





ABOUT THIS GUIDE

This benefit guide gives an overview of your cover for diabetes and information on our Diabetes Care Programme.

Contact details for questions

If you have questions or need help with your medical scheme, you can contact us by:

Phone: 0860 444 439

■ Email: Members_DCP@ukznms.co.za





YOUR DIABETES CARE PROGRAMME

We understand that living with diabetes comes with many challenges and requires daily efforts to manage. Our Diabetes Care Programme brings together a team of health professionals to ensure you get high-quality coordinated healthcare and improved outcomes.

You also have access to various tools and extra benefits to monitor and manage your condition, as well as dedicated care navigators to help with all your diabetes-related needs.



CONTACT ONE OF YOUR CARE NAVIGATORS:

Call 0860 444 439 or email **Members_DCP@ukznms.co.za** if you have any questions.

Remember, if left untreated, diabetes may result in serious complications. We are here to help you navigate the journey.

HOW TO JOIN THE DIABETES CARE PROGRAMME

If you are registered on the Chronic Illness Benefit for diabetes, you automatically have access to the Diabetes Care Programme through your chosen Premier Plus GP.

If you are not yet registered, ask your doctor to help you get started.

CHECK IF YOUR DOCTOR IS ON OUR NETWORK

To check if your regular doctor is on our network, you can:

- Visit www.discovery.co.za
- Choose Find a healthcare provider on the Discovery app
- Call: 0860 444 439
- Email: Members_DCP@ukznms.co.za

YOUR DOCTOR WILL WORK WITH YOU TO

MANAGE YOUR CONDITION

Your Diabetes Care Programme is based on international and locally accepted clinical and lifestyle guidelines.

Through the programme, you and your doctor (who must be on our network) can:

- Agree on key goals
- Track your progress on a personalised dashboard on HealthID (a system for doctors)
- Generate your Diabetes Management Score to help identify which areas to focus on to stabilise your condition and improve your overall health.

If you visit a doctor who is not part of the Premier Plus Network for a chronic condition, you may have to pay part of the cost. Please make sure we always know who your network doctor is. Let us know if anything changes so we can update our records.

To update your doctor on our system:

- Call: 0860 444 439
- Email: Members DCP@ukznms.co.za





HOW TO ENGAGE YOUR CARE TEAM

YOU HAVE ACCESS TO THESE BENEFITS TO ENGAGE WITH YOUR DIABETES CARE TEAM:

Benefit	Number of consultations covered	What the provider helps you with
Eye screening	1 a year	Eye screening can be done at an optometrist or ophthalmologist.
Foot screening	1 a year	Managing the risk of foot infections and screening for neuropathy (nerve damage) and poor blood circulation.
Diabetes education	2 a year	Members have access to a diabetes educator to help them with lifestyle changes and self-management support.
Dietitian	2 a year	Advice about nutrition. To make sure that we pay this from the correct benefit, please ask your dietitian to claim, using the most appropriate code.
Biokineticist	1 a year	Advice about exercise, tailored to your needs. To make sure that we fund this from the correct benefit, please ask your biokineticist to include the CID-10 diagnosis code on the claim.

OTHER BENEFITS AND TOOLS

- Extra test strips: You can have extra blood glucose test strips each year, if needed. We will pay the full Scheme Rate for blood glucose test strips that are on our medicine list (formulary). Blood glucose test strips that are not on our list will be funded up to the monthly Chronic Drug Amount that applies on your specific plan.
- Rewards for reaching personalised health targets: You could also qualify to get rewarded for achieving your personalised health targets – to do this, download the Discovery app and start Track Your Health for details.

COVER FOR CONTINUOUS GLUCOSE MONITORING SENSORS

Continuous glucose monitoring (CGM) automatically tracks blood glucose levels giving you the ability to test your glucose level at any time and better manage your condition. When appropriately prescribed by a doctor in our network, members with type 1 diabetes have cover for continuous glucose monitoring sensors up to a monthly cover amount. Benefits are available for children and adults, registered on the Chronic Illness Benefit (CIB) for type 1 diabetes. CGM sensors will be funded from your Scheme benefits up to a monthly limit depending on the age of the patient.

