2027

Stratum Benefits

SUBJECT TO APPROVAL

CORPORATE PRODUCT RANGE

CORPORATE ESSENTIAL

- DAY-TO-DAY BENEFIT OPTION
- EMERGENCY & ACCIDENT BENEFIT OPTION

Administered by Unity Health, a division of Ambledown Financial Services (Pty) Ltd, FSP 10287. Underwritten by Bryte Insurance Company Limited, a licensed insurer and authorised FSP 17703. In partnership with Stratum Benefits (Pty) Ltd, FSP 2111 (Reg No. 2003/018155/07). This brochure is a summary and does not replace any information provided in your Policy Schedule. If there are any differences, please refer to your Policy Schedule. Terms and conditions apply. This is not a medical scheme and the cover is not the same as that of a medical scheme. This policy is not suitable for medical scheme membership.

Stratum Benefits

UNITYHEALTH Bryte

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APPLY FOR HEALTH INSURANCE

Chat with your HR representative or financial advisor.
Apply online or download the corporate application form: **www.stratumbenefits.co.za/get-cover/**
Send your completed form to your HR representative, financial advisor or to us at: **yourapplication@stratumbenefits.co.za**

QUERIES AND POLICY CHANGES

Chat with your HR representative or financial advisor to change your option or update your dependants.
For general updates, like debit order details or benefit queries, email us at: **yoursupport@stratumbenefits.co.za**

HEALTH INSURANCE CLAIMS

Submit or follow up on a claim: **claims@unityhealth.co.za**

QUICK REPLIES

For an **online chat**, click the chat icon on our website.
For **WhatsApp**, save our number, 010 448 0861, or scan the **QR code** to start a conversation.

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BUSINESS HOURS

Mon - Thurs 8:00 - 16:30 / Fri 8:00 - 16:00 / Sat 8:00 - 13:00 **Unity Health** Call Centre

EMERGENCY ASSISTANCE: Available **24/7**

Call **0861 366 006** and select **option 1,** or use the **ER24 push-to-call button** on the **Unity Health** Mobile App.

What is Health Insurance?

Health Insurance isn't a medical aid. It's a primary healthcare solution that offers a more affordable alternative to traditional medical aid.

While it's not a medical aid, it's designed to be a practical, budget-friendly way to manage everyday healthcare needs, from GP visits to routine care, while also giving you cover for emergencies and accidents.

Stratum Benefits offers **Health Insurance** from **Unity Health**, a division of **Ambledown Financial Services**. These products are underwritten by **Bryte Insurance Company Limited**, a licensed insurer and authorised Financial Services Provider.

Since 2013, **Unity Health** has been committed to one clear mission – making quality healthcare insurance accessible and affordable for everyone.

Need to connect with **Unity Health**?

Scan to request GP pre-authorisation, register on the member portal, find a network healthcare provider or access **Unity Health's** contact details.

Choose the cover that suits your needs

Select the DAY-TO-DAY BENEFIT OPTION, which gives you access to essential healthcare services such as GP consultations, prescribed medication, radiology, pathology, dental and eye care, as well as gynaecologist visits.

The EMERGENCY & ACCIDENT BENEFIT OPTION provides cover in the event of a medical emergency or accident at your nearest private hospital and the hospital's casualty facility.

Looking for comprehensive cover? Combine both benefit options for all-round peace of mind.

Whether you're looking to supplement your existing medical aid or need an affordable standalone solution, we have an option that fits your needs.

CORPORATE ESSENTIAL DAY-TO-DAY BENEFIT OPTION

CORPORATE ESSENTIAL EMERGENCY & ACCIDENT BENEFIT OPTION

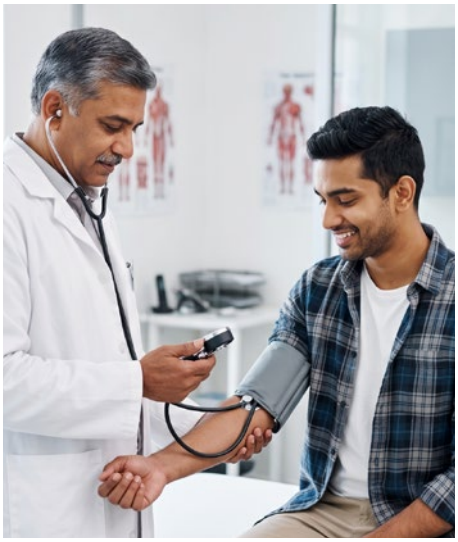
Unity Health's healthcare network & partners

With a national network of healthcare providers and partners, getting the care and support you need is simple. You'll have access to over 4 400 GPs, plus pharmacies, pathology labs, optometrists, hospitals with tariff agreements, emergency assistance and wellness services.

Scan to find a network healthcare provider near you.

PARTNERS IN MEDICINE	MEDICINE MANAGEMENT	PARTNERS IN TELEMEDICINE	PARTNERS IN PATHOLOGY	PARTNERS IN OPTOMETRY	HOSPITALS WITH TARIFF AGREEMENTS	EMERGENCY ASSISTANCE PARTNER	PARTNER IN WELLNESS
Alpha Pharm	mediscorpbm	AlphaDoc	AMPATH Laboratories	EXECUSPECS	Clinix Health Group	ER24	reality Wellness Group
CLICKS		healthforce	LANCET LABORATORIES	Specsavers	Life Healthcare		
Dis-Chem Pharmacies		udok	PathCare		MEDICLINIC		
the local choice					National Hospital Network		
					NETCARE		

DAY-TO-DAY BENEFIT OPTION



Looking after your everyday health shouldn't be a hassle, and with this benefit option, it isn't.

