

	BonComprehensive	BonClassic	BonComplete	BonSave	BonFit Select	Standard	Standard Select	Primary	Primary Select		
Monthly contributions Jan - Mar 2023 (4th and subsequent children covered free)	Main: R8 217 Adult: R7 749 Child: R1 672	Main: R5 677 Adult: R4 874 Child: R1 401	Main: R4 570 Adult: R3 660 Child: R1 241	Main: R2 950 Adult: R2 284 Child: R883	Main: R2 230 Adult: R1 727 Child: R669	Main: R4 230 Adult: R3 667 Child: R1 241	Main: R3 822 Adult: R3 307 Child: R1 119	Main: R2 654 Adult: R2 076 Child: R844	Main: R2 322 Adult: R1 816 Child: R738		
Monthly contributions Apr - Dec 2023 (4th and subsequent children covered free)	Main: R8 990 Adult: R8 478 Child: R1 830	Main: R6 143 Adult: R5 273 Child: R1 516	Main: R4 890 Adult: R3 916 Child: R1 328	Main: R3 228 Adult: R2 500 Child: R966	Main: R2 236 Adult: R1 674 Child: R729	Main: R4 543 Adult: R3 938 Child: R1 333	Main: R4 105 Adult: R3 552 Child: R1 202	Main: R2 792 Adult: R2 184 Child: R888	Main: R2 443 Adult: R1 910 Child: R776		
Savings	Main: R19 914 Adult: R18 774 Child: R4 050	Main: R10 218 Adult: R8 772 Child: R2 520	Main: R8 640 Adult: R6 918 Child: R2 349	Main: R9 099 Adult: R7 044 Child: R2 724	Main: R4 019 Adult: R3 036 Child: R1 282	N/A					
Self-payment gap	Main: R4 650 Adult: R3 860 Child: R1 760	N/A	Main: R2 020 Adult: R1 710 Child: R440	N/A				N/A			
Above threshold benefit	Unlimited	N/A	Main: R5 360 Adult: R3 150 Child: R1 370	N/A				N/A			
Overall day-to-day limit subject to below sublimits (*based on family size)						*Ranges from R12 000 - R22 000		*Ranges from R5 000 - R11 000			
Sublimits for GP & specialist benefit including virtual care consultations (*based on family size)	N/A					*Ranges from R3 000 - R6 000 On Standard Select: · Nomination of 2 network GPs applies · 2 non-nominated network GP visits allowed per family per year · Consultations with non-network GPs are limited to PMBs		*Ranges from R2 000 - R4 500 On Primary Select: · Nomination of 2 network GPs applies · 2 non-nominated network GP visits allowed per family per year · Consultations with non-network GPs are limited to PMBs			
Sublimits for acute and over-the-counter medicine benefit (*based on family size)						*Ranges from R3 000 - R6 000 Over-the-counter medicine is limited to: R800 per beneficiary R2 500 per family		*Ranges from R1 500 - R3 000 Over-the-counter medicine is limited to: R500 per beneficiary R2 000 per family			
Sublimits for X-rays & blood tests benefit (*based on family size)						*Ranges from R3 000 - R6 000		*Ranges from R2 000 - R3 000			
Sublimits for auxiliary services benefit (*based on family size)						*Ranges from R3 000 - R6 000		*Ranges from R2 000 - R3 000			
HOSPITAL BENEFITS (pre-authorisation required)											
Hospital network	N/A		Yes			N/A		Yes		N/A	
Hospital cover	Unlimited										
GP and specialist consultations (network doctors covered in full at the Bonitas Rate)	Unlimited Specialist covered at 150%, GP covered at 100% of the Bonitas Rate		Unlimited 100% of the Bonitas Rate								
Blood tests and X-rays	Unlimited, 100% of the Bonitas Rate										
MRIs and CT scans	R34 340 per family in and out-of-hospital	R33 740 per family in and out-of-hospital	R27 160 per family in and out-of-hospital		R18 340 per family in hospital	R30 370 per family in and out-of-hospital			R14 240 per family in and out-of-hospital		
Co-payment per scan event unless PMB	R2 500				R1 660				R2 000		
Internal and external prostheses	R60 380 for internal prosthesis per family R60 380 for external prosthesis per family	R63 540 per family	R51 440 per family	R36 660 per family (internal only)	PMB only	R51 440 per family			PMB only		
Internal nerve stimulators	R181 400 per family	N/A				R192 600 per family			N/A		
Cochlear implants	R304 300 per family	R323 200 per family	N/A								
Mental health hospitalisation	R53 480 per family	R47 010 per family	R36 760 per family			R46 320 per family			R17 010 per family		
Sublimit of hospitalisation for mental health consultations per family (in or out-of-hospital)	R18 130 per family				PMB only		R18 130 per family		R10 920 per family		
Take-home medicine	Limited to a 7-day supply up to R595 per hospital stay	Limited to a 7-day supply up to R540 per hospital stay	Limited to a 7-day supply up to R480 per hospital stay	Limited to a 7-day supply up to R445 per hospital stay		Limited to a 7-day supply up to R540 per hospital stay			Limited to a 7-day supply up to R420 per hospital stay		
Physical rehabilitation	R54 360 per family	R57 730 per family				R54 360 per family					
Alternatives to hospital (hospice, step-down facilities)	R18 130 per family	R19 250 per family				R18 130 per family					
