AMENDMENTS TO THE GENERAL REGULATIONS FOR THE SOUTH AFRICAN NATIONAL DEFENCE FORCE AND THE RESERVE

The Minister of Defence has, in terms of Section 9(2)(a) and 87(1) of the Defence Act, 1957 (Act No. 44 of 1957), promulgated the regulations in the Schedule.

SCHEDULE

Definition


2. The Regulations are hereby amended by the substitution of Chapter XV with the following new Chapter XV
CHAPTER XV
MEDICAL MATTERS

Definitions

1. In this Chapter, unless the context otherwise indicates –

“accommodation expenses” means such expenses relating to accommodation and
meals as described in the DODI on inland accommodation expenditure, but does not
include the cost of travel;

“Accountant” means a person who is responsible for the entire financial control of
the Fund;

“administrator” means a person who is appointed as such in terms of regulation
19(5)(a)(i);

“allotted category” means a category of fitness allotted to a person in terms of
regulation 3;

“beneficiary” means any beneficiary contemplated in regulation 21(3), or 30(1);

“Board” means the Board of Trustees contemplated in regulation 19(1);

“category of fitness” means a standard of physical and mental fitness determined
and described in terms of regulation 2;

“child” means any—

(a) natural child of a member or beneficiary (including the natural child of an
unmarried member or beneficiary born outside of marriage);

(b) natural child of a member or beneficiary born out of wedlock and later
legitimised by the subsequent marriage of the member or beneficiary with the
other natural parent under section 4 of the Children’s Status Act, 1987, (Act No
82 of 1987);

(c) child adopted by a member or beneficiary under the provisions referred to in
the definition of “adopted child” of the Child Care Act, 1983 (Act 74 of 1933);

(d) child for whose health care a member or beneficiary is responsible or liable for
under a court order; and
(e) minor stepchild of a member or beneficiary, which child is not a beneficiary of a registered medical scheme to which the natural or legal father or mother, is a contributor, but excluding any child who is in foster care of the member or beneficiary or his or her spouse.

“compelled to demilitarise” means, that due to the authorised demilitarisation of a post with a military grading, by conversion, to that of a grading in terms of the Public Service Act, 1994 (Act No 103 of 1994), the event that led to the demilitarisation of the SANDF incumbent of such post, as consented to, to a DOD employee serving in terms of the aforementioned Public Service Act.

“dependant” means -

(a) the spouse or spouses of a member of the Permanent Force or of any auxiliary service under the Act (not being the Service Corps) or beneficiary of the Fund, but excluding the spouse of a member serving in the STS and excluding the spouse of any member of the said Service Corps: Provided that-

(i) such spouse or spouses is/are not (a) member/beneficiary/beneficiaries of a registered medical scheme or receives no medical or health support from any other provider; and

(ii) where such spouse or spouses are employees and their service conditions and benefits provide that they as employees are compelled to belong to a registered medical scheme designated by their employer, such spouse or spouses shall not be entitled to any medical or other benefits provided for in this Chapter;

(iii) in the case of more than one spouse, the member or beneficiary shall be liable to pay such contribution to the fund as may be set for a second or additional further spouse(s) in terms of Regulation 7 (1) (b).

(b) of necessity non-self-supporting child of such member or beneficiary or of his or her spouse who is permanently part of such member's or beneficiaries household: Provided that such child-

(i) has not attained the age of 18 years and is still attending school;

(ii) is 18 years or older but has not yet attained the age of 21 years and is a full-time student at a secondary training institution;

(iii) is 18 years or older and is on account of a mental or physical defect that occurred during his or her period of dependence as described in paragraphs (i) and (ii) or in paragraph (c), of this definition, permanently unfit to obtain or perform remunerative employment and
the total of any income, earnings, maintenance or compensation for damages of such child from any source does not exceed the sum of-

(aa) the appropriate maximum basic social pension as is regulated by/or in terms of a law which is in force in the Republic; plus

(bb) the maximum allowance for a war veteran to whom a war veteran's pension has been awarded by/or in terms of a law which is in force in the Republic; plus

(cc) the maximum allowance paid to a person as a result of a late application for social pension or a war veteran's pension; or if such a child is a social pensioner; or

(c) a child of a member or beneficiary or of his or her spouse which child is permanently part of such member's or beneficiaries household and is of necessity non-self-supporting on account of such child being a student at an accredited institution for post-school education, whether intramurally or extramurally, in order to obtain the minimum qualification in preparation for a career, but only-

(i) if such child is unemployed after leaving school or does not take up any permanent full-time employment (including any type of vocational training to which remuneration is attached, voluntary military service and/or sabbatical either within or external to the borders of the Republic of South Africa), but excluding military service owing to any ballot system in terms of the Act, or work during vacations or temporary full-time employment-

(aa) between leaving school and the commencement of the academic year immediately following the year of leaving school;

