

Focus on the Day-to-day Benefit

This benefit provides for day-to-day medical expenses, such as doctors' visits and prescribed medication.

On the **Ingwe Option**, members who choose Connect Network hospitals need to use State facilities, while members who choose Ingwe Network hospitals need to use Ingwe Primary Care Network providers. Members who choose Any hospital need to use Ingwe Active Network providers.

On the **Evolve** and **Custom Options**, members can add the Momentum HealthSaver⁺ to fund their day-to-day healthcare expenses.

On the **Incentive Option**, 10% of the total contribution goes to a dedicated Personal Medical Savings Account (Savings) to cover day-to-day healthcare expenses. Credit can be advanced upfront for the remaining months in the year and any unused Savings balance at the end of the year will be carried forward to the following benefit year.

On the **Extender Option**, 25% of the total contribution goes to a dedicated Savings account to cover day-to-day healthcare expenses. Credit can be advanced upfront for the remaining months in the year. Any unused Savings balance at the end of the year will be carried forward to the following benefit year. If this component is not enough to cover annual day-to-day expenses, members will have a self-funding gap to pay out of their own pocket up to the Threshold, which is determined by the family size (see below). Although claims add up to the Threshold at 100% of the Momentum Medical Scheme Rate, members may claim a higher amount from Savings if the provider charges more than the Momentum Medical Scheme Rate. This will result in a bigger self-funding gap. Members can add the Momentum HealthSaver⁺, a complementary product available from Momentum, to fund their self-funding gap.

The annual Threshold levels for 2025 are:

- Principal member: R33 400
- Per adult dependant: R29 000
- Per child dependant: R9 600 (maximum of 3 children)

Once the Threshold has been reached, claims will be paid from Extended Cover at the Momentum Medical Scheme Rate, subject to certain sub-limits. These day-to-day limits accumulate before and after the Threshold.

On the **Summit Option**, claims are paid at 100% of the Momentum Medical Scheme Rate, subject to certain sub-limits and an overall day-to-day limit of R33 000 per beneficiary.

+Momentum Medical Scheme members may choose to make use of additional products available from Momentum Group Limited and its subsidiaries as well as Momentum Multiply (herein collectively referred to as Momentum). Momentum is not a medical scheme and is a separate entity to Momentum Medical Scheme. Momentum products are not medical scheme benefits. You may be a member of Momentum Medical Scheme without taking any of the products offered by Momentum.



How to claim

The easiest way to submit a claim is by taking a photo of it with your cellphone and uploading it via the **Momentum App**.

You can also submit your claim via email or post as follows:

- Email your claim to claims@momentumhealth.co.za
- Post your claim to: Momentum Medical Scheme Claims, PO Box 2338, Durban, 4000

Please make sure that the following information is clearly visible on the claim:

- Your membership number
- The principal member's name and surname
- The patient's name and surname
- The treatment date
- The amount charged
- The ICD-10 code, tariff code and/or nappi code
- The service provider's name and practice number
- Proof of payment, if you have paid the claim.

Momentum Medical Scheme's 2025 benefit and contribution amendments have been submitted to the Council for Medical Schemes and are subject to approval by the Regulator.