

2020

DISCOVERY HEALTH MEDICAL SCHEME

# FREQUENTLY ASKED QUESTIONS

WHO GLOBAL OUTBREAK BENEFIT

## Discovery Health Medical Scheme World Health Organization Global Outbreak Benefit

### About the benefit and cover

#### 1. Am I covered for treatment related to an outbreak disease such as COVID-19?

Yes. The WHO Global Outbreak Benefit is available to all members of Discovery Health Medical Scheme (DHMS) during a declared outbreak period. Once your diagnosis is confirmed, you are covered for out-of-hospital costs for the related treatment from the Scheme and not from your day-to-day benefits. Cover includes a defined basket of care that comprises the diagnostic test, a consultation and defined supportive treatment and medicine. Your chosen plan network rules, where applicable, will also apply to healthcare services paid from the WHO Global Outbreak Benefit.

COVID-19 is a Prescribed Minimum Benefit (PMB) and cover is subject to a defined basket of diagnostic and follow-up treatment.

In-hospital treatment related to COVID-19 for approved admissions is covered from the Hospital Benefit based on your chosen health plan.

#### 2. Is COVID-19 a Prescribed Minimum Benefit (PMB)?

Yes, confirmed COVID-19 diagnosis is considered a PMB and will be funded in accordance with the Discovery Health Medical Scheme treatment guidelines and baskets of care.

#### 3. Do I have to pay extra for the WHO Outbreak Benefit?

No, this WHO Global Outbreak Benefit is a new benefit available to all Discovery Health Medical Scheme members, in response to the global outbreak of COVID-19.

#### 4. Do I have to activate or apply for treatment related to COVID-19?

No. Cover is immediately available to members on all plans subject to meeting the applicable benefit entry criteria (listed below). Claims covered as part of the defined basket of care for out-of-hospital treatment for a COVID-19 infection will be identified based on the unique ICD-10 code for the disease and positive test result. Identification of confirmed cases of COVID-19 may be retrospective as results may only become available after the date of service of the initial test and treatment.

#### 5. What is the clinical entry criteria for this benefit?

The following criteria need to be met before claims will be paid from the WHO Outbreak Benefit:

- The disease needs to be a WHO recognised outbreak disease;
- Cover is for **confirmed cases** only;
- Cover is for diseases during a declared outbreak period
- May be subject to use of preferred providers, where applicable;
- Subject to the Scheme's treatment guidelines and protocols.

#### 6. Will I have to pay upfront and submit a claim for it to be paid from this benefit?

This depends on the payment arrangements we have with your healthcare provider. If your healthcare provider submits a claim on your behalf, we will reimburse them directly from your WHO Global Outbreak Benefit once the disease is confirmed. If your claim is submitted before your condition is confirmed, the Scheme will refund you once the diagnosis is confirmed.

If your doctor requires you to pay upfront, you can submit your claim to us:

- Upload your claim at [www.discovery.co.za](http://www.discovery.co.za)
- Use the Discovery app to upload a photo of your claim or scan a QR code
- Email your claim to [claims@discovery.co.za](mailto:claims@discovery.co.za)

Make sure that your membership number and your healthcare provider's details including their practice number are clearly visible on the claim.

## **7. Am I covered for COVID-19 when travelling abroad?**

The WHO Global Outbreak Benefit is a separate benefit to the International Travel Benefit (ITB). Claims while traveling abroad will be covered from the ITB, depending on this benefit being available on your chosen health plan. All benefit rules related to cover from the ITB will still apply.

## **8. What is Discovery's stance on chronic medication for its members during the lockdown?**

The health and wellbeing of our members is our absolute priority and we continue to take measures to provide support and precautions during this challenging time. We would like to reassure you that pharmacies are an essential service and will remain open, operating as usual, throughout the 21 day stay-at-home period, with spatial distancing measures and additional sanitation measures within stores.

Discovery Health Medical Scheme supports the funding and access to chronic medicines for approximately 700 000 members living with chronic diseases. It is an important consideration and role of Discovery health to ensure that these medicines can be collected as usual by members. Issuing an extra month of chronic medication to all members living with chronic diseases could deplete the short-term supply of these important medicines. The medicines supply chains are functioning well into South Africa at present.

When collecting your medicine, please keep in mind social distancing precautions, and the important hygiene practices. This is especially important for members living with chronic diseases. Ideally rather send someone living with you to fetch these medicines, if this is feasible.

