

RULES

1 ESTABLISHMENT

The "Building Industry Medical Aid Fund" (hereinafter referred to as "the Fund") is continued and shall continue to be administered in accordance with clause 24 of the Building Industry Bargaining Council (Cape of Good Hope) Agreement and the following rules are hereby prescribed by the Council for the administration of the Fund in terms of clause 24 of the Agreement.

2 REGISTERED OFFICE

The registered office of the Fund shall be situated at 81 Voortrekker Road, Bellville, but the Council shall have the right to transfer such office to any other situation should circumstances so dictate.

3 DEFINITIONS

Any term or expression used in these rules which is defined in the main agreement and the Labour Relations Act No. 66 of 1995 and any regulations framed under the said Act, shall have the same meaning as in those measures and any reference to an act or agreement shall include any amendments of such act or agreement. Words importing the masculine gender shall include females and vice versa.

Further, unless inconsistent with the context:

"**Act**" means the Labour Relations Act No. 66 of 1995.

"**Agreement**" means the current Bargaining Council Agreement including any amendments thereto providing for the establishment or continuation of the Building Industry Medical Aid Fund entered into between the parties to the Building Industry Bargaining Council (Cape of Good Hope) and extended to non-parties by the Minister of Labour in terms of section 32 of the Act.

"**Application**" means application in writing in a form determined by the Council or Committee.

"**Apprentice Member**" means a person who is admitted to membership in terms of clause 5(6) of these rules.

"**Approve**" or "Approval" means written approval.

"**Chemist**" or "Pharmacist" means a person registered as a pharmacist under the Pharmacy Act No. 53 of 1974.

"**Claim**" means the amount to which a member of the Fund is entitled in respect of expenses incurred by him in connection with medical or dental treatment, hospitalisation or medicine or any other benefit to which he or his dependants are entitled in terms of these rules.

"**Committee**" or "**Management Committee**" means a committee appointed in terms of clause 12 of these rules to administer the Fund on behalf of the Council.

"**Compulsory Member**" means a member who is admitted to membership in terms of clause 5(2) of these rules.

"**Continuation Member**" means a member who, having ceased to be an employee in the Building Industry, remains a member in terms of clause 5(4) of these rules.

"**Conveyance**" means transport by licensed ambulance and, in the absence of or inability to obtain a licensed ambulance, transport by private motor vehicle, or car, taxi or other means of transport while being used as a conveyance during illness or injury.

"**Council**" or "**Bargaining Council**" means the Building Industry Bargaining Council (Cape of Good Hope) registered in terms of section 29 of the Act.

"**Date of Service**" means:

- (a) in the event of a consultation, visit or treatment by a medical practitioner or medical auxiliary, the date on which each consultation, visit or treatment occurred, whether for the same illness or not;
- (b) in the event of an operation, procedure or confinement, the date on which each operation, procedure or confinement occurred;
- (c) in the event of hospitalisation, the date of each discharge from a hospital or nursing home;
- (d) in the event of any other service or requirement, the date on which such service was rendered or requirement obtained.

"Dentist" means a person registered as a dentist under the Medical, Dental and Supplementary Health Service Profession Act 1974 (Act No. 56 of 1974).

"Dependant" (if and for so long as the dependant resides in the Republic of South Africa and is registered with the Fund) in relation to a member of the Fund, means:

- (a) the legal or common law wife of such member duly registered as such;
- (b) such member's child, stepchild or legally adopted child under the age of 18 years who is unmarried and not in receipt of regular remuneration of more than R100 per month;
- (c) such member's child, stepchild or legally adopted child over the age of 18 years who is unmarried and who, owing to mental or physical defect or any similar cause, is not in receipt of a regular remuneration of more than R100 per month and who, with the consent of the Management Committee and subject to its conditions, is recognised as a dependant person;

provided that any such dependant shall be normally resident with and dependant upon the member.

"Financial year" or **"year"** means, unless otherwise stated, the first day of November each year to the last day of October of the year following.

"Fund" means the Fund established in terms of clause 24 of the Agreement.

"General Practitioner" or **"Medical Practitioner"** means a person registered as a medical practitioner under the Medical, Dental and Supplementary Health Service Profession Act 1974 (Act No. 56 of 1974).

"Married Member" means, subject to these rules, a member with one or more dependants.

"Medical Scheme" means:

- (a) a medical scheme registered under section 15 or provisionally registered under section 16 of the Medical Schemes Act;

- (b) a medical scheme which, under section 2 of the Medical Schemes Act, is not required to comply with the provisions of the said Act.

