Full HIV Consultation / Assessment	N\$480	Once off benefit Sub-limit 24
	24.1.3 Consultation (after the first full HIV consultation / assessment)	N\$425	Limited to 6 consultations per Beneficiary Sub-limit 24
	24.1.4 HIV Counseling	100%	Limited to N\$1 350 per Beneficiary Sub-limit 24
	24.1.5 Pathology Tests (Subject to prior approval)	100%	Limited to N\$7 800 per Beneficiary Sub-limit 24
	24.1.6. HIV Resistance Test (Subject pre-authorisation)	100%	Sub-limit 24
	24.2 Prevention of Mother-to-Child Transmission (PMTCT)	100%	Sub-limit 24 As per National Guidelines
	24.3 Post-Exposure Prophylaxis (PEP)	100%	
	24.4 Pre-Exposure Prophylaxis (PrEP)	100%	
25.	Primary Health Care Services		Limited to N\$1 200 per Beneficiary Limited to N\$2 000 per Family
	25.1 Consultations & Procedures	100%	Sub-limit 25
	25.2 Medicine & Injections Paid at Maximum Namibia Medicine Price List on generics	80%	Sub-limit 23.1
26.	Auxiliary Services (Supplementary Services)		Limited to N\$10 000 per Beneficiary Limited to N\$12 500 per Family
	26.1 Art Therapy	100%	Sub-limit 26
	26.2 Audiology/Speech Therapy	100%	
	26.3 Biokinetics	100%	Limited to N\$3 900 per beneficiary Sub-limit 26
	26.4 Chinese Medicine 26.4.1 Consultation & Procedure 26.4.2 Medicine	100%	Limited to N\$1 000 per beneficiary Sub-limit 26
	26.5 Chiropractor 26.5.1 Consultation & Procedure 26.5.2 Medicine	100%	Sub-limit 26 Sub-limit 23.1

26.	Continued		
	26.6 Clinical Psychology / Psychological Counsellor	100%	Limited to N\$3 750 per beneficiary Sub-limit 26
	26.7 Clinical Technology	100%	Sub-limit 26
	26.8 Dietician	100%	
	26.9 Hearing Aid Acoustician	100%	
	26.10 Homeopathy/Naturopathy/ Phytotherapy 26.10.1 Consultation & Procedure 26.10.2 Medicine	100% 80%	Sub-limit 26 Sub-limit 23.1
	26.11 Occupational Therapy	100%	Sub-limit 26
	26.12 Orthotist/Prosthetist	100%	
	26.13 Physiotherapy	100%	Limited to N\$3 750 per beneficiary Sub-limit 26
	26.14 Podiatry/Chiropody	100%	Sub-limit 26
26.15 Social Worker (Motivation required)	100%	Limited to N\$3 750 per beneficiary Sub-limit 26	
27.	Wheelchair (Subject to prior approval) - Inclusive of repair & maintenance	100% of cost	Limited to N\$8 500 per Beneficiary every 4 years (2023/2026)
28.	Appliances (External) (Subject to MHC guidelines)	80%	Limited to N\$3 750 per family
29.	Hearing Aids Apparatus (Subject to prior approval) - Inclusive of repair & maintenance	100% of cost	Limited to N\$20 000 per Family every 3 years (2023/2025)
30.	Medical Devices for Diabetes Management (Subject to prior approval and MHC Guidelines)		
	30.1 Insulin Pumps	80% of cost	Limited to N\$35 000 per Beneficiary every 4 years (2020/2023)
	30.2 Continuous Glucose Monitoring System / Glucose Reader)	80% of cost	Limited to N\$17 500 per Beneficiary
	30.3 Diabetes Related Consumables	80% of cost	Limited to N\$33 500 Beneficiary
31.	Optical		N\$2 650 per Beneficiary limited to every 2 years (excluding frames) (2023/2024) N\$5 300 per Family (excluding frames)
	31.1 Eye Test	100%	Limited to one eye test per Beneficiary per annum Sub-limit 31
	31.2 Bi-focal / Multi-focal Lenses	100%	Limited to N\$700 per Beneficiary every 2 years (2023/2024) (In addition to Sub-Limit 31)
	31.3 Contact lenses/Spectacle lenses	100%	Sub-limit 31
	31.4 Frame	100% of cost	Limited to N\$1 200 per Beneficiary every 4 years (2021/2024)

