

Allied, Therapeutic and Psychology Benefit

The Allied, Therapeutic and Psychology Benefit is available on the Essential and Essential Plus Options.

Overview

This document tells you more about how the Allied, Therapeutic and Psychology Benefit works and how to apply for additional cover if you have a severe, complex condition that requires short or long-term assistance from allied, therapeutic and psychology healthcare professionals.

About some of the terms we use in this document

There are a number of terms we refer to in this document that you may not be familiar with. We give you the meaning of some of the terms we use.

Terminology	Description
Allied, therapeutic and psychology healthcare professional	This is a registered medical professional, other than a doctor or dentist, who provides support services and/or rehabilitation services that are aimed at improving the physical, psychological, emotional, and social wellbeing.
Scheme Rate	This is how much the Scheme will pay for healthcare professionals and other services.
Above Threshold Benefit (on the Essential Plus Option)	This gives you further day-to-day cover once you have used your available Medical Savings and your total claims for the year accumulates towards the Annual Threshold.

Allied, Therapeutic and Psychology Benefit

The Allied, Therapeutic and Psychology Benefit includes payment for services provided by the following allied healthcare professionals:

Acousticians	Occupational therapists
Audiologists	Physiotherapists
Biokineticists	Podiatrists
Chiropractors	Psychometrists
Counsellors	Registered nurses
Dietitians	Social workers
Homeopaths	Speech- language therapists
Psychologists (clinical, counselling, educational)	

Essential Plus Option

We pay for allied, therapeutic and psychology services from your Out-of-Hospital benefit

When the services are provided out-of-hospital, we pay for allied, therapeutic and psychology healthcare services from the available funds in your Medical Savings Account or from the limited Above Threshold Benefit once your claims accumulate towards the Annual Threshold.

If you have used your available Medical Savings Account and have not yet reached your Annual Threshold, you are in the Self-payment Gap. You will then have to pay claims but submit them to the Scheme so they can accumulate to the Annual Threshold. You must also continue to send any claims for allied, therapeutic and psychology healthcare services to the Scheme while you are in the Self-payment Gap.

We pay claims for allied, therapeutic and psychology healthcare professionals up to a maximum of 100% of the Scheme Rate.

If your healthcare provider charges more than the Scheme Rate, you must pay the difference between the Scheme Rate and the amount charged.

On the Essential Plus Option, allied, therapeutic and psychology healthcare benefits are limited

Your allied, therapeutic and psychology healthcare benefits are limited to your available Medical Savings and Above Threshold Benefits, and the following annual limit (including benefits paid from the MSA), which is based on your family size:

Single member	R18 100
Member with one dependant	R24 300
Member with two dependants	R29 700
Member with three or more dependants	R34 150

If you joined Retail Medical Scheme after January, you would not get the full annual limit – we will calculate your available limit over the remaining months in the year.

Essential Option

We pay for allied, therapeutic and psychology services from your Out-of-Hospital Benefit

We pay for out-of-hospital allied, therapeutic and psychology healthcare services from the Out-of-Hospital Benefit, limited to R2 200 if you are a single member or R4 400 for the family. If you have used your available Out-of-Hospital Benefit, you will have to pay the claims.

We pay claims for allied, therapeutic and psychology healthcare professionals up to a maximum of 100% of the Scheme Rate.

If your healthcare provider charges higher than the Scheme Rate, you must pay the difference between the Scheme Rate and the amount charged to the provider.

Allied, Therapeutic and Psychology Extender Benefit (offered on the Essential Plus and Essential Options)

The Allied, Therapeutic and Psychology Extender Benefit provides cover for qualifying members with severe, complex conditions, who need short- or long-term care provided by allied, therapeutic or psychology healthcare professionals. This cover is provided from the Scheme Risk benefits and does not affect the Out-of-Hospital Benefits for Allied, Therapeutic and Psychology benefits.

The Allied, Therapeutic and Psychology Extender Benefit provides unlimited cover for clinically appropriate care, for the following conditions:

- quadriplegia, hemiplegia or paraplegia
- hearing loss
- prematurity at birth
- congenital defects, including those of the heart, lungs and neurological system

- autism
- cerebral palsy
- certain degenerative neurological conditions
- certain connective tissue disorders
- bronchiectasis, and
- fibrosing restrictive lung diseases.

The benefit also provides cover in the case of a trauma-related event resulting in the following PMB conditions:

- near drowning-related injury,
- severe anaphylactic reaction,
- poisoning,
- crime-related injury,
- severe burns,
- external and internal head injuries, and
- loss of limb.

We will only consider applications for additional cover from the following healthcare professionals:

Biokineticists	Psychologists (clinical, counselling, educational)
Chiropractors	Social Workers (on the mental health network)
Speech- language therapists	Audiologists
Occupational therapists	Physiotherapists

We will not consider cover for both a chiropractor, and physiotherapist or both a psychologist and social worker for the same condition.

You must apply for additional cover under the Allied, Therapeutic and Psychology Benefit

You must complete an application for additional cover under the Allied, Therapeutic and Psychology benefit. Our authorisation will be subject to the conditions set out above and based on clinical criteria.

Up to date application forms are always available on www.retailmedicalscheme.co.za under Documents > Find a document. Alternatively, you can call 0860 101 252. Or your healthcare professional can call 0860 44 55 66, to request a form. You and the relevant healthcare professionals must complete the relevant sections and sign and send the application form back to the Scheme, using the channels indicated on the form.

Contact us

You can call us on 0860 101 252. Your healthcare professional can call 0860 44 55 66. You can write to PO Box 652509, Benmore, 2010 or visit the Scheme's website at www.retailmedicalscheme.co.za

Queries or complaints

You may lodge a query or complaint with the Scheme directly on 0860 101 252 or by emailing service@retailmedicalscheme.co.za. If you are not satisfied with the outcome of your query or complaint, please write to the Principal Officer at the Scheme's registered address for assistance. If your query or complaint is not resolved to your satisfaction, you may lodge a dispute. You may read more about the Scheme's disputes process on www.retailmedicalscheme.co.za.

You may, as a last resort, approach the Council for Medical Schemes for assistance: Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch-Hazel Avenue, Eco Park, Centurion 0157, complaints@medicalschemes.co.za, 0861 123 267, www.medicalschemes.co.za