

MGC25

MEMBER GUIDE

ONCOLOGY PROGRAMME

Supporting you every
step of the way

DISCOVER THE
BRILLIANCE
OF **GEMS**

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Introduction

Welcome to the GEMS Oncology Management Programme.

Receiving a cancer diagnosis can be overwhelming, but we are here to support you every step of the way. This guide is designed to help you understand your oncology benefits, navigate the healthcare system, and access the care you need.

We know that cancer treatment can be complex and challenging. That is why we are committed to providing you with the resources, care, and support that you may need to manage your condition and improve your quality of life.

If you are unfamiliar with any of the terminology used in this brochure, please refer to the descriptions listed at the end of this brochure.



Steps That You Need To Take If You Are Diagnosed With Cancer

Step 1: Register on the GEMS Oncology Programme

It is important to register on the GEMS Oncology Management Programme if you are diagnosed with cancer. Due to the complexity of the condition and the medical information required, your treating doctor will usually do this for you. Your registration will be active from the date of diagnosis for life as long as you remain a member of GEMS.

Your treating doctor (Oncologist) can register you using their oncology online webservice (e.g. SAOC B2B or eAuth) or by emailing oncologyauths@gems.gov.za.

Alternatively, they can contact the oncology management team on 0860 436 777 or via fax on 086 100 4367.

The following information will be required:

- Your GEMS membership number
- Your name and date of birth
- Doctor's details (name, practice number, contact details)
- Medical diagnosis codes (ICD-10 codes)
- Pathology and radiology results confirming your malignancy or cancer diagnosis

Step 2: Understand Your Benefits

Each benefit plan has specific limits and requirements for various oncology and treatments. Refer to 'Your Oncology Benefits' on page 4 to 5.

Step 3: Provider and Facility Access

You may choose to access treatment at state facilities or your chosen private oncologist or haematologist. Members on the Tanzanite One and EVO options must make use of the GEMS Hospital Network for hospital admissions. Voluntary use of a non-network hospital will result in a co-payment of R15 000. To view and download the GEMS Hospital Network list, please access the GEMS website.

Step 4: Authorisation of Treatment

Once registered on the Oncology Programme, your treating doctor (Oncologist) will need to send us your treatment plan for review. A funding decision will be made before starting your treatment.

Please note that GEMS will not cover your cancer treatment and related services from your Oncology Benefit unless it has been approved.

- **Submit your treatment plan:** all treatment plans are to be submitted using the **oncology online webservice** (preferred - e.g. SAOC B2B or eAuth) or via email to oncologyauths@gems.gov.za.
- **Authorisation confirmation:** GEMS will issue an authorisation number and letter detailing covered treatments, quantities, and validity period to you and your treating doctor.

Step 5: Ongoing Treatment and Updates

Your oncologist must inform GEMS of any changes to your treatment plan to ensure authorisation remains valid. They can contact GEMS through the **oncology online webservice** or via email.

Step 6: Submitting your Claim

All service providers are required to submit claims according to the approved authorisation. This ensures that the necessary approvals and guidelines are followed meticulously.

Refer to 'Submission of Claims on page 11.



Your Oncology Benefits

This section provides information on the type of oncology benefits that you have and any limits that may apply.