You'll have straightforward access to the essential healthcare services you need to stay well, detect potential issues early, and treat minor illnesses before they become more serious.

Whether you prefer seeing a doctor in person or connecting virtually, you're covered for consultations with network and non-network GPs.

Many **network GPs** can also perform minor procedures in their rooms, such as stitches or draining an abscess, so you can get quick and effective treatment on the spot.

Your cover also includes nurse consultations, prescribed medication, basic x-rays, blood tests, dental care, eye care, and gynaecologist visits. If your **network GP** believes you need more specialised care, they'll refer you to the appropriate specialist.

Preventative care is also part of the benefit offering, with benefits like vaccinations, annual wellness checks, and screenings designed to help you stay ahead of potential health problems.

For added support, you have access to telephonic and virtual counselling for financial, legal, HIV, and trauma matters.

Who's covered?

ASK US FOR A CORPORATE QUOTE

Group cover is available **from 2 principal members** and may include employer groups, trade unions, bargaining councils and other approved groups. Members must be actively employed.

Groups of **2** to **19 principal members** are considered small groups. Groups of **20** or **more** are compulsory groups and all principal members must join.

If your group allows dependants to join, you can add your spouse and child dependants if you're their parent or legal guardian.

Child dependant premiums apply to children **20** or **younger**, and adult dependant premiums to children **between 21** and **25**. **From age 26**, they no longer qualify as child dependants but may apply for their own policy as the principal insured.

You can also add your and your spouse's parents as adult dependants. Adult dependant premiums apply. Other extended family members aren't eligible for cover.

How to obtain pre-authorisation

Need to see a doctor or specialist?

For visits to a **network GP**, specialist, or for pre-birth consultations, you'll need to get **pre-authorisation** before your appointment.

Want to skip the pre-authorisation step for GP visits? Add the GP PRE-AUTH WAIVER to your policy. It lets you see your **network GP** without needing prior approval. Without the waiver, you'll need to get authorisation each time before seeing your **network GP**.

Pre-authorisation can be obtained in one of the following ways:

Request a "**Call Me Back**" on the **Unity Health** Mobile App	SMS "**UH please call**" to **30947**	Call **Unity Health** on **0861 366 006** and select **option 2**, then **option 1**

CONSULTATION COVER

www.stratumbenefits.co.za/health-consultation-cover/

GP CONSULTATIONS AND MEDICAL PROCEDURES

Unlimited GP visits, when you need them

You can visit any **network GP** during regular hours, and there's **no limit** on how many times you can go.

After-hours GP consultations, including services rendered outside standard consulting hours, aren't covered. Standard consulting hours are **08:00** to **17:00** from **Monday** to **Friday** and **08:00** to **13:00** on **Saturdays**.

Need a small procedure done? Your GP can perform basic medical and surgical procedures in their room, such as stitching a wound, circumcision, and applying a cast to a broken arm, provided it's on the list of **approved procedures**.

To find your nearest **network GP**, download the **Unity Health** Mobile App or visit: www.unityhealth.co.za/find-a-network-provider/

Remember, **pre-authorisation** is required before each visit and is valid for **24 hours**.

GP PRE-AUTH WAIVER

Skip the formalities

Want to visit your **network GP** without needing **pre-authorisation** each time? Simply add the GP PRE-AUTH WAIVER to your policy for a small additional premium **per person per month**.

If you don't add it when you join, you can include it at the start of the new benefit year on **1 January 2028**.

CONSULTATION COVER CONTINUED

VIRTUAL GP CONSULTATIONS

Chat to a doctor from anywhere

Need to see a healthcare provider but can't get to the rooms?

You have **unlimited** virtual GP consultations, and **no pre-authorisation** is required.

Simply use the **Unity Health** Mobile App or log in through the member portal via their website to access this convenient benefit from your phone or device, wherever you are. Visit: www.unityhealth.co.za

Virtual consultations give you access to the same services as an in-person visit, including sick notes and prescriptions, which the GP can send directly to you.

NURSE CONSULTATIONS

Care and medication at your local pharmacy clinic

Nurse practitioners at your nearest **Alpha Pharm**, **Clicks**, **Dis-Chem**, and **The Local Choice** pharmacy clinic can help treat minor ailments. There's **no limit** to how often you can see a nurse, and **no pre-authorisation** is required.

The nurse can provide up to **Schedule 2** medication. Acute medication is covered according to the **approved Mediscor formulary**, and the medication benefit is **unlimited**.

If the nurse recommends a virtual GP consultation during your visit, they'll facilitate it for you.

Have a look at the TELEMEDICINE GP CONSULTATION BENEFIT for more details.

TELEMEDICINE GP CONSULTATIONS

Need to see a GP? Start with a nurse

When you visit an **approved pharmacy clinic**, the nurse can arrange a virtual GP consultation during your appointment if they believe a doctor's input is needed.

You have **unlimited** virtual GP consultations at **Alpha Pharm**, **Clicks**, **Dis-Chem** and **The Local Choice** pharmacy clinics, with **no pre-authorisation** required.

To find your nearest **approved pharmacy clinic** partnered with **AlphaDoc**, **Healthforce** or **Udok**, download the **Unity Health** Mobile App or visit: www.unityhealth.co.za/find-a-network-provider/

Online consultations let you access all the same services as a face-to-face visit, including issuing sick notes and prescriptions directly to you.

SPECIALIST CONSULTATIONS

Need specialist care? Here's how it works

When treatment provided by your **network GP** fails, and you need to see a specialist, your GP must **refer** you. You'll need to get **pre-authorisation** before your consultation.

Proof of failed treatment and a referral letter with the specialist's practice number and the appointment date must be submitted to **Unity Health's** Case Manager for assessment. Specialist consultations are subject to case-by-case review. Follow-up consultations for recurring symptoms aren't covered under this benefit.