CONTRIBUTION TABLE				
Income Band		Family Structure		
From	To	Member	Adult	Child
0	3 100	1,583	1,362	296
3 101	3 990	1,693	1,456	317
3 991	5 160	1,812	1,549	334
5 161	6 070	2,219	1,892	408
6 071	8 150	2,394	2,058	441
8 151	10 220	2,558	2,196	477
10 221	15 200	2,695	2,307	502
15 201	20 310	2,820	2,422	532
20 311	25 460	2,954	2,532	552
25 461	30 600	3,075	2,635	578
30 601	40 600	3,105	2,666	581
40 601	50 510	3,137	2,691	589
50 511+		3,176	2,712	600

CONTRIBUTION TABLES

- 1.1 PRINCIPAL MEMBER's SUBSCRIPTIONS shall be paid based on either income based on 70% of total cost to company or the age of the PRINCIPAL MEMBERS as shown above and below respectively. All Members of Recognised Institutions (including PENSIONERS) shall pay SUBSCRIPTIONS based on either income or age but not both.
- 1.2 The Member's portion and the Recognised Institution's portion of the subscriptions as show above is payable monthly in advance and shall be paid to the FUND by no later than the seventh day of the month in respect of which they are due.
- 1.3 If a PRINCIPAL MEMBER's SUBSCRIPTIONS are in arrears for more than 7 (seven) days, the FUND will impose interest at the current prime rate (according to the Fund's bankers) minus 5% per annum, on the subscription payable in the month thereafter for as long as the contribution is outstanding.
- 1.4 If a PRINCIPAL MEMBER's SUBSCRIPTIONS are in arrears for more than 30 (thirty) the BENEFITS of such PRINCIPAL MEMBER shall be suspended pending full payment of all arrear SUBSCRIPTIONS.
- 1.5 Membership to the Fund is mandatory for all Members of Recognised Institutions, except where an employee belongs to his or her spouse's medical aid fund.
- 1.6 PENSIONER CONTRIBUTIONS
Upon retirement, the member's premium will be calculated based on 60% of the member's last Total Cost to Company paid by the member's employer. In the case of members retired who are on age-based tables, contributions will continue to be on aged based contributions.



BANKMED CARE | SUMMARY OF BENEFITS | Effective 01 JANUARY 2023

OVERALL ANNUAL BENEFIT (OVERALL ANNUAL LIMIT)			N\$520 000 PER BENEFICIARY N\$780 000 PER FAMILY
CATEGORY A: HOSPITALISATION BENEFIT		% NAMAFA TARIFF	Pre-authorization: 100% of tariff will be paid out Without Pre-authorization: No benefit will be paid out except in the case of emergency hospital admissions and emergencies after-hours, weekends and public holidays. Sub-limits are not Pro-rated OVERALL ANNUAL LIMIT
Additional Hospital Benefit Cover: GP's and Specialists In-hospital services are paid up to a MAXIMUM of 200% of NAMAFA Tariff			
1.	Hospitalisation (Subject to Pre-authorization)		Overall Annual Limit
	1.1 Accommodation & Theatre	100%	Sub-limit 1
	1.2 Accommodation other than a recognised hospital/medical institution (Subject to prior approval & Accommodation Expenses Reimbursement Policy)		Limited to N\$600 per day per Family (Applicable to RSA only) (Maximum of 2 days) Sub-limit 1
	1.3 Blood Transfusions	100%	Sub-limit 1
	1.4 Intensive and High Care - Maximum of 3 days then motivation	100%	
	1.5 Medicine, fixed tariff procedures, hospital apparatus and To Take Out Medicine (7 days supply only)	100%	
	1.6 Radiology & Pathology (in hospital) - Additional Hospital benefit Cover excluded	100%	
	1.7 Physiotherapy - Additional Hospital Benefit Cover excluded		
	1.7.1 Physiotherapy (in hospital)	100%	Sub-limit 1.7
	1.7.2 Physiotherapy (post rehabilitation) - Additional benefit once the patient is out of hospital (Subject to prior approval)		No benefit
2.	Specialised Radiology Procedures (in & out of hospital) - Additional Hospital Benefit Cover excluded - Referral from a medical specialist only (referral from GP acceptable in places where there is no medical specialist) (Subject to prior approval)		Overall Annual Limit
	2.1 MRI & CT Scans	100%	Limited to N\$11 950 per Family Sub-limit 2
	2.2 Nuclear Medicine	100%	Sub-limit 2
3.	General Practitioners and Specialists (in- hospital services, procedures & operations) - Additional Hospital Benefit Cover included	100%	Overall Annual Limit
4.	Internal Appliances & Materials (Subject to pre-authorization)		Subject to Bankmed Namibia Internal Prosthesis Protocol Overall Annual Limit
	4.1 Artificial Eyes		No Benefit
	4.2 Artificial Limb		
	4.3 Other Internal Appliances & Materials	100% of cost	Sub-limit 4
5.	Dialysis (Subject to Case Management and MHC Guidelines)	100%	Overall Annual Limit
6.	Oncology (Subject to Case Management and MHC Guidelines)	100%	Limited to N\$400 000 per Beneficiary Overall Annual Limit
	6.1 Consultations and Procedures Out-of-Hospital	100%	Sub-limit 6
	6.2 MRI/CT Scans & Other Specialised Radiology Procedures In & Out-of-Hospital - Additional Hospital Benefit Cover excluded - Referral from medical specialist only	100%	
	6.3 Radiation Oncology (Referral from medical specialist only)	100%	
	6.4 Oncology Medication (Chemotherapy, Radiotherapy and Hormone Therapy)	100%	
	6.5 Hospitalisation and Related Procedures In-Hospital	100%	
7.	Organ Transplant - Including immunosuppressant drugs (Subject to Case Management and MHC Guidelines)	100%	Overall Annual Limit
8.	Private Nursing / Frail Care / Hospice (Subject to pre-authorization)	100%	Limited to N\$12 350 per Family Overall Annual Limit
9.	Frail Care / Hospice (Subject to pre-authorization)	100%	Sub-limit 8
10.	Psychiatric Treatment – hospitalisation (Subject to pre-authorization) - Referral from Psychiatrist only (Referral by GP acceptable in places where there is no Psychiatrist)	100%	Limited to N\$8 550 per Family Overall Annual Limit
11.	Alcoholism / Drug Addiction (Subject to prior approval and MHC Guidelines)	100%	Sub-limit 10