Benefit Option	Oncology Benefit	Specialised Drugs sub-limit	Oncologist consultations	General radiology and pathology	Specialised radiology	PET CT scan	Brachy-therapy	Transplant benefit
Notes (apply to all options)	Once the Oncology Benefit limit is depleted, the benefit is unlimited for PMBs	This is a sub-limit of the Oncology Benefit. Specialised Drugs include biological and similar specialised medicines		Specific investigations and monitoring include basic radiology, pathology. This is subject to a basket of authorised tariffs	Subject to pre-authorisation. Specialised radiology will pay from Oncology Benefit if PMB and Advanced Radiology Benefit is exhausted	Subject to pre-authorisation	Brachytherapy professional radiotherapist fees, seeds and consumables are covered under the following benefit:	Donor organ harvesting is limited to the Republic of South Africa Benefit limits include all cost associated with transplant, immunosuppressants and materials.
GEMS Onyx	Limited to R649 619 per family per year	Sub-limit of R439 078 per family per year	Covered from the Oncology Benefit	Covered from the Oncology Benefit	Covered from Advanced Radiology Benefit of R37 123 per family per year	One per family per year	Covered from the Oncology Benefit	Limited to R824 901 per beneficiary per year
GEMS Emerald	Limited to R494 945 per family per year	Sub-limit of R336 702 per family per year	Covered from the Oncology Benefit	Covered from the Oncology Benefit.	Covered from Advanced Radiology Benefit of R29 694 per family per year	One per family per year	Covered from the Oncology Benefit	Limited to R824 901 per beneficiary per year

Benefit Option	Oncology Benefit	Specialised Drugs sub-limit	Oncologist consultations	General radiology and pathology	Specialised radiology	PET CT scan	Brachy-therapy	Transplant benefit
GEMS Emerald Value	Limited to R494 945 per family per year. Subject to use of Hospital Network where admission is required	Sub-limit of R336 702 per family per year	Covered from the Oncology Benefit	Covered from the Oncology Benefit	Covered from Advanced Radiology Benefit of R29 694 per family per year.	One per family per year	Covered from the Oncology Benefit	Limited to R824 901 per beneficiary per year.
GEMS Ruby	Limited to R445 453 per family per year	Sub-limit of R336 702 per family per year	Covered from the Oncology Benefit	Covered from the Oncology Benefit	Covered from Advanced Radiology Benefit of R29 694 per family per year	One per family per year	Covered from the Oncology Benefit	Limited to R824 901 per beneficiary per year.
GEMS Beryl	Subject to annual hospital limit of R1 460 702 and sub-limit of R 292 135 per family per year	Subject to managed care rules, clinical guidelines used in public facilities and the Drug Reference Pricing	Covered from the Oncology Benefit	Covered from the Oncology benefit sublimit	Covered from Advanced Radiology Benefit sub-limit of R28 226 and subject to annual hospital limit	One per family per year	Covered from the Oncology Benefit	Limited to R824 901 per beneficiary per year
GEMS Tanzanite One	Subject to annual hospital limit of R316 308 and limited to PMBs Subject to use of hospital network or state facility	Subject to managed care rules and protocols. Limited to PMBs	Covered from the Oncology Benefit sublimit	Subject to PMB rules	Subject to annual limit and sub-limit of R10 122 or R15 183 if above limit is exceeded with first CT/MRI scan. Shared annual benefit.	One per family per year restricted to staging limited and included in the Advanced Radiology benefit	No benefit	Limited to PMBs. Subject to Overall annual limit and use of hospital network or state facility

What Does Your Oncology Benefit Cover?

The Oncology Benefit helps pay for your cancer treatment and follow-up care. All approved treatment costs are covered up to a certain amount per year. Refer to the table for detail on these benefit limits.



Here is what is covered:



Radiotherapy

Both in-hospital and out-of-hospital.



Chemotherapy and Oncology Medicines

Including chemotherapy, systemic, and hormonal therapy, whether in-hospital or out-of-hospital.



Brachytherapy

A type of internal radiotherapy.



Consumable Products

Supplies needed for chemotherapy or radiotherapy.



Supportive Medication

For managing pain, nausea, and other side effects of treatment.



Professional Fees

Oncologist consultations and procedures.



Monitoring and Follow-Up

Basic radiology and pathology tests. Advanced radiology (like CT Scans), if authorised, is also covered if your standard benefits run out.

Approval of Your Treatment Plan

When reviewing your treatment plan, we look at:

- Managed care protocols and processes.
- Clinical criteria and evidence-based protocols.
- Cost-effectiveness and affordability.
- Available oncology benefits and specialised drug benefits.
- Whether your treatment is a Prescribed Minimum Benefit.
- Medicines approved by the South African Health Products Regulatory Authority (SAHPRA), or with Section 21 authorisation and pre-authorisation.

