

## Contents

POLMED Aquarium Benefit Summary 2023 .....	2
POLMED Marine Benefit Summary 2023 .....	2
POLMED 2023 Dental Benefit Tables .....	3
Conservative Dentistry .....	3
Specialised Dentistry .....	6
Hospitalisation and Anaesthetics .....	9
General Exclusions .....	10
Preventative Care Benefit .....	10

**Important Note:** In the event of a dispute the scheme rule will supersede this benefit schedule.  
These can be found on the POLMED website. <https://www.polmed.co.za/scheme-rules/>

## POLMED Aquarium Benefit Summary 2023

- Dental benefits are paid at the POLMED Dental Tariff Subject to the applicable limits.
- POLMED Aquarium Members are required to use the POLMED Dental Provider Network for treatment. Members who voluntarily **opt to use a non-network provider**, will be liable for a **30% co-payment**
- The dental benefits as published below will apply, subject to DENIS managed care protocols and managed care interventions which may include the requirement of treatment plans and/or radiographs prior to benefit application.
- Scheme Exclusions apply to dental benefits.
- In the event of a dispute, the registered Rules of the Scheme will prevail.
- Pre-authorization\*
  - POLMED Aquarium is restricted to the use of the Aquarium Hospital Network Service provider for treatment in a hospital or day clinic. Penalties up to **R 15 000.00** will apply for the use of a **non-network** facility.
  - Hospitalisation, and certain dentistry procedures must be pre-authorized.
  - Pre-authorization is required for: 8937, 8941, 8737, 8739, 9011, 9015, 9016, 8967
  - A penalty of **R500** will apply for **late authorisation** on all specialised treatment except for **general anaesthesia** where a **R5000 penalty** will apply.
- Penalties do not apply to emergency hospital admission.

\* Please note that Medscheme will be responsible for the receipt, processing and payment of the hospital and anaesthetist claims for authorised in hospital treatment and sedation.

If not submitted via a claims switching house by the service provider, these claims must be submitted to:

Hospital claims: [claimsmanagement@medscheme.co.za](mailto:claimsmanagement@medscheme.co.za)

Anaesthetist claims: [specialist@medscheme.co.za](mailto:specialist@medscheme.co.za)

## POLMED Marine Benefit Summary 2023

- Dental benefits are paid at the POLMED Dental Tariff Subject to the applicable limits.
- The dental benefits as published below will apply, subject to DENIS managed care protocols and managed care interventions which may include the requirement of treatment plans and/or radiographs prior to benefit application.
- Scheme Exclusions apply to dental benefits.
- In the event of a query, appeal or dispute, the registered Rules of the Scheme will prevail.
- Pre-authorization\*\*
  - Hospitalisation, and certain dentistry procedures must be pre-authorized.
  - Pre-authorization is required for: Metal Frame Dentures, Crown & Bridge, Orthodontics, Periodontics, Hospital Admissions and Moderate / Deep Sedation in the Dental Rooms.
  - A penalty of **R500** will apply for **late authorisation** on all specialised treatment except for **general anaesthesia** where a **R5 000 penalty** will apply.
- Failure to pre-authorise orthodontic treatment will result in payment only from date of authorisation for the remaining months of treatment, provided that the treatment is clinically indicated.
- Penalties do not apply to emergency hospital admission.

\*\* Please note that Medscheme will be responsible for the receipt, processing and payment of the hospital and anaesthetist claims for authorised in-hospital treatment and sedation.