11.	Alcoholism / Drug Addiction (Subject to prior approval and MHC Guidelines)	100%	Sub-limit 10
12.	Refractive Surgery (all-inclusive) (Subject to pre-authorisation & MHC Guidelines)		No Benefit
13.	Phakic Implants (lens Implant) (all-inclusive) (Subject to pre-authorisation)		
14.	Reconstructive Surgery (Medical necessity only) (Subject to pre-authorisation and strict MHC Guidelines)	100%	
15.	Dental Surgery - Additional Hospital Benefit Cover Excluded (Subject to pre-authorisation)		Overall Annual Limit
	15.1 Dental Implants – Hospitalisation		No Benefit
	15.2 Maxillo Facial & Oral Surgery (Non-Elective) All-inclusive (Including dental extractions for children less than 10 years old and wisdom teeth extractions)	100%	Limited to N\$63 000 per Family (Benefit for Trauma only) Sub-limit 15
	15.3 Maxillo-Facial & Oral Surgery (Elective) All-inclusive		No benefit
16.	Maternity		Overall Annual Limit
	16.1 Confinement (all-inclusive) (Limited to 1 confinement per year for dep. other than the spouse) (Subject to pre-authorisation)	100%	Sub-limit 16
	16.2 Ante-natal Consultation - Additional Hospital Benefit Cover excluded	100%	Limited to 12 consultations per Beneficiary (Pro-rated from date of joining) Sub-limit 16
	16.3 Ante-natal / Post-natal Classes & Education Additional Hospital Benefit Cover excluded	100%	Limited to 6 sessions per Beneficiary per pregnancy (Pro-rated from date of joining) Sub-limit 16
	16.4 Sonar Scans - Additional Hospital Benefit Cover excluded	100%	Limited to 3 scans per Beneficiary per pregnancy Sub-limit 16
	16.5 Tests for chromosomal and foetal abnormalities - Additional Hospital Benefit Cover excluded	100%	Sub-limit 16
	16.6 Midwifery Service - Additional Hospital Benefit Cover excluded	100%	
17.	Insertion of Intrauterine Device w/ hormone (All-inclusive) (Subject to Prior approval)	100%	Limited to N\$6 250 per Beneficiary (Pro-rated from date of joining) Overall Annual Limit
18.	Stomalthrapy (All-inclusive) (Subject to Prior approval)		No Benefit
19.	Ambulance & Evacuation Services (Subject to prior approval)		Overall Annual Limit
	19.1 Emergency Ambulance & Flights (Subject to prior approval)	100%	Unlimited Benefit
	19.2 Ambulance/Inter-hospital transfer (Subject to prior approval)	100%	Sub-limit 19
	19.2.1 Metropolitan (In-Town)	100%	Limited to N\$2 250 per Beneficiary Sub-limit 19.2
	19.2.2 Long Distance (>100km)	100%	Sub-limit 19.2
	19.3 Other Transport Transport benefit for medical services available only in RSA (Subject to prior approval and Travel Expenses Re-imburement Protocol)	60% of cost	Limited to N\$9 800 per Family Sub-limit 19
20.	International Medical Travel Insurance - Medical cover when travelling to foreign countries - For emergency cases only (not for elective surgery or procedure)	100% of cost	N\$10 000 000 per incident
21.	Specified Illness Conditions (Subject to pre-authorisation)		Limited to N\$34 550 per Beneficiary Overall Annual Limit
	21.1 HIV/AIDS (As per National Guidelines for Antiretroviral Therapy)		
	21.1.1 Medicine - Paid at Maximum Namibia Medicine Price List on generics	100%	Sub-limit 21
	21.1.2 First Full HIV Consultation / Assessment	N\$480	Once off benefit Sub-limit 21
	21.1.3 Consultation (after the first full HIV consultation / assessment)	N\$425	Limited to 6 consultations per Beneficiary Sub-limit 21
	21.1.4 HIV Counselling	100%	Limited to N\$1 150 per Beneficiary Sub-limit 21
	21.1.5 Pathology Tests (Subject to prior approval)	100%	Limited to N\$7 800 per Beneficiary Sub-limit 21
	21.1.6 HIV Resistance Test (Subject to pre-authorisation)	100%	Sub-limit 21

