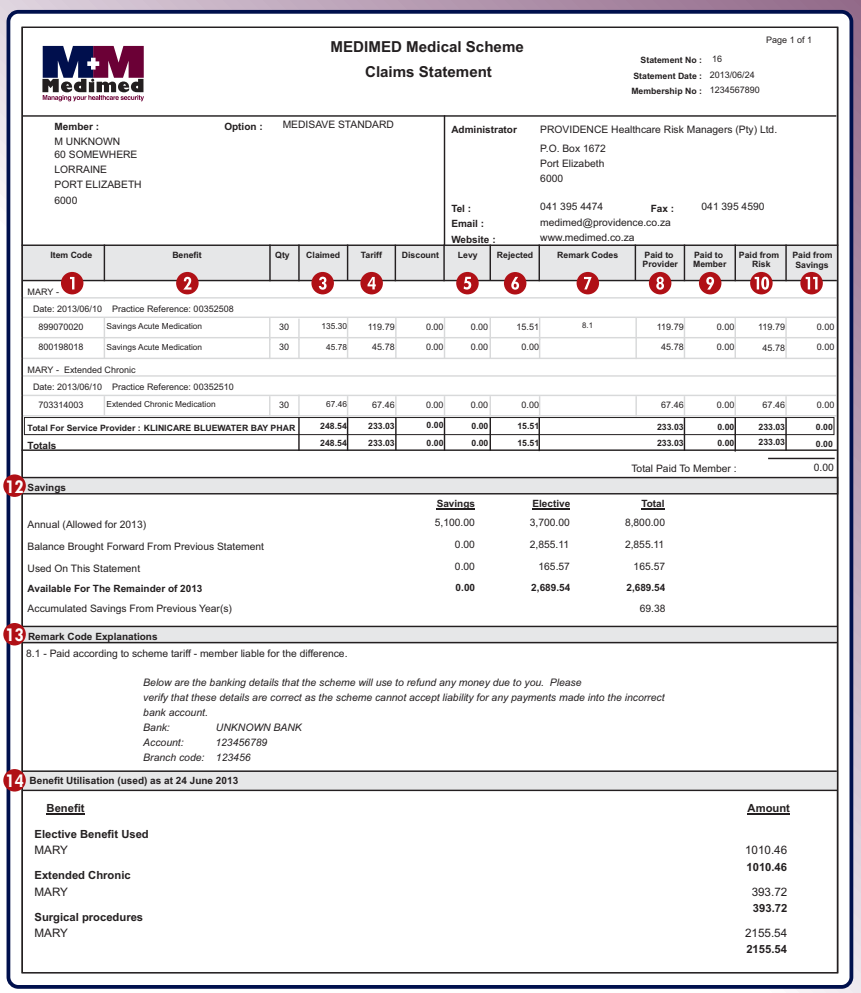
Understanding your Claims Statement



MEDIMED Medical Scheme
Claims Statement

Page 1 of 1

Statement No : 16
Statement Date : 2013/06/24
Membership No : 1234567890

Member :
M UNKNOWN
60 SOMEWHERE
LORRAINE
PORT ELIZABETH
6000

Option : MEDISAVE STANDARD

Administrator PROVIDENCE Healthcare Risk Managers (Pty) Ltd.
P.O. Box 1672
Port Elizabeth
6000

Tel : 041 395 4474 Fax : 041 395 4590
Email : medimed@providence.co.za
Website : www.medimed.co.za

Item Code (1)	Benefit (2)	Qty	Claimed (3)	Tariff (4)	Discount	Levy (5)	Rejected (6)	Remark Codes (7)	Paid to Provider (8)	Paid to Member (9)	Paid from Risk (10)	Paid from Savings (11)
MARY -												
Date: 2013/06/10 Practice Reference: 00352508												
899070020	Savings Acute Medication	30	135.30	119.79	0.00	0.00	15.51	8.1	119.79	0.00	119.79	0.00
800198018	Savings Acute Medication	30	45.78	45.78	0.00	0.00	0.00		45.78	0.00	45.78	0.00
MARY - Extended Chronic												
Date: 2013/06/10 Practice Reference: 00352510												
703314003	Extended Chronic Medication	30	67.46	67.46	0.00	0.00	0.00		67.46	0.00	67.46	0.00
Total For Service Provider : KLINICARE BLUEWATER BAY PHAR			**248.54**	**233.03**	**0.00**	**0.00**	**15.51**		**233.03**	**0.00**	**233.03**	**0.00**
Totals			**248.54**	**233.03**	**0.00**	**0.00**	**15.51**		**233.03**	**0.00**	**233.03**	**0.00**

Total Paid To Member : 0.00

(12) Savings

	Savings	Elective	Total
Annual (Allowed for 2013)	5,100.00	3,700.00	8,800.00
Balance Brought Forward From Previous Statement	0.00	2,855.11	2,855.11
Used On This Statement	0.00	165.57	165.57
Available For The Remainder of 2013	**0.00**	**2,689.54**	**2,689.54**
Accumulated Savings From Previous Year(s)			69.38

(13) Remark Code Explanations

8.1 - Paid according to scheme tariff - member liable for the difference.