"Medical Schemes Act" means the Medical Schemes Act 1993 (Act 23 of 1993) and includes any regulations made under this Act.

"Medical Auxiliary" means a person who is registered in the Register of Supplementary Health Services for the Republic of South Africa, published under the authority of the South African Medical and Dental Council in terms of section 19 of the Medical, Dental and Supplementary Health Service Profession Act 1974 (Act No. 56 of 1974).

"Medical Certificate" means a certificate issued by a medical practitioner in such form as may be prescribed by the Management Committee from time to time.

"Member" means any person who contributes to the Fund in order to obtain any benefit referred to in these rules either for himself or for any of his dependants in terms of these rules and who has duly completed and submitted to the Management Committee the prescribed application form for membership, and has been admitted as a member of the Fund.

"Membership Card" means the official card issued by the Fund to each member of the Fund in terms of clause 6 of these rules.

"Para Medical Services" means any medical service rendered by a medical auxiliary.

"Pensioner" means a member who has retired from the service of an employer in the industry whether on account of age or disability and who, at the time of such retirement, had had an aggregate period of membership with the Fund of not less than ten years.

"Preferential Tariff" means a tariff of fees for the medical aid scheme as agreed by the Management Committee.

"Rules" means the rules of the Fund and any amendment thereto.

"Secretary" means the Secretary of the Council and includes any official nominated by the Council to act for the Secretary.

"Single Member" means, subject to these rules, a member without dependants.

"Specialist" means a medical practitioner or dentist against whose name a speciality has been registered under the Medical, Dental and Supplementary Health Service Profession Act 1974 (Act No. 56 of 1974) and who is practising as a specialist.

"Benefit Stamp (contribution)" means the official benefit stamp issued to an employee in respect of the contribution determined by clause 12 of the Agreement and duly purchased from the Council.

"Widow Member" means a member admitted to membership in terms of clause 5(5) of these rules.

4 **OBJECTIVES**

The objectives of the Fund shall be -

- (1) to assist members in regard to the cost of such medical services incurred by them or their dependants as may be provided for in these rules from time to time;
- (2) to take such measures and do such things as the Council deems necessary for the prevention of sickness, accidents and for the improvement and promotion of health amongst members, their dependants and persons employed or engaged in the industry;
- (3) to contract with any hospital, nursing home, convalescent home or similar institution for the care of sick or convalescent members and their dependants;
- (4) to contract with any person, body, institution or authority in respect of medical services as may be specified from time to time;
- (5) to meet the cost of making such arrangements and to meet such expenses as may be necessary and expedient for the purpose of carrying out the abovementioned objectives.

5 **MEMBERSHIP**

- (1) Notwithstanding the provisions of sub clause (2) a member shall not be entitled to any benefits referred to in clause 17 either for himself or for his dependants unless he has applied for membership with the Fund in the manner determined in sub clause (8).

- (2) Subject to the provisions of clause 7 hereof, all employees to whom the Agreement applies, shall be members of the Fund.
- (3) Subject to the provisions of clause 7 hereof any person other than those referred to in sub clause (2) hereof who is directly and actively engaged in the industry may on application be admitted to membership of the Fund at the discretion of the Management Committee; provided that a dependant of a member of another medical scheme shall not be eligible for membership.
- (4) A member who on account of reaching retirement age or disability, retires from the industry as a pensioner may, with the consent of the Management Committee become a continuation member provided he has been, at the time of his retirement, a member for a continuous period of not less than ten years provided that the Committee may recognise membership of another medical aid scheme for the purpose of determining such period.
- (5) The widow of a deceased member may with the approval of the Committee, be admitted as a member of the Fund provided the deceased member, at the time of his death had been a member of the Fund for a period of not less than ten years; provided that the Committee may recognise an immediately preceding and continuous membership of any other medical aid scheme for the purpose of determining such period, provided further that the widow shall apply for membership within six months from the date of her husband's death and that membership contributions are fully paid up.
- (6) A person who is employed in the industry under a contract of apprenticeship registered in terms of the Manpower Training Act No 56 of 1981, may on application and at the discretion of the Management Committee be admitted to membership.
- (7) Subject to the provisions of clause 8 of these rules, the provisions of the Agreement and of these rules shall apply to members admitted in terms of the provisions of sub clause (2), (3), (4), (5) and (6) hereof.
- (8) Application for membership of the Fund and applications by members for the registration of dependants shall be submitted to the Secretary in such manner and in such form as the Committee may from time to time determine.