	21.2 Prevention of Mother-to-Child Transmission (PMTCT)	100%	Sub-limit 21 As per National Guidelines
	21.3 Post-Exposure Prophylaxis (PEP)	100%	
	21.4 Pre-Exposure Prophylaxis (PrEP)	100%	

CATEGORY B: DAY TO DAY BENEFITS	COVER % NAMAF TARIFF	Overall Sub-Benefit Limit Limited to N\$13 500 per Beneficiary Limited to N\$27 000 per Family Conditions: Sub-limits are pro-rated from date of joining, Except Optical Benefit OVERALL ANNUAL LIMIT
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22.	General Practitioners & Specialists	100%	Limited to N\$4 750 per beneficiary Limited to N\$9 500 per Family
	21.1 Consultations/Visits (out-of-hospital, including casualties)	100%	Limited to 8 Consultations per Beneficiary Limited to 16 Consultations per Family
	21.2 Procedures/Services (out-of-hospital)	100%	Sub-limit 22
	21.3 Materials and Disposable Items	100%	
	21.4 Radiology & Pathology (including Radiography, Sonography, Medical Laboratory Technology and Chemical Biochemistry) (Referral from Medical Practitioner)	100%	
23.	Dentistry	100%	Limited to N\$1 300 per Beneficiary (excluding Orthodontics Benefit) Limited to N\$3 700 per Family (excluding Orthodontics)
	23.1 Basic Dentistry (Including Dental Therapy)	100%	Sub-limit 23
	23.2 Specialised / Advanced Dentistry	100%	
	23.3 Dental Implants (Consultation, Procedure & Implant Component)		No benefit
	22.4 Maxillo-Facial and Oral Surgery (Elective) In-Hospital and In-Practice	100%	
	22.5 Orthodontics	100%	
24.	Medicine & Injections 24.1 Acute Medicine Paid at Maximum Namibia Medicine Price List on generics	90%	Limited to N\$6 550 per Beneficiary Limited to N\$13 200 per Family
	24.2 Chronic Medicine Paid at Maximum Namibia Medicine Price List on generics	80%	
	24.3 Chronic Medicine (Pensioners) Paid at Maximum Namibia Medicine Price List on generics	95%	
	24.4 Essential Vaccination/ Immunization (As per WHO Guidelines) Paid at Maximum Namibia Medicine Price List on generics	100%	Sub-limit 24
	24.5 Vitamins, Multivitamins, Minerals, homeopathic/natural/herbal medicine (Excluding supplementation during pregnancy and lactation, injections and haematinics. If prescribed, will be paid on the Acute Medicine benefit limit)	90%	Limited to N\$120 per Beneficiary Limited to N\$230 per Family Sub-limit 24
	24.6 Self Medication Paid at Maximum Namibia Medicine Price List on generics	90%	Limited to N\$437 per Family Limited to N\$78 per script per beneficiary per day Sub-limit 24
25.	Primary Health Care Services		Limited to N\$1 200 per Beneficiary Limited to N\$2 000 per Family
	25.1 Consultations & Procedures	100%	Sub-limit 25
	25.2 Medicine & Injections Paid at Maximum Namibia Medicine Price List on generics	80%	Sub-limit 23.1

