Day-to-Day benefits

You have access to the following day-to-day cover on KeyCare Plus, KeyCare Start and KeyCare Start Regional plans.

On KeyCare Start your nominated KeyCare Start GP must refer you and you must use providers in your chosen KeyCare Start Network.

On KeyCare Start Regional, you must use the KeyCare Online Practice to access healthcare. Your nominated KeyCare Start Regional GP must refer you for day-to-day cover.

Healthcare professionals, providers and services	What we pay for
GP visits	You have unlimited cover for medically appropriate GP consultations. When joining, you must nominate a GP from the KeyCare, KeyCare Start or KeyCare Start Regional GP Network, depending on the plan you choose. You must go to your nominated GP for us to cover your consultations, including some minor procedures. Preauthorisation is required after your 15th GP visit. On KeyCare Start Regional, GP consultations are covered when referred through the KeyCare Online Practice.
Blood, urine and other fluid and tissue tests	We pay for a list of blood, urine and other fluid and tissue tests from a network GP. Your nominated network GP must ask for these tests by filling in a KeyCare pathology form. Claims are covered up to 100% of the Discovery Health Rate.
Day-to-day medicine	We pay for medicine from our medicine list up to 100% of the Discovery Health Rate if they are prescribed and/or dispensed by your nominated Network GP depending on the plan you choose.
Basic X-rays	We pay for a list of basic X-rays at a network provider. Your nominated network GP must ask for the X-rays to be done.
Nurse-led consultations	Nurse-led consultations at a network provider, with or without video call consultations with a GP, and referral for a face-to-face consultation, where needed and referred by the nurse. Limited to two consultations per person per year. We will cover the GP visit, selected blood tests, X-rays, and medicine on our medicine list if requested by the GP.
Eye care	We cover one eye test per person every two years, but you must go to an optometrist in the KeyCare Optometry Network. The optometrist will have a specific range of glasses which you can choose from. You can get a set of contact lenses instead of glasses if you choose to. You can get new glasses or contact lenses every 24 months.
Dentistry	We cover consultations, fillings and tooth removals at a dentist in our dentist network. Certain rules and limits may apply.
Casualty visits	On KeyCare Plus you have cover for one casualty visit per person per year at any casualty unit at a hospital in the KeyCare network. You must pay the first R520. You need to get preauthorisation for a casualty visit. On KeyCare Start you can go to your nominated KeyCare Start GP or network provider for after-hours care. On KeyCare Start Regional you can go to your nominated KeyCare Start Regional GP or the KeyCare Online Practice for after-hours care.
Medical equipment	On KeyCare Plus, we cover wheelchairs, wheelchair batteries and cushions, transfer boards and mobile ramps, commodes, long-leg calipers, crutches and walkers on the medical equipment list, if you get them from a network provider. There is an overall limit of R6,050 per family per year. Not covered on the KeyCare Start or KeyCare Start Regional plans.
Specialist Benefit	Specialist cover up to R5,750 on KeyCare Plus and KeyCare Core, and up to two visits up to R2,850 on KeyCare Start and KeyCare Start Regional per person per year. Your nominated network GP must refer you to a specialist and you need a reference number from us before your consultation with the specialist. On KeyCare Plus, if you need to see a maxillo-facial surgeon, periodontist, or a specialist for maternity care, you do not need a referral from your GP or a reference number from us. Out-of-hospital MRI and CT scans are paid up to the Specialist Benefit limit. Claims are covered from the Specialist Benefit at the agreed rate or up to 100% of the Discovery Health Rate for specialists we don't have a payment arrangement with.
Other types of healthcare	We do not cover other types of healthcare professionals, such as physiotherapists, psychologists, speech therapists, audiologists, homeopaths or chiropractors. These claims may be paid from the available money in your Personal Health Fund.

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