- Children up to age 18: Funded up to 100% of the monthly limit of R1 560
- **Adults:** Funded up to 100% of the monthly limit of R1 560





ABOUT SOME OF THE TERMS WE USE

There may be some terms we use that you are not familiar with. Here are the meanings of these terms:



Term	Description	
Care navigators	A dedicated team who will proactively help you to: Understand your diabetes-specific benefits Register on our digital tools Choose and engage with health professionals on the full-care team (podiatrist, dietitian and so on) Get the most out of the programme by using the benefits available.	
Chronic Illness Benefit	The Chronic Illness Benefit covers you for a defined list of chronic conditions, like diabetes.	
Designated service provider	General practitioners (GPs) Are part of the Discovery Care Coordination Network or the Premier Plus GP Network Have contracted with us to provide you with coordinated care for defined chronic conditions.	
Diabetes Care Programme	The care programme that opens up benefits to help you throughout your journey. This programme is administered by the Care Management Team	
Diabetes Care Programme basket of care	Includes: Doctor consultations for diabetes and other chronic conditions 1 foot (podiatry) screening a year 1 eye screening a year 1 biokineticist consultation a year 2 dietitian consultations a year Diabetes-related pathology (blood tests) Diabetes coaching and education	
	How these are funded We fund medicine, devices and consumables on our Chronic Illness Benefit treatment list (formulary).	

About some of the terms we use (continued)

Term	Description	
Emergency medical condition	An emergency medical condition, or emergency, is the sudden – and, at the time, unexpected – start of a health condition that requires immediate medical and surgical treatment.	
	If it is not treated, it could result in:	
	A serious impairment to bodily functions	
	A serious dysfunction of a bodily organ or body part A bight with a following.	
	 A high risk of death. An emergency does not necessarily mean you have to go to hospital. 	
	We may ask you for information to confirm the emergency.	
Diabetic retinopathy	Diabetic retinopathy is a common complication of diabetes mellitus that affects the eyes. It is caused by damage that develops at the back of the eye and it can cause vision loss and even blindness if is not managed. When diabetic retinopathy is detected early (often before the start of symptoms), the treatments can be very effective at preventing loss of vision.	
Health coaching	A coaching programme we offer to support you living with diabetes. Ask your doctor if they provide this service, alternatively find a Diabetes Educator on the Find a Provider tool on the website.	
HealthID	HealthID is an online digital platform that gives your doctor fast, up-to-date access to your health information. Once you have given your doctor consent, they can use HealthID to view your medical history, refer you to other healthcare professionals and check the results of any medical tests you have.	
ICD-10 diagnosis code	A clinical code that describes diseases, signs and symptoms, abnormal findings, complaints, social circumstances and external causes of injury or diseases, as classified by the World Health Organization (WHO).	
Premier Plus GP	A Premier Plus GP is a network GP who has contracted with us to provide you with coordinated care for defined chronic conditions.	
Prescribed Minimum Benefits	Under the Medical Schemes Act (No 131 of 1998) and its Regulations, all medical schemes must cover costs for the diagnosis, treatment and care of:	
(PMBs)	An emergency medical condition	
	A defined list of 271 diagnoses	
	A defined list of 27 chronic conditions.	
	These are called Prescribed Minimum Benefits. The Council for Medical Schemes has set the following rules for accessing Prescribed Minimum Penefits:	
	The Council for Medical Schemes has set the following rules for accessing Prescribed Minimum Benefits: Your medical condition must qualify for cover and be part of the defined list of Prescribed Minimum Benefit conditions.	
	 The treatment needed must match the treatments in the defined benefits. 	
	 You must use the designated service providers (DSPs) in our network. This does not apply in emergencies. However, even in an emergency, you may be transferred to a hospital or other service providers in our network once your condition has stabilised – if this is possible and in line with the rules of the scheme. 	
	If you do not use a designated service provider and it is not a medical emergency, we only pay up to 80% of the Scheme Rate. You have to pay the rest.	
	If your treatment doesn't meet the above criteria, we will pay according to your plan benefits.	
Scheme Rate	This is a rate we pay for healthcare services from hospitals, pharmacies, healthcare professionals and other providers of health services.	