26.	Auxiliary Services (Supplementary Services)		Limited to N\$1 600 per Beneficiary Limited to N\$4 000 per Family
	26.1 Appliances (External) (Subject to MHC guidelines)	100% of cost	Sub-limit 26
	26.2 Art Therapy	100%	
	26.3 Audiology/Speech Therapy	100%	
	26.4 Biokinetics	100%	
	26.5 Chinese Medicine 26.4.1 Consultation & Procedure 26.4.2 Medicine	100% 80%	Limited to N\$500 per beneficiary Sub-limit 26 Sub-limit 24
	26.6 Chiropractor 26.6.1 Consultation & Procedure 26.6.2 Medicine	100% 90%	Sub-limit 26 Sub-limit 24
	26.7 Clinical Psychology / Psychological Counsellor	100%	Sub-limit 26
	26.8 Clinical Technology	100%	
	26.9 Dietician	100%	
	26.10 Hearing Aid Acoustician	100%	
	26.11 Homeopathy/naturopathy/Phytotherapy 26.11.1 Consultation & Procedure 26.11.2 Medicine	100% 90%	Sub-limit 26 Sub-limit 24
	26.12 Occupational Therapy	100%	Sub-limit 26
	26.13 Orthotist/Prosthetist	100%	
	26.14 Physiotherapy	100%	
	26.15 Podiatry/Chiropody	100%	
	26.16 Social Worker (Motivation required)	100%	
27.	Wheelchair (Subject to prior approval) Inclusive of repair & maintenance	100% of cost	Limited to N\$2 650 per beneficiary every 4 years (2023/2026)
28.	Hearing Aids Apparatus (Subject to prior approval) Inclusive of repair & maintenance	100% of cost	Limited to N\$15 000 per Family every 3 years (2023/2025)
29.	Medical Devices for Diabetes Management (Subject to prior approval and MHC Guidelines)		No Benefit
30.	Optical		N\$1 950 per Beneficiary limited to every 2 years (excluding frames) (2023/2022) Limited to N\$3 900 per Family (excluding frame) 4
	30.1 Eye Test	100%	Limited to one eye test per Beneficiary per annum Sub-limit 30
	31.2 Bi-focal / Multi-focal Lenses	100%	Sub-limit 30
	30.3 Contact lenses/Spectacle lenses	100%	
	30.4 Frame	100% of cost	Limited to N\$750 per Beneficiary every 4 years (2021/2024)

CONTRIBUTION TABLE				
Income Band		Family Structure		
From	To	Member	Adult	Child
0	3 100	699	558	140
3 101	3 990	699	558	140
3 991	5 160	699	558	140
5 161	6 070	1,460	1,167	292
6 071	8 150	1,671	1,341	335
8 151	10 220	1,840	1,479	368
10 221	15 200	1,941	1,560	389
15 201+		2,047	1,645	412

CONTRIBUTION TABLES

- 1.1 PRINCIPAL MEMBER's SUBSCRIPTIONS shall be paid based on either income based on 70% of total cost to company or the age of the PRINCIPAL MEMBERS as shown above and below respectively. All Members of Recognised Institutions (including PENSIONERS) shall pay SUBSCRIPTIONS based on either income or age but not both.
- 1.2 The Member's portion and the Recognised Institution's portion of the subscriptions as show above is payable monthly in advance and shall be paid to the FUND by no later than the seventh day of the month in respect of which they are due.
- 1.3 If a PRINCIPAL MEMBER's SUBSCRIPTIONS are in arrears for more than 7 (seven) days, the FUND will impose interest at the current prime rate (according to the Fund's bankers) minus 5% per annum, on the subscription payable in the month thereafter for as long as the contribution is outstanding.
- 1.4 If a PRINCIPAL MEMBER's SUBSCRIPTIONS are in arrears for more than 30 (thirty) the BENEFITS of such PRINCIPAL MEMBER shall be suspended pending full payment of all arrear SUBSCRIPTIONS.
- 1.5 Membership to the Fund is mandatory for all Members of Recognised Institutions, except where an employee belongs to his or her spouse's medical aid fund.
- 1.6 PENSIONER CONTRIBUTIONS
Upon retirement, the member's premium will be calculated based on 60% of the member's last Total Cost to Company paid by the member's employer. In the case of members retired who are on age-based tables, contributions will continue to be on aged based contributions.



