

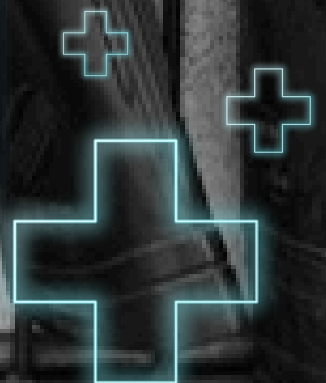


Plat

Freedom

2026

Effective 1 January 2026



Our Vision, Mission & Values

Vision

To provide appropriate healthcare of high quality, cost-efficiently, which will obtain the approval of all stakeholders.

Mission

- To satisfy member and patient expectations on access, care, and outcomes.
- To fulfil participating employer, member, employee and statutory requirements on affordability and profitability.
- To distinguish PHMS as an industry and sector centre of excellence.
- To leave no room for abuse, misuse, or fraud.

Values



Care



Affordability



Accessibility



Accountability



Equity



Ethical



Efficiency



Agility



Platinum Health Abbreviations

AIDS	Acquired Immunodeficiency Syndrome
CDL	Chronic Disease List
CDRP list	Chronic Disease Reference Price List
CMRP list	Chronic Medication Reference Price List
Copper IUD	Copper Intrauterine Device
CPAP	Continuous Positive Airway Pressure
CT Scan	Computed Tomography Scan
DSP	Designated Service Provider
DTP	Diagnosis and Treatment Pairs
GP	General Practitioner
HIV	Human Immunodeficiency Virus
HPV	Human Papillomavirus Infection
LNG-IUD	Levonorgestrel Intrauterine Device
MMAF	Maximum Medical Aid Price
MRI Scan	Magnetic Resonance Imaging scan
OAL	Overall Annual Limit
OTC	Over The Counter
PAT	Pharmacist Advised Therapy
PB	Per Beneficiary
PET Scan	Positron Emission Tomography scan
PHRPL	Platinum Health Reference Price Listing
PlatCap Formulary	List of medicine inclusive of all classes on a reference price
PMB	Prescribed minimum benefits
PMF	Per Member Family
PSA	Prostate-specific antigen
RSA	Republic of South Africa
RSA	South African Optometry Association
RSV	Respiratory Syncytial Virus Vaccine
SAOA	South African Optometry Association

Platinum Health Abbreviations

Scheme tariff	The rate or amount which the Scheme pays for health services or procedures.
Scheme Formulary	List of medicine inclusive of all classes on a reference price.
SEP	Single Exit Price
TRP List	Therapeutic Reference Price list
Medication TTO	Medication To-Take-Out

PlatFreedom Option

Benefits for 2026

PlatFreedom offers members complete freedom of choice to see service providers they prefer; however, members will be liable for the full cost once the limit is reached. PlatFreedom's benefit offering has been enhanced as all benefits are no longer linked to the Overall Annual Limit (OAL), only the in-hospital and selected benefits (*) are now subject to OAL of R1 221 241 per member family.

Hospitalisation is subject to the OAL at 100% of the lower of cost or Scheme rate and authorisation must be obtained from the Scheme in all instances. There is a limit on Acute medication inclusive of the over-the-counter (OTC) benefit. Prescribed Minimum Benefits (PMBs), as required by the Medical Schemes Act, are covered both in-and-out of hospital at 100% of cost/negotiated tariff; subject to services rendered by a public hospital or the Scheme's DSPs at cost and no levy or co-payment shall apply.

