

BESTMED SUMMARY OF RULE CHANGES FOR 2026

The changes for 2026 on the Substantive Rules and Annexures, approved and registered by the Registrar of the Council for Medical Schemes (CMS) with effect from 1 January 2026, are summarised below.

1. CHANGES TO THE SUBSTANTIVE RULES FROM 1 JANUARY 2026

- **1.1** Percentage change on the current rule 4.79 definition of "Scheme tariff" from 196.41% to 211.24%.
- **1.2** Change to Rule 10.2 to make provision for the digital membership cards that the Scheme issues. While the issuance of digital membership cards is approved, the Scheme has been instructed by the CMS to make some adjustments to the retrieval of printed membership cards.
- **1.3** Change to Rule 16.12 to specify that emergency medical claims are covered in foreign countries.
- **1.4** Editorial change to Rule 16.13 to allow the Scheme to grant an advance supply of medicine to align with the provisions made in the Annexures of the Scheme Rules.
- **1.5** Editorial changes to sub-rule 18.3.1 pertaining to the dates of the nomination process of the Board of Trustees election to clarify the closing date of the nomination process.

2. CHANGES TO THE CONTRIBUTION TABLES FROM 1 JANUARY 2026

2.1 The annual increase in the Contributions (Annexure A) of the Rules, where the increase in gross contributions for all benefit options is 6.8%.

3. CHANGES TO THE BENEFIT OPTIONS FROM 1 JANUARY 2026

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** Cosmetic changes to the rule numbers across all options due to the addition of new benefit rules.
- **3.2** Editorial changes to ensure consistency of text in the rules.

3.3 Hospital, hospital-related benefits and other major medical expenses

On rules 1.2 for the Beat range, 2.2 for the Pace range and 3.2 for the Rhythm range. The rule changes propose, *inter alia*, the following:



- **3.3.1** Adjusted the requirement for pre-authorisation for specialised diagnostic imaging to require members to obtain benefit confirmation and a reference number across all benefit options.
- **3.3.2** Removal of co-payments applicable to the specialised diagnostic imaging benefit across all benefit options.
- 3.3.3 Removal of procedure-specific co-payments applicable to the Beat and Rhythm options.

3.4 Take-home medicine

Changes in the sub-rules 1.2.2 for the Beat range, 2.2.2 for the Pace range and 3.2.2 for the Rhythm range, are as follows:

- Limit changes on all benefit options.
- Based on the instructions by the claim duration for take-home medicine following discharge from the hospital was extended from the date of discharge to within 3 (three) days after discharge, across all the benefit options.

3.5 Biological medicine during hospitalisation

Limit changes on sub-rules 1.2.3 on the Beat range, 2.2.3 on the Pace range and 3.2.3 on the Rhythm range are as follows:

Benefit options	2025	2026
Beat1 and Beat1 Network	R11 610	R12 144
Beat2 and Beat2 Network	R17 414	R18 215
Beat3, Beat3 Network and Beat3 Plus	R23 218	R24 286
Beat4	R29 022	R30 357
Pace1	R34 828	R36 430
Rhythm2	R17 414	R18 215

Editorial change on the Pace2 to Pace4 benefit options to link the benefit to the Biological medicine benefit limit.

3.6 Treatment in mental health facilities

Changes in the sub-rules 1.2.4 for the Beat range and 2.2.4 for the Pace range and 3.2.3 for the Rhythm range, are as follows:

- Editorial change in the name of the benefit, replacing "clinics" with "facilities".

3.7 Dental / Oral / Maxillo-facial surgery

3.7.1 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	2025	2026
Beat2 and Beat2 Network	R6 350	R6 642
Beat3, Beat3 Network and Beat3 Plus	R9 768	R10 217
Beat4	R12 210	R12 772

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Benefit options	2025	2026
Pace1	R9 768	R10 217
Pace2	R16 232	R16 979
Pace3	R20 397	R21 335
Pace4	R24 419	R25 542

Removal of procedure-specific co-payments applicable to the benefits offered on some of the Beat benefit options.

