

BENEFIT BEAT

COMMUNICATING WITH MEMBERS OF THE DE BEERS

BENEFIT SOCIETY

NOVEMBER 2004 ■ ISSUE NO.19

Contribution increases again kept to a minimum

The Trustees are pleased to announce that, for the second year running, there will be a relatively low increase in contributions for Society members. The increase effective from 1 January 2005 is only 6.9%, compared to the 7.5% increase for 2004.



HEALTH TIPS

YOU, more than anyone else are responsible for your health. By living and eating healthily, you boost your chances of avoiding disease. However, should you need to use medication, please bear the following in mind:

- Regularly check your medicine cabinet and remove expired medication. Please take expired medication to one of the Society's dispensaries (or a local pharmacy) to be disposed of. Do not flush these down the toilet or throw them away.
- When receiving new medication, always make sure that you are aware of any side effects that the medicine may cause.

E.g. 1: Medicine containing anti-histamines may cause drowsiness.

E.g. 2: The effectiveness of birth control pills may be reduced if taken in conjunction with certain antibiotics.

Refer to page 4 to see new benefit limits and the new contribution table for 2005.

Electronic communication saves you time & money

The Society has introduced a number of new features to speed up communication to all members and minimise unnecessary printing costs.

Once your e-mail address is registered on the Benefit Society's system, you can receive (**only after instructing the Society to proceed**):

- Electronic statements (sent as an attachment to an e-mail)
- Claims information (weekly e-mail advising you of claims processed in the previous week)
- Claims history, benefits, contributions, membership detail, authorised cases and last member statement e-mailed to you on request. (Simply send a blank e-mail to webmail@debeersgroup.com and an automatic response will be sent to you with the above information.)

Not yet registered?

Visit www.dbbs.co.za and register today!

INSIDE... Know before you go!



Society's Query Line: Tel no. 053 807 3400

Get into the driver's seat and save



Whether you simply visit a local pharmacy or a GP, or undergo a surgical procedure, you may be in for some unpleasant financial surprises if you are not properly informed and prepared. This issue of Benefit Beat explores how to safeguard your pocket against unnecessary medical expenditure...

Consultations & surgical procedures

It pays to do your homework before you or any of your dependants undergo any medical treatment, surgery or diagnosis. That way you will avoid unpleasant surprises such as your medical service provider charging more than the benefits offered by the Society without you being aware of it, and your having to cover the difference out of your pocket.

The Society (as do the majority of medical schemes) base ALL its benefits on the National Health Reference Price List (NHRPL) published by the Council for Medical Schemes. Service providers who charge these tariffs are paid directly and in full by the Society.

However, service providers who charge for their services (other than consultations) at a rate in excess of NHRPL are currently not paid by the Society at all. Instead members will be refunded the Society's liability via their salary/pension and they will have to settle the account directly and in full with the service provider.

In the case of consultations, the Society will pay the account (whether charged at the NHRPL tariff or not) directly and in full, and then recover any excess over and above the NHRPL tariff from your salary/pension.

A member's actual experience...

A member recently had a knee replacement and found that the orthopaedic surgeon charged him R 5 600 for the procedure, whereas the benefit amount for this procedure was only R 2 992.26. The provider was not paid directly by the Society as he charged in excess of the NHRPL rates. The member had to settle the account in full after receiving his refund of the Society's liability, and therefore paid R 2 607.74 (R 5 600.00 – R 2 992.26) from his own pocket.



Another member's experience...

On enquiring before going into surgery, a member was advised by the anaesthetist that his charge for a procedure would be R 5 000. The NHRPL tariff for this procedure was R 1 900. The member negotiated with the anaesthetist to charge the NHRPL tariff. Had he not negotiated this, the member would have had to pay the other R 3 100 out of his own pocket. When asked why he had negotiated with the anaesthetist, the member replied he followed the same principle he applies when doing all his major purchases – he checked the price upfront to make sure he could afford it!

Know before you go!

The Society's Trustees are concerned about your interests and are continually striving to empower members to make informed decisions. For this reason, it is important to communicate the kind of information that would help members avoid unexpected high medical expenditure. The Society cannot do this alone and therefore asks that you be alert and know which service providers available to you charge at the NHRPL rates. When in doubt, ask for a quotation. **Call the query line @ (053) 807 3400 for more information. You need to know before you go!**

Controlling surgery costs: a step-by-step guide

1. Before you consult a medical practitioner, find out whether the service provider (doctor, specialist, surgeon, assistant, anaesthetist, etc) charges NHRPL rates. Speak to all service providers before you go. For example, if you require an operation, speak to the surgeon, the anaesthetist and the assistant surgeon (if applicable).
2. If the service providers do not charge at the NHRPL tariffs, contact the Society (Tel - 053 807 3400) or e-mail benefitpost@debeersgroup.com and we will supply you with a list of service providers in your area who have recently charged other members of the Society the NHRPL tariff. However, this is no guarantee; you must still ask whether they will charge **you** the NHRPL tariff.
3. Alternatively, try to negotiate with your service provider to charge NHRPL rates, or for a discounted rate if the account is paid within a specified time.
4. If you are satisfied with the service providers' charges being in excess of the NHRPL tariffs, at least you will know how much you will be required to pay out of your own pocket.
5. If you are required to go for an operation, make sure that the surgeon operates from one of the Society's network of hospitals.