PlatFreedom Option

Benefits for 2026

BENEFIT		RATE	LIMIT	AUTHORISATION
	Overall Annual Limit (OAL)		<ul style="list-style-type: none"> • R1,221,241 per member family. Only In-hospital treatment and * selected benefits will be subject to the Overall Annual Limit (OAL) 	Subject to managed care protocol and processes
A	ALTERNATIVE HEALTHCARE			
1	Homeopathic consultations and medicine only	80% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • R9 474 per member family 	Subject to managed care protocol and processes
B	AMBULANCE SERVICE			
1		100% if authorised by preferred provider	<ul style="list-style-type: none"> • * Subject to OAL 	Subject to approval by preferred provider
C	APPLIANCES, EXTERNAL ACCESSORIES AND ORTHOTICS			
1	General medical and surgical appliances and appliance repairs	100% of the lower of cost or negotiated Scheme rate	<ul style="list-style-type: none"> • R23 119 per member family (Appliances limit) 	
2	CPAP (Continuous Positive Airway Pressure)		<ul style="list-style-type: none"> • Subject to the Appliances limit 	
3	Glucometers		<ul style="list-style-type: none"> • R1 379 per beneficiary, included in the Appliances limit 	
4	Peak flow meters		<ul style="list-style-type: none"> • R593 per beneficiary, included in the Appliances limit 	
5	Nebulisers		<ul style="list-style-type: none"> • R1 585 per beneficiary, included in the Appliances limit 	
6	Foot orthotics		<ul style="list-style-type: none"> • R5 863 per beneficiary, included in the Appliances limit 	
7	Keratoconus contact lenses		<ul style="list-style-type: none"> • Subject to the Appliances limit 	Authorisation required
8	Oxygen therapy and home ventilators		<ul style="list-style-type: none"> • * Subject to OAL 	Authorisation required Subject to managed care protocol and processes
9	Incontinence products	100% of the lower of cost or negotiated fee	<ul style="list-style-type: none"> • * Subject to OAL 	Authorisation required

PlatFreedom Option

Benefits for 2026

	BENEFIT	RATE	LIMIT	AUTHORISATION
D	BLOOD, BLOOD EQUIVALENTS AND BLOOD PRODUCTS			
1		100% of negotiated fee	<ul style="list-style-type: none"> * Subject to OAL 	Authorisation required
E	CONSULTATIONS AND VISITS - GENERAL PRACTITIONERS AND MEDICAL SPECIALISTS			
1	In-hospital	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> Subject to OAL. Excludes visits for alternative healthcare, dental, maternity, mental health, oncology, additional medical services and physiotherapy. 	
	Out-of-hospital	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> M0: R6 865 M1: R10 297 M2: R13 717 M3+: R17 161 Excludes visits for alternative healthcare, dental, maternity, mental health, oncology, additional medical services, and physiotherapy. 	
F	DENTISTRY			
1	Basic: Includes basic dentistry performed in-hospital for children under eight (8) and for removal of impacted wisdom teeth	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> R16 800 per member family 	Authorisation required for all dental treatment in-hospital. Subject to managed care protocol and processes
2	Advanced: Oral surgery, plastic/metal base dentures, inlays, crowns, bridges, study models, orthodontics, periodontics, prosthodontics, Osseo integrated implants, orthognathic surgery and dental technician fees	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> R17 391 per member family Dentures shall be limited to one set every three years from anniversary of claiming PB. Subject to benefit limit. Orthodontic treatment benefit limited to patients under 21 years. 	Authorisation required for advanced dentistry and conscious sedation treatment which is subject to managed care protocol and processes
G	HOSPITALISATION			
1	Accommodation in a general ward, highcare ward and intensive care unit, theatre fees, ward drugs and surgical items	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> Subject to OAL 	Authorisation required

PlatFreedom Option

Benefits for 2026

	BENEFIT	RATE	LIMIT	AUTHORISATION
H	ALTERNATIVES TO HOSPITALISATION			
1	Physical rehabilitation facilities, hospice, nursing services and sub-acute facilities	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • R92 882 per member family • Subject to OAL 	Authorisation required Subject to managed care protocol and processes
I	IMMUNODEFICIENCY SYNDROME (HIV/AIDS)			
1		100% of cost		Authorisation required
J	INFERTILITY			
1		100% of the lower of cost or negotiated fee for public hospitals	<ul style="list-style-type: none"> • Limited to interventions and investigations as prescribed by the regulations to the Medical Scheme Act 	Authorisation required
K	MATERNITY			
1	<p>Hospital: Accommodation, theatre fees, labour ward fees, dressings, medicines, and materials</p> <p>Note: For confinement in a registered birthing unit or out-of-hospital, four (4) postnatal midwife consultations for a family each year</p>	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • Subject to OAL 	Authorisation required Subject to managed care protocols and processes
2	Related maternity services: 12 antenatal consultations, two (2) 2D scans, pregnancy related tests and procedures	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • R10 830 per member family, 3D scan paid up to cost of 2D scan 	
3	Amniocentesis	80% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • R10 900 per member family and further limited to one test for a family each year 	

