



# Prescribed Minimum Benefits (PMBs)

WHAT	ARE	PMBs?

- A set of defined benefits to ensure that all medical scheme members have access to certain minimum health services, regardless of benefit option selected.
- Aiming to provide continuous care to improve health and well-being and make healthcare more affordable.
- A feature of the Medical Schemes Act, in terms of which medical schemes have to cover the costs related to the diagnosis, treatment and care of:-
  - any emergency medical condition;
  - a limited set of 271 medical conditions (defined in the Diagnosis Treatment Pairs); and
  - 25 chronic conditions (defined in the Chronic Disease List).

#### Cover in terms of COVID-19 under PMBs



### PART OF PMBs DIAGNOSIS LIST

- Screening
- Diagnosis and
- Management of COVID-19 infection



#### **REQUIRED BY LAW**

All medical schemes are required by law to pay for the diagnosis, treatment and care costs for this condition, in full, irrespective of plan type or option.



#### PMB REGULATIONS

Medical schemes may not fund PMB conditions from a member's **Medical Savings Account**, as this would be a violation of the PMB Regulations.

## **Understand your RIGHTS in terms of PMB BENEFITS**

Medical schemes may require you to go to a specific doctor, facility or designated service provider (DSP) to obtain the PMB benefits, **except in an emergency**.

### ADDITIONAL QUALIFYING CONDITIONS

### (emergency medical conditions)

Any complications arising from infection with COVID-19 e.g.

- Pneumonia
- Respiratory failure
- Renal failure
- Complete or partial lung collapse

## COVID-19 ICD-10 Codes

#### Providing health benefit solutions for continued enhancement of our clients' wellness and well-being

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