

A man with a beard and glasses is looking at a smartphone. He has large headphones around his neck. The background is a blurred cityscape. The image is overlaid with teal and lime green geometric shapes.

flexicare

Powered by Discovery

Flexicare

Private primary healthcare

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Flexicare gives you peace of mind and certainty with smart affordable private day-to-day healthcare cover

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Why Flexicare?

Employees aspire to have access to good quality healthcare. However, medical scheme membership remains unaffordable for many individuals. Access to affordable private healthcare is therefore highly valued by employees and substantially contributes to maintaining a healthy workforce while positively impacting productivity and overall wellbeing.

With more than 25 years' experience, Discovery Health is a trusted healthcare partner in the South African and international healthcare environments. Over this time, we have developed industry-leading expertise in high-quality, affordable healthcare solutions. Our extensive healthcare provider networks include GPs, pharmacies, dentists and optometrists across the country and are supported by cutting-edge, real-time payment models with seamless claims processing.

Flexicare is offered by Auto and General and administered by Discovery Health. It was introduced to provide quality, affordable access to primary healthcare for employees who are unable to access medical scheme benefits.

Flexicare leverages the combined expertise of Discovery Health and Auto and General to provide a truly innovative, integrated healthcare product to complement the existing healthcare solutions available to employees.

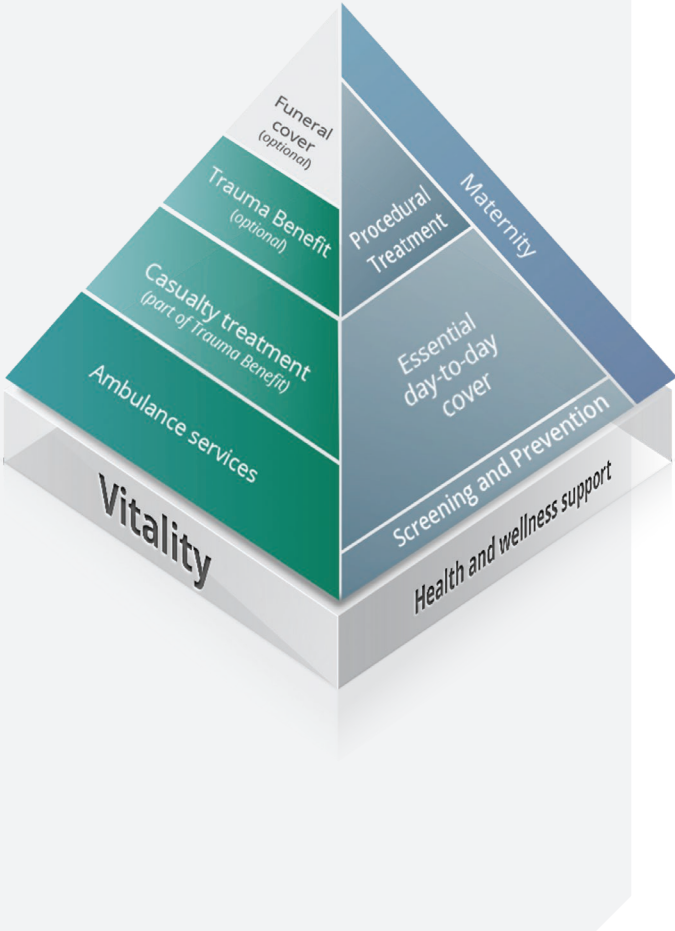
Flexicare offers your business employees access to essential day-to-day benefits through high-quality, private healthcare providers in the Discovery Health network.

Based on affordability and the healthcare needs of your business employees, you are able to increase the level of emergency cover offered through the optional Trauma and Funeral benefits.