If not submitted via a claims switching house by the service provider, these claims must be submitted to:

Hospital claims: [claimsmanagement@medscheme.co.za](mailto:claimsmanagement@medscheme.co.za)

Anaesthetist claims: [specialist@medscheme.co.za](mailto:specialist@medscheme.co.za)

## CONSERVATIVE DENTISTRY

Subject to available OOH dental sub-limit

BENEFITS	AQUARIUM	MARINE
<b>Consultations</b>	<p>Two check-ups per beneficiary per year (once every 6 months)</p> <p>Benefit subject to managed care protocols</p> <p>Covered at the PDT and 1 consult (8101) available from the Preventative Benefit</p>	<p>Two check-ups per beneficiary per year (once every 6 months)</p> <p>Benefit subject to managed care protocols</p> <p>Covered at the PDT and 1 consult (8101) available from the Preventative Benefit</p>
<b>X-rays: Intraoral</b>	<p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p>	<p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p>
<b>X-rays: Extraoral</b>	<p>One per beneficiary in a 3-year period</p> <p>Additional benefit may be considered where specialised dental treatment is required.</p> <p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p>	<p>One per beneficiary in a 3-year period</p> <p>Additional benefit may be considered where specialised dental treatment is required.</p> <p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p>
<b>Preventative Care</b>	<p><i>Benefit for scale and polish:</i> Two scale and polish treatments per beneficiary per year (once every 6 months)</p> <p>Covered at the PDT</p> <p><i>Benefit for fissure sealants:</i> Limited to beneficiaries between the ages of 5 and 25 and limited to 4 per beneficiary per annum.</p> <p>Covered at the PDT and available from the Preventative Benefit.</p> <p><i>Benefit for fluoride:</i> One per beneficiary in 12 months. Code 8161 for beneficiaries younger than 12 and code 8162 for beneficiaries between the ages of 12 and 16.</p> <p>Covered at the PDT and available from the Preventative Benefit</p> <p><i>Benefit for Oral Hygiene Instruction:</i> Granted once per beneficiary in 12 months</p> <p>Covered at the PDT and available from the Preventative Benefit</p>	<p><i>Benefit for scale and polish:</i> Two scale and polish treatments per beneficiary per year (once every 6 months)</p> <p>Covered at the PDT</p> <p><i>Benefit for fissure sealants:</i> Limited to beneficiaries between the ages of 5 and 25 and limited to 4 per beneficiary per annum.</p> <p>Covered at the PDT and available from the Preventative Benefit.</p> <p><i>Benefit for fluoride:</i> One per beneficiary in 12 months. Code 8161 for beneficiaries younger than 12 and code 8162 for beneficiaries between the ages of 12 and 16.</p> <p>Covered at the PDT and available from the Preventative Benefit</p> <p><i>Benefit for Oral Hygiene Instruction:</i> Granted once per beneficiary in 12 months</p> <p>Covered at the PDT and available from the Preventative Benefit</p>

## CONSERVATIVE DENTISTRY

Subject to available OOH dental sub-limit

BENEFITS	AQUARIUM	MARINE
	<p>Benefit subject to managed care protocols</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Professionally applied fluoride for beneficiaries older than 16</li> <li>• Tooth Whitening</li> </ul>	<p>Benefit subject to managed care protocols</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Professionally applied fluoride for beneficiaries older than 16</li> <li>• Tooth Whitening</li> </ul>
<b>Fillings</b>	<p><i>Benefit for fillings:</i> Granted once per tooth in 720 days</p> <p><i>Benefit for re-treatment of a tooth:</i> Subject to managed care protocols</p> <p><i>Multiple fillings:</i> A treatment plan and X-rays may be required for multiple fillings</p> <p>Covered at the PDT</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Fillings to restore teeth damaged due to toothbrush abrasion, attrition, erosion and fluorosis.</li> <li>• Resin bonding for restorations that are charged as a separate procedure to the restoration</li> <li>• The polishing of restorations</li> <li>• Gold foil restorations</li> <li>• Ozone therapy</li> </ul>	<p><i>Benefit for fillings:</i> Granted once per tooth in 720 days</p> <p><i>Benefit for re-treatment of a tooth:</i> Subject to managed care protocols</p> <p><i>Multiple fillings:</i> A treatment plan and X-rays may be required for multiple fillings</p> <p>Covered at the PDT</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Fillings to restore teeth damaged due to toothbrush abrasion, attrition, erosion and fluorosis.</li> <li>• Resin bonding for restorations that are charged as a separate procedure to the restoration.</li> <li>• The polishing of restorations</li> <li>• Gold foil restorations</li> <li>• Ozone therapy</li> </ul>
<b>Root Canal Therapy and Extractions</b>	<p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Root canal therapy on primary (milk) teeth</li> <li>• Root canal therapy on third molars (wisdom teeth)</li> <li>• Direct and indirect pulp capping procedures</li> </ul>	<p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Root canal therapy on primary (milk) teeth</li> <li>• Root canal therapy on third molars (wisdom teeth)</li> <li>• Direct and indirect pulp capping procedures</li> </ul>

