Value Care Plan | Frequently Asked Questions

	Benefit	Yes/No	What is my responsibility	What will be paid
GPs/Specialists/Alternative Healthcare Providers	Can you obtain services from **a General Practitioner (GP)?**	YES	You need to obtain services from a General Practitioner that belongs to the Prime Cure Network. To find a doctor on the network visit the PrimeCureWebsite or search for a provider via the Value Care Plan app. You have to obtain authorisation if you visit your GP more than 4 times within a year. When this happens, your needs will be triaged. Instead of automatically defaulting to a GP visit, members will be directed to the most appropriate healthcare professional or platform based on their condition. This may be a nurse consultation, virtual GP, or in-person GP visit.	If you go to a provider on the network, you will not have to pay for any service you receive, unless the doctor provides services outside the agreement with Prime Cure.
	What is included in the **fee that the Network GP will be paid?**			The GP will see you when medically needed and provide all the care including the consultation, acute medicine as agreed with Prime Cure and covered benefits within the Anglo Medical Scheme Rules.
	Can you obtain **services from a GP outside the network** for non-emergencies?	YES	You need to get authorisation for the consultation (on the day or the first working day after the event). You will have to pay for the services upfront and submit the claim to Prime Cure to request a refund.	You have a maximum allowance of 1 visit per beneficiary and 2 per family at a set limit as stated in the Benefit Guide (inclusive of medication).
	Can I obtain services from **a specialist** i.e. paediatrician, specialist physician, cardiologist, etc.?	YES	You need to get authorisation for the consultation and **obtain a referral from a contracted GP**. Failure to do so will result in non-payment of your claims or a co-payment of 30%. You may have to pay for the services upfront and submit the claim for a refund.	Specialists do not belong to the Prime Cure Network but might have an agreed rate with Prime Cure. They are however allowed to charge at their normal rates and you might incur a co-payment. 5 consultations per family per year for non-Prescribed Minimum Benefits at a set limit (inclusive of medication). Get a quote from the specialist before you request an authorisation from Prime Cure. Contact the Prime Cure call centre on **0861 665 665** to obtain the authorisation or request authorisation via the Value Care Plan app. The call centre agent will also be able to assist you with the amount you may be required to pay if the specialist charges above the Prime Cure agreed rate.
	Can I obtain services from **an alternative healthcare provider (**i.e. a physiotherapist, psychologist, dietitian, speech therapist, etc.)?	YES	You need to get authorisation for the consultation and **referral from your GP**. Failure to do so and self-referral will result in non-payment or a 30% co-payment of the Prime Cure agreed rate.	You have a maximum allowance per family at a set limit as advertised. Get a quote from the provider before you request an authorisation from Prime Cure. Contact the Prime Cure call centre on **0861 665 665** to obtain authorisation or request authorisation via the Value Care Plan app. The call centre agent will also be able to assist you with the amount you may be required to pay if the alternative healthcare provider charges above the Prime Cure agreed rate.

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Medicine/Pharmacies	Can I obtain **medicine** from a network pharmacy **if an out-of-network doctor** prescribes acute medicine?	YES	Prime Cure has contracted with certain pharmacies to provide services to our **members**. To find a pharmacy on the network, visit the PrimeCureWebsite. Medicine prescribed by a **specialist** will be covered if a Network GP referred you and you obtained an authorisation for the specialist visit. Only medicine on the medicine list will be funded.	Medicine listed on the Prime Cure formulary (an extensive list of generic medicine) will be covered. Ask the prescribing doctor whether this is a covered medicine to prevent out-of-pocket expenses.
	Can I visit a network pharmacist and obtain **over-the-counter medicine?**	YES	You can get over-the-counter medicine from a contracted Prime Cure pharmacy. To find a pharmacy on the network visit the PrimeCureWebsite.	Medicine listed on the Prime Cure formulary (an extensive list of generic medicine), will be covered. Remember, this is a limited benefit.
	Will Prime Cure pay for chronic **conditions and medicine?**	YES	Please refer to your Benefit Guide and refer to covered Prescribed Minimum Benefits (PMBs) on page 18. You need to register your condition with Prime Cure on **0861 665 665** and obtain authorisation. We will pay for medicine if your Network GP prescribes it. After completion of the application process, you can get your first **month's** chronic medicine at a selected pharmacy in the Prime Cure pharmacy network. Thereafter, you will have the choice of either getting your chronic medicine on a monthly basis from the network pharmacy, or from a network courier pharmacy who will deliver the medicine to your local post office, to your home or your network doctor.	Medicine listed on the Prime Cure formulary (an extensive list of generic medicine) will be covered. Ask the prescribing doctor whether this is a covered medicine to prevent out-of-pocket expenses.
Dentists	Do I have cover if I visit a **dentist?**	YES	Please refer to your Benefit Guide for any benefit limits that may apply. To find a dentist on the network visit the PrimeCureWebsite or find a provider via the Value Care Plan app. You may have to pay for the services upfront and submit the claim for a refund if you visit an out-of-network dentist. You might also be liable for the cost in excess of the Prime Cure agreed rate.	Very specific services (identified by a set of basic dental codes) will be paid for dentistry services, at the Prime Cure agreed rate and a Prime Cure network dentist. Medicine found on the medicine list that is prescribed by the dentist can be obtained from a Network pharmacy. You can get two sets of dentures per family every 36 months. There is a 20% co-payment on dentures. Denture repairs after a period of six months.
	Can you obtain services from a **dentist outside the network?**	YES	Pre-Authorisation is required if you want to use a dentist outside the network.	Emergency treatment is covered i.e. pain and sepsis treatment and extractions, limited to one event per member per year.
Optometrist	Do I have cover if I visit an **optometrist?**	YES	Please refer to your Benefit Guide for any benefit limits that may apply. To find an optometrist on the network visit the PrimeCureWebsite. or find a provider via the Value Care Plan app.	We cover very specific optometry services (identified by a set of codes), only at a Network Provider at the Prime Cure agreed rate: • One eye examination for a member each year and one set of glasses every 24 months. • Only single vision or bifocal lenses against qualifying norms.