You can claim back up to **R 1 775 per consultation**, with an overall limit of **R 3 700 per family per year**.

This benefit will be prorated based on when your cover starts.

If your specialist orders blood tests or x-rays on the list of **approved codes**, the costs will be covered under the BLOOD TESTS AND X-RAYS BENEFIT, while prescribed medication will be covered under the ACUTE MEDICATION BENEFIT if it's on the **approved Mediscor formulary**.

If the blood tests or x-rays aren't on the **approved list**, or the prescribed medication isn't on the **approved formulary**, the cost will be covered under the SPECIALIST CONSULTATION BENEFIT, subject to the available benefit limit. Claims are paid on a first-come, first-served basis. If a medication claim uses up the benefit limit first, the consultation won't be paid.

OUT-OF-NETWORK GP CONSULTATIONS

Can't get to a network GP?

You may visit any out-of-network GP if your regular **network GP** isn't available. **No pre-authorisation** is required.

We'll refund you up to **R 365 per consultation**, with a limit of **2 consultations per person per year** when you pay upfront and claim back.

Medication and referrals for blood tests and x-rays aren't covered.

PRE-BIRTH CONSULTATIONS

Expecting? Here's what you need to know

Soon-to-be moms can visit any gynaecologist they choose for checkups and 2D ultrasound scans before delivery.

You'll be covered for up to **3 consultations** and **3 ultrasound scans per person per year**, with a **family limit** of **R 4 380 per year**.

Pre-authorisation is required before your visits.

This benefit covers the costs before delivery but not the expenses related to the actual childbirth.

MEDICINE COVER

ACUTE MEDICATION

DISPENSING NETWORK GP

Medication on the spot

If your **network GP** dispenses medication during your visit and it's on the **approved Mediscor formulary**, this benefit is **unlimited**.

NON-DISPENSING NETWORK GP

Getting your medication made easy

If your **network GP** doesn't dispense medication, you'll receive a prescription to collect your medication from **any pharmacy** or one of **Unity Health's partnered pharmacies**, such as **Alpha Pharm**, **Clicks**, **Dis-Chem** or **The Local Choice**. Medication on the **approved Mediscor formulary** is covered, and the benefit is **unlimited**.

APPROVED MEDICINE FORMULARY

What medication is covered?

Medication prescribed by your **network GP**, nurse, specialist, or during a virtual consultation at an **approved pharmacy clinic** is covered if it's on the **approved Mediscor formulary**.

What's a formulary?

It's a list of **approved medicines** that **Unity Health** will pay for **in full**. **Mediscor**, a pharmaceutical benefits management organisation, helps manage this list.

Formulary medication is covered under the GP CONSULTATION BENEFIT. If you request stronger or alternative medication that's not included on the **approved formulary**, you must cover the cost yourself.

CHRONIC MEDICATION

www.stratumbenefits.co.za/health-chronic-medication-cover/

Chronic medication? You're covered

If your **network GP** prescribes chronic medication for one of the listed conditions, and it's on the **approved Mediscor formulary**, you're **fully covered**.

This includes treatment for:

- Addison's disease
- Asthma
- Bi-polar mood disorder
- Bronchiectasis
- Cardiac failure
- Cardiomyopathy disease
- Chronic renal disease
- Coronary artery disease
- Crohn's disease
- Chronic obstructive pulmonary disease (COPD)
- Diabetes insipidus
- Dysrhythmia
- Diabetes (Type 1 and 2)
- Epilepsy
- Glaucoma
- HIV/AIDS
- Haemophilia
- High blood pressure (Hypertension)
- High cholesterol (Hyperlipidaemia)
- Hypothyroidism
- Multiple sclerosis
- Parkinson's disease
- Rheumatoid arthritis
- Schizophrenia
- Systemic lupus erythematosus
- Tuberculosis (TB)
- Ulcerative colitis

Getting your chronic medication is easy

Your **network GP** can help you register for the **Disease Management Programme** with **Mediscor**. You can also register by calling **086 011 9553**.

Once registered, your medication can be delivered directly to you at no extra cost. For **Medipost** courier delivery, email your prescription to: mrx2@medipost.co.za. Alternatively, you can collect your medication from **any pharmacy**, including **partnered pharmacies** such as **Alpha Pharm**, **Clicks**, **Dis-Chem** or **The Local Choice**.

BLOODS AND X-RAYS

Blood tests and x-rays

When you need a blood test, such as cholesterol or glucose, your **network GP** will refer you to the nearest **Ampath**, **Lancet**, or **PathCare** lab.

Basic black-and-white x-rays, such as chest x-rays, are covered when referred by your **network GP** to a radiology facility.

A **Pathology Request Form** is required for blood tests and a **Radiology Request Form** for x-rays. Get the forms on the **Unity Health** Mobile App, or contact us for assistance.

Blood tests and x-rays on the list of **approved codes** are **unlimited**. However, some specific diagnostic blood tests may have limits if they're not part of an **approved chronic disease treatment plan**.

Specialised scans, like MRI and CT scans, and blood tests done by a medical technologist aren't covered.

DENTAL CARE

Visit any dentist

You can visit any **dentist** or **dental therapist** for basic dental treatments, including full mouth assessments, x-rays (intraoral radiographs), scaling and polishing, extractions, pulpectomies, fillings, and pain or infection (sepsis) treatments, all according to a list of **approved procedures** and **agreed rates**.

You can also find a **recommended dentist** on the **Unity Health** Mobile App or visit: www.unityhealth.co.za/find-a-network-provider/

No pre-authorisation is required.

