



Renaissance Health  
Medical Aid Fund

ACCESS CARE PRODUCT BROCHURE 2012

**YOU HAVE ADDITIONAL COVER  
ON ACCESS CARE**

**Health Screening & Preventative Benefits** provide additional cover for a range of medical services

**Travel Assistance** provides assistance for travel expenses incurred to obtain medical treatment

**Trauma Recovery Extender Plan** - The Fund covers your day to day medical expenses for recovery after certain specified traumatic events from your Trauma benefits to make your day to day benefits last longer. Upon your doctor's motivation and approval.

You have an additional N\$ 100 000 per person cover for **HIV/AIDS Treatment**

The **SADC Emergency Benefit** provides cover for emergency evacuation and repatriation

Cover up to N\$ 10 000 000 per person for **International Medical Emergencies**

**Contribution Protector Benefit** is especially important if you, the principal member, have others who depend on your financial support. If you are unable to cover your monthly medical aid fund contributions upon your passing away, the benefit ensures a continuation of your contribution payments for 3 months.

## Your in hospital benefits - N\$ 500 000 per person

If you need to be hospitalised for a planned procedure or need emergency cover, the Access Care option offers cover in a private hospital up to N\$ 500 000 per person

The Fund covers you in a private hospital for emergency & planned hospital admissions subject to authorisation.

### Emergency Cover

In the event of an emergency you may be admitted to hospital and should call us within 48 hours or on the first working day. If you need medically equipped transport in the event of a medical emergency, call 081 924 for highly qualified emergency personnel who will send the most appropriate air or road emergency evacuation transport.

### Cover for planned admissions

Please call us 48 hours before you are admitted to confirm your benefits and admission.

### Overall limit

You have N\$ 500 000 per person on the Access Care option. Clinical guidelines, protocols and sub-limits apply to some medical services and procedures.

## Cover for medical professionals in hospital

The Fund has negotiated with the majority of specialists to guarantee that when you use contracted-in specialists, we pay them directly at our agreed tariff. In other words, when consulting a specialist who has signed a contract with the Fund you will be covered in full.

### Full cover for contracted-in specialists

You can benefit by using healthcare professionals participating in our direct payment agreements because we cover their approved procedures in full.

### You may have a co-payment if you use other specialists

If you are treated in hospital by a specialist who is not contracted in our payment agreements, we cover up to 180% of the NAMAF tariffs on the Access Care option.

### Medical professionals

We cover GPs and specialist services up to 180% of the NAMAF tariffs on the Access Care option.

We cover radiology and pathology up to 100% of the NAMAF tariffs.

## Cover for investigations in hospital

### MRI and CT scans

We cover your MRI and CT scans up to 100% of the NAMAF tariffs limited to N\$ 5 000 per person.

## Medical services with no sub-limits in hospital

Most of your in hospital medical services have no sub-limits. These include:

- Related healthcare sub-acute facilities & professionals. Subject to clinical guidelines.
- Accommodation
- Maternity
- Blood tests & x-rays
- Medication prescribed whilst hospitalised
- Specialist
- Organ transplant
- GPs
- MVA's (Subject to Fund rules)
- Trauma
- Oncology

## Limited medical services in hospital

Only the following in hospital medical services have an annual limit:

**Dentistry** defined specialised dental surgery

**Appliances** medical & surgical appliances in hospital incl. support stockings, knee & back braces etc.

**Internal Prosthesis** incl. knee & hip replacements, pacemakers etc.

**Ambulance Services** inter-hospital & non-emergency transportation

**Discharge Medication** prescribed medication on discharge

**Reconstructive Surgery** breast reductions & defined reconstructive surgery upon medical motivation & approval. Minimum 2 years membership & the benefit includes the full procedure

**Mental Health** incl. psychiatry & psychology

(Subject to 100% of NAMAF tariffs)

You have N\$ 7 000 per person

You have N\$ 1 250 per person

You have N\$ 30 000 per person

You have N\$ 5 000 per person

You have 7 days supply per event

You have N\$ 6 000 per person

You have 21 days per person

## Inclusive Benefits provides additional cover for a range of medical services

Early detection and prevention of diseases are crucial to your health. The Fund offers a range of medical services and financial assistance that protect you and help prevent and screen illnesses that would otherwise be overlooked.

For a full description of Inclusive Benefits refer to [www.renaissancehealth.com.na](http://www.renaissancehealth.com.na) or phone us at +264 61 299 9736.

\*Terms and Conditions apply

The Fund pays claims for Inclusive Benefits to make your day to day benefits last longer.