Key features of Flexicare

Flexicare offers employees high-value benefits for:



PRIMARY HEALTHCARE

Essential cover for day-to-day primary healthcare services including:

- Unlimited doctor consultations
- Procedures performed in a doctor's rooms
- Maternity
- Over-the-counter medicine
- Chronic conditions and HIV treatment
- COVID-19 testing and treatment



SUPPLEMENTARY HEALTH AND WELLNESS

Additional benefits to support health and wellness for employees:

- Wellness programmes and screening
- Legal and financial support
- Discovery Prepaid Health



ACCIDENTS AND EMERGENCIES

Access to emergency ambulance services.

OPTIONAL TRAUMA BENEFIT

If optional Trauma benefit selected, cover for a wide range of emergency and trauma-related events. Cover includes casualty and in-hospital treatment.

OPTIONAL FUNERAL COVER

Access to optional funeral cover for employees and their families.

Business employees joining Flexicare are not subject to waiting periods and exclusions.
Pricing is tailored to your specific business.





Benefits on Flexicare


Day-to-day healthcare	
GP consultations	Unlimited cover for network doctor (GP) consultations at 100% of the Agreed Rate. You can substitute your network doctor visit with an online consultation, meaning doctor visits can either be face-to-face or online. Risk management protocols apply. You can change your allocated network doctor twice per year
Dentistry	Full mouth examination, preventive treatments, cleaning, scaling, polishing and fluoride treatment, treatment of pain and sepsis, infection control and extractions at a network dentist
Optometry (Eye care)	Cover for one eye test every year in the optometry network and one pair of glasses (no contact lenses) every 24 months
Pathology (Blood tests)	Covered at 100% of the Agreed Rate. Limited to approved pathology codes. Must be requested by a network doctor (GP) and performed by a network pathologist
Radiology (X-rays)	Covered at 100% of the Agreed Rate for black-and-white X-rays and soft-tissue ultrasounds. Must be requested by a network doctor (GP) and performed by a network radiologist
Maternity	Unlimited network GP consultations throughout the pregnancy Unlimited acute medicine in line with a defined medicine list, prescribed or dispensed by a network GP and collected from a network pharmacy Essential blood and screening tests through a network pathologist when referred by your network GP Two ultrasound scans for each pregnancy at a network provider (first ultrasound between week 10 and 14, and the second between week 20 and 24)
HIV management	Access to HIV treatment, counselling and education Cover for antiretroviral medicine, multivitamins and supportive medicine, blood tests, X-rays and post-exposure prophylaxis medicine All HIV-related queries and cases are treated with complete confidentiality
COVID-19 testing	For confirmed positive COVID-19 results: Cover for one positive COVID-19 test with access to out-of-hospital management and appropriate supportive treatment, including diagnostic testing, basic chest X-rays and prescribed medicine
Medicine	
Prescribed medicine	Cover for a defined list of medicine if a network GP prescribes it or gives it to you
Over-the-counter (OTC) medicine	Cover for a defined list of self-medicine, up to R105 per claim event – a maximum of R420 per member per year, limited to one claim event per quarter at a network pharmacy
Chronic medicine	Cover for chronic medicine on the defined medicine list for 27 chronic conditions (including HIV) at a network pharmacy
Screening and prevention	
Flu vaccine	Cover for a flu vaccine once a year from a network pharmacy
Wellness screening	Cover for one wellness screening per year at a network pharmacy. Screening includes blood pressure, blood glucose (blood sugar), cholesterol and body mass index (BMI). Cover also includes HIV counseling and testing at a network pharmacy
Emergency benefits	
Ambulance services	Access to emergency medical services through Netcare 911 ambulance services. Transportation to an appropriate state hospital. Limited to road transportation only You can call Netcare 911 on 0860 999 911 or Flexicare on 0860 44 47 79 for assistance





Employees will not need to pay for approved treatments received from a network provider. However, if employees use a provider that is not a part of the network, or if an unapproved treatment is provided, employees will be responsible for the costs.



