

BESTMED SUMMARY OF RULE CHANGES FOR 2024

The changes for 2024 on the Substantive Rules and Annexures, approved and registered by the Registrar of the Council for Medical Schemes (CMS) with effect from 1 January 2024, are summarised below.

1. **CHANGES TO THE SUBSTANTIVE RULES FROM 1 JANUARY 2024**

- 1.1 Percentage change on the current Rule 4.79 definition of “Scheme tariff” from 169.87% to 183.37%.

2. **CHANGES TO THE SUBSCRIPTION TABLES FROM 1 JANUARY 2024**

- 2.1 The proposed annual increase on the Subscriptions (Annexure A) of the Rules, where the increase in gross contributions for all benefit options is 9.6%.
- 2.2 Editorial changes to ensure consistency of text and annexure numbers after the addition of the Beat3 Plus benefit option’s subscriptions.

3. **CHANGES TO THE BENEFIT OPTIONS FROM 1 JANUARY 2024**

BENEFIT OPTIONS – ANNEXURE B.1 – B.3

Restructuring or changes of benefits and limits take place throughout the Beat range [Annexure B.1], the Pace range [Annexure B.2] and the Rhythm range [Annexure B.3]. These are as follows:

- 3.1 Introduction of a benefit option Beat3 Plus to the Beat range.
- 3.2 Cosmetic changes to the rule numbers across all options due to the addition of new benefit rules.
- 3.3 Editorial changes to ensure consistency of text in the rules.
- 3.4 **Hospital, hospital-related benefits and other major medical expenses**
On rules 1.2 for the Beat range and 3.2 for the Rhythm range. The rule changes propose, *inter alia*, the following:
- 3.4.1 Beat range co-payments
The co-payment on the Beat Network benefit options for the voluntary use of a non-designated hospital network changes from R13 078 to R13 732.
- 3.4.2 Rhythm range co-payments
The co-payment on the Rhythm benefit options for the voluntary use of a non-designated hospital network changes from R13 078 to R13 732.
- 3.5 **Biological medicine during hospitalisation**
Limit increases to the Beat, Pace1 and Rhythm2 benefit options that do not have biologicals and other high-cost medicine limits.
- 3.6 **Treatment of chemical and substance abuse**
Changes of the benefit limit on rules 1.2.5 on the Beat range and 2.2.5 on the Pace range from R35 573 to R37 352.
- 3.7 **Stem cell transplants**
Addition of stem cell transplant benefits across all benefit options.

3.8 Dental / Oral / Jaw surgery

3.8.1 Dental and oral surgery (in- and/or out-of-hospital) benefit

Limit changes on sub-rules 1.2.10.1 on the Beat range, 2.2.10.1 on the Pace range and 3.2.10.1 on the Rhythm range, per family, are as follows:

Benefit options	2023	2024
Beat2 and Beat2 Network	R5 782	R6 071
Beat3, Beat3 Network and Beat3 Plus	R8 893	R9 338
Beat4	R11 117	R11 673
Pace1	R8 893	R9 338
Pace2	R14 779	R15 518
Pace3	R18 571	R19 500
Pace4	R22 233	R23 345

3.8.2 Major medical maxillofacial surgery benefit

Limit changes on sub-rules 1.2.10.2 on the Beat range and 2.2.10.2 on the Pace range, per family, are as follows:

Benefit options	2023	2024
Beat3, Beat3 Network and Beat3 Plus	R14 256	R14 969
Beat4	R14 518	R15 244
Pace1	R14 386	R15 105

3.9 Prosthesis benefits

Changes to rules 1.2.11 on the Beat range, 2.2.11 on the Pace range and 3.2.11 on the Rhythm range, and sub-rules for the “Prosthesis – Internal”, “Prosthesis – External” and “Exclusions on joint replacement surgery for non-PMB conditions”.