Palliative care (cancer only)	Unlimited, subject to the DSP										
Cancer treatment (30% co-payment applies at non-DSP)	Unlimited for PMBs R400 000 per family for non-PMBs (Paid at 80% at a DSP and no cover at a non-DSP, once limit is reached) R260 600 of this can be used for specialised drugs (including biological drugs)	Unlimited for PMBs R300 000 per family for non-PMBs (Paid at 80% at a DSP and no cover at a non-DSP, once limit is reached)	Unlimited for PMBs R250 000 per family for non-PMBs (Paid at 80% at a DSP and no cover at a non-DSP, once limit is reached)	Unlimited for PMBs R200 000 per family for non-PMBs (Paid at 80% at a DSP and no cover at a non-DSP, once limit is reached)		Unlimited for PMBs R250 000 per family for non-PMBs (Paid at 80% at a DSP and no cover at a non-DSP, once limit is reached)			Unlimited for PMBs R200 000 per family for non-PMBs (Paid at 80% at a DSP and no cover at a non-DSP, once limit is reached)		
Non-cancer specialised drugs (including biological drugs)	R220 800 per family	PMB only				PMB only					
Organ transplants	Unlimited								PMB only		
Kidney dialysis	Unlimited at a DSP or 20% co-payment applies at a non-DSP										
HIV/AIDS	Unlimited, if you register on the HIV/AIDS programme										
Day surgery procedures (applies to selected procedures)	You must use a network day hospital or a R2 430 co-payment will apply				You must use a network day hospital or a R4 850 co-payment will apply		You must use a network day hospital or a R4 850 co-payment will apply		You must use a network day hospital or a R2 430 co-payment will apply		
Co-payments for certain procedures	Co-payment applies for hip and knee replacements at a non-DSP Co-payment applies for cataract surgery at a non-DSP			Yes			Co-payment applies for hip and knee replacements at a non-DSP Co-payment applies for cataract surgery at a non-DSP		Yes		
OUT-OF-HOSPITAL BENEFITS											
GP consultations (including virtual care consultations)	Paid from available savings and/or above threshold benefit		Paid from available savings		Paid from available savings Additional benefit for GP consultations when savings are finished (limited to 1 per beneficiary, maximum 2 per family) paid at the Bonitas Rate			Paid from available GP & specialist benefit sublimit			
Specialist consultations	Paid from available savings		Paid from available savings								
X-rays and ultrasounds	R3 620 per beneficiary R8 020 per family (Combined benefit)		Paid from available savings and/or above threshold benefit					Paid from available X-rays and blood tests benefit sublimit			
Blood tests	Paid from available savings and/or above threshold benefit		Paid from available savings and/or above threshold benefit		Paid from available savings			Paid from available acute and over-the-counter medicine benefit sublimit		Paid from available acute and over-the-counter medicine benefit sublimit	
Acute medicine 20% co-payment for non-DSP/non-formulary use	Medicine limited to R15 930 per family above threshold		Paid from available savings					Over-the-counter medicine is limited to: R800 per beneficiary R2 500 per family		Over-the-counter medicine is limited to: R500 per beneficiary R2 000 per family	
Over-the-counter medicine 20% co-payment for non-DSP/non-formulary use	Paid from available savings and/or above threshold benefit		Paid from available savings					Paid from available auxiliary services benefit sublimit			
Allied medical professionals (such as dietician, speech and occupational therapist)	Paid from available savings and/or above threshold benefit		Paid from available savings					Subject to the available overall day-to-day limit R7 630 per family for Stoma Care and CPAP machines. Note: CPAP machines subject to Managed Care protocols		Subject to the available overall day-to-day limit R7 340 per family for Stoma Care and CPAP machines. Note: CPAP machines subject to Managed Care protocols	
Physiotherapy, podiatry and biokinetics	Paid from available savings		Paid from available savings								
General medical appliances	Paid from available savings		Paid from available savings								
Insulin pump or continuous glucose monitor (For type 1 diabetes & under 18s)	R51 010 per family every 5 years (Consumables limited to R25 740 per family)				N/A			R51 010 per family every 5 years (Consumables limited to R25 740 per family)		N/A	
Hearing aids	R30 000 per family every 5 years 10% co-payment applies	R19 650 per family every 5 years 10% co-payment applies	Paid from available savings and/or above threshold benefit		N/A			R8 930 per family every 5 years 20% co-payment will apply		N/A	
