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Message from the Principal Officer

It is with great enthusiasm that the anticipated Schedule of Benefits and Pre-Authorisation process went live for RFMCF members, effective 01 April 2023.

It has been an almost 2-year project, with many stakeholders involved. As valued members, you have been kept aware of his process in the following communication to date:

- Bulletin 9 (October 2021)
- Bulletin 10 (December 2021)
- Virtual Roadshow (2022)
- Bulletin 12 (May 2022)
- Bulletin 13 (September 2022)
- Bulletin 14 (November 2022)
- Wellness Tour (February/March 2023)
- Email letter Introducing the Schedule of Benefits (March 2023)
- SMS Introducing the Schedule of Benefits (March 2023)
- Website updated to incorporate changes (March 2023)

Workshops with the SAMHS have taken place and will continue to ensure that all parties work together to help you, our RFMCF members, and iron out any challenges that have been identified along the way.

This is the first Schedule of Benefits for the Fund and its members, and some challenges are anticipated, which are being addressed to ensure that the member experience and access to healthcare is not affected. The Fund would like to thank you for your patience, understanding and for taking the time to read the communication that has been distributed. You are encouraged to read the information available to you, which is also available on the RFMCF website: https://rfmcf.co.za/schedule-of-benefits/.

The Fund also concluded the 2023 Wellness Days. This year has been wonderfully successful in terms of attendees. Read more about the Wellness Days on page 11.

There has been a lot of development within the Fund over the last couple of years; however, one challenge remains – outdated members' contact details on the RFMCF database. This makes it incredibly challenging for the Fund to communicate with members, especially important development like the Schedule of Benefits. Read on page 2 how you can update your contact details with the Fund to stay up to date with important information.

Cooler days are settling in as the seasons change. You may now get your flu vaccine from your local pharmacy.

Take good care these coming months.

Until next time,

Dr Anushka Jamuna Principal Officer of the RFMCF

Schedule of Benefits

The Schedule of Benefits is a document containing a list of medical services rendered in and out-of-hospital that specifies a benefit allocation for each service.

This bulletin will cover the frequently asked questions raised following the communication release that introduced the changes effective 01 April 2023.

All information is available on the RFMCF Website as shown below to ensure that members have immediate access to the information.

Members are urged to urgently email their updated contact details (email address, cell phone number and physical address) by sending an email to <u>membership@rfmcf.co.za</u>. Having your updated contact details uploaded on the Fund's database will ensure that you receive the necessary communication.

FIND ALL THE INFO ON OUR WEBSITE

The Client Service Centre is experiencing high call volumes. Please make use of the information below before you contact the Fund. Thank you for your patience.

Download the Schedule of Benefits <u>HERE</u>.

Download educational infographics <u>HERE</u>.

Download the Schedule of Benefit videos <u>HERE</u>.

Download the Pre-Authorisation form <u>HERE</u>.

Search for a Network Doctor or Hospital <u>HERE</u>.

Search for a SAMHS Healthcare Facility <u>HERE</u>.

Find our contact details <u>HERE</u>.

The RFMCF website is a great source of information for our members and providers.

What are the <u>advantages</u> of the Schedule of Benefits?

- 1. A new and improved process addresses challenges in obtaining authorisations for medical services.
- 2. A pre-authorisation process to streamline the health service benefits for the RFMCF member has been introduced. This will allow members to access services easily and timeously compared to historical experiences.
- 3. The Fund has developed the Preventative Care Benefits to ensure that members have immediate access to the primary preventative benefits for early diagnosis and timeous treatment. This benefit is in full control by the RFMCF member. Example: In the past, female RFMCF members struggled to obtain authorisation for a Mammogram before the age of 70, whereas the Schedule of Benefits Preventative Services allows 1 scan per female beneficiary aged 40y+ per annum.
- 4. The Schedule of Benefits enhances faster access and availability of quality health services to the RFMCF member.
- 5. The SOB benefit "limits" refers to how services are managed both by the member and the Fund, and how private healthcare providers charge their fees. The Fund has negotiated with Designated Service Providers: Hospitals, General Practitioners and Specialists (This network continues to expand). This "limit" fraud abuse from members prevents and and fraud/overcharging from healthcare service providers. Should members opt to not use a Designated Service Provider, copayments will apply to the Member. If benefits are abused, RFMCF members will be held liable for the costs.
- 6. The "limits" apply to some Schedule of Benefit baskets. Most of the benefits are protocol and clinically-driven and are managed from the risk pool of the Fund; hence the authorisation process is managed by the Fund.