We remain committed to our core purpose of enhancing and protecting people's lives, and in the interest of society, we would do more harm to medicine availability for all if we changed the usual dispensing patterns for this large group of members.

This view is also supported by SAHPRA and the PSSA, in line with the presidential COVID-19 address advising against stock piling.

## **9. Am I covered if I am in a waiting period?**

The Scheme resolved to change its approach to underwriting for the duration of the outbreak, specifically with regards to cover for COVID-19. Members of DHMS that are diagnosed with COVID-19 after joining Discovery Health Medical Scheme will have access to the WHO Global Outbreak benefit, even if they are subject to a waiting period at the time of being diagnosed with COVID-19.

Members of Discovery Health Medical Scheme that are diagnosed with COVID-19 before joining DHMS will not have access to the WHO Global Outbreak benefit, and will be subject to waiting periods to protect the Scheme and its members against anti-selection.

## Testing

### 10. Can I get tested at any time for COVID-19 virus?

There are clear testing guidelines from the World Health Organization and the National Institute for Communicable Diseases and need for testing will be determined by your healthcare professional if you have:

- Acute respiratory illness with sudden onset of at least one of the following: cough, sore throat, shortness of breath or fever [ $\geq 38^{\circ}\text{C}$  (measured) or history of fever (subjective)] irrespective of admission status **AND**
- In the 14 days prior to onset of symptoms, met at least one of the following epidemiological criteria:
  - Were in close contact with a confirmed or probable case of SARS-CoV-2 infection;

**OR**

- Had a history of travel to areas with presumed ongoing community transmission of SARS-CoV-2; i.e., Mainland China, South Korea, Singapore, Japan, Iran, Hong Kong, Italy, Vietnam and Taiwan.

**OR**

- Worked in, or attended a health care facility where patients with SARS-CoV-2 infections were being treated

**OR**

- Admitted with severe pneumonia of unknown cause.

### 11. How do I get tested for COVID-19?

COVID-19 is diagnosed by using a polymerase chain reaction (PCR) molecular testing on a sample from the nose, throat or chest.

If you present with symptoms and meet the criteria for testing, do the following:

- Contact your doctor who will assess your risk and guide the testing process.
- Stay at home and avoid contact with others. Follow preventive practices to prevent the possible transmission and follow your doctor's advice about treating your symptoms while waiting for the tests results.

### 12. Why do we need a DHMS benefit if government is paying for the test?

As of 09 March 2020, private laboratories have been granted approval to start performing the testing in the private sector. Discovery Health Medical Scheme will pay for tests as part of the DHMS WHO Global Outbreak Benefit, subject to meeting the clinical entry criteria. This cover available to all health plans and will not affect the day-to-day benefits, where applicable.

### 13. I did my test and it showed that I do not have COVID-19 virus. My doctor also requested an influenza tests and that has not been paid / paid from my Medical Savings Account. Why?

The DHMS WHO Global Outbreak Benefit is available to provide effective and prudent healthcare cover for our members who are diagnosed with COVID-19 virus.

This benefit pays for the influenza test when the diagnosis for COVID-19 virus is confirmed. So, when someone has COVID-19 virus both tests will be paid by the Scheme.

Any additional tests will be paid according to health plan benefits because DHMS WHO Global Outbreak Benefit extends cover in the case of a confirmed diagnosis.

### 14. How am I covered if the test for COVID-19 is negative?

In response to the outbreak of Sars-CoV-2, Discovery Health Medical Scheme (DHMS) quickly established a new benefit, supported by the Council for Medical Schemes, to extend funding to DHMS members diagnosed with COVID-19. Members on all plans have automatic and immediate access to this new benefit without any additional payments or action required. It is called the WHO Global Outbreak benefit, and covers diagnostic testing for influenza and COVID-19, consultations and

supportive treatment for members that contract COVID-19. Since the launch of this benefit by DHMS, COVID-19 has also been classified as a PMB by the Council for Medical Schemes, and will be funded accordingly by DHMS.

Members do not have COVID-19, can access funding from their available day-to-day benefits for the diagnostic testing. It is very important that COVID-19 testing is only done for appropriate people, who are high risk and meet the COVID-19 case definition. Testing of asymptomatic people, who are low risk and potentially being tested to allay anxiety, will overwhelm the healthcare system. Asymptomatic patients with COVID-19 may in fact test negative, before they become symptomatic, and hence the testing protocol as directed by the National Institute for Communicable Diseases (NICD) must be followed. Discovery Health Medical Scheme's priority is to ensure seamless access to immediate and unlimited funding for members who contract COVID-19, and may need a combination of out of hospital and potentially high acuity in hospital care. Discovery is also working with both the public and private healthcare providers to ensure its members receive optimal testing and care, at all times, whilst contributing to the broader fight to flatten the curve of the COVID-19 outbreak.