BANKMED ESSENCE HOSPITAL | SUMMARY OF BENEFITS | Effective 01 JANUARY 2023

OVERALL ANNUAL BENEFIT (OVERALL ANNUAL LIMIT)			N\$1 600 000 per Beneficiary N\$2 400 000 per Family
CATEGORY A: HOSPITALISATION BENEFIT		% NAMAFA TARIFF	Pre-authorisation: 100% of tariff will be paid out Without Pre-authorisation: No benefit will be paid out except in the case of emergency hospital admissions and emergencies after-hours, weekends and public holidays. Sub-limits are not Pro-rated OVERALL ANNUAL LIMIT
Additional Hospital Benefit Cover: GP's and Specialists In-hospital services are paid up to a MAXIMUM of 200% of NAMAFA Tariff			
1.	Hospitalisation (Subject to Pre-authorisation)		Overall Annual Limit
	1.1 Accommodation & Theatre	100%	Sub-limit 1
	1.2 Accommodation other than a recognised hospital/medical institution	100% of cost	Limited to N\$600 per day per Family (Applicable to RSA only) (Maximum of 2 days) Sub-limit 1
	1.3 Blood Transfusions	100%	Sub-limit 1
	1.4 Intensive and High Care - Maximum of 3 days then motivation	100%	
	1.5 Medicine, fixed tariff procedures, hospital apparatus and To Take Out Medicine (7 days supply only)	100%	
	1.6 Radiology & Pathology (in hospital) - Additional Hospital benefit Cover excluded	100%	
	1.7 Physiotherapy - Additional Hospital Benefit Cover excluded		
	1.7.1 Physiotherapy (in hospital)	100%	Sub-limit 1.7
	1.7.2 Physiotherapy (post rehabilitation) - Additional benefit once the patient is out of hospital (Subject to prior approval)	100%	Limited to N\$6 000 per family (Benefit available within 3 months from hospital discharge) Sub-limit 1.7
2.	Specialised Radiology Procedures (in & out of hospital) - Additional Hospital Benefit Cover excluded - Referral from a medical specialist only (referral from GP acceptable in places where there is no medical specialist) (Subject to prior approval)		Overall Annual Limit
	2.1 MRI & CT Scans	100%	Limited to N\$35 000 per Family Sub-limit 2
	2.2 Nuclear Medicine	100%	Sub-limit 2
3.	General Practitioners and Specialists (in- hospital services, procedures & operations) - Additional Hospital Benefit Cover included	100%	Overall Annual Limit
4.	Internal Appliances & Materials (Subject to pre-authorisation)		Subject to Bankmed Namibia Internal Prosthesis Protocol Overall Annual Limit
	4.1 Artificial Eyes	100% of cost	Limited to N\$16 430 per Beneficiary every 4 years (2020/2023) Sub-limit 4
	4.2 Artificial Limb	100% of cost	Limited to N\$32 860 per Beneficiary every 4 years (2020/2023) Sub-limit 4
	4.3 Other Internal Appliances & Materials	100% of cost	Sub-limit 4
5.	Dialysis (Subject to Case Management and MHC Guidelines)	100%	Overall Annual Limit
6.	Oncology (Subject to Case Management and MHC Guidelines)	100%	Limited to N\$750 000 per Beneficiary Overall Annual Limit
	6.1 Consultations and Procedures Out-of-Hospital	100%	Sub-limit 6
	6.2 MRI/CT Scans & Other Specialised Radiology Procedures In & Out-of-Hospital - Additional Hospital Benefit Cover excluded - Referral from medical specialist only	100%	
	6.3 Radiation Oncology (Referral from medical specialist only)	100%	
	6.4 Oncology Medication (Chemotherapy, Radiotherapy and Hormone Therapy)	100%	
	6.5 Hospitalisation and Related Procedures In-Hospital	100%	
7.	Organ Transplant - Including immunosuppressant drugs (Subject to Case Management and MHC Guidelines)	100%	Overall Annual Limit
8.	Private Nursing / Frail Care / Hospice (Subject to pre-authorisation)	100%	Limited to N\$37 250 per Family Overall Annual Limit
9.	Frail Care / Hospice (Subject to pre-authorisation)	100%	Sub-limit 8
10.	Psychiatric Treatment – hospitalisation (Subject to pre-authorisation) - Referral from Psychiatrist only (Referral by GP acceptable in places where there is no Psychiatrist)	100%	Limited to N\$31 700 per Family Overall Annual Limit