NB: No funding for new uses of existing medicines considered experimental and not approved by our managed healthcare programme.

Note: Chemotherapy medicines that haven't shown a survival advantage of more than 3 months in advanced metastatic cancers are excluded unless approved by Scheme Rules.

All medicines will be subject to Drug Reference Pricing (DRP). Authorisation requests may be reviewed by a clinical panel.

Other applicable benefits

Hospital benefit

Surgery and hospital admissions for cancer treatment, excluding in-hospital chemotherapy and radiotherapy, are covered from **your in-hospital benefit**. Refer to your GEMS Member Guide for further details about what you need to know when getting admitted.

If you are on the Tanzanite One and EVO options, you must make use of a hospital on the GEMS Hospital Network for admission. Voluntary use of a non-network hospital will result in a co-payment of R15 000. To view and download the GEMS Hospital Network list, please access the GEMS website.

Advanced radiology benefit

Authorised advanced radiology e.g. CT scans and MRI scans are funded from your advanced radiology benefit. Once these benefits are depleted and if authorised, it will pay from your Oncology Benefit.

Transplant benefit

If you need a bone marrow or stem cell transplant, the Transplant Benefit will cover the costs. These costs are separate from your Oncology Benefit limit.

Donor Searches:

- Only local searches within South Africa are covered for all plans.

Benefit Limits:

- Each plan has a specific limit for the Transplant Benefit, as shown in the “Your Oncology Benefits” table.
- This limit covers all transplant-related costs, including materials and immunosuppressive medications.

Treatment for other conditions:

Conditions not directly related to cancer treatment (like depression) and long-term conditions from chemotherapy or radiotherapy are funded through other benefits, like Chronic Disease Benefit or acute benefit, subject to pre-authorisation.



Benefit cycle and benefit limits

We are here to support you through your cancer treatment journey. Here's what you need to know about your oncology benefits:

Please refer to the "Your Oncology Benefit" section for details on what's covered under your specific plan.

Your Oncology Benefit has an annual limit, which resets on January 1st each year. This limit applies to all costs associated with your approved treatment. Some sub-limits may also apply, e.g. for specialised drugs.

To access your oncology benefits, you will need to:

1. Register on our oncology programme.
2. Have an authorised treatment plan in place.

All costs to your approved treatment will be covered up to your annual limit, including Prescribed Minimum Benefits (PMBs).