Visit the RFMCF website <u>https://rfmcf.co.za/schedule-of-benefits/</u> for more information about the changes effective 01 April 2023.

ATTENTION: PRINCIPAL MEMBERS:

It is your responsibility to notify your registered dependants of the Schedule of Benefits.

Should you not be comfortable in using email/digital technology, please update your details (email address and cellphone number) to that of next of kin/family/friend.

IMPORTANT INFORMATION ABOUT THE

Schedule of Benefits

If you reside further than 50km from a SAMHS healthcare facility:

- ✓ You are therefore informed that you may use a private healthcare provider without a DD63 (referral letter) or DD2703 (G-Authorisation). The Fund encourages you to use an RFMCF General Practitioner and Specialist Network healthcare provider where possible to reduce co-payments that may be incurred.
- Visiting a private healthcare provider will utilise your Schedule of Benefit benefits. You are reminded that you are responsible for managing the available benefit allocations. If the benefits have been depleted, you will be liable for the payment of the account.
- You may still use a SAMHS healthcare facility where possible; however, your benefit allocations will be utilised if outsourced.

If you reside within 50km from a SAMHS healthcare facility:

- ✓ The SAMHS remains your primary healthcare provider, and you must continue to make use of the SAMHS for healthcare needs following the implementation of the Schedule of Benefits.
- ✓ If the SAMHS cannot provide medical services to you, the SAMHS healthcare provider must issue a DD63 (referral form) before the medical services are outsourced. You, therefore, do not have to wait for the DD2703 to receive your treatment. You do not require a quotation from the outsourced service provider.
- ✓ Once the SAMHS has outsourced your medical treatment to a private healthcare provider, your RFMCF Schedule of Benefits will be utilised. It is advisable that you use the RFMCF General Practitioner and Specialist Network where possible to reduce copayments that may be incurred.

If you are on holiday or find yourself outside of your residential area and you need healthcare treatment, here's what you must do:

- 1. Use your RFMCF Mobi App to locate your nearest SAMHS Healthcare Facility.
- If you notice that you are not within a 50km radius, then you may visit a private healthcare provider to obtain medical treatment.

Please note that if you do use a private healthcare provider:

- Search for the nearest RFMCF Network General Practitioner via the Mobi App or visit www.rfmcf.co.za and make an appointment.
- If there are no network doctor in the area, you may visit any doctor in the area, but copayments may apply if the doctor charges above the RFMCF Tariff. The co-payment will be payable by the Member. You should strongly encourage your practitioner to join the RFMCF Provider Network.
- You will utilise your day-to-day consultation benefit if the treatment does not form part of your Disease Risk Management Programme.



After-Hour and Medical Emergencies

In the event of an after-hours or medical emergency, contact ER24 on 084 124 or visit your nearest medical emergency hospital for treatment.

There is no after-hour pre-authorisation line for hospital admissions. If you are admitted via casualties, pre-authorisation must be obtained by contacting 012 679 4201 or email <u>preauth@rfmcf.co.za</u> the next working day.

What is a medical emergency?

An emergency medical condition means the sudden and, at the time, unexpected onset of a health condition that requires immediate medical treatment and/or an operation. If the treatment is not available, the emergency could result in weakened bodily functions, serious and lasting damage to organs, limbs or other body parts, or even death.

Who are my

Designated Gervice Providers?