(bb) leaving school and the commencement of such compulsory military service;

(cc) the completion of such compulsory military service and the commencement of the academic year immediately following such completion; and

(ii) until-

(aa) such child attains the minimum post school qualification or minimum combination of qualifications which will enable such child to take up employment in his or her chosen field of study;
(bb) the minimum recommended duration of the course of study as prescribed by the institution concerned for such course plus a maximum of one academic year, has expired, if it takes such child longer than such prescribed period to obtain the relevant qualification as a result of poor academic performance;

(cc) such child discontinues the relevant initial course of study;

(dd) such child changes the direction of study and the total period of study exceeds the minimum normal period of study contemplated in subparagraph (bb) plus one academic year;

whichever of the four events referred to in subparagraph 1 (c)(ii)(aa) to (dd) occurs first: Provided that should such child temporarily interrupt such studies due to medical reasons through no fault of the child concerned with the view to recommence such studies, the Chief of the SANDF may recognise such child as a dependant during such interruption and for the remainder of the period of study.

“employee of the DOD” means a person who is employed in terms of the Public Service Act, 1994 (Act No 103 of 1994).

“family” means a “dependant” as defined.

“fund” means the Permanent Force Medical Continuation Fund as described in regulation 17 as well as the Permanent Force Medical Fund B as described in regulation 27;

“hospital” also means a medical or nursing institution, a sickbay, a military medical clinic or a private medical nursing institution or any other facility as designated by the Surgeon-General;

“LTS” means a person serving in a permanent capacity in terms of the Long-Term Service system in the Permanent Force;

“MTS” means a person serving in a temporary capacity in terms of the Medium-Term Service system in the Permanent Force;

“Manager” means a person who is designated as such in terms of regulation 19(4)(a)(i);

“medical aid” means an appliance or apparatus that assists a patient to be self-supporting and increases the functional abilities of the patient;
"medical officer" means a person entitled to practice as a medical practitioner in terms of Section 17 of the Medical, Dental and Supplementary Health Service Professions Act, 1974 (Act No 50 of 1974) and who—

(a) is serving as a medical officer or dental officer or specialist medical or dental officer in the Permanent Force;

(b) is undergoing training or is performing service as a medical officer, dental officer or specialist in the Citizen Force or the Commandos;

(c) is employed on a whole or part-time basis by the State as an employee of the DOD and holds the post and carries the responsibility of a medical officer or dental officer or medical or dental specialist;

(d) is employed on a contractual basis by the State and carries the responsibility of a medical officer or dental officer or medical or dental specialist, and

(e) has, in terms of regulation 11(2)(f), been designated as a medical officer either generally or in relation to a specific patient.

"medical prosthesis" means the replacement of part of the body with an artificial apparatus for example, but not restricted to, an artificial limb, artificial eye, electronic pacemaker, as well as implants, and dentures.

"Member" means a person—

(a) serving in terms of section 9 of the Act in the Permanent Force;

(b) serving in terms of section 16 or 20 of the Act in the Citizen Force;

(c) serving in terms of section 32 of the Act in the Commandos;

(d) serving in an auxiliary service or an auxiliary service known as the Service Corps in terms of section 80 of the Act;

(e) serving in the Reserve and who is rendering service in terms of section 52 or section 52A of the Act, and;

(f) undergoing training as a Cadet in terms of section 57 of the Act.

"Member of the Fund" includes a widow or widower who has, in terms of regulation 21 or regulation 30, become a member of the Fund;

"Patient" means a "member" or a "dependant" or a "beneficiary" as derived in terms of this regulation or an approved patient as may be approved by the Department of State Expenditure.
"registered medical scheme" means any medical scheme registered under Section 24(1) of the Medical Schemes Act, 1998 (Act No 131 of 1998).

"Sabbatical" means any period between leaving school and the date where the person involved was not in gainful employment, undergoing compulsory military training, or full-time study, and includes travel internal or external to the borders of the Republic of South Africa for whatever reason as the case may be for any period exceeding the period between-

(a) leaving school and the commencement of the academic year in the year immediately succeeding the final school year;

(b) leaving school and the commencement of such compulsory military service; and

(c) the completion of such compulsory military service and the commencement of the academic year immediately succeeding the period of compulsory military service;

"SANDF" means the South African National Defence Force;

"spouse" means a person who is married to a member or beneficiary and which marriage is recognised as a valid marriage in terms of the Recognition of Customary Marriages Act, 1998 (Act No 120 of 1998), or the Marriage Act, 1961 (Act No 25 of 1961).

