



# NAPOTEL

## MEDICAL AID FUND

Affordable and quality health insurance for employer groups



## NEWSLETTER MAY 2016

## TOPICS FOR DISCUSSION:

1. 2016 New Amended Benefit Rules
2. Fund registered chronic list
3. Add-On Benefits
4. Overage Dependents
5. Fund Annual Calendar

## 1. NEW BENEFIT RULES CHANGES EFFECTIVE 01 JANUARY 2016

Effective 01 January 2016, new benefit rules has been implemented on the following benefits and procedures:

- 1.1 Maternity Benefits: Caesarean Sections
- 1.2 In-Hospital Circumcisions
- 1.3 Chronic Formulary list

### 1.1 CAESAREAN SECTIONS

Effective 01 January, as part of the new benefit rules changes a 10% member co-payment will be applicable on all elective caesarean-sections. All caesareans done due to an emergency or the medical condition of the member will be paid as per the current Fund Rules which is 225% of the Fund tariff.

#### CAESAREAN SECTIONS FOR 2016 AS FOLLOWS:

No	Specialty	Fund Cover
1	GP & Specialist Cost for Caesarean Sections: Includes General Practitioners, Specialist, Assistants & Anaesthetist	<p>1.1. Caesareans Sections done as a results of a medical emergency or medical condition of the member / dependent will be covered as follows:</p> <p>GP &amp; Specialist cost will be covered at 225% of Fund Tariffs</p> <p>1.2 Elective Caesareans Sections, in an event where the c-section is done, but not due to an emergency or medical condition of the main member:</p> <p><b>A 10% member co-payment will apply on the total GP &amp; Specialist cost</b></p>



NB: Members are hereby reminded, that all In-Hospital Treatment & Procedures need to be pre-authorized before admittance, and to take note that the Pre-authorization number will be issued on all Caesarean Sections. Members are advised to submit quotes for all planned procedures to enable the Fund to inform them of additional costs and out of pocket expenses.

## 1.2 CIRCUMCISIONS

Effective 01 January 2016, circumcisions will be covered as follows on the Fund:

### 1.2.1 In-Hospital Circumcisions

- As part of the new benefit rule changes, a 10% member co-payment will be applied to the GP & Specialist cost of all circumcisions done in Hospital.
- The 10% member co-payment will only be applicable on the GP & Specialist cost and not the Hospital Fees

### 1.2.2 Out of Hospital (In-Rooms Circumcisions)

- GP & Specialist In Rooms procedures cost for circumcisions will be covered at 225% of the Fund Tariff.
- The Fund Tariff for GP & Specialist for circumcisions has been increased from 100% to 225% for 2016, when done out of Hospital.

**NB: Please take note that the 10% member co-payment will only apply on circumcisions done in Hospital.**

## 1.3 NEW CHRONIC FORMULARY



Effective 01 January the Fund introduced a new formulary and non formulary chronic medicine list, which offers members an option to receive their monthly chronic medicine at a 0% co-payment.

### 1.3.1 What is Formulary and Non-Formulary Medicine List?

- **Formulary Medicine**  
It is a list of chronic medicine covered 100% of cost by the Fund, and a member will not carry any co-payment or levies if they receive this Medicine.
- **Non-Formulary Medicine**  
Chronic medicine not listed on the formulary list, is covered at 80% and the 20% co-payment or levy is carried by the member.

### 1.3.2 How will I know if my chronic medicine is Formulary or Non-Formulary?

All current registered chronic members have been issued with a chronic confirmation letter stipulating the chronic medicine registered for 2016, and if the registered medicine is formulary or non formulary and the % levy applicable. (Example of chronic letter issued to member is attached on page 3). Members that have not received the letter can obtain a copy from the Napotel Office.

### 1.3.3 Is it a must that a member should use medicine on the Formulary list?

It is important to note that the Fund will continue to cover both the formulary and non formulary chronic medicine, and only provides members with an option for a lower out of pocket expense (Levy) by using the formulary medicine. However, it is the ultimate choice of the member which medicine to use.

### 1.3.4 Where is the formulary list available?

The formulary list is available on the following website:  
www.prosperityhealth.com.na

Alternatively members can contact any Prosperity health office for assistance.

### 1.3.5 How do I access the formulary List?

To assist members in gathering information on available formulary medication, the Fund introduced a “formulary look-up” for members that have access to internet. Members with no internet access are requested to contact the nearest Prosperity Health office for assistance.

Steps to access the formulary look-up:

- Visit Prosperity Health webpage on: www.prosperityhealth.com
- Click on Formulary Lookup
- Click on Napotel Formulary Lookup
- Click on Option and select Napotel
- Select search option: Two options available for “look up” by medication or diagnoses
- Depending on the look up choice insert diagnoses or product in the search column
- Click on submit and access formulary list

## 2. REGISTERED FUND CHRONIC LIST

The following conditions as listed below are the Fund’s registered chronic diseases.

