Individual contributions

Ingwe Option		Hospital	Chronic	Day-to-day	P	A	C
Monthly income	<= R725	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R439	R439	R378
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R439	R439	R396
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R439	R439	R439
	R726 - R7 150	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R719	R719	R388
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R905	R905	R414
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R1 175	R1 175	R466
	R7 151 - R9 450	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R824	R824	R397
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R1 151	R1 151	R430
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R1 644	R1 644	R497
	R9 451 - R13 500	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R961	R961	R416
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R1 602	R1 602	R471
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R2 238	R2 238	R523
	R13 501 +	State	Ingwe Primary Care Network	Ingwe Primary Care Network	R1 661	R1 661	R499
		Ingwe Network	Ingwe Primary Care Network	Ingwe Primary Care Network	R2 269	R2 269	R668
		Any	Ingwe Active Primary Care Network	Ingwe Active Primary Care Network	R2 872	R2 872	R833

Evolve Option	Hospital	Chronic		P	A	C
	Evolve Network	State		R1 294	R1 294	R1 294

Custom Option	Hospital	Chronic		P	A	C
	Associated	Any		R2 319	R1 830	R818
		Associated		R2 106	R1 633	R744
		State		R1 642	R1 242	R582
	Any	Any		R2 767	R2 221	R988
		Associated		R2 496	R1 950	R907
		State		R2 090	R1 577	R766

Incentive Option	Hospital	Chronic		P	A	C
	Associated	Any	**Total contribution**	**R3 301**	**R2 656**	**R1 233**
			Risk contribution	R2 971	R2 390	R1 110
			Savings 10%	R330	R266	R123
			Annual Savings	R3 960	R3 192	R1 476
		Associated	**Total contribution**	**R2 988**	**R2 377**	**R1 134**
			Risk contribution	R2 689	R2 139	R1 021
			Savings 10%	R299	R238	R113
			Annual Savings	R3 588	R2 856	R1 356
		State	**Total contribution**	**R2 141**	**R1 690**	**R821**
			Risk contribution	R1 927	R1 521	R739
			Savings 10%	R214	R169	R82
			Annual Savings	R2 568	R2 028	R984
	Any	Any	**Total contribution**	**R3 732**	**R3 032**	**R1 454**
			Risk contribution	R3 359	R2 729	R1 309
			Savings 10%	R373	R303	R145
			Annual Savings	R4 476	R3 636	R1 740
		Associated	**Total contribution**	**R3 251**	**R2 609**	**R1 278**
			Risk contribution	R2 926	R2 348	R1 150
			Savings 10%	R325	R261	R128
			Annual Savings	R3 900	R3 132	R1 536
		State	**Total contribution**	**R2 658**	**R2 094**	**R1 051**
			Risk contribution	R2 392	R1 885	R946
			Savings 10%	R266	R209	R105
			Annual Savings	R3 192	R2 508	R1 260

Extender Option	Hospital	Chronic		P	A	C
	Associated	Any	**Total contribution**	**R6 244**	**R5 029**	**R1 767**
			Risk contribution	R4 683	R3 772	R1 325
			Savings 25%	R1 561	R1 257	R442
			Annual Savings	R18 732	R15 084	R5 304
			Threshold	R22 900	R20 000	R6 600
		Associated	**Total contribution**	**R5 729**	**R4 612**	**R1 648**
			Risk contribution	R4 297	R3 459	R1 236
			Savings 25%	R1 432	R1 153	R412
			Annual Savings	R17 184	R13 836	R4 944
			Threshold	R22 900	R20 000	R6 600
		State	**Total contribution**	**R5 033**	**R3 817**	**R1 480**
			Risk contribution	R3 775	R2 863	R1 110
			Savings 25%	R1 258	R954	R370
			Annual Savings	R15 096	R11 448	R4 440
			Threshold	R22 900	R20 000	R6 600
	Any	Any	**Total contribution**	**R7 101**	**R5 719**	**R2 037**
			Risk contribution	R5 326	R4 289	R1 528
			Savings 25%	R1 775	R1 430	R509
			Annual Savings	R21 300	R17 160	R6 108
			Threshold	R22 900	R20 000	R6 600
		Associated	**Total contribution**	**R6 357**	**R5 120**	**R1 829**
			Risk contribution	R4 768	R3 840	R1 372
			Savings 25%	R1 589	R1 280	R457
			Annual Savings	R19 068	R15 360	R5 484
			Threshold	R22 900	R20 000	R6 600
		State	**Total contribution**	**R5 713**	**R4 691**	**R1 679**
			Risk contribution	R4 285	R3 518	R1 259
			Savings 25%	R1 428	R1 173	R420
			Annual Savings	R17 136	R14 076	R5 040
			Threshold	R22 900	R20 000	R6 600

Summit Option	Hospital	Chronic	Day-to-day	P	A	C
	Any	Freedom-of-choice	Freedom-of-choice	R10 187	R8 147	R2 340

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

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