

Focus on the Major Medical Benefit

The Major Medical Benefit includes cover for hospitalisation, as well as certain specialised procedures and treatment and specialised scans.

Overview of the cover provided in-hospital across the six options

Option	Ingwe Option	Evolve Option	Custom Option	Incentive Option	Extender Option	Summit Option
Cover	Up to 100% of the Momentum Medical Scheme Rate	Up to 100% of the Momentum Medical Scheme Rate ¹	Up to 100% of the Momentum Medical Scheme Rate ¹	Up to 200% of the Momentum Medical Scheme Rate ²	Up to 200% of the Momentum Medical Scheme Rate ²	Up to 300% of the Momentum Medical Scheme Rate
Limit	No overall annual limit applies	No overall annual limit applies	No overall annual limit applies	No overall annual limit applies	No overall annual limit applies	No overall annual limit applies
Provider	Any hospital, Ingwe Network or State hospitals	Evolve Network hospitals Certain procedures are only covered in day hospitals	Any or Associated hospitals	Any or Associated hospitals	Any or Associated hospitals	Any hospital

¹ On the Custom and Evolve Options, a co-payment of R1 640 is payable per authorisation, except for motor vehicle accidents, maternity confinements and emergency treatment. A co-payment may also apply per authorisation for certain specialised procedures/treatment (see table on page 2)

² On the Incentive and Extender Options, co-payments may apply for certain specialised procedures/treatment (see table on page 2)

+ You may choose to make use of additional products available from Momentum Metropolitan Holdings Limited (Momentum), to seamlessly enhance your medical aid. Momentum is not a medical scheme, and is a separate entity to Momentum Medical Scheme. The complementary products are not medical scheme benefits. You may be a member of Momentum Medical Scheme without taking any of the complementary products.



How specialised procedures/treatment are covered on the Evolve Option

The standard Evolve Option co-payment of **R1 640** per authorisation applies to these procedures and treatments regardless of where they are performed
Plus the Specialised Procedures co-payment of **R3 280** per authorisation applies if performed in an acute or day hospital

Arthroscopies, Back and neck surgery*, Carpal tunnel release, Functional nasal and sinus procedures, Joint replacements*, Laparoscopies

Performed in a day hospital or acute hospital, subject to the relevant co-payment listed above

Gastroscopies, Colonoscopies, Cystoscopies, Sigmoidoscopies, Nail surgery, Removing of extensive skin lesions

Performed out of hospital, in a day hospital or in an acute hospital, subject to the relevant co-payment listed above

Conservative back and neck treatment*
Removal of minor skin lesions
Treatment of diseases of the conjunctiva
Treatment of headache
Treatment of adult influenza, Treatment of adult respiratory tract infections

Low severity cases are not covered by the Scheme but can be paid from HealthSaver+, if available

High severity cases in an acute hospital are paid by the Scheme, subject to the relevant co-payment listed above

View the list of day hospitals on the Momentum app or momentummedicalscheme.co.za

+ HealthSaver is a complementary product offered by Momentum

* Covered at State facilities

How specialised procedures/treatment are covered on the Custom Option

The standard Custom Option co-payment of **R1 640** per authorisation applies to these procedures and treatments regardless of where they are performed
Plus the Specialised Procedures co-payment of **R1 640** per authorisation applies if performed in a day hospital, or **R3 280** per authorisation if performed in an acute hospital (hospital where overnight admissions apply)

Arthroscopies, Back and neck surgery, Carpal tunnel release, Functional nasal and sinus procedures, Joint replacements, Laparoscopies

Performed in a day hospital or acute hospital, subject to the relevant co-payment listed above

Gastroscopies, Colonoscopies, Cystoscopies, Sigmoidoscopies, Nail surgery, Removing of extensive skin lesions

Performed out of hospital, in a day hospital or in an acute hospital, subject to the relevant co-payment listed above

Conservative back and neck treatment
Removal of minor skin lesions
Treatment of diseases of the conjunctiva
Treatment of headache
Treatment of adult influenza, Treatment of adult respiratory tract infections