3.9.1 Prosthesis – Internal

Limit changes on sub-rule 1.2.11.1 for the Beat range are as follows:

Benefit options	Benefit description	2023	2024
Beat1, Beat1 Network, Beat2 and Beat2 Network Sub-limits per beneficiary	Overall limit per family	R86 841	R91 183
	Vascular	R50 000	R52 500
	Pacemaker dual chamber	R47 344	R49 711
	Spinal including artificial disk	R34 661	R36 394
	Drug-eluting stents	PMBs and DSP products only	PMBs and DSP products only
	Mesh	R12 164	R12 772
	Gynaecology / Urology	R9 940	R10 437
	Lens implants	R7 585	R7 964
	Functional	R31 000	R32 550

Benefit options	Benefit description	2023	2024
Beat3, Beat3 Network and Beat3 Plus Sub-limits per beneficiary	Overall limit per family	R87 757	R92 145
	Vascular	R60 000	R63 000
	Pacemaker dual chamber	R47 344	R49 711
	Spinal including artificial disk	R34 789	R36 528
	Drug-eluting stents	PMBs and DSP products only	R12 838
	Mesh	R12 227	R12 838
	Gynaecology / Urology	R10 098	R10 603
	Lens implants	R7 585	R7 964
	Functional	R32 000	R33 600

Benefit option	Benefit description	2023	2024
Beat4 Sub-limits per beneficiary	Overall limit per family	R107 122	R112 478
	Vascular	R65 000	R68 250
	Pacemaker dual chamber	R61 992	R65 092
	Spinal including artificial disk	R37 013	R38 864
	Drug-eluting stents	R20 795	R21 835
	Mesh	R13 733	R14 420
	Gynaecology / Urology	R10 071	R10 575
	Lens implants	R7 847	R8 239
	Functional	R34 000	R35 700

Limit changes on sub-rule 2.2.11.1 for the Pace range are as follows:

Benefit option	Benefit description	2023	2024
Pace1 Sub-limits per beneficiary	Overall limit per family	R99 396	R104 366
	Vascular	R65 000	R68 250
	Pacemaker dual chamber	R61 862	R64 955
	Spinal including artificial disk	R36 227	R38 038
	Drug-eluting stents	PMBs and DSP products only	PMBs and DSP products only
	Mesh	R13 602	R14 282
	Gynaecology / Urology	R9 809	R10 299
	Lens implants	R7 455	R7 828
	Functional	R34 000	R35 700

Benefit option	Benefit description	2023	2024
Pace2 Sub-limits per beneficiary	Overall limit per family	R127 646	R134 028
	Vascular	R65 000	R68 250
	Pacemaker dual chamber	R68 989	R72 438
	Spinal including artificial disk	R63 993	R67 193
	Drug-eluting stents	R20 926	R21 972
	Mesh	R20 926	R21 972
	Gynaecology / Urology	R15 628	R16 409
	Lens implants	R13 419	R14 090
	Hip prosthesis and other major joints	R57 479	R60 353
	Knee prosthesis	R66 700	R70 035
	Minor joints	R24 783	R26 022
	Functional	R36 000	R37 800

Benefit option	Benefit description	2023	2024
Pace3 Sub-limits per beneficiary	Overall limit per family	R128 300	R134 715
	Vascular	R69 000	R72 450
	Pacemaker dual chamber	R68 989	R72 438
	Spinal including artificial disk	R64 115	R67 321
	Drug-eluting stents	R20 926	R21 972
	Mesh	R20 926	R21 972
	Gynaecology / Urology	R15 694	R16 479
	Lens implants	R13 419	R14 090
	Hip prosthesis and other major joints	R57 545	R60 422
	Knee prosthesis	R67 027	R70 378
	Minor joints	R24 783	R26 022
	Functional	R36 000	R37 800

Benefit option	Benefit description	2023	2024
Pace4 Sub-limits per beneficiary	Overall limit per family	R148 048	R155 450
	Vascular	R69 000	R72 450
	Pacemaker dual chamber	R68 989	R72 438
	Spinal including artificial disk	R74 030	R77 732
	Drug-eluting stents	R24 653	R25 886
	Mesh	R21 710	R22 796
	Gynaecology / Urology	R17 918	R18 814
	Lens implants	R19 840	R20 832
	Hip prosthesis and other major joints	R66 243	R69 555
	Knee prosthesis	R76 705	R80 540
	Minor joints	R24 653	R25 886
	Functional	R40 000	R42 000

Limit changes on sub-rule 3.2.11.1 for the Rhythm range are as follows:

Benefit option	Benefit description	2023	2024
Rhythm1 and Rhythm2 Sub-limits per beneficiary	Overall limit per family	R58 461	R61 384
	Vascular	R50 000	R52 500
	Pacemaker dual chamber	R47 344	R49 711
	Spinal including artificial disk	R28 968	R30 416
	Drug-eluting stents	PMBs and DSP products only	PMBs and DSP products only
	Mesh	R10 594	R11 124
	Gynaecology / Urology	R8 750	R9 188
	Lens implants	R6 083	R6 387
	Functional	R31 000	R32 550

3.9.2 Prosthesis – External

The benefit is available per family only on the Beat4, Pace1, Pace2, Pace3 and Pace4 benefit options limit changes are as follows:

Benefit options	2023	2024
Beat4	R25 765	R27 053
Pace1	R25 242	R26 504
Pace2	R30 080	R31 584
Pace3	R30 212	R31 723
Pace4	R34 135	R35 842

3.9.3 Exclusions on joint replacement surgery for non-PMB conditions

The benefit is applicable on the Beat1, Beat1 Network, Beat2, Beat2 Network, Beat3, Beat3 Network, Beat3 Plus, Beat4, Pace1, Rhythm1 and Rhythm2 benefit options only. Limit changes are as follows:

Benefit options	Benefit description	2023	2024
Beat1, Beat1 Network, Beat2 and Beat2 Network	Hip prosthesis and other major joints	R36 489	R38 313
	Knee prosthesis	R44 990	R47 240
	Minor joints	R13 995	R14 695

Benefit options	Benefit description	2023	2024
Beat3, Beat3 Network and Beat3 Plus	Hip prosthesis and other major joints	R36 751	R38 589
	Knee prosthesis	R45 474	R47 748
	Minor joints	R13 995	R14 695

Benefit option	Benefit description	2023	2024
Beat4	Hip prosthesis and other major joints	R38 059	R39 962
	Knee prosthesis	R50 562	R53 090
	Minor joints	R15 536	R16 313

Benefit option	Benefit description	2023	2024
Pace1	Hip prosthesis and other major joints	R36 881	R38 725
	Knee prosthesis	R49 045	R51 497
	Minor joints	R15 237	R15 999

Benefit option	Benefit description	2023	2024
Rhythm1 and Rhythm2	Hip prosthesis and other major joints	R29 689	R31 173
	Knee prosthesis	R37 536	R39 413
	Minor joints	R14 059	R14 762

3.10 Medically necessary breast reduction surgery

Sub-rule 2.2.12 on the Pace4 benefit option. Limit changes from R52 850 to R55 493 per family.

3.11 Breast surgery for cancer

- Introduction of this benefit to the Beat range sub-rule 1.2.12, Pace1 and Rhythm range sub-rule 3.2.12 as PMB.
- Removed the benefit limit applicable on sub-rule 2.2.18 for Pace2, Pace3 and Pace4 benefit options and replaced with PMB cover.
- Name change of this benefit from "Mammary surgery".

3.12 Orthopaedic and medical appliances during hospitalisation

Sub-rule 3.2.13 on the Rhythm2 benefit option. Limit changes from R7 194 to R7 554 per family.

3.13 Refractive surgery

Limit changes on rules 1.2.21 for the Beat range and 2.2.22 for the Pace range are as follows:

Benefit options	2023	2024
Beat3, Beat3 Network and Beat3 Plus	R9 155	R9 613
Beat4	R10 333	R10 850
Pace1	R9 887	R10 381
Pace2	R10 331	R10 848
Pace3 and Pace4	R11 117	R11 673

3.14 Advance illness benefit

Name change of this benefit from “Palliative care and home-based care in lieu of hospitalisation”.

Limit changes on rules 1.2.24 on the Beat range, 2.2.25 on the Pace range and 3.2.24 on the Rhythm range:

Benefit options	2023	2024
Beat1, Beat1 Network, Beat2, Beat2 Network, Beat3, Beat3 Network, Beat3 Plus and Rhythm2	R63 420	R66 591
Beat4	R95 130	R99 887
Pace1	R79 275	R83 239
Pace2, Pace3 and Pace4	R126 840	R133 182

3.15 Ambulance and emergency evacuation services

Change of service provider from ER24 to Netcare 911.

