

YOUR COVER FOR DIABETES AND THE DIABETES CARE PROGRAMME

DISCOVERY HEALTH MEDICAL SCHEME
2025





Overview

Diabetes mellitus (diabetes) is a chronic condition which, if left untreated, can result in serious complications like blindness, kidney failure and heart attacks. However, good control of diabetes will reduce the occurrence of these complications. This benefit guide provides an overview of your cover for diabetes and also outlines more information on our Diabetes Care Programme.

About some of the terms we use in this document

There may be some terms we refer to in the document that you may not be familiar with. Here are the meanings of these terms.

TERMINOLOGY	DESCRIPTION
Chronic Illness Benefit (CIB)	The Chronic Illness Benefit (CIB) covers you for a defined list of chronic conditions. You need to apply to have your medicine and treatment covered for your chronic condition.
Chronic Disease List (CDL)	A defined list of chronic conditions we cover according to the Prescribed Minimum Benefits (PMBs).
Designated service provider (DSP)	A healthcare provider (for example doctor, specialist, pharmacy or hospital) who we have an agreement with to provide treatment or services at a contracted rate. Visit www.discovery.co.za or click on Find a healthcare provider on the Discovery app to view the full list of designated service providers (DSPs).
Discovery Health Rate	This is a rate we pay for healthcare services from hospitals, pharmacies, healthcare professionals and other providers of relevant health services.
Emergency medical condition	<p>An emergency medical condition, also referred to as an emergency, is the sudden and, at the time unexpected onset of a health condition that requires immediate medical and surgical treatment, where failure to provide medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person's life in serious jeopardy.</p> <p>An emergency does not necessarily require a hospital admission. We may ask you for additional information to confirm the emergency. An emergency does not necessarily require a hospital admission. We may ask you for additional information to confirm the emergency.</p>
Diabetes Coaching	A diabetes coaching programme which will be offered to directly support high-risk diabetic patients in collaboration with their Premier Plus GP.
HealthID	HealthID is an online digital platform that gives your doctor fast, up-to-date access to your health information. Once you have given consent, your doctor can use HealthID to access your medical history, make referrals to other healthcare professionals and check your relevant test results.
ICD-10 diagnosis code	A clinical code that describes diseases, signs and symptoms, abnormal findings, complaints, social circumstances and external causes of injury or diseases, as classified by the World Health Organisation (WHO).
Premier Plus GP	A Premier Plus GP is a network GP who has contracted with us to provide you with coordinated care for defined chronic conditions.
Primary care doctor	A primary care doctor helps you take care of your general health. Having one nominated doctor who manages your health and coordinates your care leads to better health outcomes. Your primary care doctor knows your complete medical history and takes the healthcare approach that works best for you.



TERMINOLOGY	DESCRIPTION
Prescribed Minimum Benefits (PMBs)	<p>In terms of the Medical Schemes Act of 1998 (Act No. 131 of 1998) and its Regulations, all medical schemes have to cover the costs related to the diagnosis, treatment and care of:</p> <ul style="list-style-type: none"> • An emergency medical condition • A defined list of 271 diagnoses • A defined list of 27 chronic conditions. <p>To access Prescribed Minimum Benefits, there are rules defined by the Council for Medical Schemes (CMS) that apply:</p> <ul style="list-style-type: none"> • Your medical condition must qualify for cover and be part of the defined list of Prescribed Minimum Benefit (PMB) conditions • The treatment needed must match the treatments in the defined benefits • You must use designated service providers (DSPs) in our network. This does not apply in emergencies. However even in these cases, where appropriate and according to the rules of the Scheme, you may be transferred to a hospital or other service providers in our network, once your condition has stabilised. If you do not use a DSP we will pay up to 80% of the Discovery Health Rate (DHR). You will be responsible for the difference between what we pay and the actual cost of your treatment. <p>If your treatment doesn't meet the above criteria, we will pay according to your plan benefits.</p>
Reference Price	The Reference Price is the set monthly amount we pay for a medicine category. This applies for medicine that is not listed on the medicine list (formulary).

Diabetes Care Programme

This programme together with your nominated Premier Plus GP, will help you actively manage your diabetes. The programme gives you and your nominated Premier Plus GP, access to various tools and additional benefits to monitor and manage your condition and to ensure you get high quality coordinated healthcare and improved outcomes.

There is overwhelming medical evidence that patients experience improved health outcomes when their primary care is coordinated through a single primary care GP. In line with this best practice, you and your dependants need to nominate a primary care GP for the effective management of your chronic conditions.