3.7.2 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	2025	2026
Beat3, Beat3 Network and Beat3 Plus	R15 658	R16 378
Beat4	R15 945	R16 678
Pace1	R15 800	R16 527

3.8 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 subrules for the "Prosthesis – Internal", "Prosthesis – External" and "Exclusions on joint replacement surgery for non-PMB conditions".

3.8.1 Prosthesis - Internal

- Addition of shoulder surgery to be funded from the Internal prosthesis knee surgery benefit limit on all benefit options.
- Editorial changes to ensure consistency of text in the rules.

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

Benefit options	Benefit description	2025	2026
Beat1, Beat1	Overall limit per family	R95 377	R99 764
Network, Beat2	Vascular	R54 915	R57 441
and Beat2	Pacemaker single and dual chambers	R51 998 and at DSP prices	R54 390 and at DSP prices
Network	Endovascular and catheter	Are subject to the Vascular	Are subject to the Vascular
Sub-limits per beneficiary	base procedures	prosthesis sub-limit and at DSP prices	prosthesis sub-limit and at DSP prices
201101101011	Spinal including artificial disk	R38 068	R39 819



Benefit options	Benefit description	2025	2026
		Are subject to the Vascular	Are subject to the Vascular
		prosthesis sub-limit and at	prosthesis sub-limit and at
	Drug-eluting stents	DSP prices	DSP prices
	Mesh	R13 360	R13 975
	Gynaecology / Urology	R10 917	R11 419
	Lens implants	R8 330	R8 713
	Functional	R34 047	R35 613

Benefit options	Benefit description	2025	2026
	Overall limit per family	R96 384	R100 818
	Vascular	R65 898	R68 929
	Pacemaker single and dual	R51 998 and at DSP prices	R54 390 and at DSP prices
	chambers		
Poet2 Poet2		Are subject to the Vascular	Are subject to the Vascular
Beat3, Beat3 Network and	Endovascular and catheter	prosthesis sub-limit and at	prosthesis sub-limit and at
	base procedures	DSP prices	DSP prices
Beat3 Plus	Spinal including artificial disk	R38 208	R39 966
Sub-limits per		Are subject to the Vascular	Are subject to the Vascular
beneficiary		prosthesis sub-limit and at	prosthesis sub-limit and at
beneficially	Drug-eluting stents	DSP prices	DSP prices
	Mesh	R13 429	R14 047
	Gynaecology / Urology	R11 091	R11 601
	Lens implants	R8 330	R8 713
	Functional	R35 146	R36 763

Benefit option	Benefit description	2025	2026
	Overall limit per family	R117 652	R123 064
	Vascular	R71 390	R74 674
	Pacemaker single and dual	R68 086 and at DSP prices	R71 218 and at DSP prices
	chambers		
Beat4	Endovascular and catheter	Are subject to the Vascular	Are subject to the Vascular
	base procedures	prosthesis sub-limit and at	prosthesis sub-limit and at
Sub-limits per		DSP prices	DSP prices
beneficiary	Spinal including artificial disk	R40 652	R42 522
	Drug-eluting stents	R22 839 and at DSP prices	R23 890 and at DSP prices
	Mesh	R15 083	R15 777
	Gynaecology / Urology	R11 061	R11 570
	Lens implants	R8 618	R9 014



Benefit option	Benefit description	2025	2026
	Functional	R37 342	R39 060

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

Benefit option	Benefit description	2025	2026
	Overall limit per family	R109 167	R114 189
	Vascular	R71 390	R74 674
	Pacemaker single and dual chambers	R67 943 and at DSP prices	R71 068 and at DSP prices
	Endovascular and catheter	Are subject to the Vascular	Are subject to the Vascular
Pace1	base procedures	prosthesis sub-limit and at DSP prices	prosthesis sub-limit and at DSP prices
Sub-limits per	Spinal including artificial disk	R39 788	R41 618
beneficiary	Drug-eluting stents	Are subject to the Vascular prosthesis sub-limit and at DSP prices	Are subject to the Vascular prosthesis sub-limit and at DSP prices
	Mesh	R14 939	R15 626
	Gynaecology / Urology	R10 773	R11 269
	Lens implants	R8 188	R8 565
	Functional	R37 342	R39 060