3.16 Day procedures at a day hospital facility

- Increase of co-payment from R2 500 to R2 625 on day procedures at a day hospital facility on all benefit options.
- Increase of limit for non-PMB procedures funded on Rhythm1 from R50 000 to R52 500.
- Adjustment of the day procedures benefit to widen the provision in respect of service providers not being limited to designated service providers (DSP) which are generally used for prescribed minimum benefits (PMB) services, to include providers contracted with the Scheme to treat members for non-PMB conditions as well.

3.17 Co-payments

Beat range rule 1.2.28

The co-payment on the Beat Network benefit options for the voluntary use of a non-designated hospital network changes from R13 078 to R13 732.

Rhythm range rule 3.2.26

The co-payment on the Rhythm benefit option for the voluntary use of a non-designated hospital network changes from R13 078 to R13 732.

3.18 Medicine benefits

3.18.1 Non-CDL medicine benefits

Rules 1.3.1 on the Beat range, 2.3.1 on the Pace range and 3.3.1 on the Rhythm range. Limit changes are as follows:

Benefit options	2023	2024
Beat3, Beat3 Network and Beat3 Plus	M = R3 793 and M1+ = R7 716	M = R3 983 and M1+ = R8 102
Beat4	M = R8 331 and M1+ = R16 663	M = R8 748 and M1+ = R17 496
Pace1	M = R7 324 and M1+ = R14 648	M = R7 690 and M1+ = R15 380
Pace2	M = R10 000 and M1+ = R20 000	M = R10 500 and M1+ = R21 000
Pace3	M= R15 368 and M1+ = R30 735	M= R16 136 and M1+ = R32 272
Pace4	M= R21 905 and M1+ = R44 009	M= R23 000 and M1+ = R46 209

3.18.2 Biologicals and other high-cost medicine

Rules 1.3.3 on the Beat range, 2.3.3 on the Pace range and 3.3.3 on the Rhythm range. Limit changes are as follows:

Benefit options	2023	2024
Pace2	R182 977	R192 126
Pace3	R366 197	R384 507
Pace4	R541 971	R569 070

3.18.3 Acute medicine

Rules 1.3.4 on the Beat range, 2.3.5 on the Pace range and 3.3.5 on the Rhythm range. Limit changes are as follows:

Benefit options	2023	2024
Beat4	M = R3 178 and M1+ = R6 421	M = R3 337 and M1+ = R6 742
Pace1	M = R2 591 and M1+ = R5 363	M = R2 721 and M1+ = R5 631
Pace2	M = R3 000 and M1+ = R6 000	M = R3 150 and M1+ = R6 300
Pace3	M= R2 000 and M1+ = R4 500	M= R2 100 and M1+ = R4 725
Pace4	M= R9 809 and M1+ = R15 237	M= R9 809 and M1+ = R15 237

3.18.4 Over-the-counter (OTC) medicine

Rules 1.3.5 on the Beat range, 2.3.6 on the Pace range and 3.3.6 on the Rhythm range changes are as follows:

- Limit increase from R1 057 to R1 110 on the Beat4, Pace1, Pace2 and Pace3 benefit options.
- Limit increase from R634 to R666 on the Rhythm2 benefit option.

3.19 Preventative Care Benefits

Preventative care benefits are indicated on rules 1.4 of the Beat range, 2.4 of the Pace range and 3.4 of the Rhythm range. Changes include, *inter alia*, the following sub-rules:

3.19.1 Female contraceptives

On rules 1.4.6 on the Beat range, 2.4.6 on the Pace range and 3.4.6 on the Rhythm range:

- Limit increase across all benefit options and limit changes from R2 550 to R2 678 across all benefit options.
- Addition of cover for insertion of IUD (consultation and procedure) on the Rhythm and Beat benefit options, except for Beat1 and Beat1 Network.

3.19.2 Back and neck preventative programme

Removal of this benefit from all benefit options and added to the out-of-hospital benefits under a different name.