Low severity cases are not covered by the Scheme but can be paid from HealthSaver+, if available

High severity cases in an acute hospital are paid by the Scheme, subject to the relevant co-payment listed above

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How specialised procedures/treatment are covered on the Incentive and Extender Options

A co-payment of **R1 640** per authorisation applies to these procedures and treatments if performed in a day hospital
Or a co-payment of **R3 280** per authorisation applies to these procedures/treatment if performed in an acute hospital (hospital where overnight admissions apply)

Arthroscopies, Back and neck surgery, Carpal tunnel release, Functional nasal and sinus procedures, Joint replacements, Laparoscopies

Performed in a day hospital or acute hospital, subject to the relevant co-payment listed above

Gastroscopies, Colonoscopies, Cystoscopies, Sigmoidoscopies, Nail surgery, Removing of extensive skin lesions

Performed out of hospital, in a day hospital or in an acute hospital, subject to the relevant co-payment listed above

Conservative back and neck treatment
Removal of minor skin lesions
Treatment of diseases of the conjunctiva
Treatment of headache
Treatment of adult influenza, Treatment of adult respiratory tract infections

Low severity cases are not covered by the Scheme but can be paid from Day-to-day Benefits or HealthSaver+, if available

High severity cases in an acute hospital are paid by the Scheme, subject to the relevant co-payment listed above

View the list of day hospitals on the Momentum app or momentummedicalscheme.co.za

+ HealthSaver is a complementary product offered by Momentum



Hospitalisation and Major Medical Benefit

This benefit covers hospital accounts and related costs incurred in hospital from admission to discharge in line with the Scheme Rules and the clinical protocols that Momentum Medical Scheme has established for the treatment of each condition.

1. The hospitalisation benefit includes seven days' supply of take-home medication on discharge from hospital.
2. Cover for MRI and CT scans, magnetic resonance cholangiopancreatography (MRCP), whole body radioisotope and PET scans in- and out-of-hospital:
 - Ingwe: limited to Prescribed Minimum Benefits at State facilities. The scan report must confirm the Prescribed Minimum Benefit diagnosis in order for the claim to be paid.
 - Custom and Evolve: no annual limit applies, subject to co-payment of R2 740 per scan.
 - Incentive, Extender and Summit Options: no annual limit applies, subject to co-payment of R2 480 per scan.
3. In-hospital dentistry for impacted wisdom teeth, dentistry related to trauma and general anaesthesia for children under 7 years:
 - Ingwe and Evolve Options
 - No cover. Maxillo-facial trauma is covered at State facilities, limited to Prescribed Minimum Benefits.
 - Custom Option
 - Maxillo-facial surgery (excluding implants) and general anaesthesia for children under 7: Hospital and anaesthetist accounts paid from Major Medical Benefit, subject to R1 640 co-payment per authorisation. Dental, dental specialist and maxillo-facial surgeon accounts paid from Momentum HealthSaver⁺, if available.
 - Impacted wisdom teeth: Hospital and anaesthetist accounts paid from Major Medical Benefit, subject to R3 000 co-payment for day hospitals and R5 500 co-payment for other hospitals, per authorisation. Dental, dental specialist and maxillo-facial surgeon accounts paid from Major Medical Benefit, up to 100% of Momentum Medical Scheme Rate.
 - Incentive Option
 - Maxillo-facial surgery (excluding implants) and general anaesthesia for children under 7: Hospital and anaesthetist accounts paid from Major Medical Benefit, subject to R1 500 co-payment per authorisation. Dental, dental specialist and maxillo-facial surgeon accounts paid from Savings, if available.
 - Impacted wisdom teeth: Hospital and anaesthetist accounts paid from Major Medical Benefit, subject to R3 000 co-payment for day hospitals and R5 500 co-payment for other hospitals, per authorisation. Dental, dental specialist and maxillo-facial surgeon accounts paid from Major Medical Benefit, up to 100% of Momentum Medical Scheme Rate.