DENTAL CARE CONTINUED

Medication prescribed by a dentist is covered if it's on the **approved Mediscor formulary**.

Single member:	Member + 1:	Member + 2 or more:
R 1 600 per policy per year	**R 1 600 per person**, limited to **R 3 200 per family per year**	**R 1 600 per person**, limited to **R 4 800 per family per year**

This benefit will be prorated based on when your cover starts.

EYE CARE

See the difference with our optical benefit

Unity Health has partnered exclusively with **Specsavers** and **Execuspecs**, part of the **Preferred Provider Network (PPN)**, the country's largest optical network.

To find your nearest **Specsavers** or **Execuspecs**, visit **www.ppn.co.za** or use the **Unity Health** Mobile App.

You can visit your nearest **network optometrist** for:

1 eye test every **2 years**	**1 standard frame** up to **R 599** every **2 years**	**1 pair** of **clear, standard lenses** every **2 years**

Optional extras, like tinting or scratch-resistant coatings, aren't covered.

WELLNESS BENEFITS

www.stratumbenefits.co.za/health-wellness-benefits/

Early detection matters

Alpha Pharm, **Clicks**, **Dis-Chem**, or **The Local Choice** pharmacy clinics are approved network providers for preventative tests and vaccinations, and for your wellness assessment if you miss the scheduled **Employee Wellness Day**.

WELLNESS ASSESSMENT

As an employee of a registered employer group, you're covered for **1 wellness assessment per person per year** when an **Employee Wellness Day** is scheduled for **15** or **more** employees.

This health check includes the following basic screenings:

- Blood glucose (sugar) levels
- Blood pressure
- Body mass index
- Cholesterol levels
- HIV/AIDS testing (with pre- and post-test counselling)
- Waist circumference

If you registered but were unable to attend the **Wellness Day**, you can have your assessment done at your nearest **Alpha Pharm**, **Clicks**, **Dis-Chem**, or **The Local Choice** pharmacy clinic after the event.

Your dependants may have their health check done at their nearest **network pharmacy clinic**.

PREVENTATIVE CARE

This benefit covers preventative vaccinations and tests, with limits **per person** and applicable age criteria.

VACCINATIONS

- **1 flu vaccination per year** before **31 May**
- **1 pneumococcal vaccination** every **5 years** for persons **60** or **older** or with medically proven compromised immune systems, if **pre-authorisation** is obtained
- **1 hepatitis A** and **B vaccination once-off**
- **1 tetanus vaccination** every **10 years**

PREVENTATIVE TESTS AND SCREENINGS

- **1 pap smear** every **3 years** for females **21** or **older**
- **1 prostate screening** every **2 years** for males **50** or **older**

Prefer to have your pap smear done in your **network GP's** rooms instead of a clinic? Check with the doctor's room if it can be done during your consultation.

PSA pathology tests aren't covered.

ESSENTIAL ASSISTANCE PROGRAMME (EAP)

Support when you need it most

You have access to telephonic and virtual counselling through the **Reality Wellness Group**, because your mental and emotional wellbeing matters.

Qualified, registered counsellors are available to guide and support you, following professional clinical protocols.

Get help with:
- Financial guidance
- Legal guidance
- HIV counselling and case management
- Trauma counselling

Counselling is available by phone or video call. Face-to-face sessions can be arranged at your own cost.

Workshops and Support Groups

Download the **Reality Wellness Group** Mobile App to browse, book, and participate in interactive workshops and support groups. Topics range from parenting, relationships, coping with grief, and building resilience.

www.realitywellness.co.za

Download the Mobile App from your app store. When registering, use the **Unity Health** company code: **1N3TH12**

EMERGENCY & ACCIDENT BENEFIT OPTION

Private hospital access for emergencies and accidents

Knowing you're covered when a medical emergency or accident happens is comforting.

With this benefit option, you can go to **any** private hospital and get the necessary care quickly and without delay, as long as **pre-authorisation** is obtained.

If you're admitted to the hospital due to any accident, your cover includes essential services like MRI and CT scans, as well as post-hospitalisation physiotherapy and occupational therapy to help you recover.

You're also covered for less serious injuries treated at a private hospital's emergency unit or casualty facility.

Emergency medical services are available **24/7**, including ambulance transport by road or air, hospital transfers, repatriation, and access to telephonic medical advice whenever you need it.

This option also provides financial support when it matters most, with a lump-sum accidental death payout, and a family assistance benefit to help with costs when a loved one or caregiver supports you during a hospital stay.

For added support, you have access to telephonic and virtual counselling for financial, legal, HIV, and trauma matters.

Who's covered?

ASK US FOR A CORPORATE QUOTE

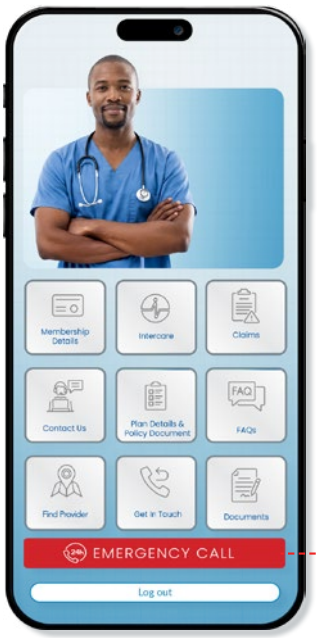
Group cover is available **from 2 principal members** and may include employer groups, trade unions, bargaining councils and other approved groups. Members must be actively employed.

Groups of **2** to **19 principal members** are considered small groups. Groups of **20** or **more** are compulsory groups and all principal members must join.

If your group allows dependants to join, you can add your spouse and child dependants if you're their parent or legal guardian.

