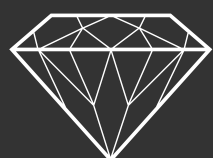




PENSIONERS



NAMDEB
Medical Aid Scheme

NEWSLETTER

TOPICS FOR DISCUSSION:

1. **2018 Benefit & Contribution Increases**
2. **Gym & Wellness Benefits**
3. **Overage Dependants**

2018
March

Disclaimer: The Namdeb Medical Aid Scheme is registered with Namfisa and is managed by the Board of Trustees, representative of the members of the Scheme in terms of the Rules of the Scheme as approved by Namfisa. Please take note that the new benefit and rule changes as indicated in the newsletter are subject to the approval of the Registrar of Medical Aid Funds (Namfisa).

BENEFIT & PREMIUM INCREASES EFFECTIVE 01 APRIL 2017

The performance of the Namdeb Medical Aid Scheme and its long term sustainability like any other business organization is influenced by normal factors such as medical inflation, demographic and ageing of the Scheme and lastly the claim patterns of the members. This sound financial position of the Scheme is critical to provide members with peace of mind and also to meet the regulatory requirements as set by the Registrar of Medical Schemes/Namfisa. The option for improving benefits is balanced with the impact on contributions and the affordability to members. To be able to ensure the long term sustainability of the Scheme, the Board of Trustees herewith announces an average premium increase of **12.7% on Option 1 & 5.7 % Increase on Option 2 and benefit changes effective 01 April 2018.**

The deductions of the new increase will commence at the end of March 2018. Attached on page 3-4 is the new amended benefit and contributions. The actuaries have once again conducted a comparison with other medical aids in the open market and the Namdeb Medical Aid Scheme still offers good value for money to its members. The benefits offered are superior to that of most other medical aids and the contributions very favorable.

1.1 New Benefit Rules Changes effective 01 April 2018

(i) Maternity Benefits: Increase of GP scheme tariff on normal deliveries and C-sections

Effective 01 January 2018, as part of the new benefit rules changes, the General Practitioners (GP) In Hospital maternity benefit scheme tariff on normal deliveries and C-sections has been increased from 100% to 200%.

Members are hereby reminded that the current rule of the 10% co-payment applicable on Elective Caesareans Sections performed due to non -emergency or medical conditions remain in place for 2018, and further reminded that all In-Hospital Treatment & Procedures need to be pre-authorized before admittance.

(ii) Contact Lenses Benefit

A new contact lenses benefit of N\$ 1000.00 for option 1 and N\$ 750.00 for option 2 pb, has been added to the optical benefit effective 01 April 2018. The new added benefit is solely for the purpose of contact lenses and cannot be utilized as an additional limit on frames or lenses benefit.

2. DISCONTINUATION OF GYM AND SELECTED WELLNESS BENEFITS

In terms of the Medical Aid Act no.23 of 1995, the main purpose of a medical aid fund is to provide financial or other assistance to members of the fund and their dependants in defraying expenditure incurred by them in connection with the rendering of any **medical service.**

- “medical service” means any health care treatment of any person, by a person registered in terms of any law, which treatment has as its object as the diagnosis, treatment or prevention of any physical or mental defect, illness or deficiency;
- the giving of advice in relation to any such defect, illness or deficiency;

As per Namfisa directive (PI/MAF/DIR/01/2017) dated 15th December 2017, no medical aid fund may pay for gym rebates and selected wellness benefits as from the 15th of December 2017, as this services do not constitute a medical services.

In order to comply with the directive, the Board of Trustees would like to notify all members that the Gym benefits has been discontinued under the Namdeb Medical Aid Scheme Benefit Offering effective 15 December 2017.

3. OVERAGEDEPENDANTS

In terms of the rules of the scheme, a member's child over 21 years, but not over the age of 25 years, is entitled to remain as a dependant of a member on the Scheme, under the following conditions.

- A full time student at a registered institution until such a student reaches the maximum age of 25.
- Dependant of the member owing to mental or physical defects or similar cause.