- Extender Option
 - Maxillo-facial surgery (excluding implants) and general anaesthesia for children under 7: Hospital and anaesthetist accounts paid from Major Medical Benefit, subject to R1 500 co-payment per authorisation. Dental, dental specialist and maxillo-facial surgeon accounts paid from Day-to-day Benefit and accumulate towards limit.
 - Impacted wisdom teeth: Hospital and anaesthetist accounts paid from Major Medical Benefit, subject to R3 000 co-payment for day hospitals and R5 500 co-payment for other hospitals, per authorisation. Dental, dental specialist and maxillo-facial surgeon accounts paid from Major Medical Benefit, up to 100% of Momentum Medical Scheme Rate.
- Summit Option
 - Maxillo-facial surgery (excluding implants) and general anaesthesia for children under 7: Hospital and anaesthetist accounts paid from Major Medical Benefit. Dental, dental specialist and maxillo-facial surgeon accounts paid from Day-to-day Benefit and accumulate towards overall day-to-day limit of R28 000 per beneficiary.
 - Impacted wisdom teeth: Hospital and anaesthetist accounts paid from Major Medical Benefit. Dental, dental specialist and maxillo-facial surgeon accounts paid from Major Medical Benefit, up to 100% of Momentum Medical Scheme Rate.

Obtaining authorisation for Major Medical Benefits

You need to obtain pre-authorisation for hospitalisation, day clinic admissions, specialised procedures/treatment, specialised scans (MRI and CT scans, magnetic resonance cholangiopancreatography (MRCP), whole body radioisotope and PET scans) and any other Major Medical Benefits. You need to obtain a separate pre-authorisation from Momentum Medical Scheme for any in-hospital physiotherapy. We provide pre-authorisation once we have verified benefits and applied Scheme Rules and protocols.

If the hospital or doctor obtains the authorisation on your behalf, we will send you a confirmation via email if we have your email address in our records. It is important for you to check if you will need to pay any co-payments or shortfalls as a result of not using a Designated Service Provider, or as a result of any benefit limits or protocols.

How to obtain pre-authorisation

- Log in to the **Momentum app** or contact our member call centre:
 - WhatsApp us on +27860117859;
 - Go to momentummedicalscheme.co.za and click on the help button to use the web chat facility;
 - Email us at member@momentumhealth.co.za; or
 - Call us on 0860 11 78 59.
- Make a note of the authorisation number
- Give the authorisation number to your provider



When you contact us, make sure you have the following information available:

1. Your membership number
2. The name and details of the patient
3. The reason for hospital admission, procedure or specialised scan
4. The procedure code (CPT), diagnosis code (ICD-10) and tariff code (these details are available from your treating doctor)
5. The date of admission
6. The contact details and practice number of the referring GP
7. The contact details and practice number of the specialist
8. The name and practice number of the hospital, day clinic or radiologist.

Important notes

- You need to obtain pre-authorisation from Momentum Medical Scheme at least 48 hours before you or your dependants are admitted to a hospital, receive treatment covered under the Specialised Procedures/Treatment benefit or Major Medical Benefit, or have a specialised scan.
- If you do not get authorisation in time, you will need to pay a 30% co-payment on all accounts related to the claim event and the Scheme would be responsible for 70% of the negotiated tariff, provided authorisation would have been granted according to the Rules and protocols of the Scheme. This is in addition to any other co-payments that apply.
- In the case of an emergency, you, a family member or a friend must obtain authorisation within 72 hours of admittance.
- Ingwe Option: If you choose Ingwe Network hospitals and do not use this provider, you will have a co-payment of 30% on the hospital account. If you choose State hospitals and do not use this provider, you will have a co-payment. This co-payment will be the difference in the cost between State facility charges and the amount charged by the provider you use.
- Evolve Option: If you do not use Evolve Network hospitals, you will have a 30% co-payment on the hospital account.
- Custom, Incentive and Extender Options: If you choose Associated hospitals and do not use this provider, you will be liable for a 30% co-payment on the hospital account.