11.	Alcoholism / Drug Addiction (Subject to prior approval and MHC Guidelines)	100%	Sub-limit 10
12.	Refractive Surgery (all-inclusive) (Subject to pre-authorization & MHC Guidelines)	100%	Limited to N\$35 000 per Beneficiary (once off benefit) Overall Annual Limit
13.	Phakic Implants (lens Implant) (all-inclusive) (Subject to pre-authorization)	100%	Sub-limit 12
14.	Reconstructive Surgery (Medical necessity only) (Subject to pre-authorization and strict MHC Guidelines)	100%	Overall Annual Limit
	14.1 Consultation and Procedure	100%	Limited to N\$14 300 per Family Sub-limit 14
	14.2 Hospitalisation	100%	Limited to N\$15 000 per Family Sub-limit 14
15.	Dental Surgery - Additional Hospital Benefit Cover Excluded (Subject to pre-authorization)		Overall Annual Limit
	15.1 Dental Implants – Hospitalisation	100%	Limited to N\$9 500 per Beneficiary Limited to N\$16 750 per Family Sub-limit 15
	15.2 Maxillo Facial & Oral Surgery (Non-Elective) All-inclusive (Including dental extractions for children less than 10 years old and wisdom teeth extractions)	100%	Limited to N\$133 250 per Family Sub-limit 15
	15.3 Maxillo-Facial & Oral Surgery (Elective) All inclusive		No benefit
16.	Maternity		Overall Annual Limit
	16.1 Confinement (all-inclusive) (Limited to 1 confinement per year for dep. other than the spouse) (Subject to pre-authorization)	100%	Sub-limit 16
	16.2 Ante-natal Consultation - Additional Hospital Benefit Cover excluded	100%	Limited to 12 consultations per Beneficiary (Pro-rated from date of joining) Sub-limit 16
	16.3 Ante-natal / Post-natal Classes & Education Additional Hospital Benefit Cover excluded	100%	Limited to 6 sessions per Beneficiary per pregnancy (Pro-rated from date of joining) Sub-limit 16
	16.4 Sonar Scans - Additional Hospital Benefit Cover excluded	100%	Limited to 3 scans per Beneficiary per pregnancy Sub-limit 16
	16.5 Tests for chromosomal and foetal abnormalities - Additional Hospital Benefit Cover excluded	100%	Sub-limit 16
	16.6 Midwifery Service - Additional Hospital Benefit Cover excluded	100%	
17.	Insertion of Intrauterine Device w/ hormone (All-inclusive) (Subject to Prior approval)	100%	Limited to N\$6 250 per Beneficiary (Pro-rated from date of joining) Overall Annual Limit
18.	Stomatherapy (All-inclusive) (Subject to Prior approval)	100%	Limited to N\$28 750 per Family Overall Annual Limit
19.	Ambulance & Evacuation Services (Subject to prior approval)		Overall Annual Limit
	19.1 Emergency Ambulance & Flights (Subject to prior approval)	100%	Unlimited Benefit
	19.2 Ambulance/Inter-hospital transfer (Subject to prior approval)		Sub-limit 19
	19.2.1 Metropolitan (In-Town)	100%	Limited to N\$5 500 per Beneficiary Sub-limit 19.2
	19.2.2 Long Distance (>100km)	100%	Sub-limit 19.2
	19.3 Other Transport Transport benefit for medical services available only in RSA (Subject to prior approval and Travel Expenses Re-imbursment Protocol)	60% of cost	Limited to N\$9 800 per Family Sub-limit 19
20.	International Medical Travel Insurance - Medical cover when travelling to foreign countries - For emergency cases only (not for elective surgery or procedure)	100% of cost	N\$10 000 000 per incident
21.	Specified Illness Conditions (Subject to pre-authorization)		Limited to N\$34 550 per Beneficiary Overall Annual Limit
	21.1 HIV/AIDS (As per National Guidelines for Antiretroviral Therapy)		Sub-limit 21
	21.1.1 Medicine - Paid at Maximum Namibia Medicine Price List on generics	100%	
	21.1.2 First Full HIV Consultation / Assessment	N\$480	Once off benefit Sub-limit 21
	21.1.3 Consultation (after the first full HIV consultation / assessment)	N\$425	Limited to 6 consultations per Beneficiary Sub-limit 21
	21.1.4 HIV Counselling	100%	Limited to N\$1 350 per Beneficiary Sub-limit 21
	21.1.5 Pathology Tests (Subject to prior approval)		Limited to N\$7 800 per beneficiary Sub-limit 21

21.	Continued		
	21.1.6 HIV Resistance Test (Subject pre-authorisation)	100%	Sub-limit 21
	21.2 Prevention of Mother-to-Child Transmission (PMTCT)	100%	Sub-limit 21 As per National Guidelines
	21.3 Post-Exposure Prophylaxis (PEP)	100%	
	21.4 Pre-Exposure Prophylaxis (PrEP)	100%	
22.	Wheelchair (Subject to prior approval) - Inclusive of repair & maintenance	100% of cost	Limited to N\$13 250 per Beneficiary every 4 years (2023/2025) Overall Annual Limit
23.	Appliances (External) (Subject to MHC guidelines)	80%	Limited to N\$4 500 per family Overall Annual Limit
24.	Hearing Aids Apparatus (Subject to prior approval) - Inclusive of repair & maintenance	100% of cost	Limited to N\$30 000 per Family every 3 years (2023/2025) Overall Annual Limit
25.	Medical Devices for Diabetes Management (Subject to prior approval and MHC Guidelines)		No benefit