Detailed benefits

Benefit name	Description	Limit
 Unlimited GP Consultations		
In-person consultations with a GP	<p>This benefit provides access to visit a network GP, and such visits will be covered at 100% of the Agreed Rate in the following instances:</p> <ul style="list-style-type: none"> You can substitute your visits to a network GP with online consultations You have cover for a defined list of medical procedures that can be done in a network GP's rooms, such as biopsies, wound care and stitching 	Unlimited
Online consultations	<p>This benefit provides access to an online consultation via the Discovery website. You can substitute your visit to network GP with an online consultation</p>	Unlimited
 Dentistry		
Dental care	The benefit is only covered when making use of a network dentist	
	Consultations	A single consultation for a full mouth examination for each member every year
	Preventive treatments include cleaning, scaling, polishing and fluoride treatment	Limited to one for each member every year
	Restorations and composite fillings	Pre-authorisation is required for four or more restorations (repairs to teeth), or five or more composite fillings per family every year
	Extractions	For a single tooth extraction a maximum of 1 per quadrant per 365 days Extraction of each additional tooth in the same quadrant, 1 per member per 365 days
	Oral radiography	Maximum quantity of 7 per year according to dental protocol
	Additional dentistry benefits	<ul style="list-style-type: none"> Diagnosis and treatment of pain and sepsis Infection control Oral hygiene advice on how to keep the mouth and teeth clean to prevent dental problems Local anaesthetic

Benefit name	Description	Limit
 Medicine		
Acute medicine (prescribed or short-term medicine)	<p>This benefit provides access to acute medicine. Cover is at 100% of the Agreed Rate if the following conditions are met:</p> <ul style="list-style-type: none"> ■ The medication must be on the medicine list (formulary) for acute medicine and will be available with no co-payment ■ The acute medicine must be provided by either a dispensing network GP or by a network pharmacy (if the prescribing GP is part of the network but does not dispense medicine) ■ The acute medicine will not be covered if it is prescribed by a non-network GP or if obtained from a non-network pharmacy 	Unlimited
Over-the-counter (OTC) medicine	<p>OTC medicine may only be obtained at a network pharmacy and on advice of the pharmacist. OTC medicine must be on the medicine list (formulary). Limited to R105 per quarter to a maximum of R420 for each member every year. Subject to the medicine list (formulary)</p>	<p>The OTC medicine benefit is limited to R105 in each quarter, up to a maximum of R420 for each member every year</p>
Flu vaccine	<p>The following members have cover for one flu vaccination every year</p>	<p>This benefit is limited to one flu vaccination</p>
Chronic medicine (long-term medicine)	<p>Chronic medicine will be covered in full (100% of Agreed Rate) if the prescribed medicine is on the medicine list (formulary) for chronic medicine You can get your chronic medicine at a network pharmacy</p>	<p>Chronic medicine is available for the following conditions:</p> <ul style="list-style-type: none"> ■ Addison's disease ■ Asthma ■ Bipolar mood disorder ■ Bronchiectasis ■ Cardiac failure ■ Cardiomyopathy ■ Chronic renal disease ■ COPD (chronic obstructive pulmonary disease) ■ Coronary artery disease ■ Crohn's disease ■ Diabetes insipidus ■ Diabetes mellitus type 1 ■ Diabetes mellitus type 2 ■ Dysrhythmias ■ Epilepsy ■ Glaucoma ■ Haemophilia ■ HIV (see details in section below) ■ Hyperlipidaemia (high cholesterol) ■ Hypertension (high blood pressure) ■ Hypothyroidism (underactive thyroid) ■ Multiple sclerosis ■ Parkinson's disease ■ Rheumatoid arthritis ■ Schizophrenia ■ Systemic lupus erythematosus ■ Ulcerative colitis