Benefit			
option	Benefit description	2025	2026
	Overall limit per family	R140 193	R146 642
	Vascular	R71 390	R74 674
	Pacemaker single and dual chambers	R75 770 and at DSP prices	R79 255 and at DSP prices
	Endovascular and catheter	Are subject to the Vascular	Are subject to the Vascular
Pace2	base procedures	prosthesis sub-limit and at DSP	prosthesis sub-limit and at DSP
	base procedures	prices	prices
Sub-limits per	Spinal including artificial disk	R70 284	R73 517
beneficiary	Drug-eluting stents	R22 983 and at DSP prices	R24 040 and at DSP prices
	Mesh	R22 983	R24 040
	Gynaecology / Urology	R17 164	R17 954
	Lens implants	R14 738	R15 416
	Hip prosthesis and other major joints	R63 129	R66 033



Benefit			
option	Benefit description	2025	2026
	Knee and shoulder prosthesis	R73 257	R76 627
	Minor joints	R27 219	R28 471
	Functional	R39 539	R41 358

Benefit option	Benefit description	2025	2026
	Overall limit per family	R140 912	R147 394
	Vascular	R75 783	R79 269
	Pacemaker single and dual chambers	R75 770 and at DSP prices	R79 255 and at DSP prices
	Endovascular and catheter	Are subject to the Vascular	Are subject to the Vascular
	base procedures	prosthesis sub-limit and at DSP	prosthesis sub-limit and at DSP
Pace3	base procedures	prices	prices
Paces	Spinal including artificial disk	R70 418	R73 657
Sub-limits per	Drug-eluting stents	R22 983 and at DSP prices	R24 040 and at DSP prices
beneficiary	Mesh	R22 983	R24 040
beneficially	Gynaecology / Urology	R17 237	R18 030
	Lens implants	R14 738	R15 416
	Hip prosthesis and other	R63 201	R66 108
	major joints	1100 201	100 100
	Knee and shoulder prosthesis	R73 615	R77 001
	Minor joints	R27 219	R28 471
	Functional	R39 539	R41 358

Benefit option	Benefit description	2025	2026
	Overall limit per family	R162 601	R170 081
	Vascular	R75 783	R79 269
	Pacemaker single and dual chambers	R75 770	R79 255
Pace4	Endovascular and catheter	Are subject to the Vascular	Are subject to the Vascular
	base procedures	prosthesis sub-limit and at DSP	prosthesis sub-limit and at DSP
Sub-limits per	base procedures	prices	prices
beneficiary	Spinal including artificial disk	R81 308	R85 048
	Drug-eluting stents	R27 077 and at DSP prices	R28 323 and at DSP prices
	Mesh	R23 845	R24 942
	Gynaecology / Urology	R19 679	R20 584
	Lens implants	R21 790	R22 792



Benefit option	Benefit description	2025	2026
	Hip prosthesis and other major joints	R72 755	R76 102
	Knee and shoulder prosthesis	R84 245	R88 120
	Minor joints	R27 077	R28 323
	Functional	R43 932	R45 953

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

Benefit option	Benefit description	2025	2026
	Overall limit per family	R64 208	R67 162
	Vascular	R54 915	R57 441
	Pacemaker single and dual chambers	R51 998 and at DSP prices	R54 390 and at DSP prices
Rhythm1 and Rhythm2	Endovascular and catheter base procedures	Are subject to the Vascular prosthesis sub-limit and at DSP prices	Are subject to the Vascular prosthesis sub-limit and at DSP prices
	Spinal including artificial disk	R31 815	R33 278
Sub-limits per beneficiary	Drug-eluting stents	Are subject to the Vascular prosthesis sub-limit and at DSP prices	Are subject to the Vascular prosthesis sub-limit and at DSP prices
	Mesh	R11 636	R12 171
	Gynaecology / Urology	R9 611	R10 053
	Lens implants	R6 681	R6 988
	Functional	R34 047	R35 613