6

MEMBERSHIP CARD

- (1) The Secretary shall issue a membership card to every member of the Fund.
- (2) The membership card shall be in such form as the Management Committee may from time to time determine.
- (3) The membership card shall be shown to:
 - (a) any general practitioner, specialist or dentist on the occasion of his first consultation in order to prove membership of the Fund;
 - (b) any chemist if medicines prescribed by a general practitioner, specialist or dentist are supplied to the member and/or his dependants by such chemist.
- (4) The membership card shall remain the property of the Fund and shall be forwarded by the member to the Secretary if membership has been terminated in terms of clause 7.

7

CESSATION OF MEMBERSHIP

- (1) Membership of the Fund shall cease:
 - (a) with effect from the death of a member;
 - (b) with effect from the date on which a member ceases to be employed in the industry except in the event of his continued membership in terms of the provisions of clause 5(3) of these rules;
 - (c) in the case of a widow of a deceased member on her remarrying or taking up employment where membership of a medical aid scheme is a condition of employment;
 - (d) with effect from the date on which the contract of apprenticeship in respect of an apprentice member is terminated;
 - (e) after a member who has been admitted to or allowed to continue membership in terms of the provisions of clause 5(4), (5) and (6) hereof has failed to contribute to the Fund

in terms of clause 8 for more than two consecutive months;

- (f) with effect from the date on which a member admitted to membership or allowed to continue membership in terms of clause 5(2), (3), (4), (5) and (6) hereof has notified the Secretary in writing that his membership will be terminated.

- (2) Any member who leaves the industry for any reason whatsoever or whose membership of the Fund has been terminated shall, upon leaving the industry or on termination of membership, return the membership card to the Secretary of the Council.
- (3) A member whose membership has been terminated in terms of this clause shall, upon subsequently being re-admitted to membership, not be entitled to any benefit unless he has again complied with the provisions of clause 17(2).

8

CONTRIBUTIONS TO THE FUND

Contributions to the Fund shall be as follows:

- (1) In the case of employees to whom the agreement applies, at the rate prescribed in clause 24 of the Agreement.
- (2) In the case of members, other than those referred to in sub clause (1) of this clause:
 - (a) admitted in terms of clause 5(3), and (6), R1100 per month;
 - (b) admitted in terms of clause 5(4), and (5), R345 per month.

For the purpose of clause 17(3), the amounts of R1100.00 and R345.00 respectively referred to in paragraphs (a) and (b) of this sub clause, shall be deemed to be equal to four weekly contributions.

- (3) The contributions prescribed in sub clause (2)(a) and (b) of this clause shall be payable at the office of the Council monthly in advance in such form and accompanied by such returns as the Management Committee may from time to time prescribe.

- (4) Where persons who are members of the Fund leave the Republic of South Africa, for a prolonged period, not exceeding six months, contributions shall be made in the following manner:
- (a) married members who leave dependants behind:
 - (i) half of the normal contribution for the period of absence, the amount be paid in advance, and
 - (ii) the Council shall be advised in writing of the date of departure and return, in order to prevent their membership from lapsing and in order to keep their dependants, in benefit; and
 - (b) married members without dependants whose wives accompany them, and single members with no dependants:
 - (i) shall not be required to pay subscriptions during their absence, and their absence shall not be regarded as a break in their membership, provided that they inform the Council in writing of the date of their departure and return, before departing.

9 DEPENDANTS

- (1) Members of the Fund shall not be entitled to the payment of any benefits in respect of their dependants unless such dependants have been registered in the manner provided for in clause 5 and shall furnish such information and documentary evidence as the Management Committee may require.
- (2) Members of the Fund shall be entitled to the payment of benefits in respect of their registered dependants with effect from the date on which the dependant was registered provided that the member qualifies for benefits.
- (3) A member who marries, becomes divorced or widowed or remarries subsequent to his becoming a member of the Fund shall notify the Secretary within 30 days thereof and shall forward his membership card to be amended.
- (4) A member shall notify the Secretary within 30 days thereof and shall forward his membership card to be amended:
 - (a) in the event of the birth or legal adoption of a child;

- (b) if a child and/or any other dependant who has been registered as a dependant in terms of clause 5(8) ceases to qualify as a dependant;
- (c) in the event of the death of a dependant.

