

AFFINITY HEALTH BENEFIT FOR THE 2020 CORONAVIRUS PANDEMIC

About the Benefit

What am I covered for during the COVID 19 outbreak?

On the 11th of March 2020, the Director-General of the World Health Organisation declared a pandemic due to the escalating outbreak of the novel Coronavirus COVID-19.

This outbreak is actively monitored by a team of experts that have assessed the resources available at private hospitals to provide the best possible healthcare outcome for COVID-19 admissions.

At this time, Affinity Health is supporting our members during the outbreak period by creating a fund, the proceeds of which will be made available to members in support of public health initiatives aimed at containing and mitigating the spread of the disease.

Notwithstanding the policy and insurance arrangements in place, the proceeds of the fund will be utilised to cover Affinity Health members for a defined list of medical processes and medication during this time.

If you are a Day-to-Day Member or Combined Member:

Affinity Health will provide unlimited use of our Telehealth service, where members can speak telephonically with a qualified healthcare professional to determine whether they meet the clinical criteria for testing. This service is available from the comfort and safety of your home.

If you meet the clinical criteria, the fund will cater for normal GP consultations from the Affinity GP network. Acute medication required for symptomatic relief will also be catered for by the fund in terms of the formulary subject, to clinical and managed care guidelines.

If recommended for testing by a medical professional, the fund will cover the cost of the test if it returns a positive result for the COVID-19 virus.

The Coronavirus fund covers Affinity Health members for confirmed cases of the COVID-19 virus.

What will the fund cater for?

The proceeds of the fund will be utilised for:

- The diagnostic test (if you test positive for the COVID-19 virus, the fund will reimburse you the full costs up to the maximum benefit amount);
- A consultation (which can also include Telehealth consultations and consultations at a casualty unit), subject to pre- authorisation; and
- Defined supportive medicine list, up to a maximum of R150 per person per episode during the outbreak period, subject to clinical guidelines and the Medication Formulary.

Is this an extra benefit that I have to pay for?

The proceeds of the fund are available to all current members of Affinity Health and is available immediately subject to initial waiting periods applicable to the policy. The proceeds have been funded out of the profits of Affinity Health and as such, there is no extra cost to member.



What do you mean by clinical criteria? Can anyone get tested?

The Clinical criteria follows the international standard before testing as prescribed by the Department of Health. Affinity Health's healthcare professionals follow this guideline to best advise members when to go for testing. Testing and benefits will not be paid out from the fund should such guidelines not be followed.

If you meet the clinical criteria, our telehealth team will send you for testing at the closest centre and prescribe you acute medication for symptomatic relief. A GP consultation will become available to you through our network, if required. Should the GP prescribe acute medication, this will be covered from the fund subject to our Medication Formulary.

If a medical professional recommends that you go for testing, the fund will cover the cost if the test returns positive.

Do I need to pay anything to the Treating Provider or Facility?

Upfront payments are required if you are recommended for the test, as the fund will only cover the cost if a member tests positive for the COVID-19 virus.



Following the **pre-authorisation process available 24/7** will best guide the member to ensure that treatment is done at a preferred provider to save the member further costs.

Will this benefit cover me while I am travelling?

Cover is only provided whilst you are within the borders of South Africa.



Testing

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. The 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:

- o Were in close contact with a confirmed or probable case of SARS CoV-2 infection;
- o Had a history of travel to areas with presumed ongoing community transmission of SARS CoV-2; e.g. Mainland China, South Korea, Singapore, Japan, Iran, Hong Kong, Italy, Vietnam and Taiwan;
- o Worked in, or attended a health care facility where patients with SARS CoV-2 infections were being treated; or
- o Admitted with severe pneumonia of unknown cause.

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:

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

What happens if my GP sends me for other tests?

If your GP sends you for other tests and these are not on the Affinity Health Pathology Formulary, these will be covered provided you are on a Day-to-Day or Combined Plan in terms of the policy and not through the fund.



Terms and Conditions

- The Coronavirus Disaster Fund is created and funded utilising the profits of Affinity Health and do not form part of the policy.
- No cover is provided in terms of your policy for epidemics/pandemics as they are listed exclusions in terms of the policy wording. Notwithstanding, in the interests of our members, we have voluntarily established a separate fund which will cover the cost of a defined list of medical processes and medication in light of the current COVID-19 pandemic, ensuring that our members obtain the best healthcare possible within the parameters and limitations set out herein.
- The establishment of the fund and the cover provided by it will not attract a charge to the members and is payable out of the fund on normal medical evidence being submitted.
- The cover provided by the fund is subject to (i) the requirements and limits set out above and (ii) the limits determined in our sole and unfettered discretion from time to time.
- Decisions relating to payments made out of the fund shall be made on a casuistic basis in our sole unfettered discretion.
- The fund shall exist for a limited period and may be revoked by us at any time without notice to you.
- Notwithstanding the above, we shall retain the right at all times to reject any request for a payment from the fund for any reason. As such we will accept no liability as a result of any such requests for a payment being rejected in terms of the fund.
- As this benefit falls outside of the scope of the policy, any decisions taken in terms of fund payments shall not be subject to review.



Affinity Health, a product of National Risk Managers (Pty) Ltd (FSP 47132), the Underwriting Managing Agency; Lion of Africa Life Assurance Company Ltd (FSP 15283), the Insurer. This policy shall be voidable in the event of misrepresentation, misdescription or non-disclosure of any particular material fact to this insurance by or on behalf of an insured person. Terms and conditions as contained in the policy document apply.



CUSTOMER CARE

0861 11 00 33



24-HOUR PRE-AUTH DEPARTMENT:

0861 11 00 33 or auth@affinityhealth.co.za