IT'S YOUR RIGHT

The National Health Act passed in August 2004 states that a health care provider or health establishment must inform patients of the benefits, risks, costs and consequences of every option available.

*Know before
you go!*

Pharmacy admin fees

As you may be aware, the Pharmaceutical Society of South Africa appealed to the High Court against new regulations that limit pharmacists' dispensing fees for prescribed medication to 26% of the Single Exit Price (SEP), to a maximum of R26 per item. They argue that this fee does not cover the cost of dispensing medication.

Many pharmacists are 'getting around' the new regulations by charging additional admin fees over and above the maximum of R26 dispensing fee. Please note that these additional fees have not been agreed to between the pharmaceutical industry and medical schemes. They therefore do NOT form part of the Society's benefits and will NOT be paid or reimbursed by the Society.

CASE STUDY

A Society member recently visited a private pharmacy to have a prescription for his bronchitis filled.

The official price of the medication came to R234.86 for the three items dispensed. (As it was for acute medicine, the Society would cover 70% of these costs.)

The member then discovered that he was charged an additional R46.06 admin fee, which he had to pay cash from his own pocket. However, as he urgently wanted the medicine, he paid the admin fee.

The next day he contacted the Society and discovered that this admin fee was not covered under his benefits and would therefore not be reimbursed by the Society.

The effect on you, the member -



- **SOCIETY DISPENSARY** - Should you have a prescription filled at a De Beers Benefit Society dispensary, you are currently not charged an admin fee.
- **LOCAL PHARMACY** - Should you have a prescription filled at a local pharmacy (i.e. not at one of the Society's dispensaries), you could be charged an additional admin fee. You will have to pay any additional admin fees in full from your own pocket and will not be able to claim it back from the Society.

TIP: Ask the pharmacist whether an admin fee will still be charged if you pay cash. If not, consider paying cash and claiming back from the Society or try to find a better deal with another pharmacy.

Changes for the new benefit year

Contributions and Benefits are the two components of the Benefit Society that affect you as member. This page shows where these have been changed for next year.

BENEFITS 2005

This table shows your new limits per beneficiary:

SERVICES	2004	2005
 Ambulance services (now unlimited, subject to pre-authorization by designated service provider*)	R 800	NA
 Auxiliary health services	R 800	R 850
 Colostomy bags and catheters	R 7 800	R 8 400
 Continuous Oxygen Supply (COS)	R 7 100	R 7 650
 External appliances	R 2 900	R 3 100
 Eye care - lenses (2-year cycle) - frames (2-year cycle)	R 950 R 330	R 1 050 R 350
 Hearing aids (5-year cycle)	R 7 100	R 7 650
 Medication - acute	R 1 730	R 1 850
 Mental health	R 5 200	R 5 600
 Occupational and speech therapy	R 1 150	R 1 250
 Orthodontic treatment	R 9 000	R 9 700
 Physiotherapy	R 3 600	R 3 900
 Specialised dentistry	R 3 600	R 3 900
 Wheelchair - 90% of cost (5-year cycle)	R 10 000	R 10 800

* ER24 is the designated service provider for all emergency and ambulance services. The Society has no liability for any other ambulance services.

Please refer to the enclosed benefits summary pamphlet for full information on your benefits and limits for 2005.

**KEEP US IN ON
YOUR BEAT WITH
BENEFIT
POST!**

We'd like to hear from you.

Is there something that you'd like to know more about?

*e-mail us at:
benefitpost@debeersgroup.com*

phone: (053) 807 3400

*or write to:
Benefit Post
c/o De Beers Benefit Society
P O Box 1922
Kimberley
8300*

CO-PAYMENTS 2005

 Panel doctor co-payment	R 11	R 12
 Hospital co-payment	R 330	R 350
 After-hours consultation co-payment (per consultation)	R 48	R 52

CONTRIBUTIONS 2005 Effective 1 January 2005 - HOW MUCH WILL YOU PAY NEXT YEAR?

You will continue to pay a fixed monthly contribution for each person you register as a dependant. These contributions are different for adults and children, and are based on your basic income per month. (Please see table below.)

Your basic income per month	You will pay...	
	Per adult	Per child/student
< R 2 000	R 843	R 228
R 2 001 – R 3 000	R 852	R 230
R 3 001 – R 4 000	R 902	R 244
R 4 001 – R 5 000	R 952	R 258
R 5 001 – R 7 000	R1003	R 272
R 7 001 – R 9 000	R1054	R 285
R 9 001 +	R1104	R 297

EXAMPLE:

If you are single and have no registered dependants and fall in the R 3 001 – R 4 000 income bracket, your monthly contribution will be as follows:

	Working Member	Pensioner
Your share:	R 360.80 (40%)	R 126.28 (14%)
The Company's share:	R 541.20 (60%)	R 775.72 (86%)
Total	R 902.00 (100%)	R 902.00 (100%)

Remember, the Company's subsidy may vary, as it depends on your conditions of employment.

Should you require any clarity on any of the benefits or contributions for 2005, please contact the Society - see contact details listed above (under Benefit Post).