

COVER FOR ALCOHOL, SUBSTANCE & DRUG DETOXIFICATION & REHABILITATION

DISCOVERY HEALTH MEDICAL SCHEME 2025





Overview

This document gives you information about how Discovery Health Medical Scheme pays for alcohol, substance and drug detoxification and rehabilitation. You will find information about how we pay for these treatments both in and out-of-hospital and who the designated service providers (DSPs) for these treatments are.

About some of the terms we use in this document

There may be some terms we refer to in the document that you may not be familiar with. Here are the meanings of these terms.

TERMINOLOGY	DESCRIPTION
Co-payment	This is an amount that you have to pay towards a healthcare service. The amount can vary, depending on the type of healthcare service, the place of service and whether the amount that the service provider charges is higher than the rate that we cover. If the co-payment amount is higher than the amount charged for the healthcare service, you will have to pay for the cost of the healthcare service.
Designated service provider (DSP)	This refers to a healthcare professional or provider (for example, a doctor, specialist, allied healthcare professional, pharmacy or hospital) who/that has agreed to provide Discovery Health Medical Scheme members with treatment or services at a contracted rate. To view the full list of designated service providers, visit www.discovery.co.za or click on 'Find a healthcare provider' on the Discovery Health app.
Discovery Health Rate (DHR)	This is the rate that we pay for healthcare services from hospitals, pharmacies, healthcare professionals and other providers of relevant healthcare services.
Prescribed Minimum Benefits (PMBs)	In terms of the Medical Schemes Act 131 of 1998 and its Regulations, all medical schemes have to cover the cost related to the diagnosis, treatment and care of: • An emergency medical condition • A defined list of 271 diagnoses • A defined list of 27 chronic conditions. The Council for Medical Schemes has set the following rules for how to access Prescribed Minimum Benefits: • Your medical condition must qualify for cover and be part of the defined list of Prescribed Minimum Benefit conditions. • The treatment that you need must be provided for in the defined benefits. • You must use designated service providers in our network. This does not apply in emergencies. Where appropriate and in line with the rules of the Scheme, you may be transferred to a hospital or other service providers in our network, once your condition has stabilised. If you do not use a designated service provider, we will pay up to 80% of the Discovery Health Rate. You will be responsible for the difference between what we pay and the actual cost of your treatment. If your treatment doesn't meet the above criteria, we will pay according to your plan benefits.
Emergency medical condition	An emergency medical condition may be referred to, simply, as an emergency. It is the sudden and, at the time, unexpected onset of a health condition that requires immediate medical and surgical treatment. Failure to give this medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part, or it would place the person's life in serious jeopardy. An emergency does not necessarily need you to be admitted to a hospital and you may be treated in casualty only. We may ask you for more information to confirm the emergency.

The Alcohol, Substance and Drug Detoxification and Rehabilitation Benefit



We cover in-hospital alcohol, substance and drug detoxification and rehabilitation as a Prescribed Minimum Benefit (PMB)

The Scheme has certain exclusions that we do not pay for, except where stipulated under the Prescribed Minimum Benefits (PMBs). Alcohol, substance and drug abuse is a general scheme exclusion. However, the in-hospital management of alcohol, substance and drug detoxification and rehabilitation are Prescribed Minimum Benefits (PMBs), in terms of the Medical Schemes Act 131 of 1998 and will be covered. The Scheme does not pay for the out-of-hospital management and treatment for detoxification and rehabilitation as it is a general scheme exclusion and is not included as part of the Prescribed Minimum Benefits (PMBs). You have cover for alcohol, substance and drug detoxification in full at one of our licensed detoxification designated service providers (DSPs) for a maximum of three days for each approved admission. You also have cover for alcohol, substance and drug rehabilitation at one of our designated service providers (DSPs) for a maximum of up to 21 days in hospital each year. This is the maximum allowable days for each person per year. Once the 21 rehabilitation days are depleted, the Scheme will not cover future admissions linked to alcohol, substance and drug detoxification for the remainder of the year.

