



Maternity benefit

2015

The Maternity Benefit in 2015

The Maternity Benefit covers in-hospital and day-to-day medical expenses for expecting mothers and their newborns.

Overview

This document tells you about how Malcor Medical Aid Scheme covers pregnancy and childbirth. Read further to understand what we include and how to get the most out of your maternity benefits.

Terms we use in this document

There may be some terms we refer to in the document that you may not be familiar with. We give you the meaning of these terms in the table below.

Terminology	Description
Prescribed Minimum Benefits (PMBs)	A set of conditions that all medical schemes must provide a basic level of cover for. This basic level of cover includes the diagnosis, treatment and costs of the ongoing care of these conditions.
Related accounts	Any account other than the hospital account for in-hospital care. This can be the gynaecologist and anaesthetist's account.
Scheme Rate	This is how much the Scheme will pay, and is based either on a rate determined by the Scheme or a specific negotiated rate with the healthcare professional.
Board of Healthcare Funders (BHF)	Board of Healthcare Funders (BHF) is the representative organisation for the majority of medical schemes throughout South Africa.
Shortfall or co-payment	<p>Malcor Medical Aid Scheme pays designated service providers at the Malcor Scheme Rate.</p> <p>If the doctor's rates are higher than the Scheme Rate, the member will have to pay the outstanding amount.</p> <p>All in hospital claims will be funded in full without any shortfalls.</p>

The Maternity Benefit

We cover out-of-hospital consultations and tests from your day-to-day benefits

We pay all healthcare services related to your pregnancy, like scans, blood tests and antenatal consultations with a GP, midwife or gynaecologist during your pregnancy from your available day-to-day benefits.

We cover healthcare professionals who we do not have a payment arrangement with up to 100% of the Scheme Rate.

We cover specialists and GP's for pregnancy according to your plan type and subject to a set amount of visits.

We pay for three (3) 2D pregnancy scans from available day-to-day benefits. Any 3D and 4D scans will add up to this limit and will be paid up to the rate of a 2D scan only.

Medical devices and appliances

Members on the Malcor Medical Aid Scheme have access to external medical items provided that members buy it from appropriately registered providers with a valid BHF practice number. We cover these items at 100% of the Scheme Rate, subject to available funds in your day-to-day benefit and sub-limits for external appliances.

We pay for medicine and supplements for pregnancy from your day-to-day benefits

We pay for medicine and supplements that you may use during your pregnancy, like medicines for morning sickness, iron supplements and folic acid, up to 100% of the Scheme Rate for medicine if you use a network pharmacy.

Antiretrovirals to prevent mother-to-child transmission

We fund HIV medicine to prevent mother-to-child transmission of HIV from the in-hospital overall annual limit. Please refer to the HIVCare brochure or call the HIVCare team on 0860 100 698 for more information.

Your cover for your hospital stay depends on the type of delivery

We pay the hospital account from your Hospital Benefit, subject to the in-hospital overall annual limit. All related accounts such as the gynaecologist, midwife, anaesthetist and other healthcare services we will pay in full without any shortfalls from your Hospital Benefit

You can benefit by using healthcare professionals that are on our Premier Specialist Network and GP network, subject to the relevant limit on your plan option as we will cover their approved procedures in full.

You have cover for three (3) days and two (2) nights for a normal delivery and four (4) days and three (3) nights for a caesarean section, if approved. The day of the delivery is counted as day one. If you need to stay in hospital longer than the number of days we approved, your doctor will need to send a letter to motivate why you need to stay in hospital longer.

We cover home births with a registered midwife

Home births are covered from the Hospital Benefit. We will cover the cost of a midwife who is registered with BHF and has a valid practice number up to the maximum Scheme Rate that the limit on your plan option covers, for up to three days after the delivery.

We cover water births in hospital or at home

If you choose to have a water birth in hospital we will pay for up to three (3) days and two (2) nights. If you choose to have a water birth at home, we will pay for the cost of the hire of a birthing pool from your Hospital Benefit. This must be hired from a provider who has a registered practice number.

If you choose to have a water birth or normal delivery at home, we will pay for up to two (2) days' midwifery care (including delivery) from your Hospital Benefit. The midwife must be registered with a valid practice number.

Treatment for neonatal jaundice

If your baby needs phototherapy for neonatal jaundice, we will cover the phototherapy lights from the day-to-day benefit.

We cover medically necessary circumcisions from the Hospital Benefit

Please preauthorise the procedure with us by calling on 0860 100 698.

There are certain items we do not cover

We do not cover these items:

- Mother and baby packs that hospitals supply
- The bed-booking fee that some hospitals may require you to pay for
- Your lodger or border fees if your baby needs to stay in hospital for longer, and you choose to stay on
- Pre- and postnatal exercises

Getting the most out of your maternity benefits

Tell us about your pregnancy

Malcor Medical Aid Scheme covers the birth of your baby either in hospital or clinic with a doctor or a midwife or at home with the help of a midwife. It is important to call us when you are between 12 to 24 weeks pregnant to inform us of your pregnancy. You can call us on 0860 100 698.

Understand your benefits

The Prescribed Minimum Benefits is a set of conditions which all medical schemes must provide a basic level of cover for. The Prescribed Minimum Benefit (PMB) regulations include funding for antenatal care where it is necessary to hospitalise the mother before she gives birth. We will pay in hospital accounts in full.

Pregnant mothers who need to be admitted during their pregnancy can call us on 0860 100 698. For more information on PMBs go to our website at www.malcormedicalaid.co.za.

Register your baby within 30 days of the birth

We automatically cover newborns under the parent's name up to the last day of the calendar month that he or she is born. For example, if your baby is born on 20 May, he or she will have automatic cover from 20 May until 31 May under your name.

To continue cover, the baby must be registered from the next calendar month and we must receive a contribution made by the main member on their behalf as a dependant. Please note we may underwrite the application to enrol your baby and apply waiting periods if you do not register your baby within 30 days of the date of birth.

To register your newborn on the Scheme, you must inform your employer.

Contact us

Tel: 0860 100 698 • PO Box 1181 Parklands 2121 • www.malcormedicalaid.co.za