When you visit your nominated network GP for the management of your chronic condition, we'll cover the consultation in full. If you see a GP who is not your nominated primary care GP, or your nominated GP is not a network GP, you will be responsible for any co-payments. You and your dependants can change your nomination three times every calendar year. This does not affect the cover for prescribed chronic medicine, chronic illnesses managed by specialists, or consultations relating to acute conditions.

Nominate your GP or manage your existing nomination [here](#).

About joining the Diabetes Care Programme

If you have been diagnosed with and registered on the Chronic Illness Benefit (CIB) for diabetes, you have access to the Diabetes Care Programme.

- Your nominated Premier Plus GP can enrol you on the Diabetes Care Programme through HealthID, provided that you give consent to do so.
- Members on *KeyCare Plans* must be enrolled by their nominated Premier Plus GP who is also a participating GP in the KeyCare GP Network.
- Members on *Smart plans* must be enrolled by their nominated Premier Plus GP who is also a participating GP on the Smart GP Network.



Visit www.discovery.co.za under Medical aid > Find a healthcare provider or click on Find a healthcare provider on the Discovery Health app to find a doctor on the network.

Your Premier Plus GP will work with you to manage your condition

The Diabetes Care Programme is based on clinical and lifestyle guidelines. Through the programme, you and your nominated Premier Plus GP can agree on key goals and track your progress on a personalised dashboard on HealthID, displaying your unique Diabetes Management Score. This will help to identify which areas require attention so that you and your nominated Premier Plus GP can improve the management of your condition.

In addition to the standard treatment basket of procedures and consultations available to members registered on the Chronic Illness Benefit for the management of diabetes, members who join the Diabetes Care programme will have access to the following additional benefits:

- A biokineticist consultation to ensure that you obtain the best advice about exercise, tailored to your needs. To make sure that we fund this from the correct benefit, please ask your biokineticist to claim the code DCARE and include the ICD-10 diagnosis code for your condition on the claim.
- An additional dietitian consultation to ensure that you obtain the best advice about nutrition. To make sure that we fund this from the correct benefit, please ask your dietitian to claim the most appropriate code from the table below and include the ICD-10 diagnosis code for your condition on the claim.

PROCEDURE CODE	DESCRIPTION
• 84205	• Nutritional assessment, counselling and/or treatment. Duration: 51-60min
• 84204	• Nutritional assessment, counselling and/or treatment. Duration: 41-50min
• 84203	• Nutritional assessment, counselling and/or treatment. Duration: 31-40min
• 84202	• Nutritional assessment, counselling and/or treatment. Duration: 21-30min
• 84201	• Nutritional assessment, counselling and/or treatment. Duration: 11-20min
• 84200	• Nutritional assessment, counselling and/or treatment. Duration: 1-10min

- You will have access to additional blood glucose test strips per year. Blood glucose test strips that are on our formulary will be funded in full up to the Scheme Rate. Blood glucose test strips that are not on our formulary will be funded up to the monthly Chronic Drug Amount (CDA), applicable to plan type, up to a maximum of the Discovery Health Rate (DHR) or reference price, whichever is applicable.
- You may qualify for access to a diabetes educator to help you with your day-to-day diabetes management.
- You could also qualify for health goals and get rewarded for achieving your personalised health targets. Download the Discovery app and activate Track Your Health.

Where to find your Diabetes Management Scorecard

You can access the Diabetes Management Scorecard when enrolled on the Diabetes Care Programme. You can log on to the Discovery website www.discovery.co.za under Medical Aid > Benefits and cover > Condition specific care programmes to view your Diabetes Management Scorecard. This will take you to your Diabetes Management Scorecard, which is available to all members enrolled on the Diabetes Care Programme.

Additional benefits for members with diabetes

Your access to care at home for members with chronic conditions

If you are registered on the Chronic Illness Benefit (CIB) for Diabetes, you and your nominated Premier Plus GP can manage your chronic condition through the Discovery Health app, in the comfort of your home. Qualifying members have access to a range of digital services linked to remote monitoring and personalised coaching, to help you track and manage your chronic condition from home. For more information view the benefit guide for Care at home for members on www.discovery.co.za under Medical Aid > Find documents and certificates.