PlatFreedom Option

Benefits for 2026

BENEFIT		RATE	LIMIT	AUTHORISATION
L	MEDICINE AND INJECTION MATERIAL			
1	Acute medicine: including malaria prophylactics	100% of the approved price	<ul style="list-style-type: none"> • M0: R6 889 • M+1: R11 965 • M+2: R15 952 • M3+: R18 490 • (Acute Medicine limit) 	Refer to general Scheme exclusions
2	Medicine on discharge from hospital	100% of the approved price	<ul style="list-style-type: none"> • R617 per beneficiary per admission, included in the Acute Medicine limit 	Refer to general Scheme exclusions
3	Over-the-counter medicine	100% of the approved price	<ul style="list-style-type: none"> • R2 055 per member family, maximum R509, maximum of 2 items per script. • Included in the Acute Medicine limit 	Refer to general Scheme exclusions
4	Chronic medicine	<p>Chronic Disease List Conditions Up to 100% of Scheme rate for approved chronic medicine on the medicine list (formulary) Up to 80% of MMAP for approved chronic medicine not on the medicine list (formulary)</p> <p>Additional Disease List Conditions Up to 100% of MMAP for approved chronic medicine</p>	<ul style="list-style-type: none"> • * Subject to OAL 	<p>Authorisation required</p> <p>Subject to registration on the Chronic medication programme</p> <p>Subject to managed care protocol and processes</p> <p>Refer to general Scheme exclusions</p>
5	Contraceptive benefits: Oral, injectable, patches, rings, devices and implants.	100% of the approved price	<ul style="list-style-type: none"> • * Subject to OAL 	Only if prescribed for contraception (not approved for skin conditions)

PlatFreedom Option

Benefits for 2026

	BENEFIT	RATE	LIMIT	AUTHORISATION
M	MENTAL HEALTH			
1	Psychiatric and psychological treatment in-hospital (including hospitalisation costs and procedures)	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • R56 100 per member family (Mental Health limit) • Subject to OAL 	Authorisation required Subject to managed care protocol and processes
2	Rehabilitation for substance abuse	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • 21 days for a person each year, included in the Mental Health limit • Subject to OAL 	Authorisation required Subject to managed care protocol and processes
3	Out-of-hospital: Clinical Psychologist consultations, visits, assessments, therapy, treatment, and counselling	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • R9 475 per member family 	Subject to referral by medical practitioner
N	NON-SURGICAL PROCEDURES AND TESTS			
1	In-hospital	80% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • Subject to OAL 	Authorisation required Subject to managed care protocol and processes
2	Out-of-hospital	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • R11 421 per member family 	Authorisation required Subject to managed care protocol and processes
O	OPTOMETRY			
1	Eye examination	100% of the lower of cost or SAOA rate	<ul style="list-style-type: none"> • One (1) examination per beneficiary each year, clinically essential lenses every 2 years from anniversary of claiming PB and one (1) frame per beneficiary subject to combined limit of R3 820 per beneficiary 	
2	Lenses	100% of the lower of cost or SAOA rate		No benefit for lens add-ons
3	Frames	100% of the lower of cost or SAOA rate		
4	Contact lenses	100% of the lower of cost or SAOA rate	<ul style="list-style-type: none"> • R3 820 per beneficiary, every 2 years (from claiming PB) instead of spectacle lenses above 	

PlatFreedom Option

Benefits for 2026

	BENEFIT	RATE	LIMIT	AUTHORISATION
O	OPTOMETRY (CONTINUE)			
5	Readers	100% of the lower of cost or SAOA rate	<ul style="list-style-type: none"> Limited to and included in the frames/ lenses limit above, if obtained from a registered practice 	
6	Refractive eye surgery	80% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> R23 119 per member family * Subject to OAL 	Authorisation required Subject to managed care protocol and processes
7	Screening for Vision affecting Chronic Diseases	100% of the lower of cost or SAOA rate	<ul style="list-style-type: none"> One screening consultation per beneficiary per annum from anniversary of claiming PB 	
P	ORGAN AND TISSUE TRANSPLANTS			
1	Harvesting of organ/s, tissue and the transplantation of them (limited to RSA)	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> R266 452 per member family (Organ Transplant limit) * Subject to OAL 	Authorisation required Subject to managed care protocol and processes
2	Immunosuppressive medication	100% of the approved price	<ul style="list-style-type: none"> Included in the Organ Transplant limit * Subject to OAL 	Authorisation required Subject to managed care protocol and processes
3	Corneal grafts. Organ harvesting not limited to RSA	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> R35 529 per beneficiary, included in the Organ Transplant limit * Subject to OAL 	Authorisation required Subject to managed care protocol and processes
Q	ONCOLOGY (CANCER)			
1	Active treatment period. Includes approved pathology and post active treatment for 12 months	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> * Subject to OAL 	Authorisation required Subject to managed care protocol and processes
2	Brachytherapy	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> R63 251 per member family * Subject to OAL 	Authorisation required Subject to managed care protocol and processes