3.19.3 Preventative dentistry benefit

Adjustment of preventative dentistry claiming cycle for scaling and/or polishing as well as fluoride treatment benefits in accordance with the South African Dental Association (SADA) rule, on the Beat and Pace ranges.

3.19.4 Glaucoma screening benefit

Addition of glaucoma screening benefit on Preventative benefits on the Pace2, Pace3 and Pace4 benefit options.

3.19.5 PAP smear benefit

Adjusted provisions to allow funding of PAP smear consultations from Preventative benefits for Beat4 and all the Pace benefit options.

3.19.6 Tempo wellness programme

Tempo wellness programme benefits editorial changes, allowing for both online fitness and nutritional journeys and interventions via smartphones or the Bestmed website.

3.20 Maternity benefits

Maternity benefits are indicated in rules 1.5 of the Beat range, 2.5 of the Pace range and 3.5 of the Rhythm range. Changes are as follows:

- Removed the benefit from Preventative benefits on all benefit options for it to be a stand-alone benefit.
- Limit increase from R127 to R133 for the maternity supplement benefit on the Beat3, Beat3 Network, Beat3 Plus, Beat4, Pace1, Pace2, Pace3, Pace4 and Rhythm2 benefit options.

3.21 Optometry benefits

Optometry benefits indicated on rules 1.6 of the Beat range, 2.6 of the Pace range and 3.6 of the Rhythm range:

- Benefit limits are as the 2023 limits, new limits will be communicated once contracted with the service provider and will be subjected to approval by the Council for Medical Scheme.
- Removal of the name of a specific service provider from all benefit options.
- Removal of non-network optical benefits from the Rhythm1 benefit option.

3.22 Out-of-hospital benefits

Out-of-hospital benefits are indicated on rules 1.7 of the Beat range, 2.7 of the Pace range and 3.7 of the Rhythm range. Limit changes across all benefit options, where an overall day-to-day limit applies, are as follows:

Benefit options	2023	2024
Beat4	M = R14 125 and M1+ = R28 249	M = R14 831 and M1+ = R29 661
Pace1	M = R12 007 and M1+ = R24 012	M = R12 607 and M1+ = R25 213
Pace2	M = R15 000 and M1+ = R30 000	M = R15 750 and M1+ = R31 500
Pace3	M= R20 045 and M1+ = R41 425	M= R21 047 and M1+ = R43 496
Pace4	M= R39 497 and M1+ = R63 693	M= R41 472 and M1+ = R66 878

3.22.1 GP consultations sub-rules 1.7.1 on the Beat range, 2.7.1 on the Pace range and 3.7.1 on the Rhythm range. Limit changes are as follows:

- Addition of “per family” provision for payment of GP consultations on the Rhythm benefit options.

Benefit options	2023	2024
Beat4	M = R3 597 and M1+ = R6 408	M = R3 777 and M1+ = R6 728
Pace1	M = R2 472 and M1+ = R4 970	M = R2 596 and M1+ = R5 219
Pace2	M = R4 579 and M1+ = R9 280	M = R4 808 and M1+ = R9 744
Pace3	M = R4 840 and M1+ = R9 809	M = R5 082 and M1+ = R10 299
Pace4	M= R6 212 and M1+ = R10 071	M= R6 523 and M1+ = R10 575

3.22.2 Diabetes primary care consultation

Removal of the diabetes primary care consultation benefit with HaloCare due to HaloCare’s services being discontinued. These services will be managed by the Scheme as part of the Managed Health Care services.

3.22.3 Continuous/Flash Glucose Monitoring (CGM/FGM) benefit for diabetics

Limit increase on the Pace3 benefit option from R21 140 to R22 197 and on the Pace4 benefit option from R26 425 to R27 746

3.22.4 Out-of-network or casualty visits

Sub-rule 3.7.3 on the Rhythm2 benefit option. Limit changes from R1 569 to R1 647.