CATEGORY B: DAY TO DAY POOLED BENEFITS		COVER % NAMAF TARIFF	N\$5 200 per Beneficiary per Annum N\$10 400 per Family per Annum OVERALL ANNUAL LIMIT Benefits are prorated from Date of Joining Ex Gratia not Applicable
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26.	General Practitioners & Specialists 26.1 Consultations/Visits 26.2 Procedures/Services 26.3 Materials and Disposable Items 26.4 Radiology & Pathology	100%	Paid from Day to Day Pooled Benefit
27.	Dentistry 27.1 Basic /Conservative Dentistry 27.2 Specialised / Advanced Dentistry	100%	
	27.3 Dental Implants 27.3.1 Consultation & Procedure 27.3.2 Implant Component		No benefit
	27.4 Maxillo-Facial and Oral Surgery (Elective) - In-Hospital and In-Practice		
	27.5 Orthodontics		
28.	Medicine & Injections 28.1 Acute Medicine 28.2 Chronic Medicine	80%	Paid from Day to Day Pooled Benefit Paid at Maximum Namibia Medicine Price List on generics
	28.3 Chronic Medicine (Pensioners)	95%	
	28.4 Self Medication	90%	
	28.5 Essential Vaccination / Immunization (As per WHO Guidelines Paid at Maximum Namibia Medicine Price List on generics	100%	
	28.6 Vitamins, Multivitamins, Minerals, homeopathic/natural/herbal medicine (Excluding supplementation during pregnancy and lactation, injections and haematinics. If prescribed, will be paid on the Acute Medicine benefit limit)	80%	
29.	Primary Health Care Services 29.1 Consultations	100%	Paid from Day to Day Pooled Benefit
	29.2 Medicine & Injections	80%	Paid from Day to Day Pooled Benefit Medicines paid at Maximum Namibia Medicine Price List on generics
30.	Auxiliary Services (Supplementary Services) 30.1 Art Therapy 30.2 Audiology/Speech Therapy 30.3 Biokineticist 30.4 Chinese Medicine 30.5 Chiropractor 30.5.1 Consultation & Procedure 30.5.2 Medicine 30.6 Clinical Psychology / Psychological Counsellor 30.7 Clinical Technology 30.8 Dietician 30.9 Hearing Aid Acoustician 30.10 Homeopathy/Naturopathy/ Phytotherapy 30.10.1 Consultation & Procedure 30.10.2 Medicine 30.11 Occupational Therapy 30.12 Orthotist/Prosthetist 30.13 Physiotherapy 30.14 Podiatry/Chiropody 30.15 Social Worker	100%	Paid from Day to Day Pooled Benefit

31.	Optical		<p>Limited to N\$1 950 per Beneficiary every 2 years (excluding frames) (2023/2024) Limited to N\$3 900 per Family (excluding frames) Paid from Day to Day Pooled Benefit</p>
	31.1 Eye Test	100%	Sub-limit 31
	31.2 Contact lenses/Spectacle lenses	100%	
	31.3 Bifocal / Multi-focal Lenses	100%	
	31.3 Frame	100% of cost	<p>Limited to N\$750 per Beneficiary every 4 years (2021/2024) Paid from Day to Day Pooled Benefit</p>

CONTRIBUTION TABLE				
Income Band		Family Structure		
From	To	Member	Adult	Child
0	3 100	1,554	1,250	290
3 101	3 990	1,651	1,329	305
3 991	5 160	1,758	1,405	322
5 161	6 070	2,142	1,708	391
6 071	8 150	2,313	1,859	425
8 151	10 220	2,463	1,978	453
10 221	15 200	2,591	2,077	483
15 201	20 310	2,712	2,176	514
20 311	25 460	2,835	2,274	536
25 461	30 600	2,948	2,363	560
30 601	40 600	2,974	2,389	562
40 601	50 510	3,004	2,409	571
50 511+		3,035	2,424	585

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- 1.2 The Member's portion and the Recognised Institution's portion of the subscriptions as show above is payable monthly in advance and shall be paid to the FUND by no later than the seventh day of the month in respect of which they are due.
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- 1.5 Membership to the Fund is mandatory for all Members of Recognised Institutions, except where an employee belongs to his or her spouse's medical aid fund.
- 1.6 PENSIONER CONTRIBUTIONS
Upon retirement, the member's premium will be calculated based on 60% of the member's last Total Cost to Company paid by the member's employer. In the case of members retired who are on age-based tables, contributions will continue to be on aged based contributions.

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