

# CompCare

## Medical Scheme

Scan to sign up now  
OR  
SMS 'youth' to  
32673 if you're keen  
to find out more



# 2025 Umbono

Medical aid for international students

/ **Plus**

From only

# R565

Per Month  
(2025 rates)



UNLIMITED  
hospitalisation



UNLIMITED  
doctor visits



Excellent OUT-  
OF-HOSPITAL  
benefits



EMERGENCY  
ASSISTANCE,  
including airlifts



PLAYING SPORT?  
We've got you  
covered



RADIOLOGY,  
chest x-ray for  
Visa purposes



REPATRIATION  
COVER  
via Universal  
Rewards



PREVENTATIVE  
CARE BENEFITS  
to the value of  
R6 000

# #Get healthy

0860 735 363

student@universal.co.za

Administered by



Universal™

CompCare Medical Scheme is administered by  
Universal Healthcare Administrators (Pty) Ltd.



# CompCare Umbono Plus Option | 2025

## In-hospital benefits

Overall Annual Limit (OAL)

## Services covered in hospital

100% of the agreed tariff (AT), subject to pre-authorisation and Network DSP hospitals. All treatment in hospital is subject to case management and scheme protocols

- 100% of the agreed tariff (AT), unlimited, subject to pre-authorisation and scheme protocols.
- Specialists are paid at 100% of the Scheme rate.

- GPs and specialists
- Ward fees – general, ICU and high care
- Theatre fees
- Medication while in hospital
- Blood transfusions
- Oncology
- Surgical prostheses (unlimited for PMBs)
- Clinical technologists limited to **R12 000**
- Radiology – MR and CT scans
- Pathology
- Confinements
- Psychiatric treatment – subject to pre-authorisation and protocols (unlimited for PMBs)
- Organ and bone marrow transplants, plasmapheresis and renal dialysis (unlimited for PMBs)
- Cover for injuries sustained whilst participating in professional and adventure sports
- Emergency medical treatment for injuries resulting from accidents or trauma
- Physiotherapy – limited to **R3 100** per member family. Combined auxiliary services limit in and out of hospital
- Alcoholism, drug dependence and narcotism

## Cover for chronic conditions

32 chronic conditions covered  
Chronic medication is subject to the Core Formulary list of medicines and a Formulary reference price (FRP).  
Members are required to register for all chronic conditions

- Chronic medication is unlimited, subject to medicine formulary and if prescribed by a Universal Network Provider and dispensed within a Universal Network pharmacy or by a dispensing Universal Network GP. Any voluntary use of chronic medicine prescribed by an out-of-network provider and any non-formulary medicines are for the member's own account, unless pre-authorised by the medical advisor. (PMB rules apply)
- Subject to formulary reference pricing

## Unlimited day-to-day services

Not subject to the Annual Flexi Benefit (AFB)

Services subject to the use of the Universal Provider Network

- GPs
  - In-Network: Unlimited.
  - Pre-authorisation may be required after the 4th visit.
  - Virtual consultations unlimited at participating providers
  - Out-of-Network: 2 visits PB.
  - Limited to **R2 000** per event including medicines, pathology, radiology (all related costs).
  - A 20% co-payment applies. Member to pay at point of service and claim back from the Scheme
- Acute medication – unlimited if prescribed by a Universal Network GP, or by a specialist provided member referred by a Universal Network GP. Subject to formulary. A 25% co-payment will apply if medicine is not on the formulary. No cover for non-formulary medicines unless otherwise pre-authorised. No cover in case of voluntary use of non-Universal providers, or voluntary use of specialist without referral by a Universal Network GP
- Basic radiology: Unlimited subject to Universal Care approved codes. Referral from a Network GP required
- Basic pathology: Unlimited subject to Universal Care approved codes and managed care protocols. Referral from a Network GP required

## Day-to-day services paid from the Annual Flexi Benefit (AFB) at 100% of the agreed tariff

AFB – **R3 900** per beneficiary per year  
**R5 800** per family per year

- Specialist consultations – Subject to referral from a Universal Care Network GP. Limited to 2 visits per beneficiary and 3 visits PMF per year. Subject to AFB. Once benefit is depleted, PMB rules apply
- Basic dentistry – limited to one consultation per beneficiary including preventative care, infection control, fillings, extractions and dental X-rays at a Universal Network dentist – **R2 000** per beneficiary up to **R3 440** per family, subject to AFB
- Optometry – limited to one test per beneficiary every 24 months. Benefit for glasses with frame or contact lenses every 24 months. Lenses – clear plastic lenses for single vision and frames limited to **R1 150** per beneficiary. Bi-focals and frames limited to **R1 800** per beneficiary at a Universal Network optometrist, subject to AFB
- Out of hospital physiotherapy limited to **R3 100** PMF (paid from risk). This forms part of the in and out of hospital auxiliary benefit limit of **R3 100**.
- Hospital emergency room/casualty emergency visits for non-emergency consultations

## Wellness: Lifestyle and preventative care

Paid from risk

- Blood pressure, blood sugar, cholesterol, BMI and waist circumference – one measurement per beneficiary over the age of 18 years. Limited to **R280** per event
- Flu vaccinations – one vaccination per beneficiary
- Unlimited telephonic counselling sessions through the Universal Wellness Care Centre, with an option for referral to one-on-one sessions with qualified psychologists, social workers or registered counsellors to a maximum of 3 referral sessions PB per year
- Oral contraceptives limited to **R190** per beneficiary per month. Subject to medication formulary
- **Pap smear:** One per female beneficiary over the age of 18 per year
- **Mammogram:** One per female beneficiary over the age of 35 every second year
- **Prostate-specific antigen (PSA) blood test:** One test per male beneficiary over the age of 40 per year

To register for affordable membership, please click on [www.studentplan.co.za](http://www.studentplan.co.za) to renew your membership or join online!

This summary is for information purposes only and does not supersede the rules of the Scheme. In the event of a discrepancy between the summary and the rules, the rules will prevail. On joining the scheme, all members will receive a detailed member brochure, as approved. The final registered rules of the scheme will apply. This is subject to approval by the Council for Medical Schemes.

\*Terms and conditions apply