

Paladin Comprehensive is a middle of the range option for members with moderate healthcare needs who want unlimited hospital cover, generous chronic and substantial day to day whilst retaining total freedom of choice

In-Hospital Major Benefits

Overall Annual Limit (OAL) Unlimited

Benefits payable up to 150% of Pharos Rate* (PR)
All benefits are subject to Scheme Rules, Policies & Managed Care Protocols
Sub-limits and deductibles may apply as per Scheme Rules.

Specific Services in Hospital - Pre-Authorisation Required

Maternity including Neonatal ICU	150% PR Neonatal including NICU limited to R275 000
Specialised Units e.g. ICU	150% PR
Psychiatric	21 days / beneficiary. 150% PR
Renal Dialysis	150% PR Limited to R160 000/family/annum
Organ Transplant (Kidney only)	150% PR Limited to R160 000/family/annum
Oncology	150% PR Limited to R160 000/family/annum
Routine medical admissions	100% PR R 1000 up-front payment, if non-PMB
Post-Discharge, Physiotherapy Black and White X-rays & Pathology	150% PR - Limited to 30 days after Pre-Authorised Surgery. Maximum 8 sessions Physio in 30 day period
Daycase Procedures and Minor Theatre (excluding Dentistry)	150% PR
Casualty Fees for Trauma Treatment on day of Injury	150% PR
Investigations e.g. gastroscopy, laparoscopy, arthroscopy, hysteroscopy	100% PR
Specialised Radiology e.g. MRI, CT, PET Nuclear studies	100% PR 20% Co-payment, if non-PMB
Internal Orthopaedic Prosthesis Internal Appliances	Limited to R43 500 including Limit of R38 000 on Orthopaedic Prostheses/beneficiary/annum
Advanced electronic devices	No benefit
TTO Appliances	100% of negotiated price from Yearly Limit. Thereafter subject to Extended Cover Sub-limit
TTO Medicines	Maximum 7 days supply
Immunocompromise & Opportunistic Infections	R35 000/family/annum. 100% PR
HIV/AIDS (Registration required)	150% PR
Sub-acute, Step-down & Rehab (excluding substance abuse)	150% PR. Maximum of 30 days
Impacted Wisdom Teeth	100% PR, R 1 000 up-front payment
Dental Procedures - child 6 years and under and Dental Clearance	150% PR for Hospital account and Anaesthetist subject to R1500 up-front payment by member. Dentist and associated accounts 100% PR from Yearly Limit/Extended Cover

Out of Hospital Benefits

Benefits are subject to available funds in the **Yearly Limit** and will be paid at cost of treatment^o.
Dental paid at 100% Pharos Rate.
The Yearly Limit holds the **Annual Allowance** and any accumulated funds from previous years.

Annual Allowance & Threshold Values

Principal	R 6 792
Adult	R 2 316
Child	R 1 512

Unused Annual Threshold at year end may be transferred through to the next benefit year as per Scheme Rules.

Once members have reached their Yearly Limit, claims will be paid from **Extended Cover** at 80 % of Pharos Rate subject to applicable MCP and Extended Cover Sub-limits.

OAL for out of hospital benefits including the Yearly Limit, Chronic Subsidy & Extended Cover is R23 000 /family.

Deductibles

Procedure	Deductible
Joint Replacement	R5 000
Spinal Surgery	R3 000
Specified Laparoscopic surgery	R3 000
Nissen (Hiatus Hernia, Anti-reflux procedure)	R2 500
Cholecystectomy	R2 500
Hysterectomy	R2 000
Sinus & Nasal surgery	R2 000
Tonsils, Adenoids & Grommets	R1 000

Emergency Transportation

Unlimited subject to an authorised admission as per Managed Care Protocol

24 HOUR EMERGENCY LINE:

**084 124
0861 101 569**

Chronic Medication

- **Generic reference pricing & Mediscor Standard formulary**
- **PMB CDL - Unlimited**
- **R 8 500** for listed conditions

Registration required

PALADIN COMPREHENSIVE CONTRIBUTIONS 2010

Principal	Adult	Child
R 1 764	R 1 412	R 434

This marketing document is for summary reference purposes only and in no way supersedes the Pharos Rules which are available from the Administrator.

* This is the negotiated service provider rate that Pharos sets for the re-imbursment of claims as described in the Pharos Rules
Up-front payments may be claimed from the Yearly Limit but do not accumulate to threshold.

^o Accumulates at 80% Pharos Rate

CDL - Chronic Disease List
OAL - Overall Annual Limit

DSP - Designated Service Provider
PMB - Prescribed Minimum Benefit

MCP - Managed Care Protocol
TTO's - To Take Out