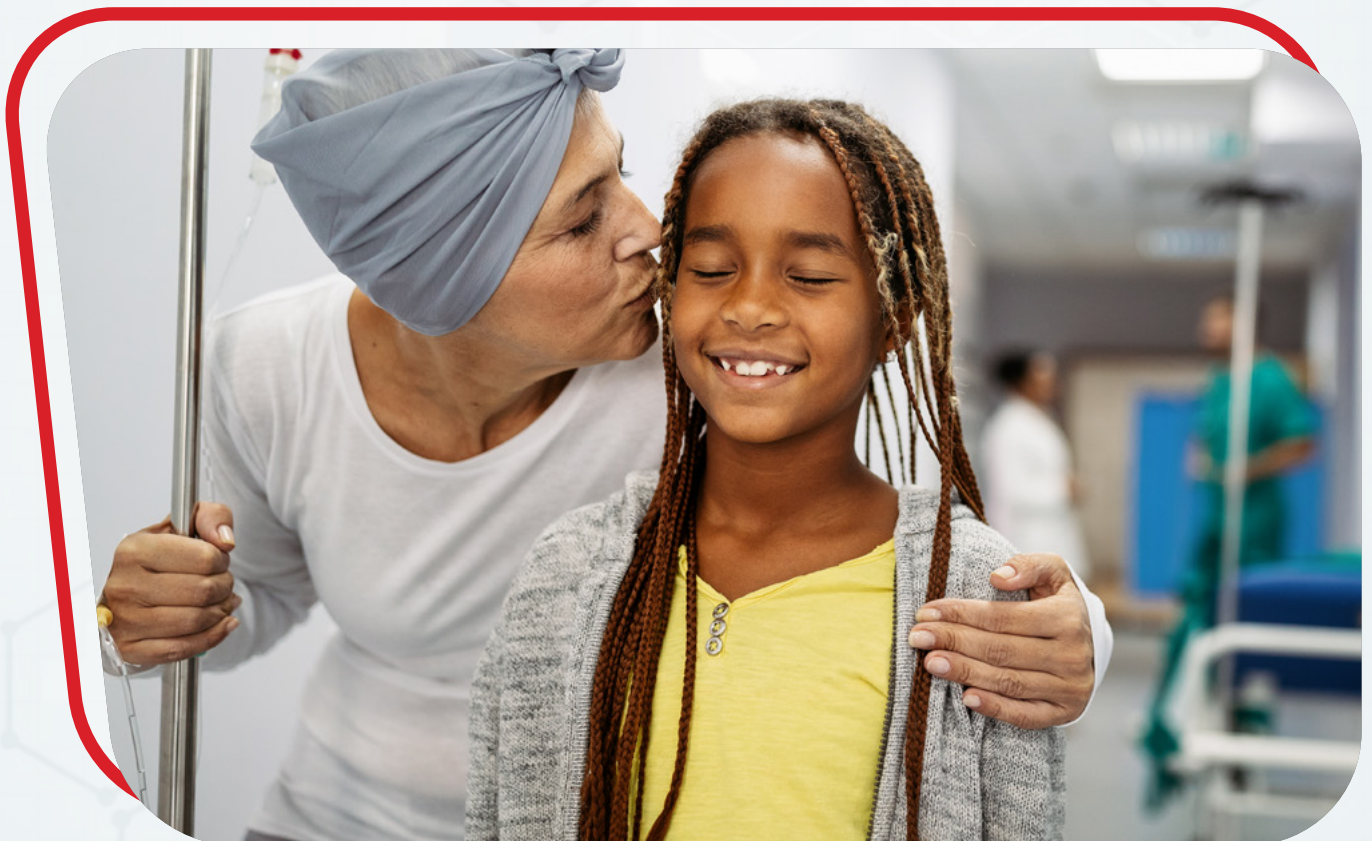
Once you have reached your annual oncology benefit limit, only treatments that fall under the Prescribed Minimum Benefits Level of Care (PMB LOC) will be

covered. Any additional costs not PMB related will be your responsibility if no ex-gratia approval in place.

If you have reached your limit, your doctor may apply for ex-gratia consideration on your behalf.

- Ex-gratia is a discretionary benefit which a Medical Scheme may consider funding. In addition to the benefits as per the registered Rules of a Medical Scheme.
- Scheme exclusions.
- Insufficient benefits (e.g., chronic benefits, prosthesis benefits).
- Managed care exclusions (after exhausting internal appeals).
- Funding above Scheme Rates
- Kindly note that ex-gratia consideration, is not a guarantee of payment, it is subject to review and approval.

Your provider can send the request via email to GEMSOncologyProviderEscalations@medscheme.co.za with the subject line "Ex-gratia Consideration".



GEMS Alternatives to Hospitalisation

When you need medical care that can be provided for at home instead of in a hospital, you are required to obtain authorisation that is subject to clinical criteria. The cost of this care will come from your overall annual limit and will not affect your day-to-day benefits.

How to Apply

Your doctor can then email a referral clinical motivation to Homebasedcare@medscheme.co.za.

Services Covered



Hospital at Home

Real-time hospital-grade monitoring at home, virtual and in-person visits, skilled nursing, access to additional medical services as needed, and protocols to quickly transfer you to a hospital if required.