Child dependant premiums apply to children **20** or **younger**, and adult dependant premiums to children **between 21** and **25**. **From age 26**, they no longer qualify as child dependants but may apply for their own policy as the principal insured.

You can also add your and your spouse's parents as adult dependants. Adult dependant premiums apply. Other extended family members aren't eligible for cover.



Pre-authorisation for emergencies and accidents

You'll need **pre-authorisation** before accessing benefits for:

- Stabilisation • Hospital admissions • MRI or CT scans • Casualty visits
- Physiotherapy or occupational therapy

Pre-authorisation is your or the hospital's responsibility. Claims won't be paid if it isn't obtained.

ER24 is our **24-hour** emergency partner.

Here's what to do in a medical emergency or accident:

- Call **Unity Health** on **0861 366 006** and select **option 1**; or
- press the **ER24 push-to-call button** on the **Unity Health** Mobile App.
- An **ER24** operator will verify the membership of the person in need of help, so have the **membership card** and **ID** ready.
- The operator will advise and assist with emergency transportation to the nearest private hospital if needed.
- **ER24** will liaise with a **Unity Health** Case Manager for **pre-authorisation** and benefit confirmation.

In-patient or out-patient?

In-patient treatment requires hospital admission for monitoring during treatment and recovery, usually following a major accident.
Out-patient treatment doesn't require hospital admission and usually follows a minor accident.

HOSPITAL CARE

www.stratumbenefits.co.za/health-hospital-care-cover/

Need urgent care?

EMERGENCY COVER

What is a medical emergency?
It's a sudden, unexpected event or condition, like a heart attack or stroke, that could cause serious harm or evwen death if you don't get immediate medical help.

Emergency transport and treatment
If you need urgent care for a medical emergency, we'll cover the cost of getting you to the nearest private hospital, by road or air, as well as out-patient stabilisation in the hospital's emergency unit.

Cover is limited to **R 110 000 per person per event**.

Clinical review and **pre-authorisation** are required, even in an emergency.

EMERGENCY COVER BUY-UP BENEFIT

Add the buy-up benefit for a small additional premium **per person per month**. This increases your emergency cover for **strokes** and **heart attacks** to **R 500 000 per person per event**.

This benefit covers out-patient stabilisation in the hospital's emergency unit, not admission or surgery.

If you need further treatment after being stabilised, we'll cover the cost to transfer you to a public hospital. Hospital admissions for ongoing treatment following an emergency aren't covered.

ACCIDENT COVER

What is an accidental event?
It's an unexpected incident that causes physical injury due to impact, like a car accident, and needs immediate medical treatment.

Injured in an accident?
If you're injured in an accident and need immediate medical care, we'll cover the cost of getting you to the nearest private hospital, by road or air, and your hospital admission.

Cover is limited to **R 1 775 000 per person per event**.

Pre-authorisation is required for your medical event.

MRI AND CT SCANS

Need a scan after an accident?
If you're admitted to the hospital with physical injuries from an accident, we'll cover the cost of an MRI or CT scan.

Cover is limited to **R 23 000 per person per year**.

The hospital will contact a **Unity Health** Case Manager for **authorisation**.

PHYSIO AND OCCUPATIONAL THERAPY

Need therapy to recover after an accident?
If you've been hospitalised due to an accident and need physical therapy afterwards, we'll cover the cost of physiotherapy or occupational therapy after you're discharged.

Cover is limited to **R 4 380 per person per year**.

You'll need to get **pre-authorisation** before starting therapy.

This benefit applies to treatment received within **3 months** of your hospital discharge. Any treatment after this period isn't covered.

CASUALTY ACCIDENT COVER

www.stratumbenefits.co.za/health-casualty-accident-cover/

Minor accident, but still need urgent care?
For less severe accidents that still require immediate treatment, like a dog bite or a fall from a ladder at home, you're covered for out-patient care at the nearest private hospital's emergency unit.

Cover is limited to **R 8 750 per person per event.**

Pre-authorisation is required for your medical event.

Casualty follow-up consultations aren't covered.

24-HOUR MEDICAL EMERGENCY SERVICES

Help in a medical emergency - anytime, anywhere
ER24's national emergency contact centre is here when you need it most.

Services include:

- Ambulance transfers between hospitals
- Emergency transport by road or air
- Repatriation of a loved one's mortal remains within South Africa, limited to **R 7 500 per person**
- Telephonic medical advice from trained professionals

PAYOUT BENEFITS

ACCIDENTAL DEATH

If you or your spouse pass away due to an accident, you're each covered for **R 40 000.** The benefit will be paid to the principal insured's nominated beneficiary or their estate if no beneficiary is listed.

In the event of the accidental death of a child dependant due to a motor vehicle accident, a benefit of **R 10 000** will be paid to the principal insured. If the principal insured has passed away, the benefit will be paid to their nominated beneficiary, or their estate if no beneficiary was nominated.

ACCIDENTAL DISABILITY

If you become permanently and totally disabled due to an accident and can no longer perform your own or similar occupation, you're covered for **R 40 000**. This benefit applies to the **principal insured person** only.

FAMILY ASSISTANCE BENEFIT

www.stratumbenefits.co.za/health-hospital-care-cover/

If you're hospitalised for **more** than **2 days** due to an insured event, a daily cash benefit is payable to help a family member or caregiver with daily travel of **20 km** or **more** and accommodation expenses while visiting and supporting you during your hospital stay.

The benefit covers expenses from the **first day** of hospitalisation, up to **R 1 500 per day**, with a maximum of **R 4 500 per admission** and a total limit of **R 20 000 per family per year**.

The benefit will be paid as a lump sum after discharge once a completed **Health Insurance Reimbursement Form** and valid invoices or receipts have been submitted.

