

November 2025



MediPlus

2026 Benefit Guide

Dear Valued Member,

At Medshield Medical Scheme, we are proud to be your *Partner for Life*. This commitment means ensuring you have access to affordable, sustainable, and future-ready healthcare cover that grows with your changing needs.

As life progresses, so do your healthcare needs, and we're here to support you every step of the way. In addition to being a safety net when the unexpected happens, we're placing a stronger focus on *preventative healthcare*. Through structured benefits, educational tools, and trusted provider partnerships, we're working to offer healthcare cover that not only treats illness but helps prevent it.

We know that early detection and prevention are key to better health outcomes and lower long-term costs. Unfortunately, many people only seek help once symptoms appear, which often leads to more complex and costly treatment. That's why we're investing in benefits that help you stay ahead of potential health issues because staying healthy is just as important as getting treatment when you're unwell.

Looking ahead to 2026, we've carefully balanced enhanced value with affordability. Here's what you can expect:

- **A 4.5% increase in benefit limits** for selected benefits.
- **Reduced or removed co-payments** on a number of services.
- **New and updated benefits** designed to improve access to care.

Your **2026 MediPlus Benefit Guide** is now available for download on the Medshield website, via our WhatsApp channel at **+27 60 042 7274**, the **Medshield App**, or by contacting your Broker or our **Contact Centre at 086 000 2120**.

We encourage you to review your plan and make sure it still meets your current and future healthcare needs.

Medshield continues to be a stable and transparent organisation, offering member-focused options for every stage of life. You can always count on us for clear, accurate, and easy-to-access information about your cover—that's part of the Medshield difference.

We're excited about what the future holds and confident that our 2026 benefits will give you greater peace of mind, better access to quality care, and the personalised service that defines our promise to be your *Partner for Life*.

Warm regards,

Medshield Medical Scheme



MEDSHIELD
medical scheme
Partner for Life

Option Changes for 2026

Choose the right plan for you and your family

You can change your Medshield benefit option effective **1 January 2026**. If you don't make a change, you will automatically stay on your current option.

Before You Make a Change

Make sure you understand exactly what each option offers. This includes:

- Prescribed Minimum Benefits (PMBs)
- Chronic medication and the approved medicine list (formulary)
- Day-to-day cover
- Dental and optical benefits
- Hospital benefits

Changing to a **lower benefit option** may reduce your cover. Some chronic medications might **no longer be covered**, and you could face **higher out-of-pocket costs**. Some lower options only cover PMBs, which means other conditions or procedures might **not** be covered.

Also consider which healthcare providers you can use. Some plans let you go to any provider, while others require you to use a **specific network**.

It's best to talk to your **financial advisor** to choose the option that meets your medical and financial needs.

When to Consider Upgrading Your Option

An upgrade may be a good idea if:

- You expect higher healthcare needs in 2026
- Your current day-to-day benefits run out before the end of the year
- You are adding dependants
- You have planned medical procedures
- You've had major life changes

Upgrading ensures you have better cover and helps avoid unexpected medical bills.

How to Submit Your Option Change

- Deadline: **31 December 2025**
- Steps:
 1. Download the Option Change Form from www.medshield.co.za under '**Member/Scheme forms for members**'.
 2. Complete the form.
 3. If you're part of a corporate employer group, give the form to your **HR department**. They will process the request and submit it to: optionchange@medshield.co.za.

We recommend submitting your change by **15 December 2025**. This helps ensure the correct **January 2026 contribution** is deducted.

If your change is received after **15 December 2025**, the correct amount may only be deducted in **February 2026**. Any credit will be used towards your February payment — **no direct refunds** will be made.

Need More Info?

Before deciding, check out the full:

- **2026 Benefit Guides**
- **Contribution Tables**

Available at: www.medshield.co.za

Go to '**Menu**' > '**2026 Benefit Options**'.

General Practitioner (GP) Nomination – 2026

You **don't have to nominate a GP for 2026**. However, if you're on **MediPhila, MediCurve, MediValue Compact, or MediPlus Compact** and need to see a GP, **you must use a Medshield Network GP** to avoid paying from your own pocket.