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Hospital services	Am I entitled to **hospital services?**	YES	To find a Prime Cure Hospital and to get authorisation for any hospital event, use the Value Care Plan app or call us on **0861 665 665**. A non-emergency admission must be preauthorised before you are admitted and in the case of an emergency, authorisation is required within 24-hours of the admission or the first working day. Failure to obtain an authorisation for non-emergency services will result in a R2 305 co-payment.	Failure to obtain authorisation will result in either non-payment of the event or a co-payment. There is an Overall Hospital Family Limit of R208 000 per year and a sub-limit of R89 900. PMB conditions are not falling under this limit. If you reach this limit, you will not be discharged during the current hospital event. Some services are subject to sub-limits in the family hospital limit i.e. blood transfusion at R20 750.
	Can I go to any **hospital?**	YES	To find a Prime Cure Hospital and to get authorisation for any hospital event, use the Value Care Plan app or call us on **0861 665 665**. Once you have depleted your family private hospital benefit, authorisation can be required for admission to a state hospital.	The specialist services in a private hospital will be funded at the Prime Cure agreed rate, up to R89 900 for the relevant services that were authorised. Once this limit has been reached, you might be transferred to a state hospital.
	Do I have cover for **in-hospital radiology and pathology services?**	YES	To find a Prime Cure Hospital and to get authorisation for any hospital event, use the Value Care Plan app or call us on **0861 665 665**.	Sub-limits in the family hospital limit will apply for radiology and pathology tests. Please refer to your Benefit Guide. The claims will be paid at the Prime Cure agreed rate.
Emergency/ Casualty ward	Do I have cover in case of **emergency?**	YES	Should you need to visit a casualty ward or a doctor in case of an emergency, ensure to phone **0861 665 665** to obtain authorisation within 24-hours or if the event occurs over the weekend, on the Monday thereafter. You can also request authorisation via the Value Care Plan app.	You may have to pay the account and submit the claim to Prime Cure for a refund. The claim will be paid at the Prime Cure agreed rate. The facility fee charged by the casualty ward will be covered only for emergencies.
	Do I have cover if I visit a **casualty ward?**	YES	Should you need to visit a casualty ward, ensure to phone **0861 665 665** to obtain authorisation within 24-hours or, if the event occurs over the weekend, on the Monday thereafter or request authorisation via the Value Care Plan app. Remember to obtain authorisation for both the casualty event, as well as the hospital event if you are admitted.	You may have to pay the account and submit the claim to Prime Cure. The claim will be paid at the Prime Cure agreed rate. The facility fee charged by the casualty ward will not be covered even if it was an emergency and will be for your cost.
Pathology/Radiology/ Emergency Medical Services	Do I have cover for **pathology and radiology services?**	YES	You need to be **referred by your Network GP**. Failure to do so will result in non-payment of your claims and/or out-of-pocket expenses. Pathology and radiology requested by a Specialist will be covered only if you were referred to the Specialist by your network GP and you obtained authorisation for the consultation.	Very specific services (identified by a set of codes) will be paid for pathology and radiology services.
	Do I have cover for **emergency medical services?**	YES	In case of an emergency, obtain authorisation by phoning **0861 665 665** for ambulance services provided by a Prime Cure Network provider.	Roadside assistance for medical emergencies will be covered.