PlatFreedom Option

Benefits for 2026

	BENEFIT	RATE	LIMIT	AUTHORISATION
R	PREVENTATIVE HEALTHCARE			
1	Cancer screening (Pap smears, PSA and Mammogram)	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> Subject to Pathology and Radiology limits 	
2	Malaria prophylaxis	100% of approved price	<ul style="list-style-type: none"> Subject to Acute Medicine limit 	
3	Vaccines (HPV, Flu & Covid-19)	100% of approved price	<ul style="list-style-type: none"> Subject to Acute Medicine limit 	
4	Pneumococcal Vaccine	100% of approved price	<ul style="list-style-type: none"> Subject to Acute Medicine limit 	Subject to managed care protocol and processes
5	Vaccine for Adults: RSV Vaccine for Pregnant Women	100% of approved price	<ul style="list-style-type: none"> Subject to Acute Medicine limit 	Pre-authorisation required Subject to managed care protocol and processes
S	CHILD IMMUNISATION			
1	Child Immunisation Benefit	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> According to the Department of Health protocols (excludes consultation cost) 	
T	PATHOLOGY AND MEDICAL TECHNOLOGY (LANCET ONLY)			
1	In-hospital	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> Subject to OAL 	
2	Out-of-hospital	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> R12 062 per member family 	
U	ADDITIONAL MEDICAL SERVICES			
1	In-hospital: Dietetics, occupational therapy, speech therapy and social workers	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> R16 750 per member family Subject to OAL 	Subject to referral by medical practitioner

PlatFreedom Option

Benefits for 2026

	BENEFIT	RATE	LIMIT	AUTHORISATION
U	ADDITIONAL MEDICAL SERVICES (CONTINUE)			
2	Out-of-hospital: Audiology, dietetics, genetic counselling, hearing aid acoustics, occupational therapy, orthoptics, podiatry, private nurse practitioners, speech therapy and social workers	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • R5 984 per member family 	Subject to referral by medical practitioner
V	PHYSIOTHERAPY, BIKINETICS AND CHIROPRACTICS (EXCLUDING X-RAYS)			
1	In-hospital: Physiotherapy and biokinetics	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • Subject to OAL 	Subject to referral by medical practitioner
2	Out-of-hospital: Physiotherapy, biokinetics and chiropractics	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • R10 479 per member family 	Subject to referral by medical practitioner
W	PROSTHESIS AND DEVICES (INTERNAL AND EXTERNAL)			
1		100% of the authorised cost	<ul style="list-style-type: none"> • R73 341 per member family • * Subject to OAL 	Authorisation required Subject to managed care protocol and processes
X	RADIOLOGY AND RADIOGRAPHY			
1	In-hospital	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • Subject to OAL 	
2	Out-of-hospital	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • R13 221 per member family 	
3	Specialised (in- and out-of-hospital)	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • R25 101 for a family • * Subject to OAL 	Authorisation required Subject to managed care protocol and processes

PlatFreedom Option

Benefits for 2026

	BENEFIT	RATE	LIMIT	AUTHORISATION
X	RADIOLOGY AND RADIOGRAPHY (CONTINUE)			
4	PET and PET-CT scans	100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • One (1) for a family • * Subject to OAL 	Authorisation required Subject to managed care protocol and processes
Y	RENAL DIALYSIS (CHRONIC)			
1		100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • R266 452 per member family 	Authorisation required
Z	SURGICAL PROCEDURES (INCLUDING MAXILLO-FACIAL SURGERY)			
1		100% of the lower of cost or Scheme rate	<ul style="list-style-type: none"> • * Subject to OAL 	Authorisation required