3.8.2 Prosthesis - External

Limit changes on sub-rules 1.2.11.2 for the Beat range and 2.2.11.2 for the Pace range are as follows:

Benefit options	2025	2026
Beat4	R28 297	R29 599
Pace1	R27 723	R28 998
Pace2	R33 037	R34 557
Pace3	R33 182	R34 708
Pace4	R37 491	R39 216

3.8.3 Exclusions on joint replacement surgery for non-PMB conditions

Limit changes on sub-rules 1.2.11.3 for the Beat range, 2.2.11.3 for the Pace range and 3.2.11.3 for the Rhythm range are as follows:



Benefit options	Benefit description	2025	2026
Beat1, Beat1 Network,	Hip prosthesis and other major joints	R40 075	R41 918
Beat2 and Beat2 Network	Knee and shoulder prosthesis	R49 413	R51 686
	Minor joints	R15 371	R16 078

Benefit options	Benefit description	2025	2026
Beat3, Beat3 Network and	Hip prosthesis and other major joints	R40 364	R42 221
Beat3 Plus	Knee and shoulder prosthesis	R49 944	R52 241
	Minor joints	R15 371	R16 078

Benefit option	Benefit description	2025	2026
	Hip prosthesis and other major joints	R41 800	R43 723
Beat4	Knee and shoulder prosthesis	R55 532	R58 086
	Minor joints	R17 063	R17 848

Benefit option	Benefit description	2025	2026
	Hip prosthesis and other major joints	R40 506	R42 369
Pace1	Knee and shoulder prosthesis	R53 866	R56 344
	Minor joints	R16 735	R17 505

Benefit option	Benefit description	2025	2026
	Hip prosthesis and other major joints	R32 607	R34 107
Rhythm1 and Rhythm2	Knee and shoulder prosthesis	R41 226	R43 122
	Minor joints	R15 441	R16 151

3.9 Medically necessary breast reduction surgery

Changes to sub-rule 2.2.12 on the Pace range are as follows:

- Addition of the benefit with a maximum limit of R100 000 per family on the Pace3 benefit option.
- The limit changes from R58 046 to R100 000 per family on the Pace4 benefit option.

3.10 Orthopaedic and medical appliances during hospitalisation

Changes to sub-rules 1.2.13 on the Beat range, 2.2.13 on the Pace range and 3.2.13 on the Rhythm range are as follows:

- Limit changes are as follows:

Benefit options	2025	2026
Beat1, Beat1 Network, Beat2, Beat2 Network,	R15 000	R15 690
Beat3, Beat3 Network, Beat3 Plus and Beat4		
Pace1, Pace2, Pace3 and Pace4	R15 000	R15 690



Benefit options	2025	2026
Rhythm2	R7 901	R8 264

3.11 Specialised diagnostic imaging and nuclear medicine (in- and out-of-hospital)

Sub-rules 1.2.16 on the Beat range, 2.2.16 on the Pace range and 3.2.16 on the Rhythm range changes are as follows:

- Removal of co-payments applicable to the specialised diagnostic imaging benefit on all benefit options, except for Rhythm1 where PMBs are applicable.
- Adjusted the requirement for pre-authorisation for specialised diagnostic imaging to require members to obtain benefit confirmation and a reference number across all benefit options, except for Rhythm1 where PMBs are applicable.
- Addition of the nuclear medicine to the benefit on all benefit options.
- Limit changes are as follows:

Benefit options	2025 Specialised diagnostic imaging in and out-of-hospital limit	2026 Specialised diagnostic imaging and nuclear medicine in and out-of-hospital limit	PET scans benefit
Beat1 and Beat1 Network	R20 000	R20 920	Excluded except for a PMB condition
Beat2 and Beat2 Network	R22 000	R23 012	Excluded except for a PMB condition
Beat3 and Beat3 Network	R32 000	R33 472	Excluded except for a PMB condition
Beat3 Plus	R35 000	R36 610	Excluded except for a PMB condition
Beat4 and Pace1	R40 000	R41 840	1 (one) scan per beneficiary
Pace2 and Pace3	R42 000	R43 932	1 (one) scan per beneficiary
Pace4	R45 000	R47 070	1 (one) scan per beneficiary
Rhythm1	PMBs only	PMBs only	PMBs only
Rhythm2	R18 000	R18 828	Excluded except for a PMB condition

3.12 Confinements (birthing, including midwife-assisted births)

Changes on sub-rules 1.2.20 for the Beat range, 2.2.21 for the Pace range and 3.2.20 for the Rhythm range are as follows:

- Editorial addition of description to enable better understanding of the benefit offered on all the benefit options.

3.13 Refractive surgery



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

Benefit options	2025	2026
Beat3, Beat3 Network and Beat3 Plus	R10 055	R10 518
Beat4	R11 349	R11 871
Pace1	R10 859	R11 359
Pace2	R11 347	R11 869
Pace3 and Pace4	R12 210	R12 772

3.14 Cochlear implants and Bone Adhering Hearing Devices (BAHD) / Bone Adhering Hearing Aids (BAHA) implantation

Changes on sub-rules 1.2.22 for the Beat range, 2.2.23 for the Pace range and 3.2.22 for the Rhythm range are as follows:

- Addition of Cochlear implants and Bone Adhering Hearing Devices (BAHD) / Bone Adhering Hearing Aids (BAHA) implantation benefit with the following limits per beneficiary on the Beat4 and Pace benefit options.

Benefit options	2026
Beat4	R250 000
Pace1	R250 000
Pace2	R285 000
Pace3	R320 000
Pace4	R350 000

- Addition of Cochlear implants and Bone Adhering Hearing Devices (BAHD) / Bone Adhering Hearing Aids (BAHA) implantation benefit for PMB only on the Beat1, Beat1 Network, Beat2, Beat2 Network, Beat3, Beat3 Network, Beat3 Plus and Rhythm benefit options.

3.15 Advance illness benefit

Limit changes on rules 1.2.25 on the Beat range, 2.2.26 on the Pace range and 3.2.25 on the Rhythm range:

Benefit options	2025	2026
Beat1, Beat1 Network, Beat2, Beat2 Network,		
Beat3, Beat3 Network, Beat3 Plus and Rhythm2	R69 654	R72 858
Beat4	R104 482	R109 288
Pace1	R87 068	R91 073
Pace2, Pace3 and Pace4	R139 308	R145 716

3.16 Day procedures at a day hospital facility

Changes to rules 1.2.28 on the Beat range, 2.2.29 on the Pace range and 3.2.28 on the Rhythm range are as follows:



- Co-payment of day procedures at a day hospital facility changes from R2 746 to R2 872 on all benefit options.
- Change of limit for non-PMB procedures funded on Rhythm1 from R54 915 to R57 441.
- Removal of procedure-specific co-payments applicable to the Rhythm1 benefit option.

3.17 Co-payments

Changes to rules 1.2.28 on the Beat range, 2.2.29 on the Pace range and 3.2.28 on the Rhythm range are as follows:

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- Removal of procedure-specific co-payments applicable to the Beat and Rhythm benefit options.
- The co-payment on the Beat Network benefit options, as well as the Rhythm benefit options, for the voluntary use of a non-designated hospital network changes from R14 364 to R15 025.