3.1 DOCUMENTATION TO BE SUBMITTED AS PROOF:

- Student from 21 – 25 years – proof of full time studies for 2018.
- Dependant with Mental or Physical disability: Doctors motivating letter

All members with dependants in the stipulated age category, will receive the following notifications from the scheme in February and March 2018, requesting them to submit the necessary documentation.

- Email & sms notification
- Formal letter via postage mail
- Formal letter via HR

NB: Members are urged to submit proof as highlighted under point 3.1, and be cautioned that if no proof is submitted before 31 March 2018, membership of dependants older than 21 years will be terminated on the Scheme.

NEW BENEFITS EFFECTIVE 01 APRIL 2018: OPTION 1

NO	Benefit	Current Benefits	New Benefits effective 01 April 2018
In – Hospital Benefits			
1.1	Overall Annual Limit	Pb: 1 000 000 Per Family: 1 800 000	Pb: 1 200 000 Per Family: 2 000 000
1.1	MRI & CT Scan	16,000 pb	17,120 pb
1.2	HIV Medication	25,000 pb	26,750 pb
1.3	Ambulance Services (Non-emergency)	M 2430 M1 3140 M2 3720 M3 4280	M 2600 M1 3360 M2 3980 M3 4580
1.4	Internal Surgical Prosthesis	49,830	Subject to protocols
1.5	In Hospital Alternative Services	16,870 Day sub limit 370	18,050 Day sub limit 400
1.6	Dental Implants	11,550 pb	12 360 pb
1.7	Chronic Medication	30,160 pb	32,270 pb

Day-To-Day Benefits			
2.1	Day to Day Overall Limit	27,500 pb Limited to 65, 000 per family	29,430 pb Limited to 69, 500 per family
2.2	General Practitioners & Specialist , including consultations and out patient procedures	15,440 pb	16,520 pb
	Ante Natal Consultations	6 pb	7pb
2.3	Dental Services Conservative Specialized Dentistry	10,610 pb limited to 22,470 per family	11,350 pb limited 24,040 per family
	Maxillo Facial	2,280 pb	2, 440 pb
2.4	Medicine & Injections	Acute Medication: 11,240 pb Self-medication: 5,810 pb Vitamins: 480 Limited to 35 pbper month	Acute Medication: 12,030 pb Self-medication: 6,220 pb Vitamins: 480 Limited to 100 pb per mo month
2.5	Optical Benefits	3430 pb Lenses subject to optical benefit frames limited to 750 subject to optical benefit Refractive Surgery -11,880	4285 pb Frame limited to 900 subject to optical benefit New Benefit: Contact Lenses 1000 pb Refractive Surgery-12 710
2.6	Radiology & Pathology <ul style="list-style-type: none"> • X-rays • Scopes • Diagnostics • Scans – ultra • Sounds • Angiography 	11,550 pb	12 360 pb
2.7	Paramedical Services	12,430 pb	13 300 pb
2.8	Psychology & Psychiatry	12,310 pb	13 170 pb
2.9	Medical Appliances	18,000 pb	19 260 pb

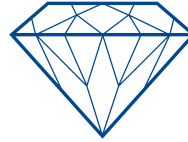
Explanation of Terms: PB: Per beneficiary

NEW BENEFITS EFFECTIVE 01 APRIL 2018: OPTION 2

NO	Benefit	2017 Benefits	Effective Changes effective 01 April 2018
1.1	Overall Annual Limit	Pb: 600 000 Per Family: 1200 000	Pb: 750 000 Per Family: 1 350 000
1.1	MRI & CT Scan	12,000 pb limited to Per Family: 24,000	12 ,840 pb limited to 25, 680 per family
1.2	Ambulance Services (Non-emergency)	M 1820 M1 2390 M2 2840 M3 3260	M 1950 M1 2560 M2 3040 M3 3490
	Internal Surgical Prosthesis	32,100 pb limited to 48,150 per family	Subject to Protocol
1.4	HIV Medication	25,000 pb	26 750 pb
1.5	In Hospital Alternative Services	16,870 Day sub limit 370	186,050 Day sub limit 400
1.6	Chronic Medication	6,960 pb	7 450 pb
1.7	In Hospital Dental Procedures	Pb: 5,890 Per Family: 11,770	Pb 6 300 Per family 12 590
1.8	Alternative Hospital	10,700 pb Day sublimit 360	11,450 pb Day sub limit 390