Contributions for 2026

SALARY BAND	BAND 1 R0 - R16 548	BAND 2 R16 549 - R24 589	BAND 3 R24 590 - R33 879	BAND 4 R33 880 - R68 715	BAND 5 R68 716 +
PRINCIPAL	R 2 875	R 3 675	R 3 980	R 4 969	R 5 888
ADULT	R 2 256	R 2 896	R 3 058	R 3 850	R 4 676
CHILD	R 771	R 991	R 1 069	R 1 182	R 1 384

In the event that a member's income changes during the course of a benefit year, placing the member in a higher/lower income band for contribution purposes, the member shall immediately inform the Scheme of such change and the Scheme shall effect such adjustment to the higher/lower income band from 1 January of the following benefit year except in cases of promotion and demotion wherein the Scheme shall effect such change immediately.

Prescribed minimum benefits

The Scheme will pay in full, without co-payment or use of deductibles, the diagnosis, treatment, and care costs of the prescribed minimum benefits as per regulation 8 of the Act. Furthermore, where a protocol or a formulary drug preferred by the Scheme has been ineffective or would cause harm to a beneficiary, the Scheme will fund the cost of the appropriate substitution treatment without a penalty to the beneficiary as required by regulation 15H and 15I of the Act.

General Scheme Exclusions

Unless otherwise approved by the Scheme (and with the express exception of medicines or treatment approved and authorised in terms of any relevant managed healthcare programme), expenses incurred in connection with any of the following will not be paid by the Scheme:

The following are excluded by the Scheme unless authorised by the Board of Trustees:

- All costs that exceed the annual or biannual limit allowed for the particular benefit set out in the Scheme Rules.
- Claims that are submitted more than four months after the date of treatment.
- Interest charges on overdue accounts, legal fees incurred as a result of delay on non-payment accounts and/or any administration fee charged by provider.
- Charges for appointments which a member or dependant fails to keep with service providers.
- Accommodation in a private room of a hospital unless clinically indicated and prescribed by a medical practitioner and authorised by the Scheme.
- Accommodation in an old-age home or other institution that provides general care for the aged and/ or chronically ill patients.
- Accommodation and/or treatment in headache and stress-relief clinics, spas and resorts for health, slimming, recuperative or similar purposes.
- Treatment of obesity – slimming preparations and appetite suppressants, any surgical procedure to assist in weight loss. Excluding therapy being approved for non-surgical weight management on the PlatComprehensive and PlatCap Options.
- Operations, treatments, and procedures, by choice, for cosmetic purposes where no pathological substance exists which proves the necessity of the procedure, and/or which is not lifesaving, life-sustaining or life-supporting, including related complications: for example, breast reduction, breast augmentation, otoplasty, total nose reconstruction, lipectomy, subcutaneous mastectomy, minor superficial varicose veins treatment with sclerotherapy, abdominal bowel bypass surgery, etc.
- Reversal of sterilisation procedures.
- Sex change operations.
- Services not mentioned in the benefits as well as services which, in the opinion of the Scheme, are not aimed at the treatment of an actual or supposed illness of disablement which impairs or threatens essential body function (the process of ageing will not be regarded as an illness or a disablement).

- Services rendered by any person who is not registered to provide health services as defined in the Medical Schemes Act and medicines that have been prescribed by someone who is not a registered health services provider.
- The purchases of bandages, syringes (other than for diabetics) and instruments, patent foods, tonics, vitamins, sunscreen agents, growth hormone, and immunisation (not part of PMB).
- General anaesthetic and hospitalisation for conservative dental work excluded, except in the case of trauma, patients under the age of eight years and impacted third molars.
- Gum guards for sport purposes, gold in dentures and the cost of gold as an alternative to non-precious metal in crowns, inlays and bridges and bleaching of teeth.
- Reports, investigations or tests for insurance purposes, admission to universities or schools, emigration or immigration, employment, legal purposes/medical court reports, annual medical surveillance, or similar services, including routine examinations.
- Pre-natal and/or post-natal exercises.
- Travelling and accommodation/lodging costs, including meals as well as administration costs of a beneficiary and/or service provider.
- The cost of holiday for recuperative purposes, whether considered medically necessary or not, and travelling cost (this travelling is the patients travelling cost, not the provider).
- Prophylactic treatment – “stop” Smoke, Disulfiram treatment (Antabuse).
- The artificial insemination of a person in or outside the human body as defined in the Human Tissue Act, 1983 (Act 65 of 1983) provided that, in the case of artificial insemination, the Scheme’s responsibility on the treatment will be:
 - As it is prescribed in the public hospital;
 - As defined in the prescribed minimum benefits (PMBs); and
 - Subject to pre-authorisation and prior approval by the Scheme.
- Experimental unproven or unregistered treatments or practices, including off label use of medication.
- Aptitude, intelligence/IQ, and similar tests as well as the treatment of learning problems.
- Costs for evidence in a lawsuit.