Home Nursing

Assistance with mobilisation after a long-term illness, neonatal care, care for long-term ventilated members, stoma care, wound care and more.



Palliative Care

Available at home or in a hospice for terminally ill members, provides end-of-life care such as pain management.



Other Services

Prescribed treatments like intravenous (IV) therapy, out-patient Antibiotic Treatment (OPAT), home dialysis and home oxygen.

Step-down/sub-acute care.



GEMS Palliative Care Programme

GEMS offers a Palliative Care Programme for eligible members and their families. This programme provides quality care and holistic management during your cancer journey.

What the Programme Offers:

- Specialised palliative care for advanced-stage or metastatic cancer.
- Pain management and relief from psychological distress.
- Support for home-based care.

If you have been diagnosed with advanced-stage or metastatic cancer, or certain other serious cancers, you may qualify for this programme, depending on enrolment criteria.

You may enquire with the oncology disease management team, your treating oncologist or the GEMS call centre about access to this programme.

Submission Of Claims

We want to make sure that we can pay for your cancer treatment without any delay. To do so, we need your Healthcare Provider to include the appropriate ICD-10 diagnosis code on all accounts, including investigations such as radiology and pathology. These codes help us to ensure that your claim is paid from the correct benefit pool.

Please check with your Healthcare Provider to ensure that these codes are included on your claims.

Claims can be submitted via the below processes:

- Real time claims
- Post: GEMS, Private Bag X782, Cape Town, 8000
- Fax: 0861 00 4367
- Email: enquiries@gems.gov.za; or a
- Drop off: GEMS walk-in centre



Frequently Asked Questions

1. How often do I need to re-authorise my treatment?

Your oncologist will send a treatment plan that shows how long you need treatment. If there are any changes, they will need to be approved again through the regular process.

2. Can I get a second opinion?

Yes, second opinions are covered by the Oncology Benefit, if they follow Scheme Rules.

3. What can I do if my treatment plan is declined by GEMS?

Your Oncologist can send a letter of motivation for appeal for the declined treatment for GEMS to consider. You will be issued with an explanation as to why your treatment is not covered if it remains declined.

There are two steps that a Complainant must follow before requesting the GEMS Dispute Committee to take a decision on a complaint:

- **Step 1:** Call the GEMS provider call centre number on 086 043 6777 and inform the agent of the complaint and request that the complaint be solved.
- **Step 2:** If the complaint is not solved to the Complainant's satisfaction after the call to the call centre, a letter of complaint for the attention of the GEMS Principal Officer must be written. GEMS will acknowledge receipt in writing to the Complainant within 24 hours of receiving the letter. GEMS will then try to resolve the matter within 30 days. Once the complaint has been processed, the Complainant will be notified in writing of GEMS's findings.

Lodge a complaint through any of the below channels:

- Email: Complaints@gems.gov.za
- Call Centre: 0860 436 777
- Post: GEMS, Private Bag X782, Cape Town, 8000
- Fax: 0861 00 43 67



4. How does the appeal process work?

Funding decisions i.e. authorisations are based on clinical indications and treatment within Scheme rules and benefits. A Scheme member or duly authorised representative acting on behalf of the member or the treating healthcare professional (the appellant/s) may appeal the funding decision taken during the utilisation review process. This decision is perceived to be contrary to Scheme rules and benefits and/or to the appellant/s detriment. The appeal is to re-evaluate the initial funding decision.

Structures are in place to ensure that appeals are dealt with at the most efficient level and that decisions are taken with due clinical and legal consideration within the relevant Scheme rules and benefits. The following levels are available to deal with appeals.

First level:

Medical advisor of the relevant service; Dental or Hospital Benefit Management to consider first level appeal.

Second level:

Clinical Review Committee:
A committee consisting of medical advisors and representatives from the Health Policy Unit (HPU). An external clinical expert may attend, or the opinion provided by an external clinical expert may be submitted to the committee.

