

**APPEAL COMMITTEE OF THE COUNCIL FOR MEDICAL SCHEMES**

In the matter between:



**E**

Appellant

and

**REGISTRAR OF MEDICAL SCHEMES**

First Respondent

**DISCOVERY MEDICAL SCHEME**

Second Respondent

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**RULING**

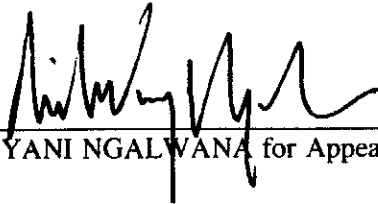
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1 This is an appeal against the Registrar's finding that the information sought by the member from the scheme as regards his membership had indeed been given to him. The member maintains that the scheme never provided him with "policy documentation" in relation to his membership of the scheme. He, however, admits that he has submitted claims to the schemes which were paid.

- 2 The scheme says it has delivered the documentation to the member on numerous occasions directly to him and through his broker and employer.
- 3 Later, the member wants the scheme to pay for certain medication which is not covered by the scheme. He also wants the return of his premiums.
- 4 There is no basis for any of the grounds of appeal. This is a matter which should never have come before this committee in the first place.
- 5 The documents were provided to the member. He was clearly in no doubt that he was a member of the scheme as he has submitted claims which were paid by the scheme.
- 6 Since the member has submitted claims to the scheme previously, he can have no basis for claiming a return of his premiums. The member confirmed that he does not dispute that he is a member of the scheme.
- 7 As regards the funding of medication not covered in terms of the scheme rules, the scheme can never be expected to act contrary to its rules. The member has advanced no basis for an ex gratis funding either.

**Finding**

8 In the circumstances, the appeal must fail.



VUYANI NGALWANA for Appeal Committee

*For the Appellant:* Mr E [REDACTED]

*For the 2<sup>nd</sup> respondent:* Ms S [REDACTED] Dr K [REDACTED] Y [REDACTED]

*Date of hearing:* 26 November 2009

*Date of Ruling:* 02 December 2009