"STS" means a person serving in a temporary capacity in terms of the Short-Term Service system in the Permanent Force;

"Surgeon-General" includes a medical officer to whom the Surgeon-General has delegated specified functions;

"temporary category" means a category of fitness lower than the allotted category, which is temporarily allotted to a member (excluding members of the Permanent Force) in terms of regulation 4(5);

"the Act" means the Defence Act, 1957, (Act No.44 of 1957);

"treasury" means the Minister of Finance or a duly authorised officer in the Departments of Finance or State Expenditure;

"widow" means the surviving spouse of a deceased male member of the Permanent Force or a beneficiary; and

"widower" means the surviving spouse of a deceased female member of the Permanent Force or a beneficiary contemplated in definition of "dependant".
MEDICAL FITNESS

Establishment of Category of Fitness

2. The Surgeon-General or a medical officer designated by him or her for that purpose shall, from time to time, in consultation with the Chief of the Service or Corporate Division concerned, determine the standard of physical and mental fitness required in peace or war time for the efficient work performance of a member in every Service or Corporate Division in each branch, corps, or unit thereof and in each mustering, appointment, post or job classification in the SANDF, taking into account requirements laid down by the relevant Code of Remuneration or Personnel Management Code and the Chief of the SANDF and in so doing-

(a) fully describe the standards and categories of fitness and classify them in order of stringency;

(b) designate a suitable category of fitness for each branch, corps, unit, mustering, appointment, post or job classification; and

(c) promulgate the classification and application of the said categories of fitness in the Orders of the SANDF.

Determination of and Employment According to Medical Fitness

3. (1) The Surgeon-General, is responsible for the determination of the standard of physical and mental fitness of any person who-

(a) has applied for appointment or enrolment in any part of the SANDF;

(b) is, in terms of the Act, obliged to report for training or to render service in any part of the SANDF; and

(c) is serving in any part of the SANDF.

(2) The Surgeon-General shall allocate the category of fitness referred to in regulation 2 to a person contemplated in regulation 4(1) and shall advise the Chief of the Service or Corporate Division concerned of such fitness category and may-

(a) restrict the nature, extent and place of such person's employment permanently or temporarily;

(b) allocate a temporary fitness category to such person; and
(c) at any time alter the allotted category of such person.

(3) No member shall be appointed, enrolled, mustered or employed in any post or mustering of the SANDF or be required to serve or to undergo training in such post or mustering unless the allotted fitness category of such member equals or exceeds the category designated to such post or mustering in terms of paragraph (b) of regulation 2.

(4) The Surgeon-General, may-

(a) with regard to medical facts of a member contemplated in subregulation (3), which are brought to his or her attention by whatever means, and if the Surgeon-General has any doubt with regard to such member's medical fitness, appoint a Board of Medical Officers, which shall-

(i) consist of at least three medical officers; and

(ii) report about -

(aa) the medical condition of such member;

(bb) the nature, origin, extent or possible future development of the disability or disease;

(cc) the future utilisation or management of the member; and

(dd) the nature and extent to which service in the SANDF has caused or aggravated the disability or disease.

(b) with regard to medical facts of a dependant of a member of the Permanent Force or of an auxiliary service or employee of the DOD employed in the SANDF/DOD which are brought to the attention of the Surgeon-General by whatever means, and such dependant enjoys the medical benefits provided by the SANDF, and if the Surgeon-General has any doubt with regard to such dependant's medical fitness, appoint a Board of Medical Officers, which shall-

(i) consist of at least one medical officer; and

(ii) report about -

(aa) the medical condition of such dependant;

(bb) the nature, origin, extent or possible development of the disability or disease;

(cc) the future utilisation or management of the member; and
(dd) the nature and extent to which service in the SANDF/DOD has caused or aggravated the disability or disease.

(5) The Surgeon-General, determines in which format the report referred to in subregulation (4) should be submitted, and when and where the medical examination shall take place.

(6) The expenses of a medical examination in terms of sub-regulation (5) which may include a special medical test which the Surgeon-General has ordered, as well as the expenses of the hospitalisation of the member concerned in a military hospital or other applicable institution for a period not exceeding 21 days, shall be paid from State funds.

(7) The accommodation and travel expenses of a member, but excluding dependants, to whom sub-regulations (4), (5) and (6) are applicable, may be reimbursed in terms of the prescribed tariffs, which are from time to time approved by the Treasury on the recommendation of the Chief of the SANDF.

(8) A member or a dependant of a member who is not satisfied with a determination of the standard of physical and mental fitness as contemplated in Regulations 3, 4, or 5, may request the Surgeon-General in writing to review such classification. The Surgeon-General shall appoint a review board to investigate such a request and to make an appropriate recommendation of upholding or amending the original classification: Provided that such a review board shall consist of the Surgeon-General as chairperson and three medical officers of which at least one shall be a specialist in the applicable discipline.

(9) Should a member or dependant remain dissatisfied with the decision, he or she may approach the Minister for a final decision: Provided that the Minister shall elicit professional medical expertise, which may be external to the Department, in making his or her decision.