Third level:

Escalated Appeals Forum includes the medical advisor presenting the case, key members of the original relevant Clinical Review Committee and the Group Functional Professional and/or Senior Medical Advisor who were not in attendance at the first appeal meeting. The committee convenes as required, considering the urgency associated with the case.

You can submit all your appeals by email to GEMSOncologyProviderEscalations@medscheme.co.za or call the GEMS Member Call Centre on 0800 00 4367.

Glossary Of Terms

Some of the terms used in this document are detailed below.

TERMINOLOGY	DESCRIPTION
Advanced Radiology Benefit	This is a benefit that is specific to advanced radiology services, whether done in- or out-of-hospital. Advanced radiology includes MRIs and CT scans. You have access to a limited benefit for these services. Once you benefit is exceeded, you will need to pay for you advanced radiology, unless it is a PMB service.
Ex-gratia	Ex-gratia is a discretionary benefit which a Medical Scheme may consider funding. In addition to the benefits as per the registered Rules of a Medical Scheme.
Shortfall	Shortfalls occur when the service provider charges more than the set tariff amount covered by GEMS. In other words, it is the difference between what the provider charges and what GEMS pays for.
Co-payment	A co-payment is an amount that you, as a member, must pay directly to the healthcare provider at the time of service. Co-payments are applicable for different reasons. It is usually a fixed percentage or a specific monetary value of the total cost of a medical expense. Co-payments can apply to various services, such as hospitalisation, use of non-network pharmacy specialist consultations, or certain medications.
Consumables	In oncology treatment, consumables refer to medical supplies and products typically used to administer cancer therapies. These include IV tubes and needles, infusion pumps and accessories, chemotherapy bags and syringes, etc.
Designated Service Provider (DSP)	Designated service provider means a health care provider or group of providers selected by the medical scheme concerned as the preferred provider or providers to provide to its members diagnosis, treatment and care in respect of one or more Prescribed Minimum Benefit (PMB) condition.
Emergency medical condition	An emergency medical condition, or emergency, is the sudden and unexpected onset of a health condition that requires immediate medical and surgical treatment, where failure to provide medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person's life in serious jeopardy.
ICD-10 code	A clinical code that describes and classifies a diagnosis or disease in a standardised format. This diagnostic coding standard is owned and maintained by the World Health Organisation (WHO).

TERMINOLOGY	DESCRIPTION
Drug Reference Price (DRP)	DRP is a combination of the Medicine Price List (MPL) and Therapeutic Reference Pricing (TRP). This new pricing approach is designed to enhance our service and offer you greater benefits. This will also ensure you have access to a wider range of medicines. DRP is a system used to set a standard or benchmark price for medications within a specific category or group. DRP is used to determine the maximum amount the Scheme will reimburse for medicines that are therapeutically similar or have generic equivalents.
Prescribed Minimum Benefit (PMB)	In South Africa, Prescribed Minimum Benefits (PMBs) are a set of minimum medical services and treatments that medical schemes are legally required to cover, in terms of the Medical Schemes Act of 1998 (Act No. 131 of 1998) and its Regulations. PMBs ensure that members have access to essential healthcare services. All medical schemes must cover the costs related to the diagnosis, treatment and care of: • An emergency medical condition. • A defined list of 271 diagnoses. • A defined list of 27 chronic conditions. To access Prescribed Minimum Benefits (PMBs), there are rules defined by the Council for Medical Schemes (CMS) that apply: • Your medical condition must qualify for cover and be part of the defined list of Prescribed Minimum Benefit conditions. • The treatment needed must match the treatments in the defined benefits. • You must use designated service providers (DSPs) in your options network, where applicable, except in the case of an emergency.
South African Health Products Regulatory Authority (SAHPRA)	SAHPRA is South Africa's national regulatory authority responsible for ensuring the safety, efficacy and quality of healthcare products in South Africa.
Supportive medication	Supportive medication in oncology refers to drugs used to manage symptoms, side effects and complications related to cancer treatment, rather than directly treating the cancer itself.