The Scheme has designated service providers (DSPs) for in-hospital alcohol, substance and drug detoxification and rehabilitation

All designated service providers (DSPs) for alcohol, substance and drug detoxification and rehabilitation services across South Africa are listed on the Find a healthcare provider tool on the Discovery website or Discovery Health app. We have an agreed rate that we pay these providers, and this includes cover for:

- Accommodation at the facility
- Therapy sessions
- Psychologist and/or psychiatrist consultations
- Medicine for withdrawal management and aftercare.

You must get your in-hospital treatment from our designated service providers (DSPs) for full cover

The Scheme will only cover your admission for treatment, if you are admitted to a facility which is appropriately registered and accredited to provide this specific treatment. If you choose to use a facility that is not a designated service provider (DSP) for alcohol, substance and drug detoxification and rehabilitation, we will pay up to 80% of the Discovery Health Rate (DHR). You will have to pay the difference. Your co-payment may be higher than 20% if your service provider charges more than the Discovery Health Rate (DHR). This does not apply in the case of an emergency.

You need to authorise your admission for in-hospital treatment and rehabilitation

Please make sure you get preauthorisation for your admission for alcohol, substance and drug detoxification and rehabilitation. Upon obtaining authorisation, we will confirm how you will be covered for your admission, as well as advising you of the closest designated service provider (DSP) to you. If you do not authorise your admission before going into hospital, the Scheme will only pay up to 70% of the Discovery Health Rate (DHR) for the admission. You will need to pay the difference.

We will consider full payment in cases where there is no designated service provider (DSP)

If there is no designated service provider (DSP) facility close to the place where you usually work or live, or if it is an emergency, you may use any other accredited service provider. Please contact us to preauthorise your treatment and we will advise you on the cover that is available to you and confirm how we will pay claims for alcohol, substance and drug detoxification and rehabilitation in full without any co-payments.

Out-of-hospital rehabilitation for alcohol, drug and solvent abuse

Rehabilitation and treatment for the abuse of alcohol, drugs and solvents that takes place out of hospital is not covered by Discovery Health Medical Scheme. You are responsible for paying all claims associated with or incurred as part of this healthcare service.

Working to care for and protect you



Our goal is to provide support for you in the times when you need it most.

How to contact us

Tel (members): 0860 99 88 77, Tel (health partners): 0860 44 55 66

Go to <u>www.discovery.co.za</u> to Get Help or ask a question on WhatsApp. Save this number 0860 756 756 on your phone and say "Hi" to start chatting with us 24/7.

PO Box 784262, Sandton, 2146. 1 Discovery Place, Sandton, 2196.

What to do if you have a complaint

01 | TO TAKE YOUR QUERY FURTHER:

If you have already contacted the Discovery Health Medical Scheme and feel that your query has still not been resolved, please complete our online complaints form on www.discovery.co.za. We would also love to hear from you if we have exceeded your expectations.

02 | TO CONTACT THE PRINCIPAL OFFICER:

If you are still not satisfied with the resolution of your complaint after following the process in Step 1 you are able to escalate your complaint to the Principal Officer of the Discovery Health Medical Scheme. You may lodge a query or complaint with Discovery Health Medical Scheme by completing the online form on www.discovery.co.za or by emailing principalofficer@discovery.co.za.

03 | TO LODGE A DISPUTE:

If you have received a final decision from Discovery Health Medical Scheme and want to challenge it, you may lodge a formal dispute. You can find more information of the Scheme's dispute process on the <u>website</u>.

04 | TO CONTACT THE COUNCIL FOR MEDICAL SCHEMES:

Discovery Health Medical Scheme is regulated by the Council for Medical Schemes. You may contact the Council at any stage of the complaints process, but we encourage you to first follow the steps above to resolve your complaint before contacting the Council. Contact details for the Council for Medical Schemes: 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.

Your privacy is important to us

We hold your privacy in the highest regard. Our unwavering commitment to protecting your personal information and ensuring the security and confidentiality of your data is clearly outlined in our Privacy Statement. You can view our latest version on www.discovery.co.za Medical aid > About Discovery Health Medical Scheme.