Type of Service	Designated Service Provider
Ambulance Services	ER24 – 084 124
Designated Hospitals	Refer to the RFMCF Mobi App or
	https://rfmcf.co.za/search-medical-
	provider/find-a-hospital/
Dialysis	National Renal Care (NRC) and
	Fresenius
Home Oxygen	Ecomed Medical CC
Oncology (Cancer) Treatment	ICON
Oncology Medicine Management	Dis-Chem Oncology and Medipost
Optical Services	Opticlear
GP Network	Refer to the RFMCF Mobi App or
	https://rfmcf.co.za/search-medical-
	provider/find-a-general-
	practitioner/
Specialist Network	Refer to the RFMCF Mobi App or
	https://rfmcf.co.za/search-medical-
	provider/find-a-specialist/
RFMCF Pharmacy Network	Visit www.rfmcf.co.za for the
	comprehensive list

The <u>General Practitioner and Specialist Network</u> is continuously expanding, as the Fund aims to have a good footprint of doctors within South Africa at your disposal. If your doctor does not reflect on the list, email the doctor's details to rfmcfprovider@ppsha.co.za, and we will contact your doctor to consider joining the network.

Reside in Namibia?

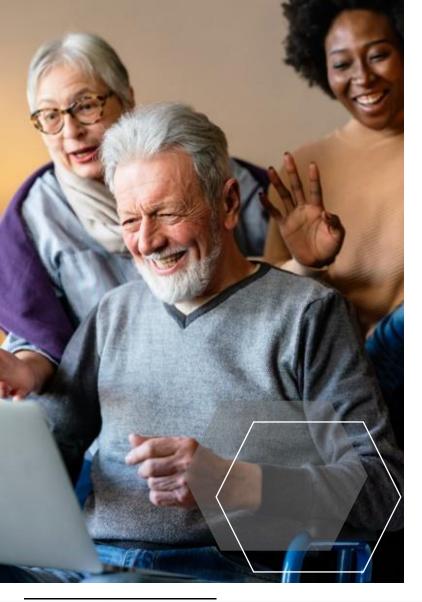
The Schedule of Benefit implementation and Pre-Authorisation Process is applicable to Namibian members. The following should be noted:

- The standard 20% co-payment will remain when services are rendered within the Namibian borders.
- When visiting South Africa, you must still use a SAMHS healthcare facility where possible.
- Visiting a private healthcare provider will utilise your Schedule of Benefit benefits.

DOWNLOAD THE ENHANCED RFMCF MOBI APP

Kindly download the latest RFMCF Mobi App (**version 1.5.8**) from the app store to have access to search for General Practitioners & Specialists.

Visit the website for a comprehensive list here: <u>https://rfmcf.co.za/search-</u> <u>medical-provider/</u>



WEB PORTAL

ACCESS YOUR WEB PORTAL VIA THE RFMCF WEBSITE TO VIEW YOUR COMPREHENSIVE PROFILE ONLINE.

RFMCF Web Portal & Website

You are encouraged to register on the **RFMCF web portal** to access your comprehensive membership profile electronically.

The RFMCF website contains all your member information, including your real-time available benefits.

Access the web portal using the same credentials you use when logging onto your RFMCF Mobi App.

Log onto the RFMCF web portal via the website <u>www.rfmcf.co.za</u> and click "Member Login" as shown below to gain access to your profile.

This is another great platform to stay up to date with your RFMCF membership information.



Need Glasses? Here's what to do:



The optical benefits are managed by **Opticlear** on behalf of the Fund, and not through the SAMHS.

For optical authorizations or optical enquiries, contact 012 679 4200 and follow the prompts for the optical department.

Authorisation is required through **Opticlear** prior to services being rendered.

If benefits are available, a unique authorisation number will be created.

Authorisation is not a guarantee of payment, as claims will still be subject to final clinical validation, protocols and rules/policy.



It remains the responsibility of the member to manage the available benefits, and only use it when it is truly necessary.

Let's talk about HEARING AIDS

- Contact the RFMCF Pre-Authorisation Department to obtain authority for outsourced hearing aid appliances on 012 679 4201, per email preauth@rfmcf.co.za or by fax to 012 111 9068. Clinical protocols will apply.
- A hearing aid must be prescribed by an Otolaryngologist, otherwise known as an Ear, Nose and Throat (ENT) Specialist or an Audiologist.
- After the expiry of the hearing aid guarantee, the Fund will pay for the cost of services and/or repairs through means of an exception management request.
- The outsourced ENT consultation will be payable from your day-to-day specialist consultation benefit.
- The outsourced Audiologist consultation will be payable from your Auxiliary Service benefit.
- The benefit is R15,000 per beneficiary every 5 years.
- One sheet of batteries is covered during the initial fitting, thereafter the batteries are payable by the Member.

