

NEW BENEFITS EFFECTIVE 2021



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NEW BENEFITS EFFECTIVE 01 JANUARY 2021

B1	HOSPITAL BENEFITS GROUP (Subject to clinical risk management protocols and pre-authorization)		799 500 per family	
	Private Hospitals including medicines, materials, hospital apparatus and 7 days take out medication		Part of the Overall Annual limit	
	Provincial Hospitals including medicines, materials, hospital apparatus and 7 days take out medication	100% tariff		
	Step-down Nursing Facilities in lieu of hospitalization			
	GP Consultation, treatment & services Specialist consultations, treatment and services	225% tariff		
	Blood Transfusion	100% tariff		
	Pathology	20070 001111	10 562 per beneficiary	
	Radiology		10 562 per beneficiary	
B2	Internal Medical Prosthesis		39 010 per beneficiary	
	Internal Prosthesis - example: Knee/Hip/Pacemakers. Including intra ocular lenses. Subject to pre-authorization and clinical risk management protocols.	100% cost	Part of the Sub-limit	
B3	MRI/CT Scans (In/Out Hospital)		13 591 per beneficiary	
	In and Out of Hospital Benefit. Subject to pre-approval and Clinical protocols.	100% tariff	Part of the Sub-limit	
B4	Psychiatric Accommodation treatment and services		21 days	
	including Psychiatric Hospital Accommodation, treatment and services. Subject to clinical protocols	100% tariff	Subject to 21 days per beneficiary	
B5	Alcohol and Drug Rehabilitation		23 425 per beneficiary	
DD	Alcohol & Drug Addiction, addiction Therapy, related		25 425 per beneficiary	
	Pathology and medication. (Part of treatment plan protocols) Annual benefit.	100% tariff	Part of the Sub-limit	
	Alcohol & Drug medication	100% NRP	Levy 15% minimum N\$30 maximum N\$60	
B6	Refractive Surgery		20 750 per beneficiary	
	including Eximer Laser and Radial Keratotomy	100% tariff	Part of the Sub-limit	
B7	Maternity		PART OF OAL	
	Hospital Caesarean (Non-Emergency)	100% tariff	Part of the Overall Annual	
	GP and specialist Caesarean(Non-Emergency) (Hospital)	225% tariff	10% co-payment	
	Hospital Confinement/Caesarean (Emergency)	100% tariff		
	GP and Specialist	225% tariff	Part of the Overall Annua	
	GP/Specialists Confinement(In Rooms)	100% tariff	limit	
	Ante Natal Visits	100% tariff	12 visits	
	Maternity scans	100% tariff	3 scans	
B8	Circumcision		PART OF OAL	
	Hospital Circumcision subject to authorisation	100% tariff	Part of the Overall Annual	
	GP and specialists Circumcision(In Hospital)	225% tariff	10% co-payment	
	GP and specialist circumcision done in Rooms	225% tariff	Part of the Overall Annual	
B9	Gastroscopy & Colonoscopy		PART OF OAL	
	Hospital Gastroscopy/Colonoscopy	100% tariff	5% co-payment	
	GP and specialist Gastroscopy/Colonoscopy (Hospital)	225% tariff	5% co-payment	

Disclaimer: The NAMDEB Medical Scheme is registered with NAMFISA and is managed by the Board of Trustees, representative of the members of the Scheme and in terms of the Rules of the Scheme as approved by NAMFISA. The guide is an extract from the Rules and Benefits as a reference guideline only and should there be any discrepancies, misprint and/or interpretation thereof, the Rules as registered with NAMFISA will prevail.