- **Health screening and preventative benefits** provide additional cover for a range of medical services i.e. immunisations, flu vaccines, dental examinations and health assessments etc.
- The **travel assistance benefit** provides up to N\$ 4 000 financial assistance per family for travel expenses incurred to obtain medical treatment which is not available in your town of residence in or outside Namibia.
- **Trauma recovery extender plan** - The Fund covers your day to day medical expenses for recovery after certain specified traumatic events from your Trauma benefits to make your day to day benefits last longer. Upon your doctor's motivation and approval.
- You have an additional N\$ 100 000 per person cover for **HIV/ AIDS treatment**.
- **The maternity programme** provides additional cover for antenatal visits, urine tests, scans, paediatricians and a Renaissance Health new baby welcome pack.
- **Disease management programmes** use a diagnostic evaluation of your claims to identify certain illnesses and provide relevant information to you to assist you to manage your condition(s) better.
- **Lifestyle benefits** reimburse members for participating at approved fitness and physical development facilities.
- A **24-hour emergency and health support line** is available, phone us at +264 61 299 9363 to look after you in times of need.
- **The SADC emergency benefit\*** provides cover for emergency evacuation and repatriation in Namibia and from SADC countries back to Namibia or South Africa when it is medically appropriate. We also provide a guaranteed direct admission at private hospitals in the event of a medical emergency when travelling or working outside Namibia. This includes assistance with the transportation of mortal remains from the place of death to the place of burial within Namibia.
- **International medical emergency\*** covers the risk for emergencies when you travel outside Namibia and overseas, up to N\$ 10 million per person.
- **The Contribution protector benefit** is especially important if you, the principal member, have others who depend on your financial support. If you are unable to cover your monthly medical aid fund contributions upon your passing away, the benefit ensures a continuation of your contribution payments for 3 months.

## We make your chronic illness benefits last longer (out of hospital)

### Your cover for chronic conditions

You have comprehensive cover for a list of chronic conditions. You have full cover for approved medicine on the Fund's preferred medicine list up to the Namibia Reference Price List as long as you have benefits available.

If you choose to use medicines that are not on the preferred medicine list, the result may be that your chronic medication benefits will be depleted sooner and non-preferred medicine will continue to attract the 15% levy with a minimum co-payment of N\$ 25 per item.

You have an amount of N\$ 3 700 available for each person on chronic medication and the choice to increase your limit on chronic medication benefits through our Benefit Builder options.

### Your cover for cancer, cardiac and diabetic treatment

The Fund covers your approved treatments for cancer, cardiac and insulin dependent diabetes from your trauma benefits without any sub-limit constraints. Subject to clinical guidelines.

The Chronic Illness benefit offers you comprehensive cover for chronic conditions. You also have the option of full cover by using your preferred medicine list or the choice of using any medicine which may result in depleting your benefits sooner and will attract levies.

You have the option to increase your limit on chronic medication benefits through our Benefit Builder options.

The Fund's cancer, cardiac and diabetic programmes provide additional cover.

## Cover for day to day medical expenses (out of hospital)

We have networks of GPs, dentists and optometrists all over Namibia to make sure that you have access to quality day to day medical services. Please note that this list of GPs, dentists and optometrists is subject to change. Please phone us for the latest list. Tel: +264 61 299 9736, [www.renaissancehealth.com.na](http://www.renaissancehealth.com.na)

### The following services have an annual limit:

(Subject to 100% of NAMAF tariffs)

#### Professional Services

- GPs & specialists services on referral by GP only
- Primary health clinic & pharmacy initiated therapy
- In-rooms procedures & medical services
- Pathology and x-rays specialised radiology subject to approval

#### Medication & Injections subject to Namibia Reference Price List

- Prescribed medication 15% levy min co-pay of N\$25
- Homeopathic medication 15% levy min co-pay of N\$25
- Materials & injections
- Self medication "OTC"

#### Dentistry Services

- Specialised & conservative dentistry

#### Essential Services

- Physiotherapy, dieticians, clinical psychology, occupational & speech therapy

#### Auxiliary Services

- Homeopathy, biokinetics & chiropractors

#### Optical Services

- Eye tests
- Lenses and contact lenses
- Frames

#### Radial Keratotomy & Cataracts subject to clinical guidelines & approval

- Removal of radial keratotomy & cataracts

#### Appliances & Prosthesis subject to clinical guidelines & approval

- External medical & surgical appliances incl. hearing aids, glucometers, blood pressure monitors, wheelchairs etc.
- External prosthesis incl. artificial arms & legs etc.

#### Alcohol & Drug Rehabilitation subject to clinical guidelines & approval

- You have a once in a lifetime opportunity to make use of the alcohol & drug rehabilitation therapy benefit

#### Alternative Services subject to clinical guidelines & approval

- Physical rehabilitation, private nursing, hospice & step-down facilities

Member	Member+1	Member+2	Member+3	Member+4	Member+5+
N\$ 7 700	N\$ 9 900	N\$ 12 100	N\$ 14 300	N\$ 16 500	N\$ 18 700

You have 8 consultations per person

You have 8 consultations per person

Included in professional services annual threshold levels

Included in professional services annual threshold levels

You have N\$ 3 600 per person

Included in medication and injections annual threshold level

Included in medication and injections annual threshold level

Included in medication and injections annual threshold level

You have N\$ 1 000 per person

You have N\$ 3 600 per person

Included in dentistry services annual threshold level

You have N\$ 3 500 per person

Included in essential services annual threshold level

You have N\$ 1 500 per person

Included in auxiliary services annual threshold level

You have N\$ 1 800 per person every 2 years

You have 1 test per person

Included in optical services annual threshold level

You have N\$ 600 per person

You have N\$ 6 000 per person

Included in radial keratotomy & cataracts annual threshold level

You have N\$ 11 500 per person

You have N\$ 4 600 per person

You have N\$ 6 900 per person

You have N\$ 10 000 per person

Included in alcohol & drug rehabilitation annual threshold level

You have N\$ 10 000 per person

Included in alternative services annual threshold level

We pro-rate these benefits according to when you join the medical aid fund.