Benefits Depleted NOW WHAT?

MEDICAL TREATMENT WILL BE AVAILABLE WHERE CLINICALLY APPROPRIATE, EVEN AFTER BENEFITS HAVE BEEN DEPLETED.

When the Fund and the actuaries were developing the Schedule of Benefits, all the data available was taken into consideration, such as the age of the members, historical claims data, and chronic conditions etc. to compile the benefit baskets. The benefits were therefore put together in line with what most member's requirements had been over the past years.

The Fund also understands that members' medical needs may differ, and additional funding may be required. For this reason, an **exception management process** is in place. If your benefits have been depleted and you still require clinically relevant treatment, the Fund will review further benefits. If the treatment is appropriate as per the clinical protocols, healthcare will be provided. You can contact the Pre-Authorisation Department on 012 679 4201 or email preauth@rfmcf.co.za for additional benefits.

Why did the Fund implement the Schedule of Benefits?

Watch the video where the Principal Officer of the RFMCF explains the various aspects that led to the development of the Schedule of Benefits and in-house Pre-Authorisation Process.

CLICK HERE TO WATCH THE VIDEO

YOU ARE Invited!

The Fund invites you, our RFMCF Member, to an online workshop via Microsoft Teams to discuss the Schedule of Benefits.

The dates are as follows:

- Wednesday, 26 April 2023 from 13h00 15h00
- Thursday, 18 May 2023 from 10h00 12h00
- Thursday, 18 May 2023 from 13h00 15h00
- Friday, 19 May 2023 from 11h00 13h00
- Friday, 19 May 2023 from 14h00 16h00

If you have internet access and wish to join the online workshop, please send the following information to <u>roadshow@rfmcf.co.za</u>:

- VPA number
- Area you reside in
- Up to 5 questions in bullet point format
- Date/Time you wish to join the workshop

You will be provided with an Microsoft Teams link to join the online workshop for the date/time you have selected.

<u>Strict</u> Deadline to indicate you want to join: **10 May 2023** for May sessions.

Limited spaces are available per workshop.

Oncology CALL TO ACTION

If you have been diagnosed with cancer and are on active treatment or in remission, please ask your treating doctor to notify the Fund by sending your treatment plan to <u>oncology@rfmcf.co.za</u> or contact 012 679 4201.

If your oncology benefit has been depleted due to outsourcing services, the Fund will review your treatment according to clinical protocols for further payment.



Medicine Scripts

COURIER (CHRONIC) MEDICINE: It is important to submit your medicine prescription to your nearest SAMHS pharmacy to ensure that the necessary arrangements are made for your medicine to reach you in time via courier services. A new script must be submitted every six (6) months.

Follow up with the SAMHS pharmacy to ensure that they have received your prescription to make the necessary arrangements.

ACUTE MEDICINE: If you visit a SAMHS healthcare provider, a buy-out is required when visiting a private pharmacy to obtain your medication. If you were referred to an outsourced healthcare provider, who writes you a script, the private pharmacy will use the practice number of the private healthcare provider instead of a buy-out to dispense your medication.

REDUCE co-payments by asking the pharmacist for generic alternatives. Generic medication are usually less expensive than its original counterparts, but they consist of the same active ingredients to treat your condition. Ask your pharmacist for more information.



