

BESTMED SUMMARY OF RULE CHANGES

The following changes on the Substantive Rules and Annexures A, B and C, have been approved and registered by the Registrar of the Council for Medical Schemes (CMS). The changes are summarised below.

1. CHANGES TO THE SUBSTANTIVE RULES

1.1 Addition of provisions relating to the Protection of Personal Information Act, No. 4 of 2013 and to ensure alignment with the Scheme's Data Protection and Privacy Policy.

1.1.1 Definitions have been added to clarify certain terminology such as references to applicable data protection laws, the Data Subject, the GDPR, Processing, etc.

1.1.2 Rule numbers are adjusted accordingly, following the addition of the new definitions.

1.1.3 Rule 19.16 – addition of data protection provisions as it relates to the duties of the Board set in terms of the Medical Schemes Act, No. 131 of 1998.

1.1.4 Addition of a new section in the rules, detailing data protection requirements to link the rules to the Schemes Data Protection and Privacy Policy.

1.1.5 Cosmetic changes to the rule numbers, following the addition of the new rule 32.

1.2 Correction of reference of “dependent” to “dependant” where applicable.

1.3 Rule 16.12 on foreign claims – addition of a provision that restricts PMB payments to South Africa. This will better enable the Scheme to manage claims of medical expenses incurred while members are outside the South African borders for longer than the three months, covered by the international travel benefit.

1.4 Change of the quorum from 25 to a minimum of 30 members at an annual general meeting on Rule 26.1.3 and a minimum of 50 members in respect of special general meetings on Rules 26.2.2 and 26.2.4 as instructed by the CMS to be consistent with the provisions of the latest CMS Model Rules, published on 23 June 2016.

2. CHANGES TO THE SUBSCRIPTION TABLES

2.1 The cosmetic change of the order of the Beat4 and Rhythm benefit options and numbers assigned to each sub-annexure.

- 2.2 Registration of the Rhythm1 (restructured from Pulse2) subscriptions and addition of the requirement for subscriptions to be charged for the first three child dependants on the Rhythm2 benefit option.
- 2.3 Change of the Pulse1 benefit option name to Rhythm2.

3. CHANGES TO THE BENEFIT OPTIONS

BENEFIT OPTIONS – ANNEXURE B.1 – B.3

Restructuring or changes of benefits take place throughout the Beat range [Annexure B.1], the Pace range [Annexure B.2] and the Rhythm range (previously Pulse 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 Change of the Pulse1 benefit option name to Rhythm2 and references to Pulse changed to Rhythm.
- 3.3 Addition of benefits for the Rhythm1 benefit option as per the business plan that was approved by the CMS. Please refer to Rhythm1 communication and the rules for the benefits of this new option.
- 3.4 Changes to the limits on the international emergency medical cover benefit across all benefit options.
- 3.5 Change to the healthcare provider list to include nurses and pharmacy clinics for baby growth and development assessment on the Beat, Pace and Rhythm ranges.
- 3.6 Addition of osteopaths to the supplementary benefits on the Beat, Pace and Rhythm benefit options.
- 3.7 Basic and specialised dentistry changes for Pace2, Pace3 and Pace4:
 - 3.7.1 Orthodontic benefits on the Pace2, Pace3 and Pace4 benefit options are under the Basic and specialised dentistry benefit limits. This cover is provided to beneficiaries over 18 years and is funded from the medical savings account first and the applicable annual limit, which is subject to the overall day-to-day limit.
 - 3.7.2 The orthodontic benefit on the Pace2, Pace3 and Pace4 benefit options for beneficiaries under the age of 18 years are separate from the Basic and specialised dentistry benefit limits. This benefit will be funded from the medical savings account first and then from the applicable annual limit, which is subject to the overall day-to-day limit.

4. CHANGES TO THE GENERAL EXCLUSIONS

- 4.1 Changed references of “Pulse” to “Rhythm” across the annexure.
- 4.2 Addition of a rule relating to surrogate agreements.

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 2022 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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