Allotment, Restriction and Alteration to Categories of Fitness

4 (1) The category of fitness, allocated in terms of regulation 3(2) to a member who serves in any post of the Permanent Force or who has in terms of section 65(2) or 67 of the Act been found medically fit and has been allocated to the Citizen Force or the Commandos but has on the said date not commenced service or training therein, shall, subject to proof to the contrary, be deemed to have the category of fitness applicable to the post or mustering in which such member was serving or to which such member was allotted on that date.

(2) An alteration to the medical category with regard to -

(a) a member, occurs in terms of regulations 3(3) and (4);
(b) the post or mustering occurs through negotiations between the Chief of the Service or Corporate Division concerned and the Surgeon-General, and a joint decision is promulgated by the Surgeon-General;

(c) a member of the Permanent Force, is effected by a Board of Medical Officers; and

(d) any other case is effected by a medical officer or a Board of Medical Officers, whichever the Surgeon-General may deem appropriate: Provided that the fitness category of a member or dependant is not altered unless the recommendation is approved by the Surgeon-General.

(3) Where in any case, in the opinion of the Surgeon-General, it is necessary on-

(a) account of a member's state of health to restrict, temporarily or permanently, the nature or extent of the service or duties in respect of which, or the area or place in which the allocated category of any member shall apply even though such state of health does not justify the alteration of the member's allocated category or the allocation to such member of a temporary category, the Surgeon-General may define the extent of such restriction and apply it in accordance with subregulation (4) to the member concerned and such restriction shall only be altered or revoked on the authority of the Surgeon-General; and

(b) account of a dependant's state of health to restrict, temporarily or permanently, the nature or extent of the service or duties in respect of which, or the area or place in which such category shall apply, the Surgeon-General may define the extent of such restriction and apply it in accordance with subregulation (4) to the dependant concerned and such restriction shall only be altered or revoked on the authority of the Surgeon-General or such officer

(4) If a member or dependant's state of health is of such nature that-

(a) the member must be dealt with in terms of regulation 3(4) or subregulation (2). In the event of a lower fitness category temporarily allocated to such member, the Surgeon-General, shall inform the Chief of the Service and the officer commanding concerned, in writing and in layman's terms, of the restriction with regard to the utilisation of the member as well as the nature, extent and duration of the restriction or temporary fitness category. The Officer Commanding must inform the member accordingly and in the event of the member's transfer during such restriction or temporary category, the new officer commanding must thus be informed; and
(b) the dependant must be dealt with in terms of regulation 3(4)(b) or subregulation (2). In the event of a lower fitness category temporarily allocated to such dependant, the Surgeon-General, shall inform both the dependant and the employer concerned, in writing and in layman's terms, of the restriction with regards to the utilisation of the dependant as well as the nature, extent and duration of the restriction or temporary fitness category.

(5) If a member or a citizen, who has in terms of the Act been allotted to the Citizen Force or the Commandos, but who has not commenced serving therein, fails at any time to comply with the requirements of the allocated category because of a disability or disease and the Surgeon-General is of the opinion that the condition of the person or citizen concerned will after medical treatment improve to such an extent that it will, in time, warrant the reinstatement of such person or citizen's allocated category, the Surgeon-General may suspend such member's allocated category and allocate a temporary category to the person or citizen concerned for a period-

(a) not exceeding 3 months in the case of a member serving in terms of Section 20 or Chapter X of the Act;

(b) not exceeding 12 months in the case of any other member or such citizen;

and the Surgeon-General, in consultation with the Chief of the Service, Corporate Division concerned, may, subject to regulation 5(1)(b), extend such period from time to time.

(6) If a commanding officer is in doubt whether a member serving or undergoing training is physically fit to perform any duty which may in the course of the member's service or training be performed, such officer commanding may prohibit the performance of the duty concerned by such member and shall immediately report the reasons for the prohibition to the medical officer concerned for action in terms of regulation 5(2).

Subjection to Medical Examination

5. (1) A member shall, in terms of regulation 3 be subjected to a medical examination for the purpose of determining such member's medical fitness for any service, course or category of fitness referred to in this regulation, prior to—

(a) appointment from the ranks to commissioned rank;

(b) re-appointment or re-enrolment of a member for service or training on the expiration of a specified period of service, the duration of which has been determined by or in terms of the Act or these Regulations; except when such member has served without a break in service in the Permanent
Force in a permanent or temporary capacity or served in terms of Section 20 of the Act;

(c) termination of service in any part of the SANDF or in the Reserve the member is appointed or enrolled in or any other part of the SANDF;

(d) transfer to or mustering in any post, branch, classification or mustering in respect of which a higher category of fitness than the member's allotted category has been designated in terms of regulation 2;

(e) the member being permitted to leave the Republic on duty of any kind or for the purpose of attending a course or any other training opportunity outside the borders of the Republic;

(f) the member being permitted to attend a course in the Republic designated for the purpose by the Chief of the Service or Corporate Division concerned in consultation with the Surgeon-General, and promulgated in DOD Instructions;

(g) his or her allotted category, suspended in terms of regulation 4(5), is being reinstated or altered; and

(h) him or her being employed if called up from the Reserve for service in terms of Chapter X of the Act.