Frequently Asked Questions

Question	Answer
The doctor (GP or Specialist) that I usually go to outside of the SAMHS does not appear on the RFMCF Provider Network. How will it affect me, and can I get the doctor to register on the RFMCF Provider Network?	You can still visit a private healthcare doctor you used to see if they are not on the RFMCF Provider Network. A co-payment may apply if the doctor charges more than the RFMCF Tariff. The Fund sent an invitation to private healthcare providers to join the RFMCF Provider Network. They are included into the network as the responses are received. You may ask your doctor to email <u>rfmcfprovider@ppsha.co.za</u> to join the network.
My private healthcare provider prescribed medication I need to obtain from a pharmacy. Should I first go to the SAMHS to get a buy-out request?	If you have been outsourced or attended to by a private healthcare provider, you can obtain your medication from a private pharmacy. Hand in your prescription, and the pharmacy will use the practice number of the private healthcare provider to dispense the medication for you. Remember that co-payments on the medicine may apply, so ask for generic alternatives where possible to avoid co-payments.
How can I view my available benefits?	You can access your real-time available benefits on the RFMCF Web Portal (via the RFMCF website) using the same login username and password that you use to access your Mobi App. Certain benefits will be added to your monthly statement. The benefits shown on the monthly statement will be what was available when the statement was created. The RFMCF Mobi App is also being developed to reflect your benefits, and you will be notified when the benefits are available on the Mobi App.
Can I still get my medicine if my consultation benefits have been depleted?	If your consultation benefits are depleted, you can still visit a SAMHS healthcare facility for treatment if possible, failing which, you may apply for exception management. If the provider gives you a prescription, you can still take it to a SAMHS or private pharmacy.
Why was the Schedule of Benefits implemented if I was told to have full medical access upon retirement?	Refer to the "RFMCF Schedule of Benefit Introduction Video" that explains why the Fund implemented the Schedule of Benefits. You can access it on the RFMCF website or click here: <u>https://rfmcf.co.za/schedule-of-benefits-videos/</u> . It is important to understand that the Fund is not taking away access to medical services. Medical services will now be managed according to clinical criteria to avoid abuse of services and eliminate fraudulent activities. Members are requested to act responsibly in terms of managing their medical treatment and expenses effectively as outlined in the Schedule of Benefits to ensure that the Fund remains sustainable.
Did the Fund communicate the changes with the SAMHS and various service providers?	All the appropriate documentation was sent to the SAMHS. The Fund has had several workshops with the SAMHS to explain the changes in detail. Service providers and practice groups were also notified of the changes.
Who do I phone to get answers to my questions?	The Fund has noticed that a number of members are contacting the incorrect channels to obtain answers to their questions. It is crucial that you make use of the correct channels of communication. Refer to the contact list on the last page of this bulletin, as some new contact details were created. You can also access the contact details on the RFMCF website, or click here: <u>https://rfmcf.co.za/contact/</u> You are encouraged to read all the information that has been provided to you.
I have been outsourced to a General Practitioner by the SAMHS. The General Practitioner now wants to refer me to a Specialist. Must I go back to the SAMHS to get a DD63 before I visit the Specialist?	No, you do not require a second DD63 if you already received one for your first referral for the GP if the treatment relates to the same original doctor's visit.

Question	Answer
Is obtaining pre-authorisation a guarantee of payment and are benefits reserved when pre- authorisation is obtained?	Benefits are not reserved, irrespective if services have been authorised or not. The first valid claim submitted will be processed from the appropriate benefit. Members who still contribute towards the Fund who are not paid up to date will be suspended. The pre-authorisation will not override the suspension. Claims will be pended until the contributions are paid up to date. When the membership status is activated, claims previously rejected will be processed for payment.
Will the Schedule of Benefits affect active force members or is this only applicable to RFMCF members?	The Fund only manages benefits for retired members. The Schedule of Benefits has been implemented for members and registered dependants of the RFMCF (retired). Items like sunscreen and mosquito repellent will not be covered by the RFMCF for retired members.
Will a G-authorisation (DD2703) override the RFMCF Schedule of Benefits?	No, the DD2703 and rand values provided on those forms are no longer used to validate the clinical appropriateness of medical treatment. The Fund only considers the clinical appropriateness of services and uses clinical protocols that are in place for medical treatment to ensure fairness to all members.
I have to visit my treating doctor multiple times a year to receive a script, this will surely exhaust my day-to-day consultation benefit quickly.	The Fund has encouraged members to register their existing and new chronic conditions on the Disease Risk Management (DRM) Pogramme. The disease management treatment plan allows members to visit their doctor for regular tests to ensure that their condition is managed to avoid complications. Members are therefore encouraged to use the DRM consultations to ask doctors to provide an updated prescription, which is usually valid for 6-months when you go for your biannual check-up. DRM consultations DO NOT get paid from your day-to-day consultation benefits if you remain within the cycles as per your chronic treatment plan. It is advisable to take a copy of your treatment plan to your doctor. If the severity of your condition changes, and you need more tests or additional consultations, your doctor can send a request to <u>chronicregistration@rfmcf.co.za</u> for a clinical review.