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B10	Renal (Kidney) Dialysis		PART OF OAL
	Hospital Admission Renal/Kidney Dialysis	100% tariff	
	GP and Specialists Kidney Dialysis (Hospital	225% tariff	nort of the OAL
	GP and Specialists Kidney Dialysis (Rooms)	100% tariff	part of the OAL
	Kidney/Organ Medication	100% NRP	
B11	Organ Transplant		PART OF OAL
	GP and Specialists - Organ Transplants (Hospital)	225% tariff	
	GP and Specialists - Organ Transplants (Rooms)	100% tariff	Part of Overall annual limit
	Organ medication	100% NRP	
B12	Oncology Treatment	200/0111	447 965 per beneficiary
	GP and Specialists - Oncology(Hospital)	225% tariff	
	GP and Specialists - Oncology(Rooms)	100% tariff	Part of Overall annual limit
	Chemo Medication	100% tann	
D13		100% NKP	
B13	MVA/Third Party	4000()	362 237 per event
	MVA/Third Party(Hospital)	100% tariff	-
	GP and specialist treatment and services	225% tariff	Part of the event limit
	MVA/Third Party(Rooms)	100% tariff	
	MVA Medication	100% NRP	
B14	Maxillo Facial		45 134 per beneficiary
	Non-Elective Maxillo Facial/Oral Surgery - Trauma.		
	Including		
	Dental extractions of more than 3 teeth or multiple	225% tariff	Part of the sub-limit
	fillings in children under the age of ten and disabled		
	dependants/ Removal of impacted wisdom teeth. (All		
	Inclusive Benefit - surgery, treatment and services). Part		
	of Clinical protocols		
B15	Auxilliary Services		PART OF OAL
	Including Physiotherapy, Biokenetics, Occupational		
	therapy in	100% tariff	Part of the Overall Annual limit
B16	Alternatives Hospital		33 179 per family
DT0		100% to riff	
D17	Frail Care, Private Nursing (home nursing and Hospice	100% tariff	Part of the Sub-limit
B17	Ambulance Services	100% of a st	Stipulated Limits
	Interhospital ambulance transfers	100% of cost	6 260 per beneficiary
	Travel assistance to South Africa		4 170 per beneficiary
	Travel assistance to Namibia on specialist referrals		2 820 per beneficiary
	Accommodation (specialist referral Namibia)		N\$465 per day
	Accommodation (specialist referral South Africa)		N\$598 per day
B18	HIV/AIDS Benefit		153 918 per beneficiary
	Hospital treatment and services	100% of tariff	74 952 pbpa sublimit to B18
		4000/ [NDD	
	HIV/Aids Medication	100% of NRP	62 056 pbpa sublimit to B18
	Counselling	100% of tariff	4 369 pbpa sublimit to B18
	Consultations		12 visita shua sublimit ta D10
	Consultations		12 visits pbpa sublimit to B18
	Radiology & Pathology		12 531 pbpa sublimit to B18
	DAY-TO-DAY BENEFITS		
C1	Professional Services		(M) 13 625 (M1) 19 935 (M2)
01			23 650 (M3) 27 366 (M4) 31 082
			(M5+) 34 799
	GP/Specialist and Primary Health Consultations		
		100% tariff	Part of the Sub-limit
	including Out-patient Visits.		
	GP and specialists and Primary Health care Procedures in	100% tariff	Dout of the Curk Linet
	Rms		Part of the Sub-limit
	Radiology and Pathology	100% tariff	1
C2	Acute Medication		(M) 5 988 (M1) 8 376 (M2) 10 764
			(M3) 13 161 (M4) 14 674 (M5+) 16 205
	Acute medication including Primary Healthcare Scripts		
		1000/ NDD	15% levy minimum N\$30
	- (-R/Spacialist and Primary Health Caro Injections and	100% NRP	
	GP/Specialist and Primary Health Care Injections and		maximum NS65
	Homeopathic medication		maximum N\$65