Payment will be made to the principal insured, who'll be responsible for distributing the funds. If the principal insured passes away, the benefit will be paid to the nominated beneficiary on the policy, subject to a valid claim. If a beneficiary hasn't been nominated, the benefit will be paid to the principal insured's estate and distributed according to the estate administrative process.

WELLNESS BENEFIT

ESSENTIAL ASSISTANCE PROGRAMME (EAP)

Support when you need it most

You and your registered dependants have **24/7**, **unlimited** access to telephonic and virtual counselling through **Reality Wellness Group**.

Qualified and registered counsellors who follow clinical protocols and specific procedures are available to guide and support.

Get help with: • Financial guidance • Legal guidance • HIV counselling and case management • Trauma counselling

Counselling is available by phone or video call. Face-to-face sessions can be arranged at your own cost.

Workshops and Support Groups

Download the **Reality Wellness Group** Mobile App to browse, book, and participate in interactive workshops and support groups. Topics range from parenting, relationships, coping with grief, and building resilience.

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Download the Mobile App from your app store. When registering, use the **Unity Health** company code: **1N3TH12**

Waiting periods

APPLICABLE TO THE DAY-TO-DAY BENEFIT OPTION

Waiting periods don't apply to to new compulsory employer groups of **20** or **more** employees, or to new employees who join an existing employer group within **90 days** of employment.

When **fewer** than **20** employees join, or when it's voluntary for employees to join, the following waiting periods apply:

GENERAL WAITING PERIOD

1 Month General Waiting Period applies if the GP PRE-AUTH WAIVER is added.

0 Month General Waiting Period applies if the GP PRE-AUTH WAIVER isn't added.

There's no cover during this period for the DAY-TO-DAY BENEFITS, WELLNESS ASSESSMENT and PREVENTATIVE CARE BENEFITS.

9 MONTH PRE-BIRTH CONSULTATION WAITING PERIOD

12 MONTH CHRONIC MEDICATION WAITING PERIOD

12 MONTH EYE CARE WAITING PERIOD

These waiting periods may be waived upon joining, provided you submit proof of at least **1 credible year** of primary healthcare insurance or medical aid membership, with no break in cover of **3** or **more** months.

EXCEPTION TO THE RULE

Waiting periods don't apply to the EMERGENCY & ACCIDENT BENEFIT OPTION or the ESSENTIAL ASSISTANCE PROGRAMME (EAP).

GENERAL EXCLUSIONS APPLICABLE TO THE DAY-TO-DAY AND EMERGENCY & ACCIDENT BENEFIT OPTIONS

These policies don't cover hospitalisation, medical treatment, bodily injury, or illness that is directly or indirectly caused by, related to or in consequence of the following:

ROUTINE, FOLLOW-UP, AND ADMINISTRATIVE EXCLUSIONS

1. Medical events for which pre-authorisation or a healthcare provider referral hasn't been obtained or using healthcare or service providers not part of the provider network, where applicable. Where pre-authorisation is required, it must be obtained before treatment, admission, transfer or services take place. Pre-authorisation can't be granted once treatment, admission, transfer or services have already taken place, even if the treatment or service was medically necessary.
2. Routine physical examinations or diagnostic tests performed with no clinical symptoms or objective signs of a health problem.
3. Diagnostic procedures such as x-rays or laboratory tests, unless related to a medical condition or disability confirmed by a prior consultation with a medical practitioner.
4. Costs that the Underwriting Manager's clinical review team determines to be:
   a. Not medically necessary or appropriate for the insured person's condition.
   b. Inconsistent with accepted treatment type, frequency, or duration.
5. Clinical or medical reports required for claims that are under review.

MEDICAL CONDITION OR TREATMENT EXCLUSIONS

6. Out-of-hospital services or treatment provided by an allied healthcare professional, such as a physiotherapist, occupational therapist, audiologist, or counsellor.
7. Investigations, treatments, or surgery for obesity or any medical condition directly or indirectly caused by or related to obesity.
8. Treatments for artificial insemination, infertility, or contraception.
9. External prostheses or appliances such as artificial limbs.

CONDUCT AND LIFESTYLE-RELATED EXCLUSIONS

10. Failure to follow medical advice or adhere to prescribed treatment.
11. Suicide, attempted suicide, or self-inflicted injuries, unless sustained in an attempt to preserve another human life.
12. Use of any drug or narcotic unless prescribed and taken as directed by a registered medical practitioner, as well as drug addiction treatment and rehabilitation services.
13. Any illness or event caused by or related to the use of alcohol.
14. Reckless or negligent acts or omissions by the insured or anyone acting on their behalf, including failure to take reasonable precautions to prevent or minimise harm.
15. Participation in:
    a. Active military duty, police duty, or police reservist duty.
    b. Aviation activities other than as a passenger on a licensed commercial flight.
    c. Any race or speed contest or activity involving non-mechanically propelled vehicles.
    d. Professional or hazardous sports or activities as defined in the policy wording.

EMPLOYMENT-RELATED EXCLUSIONS

16. Insured events arising directly or indirectly from work as a delivery driver, courier or similar delivery-related occupation, unless the occupation was declared and accepted in writing by the Underwriting Manager before the insured event.