3.18 Medicine benefits

3.18.1 Non-CDL medicine benefits

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

Benefit options	2025	2026
Beat3, Beat3 Network and Beat3 Plus	M = R4 166 and M1+ = R8 475	M = R4 358 and M1+ = R8 865
Beat4	M = R9 150 and M1+ = R18 301	M = R9 571 and M1+ = R19 143
Pace1	M = R8 044 and M1+ = R16 087	M = R8 414 and M1+ = R16 827
Pace2	M = R10 983 and M1+ = R21 966	M = R11 488 and M1+ = R22 976
Pace3	M= R16 878 and M1+ = R33 757	M= R17 654 and M1+ = R35 310
Pace4	M= R24 058 and M1+ = R48 335	M= R25 165 and M1+ = R50 558

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	2025	2026
Pace2	R200 964	R210 208
Pace3	R402 194	R420 695
Pace4	R595 247	R622 628

3.18.3 Acute medicine

Rules 1.3.5 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	2025	2026
Beat4	M = R3 491 and M1+ = R7 052	M = R3 652 and M1+ = R7 376



Benefit options	2025	2026
Pace1	M = R2 846 and M1+ = R5 890	M = R2 977 and M1+ = R6 161
Pace2	M = R3 295 and M1+ = R6 590	M = R3 447 and M1+ = R6 893
Pace3	M= R2 197 and M1+ = R4 942	M= R2 298 and M1+ = R5 169
Pace4	M= R10 260 and M1+ = R15 938	M= R10 732 and M1+ = R16 671

3.18.4 Over-the-counter (OTC) medicine

Rules 1.3.6 on the Beat range, 2.3.6 on the Pace range and 3.3.6 on the Rhythm range changes are as follows:

- Limit change from R1 161 to R1 214 on the Beat4, Pace1, Pace2 and Pace3 benefit options.
- Limit change from R240 per family limited to R120 per event, to R251 per family limited to R125 per event on the Rhythm1 benefit option.
- Limit change from R350 per family limited to R120 per event, to R366 per family limited to R122 per event 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 Influenza vaccine

The changes on rules 1.4.1 on the Beat range, 2.4.1 on the Pace range and 3.4.1 on the Rhythm range are as follows:

- Editorial changes on the benefit to specify provisions for Rhythm Network providers or preferred provider network pharmacy and subject to Rhythm protocols for the Rhythm benefit options.

3.19.2 Female contraceptives

Changes on rules 1.4.6 on the Beat range, 2.4.6 on the Pace range and 3.4.6 on the Rhythm range are as follows:

- Changes of limits for the contraceptive benefit on all the benefit options.
- Separated the Intrauterine devices (IUD) benefit from the general contraceptive benefit and introduced a separate limit for one device every five years on all benefit options.

Benefit options	Benefit description	2025	2026
Beat1 and Beat1Network	Contraceptive benefit limit	R2 000	R2 092
Boat and Boat Notwork	Intrauterine devices (IUD) benefit limit	112 000	R3 295
Beat2 and Beat2Network	Contraceptive benefit limit	R2 200	R2 301
Boatz and Boatz Notwork	Intrauterine devices (IUD) benefit limit		R3 595
Beat3, Beat3 Network and	Contraceptive benefit limit	R2 400	R2 510
Beat3 Plus	Intrauterine devices (IUD) benefit limit	1.12 1.00	R3 795
Beat4, Pace1, Pace2,	Contraceptive benefit limit	R2 678	R2 801
Pace3 and Pace4	Intrauterine devices (IUD) benefit limit		R4 225
Rhythm1	Contraceptive benefit limit	R2 000	R2 092



Benefit options	Benefit description	2025	2026
	Intrauterine devices (IUD) benefit limit		R3 295
Rhythm2	Contraceptive benefit limit	R2 200	R2 301
141741112	Intrauterine devices (IUD) benefit limit	112 200	R3 295

3.19.3 HIV rapid test benefit

Changes on rules 1.4.8 on the Beat range, 2.4.8 on the Pace range and 3.4.7 on the Rhythm range are as follows:

- Addition of the benefit on all benefit options.

3.19.4 Prostate Specific Antigen (PSA) test benefit

Changes on rules 1.4.11 on the Beat range, 2.4.12 on the Pace range and 3.4.10 on the Rhythm range are as follows:

- Addition of the benefit on all Beat1, Beat1 Network and Rhythm1 benefit options.
- Reduction of the age to access the benefit from 50 years and older to 45 years and older on all benefit options.

