

OPTION SELECTION

2026

WHAT'S NEW IN 2026

Crafted for **You**
and **Your Family's**
Unique Needs

DISCOVER THE
BRILLIANCE
OF
GEMS



2026 Benefit Changes

GEMS continually strives to provide rich benefits that deliver real value to its members. Below is a list of the 2026 benefit changes. It is important to note that the 2026 benefit changes most significantly impact members on the Tanzanite One and Ruby options. Please ensure that you familiarise yourself with the changes listed below.

TANZANITE ONE

- ✓ Effective 1 January 2026, restructuring of Hospital Cover: In-hospital benefits are subject to Prescribed Minimum Benefit (PMB) conditions only and subject to PMB legislation.
- ✓ Effective 1 January 2026, Tanzanite One radiology, pathology and medicine formularies will be restructured. Members and Providers must familiarise themselves with the new formularies to ensure adequate cover.
- ✓ Effective 1 January 2026, Tanzanite One members now have up to eight (8) out-of-hospital consultations per beneficiary, per year combined between their Family Practitioner and Nurse. Thereafter, from the 9th consultation onwards pre-authorisation will be required for each additional consultation.
- ✓ Members need to use a state or GEMS network hospital for all admissions. The voluntary use of a non-network private hospital will result in a R15 000 co-payment.

TANZANITE ONE

BERYL

- ✓ Advanced radiology for Tanzanite One and Beryl: This benefit allows for a sub-limit of R15 183 per family per annum up to a maximum of one (1) CT or MRI scan per beneficiary per annum.

RUBY

- ✓ Members need to use hospitals on the GEMS Network for all admissions. The voluntary use of a non-network hospital will result in a R15 000 co-payment.
- ✓ The Maternity benefit will require members to use a state or network facility otherwise a R15 000 co-payment will apply.

BERYL

RUBY

EMERALD

EMERALD VALUE

ONYX

- ✓ A co-payment of R1000 has been introduced for all elective gastroscopies and/or colonoscopies performed in acute hospitals.

ALL OPTIONS

- ✓ Male circumcision will only be covered out-of-hospital, unless it is medically necessary to be done in-hospital, subject to a limit.
- ✓ Wheelchair frequency has been increased to once every 36 months per beneficiary.
- ✓ PAP devices which includes CPAP, APAP, BIPAP and VPAP (inclusive of accessories) share separate benefits. One (1) device every 36 months per beneficiaries subject to available benefits.
- ✓ The benefit extension will include outpatient intravenous (IV) therapy, including but not limited to home-based care, subject to pre-authorisation and managed processes.
- ✓ Benefit limits for 2026 remain the same as 2025.



Chronic Disease List (CDL)

The **Tanzanite One** option covers the following list of chronic conditions which are **Prescribed Minimum Benefits (PMB)**, subject to managed care protocols, processes and formularies.

TANZANITE ONE

PMB Conditions

Addison's Disease; Asthma; Bipolar Mood Disorder; Bronchiectasis; Cardiac Failure; Cardiomyopathy; Chronic Renal Disease; Coronary Artery Disease; COPD; Crohn's Disease; Diabetes Insipidus; Diabetes Type 1; Diabetes Type 2; Dysrhythmias; Epilepsy; Erythematosus; Glaucoma; Haemophilia; HIV/AIDS; Hyperlipidaemia; Hypertension; Hyperthyroidism; Multiple Sclerosis; Parkinson's Disease; Rheumatoid Arthritis; Schizophrenia; Systemic Lupus; Ulcerative Colitis

TANZANITE ONE

Additional (non-PMB) conditions

GEMS has approved a range of additional chronic conditions for which members can enjoy cover, depending on the benefit option they are on. Medicine for these conditions will be covered from your chronic medicine benefit. Cover for these conditions is also based on certain formularies and a reference price system, so you may incur co-payments even before your chronic medicine benefit is depleted. Once this benefit is depleted, you will have to pay from your own pocket.