HIGH-RISK, POLITICAL, OR UNINSURABLE EVENTS

17. Claims arising from:
    a. Nuclear weapons, nuclear material, ionising radiation, or radioactive contamination, including nuclear fuel combustion and fission.
    b. War, hostilities, civil war, mutiny, or warlike actions, whether declared or not.
    c. Military uprisings, insurrections, rebellions, revolutions, martial law, or related enforcement.
    d. Claims arising from participation in civil unrest, including but not limited to riots, strikes, lockouts, labour disturbances, or public disorder.
    e. Acts intended to overthrow or influence any government or authority by violence, terrorism, intimidation, or fear.
    f. Acts aimed at causing political, economic, or social change, or inspiring fear in the public.
    g. Illegal activities.
    h. Any claim, loss, damage, cost, liability, expense, or consequential loss of any kind, directly or indirectly caused by, resulting from, arising out of, or in connection with an interruption, failure, interference, or suspension of the electricity supply to the South African national electricity grid, regardless of the reason for the interruption, including but not limited to damage to infrastructure, the inability or failure (whether partial or total) of any utility provider to generate, transmit or distribute electricity, or any other cause.
    i. Claims arising from other causes or events that are not insured or are specifically excluded under these policies.

DAY-TO-DAY BENEFIT OPTION EXCLUSIONS

1. After-hours general practitioner consultations, including services rendered outside standard consulting hours, and consultations on Sundays and public holidays. (Standard consulting hours are **08:00** to **17:00** from **Monday** to **Friday** and **08:00** to **13:00** on **Saturdays**.)
2. Follow-up medical treatment for the same symptoms within three days of the initial consultation.
3. Follow-up consultations with specialists.
4. More than three consecutive consultations for the same diagnosis (ICD-10 code), unless there is documented clinical justification.
5. More than one general practitioner, nurse, or virtual general practitioner consultation for the same insured person on the same day.
6. Healthcare services or procedures not part of the list of approved tariff codes, where applicable.
7. Contact lenses.
8. Eyecare or dentistry benefits claimed in the final month of membership, regardless of the duration of membership.
9. Supply of medication that is not listed on the Underwriting Manager's approved formulary list.

EMERGENCY & ACCIDENT BENEFIT OPTION EXCLUSIONS

1. Any accident where the initial incident occurred before the insured person's cover start date.
2. Events not directly related to an accident or emergency as defined in the policy wording.
3. Procedures that are planned in advance and are not related to an insured incident.
4. Casualty follow-up consultations.
5. Follow-up treatment required 3 months from the date of discharge.
6. Medical transportation service for non-emergency purposes and any medical transportation not provided by ER24 without prior authorisation.
7. Cosmetic surgery or surgery directly or indirectly caused by, related to, or in consequence of cosmetic surgery.
8. Revision or corrective surgeries related to an earlier surgery that was covered by this policy.
9. Robotic surgery, specialised mechanical or computerised appliances or equipment, or any related service providers.

Reasons to download the Unity Health Mobile App

Download the app for useful features such as:

- Call me back function
- Digital membership card
- Find network providers
- Virtual consultations
- Emergency button for emergency assistance
- Summary of benefits and limits
- Track GP visits and other claims
- Update your personal details and add dependants
- FAQs

Need help getting started?
Visit the link below for step-by-step instructions to download and register on the **Unity Health** Mobile App.

www.stratumbenefits.co.za/unity-health-mobile-app-download-and-register-instructions/

Scan the **QR code** to download the app or go directly to your app store.

This is not a medical scheme and the cover is not the same as that of a medical scheme. This policy is not suitable for medical scheme membership. This brochure is a summary and does not replace your Policy Schedule. All claims are assessed in accordance with the terms and conditions of the policy document.

