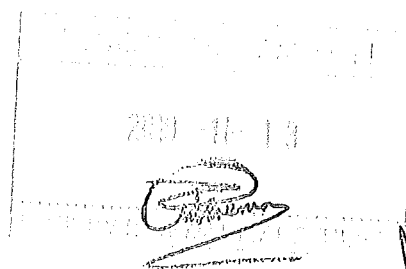


**ANNEXURE E MEDICINE BENEFIT IN RESPECT OF CHRONIC CONDITIONS**

Subject to prior application, the Scheme, in its entire discretion and upon such terms and conditions as it may determine, may authorise medication for the treatment of the following chronic illness conditions:

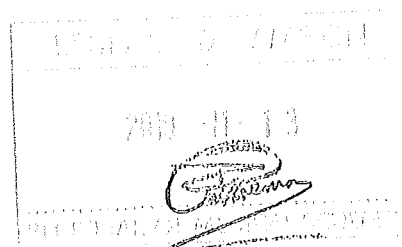
- i. Addison's disease
- ii. Asthma
- iii. Bipolar mood disorder
- iv. Bronchiectasis
- v. Cardiac failure
- vi. Cardiomyopathy
- vii. Chronic obstructive pulmonary disease (COPD)
- viii. Chronic renal disease
- ix. Coronary artery disease
- x. Crohn's disease
- xi. Diabetes insipidus
- xii. Diabetes mellitus type I and type II
- xiii. Dysrhythmia
- xiv. Epilepsy
- xv. Glaucoma
- xvi. Haemophilia A and B
- xvii. Hyperlipidaemia
- xviii. Hypertension
- xix. Hypothyroidism
- xx. Multiple sclerosis
- xxi. Parkinson's disease
- xxii. Rheumatoid arthritis
- xxiii. Schizophrenia
- xxiv. Systemic lupus erythematosus (SLE)
- xxv. Ulcerative colitis
- xxvi. HIV / AIDS
- xxvii. Depression
- xxviii. Attention deficit hyperactivity disorder (ADHD)



Handwritten signature and initials, possibly 'C. M. M.' and 'R. M.', written in black ink.

Benefits for these conditions (Prescribed Minimum Benefit (PMB) chronic conditions) will be subject to a formulary as amended from time to time. Subject to Annexures B and F.

1. Benefits under this section shall only be paid under the following circumstances and conditions:
  - 1.1 Suitable written motivation, acceptable to the Scheme, must be provided by the member's attending practitioner indicating that the condition:
    - 1.1.1 is a chronic disorder;
    - 1.1.2 requires regular and continuous medicinal treatment;
    - 1.1.3 the drug used must be life sustaining in the opinion of the case managers of the Scheme;
    - 1.1.4 the prognosis must indicate that the condition is likely to continue in its then existing chronic form for the foreseeable future.
  2. The Scheme shall have the right to authorise, in consultation with the attending practitioner, a suitable generic equivalent or alternative medication for the condition being treated.
  3. The Scheme shall have the right to call for subsequent reports whenever so deemed necessary.
  4. Failure to provide such reports within 30 days of such request may cause benefits under this section to cease except for PMB.
  5. Unless otherwise approved by the Scheme, prescribed medication shall be dispensed by a pharmacy nominated by the Scheme, at a preferred provider price subject to Annexure F.



*[Handwritten signatures and initials]*