How can I preserve my day-to-day benefits?

- Only go to the doctor when it is absolutely necessary.
- Make use of a Network Doctor where possible.
- Register your chronic conditions and follow the cycles accordingly to ensure that services relating to your chronic conditions do not get paid from your day-to-day benefits.
- If you have an existing or new cancer diagnosis, register your treatment on the Oncology Programme to ensure that services relating to your cancer do not get paid from your day-to-day benefits.
- Visit the SAMHS to obtain medical treatment where possible, as services rendered by the SAMHS will not be deducted from your allocated benefits.
- Educate your registered beneficiaries to use the benefits responsibly.
- Educate those close to you (next of kin, friend and family member) to understand the processes and benefits.



Get your flu vaccine

The flu vaccine is now available at your local pharmacy. RFMCF funds one flu vaccine per beneficiary each year. Protecting you and your family against the flu this winter is important. No Buyout or authority is needed for the flu vaccine.

Wellness Tour | 2023 FEEDBACK

The Fund visited three provinces this year, Gauteng, Western Cape and Eastern Cape, and the focus of the event, among other, included:

- ✓ Annual Health Risk Assessments
- ✓ Registration on the Disease Risk Management Programme
- ✓ Designated Service Provider Education
- ✓ Mobi App Assistance
- ✓ Contact Detail Updates
- ✓ Schedule of Benefit Presentation

The turnout was much higher than the previous year; each event was successful. The Fund interacted positively with the members and their dependents who attended the events. Those who could not attend the events must please refer to the Schedule of Benefit videos on the RFMCF website, as the same information was discussed during the events.

Members who could not attend can also do their Health Risk Assessment at their local network pharmacy as part of their benefits following the implementation of the Schedule of Benefits.

NOTE: If you attended the Wellness Day and did your Health Risk Assessment, please note that you will only qualify for your next Health Risk Assessment in 2024.

Thank you to each member who took time out of their day to attend the 2023 Wellness Day.







Use the correct communication channels to ensure that you avoid any unwanted delay in the resolution of your enquiry.

CONTACT US

111 9068

For General Enquiries		
Office hours are between 07h30 and 16h00, Mondays to Fridays, excluding public holidays.		
DEPARTMENT	NUMBER	
Call Centre	012 679 4200	
Pre-Authorisation	012 679 4201	
Claims	012 679 4200	
Chronic Medication Advisory Services	012 679 4200	
Optical Authorizations or Optical enquiries	012 679 4200	

E-mail Addresses

When sending an email to the Fund, ensure that you quote your VPA number in the subject line.

DEPARTMENT	E-MAIL
General Enquiries	info@rfmcf.co.za
Pre-Authorisation	preauth@rfmcf.co.za or Fax: 012
Oncology (Cancer)	oncology@rfmcf.co.za
Escalations	escalations@rfmcf.co.za
Finance	finance@rfmcf.co.za
Membership	membership@rfmcf.co.za
Claims Submissions	claims@rfmcf.co.za
Chronic Medicine Buy-Out	chronic@rfmcf.co.za
Chronic Condition/Medicine Registration (DRM) Programme	chronicregistration@rfmcf.co.za

South African Postal Gervices

The South African Post Office was placed under provisional liquidation this month (April 2023). The Fund has therefore been forced to stop all postal services, including the distribution of ER24 stickers. It is critical that you keep your contact details (cell phone number, email address) up to date with the Fund at all times.

Thank you for taking the time to read the RFMCF Bulletin.