CONTACT US IF YOU HAVE A COMPLAINT

If you have a complaint or issue with the UKZN Medical Scheme, please contact us so we can help you resolve it. You can reach us by:

Phone: 0860 11 33 22

■ Email: service@discovery.co.za

Or visit www.discovery.co.za to get help

We will give you a reference number. Please keep this handy in case you need to follow up or register a dispute (see below).

IF YOU ARE NOT SATISFIED WITH OUR RESPONSE, YOU CAN REGISTER A DISPUTE

If you're not satisfied with how we responded to your complaint and would like the Principal Officer of the UKZN Medical Scheme to investigate it, you may lodge a formal dispute.

Here's how:

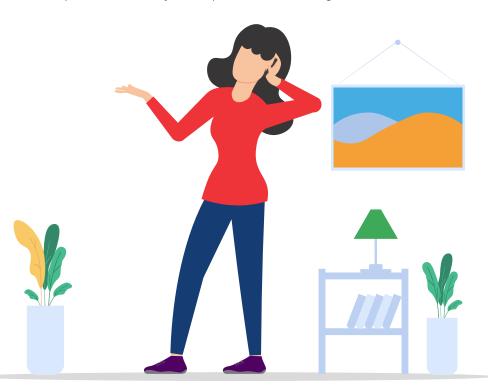
- 1. Complete the Scheme's Dispute Form.
- 2. Email the completed form to **service@discovery.co.za**. In your email, please include:
 - Any other information you want the Principal Officer to know
 - The reference number you received when you first contacted us.

YOU CAN CHALLENGE THE FINAL DECISION

If you have received a final decision from UKZN Medical Scheme and want to challenge it, you may lodge a formal dispute. To see how, visit the website **www.discovery.co.za**.

YOU MAY ALSO CONTACT THE COUNCIL FOR MEDICAL SCHEMES

UKZN Medical Scheme is regulated by the Council for Medical Schemes. You may contact the Council at any stage of the complaints process, but we encourage you to first follow the steps above to resolve your complaint before contacting the Council.





CONTACT DETAILS FOR THE COUNCIL FOR MEDICAL SCHEMES:

Phone: 0861 123 267

Email: complaints@medicalschemes.co.za

Website: www.medicalschemes.co.za

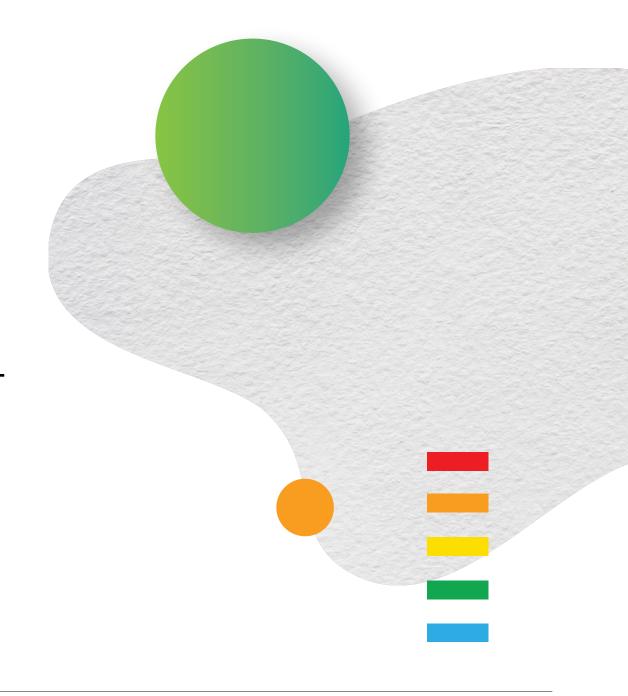
Postal address: Private Bag X34

Hatfield 0028

Physical address: Block A

Eco Glades 2 Office Park 420 Witch-Hazel Avenue Eco Park, Centurion

0157





University of KwaZulu-Natal Medical Scheme. Registration number 1520. Administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07, an authorised financial services provider.