

EXCLUSIONS AND LIMITATIONS

1. EXCLUSIONS

Unless cover is provided as per the prescribed minimum benefits or otherwise provided for or decided by the Board, expenses incurred in connection with any of the following will not be paid by the Scheme:

- 1.1** Costs of whatsoever nature incurred for treatment arising out of an injury sustained by a member or a dependant and for which any other party is liable. The member is entitled to such benefits as would have applied in normal conditions irrespective of the lapse of time: Provided that the member informs the Scheme of the potential claim against the other party and of the relevant health care expenses incurred in the manner and within the time period applicable to normal claims for benefits under the Scheme : Provided further that a claim in respect of the said expenses is lodged by the member or dependant against the other party concerned and pursued with due diligence, with the Scheme being kept fully informed. Should the member or dependant not pursue the claim against such other party to the satisfaction of the Board, it may require the member to cede or procure the cession of such claim to the Scheme, in which event the member or dependant shall provide the Scheme with all such assistance and co-operation as it may reasonably require in pursuing such claim. Provided that on receipt of payment from any third party in respect of medical expenses the member shall be obliged to pay to the Scheme any monies paid out by the Scheme in respect of this benefit.
- 1.2** Costs arising directly or indirectly from intentional, self-inflicted injury even if the member or dependant was psychologically unstable at the time, except for PMBs.

- 1.3** All costs in respect of injuries arising from speed contests, speed trials and professional sports.
- 1.4** All costs for operations, medicines, treatment and procedures for cosmetic purposes and any complications arising from such services.
- 1.5** Holidays for recuperative purposes or treatment or exercise in a gymnasium whether medically necessary or not.
- 1.6** Adjustments and repairs to spectacles frames; the purchase of sunglasses; and tinted contact lenses.
- 1.7 Purchase of:**
- Medicines not registered with the MCC and proprietary preparations;
 - applicators, toiletries and beauty preparations;
 - bandages, cotton wool and other consumable items;
 - patented foods, including baby foods;
 - tonics, slimming preparations and drugs as advertised to the public; and
 - household and biochemical remedies.
 - Sunscreen and tanning agents
 - Medicines other than medicines on written prescriptions of a person legally entitled to prescribe.
 - Devices and material such as dental floss, toothbrushes and toothpaste.
- 1.8** All costs that are more than the annual maximum benefit to which a member is entitled in terms of the rules of the Scheme.
- 1.9** Charges for appointments which a member or dependant of a member fails to keep.
- 1.10** Examinations for insurance, employment, law suits, visas and similar purposes.

- 1.11** Costs for services rendered by —
- 1.11.1** persons not registered with a recognised professional body constituted in terms of an Act of Parliament; or
- 1.11.2** any institution, nursing home or similar institution except a state or provincial hospital not registered in terms of any law.
- 1.12** Costs for any services related to:
- 1.12.1** examinations or treatments where no real or diagnosed illness exists and treatment is rendered purely for psychological reasons.
- 1.12.2** School therapy / remedial education / career development
- 1.13** **Except for PMBs, any treatment relating to:-**
Sterility
Obesity
Erectile dysfunction
Artificial insemination.
- 1.14** Costs relating to telephonic consultations.
- 1.15** Accommodation in old-age homes or similar institutions.
- 1.16** Any and all costs incurred at headache clinics.
- 1.17** Sclerotherapy treatment unless a vascular surgeon is responsible for the treatment where it forms part of the surgical removal of varicose veins.
- 1.18** Claims for newborn grandchildren, unless registered as a dependant.
- 1.19** Costs in respect of motivations for items excluded as per the Scheme Rules

2. LIMITATION OF BENEFITS

- 2.1** The maximum benefits to which a member and his dependants are entitled in any financial year are limited as set out in Annexure B.
- 2.2** Members admitted during the course of a financial year are entitled to the benefits set out in Annexure B, with the maximum benefits being adjusted in proportion to the period of membership calculated from the date of admission to the end of the particular financial year.
- 2.3** Unless otherwise decided by the Board, benefits in respect of medicines obtained on a prescription are limited to one month's supply and the purchase of contact lenses are limited to six month's supply for every such prescription or repeat thereof.
- 2.4** In the case of protracted illness, the Board will have the right to insist on the member or dependant consulting any particular specialist the Board may nominate in consultation with the attending practitioner. If the specialist's treatment is not acted upon in such case, no further benefits will be allowed for that particular illness.
- 2.5** The Scheme's health risk managers are mandated by the Scheme to ensure application of these rules and adherence to the benefit levels, subject to the promotion of best practice protocols, supported by evidence based guidelines, that are cost effective but does not compromise quality of care.

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