Benefit name	Description	Limit
 Blood tests		
Blood tests	<p>Pathology tests are limited to the list of approved pathology codes and are paid at 100% of the Agreed Rate</p> <p>The tests must be requested by a network doctor (GP) and the tests must be done by a pathology laboratory in the network – Ampath, Lancet, Pathcare. You have to take the pathology request form to the pathology lab</p>	This benefit is unlimited
 HIV care		
HIV Programme	<p>The HIV Programme is designed to optimise the health and wellbeing of HIV-positive patients. The HIV Management Programme includes:</p> <ul style="list-style-type: none"> ■ Voluntary counselling and testing ■ Antiretroviral therapy, prophylactic antibiotics and supplements ■ Treatment support and guidance ■ Pathology and monitoring (including CD4, viral load, liver enzymes, cholesterol, glucose, urine tests), according to protocols ■ Emergency post-exposure medicine is provided if the accidental exposure is brought to the attention of the network doctor (GP) within 72 hours 	Unlimited HIV medicine is covered from the date of registration of your chronic medicine by your network doctor (GP) or allocated doctor (GP)
 X-Rays		
X-rays	<p>The Radiology Benefit provides access to black-and-white X-rays and soft-tissue ultrasounds according to a list of the approved codes and are paid at 100% of the Agreed Rate</p> <p>A network doctor (GP) must request the radiology tests and you have to take the Radiology request form to the radiologist.</p>	This benefit is unlimited
 Eye care		
Eye care	<p>Eye examinations: The Optometry Benefit is subject to availability at a network optometrist only</p> <p>Spectacles and lenses: The Optometry Benefit is subject to availability at a network optometrist only</p> <p>Frames: The Optometry Benefit is subject to availability at a network optometrist only</p>	<p>Eye examinations are limited to one for each member every year and includes a visual evaluation, screening and a diagnosis</p> <p>Spectacles and lenses will be limited to one pair for each member in a 24-month period. The benefit includes standard, high-quality clear plastic lenses, single-vision lenses and bi-focal lenses. Qualifying norms will apply</p> <p>Frames will be limited to a single frame for each member in a 24-month period You have full cover for approved frames at a provider in the network. If you choose a frame that is not part of the approved selection, you will have to pay the extra cost</p>



Trauma Benefit

OPTIONAL TRAUMA BENEFIT, OFFERED BY DISCOVERY INSURE

TRAUMA EVENT COVER

To provide access to emergency private healthcare services for a broad range of traumatic events at any private hospital, you can enhance cover for your employees and their dependants through the Trauma Benefit.

Employees are covered for medical treatment relating to these events up to a defined limit. You can choose a limit of either R400 000 or R1 million per admission.

There are no hospital network restrictions and in the case of a traumatic event, emergency services will determine the most clinically appropriate course of action.

Following the event, Discovery will reach out to your employee and their family and offer two counselling sessions, either face-to-face or telephonically, with a trained trauma or support counsellor.

MEDICAL EVACUATION

If your employees experience a traumatic event, they have cover for medical evacuation services to the most clinically appropriate hospital facility.

STABILISATION AND TREATMENT WHEN ADMITTED TO HOSPITAL

Your employees also have cover for in-patient hospital stabilisation and treatment. Depending on the option you choose, they are covered up to R400 000 or R1 million per admission for hospital and related accounts.

If treatment costs more, the employee will need to pay for amounts over their limit. If the hospital and related accounts reach the Trauma Benefit cover limit, your employees will be transferred to a state facility or discharged if stabilised.

WE COVER TREATMENT FOR THE FOLLOWING TRAUMA CONDITIONS

- Burns
- Head injuries, chest injuries or severe fractures as a result of a fall
- Loss of an arm, hand, leg or foot
- Near-drowning
- Poisoning or a serious allergic reaction that may cause death
- Injuries resulting from a crime, sexual assault, a car accident or an injury at work



Funeral cover

OPTIONAL FUNERAL BENEFIT OFFERED BY DISCOVERY GROUP RISK (UNDERWRITTEN BY DISCOVERY LIFE)

Discovery Life provides your employees with funeral cover. This funeral cover provides up to R5 000 for the employee, up to three spouses, and five children younger than 21 years.

We only cover employees and dependants who are younger than 70 years. The dependants must be active on Flexicare.