Below are the banking details that the scheme will use to refund any money due to you. Please verify that these details are correct as the scheme cannot accept liability for any payments made into the incorrect bank account.
Bank: UNKNOWN BANK
Account: 123456789
Branch code: 123456

(14) Benefit Utilisation (used) as at 24 June 2013

Benefit	Amount
Elective Benefit Used	
MARY	1010.46
	1010.46
Extended Chronic	
MARY	393.72
	393.72
Surgical procedures	
MARY	2155.54
	2155.54

(1) ITEM CODE
This is the code used by the service provider and Medimed to identify the services rendered or medication dispensed.

(2) BENEFIT
This refers to the benefit category against which the claim has been processed. It is important to verify that claims were paid from the correct benefit e.g. that your chronic medication is paid from the chronic medication benefit and not the acute medication benefit.

(3) CLAIMED
This is the amount that the service provider claimed for services rendered or medication dispensed.

(4) TARIFF
Medimed pays claims in accordance with the Medimed Scheme Tariff. This column indicates the Medimed Scheme Tariff. If the amount in the "**CLAIMED**" column is greater than the "**TARIFF**" column, you, as the member, will be liable for paying the difference to the service provider. It is therefore important to establish and possibly negotiate, what your service provider charges, prior to receiving the service.

(5) LEVY
Some benefits are paid up to a percentage of the tariff amount, the balance being the member levy. The levy amount reflects the amount of the Medimed Scheme Tariff for which the member is liable.

(6) REJECTED
This indicates the amount rejected by Medimed. Possible reasons for rejected amounts can include amounts for which Medimed is not liable such as when the benefit limit has been reached, the services rendered or item dispensed is a Scheme exclusion or the amount charged is above the Medimed Scheme Tariff.

(7) REMARK CODES
This gives the reason for the rejection. This code is explained under (13) "**REMARK CODE EXPLANATIONS**".

(8) PAID TO PROVIDER
This is the amount paid to the service provider. Payments to providers occur on a weekly basis.

(9) PAID TO MEMBER
This is the amount refunded to the member where the member has paid the service provider. The funds will be transferred electronically into the member's bank account if Medimed has banking details on our system. Refunds to members occur on a weekly basis.

(10) PAID FROM RISK
This provides an indication of claims not paid from the savings account. Amounts in this column were either paid from the Elective Benefit or from the Scheme Risk as in the case of hospital claims or authorised chronic medication.

(11) PAID FROM SAVINGS
This provides an indication of claims paid from the member's savings account.

(12) SAVINGS
This provides an overview of the member's savings account and Elective Benefit. It furthermore provides an indication of funds available as at the date of the claims statement. "**Annual (Allowed for <year>)**" indicates the total amount – Savings- and Elective Benefits, available for the current year. This specifies the total amount available for the out of hospital expenses for the year and assists the member to plan future healthcare expenses. "**Balance Brought Forward From Previous Statement**" will correspond with the amount under "**Available For The Remainder of <year>**" on the previous statement. "**Available For The Remainder of <year>**" indicates the amount available for out of hospital expenses after all claims for the current year have been paid as at the date of the payment run. "**Accumulated Savings From Previous Year(s)**" refers to the savings left from previous years, which can be used to pay for medical expenses not covered in terms of the Scheme rules for the current year. Please note that the Elective Benefit cannot be carried forward and this amount will therefore only reflect unused savings from previous years.

(13) REMARK CODE EXPLANATIONS
These codes provide explanations for the rejections indicated under column (7) "**REMARK CODES**". The principal member's banking details are also indicated here. This is the bank account Medimed will use to refund any money due to the member. It is therefore important to verify that these details are correct to ensure that refunds are paid into the correct bank account.

(14) BENEFIT UTILISATION (USED) AS AT <STATEMENT DATE>
This provides an indication of the benefits paid under column (10) "**PAID FROM RISK**".