**15. Does the Scheme pay for the time I have to be in quarantine?**

No, as self-quarantine is mainly in the home setting. DHMS provides cover for relevant healthcare services which include specific tests and supportive day-to-day treatments, and hospital cover when necessary.

## Hospital treatment

**16. Is there a specific network of hospitals to use for treatment of COVID-19 virus or disease?**

No, but the use of network or Designated Service Providers, where applicable to your health plan, still apply unless in a case of an emergency.

All private hospitals in South Africa have indicated that they are ready to care for patients with COVID-19 virus. When receiving treatment in a hospital, the benefits and rules of your health plan will apply – that includes networks, rates and any exclusions. There are also specific state hospitals that have been identified for care in the public healthcare sector.

## How am I covered while travelling abroad during COVID-19?

**17. Am I covered for repatriation?**

The International Travel Benefit (ITB) and Africa Evacuation Benefit cover transport or evacuation to the nearest medical facility if you need emergency medical treatment only. Repatriation back to SA will be covered where the Scheme requests you to be repatriated for emergency medical treatment within the 90 days of cover. Where there is no medical need to be repatriated back to SA, the Scheme cannot cover the travelling expenses as these are not considered healthcare expenses.

**18. How am I covered outside the 90 day cover period of the ITB?**

Outside the 90 days of cover you will have access to cover in accordance with your chosen health plan at the SA equivalent cost for treatment you would have had if it occurred in SA. This includes cover for COVID-19 healthcare services if needed. KeyCare Plans do not offer cover for healthcare services abroad. For more details on your cover, refer to the Cover while travelling abroad guide on [www.discovery.co.za](http://www.discovery.co.za) under Find documents and your certificates.

**19. What if I am in quarantine or unable to return to SA due to travel restrictions?**

If you are in a forced quarantine by law or for medical reasons or are unable to return to SA due to travel restrictions, your cover will be extended beyond the 90 days. For forced quarantine cases, the Scheme will extend your cover by the suggested quarantine period of 14 days, if you are unable to return to SA due to travel restrictions cover will be extended until such time as the travel restrictions has been lifted.

## Contact us

Tel (Members): 0860 99 88 77, Tel (Health partner): 0860 44 55 66, PO Box 784262, Sandton, 2146, [www.discovery.co.za](http://www.discovery.co.za),  
1 Discovery Place, Sandton, 2196.

## Complaints process

Discovery Health Medical Scheme is committed to providing you with the highest standard of service and your feedback is important to us. The following channels are available for your complaints and we encourage you to follow the process:

### 1 | STEP 1 – TO TAKE YOUR QUERY FURTHER:

If you have already contacted the Discovery Health Medical Scheme and feel that your query has still not been resolved, please complete our online complaints form on [www.discovery.co.za](http://www.discovery.co.za). We would also love to hear from you if we have exceeded your expectations.

### 2 | STEP 2 – TO CONTACT THE PRINCIPAL OFFICER:

If you are still not satisfied with the resolution of your complaint after following the process in Step 1 you are able to escalate your complaint to the Principal Officer of the Discovery Health Medical Scheme. You may lodge a query or complaint with Discovery Health Medical Scheme by completing the online form on [www.discovery.co.za](http://www.discovery.co.za) or by emailing [principalofficer@discovery.co.za](mailto:principalofficer@discovery.co.za).

### 3 | STEP 3 – TO LODGE A DISPUTE:

If you have received a final decision from Discovery Health Medical Scheme and want to challenge it, you may lodge a formal dispute. You can find more information of the Scheme's dispute process on the website.

### 4 | STEP 4 – TO CONTACT THE COUNCIL FOR MEDICAL SCHEMES:

Discovery Health Medical Scheme is regulated by the Council for Medical Schemes. You may contact the Council at any stage of the complaints process, but we encourage you to first follow the steps above to resolve your complaint before contacting the Council. Contact details for the Council for Medical Schemes: Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch-Hazel Avenue, Eco Park, Centurion 0157 | [complaints@medicalschemes.com](mailto:complaints@medicalschemes.com)  
0861 123 267 | [www.medicalschemes.com](http://www.medicalschemes.com)