3.19.5 Colon cancer screening

Changes on rules 1.4.12 on the Beat range, 2.4.13 on the Pace range and 3.4.11 on the Rhythm range are as follows:

- Addition of the benefit on all benefit options.

3.20 Maternity benefits

Changes on rules 1.5 of the Beat range, 2.5 of the Pace range and 3.5 of the Rhythm range are as follows:

- Limit change from R139 to R145 for the maternity supplement benefit on the Beat3, Beat3 Network, Beat3 Plus, Beat4, all the Pace benefit options and Rhythm2 benefit options.

3.21 Optometry benefits

Optometry benefits are 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 set as per the contract with Preferred Provider Negotiators (PPN) and are indicated on the applicable benefit options.
- Addition of non-network provider benefits to the Rhythm2 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	2025	2026
Beat4	M = R15 513 and M1+ = R31 025	M = R16 227 and M1+ = R32 452



Benefit options	2025	2026
Pace1	M = R13 187 and M1+ = R26 373	M = R13 794 and M1+ = R27 586
Pace2	M = R16 475 and M1+ = R32 949	M = R17 233 and M1+ = R34 465
Pace3	M = R22 015 and M1+ = R45 497	M = R23 028 and M1+ = R47 590
Pace4	M = R43 380 and M1+ = R69 954	M = R45 375 and M1+ = R73 172

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:

Benefit options	2025	2026
Beat4	M = R3 951 and M1+ = R7 037	M = R4 133 and M1+ = R7 361
Pace1	M = R2 715 and M1+ = R5 459	M = R2 840 and M1+ = R5 710
Pace2	M = R5 029 and M1+ = R10 192	M = R5 260 and M1+ = R10 661
Pace3	M = R5 316 and M1+ = R10 773	M = R5 561 and M1+ = R11 269
Pace4	M = R6 823 and M1+ = R11 061	M = R7 137 and M1+ = R11 570

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

Sub-rule 2.7.2 on the Pace range limit changes are as follows:

Benefit options	2025	2026
Pace3	R23 218	R24 286
Pace4	R29 022	R30 357

3.22.3 Out-of-network or casualty visits

Sub-rule 3.7.3 on the Rhythm2 benefit option. Limit changes from R1 723 to R1 802.

3.22.4 Specialist visits

Sub-rule 3.7.4 on the Rhythm range. Limit changes are as follows:

Benefit options	2025	2026
Rhythm1	R2 553	R2 670
Rhythm2	M = R1 742 and M1+ = R2 903	M = R1 822 and M1+ = R3 037

3.22.5 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	2025	2026
Beat4	M = R6 835 and M1+ = R13 728	M = R7 149 and M1+ = R14 359
Pace1	M = R4 998 and M1+ = R10 142	M = R5 228 and M1+ = R10 609
Pace2	M = R8 377 and M1+ = R16 756	M = R8 762 and M1+ = R17 527
Pace3	M = R9 027 and M1+ = R16 829	M = R9 442 and M1+ = R17 603
Pace4	M = R15 066 and M1+ = R25 428	M = R15 759 and M1+ = R26 598

Limits for orthodontic services for beneficiaries up to 18 years of age are as follows:

Benefit options	2025	2026
Pace2	R8 126	R8 500
Pace3	R10 448	R10 929
Pace4	R12 770	R13 357

3.22.6 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	2025	2026
	Medical aids, apparatus and appliances	Medical aids, apparatus and appliances
	(limit includes wheelchairs) R13 934 per	(limit includes wheelchairs) R14 575 per
	family	family
	Hearing aids and/or repairs R12 770 per	Hearing aids and/or repairs R13 357 per
Beat4	family per 24 months	family per 24 months
	Medical aids, apparatus and appliances	Medical aids, apparatus and appliances
	(limit includes wheelchairs) R13 934 per	(limit includes wheelchairs) R14 575 per
Pace1	family	family
	Hearing aids R9 678 per family per 24	Hearing aids R10 123 per family per 24
	months	months
	Medical aids, apparatus and appliances	Medical aids, apparatus and appliances
	R12 640 per family	R13 221 per family
Pace2	Wheelchairs R17 094 per family per 48	Wheelchairs R17 880 per family per 48
Pace2	months	months
	Hearing aids R32 000 per beneficiary per	Hearing aids R33 472 per beneficiary per
	24 months	24 months
	Medical aids, apparatus and appliances	Medical aids, apparatus and appliances
Pace3	R12 640 per family	R13 221 per family
rauto	Wheelchairs R17 094 per family per 48	Wheelchairs R17 880 per family per 48
	months	months