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			10 375 per beneficiary
	Chronic medication (preferred)	100% NRP	no levy
	Chronic medication (non- preferred)	100% NRP	15% levy minimum N\$30 maximum N\$65
C4	OTC Medication	100% NRP	(M) 967 (M1) 1 289 (M2) 1 611 (M3) 2 506 (M4) 2 577 (M5+) 2 864
C5	External Appliances	· · · · · · · · · · · · · · · · · · ·	10 628 per beneficiary
	General appliances including artificial limbs, eyes, wheelchairs, hearing aids and all approved appliances	100% cost	Part of the Sub-limit
C6	Auxillary Service		4 778 per beneficiary
	Including Physiotherapy, Social Workers, Speech, Audiology, Acousticians, Dieticians, Occupational Therapy, Biokenetics, Hom/ Chiro/ Osteopathy, Podiatry, Acupuncture etc.	100% tariff	Part of the Sub-limit
C7	Psychology		5 629 per beneficiary
	Clinical Psychology	100% tariff	Part of the Sub-limit C7
C8	Psychiatry		5 629 per beneficiary
	Psychiatric treatment	100% tariff	Part of the Sub-limit C8
C8	Dentistry		(M) 6 968 (M1) 11 019 (M2) 11 397 (M3) 16 473 (M4) 17 927 (M5+) 19 718
	Including Conservative dentistry, specialised dentistry and selected maxilllo facial procedures in rooms (orthodontic treatment)	100% tariff	Part of the Sub-limit
С9	Optical Services		4 310 per beneficiary benefit allocat every 2 nd year
	Frames	100% cost	1 405 per beneficiary
	Eye Test	100% tariff	2 eye tests per beneficiary
		100/0 turini	Dent of the Code line it
	Lenses/Contact Lenses Bi-Focal/Multi Focal & Tri-Focal Lenses in addition to the Optical benefit limit	100%	Part of the Sub-limit N\$1,500 per beneficiary
C10			N\$1,500 per beneficiary Napotel Benefit Wallet
C10	Bi-Focal/Multi Focal & Tri-Focal Lenses in addition to the Optical benefit limit	100%	N\$1,500 per beneficiary Napotel Benefit Wallet Difference between the actual day-to- claims excluding chronic benefits and
	Bi-Focal/Multi Focal & Tri-Focal Lenses in addition to the Optical benefit limit	100%	N\$1,500 per beneficiary Napotel Benefit Wallet Difference between the actual day-to- claims excluding chronic benefits and allocated threshold limits (maximum claim limits to qualify) Threshold limits: M0: N\$ 3000 M1: N\$ 4912 M2: N\$ 7342 M3: N\$ 9738 M4: N\$ 11 342
C10	Bi-Focal/Multi Focal & Tri-Focal Lenses in addition to the Optical benefit limit Napotel Benefit Wallet	100%	N\$1,500 per beneficiary Napotel Benefit Wallet Difference between the actual day-to- claims excluding chronic benefits and allocated threshold limits (maximur claim limits to qualify) Threshold limits: M0: N\$ 3000 M1: N\$ 4912 M2: N\$ 7342 M3: N\$ 9738 M4: N\$ 11 342 M5: N\$ 11 682
	Bi-Focal/Multi Focal & Tri-Focal Lenses in addition to the Optical benefit limit Napotel Benefit Wallet Preventative	100% Threshold Limits	N\$1,500 per beneficiary Napotel Benefit Wallet Difference between the actual day-to- claims excluding chronic benefits and allocated threshold limits (maximur claim limits to qualify) Threshold limits: M0: N\$ 3000 M1: N\$ 4912 M2: N\$ 7342 M3: N\$ 9738 M4: N\$ 11 342 M5: N\$ 11 682 Part of the OAL 0 - 6 years 1 per beneficiary
	Bi-Focal/Multi Focal & Tri-Focal Lenses in addition to the Optical benefit limit Napotel Benefit Wallet Preventative Baby Immunisations Cholesterol/Test Blood Sugar(Finger Prick) Mammogram	100% Threshold Limits	N\$1,500 per beneficiary Napotel Benefit Wallet Difference between the actual day-to- claims excluding chronic benefits and allocated threshold limits (maximur claim limits to qualify) Threshold limits: M0: N\$ 3000 M1: N\$ 4912 M2: N\$ 7342 M3: N\$ 9738 M4: N\$ 11 342 M5: N\$ 11 682 Part of the OAL 0 - 6 years 1 per female beneficiary (>40 years)