Family funeral benefit amount

Main member	R5 000
Spouse	R5 000
Child aged 21 and older	R5 000
Child aged 15 to 20 years	R5 000
Child aged 6 to 14 years	R2 500
Newborn to child aged 5 years	R1 500
Stillborn (death of foetus after 26 weeks)	R625

*Child dependants over the age of 21 do not have access to funeral cover unless they are a full-time student under the age of 24 or incapacitated and unable to maintain themselves due to a disability. Benefit terms and conditions apply.



Employee support on Flexicare

SUPPLEMENTARY HEALTH AND WELLNESS SUPPORT OFFERED BY DISCOVERY HEALTH



WELLNESS EXPERIENCE

DISCOVERY WELLNESS EXPERIENCE

When an employer chooses to provide Flexicare to their employees, these employees have access to the Discovery Wellness Experience, which provides a holistic set of wellness screenings, including BMI, blood pressure, cholesterol, blood glucose and HIV testing. The Discovery Wellness Experience also includes a lifestyle and wellness assessment, followed by a one-on-one session with a wellness specialist.

Employers need to have a minimum of 30 employees per employer site for a Discovery Wellness Experience, which is available once a year. Visit www.discovery.co.za to book a Wellness Experience.



EMPLOYEE SUPPORT

Flexicare members, who belong to compulsory employers and voluntary employers, with over 250 employees, have access to benefits offered through Healthy Company, Discovery's employee assistance programme and wellness solution.

FINANCIAL WELLBEING

- Debt counselling
- Credit reports
- Budget settlement plans
- Insurance reviews

LEGAL SUPPORT

- Legal advice
- Tailored document drafting (*last will and testament, property sale and lease, nuptial contracts, title deeds, etc*)
- Attorney consultations

VITALITY

Your employees have access to Discovery Vitality, the world's leading science-based behaviour change programme that reduces the cost of healthy living and rewards and encourages members to make healthy choices.

Discovery Wellness Support and Healthy Company are offered by Discovery Health (Pty) Ltd, registration number: 1997/013480/07. An authorised financial services provider and administrator of medical schemes. 1 Discovery Place, Sandton, 2196 | www.discovery.co.za | Discovery Vitality (Proprietary) Limited, registration number: 1999/007736/07. Terms, conditions and limits apply.



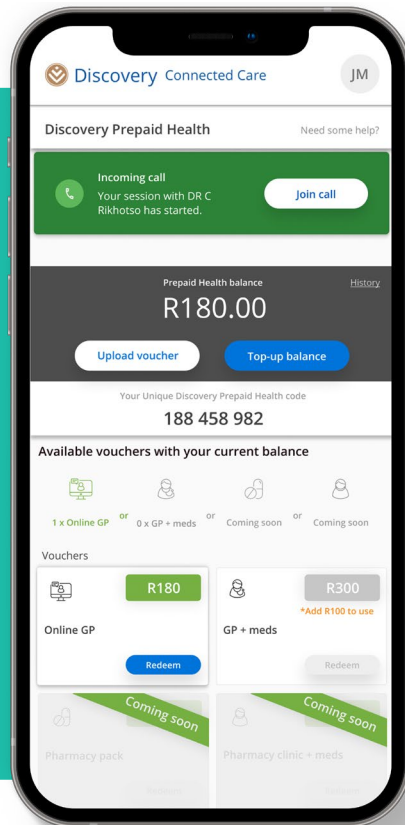
Employee support on Flexicare

SUPPLEMENTARY HEALTH AND WELLNESS SUPPORT

DISCOVERY PREPAID HEALTH

Discovery Health has used its healthcare funding expertise and digital capabilities to create Discovery Prepaid Health, a unique product that provides access to primary healthcare on a prepaid basis that is below the current pay-as-you-go rates.

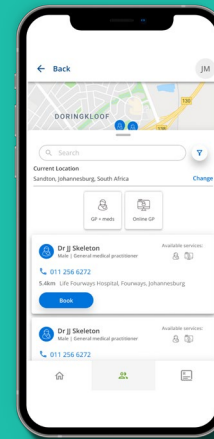
Discovery Prepaid Health is a simple and intuitive digital vouchering solution for purchasing and sharing a variety of accessible healthcare services at a significantly discounted rate, supported by a wide distribution network and a free-to-use digital platform. By using the latest digital technology, Discovery Health is able to ensure simplified and minimised associated mobile data costs.