(2) Notwithstanding the provisions of regulations 3(3), 3(4), 4(2) and 5(1), the Surgeon-General may with regard to a member—

(a) who performs duties which, in the opinion of the Surgeon-General, require that in the member's own interest and that of the SANDF, the member be medically examined periodically to confirm the member's medical fitness to continue performing such duties, direct that such examination be conducted in terms of regulation 3(1);

(b) whose medical fitness is in doubt, order that such member's medical category be re-evaluated; and

(c) who has become seriously ill and hospitalised, order that such member's medical category be re-evaluated.

(3) No member, referred to in subregulation (1), may refuse to undergo a medical examination as required in terms of subregulation (2).

(4) The Surgeon-General may, upon receipt of payment as determined by the Department of State Expenditure, perform medical examinations on members
and dependants as requested by a member of the Permanent Force or the Auxiliary Service or a dependant of such a member.

**Medical Unfitness for Retention in Service**

6. (1) The Surgeon-General shall submit a report to the Service or Corporate Division concerned with regard to a member of the Permanent Force, Citizen Force, the Commandos (who has been allotted to the Citizen Force or a Commando but has not commenced serving therein) or the Reserve, to whom a category of fitness has been allotted permanently, which, in terms of regulation 3(3), is incompatible with the employment or continued employment of such member or person in the allotted classification or mustering.

(2) After the submission of such report –

(a) the Minister may order the discharge or termination of service of the member concerned in terms of Chapter III or Chapter IV of the General Regulations (GR) as the case may be; and

(b) the Chief of the SANDF may, if the member concerned can, in the new allocated category, be used efficiently and in the interest of the SANDF in any classification or mustering in the part of the SANDF or Reserve in which such member serves, order that the member concerned be reclassified or remustered in terms of GR III or GR IV, of these Regulations as the case may be. Provided that a member of the Permanent Force, a member serving voluntarily in the Citizen Force or the Commandos and a member of the Reserve shall not be reclassified or remustered in terms of this regulation without such member's written consent, except when such member renders service in pursuance of Chapter X of the Act.

(3) If a restriction is applied to a member in terms of regulation 4(3), the Chief of the Service, Corporate Division concerned may materially interfere with the effective employment of the member concerned in his or her classification or mustering, or he or she may, in consultation with the Surgeon-General, order that such member be dealt with as though subregulation (1) were applicable to the member.
PART II

NATURE, EXTENT AND ADMINISTRATION OF MEDICAL TREATMENT

Extent and Authorisation of Medical Treatment

7. (1) The Chief of the SANDF may issue orders relating to-

(a) the provision, management and control of medical, dental, hospital, psychiatric and rehabilitative services, assistance and support to serving members of the SANDF and authorised patients;

(b) the class of members of the said SANDF, including members who are intended attachés and the dependants of such classes of members of the said Permanent Force, the Auxiliary Service, the class of members of the said Auxiliary Service including the dependants of the members of the said Auxiliary Service, the Citizen Force, the Commandos, the Reserve and the Cadet Corps or other persons, who shall be or may gain access to such services, assistance and support;

(c) the scale or aggregate amount of contributions to be made by any member or class of member or any dependant for the provision of such services, assistance and support provided for by the SANDF; and

(d) the rights, privileges and obligations of serving members and their dependants where applicable, and generally all matters reasonably necessary for the administration, regulation, operation, maintenance and extension of such services, assistance and support.

(2) The Surgeon-General shall, subject to the provisions of the Act and this Chapter, arrange for the offering to an authorised patient of-

(a) medical, dental and hospital treatment which is required in respect of an injury, disease, latent disease, physical defect or other disability from which the patient concerned is suffering, in order to-

(i) effect the recovery of such patient or to promote his or her state of health; and

(ii) promote or improve the functioning or use of any limb, organ, bodily function or faculty of such patient or to reinforce, supplement or replace such limb, organ, bodily function or faculty;

(b) medical and hospital treatment in addition to the treatment referred to in subregulation (2)(a) required during her pregnancy and confinement,
including pre-natal and post-natal care of the mother and child concerned;

(c) medical and or other treatment according to the prescripts of the Compensation Commissioner with regard to treatment for members whose claims for compensation for injuries or diseases have been accepted in terms of the Compensation for Occupational Injuries and Diseases Act, 1993 (Act No 130 of 1993), and

(d) preventative, prophylactic or immunising treatment which shall or may be administered in terms of any Act or which the Surgeon-General deems necessary in the interest of the SANDF or any patient.

(3) The Surgeon-General, shall from time to time determine the nature and extent of the treatment required in accordance with subregulation (2) by a patient and may, subject to the other provisions of this Chapter, authorise the offering or administration of such treatment to the patient concerned in terms of regulation 11(1).

