

Blood account?

The services associated with the provision of blood by SANBS is a Prescribed Minimum Benefit (PMB), or in some cases constitutes emergency care, even if your healthcare started out as elective. Medical schemes are, by law, obliged to settle the amount claimed in full and without any co-payment.

We therefore urge you to contact your medical scheme to urgently settle this account.

Should your medical scheme not pay the claim in full or partially, you could refer this to the Council of Medical Schemes (CMS), as a complaint. The CMS regulates all medical schemes and has its mission to:

- “**protect the public** and informing them about their rights, obligations and other matters, in respect of medical schemes;
- ensure that **complaints raised by members** of the public are handled appropriately and speedily;”

You may use the attached framework as a guide to lodge such a complaint at the CMS with your query.

Although we could claim these amounts from you, we believe that the right way to approach this is to ensure that the entity liable in law to cover these costs, do so. As a not-for-profit entity we understand how difficult times are for patients, and SANBS is here to support our donors, and the beneficiaries of blood and blood products. If you have any questions or queries, please contact us on the following numbers: Toll free: 0800 11 90 31

sanbs.org.za   

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