10 PAYMENT OF ACCOUNTS

- (1) Approved accounts, excluding those referred to in clause 16, shall be paid by the Fund at preferential tariff to the person or institution rendering the service in the extent stated in Clause 17.
- (2) The Fund shall not be responsible for the payment of any accounts which have not been submitted in the manner set out hereunder: Application for payment of any claim in respect of medical services shall be made in such manner as the Management Committee may prescribe from time to time; provided that all claims shall be made within three months after the date of service and such application shall be accompanied by the following documents:
 - (a) membership card;
 - (b) detailed account for medical services rendered;
 - (c) prescription or certified copy thereof;
 - (d) such other document as the Management Committee may require.

The Fund shall be absolved from any liability whatsoever resulting from the loss, in transit, of such documents submitted by post.

- (3) Notwithstanding anything contained in this rule to the contrary, the Fund shall in no manner be liable for any debts, expenses, liabilities and/or commitments incurred or contracted by members and/or their dependants and/or other persons in respect of medical services unless the provisions of the Agreement or the rules have been completely observed and properly complied with in every respect.
- (4) Accounts for medical treatment shall contain the following details:
 - (a) name of patient;
 - (b) nature of illness;
 - (c) dates and number of visits;
 - (d) nature of injections, if any, and cost of material used;

- (e) details of any other treatment or procedure;
- (f) membership number.

(5) Accounts for medical treatment shall be signed by the member.

11 **CHANGE OF ADDRESS**

Members shall notify the Secretary of the Council within 21 days of any change of address. The Fund shall not be held liable if a member's rights are prejudiced or forfeited as a result of neglect to comply with the provisions of this rule.

12 **ADMINISTRATION OF THE FUND**

- (1) The Fund shall be administered by a Management Committee appointed by the Council and consisting of a number of representatives of the employees together with an equal number of representatives of the employers. The representatives shall be members of the Council or their alternates.
- (2) The Chairman and Vice-Chairman of the Council shall be Chairman and Vice-Chairman respectively of the Management Committee and the provisions of the Council's Constitution relating to their period of office and the convening and conduct of meetings of the Council, shall mutatis mutandis apply in the case of the Management Committee.
- (3) The Fund shall be administered in accordance with the rules prescribed for this purpose by the Council and such rules shall not be inconsistent with the provisions of the Agreement.
- (4) The members of the Management Committee shall be appointed by the Council for such period and under such conditions as the Council may determine.
- (5) Such sum as the Council may from time to time determine shall be payable to members of the Committee as reimbursement for loss of earnings and/or out of pocket expenses occasioned by attendance of meetings of the Committee.
- (6) The Committee shall have the powers to carry out the objectives and purposes of the Fund in accordance with the rules and the provisions of the Agreement as directed by the Council and may:
 - (a) recommend to the Council as and when necessary, having regard to the financial stability of the Fund -

- (i) the monetary value or nature of every benefit to be provided in terms of the rules;
- (ii) that benefits be increased or reduced or that new benefits be added.

- (b) refuse any benefits to any member of the Fund who, in terms of these rules, is disqualified from receiving such benefits;
- (c) sanction investment and expenditure by the Fund;
- (d) refuse and/or withhold any or all benefits from any member and/or his dependants who, in the opinion of the Committee, has acted in a manner calculated or reasonably likely to injure the interests of the Fund or its members.

(7) The Management Committee shall meet when the occasion demands, at such time and place and upon such date as the Chairman may determine.

(8) The Secretary of the Council shall be the Secretary of the Fund and shall perform such duties:

- (a) as may be prescribed in these rules and in the Agreement;
- (b) as the Council and/or the Management Committee from time to time determine;
- (c) as by usage and custom pertain to the office.

13 **APPLICATION AND DETERMINATION OF THE RULES**

- (1) Any dispute concerning the application, meaning or intention of any of the provisions of these rules, or concerning the administration of the Fund which the Management Committee is unable to settle, shall be referred to the Council.
- (2) Any member shall have the right on reasonable grounds to appeal to the Council against a decision of the Management Committee in respect of the Management Committee's interpretation or application of these rules.

- (3) An appeal shall be made in writing to the Secretary within fourteen days of the date of the decision appealed against provided that a member who is unable to express himself easily in writing may have his appeal recorded in writing by the Secretary.
- (4) The Secretary may on behalf of the Council or Management Committee call for further information or medical reports and may require the member to make an affidavit.
- (5) The decision of the Council shall be final and binding on the member and the Council shall not be obliged to give reasons for any decision.