(4) For the purposes of subregulation (2) and (3) the Surgeon-General is the medical authority referred to in Section 144 bis of the Act.

Dental Treatment

8. The Surgeon-General shall, subject to the provisions of the Act and this Chapter, arrange for the offering of full dental treatment to-

(a) member of the Permanent Force and the Auxiliary Service and his or her dependant(s), but excluding the dependants of members of the STS; and

(b) approved patients.

Plastic, Reconstructive Surgery and Orthodontic and Specialised Dental Treatment

9. The Surgeon-General may in terms of regulations 7 and 8 of this Chapter authorise-

(a) plastic and reconstructive surgery; and

(b) orthodontic and other specialised dental treatment, to the extent to which, in the Surgeon-General's opinion, such treatment is necessary for the normal functioning of the patient in the community or job environment.

Additional Requirements and Services
10. The treatment which may be authorised in terms of regulation 7 shall include the provision of the requisite medicaments, bandages, wrappings, catgut, gloves, medical, dental or surgical instruments, apparatus, Röntgen films: chemicals or organic materials or derivatives thereof (including blood or plasma), consumer goods for occupational therapy or such other medical aids or apparatus and medical prostheses as may be necessary for the promotion of the recover of a patient, and also the required hospital facilities and maintenance, paramedical services and nursing, which is obtained in a manner determined by the Surgeon-General.

11. (1) The Surgeon-General shall make arrangements for, and exercise professional, executive and administrative control over the provision and administration of any treatment which shall or may be provided to a patient in terms of this Chapter: Provided that such patient is in possession of a suitable identification document as required by the Surgeon-General.

(2) For the purposes of subregulation (1) the Surgeon-General shall, as far as it is professionally and administratively practicable, make use of the facilities of the military medical service and such other medical facilities as may be at the Surgeon-General's disposal and may –

(a) delegate any power vested in the Surgeon-General by this Regulation to any other medical officer designated by the Surgeon-General for that purpose, whether generally or in respect of a specific case;

(b) administer treatment in terms of this Chapter at a patient’s place of residence, a hospital, clinic, out-patients’ department of a hospital or at the consulting rooms of a medical officer or at any other place designated by the Surgeon-General for that purpose;

(c) where a patient is at a place where there is no military hospital or where a military hospital is unable to accommodate or to treat the patient concerned effectively because of lack of space or the absence of facilities which, in the opinion of the Surgeon-General, are required for the treatment of such patient, authorise the admission to or the treatment of such patient at any other hospital or institution which may be designated by the Surgeon-General for that purpose;

(d) authorise the conveyance of a patient to and from any place, designated in terms of paragraph (b) or (c) for any treatment in terms of this Chapter or in such manner whether in general or with regard to the circumstances of a particular case as he or she deems suitable;

(e) authorise the escort or nursing of a patient by any person who, in the opinion of the Surgeon-General, is deemed fit to act as escort while such member or dependant is being conveyed in terms of paragraph (d);
(f) where a suckling or the mother of such suckling is admitted to a hospital, also authorise the admission to the hospital as a hospital patient of the mother or child concerned, as the case may be;

(g) where for any medical reason which he deems sufficient the examination or treatment of a patient cannot be undertaken by a medical officer of the SA Military Health Service or where the Surgeon-General considers a second opinion necessary in the interest of a patient, designate a registered medical or dental practitioner or specialist who is not employed on a full-time basis by the State as a medical or dental practitioner, whether in a general or for the examination or treatment of a specific patient in a temporary or part-time capacity; and

(h) on behalf of the State accept liability for the cost of medical, dental or hospital treatment provided in a case of emergency to any patient by any medical or dental practitioner or hospital, if in the opinion of the Surgeon-General, it was in the interest of such patient to be provided such treatment in an emergency.

(3) In the case of death during hospitalisation or the administering of medical services, the Surgeon-General, or his or her delegate, may authorise the transportation of the remains of the deceased to a place designated for that purpose by the next of kin;

(4) The treatment provided for in this Chapter may be provided at any place in the Republic of South Africa and shall, in accordance with arrangements made by the Surgeon-General, be provided to any member performing whole time service outside the Republic, and, in the case of a member of the Permanent Force performing such service, also to a dependant of such member who, with the approval of the Chief of the SANDF is accompanying such member abroad.

(5) Any member who reports at a hospital for medical examination and/or treatment, and is not necessarily hospitalised is deemed to be on official duty, and the Chief of the SA National Defence Force may reimburse a member and/or the escort, appointed in terms of paragraph (2)(e), who reports at a hospital for medical examination and/or treatment, and is not necessarily hospitalised, such accommodation expenses for such official duty that were incurred to facilitate the medical examination or treatment: Provided that such escort is the dependant of a member as defined in Regulation 1, or if the member has no dependants, such suitable person as appointed for escort purposes.