3.22.5 Specialist visits sub-rule 3.7.4 on the Rhythm range. Limit changes are as follows:

Benefit options	2023	2024
Rhythm1	R2 325	R2 441
Rhythm2	M = R1 586 and M1+ = R2 643	M = R1 665 and M1+ = R2 775

3.22.6 Basic and specialised dentistry sub-rules 1.7.2 on the Beat range, 2.7.3 on the Pace range and 3.7.5 on the Rhythm range. Limit changes are as follows:

Benefit options	2023	2024
Beat4	M = R6 223 and M1+ = R12 499	M = R6 534 and M1+ = R13 124
Pace1	M = R4 550 and M1+ = R9 234	M = R4 778 and M1+ = R9 696
Pace2	M = R7 628 and M1+ = R15 256	M = R8 009 and M1+ = R16 019
Pace3	M = R8 219 and M1+ = R15 323	M = R8 630 and M1+ = R16 089
Pace4	M= R13 717 and M1+ = R23 152	M= R14 403 and M1+ = R24 310

3.22.7 Medical aids, apparatus and appliances, including wheelchairs and hearing aids sub-rules 1.7.3 on the Beat range, 2.7.4 on the Pace range and 3.7.6 on the Rhythm range. Limit changes are as follows:

Benefit options	2023	2024
Beat4	Medical aids, apparatus and appliances (limit includes wheelchairs) R12 687 per family	Medical aids, apparatus and appliances (limit includes wheelchairs) R13 321 per family
	Hearing aids and/or repairs R11 627 per family per 24 months	Hearing aids and/or repairs R12 208 per family per 24 months
Pace1	Medical aids, apparatus and appliances (limit includes wheelchairs) R12 687 per family	Medical aids, apparatus and appliances (limit includes wheelchairs) R13 321 per family
	Hearing aids R8 811 per family per 24 months	Hearing aids R9 252 per family per 24 months
Pace2	Medical aids, apparatus and appliances R11 509 per family	Medical aids, apparatus and appliances R12 084 per family
	Wheelchairs R15 564 per family per 48 months	Wheelchairs R16 342 per family per 48 months
	Hearing aids R31 716 per beneficiary per 24 months	Hearing aids R33 302 per beneficiary per 24 months
Pace3	Medical aids, apparatus and appliances R11 509 per family	Medical aids, apparatus and appliances R12 084 per family
	Wheelchairs R15 564 per family per 48 months	Wheelchairs R16 342 per family per 48 months
	Hearing aids R35 705 per beneficiary every 24 months	Hearing aids R37 490 per beneficiary every 24 months
Pace4	Medical aids, apparatus and appliances (limit includes insulin pump consumables) R11 509 per family	Medical aids, apparatus and appliances (limit includes insulin pump consumables) R12 084 per family
	Wheelchairs R15 564 per family per 48 months	Wheelchairs R16 342 per family per 48 months
	Hearing aids R39 758 per beneficiary per 24 months	Hearing aids R41 746 per beneficiary per 24 months
	Insulin pump R46 259 per beneficiary every 24 months	Insulin pump R48 572 per beneficiary every 24 months

3.22.8 Supplementary services sub-rules 1.7.4 on the Beat range, 2.7.5 on the Pace range and 3.7.7 on the Rhythm range.

- Addition of supplementary services benefit for Beat3 Plus with a limit per family to be funded firstly from the Scheme limit and thereafter from the medical savings account.
- Limit changes are as follows:

Benefit options	2023	2024
Beat3 Plus	R0	R2 000
Beat4	M = R5 493 and M1+ = R11 156	M = R5 768 and M1+ = R11 714
Pace1	M = R4 852 and M1+ = R10 071	M = R5 095 and M1+ = R10 575
Pace2	M = R3 500 and M1+ = R7 000	M = R3 675 and M1+ = R7 350
Pace3	M = R2 956 and M1+ = R6 212	M = R3 104 and M1+ = R6 523
Pace4	M= R6 212 and M1+ = R12 228	M = R6 523 and M1+ = R12 839

3.22.9 Wound care benefit sub-rules 1.7.5 on the Beat range, 2.7.6 on the Pace range and 3.7.8 on the Rhythm range.

- Limit changes are as follows:

Benefit options	2023	2024
Beat1, Beat1 Network, Beat2, Beat2 Network, Beat3, Beat3 Network and Beat3 Plus	R3 885	R4 079
Beat4	R5 493	R5 768
Pace1	R3 989	R4 188
Pace2	R7 176	R7 535
Pace3	R10 000	R10 500
Pace4	R15 171	R15 930