## CONSERVATIVE DENTISTRY

Subject to available OOH dental sub-limit

BENEFITS	AQUARIUM	MARINE
<p><b>Plastic Dentures* and Associated Laboratory Costs</b></p>	<p>Two plastic dentures per beneficiary in a 4-year period</p> <p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Diagnostic dentures and associated laboratory costs</li> <li>• Mouth guards and associated laboratory costs</li> <li>• Snoring appliances and associated laboratory costs</li> <li>• High impact acrylic</li> <li>• The cost of gold, precious metal, semi-precious metal and platinum foil</li> <li>• Provisional dentures and associated laboratory costs</li> </ul>	<p>Two plastic dentures per beneficiary in a 4-year period</p> <p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Diagnostic dentures and associated laboratory costs</li> <li>• Mouth guards and associated laboratory costs</li> <li>• Snoring appliances and associated laboratory costs</li> <li>• High impact acrylic</li> <li>• The cost of gold, precious metal, semi-precious metal and platinum foil</li> <li>• Provisional dentures and associated laboratory costs</li> </ul>

## SPECIALISED DENTISTRY

BENEFITS	AQUARIUM	MARINE
<p><b>Partial Chrome Cobalt Frame Dentures* and Associated Laboratory Costs</b></p>	<p>No benefit</p>	<p><b>Pre-authorisation required</b></p> <p>One partial metal frame per beneficiary in a 5-year period</p> <p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p> <p>Subject to Marine Specialised Dentistry family limit</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• The metal base to full dentures and associated laboratory costs</li> <li>• High impact acrylic</li> <li>• The cost of gold, precious metal, semi-precious metal and platinum foil</li> </ul>
<p><b>Crown &amp; Bridge* and Associated Laboratory Costs</b></p> <p><i>A bridge comprises two or more crown units. Each crown is payable from the available Crown &amp; Bridge benefit.</i></p>	<p>No benefit</p>	<p><b>Pre-authorisation required</b></p> <p>Benefit for crowns, bridges, porcelain veneers and inlays, and associated laboratory costs will be granted once per tooth in a 5-year period</p> <p>A treatment plan and X-rays must be submitted for review.</p> <p>Benefit subject to managed care protocols</p> <p>A pontic on a 2<sup>nd</sup> molar, where the 3<sup>rd</sup> molar is a crown retainer, is subject to managed care protocols</p> <p>Covered at the PDT</p> <p>Subject to Marine Specialised Dentistry family limit</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Crowns on third molars</li> <li>• Crown and bridge procedures for cosmetic reasons and associated laboratory costs</li> <li>• Laboratory fabricated temporary crowns</li> <li>• Occlusal rehabilitations and associated laboratory costs</li> <li>• Provisional crowns and associated laboratory costs</li> <li>• Emergency crowns that are not placed for the immediate protection in tooth injury and associated laboratory costs</li> <li>• The cost of gold, precious metal, semi-precious metal and platinum foil</li> </ul>