CORPORATE HEALTH INSURANCE PRODUCT RANGE OVERVIEW

2027 | Stratum Benefits

CORPORATE ESSENTIAL DAY-TO-DAY BENEFIT OPTION			
DAY-TO-DAY COVER			
CONSULTATION COVER			
	GP CONSULTATIONS AND MEDICAL PROCEDURES	**Unlimited** consultations at **any network GP** | Minor medical and surgical procedures in the doctor's doctor's room | Pre-authorisation and an online doctor triage are required before each consultation, and approval isn't guaranteed | Approved tariff codes apply | Request pre-authorisation through the **Unity Health** Mobile App, SMS "**UH please call**" to **30947**, or call **0861 366 006** and select **option 2**, then **option 1**	Add the **GP PRE-AUTH WAIVER** for an additional premium **per person per month** to see your network GP without prior approval | Add the waiver when joining or wait until the new benefit year beginning **1 January 2028** | Subject to a quote | Speak to your HR representative or financial advisor
	VIRTUAL CONSULTATIONS	**Unlimited** consultations | Access via the **Unity Health** Mobile App or member portal: **www.unityhealth.co.za**	
	NURSE CONSULTATIONS	**Unlimited** consultations for minor illnesses at **Alpha Pharm**, **Clicks**, **Dis-Chem** or **The Local Choice** pharmacies | Nurse practitioners can provide up to **Schedule 2** medication	
	TELEMEDICINE GP CONSULTATIONS	**Unlimited** consultations through video conference facilitated by nurse practitioners | Available at approved pharmacies only: **Alpha Pharm**, **Clicks**, **Dis-Chem** and **The Local Choice** pharmacy clinics partnered with **AlphaDoc**, **Healthforce** or **Udok**	
	SPECIALIST CONSULTATIONS	**R 1 775 per consultation** | **R 3 700 per family per year** | Benefit will be prorated depending on the cover start date | Subject to failed treatment, network GP referral, case-by-case clinical review and pre-authorisation	
	OUT-OF-NETWORK GP CONSULTATIONS	**2 Consultations per person per year** at **any GP** | **R 365 per consultation**	
	PRE-BIRTH CONSULTATIONS	**3 Consultations** and **3 ultrasound scans (2D) per person per year** at **any gynaecologist** | **R 4 380 per family per year** | Subject to pre-authorisation	
MEDICINE COVER			
	ACUTE MEDICATION	**Unlimited** formulary medication for every-day illnesses	
DISPENSING NETWORK GP		Formulary medication given in the rooms	
NON-DISPENSING NETWORK GP		Prescribed formulary medication | Collect from **any pharmacy** or one of **Unity Health's network pharmacies**, such as **Alpha Pharm**, **Clicks**, **Dis-Chem** or **The Local Choice**	
	CHRONIC MEDICATION	**Unlimited** formulary medication | Covers **27 chronic conditions** or **diseases**, subject to registration | Collect from **any pharmacy** including **partnered pharmacies**, such as **Alpha Pharm**, **Clicks**, **Dis-Chem** or **The Local Choice**, or have it delivered to you at no extra cost	
BLOODS, X-RAYS, DENTAL AND EYE CARE COVER			
	BLOOD TESTS AND X-RAYS	**Unlimited** basic blood tests through **Ampath**, **Lancet** or **PathCare** | Certain diagnostic blood tests are limited if not part of an approved chronic disease treatment plan | **Unlimited** black-and-white x-rays | Subject to network GP referral and approved tariff codes	
	DENTAL CARE	Basic dental treatment at **any dentist** | Single member: **R 1 600 per policy per year** | Member + 1: **R 1 600 per person**, limited to **R 3 200 per family per year** | Member + 2 or more: **R 1 600 per person**, limited to **R 4 800 per family per year** | Benefit will be prorated depending on the cover start date | Subject to approved tariff codes | No cover in last month of membership following a policy cancellation	
	EYE CARE	**1 Eye test**, **1 standard frame** to the value of **R 599** and **1 pair** of **spectacle lenses per person every 2 years** | Available at **Specsavers** and **Execuspecs** network optometrists | No cover in last month of membership following a policy cancellation	
WELLNESS BENEFITS			
	WELLNESS ASSESSMENT	**1 On-site assessment per employee per year** during an **Employee Wellness Day** | Health checks like blood pressure, cholesterol, and glucose levels | Employees who registered but were unable to attend the Wellness Day can have their assessment done at their nearest **Alpha Pharm**, **Clicks**, **Dis-Chem** or **The Local Choice** pharmacy clinic after the event	
	PREVENTATIVE CARE	Vaccinations and tests, like **1 flu vaccination per person per year**, **1 hepatitis A** and **B vaccination once-off per person**, **1 pap smear** every **3 years** for females **21 years** or **older**, and **1 prostate screening** every **2 years** for males **50 years** or **older** | Available at **Alpha Pharm**, **Clicks**, **Dis-Chem** or **The Local Choice** pharmacy clinics	
	ESSENTIAL ASSISTANCE PROGRAMME (EAP)	**Unlimited 24/7** telephonic advice and counselling services through **Reality Wellness Group** | Download the **Reality Wellness Group** Mobile App	

WAITING PERIODS: Visit **www.stratumbenefits.co.za/corporate-essential-options/** for details about applicable waiting periods.

CORPORATE ESSENTIAL EMERGENCY & ACCIDENT BENEFIT OPTION			
EMERGENCY AND ACCIDENT COVER			
	HOSPITAL CARE		
EMERGENCY COVER		Stabilisation due to a medical emergency as an **out-patient** at the nearest private hospital's emergency unit | No cover for admission or surgery | **R 110 000 per person per event** | Subject to clinical review and pre-authorisation	Add the **EMERGENCY COVER BUY-UP BENEFIT** for an additional premium **per person per month** to enhance your emergency cover | **R 500 000 per person per event** for **strokes** and **heart attacks** | Subject to pre-authorisation | Ask us for a quote
ACCIDENT COVER		Medical treatment due to an accident at nearest private hospital | **R 1 775 000 per person per event** | Subject to pre-authorisation	
	CASUALTY ACCIDENT COVER	Immediate medical treatment due to a minor accident | **R 8 750 per person per event** | Subject to pre-authorisation	
	MRI AND CT SCANS	Required during hospitalisation due to an accident | **R 23 000 per person per year** | Subject to pre-authorisation	
	PHYSIO AND OCCUPATIONAL THERAPY	Physical therapy following hospitalisation due to an accident | Treatment **within 3 months** from discharge | **R 4 380 per person per year** | Subject to pre-authorisation	
	24-HOUR MEDICAL EMERGENCY SERVICES	24-Hour national emergency contact centre | Includes services like emergency transport, repatriation limited to **R 7 500 per person** and telephonic medical advice	
PAYOUT BENEFITS			
	ACCIDENTAL DEATH	**R 40 000** Principal Insured | **R 40 000** First Spouse | **R 10 000** per Child Dependant (death due to a motor vehicle accident)	
	ACCIDENTAL DISABILITY	**R 40 000** Principal Insured | Permanent and total disability due to an accident when own or similar occupation can no longer be performed	
	FAMILY ASSISTANCE BENEFIT	Cash benefit of **R 1 500 per day** from the **first day** of hospitalisation, maximum **R 4 500 per admission**, and **R 20 000 per family per year** | Payable to assist a family member or caregiver with reasonable travel and accommodation expenses during an insured person's authorised hospital stay of more than **2 days**	
WELLNESS BENEFIT			
	ESSENTIAL ASSISTANCE PROGRAMME (EAP)	**Unlimited 24/7** telephonic advice and counselling services through **Reality Wellness Group** | Download the **Reality Wellness Group** Mobile App	

UNITYHEALTH

Administered by Unity Health, a division of Ambledown Financial Services (Pty) Ltd, FSP 10287.
Underwritten by Bryte Insurance Company Limited, a licensed insurer and authorised FSP 17703.
In partnership with Stratum Benefits (Pty) Ltd, FSP 2111.

Bryte

This product is not a medical aid, and the required cover is not the same as that of a medical aid.

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