3.22.10 Basic radiology and pathology sub-rules 1.7.6 on the Beat range, 2.7.7 on the Pace range and 3.7.9 on the Rhythm range. Limit changes are as follows:

Benefit options	2023	2024
Beat4	M = R3 596 and M1+ = R7 324	M = R3 776 and M1+ = R7 690
Pace1 and Pace2	M = R3 596 and M1+ = R7 194	M = R3 776 and M1+ = R7 554
Pace3	M = R3 924 and M1+ = R7 781	M = R4 120 and M1+ = R8 170
Pace4	M= R6 212 and M1+ = R12 228	M= R6 523 and M1+ = R12 839

3.22.11 Specialised diagnostic imaging on sub-rules 1.7.7 on the Beat range, 2.7.8 on the Pace range and 3.7.10 on the Rhythm range.

- Changed the number of MRI and CT scans out-of-hospital from 3 per beneficiary a year to 2 per beneficiary a year on the Specialised diagnostic imaging benefit on the Pace2, Pace3 and Pace4 benefit options. One of the two scans includes a conservative back and neck scan for the lumbar and cervical spine region.
- The conservative back and neck scan for the lumbar and cervical spine region benefit is introduced as part of the limit on Beat range and Pace1 benefit option.

- The conservative back and neck scan for the lumbar and cervical spine region is introduced as PMB services on the Rhythm range.
- Limit changes are as follows:

Benefit options	2023	2024
Beat1, Beat1 Network, Beat2 and Beat2 Network	R5 885	R6 179
Beat3, Beat3 Network and Beat3 Plus	R12 361	R12 979
Beat4	R18 703	R19 638
Pace1	R16 087	R16 891

3.22.12 MHC Back and Neck Programme on sub-rules 1.7.8 on the Beat range, 2.7.9 on the Pace range and 3.7.11 on the Rhythm range, the changes are as follows:

- Added this benefit under the out-of-hospital benefits (previously named Back and neck preventative programme) from under the Preventative benefits on all benefit options.

4. PERSONAL MEDICAL SAVINGS ACCOUNT AND VESTED MEDICAL SAVINGS ACCOUNT – ANNEXURE B.4 FROM 1 JANUARY 2024

- 4.1 Addition of the Beat3 Plus benefit option's gross annual contribution as 25%.
- 4.2 Addition of requirement for claims to be submitted within four months for the use of the medical savings account as well as the vested medical savings account.
- 4.3 Addition of provision that will allow the Scheme to use medical savings account balances to clear the debt on active membership under the vested medical savings account section.
- 4.4 Self-payment gap base limit before the self-payment gap is triggered changed from R1 057 to R1 110.

Benefit options	2023 PMSA gross annual contributions	2024 PMSA gross annual contributions
Beat2 and Beat2 Network	16%	16%
Beat3 and Beat3 Network	15%	15%
Beat3 Plus	-	25%
Beat4	14%	14%
Pace1	19%	19%
Pace2	14%	14%
Pace3	14%	14%
Pace4	3%	3%

5. CHANGES TO THE GENERAL EXCLUSIONS FROM 1 JANUARY 2024

- 5.1 Addition of Tempo programme reference where a benefit is provided for.
- 5.2 Change of mammary surgery to breast surgery for cancer to align with new naming conversion.
- 5.3 Addition of myobrace system to the oral and dental exclusions.
- 5.4 Co-payment for voluntary use of non-DSP hospitals changed from R13 078 to R13 732.
- 5.5 Increase of co-payment on day procedures at a day hospital facility on all benefit options from R2 500 to R2 625 and adjusted provisions of the rules to indicate who co-payment will be incurred.
- 5.6 Addition of advanced supply of medicine provision to the rules.

NOTE: This summary of the rule changes is given for information purposes only. Should there be any errors or omissions contained herein, the registered Rules of Bestmed, as approved by the Registrar of Medical Schemes, shall prevail. All information regarding the 2024 benefit options and accompanying services, including information in respect of the terms and conditions, or any other matters, is subject to prior approval of the Council for Medical Schemes (CMS) and may change without notice, having due regard to the CMS' further advice.

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