## SPECIALISED DENTISTRY

BENEFITS	AQUARIUM	MARINE
<p><b>Implants* and Associated Laboratory Costs</b></p>	<p>No benefit</p>	<p>No benefit</p>
<p><b>Orthodontics* and Associated Laboratory Costs</b></p>	<p>No benefit</p>	<p><b>Pre-authorisation required</b></p> <p>Benefit for orthodontic treatment granted once per beneficiary per lifetime</p> <p>On pre-authorisation, cases will be clinically assessed by using an orthodontic needs analysis.</p> <p>Benefit allocation is subject to the outcome of the needs analysis and covered at the PDT.</p> <p>Benefit for orthodontic treatment will be granted where function is impaired.</p> <p>Benefit will not be granted where orthodontic treatment is required for cosmetic reasons.</p> <p>The associated laboratory costs will also not be covered.</p> <p><i>Benefit for fixed comprehensive treatment:</i> Limited to individuals from age 9 and younger than 18 years of age</p> <p>Benefit subject to managed care protocols</p> <p>Subject to Marine Specialised Dentistry family limit</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Orthodontic re-treatment and any related laboratory costs</li> <li>• Invisible retainer material</li> </ul>
<p><b>Periodontics*</b></p>	<p>Pre-authorisation required</p> <p>Benefit only for 8737/8739 and ONLY as a PMB</p>	<p><b>Pre-authorisation required</b></p> <p>Benefit limited to conservative, non-surgical therapy only</p> <p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p> <p>Subject to Marine Specialised Dentistry family limit</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• PerioChip placement</li> </ul>

## SPECIALISED DENTISTRY

BENEFITS	AQUARIUM	MARINE
<p><b>Maxillo-facial Surgery and Oral Pathology</b></p>	<p><b>Pre-authorisation required</b></p> <p>Benefit is only available for the following codes to be paid from the Out of Hospital (OOH) Family Limit:</p> <ul style="list-style-type: none"> <li>• 8937</li> <li>• 8941</li> <li>• 9011</li> </ul> <p>Benefit for the following codes is only available if part of an Authorised PMB:</p> <ul style="list-style-type: none"> <li>• 9015</li> <li>• 9016</li> <li>• 8967</li> </ul>	<p><b>Pre-authorisation required</b></p> <p><i>Surgery in the dental chair:</i> Covered at the PDT Subject to Marine Specialised Dentistry family limit</p> <p>Benefit subject to managed care protocols</p> <p><i>Oral pathology procedures (cysts and biopsies, the surgical treatment of tumours of the jaw and soft tissue tumours):</i> Claims will only be covered if supported by a laboratory report that confirms diagnosis.</p> <p><i>Benefit for the closure of an oral-antral opening (code 8909):</i> Subject to motivation and managed care protocols</p> <p><i>Surgery in hospital:</i> See Hospitalisation* below</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Sinus lifts</li> <li>• Bone augmentations</li> <li>• Bone and tissue regeneration procedures</li> <li>• The cost of bone regeneration material</li> <li>• The auto-transplantation of teeth</li> </ul>



