

Individual Contributions

P = Principal A = Adult C = Child Child rates apply to dependants younger than 21

On the Ingwe, Access and Impact Options all children are charged for. On the Custom, Incentive, Extender and Summit Options, a maximum of 3 children are charged for

Ingwe Option		Hospital	Chronic	Day-to-day	P	A	C
Monthly income	<= R675	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R370	R370	R232
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R370	R370	R232
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R370	R370	R232
	R676 - R6 300	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R603	R603	R325
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R759	R759	R347
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R986	R986	R370
	R6 301 - R8500	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R691	R691	R333
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R965	R965	R361
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R1 378	R1 378	R417
	R8 501 - R11 700	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R806	R806	R349
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R1 344	R1 344	R395
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R1 877	R1 877	R439
	R11 701 +	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R1 393	R1 393	R419
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R1 903	R1 903	R561
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R2 409	R2 409	R699
Access Option		Hospital	Chronic	Day-to-day	P	A	C
Monthly income	<= R8 500	Access Network	Access Primary Care Network	Access Primary Care Network	R1 900	R1 900	R570
	R8 501 - R11 700	Access Network	Access Primary Care Network	Access Primary Care Network	R2 025	R2 025	R605
	R11 701 +	Access Network	Access Primary Care Network	Access Primary Care Network	R2 350	R2 350	R785
Impact Option		Hospital	Chronic	Day-to-day	P	A	C
Monthly income	<= R8 500	Impact Network	State	Impact Primary Care Network	R1 140	R1 140	R405
	R8 501 - R11 700	Impact Network	State	Impact Primary Care Network	R1 305	R1 305	R435
	R11 701 +	Impact Network	State	Impact Primary Care Network	R2 350	R2 350	R785
Custom Option		Hospital	Chronic	P	A	C	
	Associated		Any	R1 885	R1 487	R665	
			Associated	R1 750	R1 356	R618	
			State	R1 366	R1 033	R484	
	Any		Any	R2 249	R1 806	R803	
			Associated	R2 074	R1 620	R753	
			State	R1 743	R1 315	R639	

Incentive Option

Hospital	Chronic		P	A	C
Associated	Any	Total contribution	R2 737	R2 202	R1 022
		Risk contribution	R2 463	R1 982	R920
		Savings 10%	R274	R220	R102
		Annual Savings	R3 288	R2 640	R1 224
	Associated	Total contribution	R2 514	R2 000	R956
		Risk contribution	R2 263	R1 800	R860
		Savings 10%	R251	R200	R96
		Annual Savings	R3 012	R2 400	R1 152
	State	Total contribution	R1 834	R1 439	R711
		Risk contribution	R1 651	R1 295	R640
		Savings 10%	R183	R144	R71
		Annual Savings	R2 196	R1 728	R852
Any	Any	Total contribution	R3 052	R2 480	R1 189
		Risk contribution	R2 747	R2 232	R1 070
		Savings 10%	R305	R248	R119
		Annual Savings	R3 660	R2 976	R1 428
	Associated	Total contribution	R2 737	R2 196	R1 076
		Risk contribution	R2 463	R1 976	R968
		Savings 10%	R274	R220	R108
		Annual Savings	R3 288	R2 640	R1 296
	State	Total contribution	R2 249	R1 772	R889
		Risk contribution	R2 024	R1 595	R800
		Savings 10%	R225	R177	R89
		Annual Savings	R2 700	R2 124	R1 068

Extender Option

Hospital	Chronic		P	A	C
Associated	Any	Total contribution	R5 113	R4 081	R1 535
		Risk contribution	R3 835	R3 061	R1 151
		Savings 25%	R1 278	R1 020	R384
		Annual Savings	R15 336	R12 240	R4 608
	Threshold	R18 700	R16 200	R5 600	
	Associated	Total contribution	R4 715	R3 761	R1 415
		Risk contribution	R3 536	R2 821	R1 061
		Savings 25%	R1 179	R940	R354
		Annual Savings	R14 148	R11 280	R4 248
	Threshold	R18 700	R16 200	R5 600	
	State	Total contribution	R4 129	R3 104	R1 239
		Risk contribution	R3 097	R2 328	R929
Savings 25%		R1 032	R776	R310	
Annual Savings		R12 384	R9 312	R3 720	
Threshold	R18 700	R16 200	R5 600		
Any	Any	Total contribution	R5 816	R4 640	R1 745
		Risk contribution	R4 362	R3 480	R1 309
		Savings 25%	R1 454	R1 160	R436
		Annual Savings	R17 448	R13 920	R5 232
	Threshold	R18 700	R16 200	R5 600	
	Associated	Total contribution	R5 232	R4 177	R1 569
		Risk contribution	R3 924	R3 133	R1 177
		Savings 25%	R1 308	R1 044	R392
		Annual Savings	R15 696	R12 528	R4 704
	Threshold	R18 700	R16 200	R5 600	
	State	Total contribution	R4 723	R3 843	R1 416
		Risk contribution	R3 542	R2 882	R1 062
Savings 25%		R1 181	R961	R354	
Annual Savings		R14 172	R11 532	R4 248	
Threshold	R18 700	R16 200	R5 600		

Summit Option

Hospital	Chronic	Day-to-day	P	A	C
Any	Freedom-of-choice	Freedom-of-choice	R8 342	R6 672	R1 916