Optometry (once every 2 years)	Paid from available savings and/or above threshold benefit, limited to R3 675 per beneficiary		R6 137 per family		Paid from available savings			R7 035 per family		R5 421 per family	
Refractive surgery	R22 760 per family		N/A								
Basic dentistry	Paid from available savings and/or above threshold benefit		R5 457 per family, per year		Covered at the Bonitas Dental Tariff, subject to the Bonitas Dental Management Programme						
Specialised dentistry (Managed Care protocols apply)	Paid from available savings and/or above threshold benefit		R6 570 per family, per year Covered at the Bonitas Dental Tariff		Covered at the Bonitas Dental Tariff		N/A			Covered at the Bonitas Dental Tariff	
Chronic medicine (40% co-payment for non-DSP/non-formulary use)	60 chronic conditions R16 100 per beneficiary R32 060 per family Subject to use of Bonitas Pharmacy Network and formulary		47 chronic conditions R13 190 per beneficiary R27 270 per family Subject to use of DSP and formulary		31 chronic conditions Unlimited, subject to use of DSP and formulary		Unlimited for PMB, subject to use of DSP and formulary			45 chronic conditions R11 180 per beneficiary R22 440 per family Unlimited for PMB, subject to use of DSP and formulary	
ADDITIONAL BENEFITS (in addition to savings and day-to-day benefits)											
International travel benefit (per trip)	You must register for this benefit prior to departure Up to R10 million cover per family for medical emergencies when you travel outside South Africa Additional benefit for medical quarantine up to R10 000 per person if tested positive for Covid-19										
Africa benefit (per trip)	In and out-of-hospital treatment covered at 100% of the Bonitas Rate Subject to authorisation										
Contraceptives (per family for women aged up to 50)	R1 830	R1 830 at the DSP			R1 760 at the DSP			R1 830 at the DSP		R1 760 at the DSP	
MATERNITY BENEFITS (per pregnancy)											
Private ward after delivery	Yes	N/A									
Antenatal consultations	12		6			12		6			
2D ultrasound scans	2										
Antenatal classes	R1 410		R1 360		Paid from savings			R1 410		N/A	
Amniocentesis	1										
Postnatal consultations (with a midwife)	4 (1 can be used for a consultation with a lactation specialist)										
CHILD CARE BENEFITS											
Hearing screening	For newborns up to 8 weeks, in or out-of-hospital										
Congenital hypothyroidism screening	Infants under 1 month old										
24/7 telephonic baby advice line	For children under 3 years										
Paediatric consultations for children under 1 year	3		N/A		2			1		1	
Paediatric consultations for children between ages 1 and 2	2		N/A		1			2		1	
GP consultations for children between ages 2 and 12	2		N/A		1			2		1	
Childhood immunisations up to the age of 12	According to the Expanded Programme on Immunisation in South Africa										
PREVENTATIVE CARE											
Dental fissure sealants	To prevent tooth decay on permanent teeth for children under 16										
HIV test and counselling per beneficiary	1										
Flu vaccine per beneficiary	1										
Full lipogram every 5 years, for members aged 20 and over	1			N/A			1		N/A		
Mammogram every 2 years, women over 40	1										
Pap smear every 3 years, women between ages 21 and 65	1										
Prostate screening antigen test, men between ages 45 and 69	1										
Pneumococcal vaccine every 5 years, members aged 65 and over	1										
Stool test for colon cancer, members between ages 50 and 75	1										
Whooping cough booster vaccine every 10 years, members between ages 7 and 64	1			N/A			1		N/A		
Human Papillomavirus (HPV) vaccines for girls between ages 9 and 14	2			N/A			2		N/A		
Bone density screening every 5 years, women aged 65 and men aged 70 and over	1			N/A			N/A				
WELLNESS BENEFITS											
Wellness screening (Blood pressure, glucose, cholesterol, Body Mass Index and waist-to-hip ratio)	1 per beneficiary										
Benefit Booster Benefit includes: GP specialist, biokineticist, physiotherapist and alternative healthcare consultation(s), paramedical services, acute and over-the-counter medicine, non-surgical procedures, blood tests and X-rays	R2 730 per family Consultations and treatment paid at 100% of the Bonitas Rate		R1 880 per family Consultations and treatment paid at 100% of the Bonitas Rate			R1 310 per family Consultations and treatment paid at 100% of the Bonitas Rate			R2 000 per family Consultations and treatment paid at 100% of the Bonitas Rate		R1 500 per family Consultations and treatment paid at 100% of the Bonitas Rate
Subject to completion of an online wellness questionnaire or wellness screening											

DSP = Designated Service Provider PMB = Prescribed Minimum Benefits