## HOSPITALISATION AND ANAESTHETICS

BENEFITS	AQUARIUM	MARINE
<p><b>Hospitalisation (General Anaesthetic)*</b></p>	<p><b>Pre-authorisation required</b></p> <p>Admission protocols apply</p> <p>Subject to the use of an Aquarium Network Hospital</p> <p>Benefit subject to managed care protocols</p> <ul style="list-style-type: none"> <li>• General anesthetic benefit available for children under the age of 7 years for extensive dental treatment.</li> <li>• Dental practitioner claims subject to the applicable OOH Dental Sublimit</li> <li>• General anesthetic benefit available for the removal of impacted teeth.</li> <li>• Dental practitioner claims subject to the In Hospital Family Limit.</li> </ul> <p>The hospital and anesthesiologist claims must be submitted to Medscheme for processing. Funded from the Hospital Benefit subject to available limits.</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Where the only reason for admission to hospital is dental fear and anxiety</li> <li>• Multiple hospital admissions</li> <li>• Where the only reason for the admission request is for a sterile facility</li> <li>• The cost of dental materials for procedures performed under general anesthesia</li> </ul>	<p><b>Pre-authorisation required</b></p> <p>Admission protocols apply</p> <p>Benefit subject to managed care protocols</p> <ul style="list-style-type: none"> <li>• General anesthetic benefit available for children under the age of 7 years for extensive dental treatment.</li> <li>• Dental practitioner claims subject to the applicable OOH Dental Sublimit</li> <li>• General anesthetic benefit available for the removal of impacted teeth.</li> <li>• Dental practitioner claims subject to Marine Specialised Dentistry Family Limit</li> </ul> <p>The hospital and anesthesiologist claims must be submitted to Medscheme for processing. Funded from the Hospital Benefit</p> <p><b>Funding Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Where the only reason for admission to hospital is dental fear and anxiety</li> <li>• Multiple hospital admissions</li> <li>• Where the only reason for the admission request is for a sterile facility</li> <li>• The cost of dental materials for procedures performed under general anesthesia</li> </ul>
<p><b>Inhalation Sedation in the Dental Rooms</b></p>	<p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p> <p>Subject to the OOH Family Dental Sublimit</p>	<p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p> <p>Subject to the OOH Family Dental Sublimit</p>
<p><b>Moderate/Deep Sedation in the Dental Rooms*</b></p>	<p><b>Pre-authorisation required</b></p> <p>Benefit limited to extensive dental treatment and removal of impacted teeth only.</p> <p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p> <p>The anesthesiologist claim must be submitted to Medscheme for processing. Funded from the Hospital Benefit</p>	<p><b>Pre-authorisation required</b></p> <p>Benefit limited to extensive dental treatment and removal of impacted teeth only.</p> <p>Benefit subject to managed care protocols</p> <p>Covered at the PDT</p> <p>Subject to Marine Specialised Dentistry family limit</p> <p>The anesthesiologist claim must be submitted to Medscheme for processing. Funded from the Hospital Benefit</p>

## General Exclusions

- The following services/items are excluded from benefits with due regard to PMBs and will not be paid by the Scheme: Charges for appointments that a member or dependant fails to keep with service providers.
- 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.
- Aids for participation in sport, e.g., mouthguards.
- Gold inlays in dentures, soft and metal base to new dentures, invisible retainers, Osseo Integrated implants and bleaching of vital (living) teeth.
- Fixed orthodontics for beneficiaries above the age of 18 years.
- Reports, investigations or tests for insurance purposes, admission to universities or schools, fitness tests and examinations, medical court reports, employment, emigration, or immigration, etc.

## Preventative Care Benefit

### NB: Special Notes

POLMED provides funding for some preventative services that are paid from the risk benefit and does not accumulate to the members OOH Limit or Dental sub-limit and is available on both options. The preventative codes mentioned below are not in addition to the standard benefits and are included in the overall dental benefits offered on the member's respective option, where managed care rules are applied.

PROCEDURE/TREATMENT	CODE	FREQUENCY/LIMITATIONS
<b>Dental Screening</b>	8101* 8151 x 1 in 12 months 8102 x 1 in 12 months	Annually *One consultation (8101) from Preventative Benefit, the second consultation from available dental sub-limit Benefit subject to managed care protocols
<b>Consultation and topical fluoride application for children aged 0-6 years</b>	8161 (age 0 – 11) x 1 in 12 months	Annually Benefit subject to managed care protocols
<b>Topical fluoride application for children aged 7-16 years</b>	8162 (age 12 – 16) x1 in 12 months	Annually Benefit subject to managed care protocols
<b>Caries risk assessment for children aged 0-14 years</b> (Clinical information to be submitted to managed care)	8123 x 1 in 24 months	Once every second year Benefit subject to managed care protocols
<b>Periodontal disease and caries risk assessment for adults 19 years of age and older</b> (Clinical information to be submitted to managed care)	8176 x 1 in 24 months 8123 x 1 in 24 months	Once every second year Benefit subject to managed care protocols
<b>Fissure sealants for 5 to 25 year old</b>	8163 x 4 in 12 months	Maximum of four per annum Benefit subject to managed care protocols