



# Makoti Medical Scheme

## Frequently Asked Questions

### 1. How do I get access to a doctor/general practitioner?

On completion of the membership application form, the applicant must furnish details of his/her nominated General Practitioner (GP / nominated doctor). It is important to remember that the member or his/her dependants must produce their medical aid card and proof of identification at the first visit to the GP. Members may only use their nominated doctor.

### 2. What do I do when I am out of town and need to see a doctor?

Members are allowed to visit the nearest GP only in cases of an emergency when they are out of town. The treatment provided must be authorised with Enablemed on 0860 00 24 00 who has a 24 hour call centre.

### 3. What do I do when I need to see a doctor after hours?

Where the nominated doctor is not available after hours, members are allowed to visit the nearest GP, but the treatment must be authorised by Enablemed on 0860 00 24 00.

### 4. What medicine will my medical aid pay for?

All medicine (acute and chronic) is covered in terms of a medicine formulary.

#### a. Acute Medicine (this is medicine used for the treatment of short term illnesses such as flu).

- Members can receive their medication directly from the nominated GP if he/she is a dispensing doctor. Should your GP not be a dispensing doctor, the GP must issue a prescription for members to collect their medication from the nearest pharmacy.

#### b. Chronic Medicine (this is medicine prescribed for an ongoing period longer than 3 months to manage a chronic conditions such as Diabetes).

- Your chronic illness is managed by the nominated GP who must register your chronic medicine with the Chronic Care Programme on 0860 00 24 00 or e-mail chronic@enablemed.com.
- Members can receive their medication directly from the nominated GP if he/she is a dispensing doctor. Should your GP not be a dispensing doctor, the GP must issue a prescription for members to collect their medication from the nearest pharmacy.

#### c. Over The Counter medicine (this is medicine you obtain directly from the pharmacist, without consulting a doctor).

- Over the counter medicine will be paid for up to a specified rand amount per family as determined each benefit year\*.

### 5. What do I do when I am pregnant? (Maternity benefits)

Maternity benefits are accessed through the nominated GP or the local clinic, and will be paid in full, provided that all pre-authorisation processes have been complied with. Specialist maternity services/benefits will be covered in State Hospitals only, subject to referral from the nominated GP, except in cases of emergency.

### 6. Will my medical scheme pay for ambulance services?

The Scheme covers ambulance services for medical emergencies only. The Scheme has elected LifeMed ambulance to be its preferred provider. LifeMed can be contacted on 0861 086 911.

### 7. What do I do if I need to have blood tests done or X – Rays taken? (Pathology and Radiology)

Basic blood tests and x-rays are covered subject to request by your nominated GP.

### 8. Will my medical scheme pay for specialist services?

The Scheme covers specialist services provided in a state facility in terms of the Prescribed Minimum Benefit protocols.

### 9. Will my medical scheme pay for eye care? (Optometry)

Members are entitled to one eye test, frames and lenses once every 24 months up to a specified rand amount per family as determined each benefit year\*. Services must be authorised by the Enablemed Call Centre on 0860 00 24 00.

### 10. Will my medical aid pay for dentistry?

Yes, benefit for dental consultations, fillings, extractions and preventative treatment is unlimited. All dentistry must be provided by an accredited dentist or dental therapist, after the dentist has obtained authorisation via Dental Information Systems (Pty) Ltd on 0860 104 925. No benefits for specialised dentistry and dentures will be covered.

*\*Please refer to your Makoti Medical Scheme member booklet for more information*



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