Cimas GENERAL PACKAGE

Benefit limits for the General Package are paid per beneneficiary per membership year and begin from the date the beneficiary joins the Society. Awards are made at Association of Healthcare Funders of Zimbabwe (AHFoZ) rates. All benefits are paid up to an annual global limit.

Where usage is considered excessive the Society reserves the right to restrict usage or recommend less expensive treatment options.

MEDICAL BENEFITS

The following benefits are paid at AHFoZ rates.

- · Hospitalisation in a Private Hospital is paid at 60% up to a two-bedded ward
- Hospitalisation in Government, Mission or Municipal hospital including Parirenyatwa Hospital is paid in full.
- In-hospital drugs are paid in full whilst in a Private, Government, Municipal or Mission Hospital (To-Take-Out Drugs are paid up to seven (7) days stock)
- Ambulance service is covered for life threatening situations only
- General practitioners
- Specialist treatment services by Private and Government specialists
- Pathology and Radiology Services at Private and Government facilities
- Blood Transfusion Services (BTS) (a non-refundable 20% co-payment applies)

DRUG BENEFITS

There is an Annual Family Limit to cover prescription drugs. Benefit limits depend on the member's family size and are available to any beneficiary registered under a principal member. Drugs supplied on prescription outside Zimbabwe are paid at 75% of cost up to the Annual Family Limit.

There is no drug deduction fee applicable to the General Package. Members can access generic prescription drugs on the Society's Drug Facility arrangement with some pharmacies. Drugs are paid at the Approved Medical Aid Award rate (which is agreed to by pharmacies and medical aid societies for generic drugs.)

OPTICAL BENEFITS

The optical benefit is paid at 80% of cost up to the limit every three (3) year period.

 It caters for lenses, frames and contact lenses. Eye tests are paid for in full at Cimas rates up to an annual limit

MATERNITY BENEFITS

Maternty is generally paid at 70% of AHFoZ rates. It caters for-

- · Maternity care, delivery and hospitalisation
- Antenatal and postnatal visits are restricted to nine (9) and five (5) respectively
- Two (2) antenatal ultra-sound scans
- Hospitalisation is paid in full

DENTAL BENEFITS

This caters for general and preventive dentistry including inlays, root treatment, fillings, crowns and bridges, implants and orthodontic work at AHFoZ awards. Awards are paid up to an annual limit.

· Prior authorisation is required for crowns, bridges, dentures and orthodontic treatment

FOREIGN TREATMENT

This caters for treament not available in Zimbabwe. The Society will pay 70% of cost up to 90% of the Global Limit, provided approval is obtained from Cimas before the treatment is rendered.

Where prior-authorisation is not obtained, claims will be refused at 50% of cost up to 50% of the Annual Global Limit.

Foreign claims must be submitted for payment within a period of six (6) months from date of treatment.

Global Travel Cover

Cimas , in association with HEALTHGUARD International (Pty) Ltd (R.S.A), offers Global Travel Cover (GTC) to any person travelling outside their country of usual residence. It is available upon application to both Cimas and non-Cimas members. (See GTC Brochure for detailed information).

StudyMate Health Cover

StudyMate is an international student plan that offers comprehensive medical cover for students studying outside their country of usual residence. (See the StudyMate Brochure for detailed information).

PROSTHETICS AND APPLIANCES

Awards are paid up to an Annual Limit

- Internal prostheses paid at 90% of cost
- External prostheses paid at 80% of cost
- Hearing aid repairs paid at 80% of cost
- Nebulisers paid at 50% of cost
 Ostomy bags paid at 80% of cost
- Miscellaneous appliances paid at 50% of cost

Lifetime Limits:

- Hearing Aids paid at 80% of cost
- Glucometers paid at 80% of cost

REHABILITATIVE SERVICES

This caters for Occupational and Speech therapy, Clinical Psychology, Social Work and Physiotherapy. Awards are paid at AHFoZ rates up to an annual limit.

PSYCHIATRY BENEFITS

This caters for consultation by a specialist. Awards are paid at AHFoZ rates up to an annual limit.

ALTERNATIVE SERVICES

This caters for Chiropody, Chiropractic, Homeopathy, Osteopathy and Naturopathy provided the suppliers are registered in trems of the appropriate regulations. Awards are paid at AHFoZ rates up to an annual limit.

SUPPLEMENTARY SERVICES

Awards are paid at AHFoZ rate up to agn Annual Limit.

- Air Evaluation
- Homes providing constant nursing care
- Homes for the disabled
- Hospital transfers
- Family Planning

WAITING PERIODS

The following benefit waiting periods apply to those joining the Society for the first time or where there has been a lapse in membership. The Society reserves the right to waive waiting periods for members transferring from AHFoZ affiliated medical aid societies. These waiting periods include:

- · A mandatory three (3) months waiting period will apply to all new members.
- Subject to the aforegoing, where a member downgrades to lower packages, these waiting periods will not apply.

Six (6) months for:

- Specialist treatment
- MRI. CT scans and Nuclear medicine
- · Admission or treatment at a hospital
- Upgrading to a higher packge
- Dental treatment

Nine (9) months for:

Maternity benefits

One (1) year for:

- · Homes providing constant nursing care
- Spectacles and Contact Lenses
- Foreign Treatment

Two (2) years for:

- · All internal prosthetic devices
- Chemotherapy
- · Chronic Diseases Add On

*All the conditions with a two (2) year waiting period listed on the previous pages or neeeding the remedies set out therein have cover. Cover is subject to prior authorisation by the Society. Prior authorisation must be sought at all times

Five (5) years for:

- · Ex-Gratia Chronic Drug Award
- · Orthodontic Treatment
- · Members must apply to the Society for ex-gratia chronic medication.
- For orthodontic work, members must seek prior-authorisation from the Society before accessing treatment.

PRIOR-AUTHORISATION

For all instances requiring prior-authorisation, members must approach the Society's Marketing and Client Services Department. The Marketing AND Client Services Department will readily explain the procedure and factors considered in granting or withholding such authorisation. Members needing information should approach this department. Members may also approach the Marketing NA Client Services Department if they have any other queries or concerns about these benefits, waiting periods or terms herein.

Your may also visit on our website at www.cimas.co.zw

Disclaimer

This General package benefits summary must be read together with the Cimas Constitution and the Cimas Menbership Rules. It is an abbreviation of the benefits and rules, and does not supersede the Cimas Constitution and the Cimas Membership Rules. Interpretation will be based on the Cimas Constitution and the Cimas Membership Rules.

Particular note should be taken of those conditions or remedies for which there is no automatic cover. Prospective members should understand the Socieity's considerations as to when cover is not available. In all these instances prior authorisation must be sought before service is accessed.

+ CD Chronic Diseases ADD-ON

Did you know?Cimas offers all its members an optional 'add-on' to cover chronic diseases. Our Chronic Diseases Add-On will cover the cost of treatment of HIV and AIDS, including the acquisition of ARVS. To find out more about this facility, contact your Cimas branch by ophone, fax or email

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GENERAL PACKAGE