Anxiety

Attention Deficit and Hyperactivity Disorder

Depression*

***Chronic DTP PMB conditions and Depression: Subject to section A: Statutory Prescribed Minimum Benefits ("PMBs") of Annexure C of the GEMS Rules.**

Chronic Disease List (CDL)

The Ruby option covers the following list of chronic conditions which are Prescribed Minimum Benefits (PMB), subject to managed care protocols, processes and formularies.

PMB Conditions

RUBY

Addison's Disease; Asthma; Bipolar Mood Disorder; Bronchiectasis; Cardiac Failure; Cardiomyopathy; Chronic Renal Disease; Coronary Artery Disease; COPD; Crohn's Disease; Diabetes Insipidus; Diabetes Type 1; Diabetes Type 2; Dysrhythmias; Epilepsy; Erythematosus; Glaucoma; Haemophilia; HIV/AIDS; Hyperlipidaemia; Hypertension; Hyperthyroidism; Multiple Sclerosis; Parkinson's Disease; Rheumatoid Arthritis; Schizophrenia; Systemic Lupus; Ulcerative Colitis

RUBY

Additional (non-PMB) conditions

GEMS has approved a range of additional chronic conditions for which members can enjoy cover, depending on the benefit option they are on. Medicine for these conditions will be covered from your chronic medicine benefit. Cover for these conditions is also based on certain formularies and a reference price system, so you may incur co-payments even before your chronic medicine benefit is depleted. Once this benefit is depleted, you will have to pay from your own pocket.

Anxiety

Attention Deficit and Hyperactivity Disorder

Benign Prostatic Hyperplasia

Depression*

Menniere's Disease

Osteoarthritis

Psoriasis

Thrombo-Embolic Disease*

***Chronic DTP PMB conditions and Depression: Subject to section A: Statutory Prescribed Minimum Benefits ("PMBs") of Annexure C of the GEMS Rules.**

Chronic Disease List (CDL)

The Beryl covers the following list of chronic conditions which are Prescribed Minimum Benefits (PMB), subject to managed care protocols, processes and formularies.

PMB Conditions

BERYL

Addison's Disease; Asthma; Bipolar Mood Disorder; Bronchiectasis; Cardiac Failure; Cardiomyopathy; Chronic Renal Disease; Coronary Artery Disease; COPD; Crohn's Disease; Diabetes Insipidus; Diabetes Type 1; Diabetes Type 2; Dysrhythmias; Epilepsy; Erythematosis; Glaucoma; Haemophilia; HIV/AIDS; Hyperlipidaemia; Hypertension; Hyperthyroidism; Multiple Sclerosis; Parkinson's Disease; Rheumatoid Arthritis; Schizophrenia; Systemic Lupus; Ulcerative Colitis

BERYL

Additional (non-PMB) conditions

GEMS has approved a range of additional chronic conditions for which members can enjoy cover, depending on the benefit option they are on. Medicine for these conditions will be covered from your chronic medicine benefit. Cover for these conditions is also based on certain formularies and a reference price system, so you may incur co-payments even before your chronic medicine benefit is depleted. Once this benefit is depleted, you will have to pay from your own pocket.

Anxiety

Attention Deficit and Hyperactivity Disorder

Depression*

***Chronic DTP PMB conditions and Depression: Subject to section A: Statutory Prescribed Minimum Benefits ("PMBs") of Annexure C of the GEMS Rules.**

Chronic Disease List (CDL)

The Emerald and Emerald Value option covers the following list of chronic conditions which are Prescribed Minimum Benefits (PMB), subject to managed care protocols, processes and formularies.