Benefit options	2025	2026
	Hearing aids R32 000 per beneficiary	Hearing aids R33 472 per beneficiary
	every 24 months	every 24 months
	Medical aids, apparatus and appliances	Medical aids, apparatus and appliances
	(limit includes insulin pump consumables)	(limit includes insulin pump consumables)
	R12 640 per family	R13 221 per family
	Wheelchairs R17 094 per family per 48	Wheelchairs R17 880 per family per 48
Pace4	months	months
	Hearing aids R35 000 per beneficiary per	Hearing aids R36 610 per beneficiary per
	24 months	24 months
	Insulin pump R50 806 per beneficiary	Insulin pump R53 143 per beneficiary
	every 24 months	every 24 months

3.22.7 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.

- Limit changes are as follows:

Benefit options	2025	2026
Beat3 Plus	R2 092	R2 188
Beat4	M = R6 033 and M1+ = R12 253	M = R6 311 and M1+ = R12 817
Pace1	M = R5 329 and M1+ = R11 061	M = R5 574 and M1+ = R11 570
Pace2	M = R3 844 and M1+ = R7 688	M = R4 021 and M1+ = R8 042
Pace3	M = R3 247 and M1+ = R6 823	M = R3 396 and M1+ = R7 137
Pace4	M = R6 823 and M1+ = R13 430	M = R7 137 and M1+ = R14 048

3.22.8 Wound care benefit

Changes to sub-rules 1.7.5 on the Beat range, 2.7.6 on the Pace range and 3.7.8 on the Rhythm range are as follows:

- Separated general wound care from the negative pressure wound therapy ("NPWT") for general wound care to be funded from a specific limit, and the NPWT to be financed from a Scheme risk benefit and be subjected to preauthorisation on all the Beat and Pace benefit options.
- Limit changes are as follows:

Benefit options	2025	2026
Beat1, Beat1 Network, Beat2, Beat2 Network, Beat3,		
Beat3 Network and Beat3 Plus	R4 267	R4 463
Beat4	R6 033	R6 311
Pace1	R4 381	R4 583
Pace2	R7 882	R8 245



Benefit options	2025	2026
Pace3	R10 983	R11 488
Pace4	R16 663	R17 429

3.22.9 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	2025	2026
Beat4	M = R3 950 and M1+ = R8 044	M = R4 132 and M1+ = R8 414
Pace1 and Pace2	M = R3 950 and M1+ = R7 901	M = R4 132 and M1+ = R8 264
Pace3	M = R4 310 and M1+ = R8 546	M = R4 508 and M1+ = R8 939
Pace4	M = R6 823 and M1+ = R13 430	M = R7 137 and M1+ = R14 048

4. PERSONAL MEDICAL SAVINGS ACCOUNT AND VESTED MEDICAL SAVINGS ACCOUNT – ANNEXURE B.4 FROM 1 JANUARY 2026

4.1 The self-payment gap base limit for OTC medicine, before the self-payment gap is triggered, has changed from R1 161 to R1 214.

5. CHANGES TO THE GENERAL EXCLUSIONS FROM 1 JANUARY 2026

- **5.1** The co-payment for the voluntary use of non-DSP hospitals changed from R14 364 to R15 025 on rule 1.5.1.
- 5.2 Change of the co-payment on day procedures at a day hospital facility on all benefit options from R2 746 to R2 872 on rule 1.5.2.

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 2026 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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