14 **RULES AND ALTERATION OF RULES**

- (1) The Council may at any time make new rules, alter or repeal any existing rules.
- (2) Copies of the Fund's rules in force and of any amendment or rescission or addition to the rules, shall be transmitted to the Registrar of Labour.
- (3) Any amendment or rescission or addition made to these rules in terms of sub clause (1) shall come into effect on a date to be determined by the Council, provided that:
 - (a) claims received by the Fund within 30 days of such amendment shall be accepted and paid by the Fund in accordance with the rules which were in operation at the date of service in respect of services rendered to a member and/or his dependants;
 - (b) if, in terms of any amendments or additions made to these rules subsequent to the admission to membership, such member would not be eligible for membership, such member shall nevertheless be permitted to continue as a member of the Fund;
 - (c) a member who has been permitted to continue as a member of the Fund in terms of paragraph (b) and whose membership is subsequently terminated in terms of clause 7, shall not be eligible for re-admission to membership by virtue of the provision of paragraph (b).

15 **MEDICAL EXAMINATION**

The Management Committee reserves the right at any time to require a member of any dependants to undergo medical examinations at the

Fund's expense by any medical practitioner and/or specialist which the Fund may nominate.

16 **EXCLUDED BENEFITS**

Notwithstanding anything to the contrary contained in these rules the Fund shall not be liable for any expenses incurred by a member and/or any of his dependants in connection with or in respect of:

- (1) Medical, hospital, nursing home or any other services or material which has been rendered or supplied without cost to the member.
- (2) Cost incurred for treatment required arising from an injury sustained in an accident by a member or a dependant of a member whilst driving or being driven in or on a motor vehicle, motor cycle or aeroplane.
- (3) Costs incurred for treatment required arising from injury sustained by a member or dependant of a member and for which a third party may be liable unless the Committee is satisfied that there is no reasonable prospect of the member or dependant recovering adequate damages from the third party.
- (4) Costs incurred for treatment arising from previous employment or during service with the armed forces in peace or war, or for any ailment or condition for which a disability allowance or pension has been awarded.
- (5) Assaults arising from deliberate provocation or from any disturbance of the peace by any person or persons, or war, invasion, act of foreign enemy, hostility, mutiny, rebellion, revolution, conspiracy, sabotage or military power.
- (6) Travelling expenses and/or conveyance.
- (7) Cost incurred for treatment of an illness or injury sustained by a member or dependant of a member where in the opinion of the Committee, such illness or injury is directly attributable to irregular or immoral habits, failure to carry out instructions of a medical practitioner or a specialist or to gross negligence.
- (8) Cost incurred for treatment which is the responsibility of Workmen's Compensation or any other body.
- (9) Cost incurred in respect of recuperative purposes.

- (10) The cost of operations, treatment or appliances which are not essential but are performed or supplied in accordance with the patient's wishes including all plastic surgery of an elective or cosmetic nature.
- (11) Cost of specialist's services unless the member or his dependant was referred to the specialist by a general practitioner.
- (12) Cost of medicines which have not been prescribed by a medical practitioner.
- (13) Suicide, or attempted suicide, intentional self-injury or injury sustained while performing an unlawful act.
- (14) Injuries resulting from participation in any professional sport, mountaineering or aeronautics.
- (15) The influence of intoxicating liquor, alcohol or drugs.
- (16) Inoculations, X-rays, examinations or investigations which can be obtained by any member of the public free of charge from the State or local health authority.
- (17) Cost incurred in excess of any tariff or fees or preferential tariff approved by the Management Committee from time to time.
- (18) Cost incurred by members in respect of treatment by Psychologists, Orthoptists, Biokinetics, Homeopaths, Osteopaths, Podiatrists (Chiropodists), Hearing Aid Acousticians, Speech Therapists and Audiologists, Social Workers, Occupational Therapists and Dieticians.

17

BENEFITS PAYABLE

- (1) (a) Benefits shall, subject to the provisions of these rules, be paid by the Fund in respect of medical services rendered to members and/or their dependants in accordance with the amounts hereinafter specified.
- (b) Claims submitted by a member shall be accepted and paid by the Fund in the order in which they are received by the Fund.