To find a Medshield Network GP, visit: www.medshield.co.za



Your 2026 MediPlus Contributions

Both the MediPlus Prime and the MediPlus Compact benefit options' contribution increase will be **9% from 1 January 2026** and includes strong benefit enhancements. All benefits offered and reflected are the same on both categories, but networks and care coordination, and the Family Practitioner-to-Specialist referral process, are compulsory on MediPlus Compact.

MEDIPLUS PRIME TOTAL MONTHLY CONTRIBUTION:

TYPE OF BENEFICIARY	2025 CONTRIBUTION	2026 CONTRIBUTION	CHANGE (RAND)	CHANGE (%)
Principal Member	R4 989	R5 436	R447	9%
Adult Beneficiary	R3 561	R3 879	R318	8.9%
Child*	R1 116	R1 218	R102	9.1%

MEDIPLUS COMPACT TOTAL MONTHLY CONTRIBUTION:

TYPE OF BENEFICIARY	2025 CONTRIBUTION	2026 CONTRIBUTION	CHANGE (RAND)	CHANGE (%)
Principal Member	R4 533	R4 938	R405	8.9%
Adult Beneficiary	R3 234	R3 522	R288	8.9%
Child*	R1 020	R1 113	R93	9.1%

*Contribution rate is applicable to the member's first, second and third biological or legally adopted children only, excluding students.

Please note: The contributions above exclude any applicable Late Joiner Penalties that may be applied to your membership.

2026 Benefits & Contribution Adjustments

The following benefit adjustments will be introduced to the MediPlus benefit option and is subject to CMS approval. Refer to your 2026 Benefit Guide for a comprehensive list of benefits. **The Guide is available on the Scheme website or scan the QR Code on the last page for ease of access.**

BENEFIT DESCRIPTION	
Adult Vaccination	Limit increased to R550 per family
Alternatives to Hospitalisation: Physical Rehabilitation	Limit increased to R82 000 per family
Alternatives to Hospitalisation: Terminal Care Benefit	Limit increased to R57 500 per family
Appliances: General, Medical and Surgical	Limit increased to R12 000 per family
NEW - Appliances: Continuous Glucose Monitoring (CGM)	R26 500 per beneficiary per annum for beneficiaries up to 18 years old diagnosed with Type 1 Diabetes
Chronic Renal Dialysis	Limit increased to R231 500 per family
NEW - Consultations and Visits Out-of-Hospital: General Practitioners and Specialists Virtual Care	5 consultations per family
Contraception: Medication (Oral Birth Control)	Script limit increased to R235 per script x 13 scripts annually
Day-to-Day Limits	Limit increased to: M0 R12 000 M+1 R16 500 M+2 R18 600 M+3 R20 300 M+4 R22 000
Dentistry: Specialised	Limit increased to R16 200 per family
Maxillo-Facial Surgery	Limit increased to R22 000 per family
Medication: Chronic	Limit increased to R17 450 per family and R8 725 per beneficiary Increased access with the addition of Dis-Chem Pharmacies on the Compact option.
NEW - Medication: Chronic DSP	Reduced co-payment
Medication: Chronic Out-of-formulary	Reduced co-payment
Medication: Chronic Voluntary use of non-DSP	Reduced co-payment
Mental Health: In-Hospital	Limit increased to R40 300 per family
Oncology Limit	Limit increased to R326 000 per family
Oncology: Specialised Drugs	Limit increased to R152 000 per family
Oncology: Breast Reconstruction	Limit increased to R105 000 per family
ENHANCED Optical: Limit (24 Month Service Date Cycle)	Limit increased to R5 700 per beneficiary
ENHANCED Optical: Optometric refraction (eye test)	1 test per beneficiary per annum
ENHANCED Optical: Spectacle Lenses or Contact Lenses	1 pair per beneficiary
ENHANCED Optical: Frames	Limit increased to R2 900 per beneficiary
Optical: Readers	Limit increased to R220 per beneficiary
Organ, Tissue & Haemopoietic Stem Cell (Bone Marrow) Transplantation including Hospitalisation	Limit increased to R191 000 per family
Corneal Grafts and Transplants	Limit increased to R54 250 per beneficiary for an internationally sourced cornea and R23 250 per beneficiary for a locally sourced cornea
Physiotherapy: In-Hospital	Limit increased to R3 450 per beneficiary
Prosthesis and Devices: Internal	Limit increased to R47 550 per family
Refractive Surgery (Including Hospitalisation)	Limit increased to R22 000 per family
Radiology: Specialised (In- and Out-of-Hospital)	Limit increased to R17 500 per family
NEW - Wellness: Diabetic AI Retinal Screening	R250 per beneficiary per annum 40+ diagnosed with Type 1 or Type 2 Diabetes
ENHANCED Wellness: Mammogram (Breast Screening)	1 per female beneficiary 30+ years old per annum
ENHANCED Wellness: PSA Screening (Prostrate Specific Antigen)	1 test per male beneficiary 40+ years , per annum