(6) The Surgeon-General may, in accordance with the relevant authorisation, contract any registered Medical or Dental practitioner or specialist, in a temporary, part time or any other appropriate capacity, for the examination or treatment of patients.
Provision of Prosthesis and Medical Aids

12 (1) Where, for the purposes of regulation 7, the Surgeon General, deems it necessary for maximum recovery and productive employment in the socio-economic environment of any patient, within the framework of such patient's disability, the Surgeon-General may, in addition to the treatment provided for in regulation 11 and subject to other provisions of these Regulations, authorise the provision, to the patient concerned, of a prosthesis and/or medical aids: Provided that -

(a) the Surgeon-General shall determine the serviceable life of any article or category of articles provided in terms of this Regulation and any such article shall, subject to paragraph (b), in accordance with the directions of the Surgeon-General, be serviced, maintained, repaired, modified or replaced or supplied with a source of power or other expendable part or material required for its operation; and

(b) any article referred to in paragraph (a) may, in accordance with the directions of the Surgeon-General be modified or replaced at State expense on the expiration of its serviceable life so determined or where a medical officer designated by the Surgeon-General for the purpose has, before such expiration, certified that such modification or replacement is necessary because the article concerned has become unserviceable as a result of a physical or pathological change in the patient.

(c) where applicable, the Department of Labour's (Compensation Commissioner's) prescript with regard to prosthesis and medical aids for members whose claims for compensation for injuries and diseases have been accepted in terms of the Compensation for Occupational Injuries and Diseases Act, 1993 (Act No 130 of 1993), must be taken into consideration.

(2) To curtail costs, but without forfeiting functional efficiency, the Surgeon-General may stipulate standards for any prosthesis or medical aid.

(3) When a patient, for whatever reason, prefers another type of medical prosthesis or medical aid than the prescribed one, the patient may be supplied with the medical prosthesis or medical aid of such patient's choice: Provided that the medical prosthesis or medical aid so chosen meets the standards stipulated by the Surgeon-General and that all extra expense in acquiring or maintaining the said medical prosthesis or medical aid is borne by the patient.

Defrayment of Expenses

13. (1) The SA Military health Service shall at all times be structured and funded at state cost to provide an all-inclusive multi-disciplinary health capability to
the SA National Defence Force and its members: Provided that the cost of services to serving members shall be the liability of the State;

(2) The cost of any treatment, service or medical prosthesis or medical aid authorised in terms of this Chapter and provided to a patient shall, apart from conditions to the contrary in this Chapter, be defrayed from State funds, obtained for this purpose through the normal budget programme: Provided that-

(a) services rendered by private medical and dental practitioners and specialists shall be paid from State funds;

(b) any patient to whom this regulation is applicable, shall be accommodated in a general ward of the hospital concerned, unless -

(i) the patient's medical condition requires treatment in a private ward, or intensive or high care unit, in which case the extra cost is paid from State funds; and

(ii) the patient, for whatever reason, prefers to receive nursing care in a private ward, in which case such patient accepts prior responsibility for the additional costs and settles the difference directly with the relevant hospital authorities.

(3) The Minister may, on recommendation of the Board, institute any financial scheme, including the creation of a medical scheme as contemplated in the Medical Schemes Act, No 131 of 1998 to provide medical, dental, and hospital treatment to the dependants of members of the Permanent Force and beneficiaries of the fund contemplated in Regulation 17: Provided that

(a) membership of such a medical scheme be limited to members and their dependants;

(b) the SAMHS remains the preferential provider of services of choice as contemplated in this Chapter; and

(c) the SAMHS not be required to register as a medical scheme as contemplated in the Medical Schemes Act, Act No. 131 of 1998
MEDICAL BENEFITS

Benefits and Obligations: Members of Permanent Force and the Auxiliary Service and their Dependents

14. (1) The medical, dental and hospital treatment contemplated in regulations 7 to 13 shall, subject to the provisions of subregulation (6), be offered to a member of the Permanent Force (including a Permanent Force member who was compelled to demilitarise) and of an auxiliary service, and such member's dependant as contemplated in the definition of "dependant" in regulation 1, but excluding the dependants of members of the STS and the Service Corps: Provided that, before any medical, dental and hospital treatment may be offered to any person or category of person contemplated in the said definition, written approval must be obtained from the Chief of the SANDF to regard such person or category of person as a dependant of the member concerned: Provided further that such approval may only be granted in respect of-

(a) the spouse of a member, if the provisions of regulation 1, with regard to the definition of "dependant" and 5(4) have been complied with;

(b) the child of a married member if the provisions of regulation 1 with regard to the definition of "child" have been complied with: Provided further that in the event the court orders that the member be given custody of the child or responsibility for the provision of medical, dental and hospital treatment for the child; and

