

PHYSIO TIPS

IN FEBRUARY

MAKING SENSE OF MEDICAL AID



Physio Tips is a monthly newsletter aimed at educating the public regarding the latest evidence in injury management, without all the medical jargon. We will keep it simple and concise, but full of knowledge gems in order to empower and equip you.

REACH OUT TO US

In South Africa there are so many different medical aid options - it can be very overwhelming. There are so many different providers to choose from, and each provider has multiple different plan options. It is however very important to navigate through this to ensure that you have a plan that is appropriate for you, and that you understand how much cover you are entitled to.

In this month's newsletter we will give you some tips regarding physiotherapy cover as well as advice on making informed decisions when it comes to choosing your plan.



How do I choose a medical aid?

Choosing the right package for you will involve doing some research and also evaluating what your individual needs are. Things to consider include your age, your geographical area, your overall health and your life stage. If you are for instance planning to start a family, looking at maternity benefits is very important. Some medical aids also have cheaper options if you use certain hospitals in their network - do however make sure you have easy access to these networks.

[Link to: TIPS on choosing the right medical aid package](#)

What about GAP cover?

Medical aids have a standard rate for reimbursements and payments of procedures and other services. Specialists may often charge 2 or 3 times the standard rate. If you do not have GAP cover, a co-payment will be required. Some medical aid packages stipulate that they cover 200% (or more) of the standard fee - in these cases GAP cover is less needed. For PMB conditions GAP cover is usually not necessary.



When do I qualify for Physiotherapy cover?

Most medical aid plans do not have specific cover for physiotherapy. Most of the time physiotherapy is covered by your medical savings - it is therefore important to find out how much funds are available for the year when deciding to start with physiotherapy. Physiotherapy can also be covered under PMB conditions or specific rehab programs one can apply for under some medical aids (see below).

Back and neck pain programs

Medical aids have realised that spinal surgery has become 'overprescribed' and this leads to unnecessary expenses and invasive procedures in conditions which could have responded to proper rehabilitation. To compensate for this, some providers have launched special programs for chronic neck/back pain. For these programs you are usually screened with the START back tool and then referred to an accredited physio. At our practice we are accredited by Fedhealth, Medscheme and possibly Discovery. If you have longstanding neck or back pain, enquire with your medical aid to find out if they offer this package. Bestmed, GEMS, Bonitas and Keyhealth make use of documentatin based care clinics.



[Link to STARTback screening tool](#)



What are PMBs

PMB stands for 'prescribed minimum benefit' and refers to a list of conditions which qualify for a set of defined benefits. This applies regardless of the plan you are on. PMB's were implemented by the Medical Schemes Act to ensure that medical scheme beneficiaries have continuous healthcare. The list of conditions include any emergency medical condition, 271 medical conditions and 25 chronic conditions (including mental health diagnoses). See below link for a full list:

[List of all PMB conditions](#)



PMB example and how to apply

Most traumatic incidents (e.g. broken leg from a fall) will qualify for PMB medical treatment. This unfortunately does not imply that post-operative rehab will be covered. It is however always worth submitting a PMB application. Request the form from your medical aid and ask your Doctor and physiotherapist to complete it with a motivation letter.

What are your responsibilities

Educate yourself about your own medical scheme and what is covered. Also check whether you need to be making use of a specific list of service providers. Obtain as much information as you can about your condition and medications prescribed (e.g. whether generic drugs are available). Know who to contact if you are unhappy with a service or lack of cover. If you have to submit accounts to your scheme, make sure it's done within 4 months. Keep track of your savings balance.



Our approach at the practice

As a general rule, we do not submit claims to medical aids. We kindly ask our clients to pay upfront and claim individually from their medical aid. The reason being that claims can often be rejected due to insufficient funds or lack of cover for out-patient physiotherapy. It is therefore important for you to be fully informed of what you are eligible for. We are always willing to make exceptions will do our best to help and accommodate our patients.

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Where You Can Find Us



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