PMB Conditions

EMERALD

Addison's Disease; Asthma; Bipolar Mood Disorder; Bronchiectasis; Cardiac Failure; Cardiomyopathy; Chronic Renal Disease; Coronary Artery Disease; COPD; Crohn's Disease; Diabetes Insipidus; Diabetes Type 1; Diabetes Type 2; Dysrhythmias; Epilepsy; Erythematosus; Glaucoma; Haemophilia; HIV/AIDS; Hyperlipidaemia; Hypertension; Hyperthyroidism; Multiple Sclerosis; Parkinson's Disease; Rheumatoid Arthritis; Schizophrenia; Systemic Lupus; Ulcerative Colitis

EMERALD VALUE OPTION

EMERALD

Additional (non-PMB) conditions

EMERALD VALUE OPTION

Additional (non-PMB) conditions

GEMS has approved a range of additional chronic conditions for which members can enjoy cover, depending on the benefit option they are on. Medicine for these conditions will be covered from your chronic medicine benefit. Cover for these conditions is also based on certain formularies and a reference price system, so you may incur co-payments even before your chronic medicine benefit is depleted. Once this benefit is depleted, you will have to pay from your own pocket.

Acne

Allergic Rhinitis

Alzheimer's Disease

Ankylosing Spondylitis

Anorexia Nervosa

Anxiety

Attention Deficit and Hyperactivity Disorder

Barrett's Esophagus

Benign Prostatic Hyperplasia

Bulimia Nervosa

Delusional Disorder

Dementia, including (but not limited to) Multi-infarct, Subcortical, Vascular and Alcohol

Depression*

Dermatitis

Eczema

Gastro Oesophageal Reflux Disease

Generalised Anxiety Disorder

Gout

Huntington's Disease

Hypoparathyroidism*

Hypothyroidism*

EMERALD Additional (non-PMB) conditions	EMERALD VALUE OPTION Additional (non-PMB) conditions
Interstitial Lung Disease	
Menniere's Disease	
Menopause*	
Myasthenia Gravis	
Narcolepsy	
Neuropathies	
Obsessive Compulsive Disorder	
Osteoarthritis	
Osteopenia	
Osteoporosis	
Paget's Disease	
Post-Traumatic Stress Syndrome	
Psoriasis	
Stroke*	
Systemic Sclerosis	
Thrombocytopenic Purpura*	
Thrombo-Embolic Disease*	
Tourette's Syndrome	
Valvular Heart Disease*	
Zollinger-Ellison Syndrome	

***Chronic DTP PMB conditions and Depression: Subject to section A: Statutory Prescribed Minimum Benefits ("PMBs") of Annexure C of the GEMS Rules.**

Chronic Disease List (CDL)

The Onyx option covers the following list of chronic conditions which are Prescribed Minimum Benefits (PMB), subject to managed care protocols, processes and formularies.

PMB Conditions

ONYX

Addison's Disease; Asthma; Bipolar Mood Disorder; Bronchiectasis; Cardiac Failure; Cardiomyopathy; Chronic Renal Disease; Coronary Artery Disease; COPD; Crohn's Disease; Diabetes Insipidus; Diabetes Type 1; Diabetes Type 2; Dysrhythmias; Epilepsy; Erythematosis; Glaucoma; Haemophilia; HIV/AIDS; Hyperlipidaemia; Hypertension; Hyperthyroidism; Multiple Sclerosis; Parkinson's Disease; Rheumatoid Arthritis; Schizophrenia; Systemic Lupus; Ulcerative Colitis

ONYX

Additional (non-PMB) conditions

GEMS has approved a range of additional chronic conditions for which members can enjoy cover, depending on the benefit option they are on. Medicine for these conditions will be covered from your chronic medicine benefit. Cover for these conditions is also based on certain formularies and a reference price system, so you may incur co-payments even before your chronic medicine benefit is depleted. Once this benefit is depleted, you will have to pay from your own pocket.