## Extending your day to day cover (out of hospital)

### Your Benefit Builder options

The Fund acknowledges that each individual person's healthcare needs are unique and your health status may change at any time during a year. That is why we offer you a menu of specific day to day benefits which you may buy to extend your day to day cover.

### Benefit Builder options include:

- Consultations
- Chronic medication
- Dental services
- Professional services
- Auxiliary & essential services
- Prescribed medication
- Optical services
- Alternative services
- Appliances & prosthesis services

For a full description of Benefit Builders refer to [www.renaissancehealth.com.na](http://www.renaissancehealth.com.na) or phone us at +264 61 299 9736.

Your day to day cover can be further extended through the Benefit Builder options which allow you to selectively increase specific benefits and tailor make a unique package.

Disclaimer: The Renaissance Health Medical Aid Fund is registered with NAMFISA and is managed by the Board of Trustees, representative of the members of the Fund and in terms of the rules of the Fund as approved by NAMFISA. The guide is an extract from the rules and benefits as a reference guideline only and should there be any discrepancies, misprint and or interpretation thereof, the rules as registered with NAMFISA will prevail. The Renaissance Health Medical Aid Fund Rules and Benefits are subject to the approval of the Registrar of Medical Aid Funds.



Renaissance Health  
Medical Aid Fund

## ACCESS CARE Contributions 2012

### ACCESS CARE MONTHLY CONTRIBUTION

Income	Member	Member +1	Member +2	Member +3	Member +4	Member +5
0 - 2000	655	1,075	1,265	1,460	1,650	1,650
2001 - 3000	760	1,265	1,460	1,650	1,845	1,845
3001 - 4500	880	1,485	1,675	1,870	2,065	2,065
4501 - 6000	1,030	1,745	1,940	2,135	2,325	2,325
6001 - 7500	1,165	2,010	2,200	2,395	2,590	2,590
7501+	1,300	2,215	2,405	2,595	2,790	2,790

\* We count a maximum of five dependants when we work out the monthly contribution.

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### BENEFIT BUILDERS

#### Professional Services

Cover Benefit	Premium pm	
Standard	N\$5 000	N\$ 315 Per Person
Executive	N\$10 000	N\$ 580 Per Person

#### Consultations

Cover Benefit	Premium pm	
Standard	12 Consultations	N\$ 170 Per Person
Executive	16 Consultations	N\$ 195 Per Person

#### Acute Medication

Cover Benefit	Premium pm	
Standard	N\$ 4 500	N\$ 325 Per Person
Executive	N\$ 6 500	N\$ 385 Per Person

#### Chronic Medication

Cover Benefit	Premium pm	
Basic	N\$ 6 000	N\$ 385 Per Person
Standard	N\$12 000	N\$ 610 Per Person
Executive	N\$24 000	N\$ 810 Per Person

#### Dental Services

Cover Benefit	Premium pm	
Standard	N\$ 8 000	N\$ 580 Per Person
Executive	N\$ 12 000	N\$ 870 Per Person

#### Auxiliary & Essential Services

Cover Benefit	Premium pm	
Standard	N\$ 4 500	N\$ 300 Per Person
Executive	N\$ 6 500	N\$ 355 Per Person

#### Optical Services

Cover Benefit	Premium pm	
Standard	N\$ 2 300	N\$ 190 per person
* Bi-focal and tri-focal lenses @ 1.5 times the standard benefit		
Executive	N\$ 4 700	N\$ 390 per person
* You may qualify for a laser eye surgery benefit of N\$ 8000 per person, subject to ophthalmic scales.		

#### Appliances & Prosthesis

Cover Benefit	Premium pm	
Standard	N\$ 5 000	N\$ 290 Per Person
Executive	N\$ 10 000	N\$ 580 Per Person

#### Alternative Services

Cover Benefit	Premium pm	
Standard	N\$ 10 000	N\$ 580 Per Person
Executive	N\$ 15 000	N\$ 870 Per Person

#### General Rules applicable to Benefit Builders:

- \* If you buy down to Access Care at the beginning of the year then you are only allowed to buy Benefit Builders until 31 March of that year.
- \* If you remained on the same product or bought up at the beginning of the year then you are allowed to buy Benefit Builders at any time of that year.
- \* We pro-rate Benefit Builders according to when you buy the options during the course of the year.

## PROSPERITY HEALTH BRANCHES

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Administered by Prosperity Health