- (2) All members shall be subject to a waiting period covering 16 consecutive weekly contributions in terms of clause 12 of the Agreement and no benefits shall accrue in respect of treatment incurred on or before the first day of the fourth month of membership.
- (3) From the commencement of membership of the Fund subject however to the provisions of paragraphs 8(e), (h), (i), (j), (k) and (l) of this clause, every member shall be entitled to a maximum of R40.000 benefits per contribution year or if he joins the Fund during the year, a pro-rata portion of R40.000.
- (4) If the benefits payable in respect of a claim submitted by a member would cause the maximum benefits payable in terms of sub clause (3) of this clause to be exceeded:
 - (a) the portion borne by the Fund, as prescribed in this clause in respect of an account or accounts submitted shall be reduced pro rata to such amount as does not cause the maximum benefit payable in terms of sub clause (3) to be exceeded;
 - (b) the pro rata reduced benefit as determined in paragraph (a) of this sub clause, shall be paid by the Fund direct to the creditor or creditors;
 - (c) the member shall be responsible for the payment of the balance of the account or accounts direct to the creditor or creditors.
- (5) In the case of illness of a protracted nature, the Committee shall have the right to insist that a member or dependant consult a medical practitioner, or specialist nominated by the Committee with the permission of the attending practitioner. If the Committee directs that such member or dependant shall act upon the advice of such medical practitioner or specialist and if the member or dependant fails to do so, no further benefits shall be granted in respect of such illness.
- (6) Benefits provided by the Fund shall not be transferable and any member who attempts to assign, transfer, cede, pledge or hypothecate his rights shall forthwith cease to be entitled to any

benefits whatsoever and membership of the Fund in respect of such member and his dependants shall be terminated.

(7) The Committee may, at its discretion, make an ex gratia payment on such terms and conditions as the Committee may from time to time determine.

(8) Subject to the provisions of clause 16, the amount payable by the Fund in respect of services rendered and/or material supplied to a member and/or his dependants, shall be as follows, the balance being the portion payable by the member:

(a) General Practitioner

90% of the tariff of fees payable for visits and treatment, subject to a maximum of 30 consultations and/or visits.

(b) Specialists

90% of the tariff of fees payable for visits and treatment and 90% for consultations, provided that the patient has been referred to a specialist by a general practitioner.

(c) Operations

90% of the tariff of fees of all surgeons, assistant surgeons, and anaesthetists' fees in the case of surgical operations, including circumcisions done within six months after birth and on medical recommendation.

(d) Hospitalisation

(i) 100% of Provincial Hospital charges, not exceeding 60 days in any one year, subject to the member's latest tax assessment form being presented to the hospital authorities;

(ii) Ward Fees charges (Private Hospitals) at a rate not exceeding R1000 per day and not exceeding 60 days in any one year.

(e) Theatre Fees

Theatre fees – maximum of R2000 per operation.

(f) Prescribed Medicines

(i) The cost of medicines and drugs prescribed and/or supplied by a medical practitioner, dentist, hospital or nursing home provided that the total amount payable per family in respect of any member and his dependants in any one calendar year shall not exceed R5500 and provided further that the member shall be responsible for the payment of the first R5-00 per prescription.

(ii) No benefits shall be payable in respect of patent foods, including babies' foods, contraceptives, abortives, shampoos, soaps, slimming preparations, tonics, domestic homeopathic, biochemical and herbal remedies not approved by the Management Committee.

(iii) The member shall pay the full account in respect of medicines prescribed by a doctor or dentist and supplied by a chemist and submit such account together with the receipts and a copy of the doctor's prescription to the Secretary before the Fund's share is refunded to him. Should a member's credit in respect of such claims be less than R5-00, payment thereof shall be held over until the member's credit amounts to not less than R5-00.

(g) Physiotherapy

90% of the cost of physiotherapy if prescribed by a doctor.

(h) Dental Services

90% of fees in respect of all dental services including crowns, bridgework and orthodontics provided that dental claims shall not exceed an aggregate maximum amount of R3500 per year per family.

(i) Chiropractors

90% in respect of Chiropractors subject to a maximum number of 10 visits.

(j) Optical Services

Optical benefits shall be limited to R2000.00 per family per year and shall include the testing of eyes, the supply of lenses (including contact lenses) and frames and repairs.

(k) Surgical Appliances

In orthopaedic cases, the cost of the surgical appliance with a maximum of R500 per appliance, if accompanied by a doctor's letter or prescription.

(l) Hearing Aids

A maximum benefit of R500-00 per family per year for hearing aids will be allowed.

(9) The payment of any amount shall be dependant on there being sufficient funds available.

(10) Claims shall be forwarded to the Secretary for payment in such manner and in such form as the Management Committee may from time to time prescribe.

GENERAL

A member shall authorise the Management Committee to call for such information or medical reports from the member's medical practitioner as may be required by the Management Committee, to give full and proper consideration to any claim for medical services.