

13019554
CAULIFLOWER GIRAFFE
1 NOKWE AVE
UMHLANGA
4051

2026/03/03
Letter Ref: 540278692
Member Number: 13019554

Dear Cauliflower T Giraffe

PROOF OF MEMBERSHIP

This document serves as confirmation of membership for all the beneficiaries listed below.

Member information

Member	Cauliflower T Giraffe	Membership number	13019554
ID / Passport number	130195540	Benefit option	Beat2 Network
Subscription: Method of payment	Arrear Payer	Total subscription payable	R11399.00
Group name	Hip Payer 101	Unique number	13019554
Effective date	2026/03/01	Date of issue	2026/03/03

Contact information			
Cell phone number	0821111111111	Contact number	0310000000
Email address	SINDISWA.MASONDO@BESTMED.CO.ZA		

Advisor detail			
Advisor name	Not applicable	Contact number	Not applicable
Email address	Not applicable		

Registered beneficiary(ies)

Beneficiary number	Name and surname	ID / Passport number	Beneficiary type
00	Cauliflower T Giraffe	130195540	Holder
01	Rutabaga R Pebble	130195540	Adult
02	Green Beans S Playground	130195540	Adult
03	Celery T Bucket	130195540	Adult
04	Post Giraffe	POS11234	Adult

General waiting period(s) (GWP)

Beneficiary number	Name and surname	Join date	Benefit date	GWP
00	Cauliflower T Giraffe	2013/09/01	2013/09/01	No
01	Rutabaga R Pebble	2013/09/01	2013/09/01	No
02	Green Beans S Playground	2013/09/01	2013/09/01	No
03	Celery T Bucket	2013/09/01	2013/09/01	No
04	Post Giraffe	2026/03/01	2026/03/01	No

General waiting periods

The Medical Schemes Act allows for medical schemes to apply general waiting periods based on an applicant's previous medical scheme history. The two different general waiting periods are:

- Three-month General Waiting Period (GEN): during this general waiting period only Prescribed Minimum Benefit (PMB) related claims will be funded by the Scheme.
- Three-month General Waiting Period (PMB): during this general waiting period no claims will be funded by the Scheme.

PMB and emergencies during the three-month general waiting period (GEN)

PMB is a set of defined benefits to ensure that all medical scheme beneficiaries have access to certain minimum health services, regardless of the benefit option they are registered on. It is a feature of the Medical Schemes Act in terms of which medical schemes must cover the costs related to the diagnosis, treatment and care of:

- any emergency medical condition
- a limited set of 270 medical conditions (defined in the Diagnosis Treatment Pairs)
- 25 chronic conditions (defined in the Chronic Disease List)

PMB conditions are listed in the form of Diagnosis Treatment Pairs (DTPs). A DTP links a specific diagnosis to a specific treatment that is at least equal to treatment standards enforced in the public sector. For non-emergency PMBs, medical scheme beneficiaries have a responsibility to make use of their scheme's Designated Service Providers (DSPs) to ensure full payment of verified PMB claims.

Condition specific waiting period(s)

Condition-specific waiting period Not applicable

Monitor for possible non-disclosure

Monitor for non-disclosure Not applicable.

Late joiner penalty(ies) (LJP)

Beneficiary number	Name and surname	Effective date	LJP on risk contribution
00	Cauliflower T Giraffe		0.00 x risk contribution
01	Rutabaga R Pebble		0.00 x risk contribution
02	Green Beans S Playground		0.00 x risk contribution
03	Celery T Bucket		0.00 x risk contribution
04	Post Giraffe		0.00 x risk contribution

Late joiner penalties

This is an indefinite penalty imposed on beneficiaries who are joining a medical scheme for the very first time at 35 years old, or older, and beneficiaries, who were a member / dependant of a medical scheme since 1 April 2001, but there was a break in membership exceeding three consecutive months. The maximum penalty is calculated according to a formula prescribed by the Medical Schemes Act.

A medical scheme may apply premium penalties to a late joiner and such penalties must be applied only to the portion of the contribution related to the member or any adult dependant who qualifies for late joiner penalties.

The premium penalties referred to in sub-regulation (1) shall not exceed the following bands:

Penalty bands	Maximum penalty
1-4 years	0.05 x risk contribution
5-14	0.25 x risk contribution
15-24	0.50 x risk contribution
25+	0.75 x risk contribution

Contribution

Beneficiary number	Name and surname	Risk	LJP	Savings	Total
00	Cauliflower T Giraffe	R2331.00	R0.00	R444.00	R2775.00
01	Rutabaga R Pebble	R1811.00	R0.00	R345.00	R2156.00
02	Green Beans S Playground	R1811.00	R0.00	R345.00	R2156.00
03	Celery T Bucket	R1811.00	R0.00	R345.00	R2156.00
04	Post Giraffe	R1811.00	R0.00	R345.00	R2156.00
Total monthly contribution					R11399.00

Additional Information

Access to benefits for conditions on the Chronic Disease List (CDL) and non-Chronic Disease List (non-CDL):

- Once the waiting period/s expires, members will not have automatic access to chronic benefits

for conditions on the CDL and/or the non-CDL benefits. You will have to apply for chronic benefits for these conditions by completing a chronic medicine application form.

- Please download the chronic medicine application form on our website <https://www.bestmed.co.za/benefits-and-cover/medicine-and-chronic-benefits#!medicinedocuments>, alternatively contact our Contact Centre on 086 000 2378 or service@bestmed.co.za.

General

Please ensure that all the information displayed in this document is up-to-date and correct, if not, please contact us at membership@bestmed.co.za to rectify it.

We're eager to be of service, should you have any queries with regards to your membership, please contact us on any of the platforms listed below.

Contact Centre	Website	Smartphone app
086 000 2378 service@bestmed.co.za Mon - Fri: 08:00 to 17:00 Sat: 08:00 to 13:00	www.bestmed.co.za	Download the Bestmed App via the Play Store , App Store , or Huawei App Gallery

Personally Yours,

Bestmed Medical Scheme
Membership Department