The Application of Co-payments

The following services will attract upfront co-payments:

Specialist Network - No referral obtained (Compact only)	20% upfront co-payment
Paediatric consultation - No referral obtained (Compact only)	20% upfront co-payment
Voluntarily obtained out of formulary medication	20% upfront co-payment
Voluntary use of a non-DSP or a non-Medshield Pharmacy Network	20% upfront co-payment
Voluntary use of a non-DSP for PET Scans	25% upfront co-payment
Voluntary use of a non-Medshield Network Hospital (Prime or Compact as applicable)	30% upfront co-payment
Voluntary use of a non-Medshield Network Hospital - Mental Health	30% upfront co-payment
Voluntary use of a non-Medshield Network Hospital	30% upfront co-payment
Organ, Tissue and Haemopoietic stem cell (Bone marrow) transplant	
Voluntary use of a non-DSP for HIV & AIDS related medication	30% upfront co-payment
Voluntary use of a non-DSP provider - Chronic Renal Dialysis	35% upfront co-payment
Voluntary use of a non-ICON provider - Oncology	40% upfront co-payment

In-Hospital and Day Clinic Procedural upfront co-payments for non-PMB

Wisdom Teeth extraction in a Day Clinic	R800 upfront co-payment
Endoscopic procedures (refer to Addendum B*)	R1 500 upfront co-payment
Functional Nasal surgery	R1 500 upfront co-payment
Hernia Repair (except in infants)	R3 000 upfront co-payment
Laparoscopic procedures	R3 500 upfront co-payment
Arthroscopic procedures	R3 500 upfront co-payment
Impacted Teeth, Wisdom Teeth and Apicectomy	R3 500 upfront co-payment
Nissen Fundoplication	R5 000 upfront co-payment
Hysterectomy	R5 000 upfront co-payment
Back and Neck surgery	R5 000 upfront co-payment
Spinal Surgery if DBC Programme not completed	R20 000 upfront co-payment

Please note: Failure to obtain an authorisation prior to hospital admission or surgery and/or treatment (except for an emergency), will attract a 20% penalty, in addition to the above co-payments.

*No In-Hospital Endoscopic procedural co-payment applicable for children 8 years and younger.

The Medshield Specialist Network list shall be as designated in writing by the Scheme from time to time.

Medshield Medical Scheme Rules indicate that a member is entitled to change from one benefit option to another provided that the change is made with effect 1 January of any financial year, therefore mid-year option changes are not permitted.



SCAN to Download our Benefit Guides

DISCLAIMER: This document serves as a summary and does not supersede the Registered Rules of the Scheme. All benefits in accordance with the Registered Rules of the Scheme. Terms and conditions of membership apply as per Scheme Rules. Subject to CMS approval. October 2025.

Medshield Contact Centre

Contact number: **086 000 2120** (+27 10 597 4701 for members outside the borders of South Africa).
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