2. Day to Day Benefits

2.1	Day to Day Overall Limit	15,000 per beneficiary limited to 35,000 per family	16, 050 per beneficiary Limited to 37, 450 per Family
2.1	GP & Specialist <ul style="list-style-type: none"> Consultations including outpatients procedures Ante Natal Consultation 	5, 350 per beneficiary limited to 13,380 per family 6 pb	5 ,720 per beneficiary limited to 14, 320 per family 7 pb
2.2	Dental Services	6,960 per beneficiary limited to 13,910 per family Maxillo Facial: 1 820	7 450 per beneficiary limited to 14 880 per family Maxillo Facial : 1 950
2.3	Medicine & Injections	Acute Medication: 5,350 pb Self-medication: 2,140 pb Limited to 210.00 per script Vitamins: 320 Limited to N\$ 35.00 per month pb	5, 720 pb Self-Medication: 2 290 pb Limited to 220 per script Vitamins: 340 Limited to 100 pb per month
2.4	Optical Benefits	Lenses 2350 pb, frames limited to 720 Refractive Surgery -7490 pb	Lenses 4 010 pb Frame, 840 New Benefit: Contact Lenses: 750 pb Refractive Surgery -8 010 pb
2.5	Radiology & Pathology X-rays Scopes Scans	3750 pb	4 010 pb
2.6	Paramedical Services including Psychology & Psychiatry	6420 pb	6 870 pb
2.7	Medical Appliances	10500 pb	11 240 pb



NEW CONTRIBUTIONS EFFECTIVE 01 APRIL 2018 EXCLUDING E-MED & FUNERAL COVER:

(100% Contributions including Employer & Employee Portion)

PENSIONERS - OPTION 1

Income Band		M	M + 1	M + 2	M + 3	M + 4	M + 5
-	7,110	1,897	3,541	4,415	5,111	5,622	6,090
7,111	9,160	2,070	3,850	4,788	5,547	6,077	6,584
9,161	11,070	2,294	4,243	5,294	6,118	6,704	7,263
11,071	12,730	2,465	4,581	5,697	6,589	7,210	7,812
12,731	16,280	2,718	5,009	6,252	7,234	7,939	8,601
16,281	19,990	2,901	5,379	6,701	7,701	8,473	9,177
19,991	23,810	3,011	5,580	6,950	7,988	8,787	9,518
23,811	27,500	3,195	5,916	7,362	8,460	9,309	10,083
27,501	31,970	3,322	6,146	7,645	8,785	9,668	10,469
31,971	60,100	3,444	6,375	7,933	9,118	10,029	10,865
60,101	-	3,744	6,932	8,626	9,913	10,904	11,813

PENSIONERS - OPTION 2

Income Band		M	M + 1	M + 2	M + 3	M + 4	M + 5
-	7,110	1,168	2,178	2,717	3,145	3,459	3,747
7,111	9,160	1,310	2,437	3,031	3,511	3,847	4,168
9,161	11,070	1,492	2,760	3,443	3,979	4,362	4,724
11,071	12,730	1,670	3,100	3,856	4,460	4,881	5,288
12,731	16,280	1,912	3,523	4,398	5,087	5,583	6,048
16,281	19,990	2,041	3,784	4,713	5,415	5,959	6,455
19,991	23,810	2,197	4,072	5,072	5,828	6,412	6,944
23,811	27,500	2,387	4,420	5,501	6,322	6,956	7,535
27,501	31,970	2,540	4,702	5,848	6,719	7,393	8,008
31,971	60,100	2,665	4,933	6,138	7,053	7,759	8,404
60,101	-	2,962	5,484	6,825	7,843	8,627	9,345

INSURANCE COVERS (UNDERWRITTEN BY PROSPERITY LIFE)

NEW INCREASED PREMIUMS FOR E-MED & FUNERAL COVER

E-Med Emergency Evacuation Cover - N\$ 19.85
Funeral Cover - N\$ 15.00

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