Useful Resources

SERVICE	PURPOSE	TELEPHONE	EMAIL ADDRESS/LINKS FOR QUERIES
GEMS contact centre	General queries related to GEMS	0860 436 777	enquiries@gems.gov.za
GEMS website	View GEMS products and services	-	www.gems.gov.za
GEMS tariff file, formularies and forms	To view GEMS tariff file, formularies and forms	-	www.gems.gov.za, select Healthcare Providers > Select either Tariff file, Formulary Lists or ICD-10 Codes from the menu.
GEMS network contract management and Provider Liaison Consultants	Contracting queries, REPI2 categorisation queries or Provider Liaison Consultant assistance	-	REO, Tanzanite One and Beryl: networkscontracting@gems.gov.za
Chronic medicine management – new registrations and updates	Chronic registrations	0860 436 777	chronicdsp@gems.gov.za
Chronic medicine authorisation queries	Queries related to the authorisation of chronic medicines	0860 436 777	chronicauths@gems.gov.za
Fraud Hotline	Fraud-related matters	0800 212 202	gems@thehotline.co.za office@thehotline.co.za
Hospital pre-authorisation	All hospital pre-authorisations for non-emergency events	0860 436 777	hospitalauths@gems.gov.za
Submission of claims	Submissions of claims for GEMS beneficiaries	0860 436 777	enquiries@gems.gov.za
Queries of claims	Queries relating to a claim for a GEMS beneficiary	0860 436 777	enquiries@gems.gov.za
Member Oncology Contact Centre	Oncology member related queries	0800 00 4367	oncologyauths@gems.gov.za
Provider Oncology Contact Centre	Oncology provider related queries	0860 436 777	
Ambulatory PMB	Out-of-hospital PMB queries	0860 436 777	enquiries@gems.gov.za
HIV/Aids management	HIV/AIDS related queries	0860 436 736	hiv@gems.gov.za
Alignd Serious Illness Benefit	Assistance with managing a serious illness.	0800 00 4367	referrals@alignd.co.za info@alignd.co.za
GEMS Palliative Care Programme	Assistance with managing a serious illness.	0800 00 4367	referrals@alignd.co.za
GEMS Alternatives to Hospitalisation	For medical care at home.	0800 00 4367	Homebasedcare@medscheme.co.za

Notes

Get in touch

General Enquiries



EMAIL
enquiries@gems.gov.za



FAX
0861 00 4367



POSTAL ADDRESS
GEMS, Private Bag X782
Cape Town, 8000



WEB
www.gems.gov.za



GEMS CONTACT CENTRE
0800 00 4367



GEMS FRAUD HOTLINE
0800 212 202
gems@theline.co.za



GEMS EMERGENCY SERVICES
0860 44 4367

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YOUTUBE
[@GEMSMEDICALAID1](https://www.youtube.com/GEMSMEDICALAID1)



LINKEDIN
Government Employees Medical Scheme



Have you downloaded our App yet?

Download the mobile Member App or register on the Member Portal and experience the BRILLIANT features from the comfort of your home, or on the go, to make your life easier!



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Disclaimer

Every effort has been made to ensure that all information provided to you is factual and accurate. However, in the event of a dispute, the Scheme Rules shall apply. You can view the Scheme Rules on our website at www.gems.gov.za. The information provided on this correspondence is for information purposes only and cannot replace medical advice from your professional healthcare provider. We are committed to protecting your personal data. Your right to privacy and security is very important to us. The Government Employees Medical Scheme (GEMS) and its contracted Service Provider Network (SPN) treat personal information as private and confidential. We collect personal information for the purposes set out in the Scheme's Registered Rules or otherwise communicated to you and we use your information for a number of different purposes, for example to provide our services to members and others and to meet our legal and regulatory obligations. For more detailed information on how and why we use your information, including the rights in relation to your personal data, and our legal grounds for using it, please view the GEMS Protection of Personal Information Policy and Promotion of Access to Information Manual on our website.