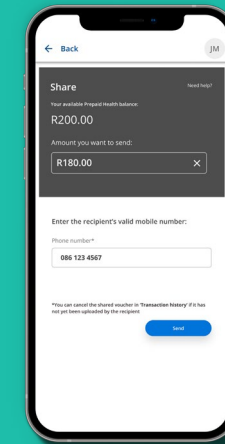
Flexicare members, who belong to compulsory employers and voluntary employers, with over 250 employees, will receive a R180 Prepaid Health voucher.

Discovery Prepaid Health offers your employees simple and seamless functionality to access private healthcare remotely for themselves, their friends or family.

Cover includes a virtual consultation with a private healthcare provider on the Discovery Prepaid platform.



Use the voucher for a virtual consultation with a private healthcare provider available on the app.



Share the prepaid health voucher with a friend or family member that needs access to healthcare.



Important information

EXTENDING COVER TO DEPENDANTS

- Your employees can add their spouse(s) and dependants to Flexicare.
- When applying, your employee will need to provide the names and ID numbers of their dependants to be added to the policy.
- If dependants are not added to the policy at the same time as the employee, they need to join within 60 days of the employer group cover start date. After that, a three-month general waiting period will be applied. This means that a dependant cannot claim for any healthcare services for three months from the day they join Flexicare.
- Newborns may join free of underwriting if they are added to the policy within 90 days from birth.
- Employees or dependants who have a voluntary break in cover of more than 30 days will have a three-month general waiting period when rejoining.
- There is no limit to the number of children that will be allowed on the policy. Each child will be charged for separately and is eligible to remain on Flexicare if financially dependent on the employee. Child dependants who turn 21 will be charged adult rates from the month after their birthday.

ELIGIBILITY

You need a minimum of 10 employees to be eligible for Flexicare. Employee eligibility is defined in line with your recruitment criteria. You also have the option to determine the compulsory or voluntary nature of Flexicare membership. Employees and their dependants cannot be members of a medical scheme and have a Flexicare product at the same time.



Contact us

NEW BUSINESS TEAM



QUOTATION LETTERS AND QUERIES

quotationrequests_health@discovery.co.za



CONTRACTS AND GENERAL ONBOARDING QUERIES

groupapplication@discovery.co.za



WHATSAPP

Add us on 0860 44 47 79 and get in touch whenever you need information or have questions on Flexicare.



CALL CENTRE

0860 44 47 79



WEBSITE

www.discovery.co.za

SERVICING TEAM



GENERAL QUERIES

flexicare@discovery.co.za



ESCALATIONS

flexicareescalations@discovery.co.za



BILLING SERVICES

flexicareadmin@discovery.co.za





Underwritten by
auto general

Flexicare is not a medical scheme. The cover is not the same as that of a medical scheme and is not intended to be a substitute for medical scheme membership. Flexicare is administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07 an authorised financial services provider and underwritten by Auto & General Insurance Company Limited, registration number 1973/016880/06, an authorised non-life insurer and financial services provider. Terms, conditions and limits apply.

Discovery Vitality (Proprietary) Limited, registration number: 1999/007736/07. Terms, conditions and limits apply.

The Trauma Benefit is a non-life insurance policy, underwritten by Discovery Insure Ltd, registration number 2009/011882/06, a licensed non-life insurer and an authorised financial services provider. Flexicare is a separate non-life insurance policy and is not conditional on the purchase of a Trauma Benefit policy.

The Funeral Benefit is a life insurance policy, underwritten by Discovery Life Limited. Registration number 1966/003901/06, a licensed life insurer and an authorised financial services and registered credit provider, NCR Reg. No. NCRCP3555. Flexicare is a separate non-life insurance policy and is not conditional on the purchase of a Funeral Benefit policy.