- Sclerotherapy.
- All costs for healthcare services if, in the opinion of the medical or dental adviser, such healthcare services are not appropriate and necessary for the symptoms, diagnosis or treatment of the medical condition at an affordable level of service and cost.
- All costs for medicine for the treatment of chronic conditions not on the list of conditions covered, except for medicine for the treatment of an excluded chronic condition which the Scheme has specifically determined needs to be treated to achieve overall cost-effective treatment of the beneficiary.
- Alternative healthcare: (excluding PlatFreedom)
 - Homeopathic consultation and medication that have valid NAPPI codes.
 - Podiatry (not part of PMB).
- Vaccinations not covered for by Scheme protocols, for example, Yellow fever for travel purposes.
- Refractive eye surgery, excimer laser treatment. (excluding PlatFreedom).



Contact Details

- **Medical emergency services (ambulance): 0861 746 548 Europ Assistance**
- **After-hours Case Management: 082 800 8727**

Platinum Health offers a convenient one-stop service, giving members access to a wide range of healthcare professionals and the assurance of competent case management in line with the Scheme's vision of providing quality, affordable healthcare.

An efficient administration team is ready to help you with:

- Your request for information;
- Obtaining pre-authorisation;
- Registration on a management programme;
- Claims enquiries; and
- Emergency procedures.

To ensure a quick response to your enquiry, contact Client Liaison or Case Management by calling toll free or e-mailing.

Platinum Health Corporate Office

Tel:	087 463 0660
E-mail:	phclientliaison@platinumhealth.co.za
Physical address:	3 Kgwebo Street, Mabe Office Park, Rustenburg, 0299
Postal address:	Private Bag X82081, Rustenburg, 0300
Office hours:	Monday to Friday 07:30 – 16:00

Client Liaison

Tel:	014 590 1700 or 080 000 6942 (toll free)
E-mail:	phclientliaison@platinumhealth.co.za
WhatsApp:	080 000 6942 (Access digital membership card, membership or tax certificate)
Office hours:	Monday to Friday 08:00 - 16:00



Case Management

Tel: 014 590 1700 or 080 000 6942 (toll free)
A/H emergency: 082 800 8727
E-mail: plathealth@platinumhealth.co.za (specialist authorisation)
HospitalConfirmations@platinumhealth.co.za (hospital pre-authorisation and authorisation)
WhatsApp: 080 000 6942 (Request authorisation)
Office hours: Monday to Thursday 09:00 – 17:00 , Friday 09:00 – 16:00

Membership

Tel: 014 590 1700 or 080 000 6942 (toll free)
E-mail: zzzengagementofficemembership@platinumhealth.co.za
Office hours: Monday to Friday 08:00 – 16:00

Chronic Medication:

Tel: 014 590 1700
Fax: 086 577 0274
E-mail: phscript@platinumhealth.co.za (Orders, applications and general enquiries)





**PLATINUM
HEALTH**

PLATINUM HEALTH CORPORATE OFFICE

Members must first try and resolve their complaint with the Scheme and only contact The Council for Medical Schemes if they are still in disagreement with their Medical Scheme.

THE COUNCIL FOR MEDICAL SCHEMES

Block A Eco Glades 2 Office Park
420 Witch-Hazel Street, Ecopark
Centurion, 0157

Telephone: 012 431 0500

Fax: 012 431 0500

Customer Care call-share number: 0861 123 267

Email: complaints@medicalschemes.com

Website: www.medicalschemes.com

DISCLAIMER

This brochure acts as a summary and does not supersede the Registered Rules of the Scheme.

All benefits in accordance with the Registered Rules of the Scheme.

Terms and conditions of membership apply as per Scheme Rules.