Attention Deficit Hyperactivity Disorder (ADHD in children)	Alzheimer’s Disease	Bipolar Mood Disorder
Epilepsy	Chronic Depression	Motor Neuron disease
Obsessive Compulsive Disorder	Narcolepsy	Parkinson’s disease
Arrhythmias	Schizophrenia	Cardiomyopathy
Coronary Artery Disease (CAD)	Congestive Cardiac Failure (CCF)	Hyperlipidemia
Cushing’s disease	Hypertension	Pituitary Micro adenomas
Addison’s disease	Asthma	Ankylosing spondylitis
Diabetes Insipidus	Allergic Rhinitis	Autoimmune diseases eg Scleroderma
Diabetes Mellitus	Bronchiectasis	Gout
Hypothyroidism	Chronic Obstructive Pulmonary Disease (COPD)	Osteoarthritis
Menopause/Hormone replacement therapy (HRT)	Pulmonary Interstitial fibrosis	Osteoporosis
Rheumatoid Arthritis (RA)	Paget’s disease	

## 3. ADD-ON BENEFITS

Members are hereby notified that all Add-on benefits taken out in 2015 were terminated on 31 December 2015. No Add-On Benefits was carried over to 2016 financial year.

Members who wish to continue with their add-on benefits for 2016 are urged to re-apply by submitting new application forms to the Napotel Office

## 4. OVER AGE DEPENDANTS

In terms of the rules of the Napotel Medical Fund, a member’s child over 21 years but not over the age of 25 years is entitled to remain as a dependant of a member of the Fund, under the following conditions.

- A full time student at a registered institution until such a student reaches the maximum age of 25.

### 4.1 Documentation to be submitted as proof:

- Student from 21 – 25 years – proof of full time studies for 2016.

**NB: Members are hereby notified that all dependants (students) that the Fund did not receive proof of study as requested before 31 March 2016, have been terminated on the Fund, and will not be able to access any medical services**

## 5. 2016 FUND ANNUAL CALENDAR

5.1. Ex-Gratia Meeting dates:

- 11 February 2016
- 28 April 2016
- 30 June 2016
- 31 August 2016
- 06 October 2016
- 01 Dec 2016

### 5.2 Board of Trustees Meetings

- 25 February 2016
- 24 May 2016
- 03 June 2016
- 14 August 2016
- 27 October 2016

### 5.3 Annual General Meeting (AGM)

- 20 June 2016
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The medicine application has been received and reviewed according to current medical fund rules.

The authorisation is subject to a formulary/medicine list which can be viewed at [www.prosperityhealth.com](http://www.prosperityhealth.com). Please refer to your medical fund brochure for information on the different benefits, service providers and co-payments applicable.

**Herewith the outcome of your application:**

**ASTHMA** **24/02/2014 - Ongoing**

Medicines (Incl. Generic Alternatives)	Qty		Allocated Benefit
SERETIDE 50/500 ACCUHALER	1	01/01/2016 - Ongoing	Chronic (15% co-pay)

Generic alternatives below the reference price:

# FOXAIR 50/500 ACCUHALER 60D

**DIABETES MELLITUS TYPE II** **14/11/2014 - Ongoing**

Medicines (Incl. Generic Alternatives)	Qty		Allocated Benefit
GLUCOPHAGE 1000MG TABS	60	01/01/2016 - Ongoing	Chronic
ONE TOUCH SELECT METER KIT	1	14/11/2014 - 14/11/2017	External Appliances

**HYPERTENSION** **04/12/2008 - Ongoing**

Medicines (Incl. Generic Alternatives)	Qty		Allocated Benefit
BEURER BM16 BP UPPER ARM	1	22/05/2014 - 22/05/2017	External Appliances
CO-MICARDIS 80/12.5MG TABS	30	01/01/2016 - Ongoing	Chronic (15% co-pay)

Generic alternatives below the reference price:

# CO-PRITOR 80/12.5MG TABS

**ALLERGIC RHINITIS** **29/01/2015 - 31/01/2020**

You have been registered for the above condition. Selected medicines within the formulary will be covered automatically. Please refer to the formulary for products that need special authorisation.

**ADDITIONAL INFORMATION:**

**Namibia Reference Price (NRP) is applicable to your medicines.** NRP sets a maximum reimbursable price for a list of generically similar products with a cost lower than that of the original medicine. This means that if you select to use the original product for which a generic alternative is available or a generic alternative above NRP, you will have to pay the difference between the price of the chosen medicine and that of NRP. This is applicable to both formulary and non-formulary medicines. We encourage the use of generically similar medicines in the interest of cost-effective care. **To avoid this co-payment please ask your healthcare provider for a generic alternative below the NRP price.**

**Renewal of authorisation:**

No application forms need to be completed. Your doctor or pharmacist can obtain telephonic authorisation on your behalf by contacting the ChroniLine pharmacists on 061 299-9991. Alternatively you can fax your prescription to 0886 30469 or

email us at [preauth@na.prosperityhealth.com](mailto:preauth@na.prosperityhealth.com).

**Notes:**

Medicines not on the formulary may still be obtained from your acute benefit unless otherwise stated and is subject to the availability of funds.

**Disclaimer:**

Please note that the benefit details provided above are correct at the time of printing. Any changes to your membership, status, plan selection, chronic authorisation or the funds clinical policies and guidelines may affect your benefits.

Yours in health  
Mediscor ChroniLine®

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Prosperity Life

[www.prosperityhealth.com](http://www.prosperityhealth.com)



Prosperity Health Member Mobile App  
for your benefits & claims.

Administered by  Prosperity Health

[www.prosperityhealth.com](http://www.prosperityhealth.com)