Home Monitoring Device Benefit for essential home monitoring



If you meet the Scheme's benefit entry criteria, we pay up to a limit of R4,700 per person per year, at 100% of the Discovery Health Rate (DHR), for a defined list of home monitoring devices such as a telemetric glucometer device for diabetes and devices for other conditions such as chronic obstructive pulmonary disease, congestive cardiac failure, and pneumonia. Approved cover for these devices will not affect your day-to-day benefits but certain frequency limits may apply. For more information view the benefit guide for Connected Care for members at home on www.discovery.co.za under Medical Aid > Find documents and certificates.

Cover for continuous glucose monitoring sensors for members living with type 1 diabetes

Continuous glucose monitoring (CGM) automatically tracks blood glucose levels giving you the ability to test your glucose level at any time and better manage your condition. When appropriately prescribed by a doctor in our network, members with type 1 diabetes have cover for continuous glucose monitoring sensors up to a monthly cover amount. Cover depends on your chosen health plan. This Benefit is not available on the KeyCare Series. For more information on your cover for continuous glucose monitoring sensors please refer to the Chronic Illness Benefit formulary (medicine list) under Medical Aid > Manage your health plan > Find important documents and certificates.

Benefits are available for children and adults registered on the Chronic Illness Benefit (CIB) for type 1 diabetes on all plan types, except the KeyCare plans. CGM sensors will be funded from your Scheme benefits up to a monthly limit depending on the age of the patient and your chosen health plan. For children up to the age of 18, CGM sensors will be funded up to 100% of the monthly limit of R1,620 for all plan types except KeyCare. For adult members on the Executive and Comprehensive plan types, CGM sensors will be funded up to 100% of the monthly limit to a maximum of R1,620. For adults on all other plan types (excluding KeyCare plans) CGM sensors will be funded up to 50% of the monthly limit to a maximum of R810.

Visit www.discovery.co.za under Medical Aid > Find a healthcare provider or click on Find a healthcare provider using your Discovery Health app or call us on 0860 99 88 77 to find a provider in our network.

Access to diabetic retinopathy screening

If you are registered on the Chronic Illness Benefit (CIB) for diabetes you have access to the Diabetic Retinopathy Screening Benefit, which covers a yearly screening consultation paid for by the Scheme. Learn more about diabetic retinopathy screening [here](#). Visit www.discovery.co.za under Medical Aid > Find a healthcare provider or click on Find a healthcare provider using your Discovery Health app or call us on 0860 99 88 77 to find a provider in our network.

Access to Resilience Wellbeing Course

As part of the Diabetes Care Programme you have access to a Resilience wellbeing course with our Digital Therapeutics service provider, SilverCloud. We know that living with a chronic condition can be tough. Building resilience by completing this course can help to enhance your mental wellbeing. This course will help you develop problem-solving skills across five core areas – purpose, self, connections, body, and mind. The course ultimately works to build your resilience through a focus on skills, behaviours, and attitudes. Speak to your primary care doctor to find out more.

Discover your best health with Personal Health Pathways



Personal Health Pathways is designed to help you get healthier by doing personalised health and exercise actions. You'll get personalised health and exercise actions to complete, based on your unique healthcare needs. By completing actions, you'll close your rings and earn personalised rewards. You can access your personalised healthcare pathway through the Discovery Health app making it easy for you to seamlessly navigate the healthcare system and to know what will have the biggest impact on your health. Completing these health and exercise actions will not only have a positive influence on your health but you can get rewarded along the way. As a Discovery Health Medical Scheme member, you can also access increased healthcare benefits when you complete your health next best actions. [Learn more here](#).



Working to care for and protect you

Our goal is to provide support for you in the times when you need it most.

How to contact us

Tel (members): 0860 99 88 77, Tel (health partners): 0860 44 55 66

Go to www.discovery.co.za to Get Help or ask a question on WhatsApp. Save this number 0860 756 756 on your phone and say "Hi" to start chatting with us 24/7.

PO Box 784262, Sandton, 2146. 1 Discovery Place, Sandton, 2196.

What to do if you have a complaint

01 | 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. We would also love to hear from you if we have exceeded your expectations.

02 | 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 or by emailing principalofficer@discovery.co.za.

03 | 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](#).

04 | 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.co.za | 0861 123 267 | www.medicalschemes.co.za.

Your privacy is important to us

We hold your privacy in the highest regard. Our unwavering commitment to protecting your personal information and ensuring the security and confidentiality of your data is clearly outlined in our Privacy Statement. You can view our latest version on www.discovery.co.za > Medical aid > About Discovery Health Medical Scheme.