Acne	Interstitial Lung Disease
Allergic Rhinitis	Menniere's Disease
Alzheimer's Disease	Menopause*
Ankylosing Spondylitis	Myasthenia Gravis
Anorexia Nervosa	Narcolepsy
Anxiety	Neuropathies
Attention Deficit and Hyperactivity Disorder	Obsessive Compulsive Disorder
Barrett's Esophagus Disorder	Osteoarthritis
Benign Prostatic Hyperplasia	Osteopenia
Bulimia Nervosa	Osteoporosis
Delusional Disorder	Paget's Disease
Dementia, including (but not limited to) Multi-infarct, Subcortical, Vascular and Alcohol	Post-Traumatic Stress Syndrome
Depression*	Psoriasis
Dermatitis	Stroke*
Eczema	Systemic Sclerosis Disorder
Gastro Oesophageal Reflux Disease	Thrombocytopenic Purpura*
Generalised Anxiety Disorder	Thrombo-Embolic Disease*
Gout	Tourette's Syndrome
Huntington's Disease	Valvular Heart Disease*
Hypoparathyroidism*	Zollinger-Ellison Syndrome
Hypothyroidism*	

*Chronic DTP PMB conditions and Depression: Subject to section A: Statutory Prescribed Minimum Benefits ("PMBs") of Annexure C of the GEMS Rules.

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Client Liaison Office (CLO)

Driving empowerment through education.

The CLO unit drives member education sessions and workshops to empower members and improve understanding of benefits, Scheme rules and processes.

If you would like one of our CLOs to visit your department, please send an email to clo@gems.gov.za



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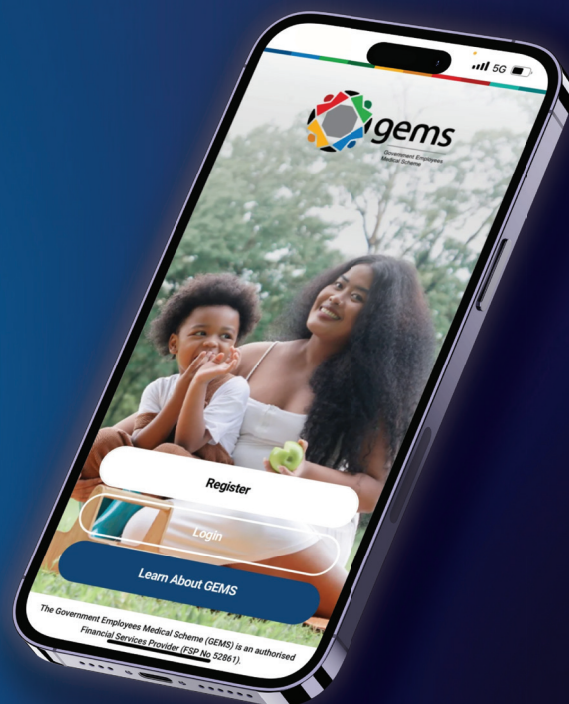
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Disclaimer

This brochure contains a summary of the healthcare benefits offered by GEMS for the year 2026 and the required monthly contributions/premiums associated therewith ("2026 GEMS Benefits and Contributions"). The 2026 GEMS Benefits and Contributions forms part of the GEMS Rules, which are subject to the approval of the Council for Medical Schemes ("CMS"). Benefits are subject to network arrangements and Scheme Rules.

GEMS is an authorised Financial Services Provider (FSP No. 52861).

This brochure provides factual information only and does not constitute financial advice as defined under the Financial Advisory and Intermediary Services (FAIS) Act. Members who require financial advice regarding their medical scheme option selection should contact the Call Centre for referral to an accredited advisor.

In the event of a discrepancy between the wording of this brochure and that of the published GEMS Rules, the latter will take precedence. For the full version of the 2026 GEMS Benefits and Contributions, kindly refer to Annexures B, C, D, E, F and G of the GEMS Rules, which may be found on the GEMS website at www.gems.gov.za. You may also contact us directly on 0800 00 4367 (toll-free) to request a copy.