

Rainbow Plus offers unlimited cover at a first class tariff in any private hospital with day to day benefits paid from a dedicated Savings Plus Account. The perfect solution for the fit and healthy.

In-Hospital Major Benefits

Overall Annual Limit (OAL) Unlimited

Benefits payable up to 300% of Pharos Rate* (PR)
All benefits are subject to Scheme Rules, Policies & Managed Care Protocols
Sub-limits applicable.

Specific Services in Hospital - Pre-Authorisation Required

Maternity including Neonatal Intensive Care Units	Unlimited 300% PR
Psychiatric	21 days / beneficiary. 300% PR
Renal Dialysis	Unlimited. 300% PR
Organ Transplant	Unlimited. 300% PR
Oncology	Unlimited. 300% PR
Routine medical admissions (Annexure G)	Unlimited. 300% PR R1000 from Plus Account, if non PMB
Post-Discharge, Physiotherapy Black and White X-rays & Pathology	300% PR - Limited to 30 days after Pre-Authorised Surgery. Maximum 8 sessions Physio in 30 day period
Daycase Procedures and Minor Theatre (excluding Dentistry)	300% PR
Casualty Fees for Trauma Treatment on day of Injury	300% PR
Investigations e.g. gastroscopy, laparoscopy, arthroscopy	Unlimited. 100% PR
Specialised Radiology e.g. MRI, CT, PET, Nuclear studies	Unlimited. 100% PR 20% Co-payment, if non PMB
Internal Orthopaedic Prosthesis	R38 000/beneficiary/annum 100 % Pharos negotiated price
Internal Appliances	100 % Pharos negotiated price
TTO Appliances	100% of cost from Plus Account
TTO Medicines	Maximum 7 days supply
Immuno-compromise & Opportunistic Infections	R35 000/family/annum. 100% PR
HIV/AIDS (Registration required)	Unlimited. 300% PR
Sub-acute, Step-down & Rehab (excluding substance abuse)	300% PR. Maximum of 30 days
Impacted Wisdom Teeth	100% PR, R1000 from Plus Account
Immunisations	1/beneficiary/annum. 300% PR
Dental Procedures - child 6 years and under and Dental Clearance	300% PR for Hospital account and Anaesthetist subject to R1500 up-front payment by member. Dentist and associated accounts from Plus Account

Out of Hospital Benefits

All benefits are limited to available Plus Account balance and will be reimbursed at cost of treatment.

Annual Plus Account

Principal	R 2592
Adult	R 1944
Child	R 648

Any balance remaining at year end will be carried through to the next benefit year. Upon resignation any balance will be transferred to the member. Where the Plus account is depleted in a benefit year, unpaid claims from that year may not be paid from the Plus account of the following year.

Emergency Transportation

Unlimited subject to an authorised admission as per Managed Care Protocol

24 HOUR EMERGENCY LINE:

**084 124
0861 101 569**

Chronic Medication

- **PMB only for legislated CDL conditions**
- **Generic reference pricing & Mediscor primary/core formulary**

Registration required

RAINBOW PLUS CONTRIBUTIONS 2010

	Principal	Adult	Child
Contribution	R 1076	R 812	R 260
Plus Account	R 216	R 162	R 54
Total Contribution	R 1292	R 974	R 314

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-imbursement of claims as described in the Pharos Rules.

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