	Bi-Focal/Multi Focal & Tri-Focal Lenses in addition to the Optical benefit limit Napotel Benefit Wallet Preventative Baby Immunisations Cholesterol/Test Blood Sugar(Finger Prick) Mammogram DEXA Bone Density scan)	100% Threshold Limits 100% NRP	N\$1,500 per beneficiary Napotel Benefit Wallet Difference between the actual day-to- claims excluding chronic benefits and allocated threshold limits (maximur claim limits to qualify) Threshold limits: M0: N\$ 3000 M1: N\$ 4912 M2: N\$ 7342 M3: N\$ 9738 M4: N\$ 11 342 M5: N\$ 11 682 Part of the OAL 0 - 6 years 1 per beneficiary 1 per female beneficiary (>40 years) 1 per beneficiary (>50 years)
	Bi-Focal/Multi Focal & Tri-Focal Lenses in addition to the Optical benefit limit Napotel Benefit Wallet Preventative Baby Immunisations Cholesterol/Test Blood Sugar(Finger Prick) Mammogram DEXA Bone Density scan) Pap Smear	100% Threshold Limits	N\$1,500 per beneficiaryNapotel Benefit WalletDifference between the actual day-to- claims excluding chronic benefits and allocated threshold limits (maximur claim limits to qualify)Threshold limits: M0: N\$ 3000 M1: N\$ 4912 M2: N\$ 7342 M3: N\$ 9738 M4: N\$ 11 342 M5: N\$ 11 682Part of the OAL0 - 6 years 1 per beneficiary1 per female beneficiary (>40 years) 1 per female beneficiary (>15 years)
	Bi-Focal/Multi Focal & Tri-Focal Lenses in addition to the Optical benefit limit Napotel Benefit Wallet Preventative Baby Immunisations Cholesterol/Test Blood Sugar(Finger Prick) Mammogram DEXA Bone Density scan) Pap Smear Glaucoma Screening	100% Threshold Limits 100% NRP	N\$1,500 per beneficiary Napotel Benefit Wallet Difference between the actual day-to-claims excluding chronic benefits and allocated threshold limits (maximur claim limits to qualify) Threshold limits: M0: N\$ 3000 M1: N\$ 4912 M2: N\$ 7342 M3: N\$ 9738 M4: N\$ 11 342 M5: N\$ 11 682 Part of the OAL 0 - 6 years 1 per beneficiary 1 per female beneficiary (>40 years) 1 per beneficiary (>50 years) 1 per beneficiary (>40 years)
	Bi-Focal/Multi Focal & Tri-Focal Lenses in addition to the Optical benefit limit Napotel Benefit Wallet Preventative Baby Immunisations Cholesterol/Test Blood Sugar(Finger Prick) Mammogram DEXA Bone Density scan) Pap Smear Glaucoma Screening Prostate Screening	100% Threshold Limits 100% NRP	N\$1,500 per beneficiaryNapotel Benefit WalletDifference between the actual day-to- claims excluding chronic benefits and allocated threshold limits (maximur claim limits to qualify)Threshold limits: M0: N\$ 3000 M1: N\$ 4912 M2: N\$ 7342 M3: N\$ 9738 M4: N\$ 11 342 M5: N\$ 11 682Part of the OAL0 - 6 years 1 per beneficiary1 per female beneficiary (>40 years) 1 per female beneficiary (>15 years)
	Bi-Focal/Multi Focal & Tri-Focal Lenses in addition to the Optical benefit limit Napotel Benefit Wallet Preventative Baby Immunisations Cholesterol/Test Blood Sugar(Finger Prick) Mammogram DEXA Bone Density scan) Pap Smear Glaucoma Screening	100% Threshold Limits 100% NRP	N\$1,500 per beneficiary Napotel Benefit Wallet Difference between the actual day-to- claims excluding chronic benefits and allocated threshold limits (maximur claim limits to qualify) Threshold limits: M0: N\$ 3000 M1: N\$ 4912 M2: N\$ 7342 M3: N\$ 9738 M4: N\$ 11 342 M5: N\$ 11 682 Part of the OAL 0 - 6 years 1 per beneficiary 1 per female beneficiary (>40 years) 1 per male beneficiary (>40 years) 1 per male beneficiary (>40 years)

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