(c) the child of a single member born out of wedlock if the provisions of regulation 1 with regard to the definition of "child" have been complied with and the said child is of necessity non-self supporting as contemplated in the said regulation: Provided that-

(i) if the member is the natural mother or the father of the child, such member shall, on request of the Chief of the SANDF, submit conclusive medical evidence as may be required by the Surgeon-General, at his or her own cost of this fact: Provided further that if such medical evidence proves to be conclusive such member's costs in obtaining such medical evidence shall be reimbursed by the Chief of the SANDF;

(ii) the member is, in terms of an order by a competent court responsible for the payment of maintenance and the provision of medical, dental and hospital treatment for the child; and
(iii) the member is the mother and the child is in her care and the natural father of the child is not responsible for the payment of maintenance and the provision of medical, dental and hospital treatment for the child;

(2) A child contemplated in paragraphs (b) and (c) of the definition of "child", in respect of whom maintenance is paid or is payable by any person other than the member concerned or by or in respect of whom any income or earnings of whatsoever nature or compensation for damages is received, shall be deemed to be entirely dependent on the member concerned unless, in the opinion of the Chief of the SANDF such maintenance, earnings, income or compensation for damages is sufficient to provide such child with sufficient food, accommodation, education and medical treatment.

(3) Notwithstanding the determination contemplated in subregulation (1) and (2), such authority shall not be granted where-

(a) the member concerned is estranged from his or her spouse and such estrangement is, in the opinion of the Chief of the SANDF not transitory or of a passing nature; and

(b) the child concerned has been removed from the member's custody in terms of any act and has been admitted to a State or a State-aided institution for children in need of care or similar institution or has in accordance with an order of a competent court at state expense been placed in the custody of a foster-parent.

(4) No medical, dental or hospital treatment will be offered to-

(a) a member of the Permanent Force or the Auxiliary Service who is absent from duty without leave; and

(b) a member or a dependant of a member or any other person who may be entitled to the treatment contemplated in subregulation (1), whilst such member or such member's dependant or any other person who may be entitled to such treatment is on leave, tour or visit or for any other reason outside the borders of the Republic of South Africa.

(c) A member of the Permanent Force or Auxiliary Service who has not fulfilled his or her financial obligations as contemplated in Regulation 7(1)(c)

(5) If a member of the Permanent Force or of an auxiliary service or the dependant of such member of the Permanent Force or of an auxiliary service is, on the day of the termination of such members service in that Force or Service, being treated in terms of subregulation (1) as an inpatient in a hospital, such treatment
may, with the approval of the Surgeon-General, be continued in terms of that regulation for ninety days.

(6) The treatment referred to in regulation 7(1)(b) shall be offered at places or locations designated by the Surgeon-General depending on the availability of the required medical and nursing facilities in connection with the military medical service, and if the said facilities are not available the necessary medical and hospital treatment may, with the prior approval of the Surgeon-General, be provided by a provincial hospital or other institution at State expense.

(7) A member of the Permanent Force or of an auxiliary service shall, within fourteen days of the event, report in writing to his or her officer commanding any change whatsoever in the circumstances affecting the provision of the treatment, services or articles referred to in subregulation (1) to such member's dependant. The costs of any such treatment, services or articles offered contrary to this regulation to or in respect of such dependant owing to such member's failure to report such change, shall be recovered from the member concerned.

(8) A member of the Permanent Force or of an auxiliary service and a dependant of such a member, shall, at all times, including any period of leave of absence-

(a) carry on his or her person the necessary identification as prescribed by the Surgeon-General and leave certificate, to ensure access to medical treatment whenever required; and

(b) immediately inform, in writing, his or her officer commanding of any incident where medical treatment was obtained at any place other than a hospital: Provided that such treatment shall only be rendered within the borders of the Republic of South Africa: Provided further that a member who is absent without leave is not entitled to such medical treatment.

Benefits for Members of Citizen Force, Commandos, Reserve and Cadet Corps

15. (1) Subject to the provisions of subregulation (2) treatment, services and prosthesis provided for in regulation 7, 9, 10, 11 and 12(1) must be offered to a member of the Citizen Force, the Commandos the Reserve or the Cadet Corps, if required for an illness or injury which was contracted under circumstances described in Section 146 of the Act.

(2) The treatment referred to in subregulation (1) shall be provided to the member concerned for the duration of the period of military service or training in which such member was engaged when such member received the injury or contracted the disease in question or through which the disability was caused or aggravated and such treatment, and-
(a) shall, in the case of a disability to which section 146 of the Act applies be continued after the expiration of the said period until the member has recovered therefrom or until an award in terms of the provisions of the Military Pensions Act, 1976, (Act No 84 of 1976), has been made in respect of such disability;

(b) may in any other case be continued with the approval of the Surgeon-General, for a period not exceeding 90 days after the expiration of the said period of service or training or for such longer period as the Surgeon-General may approve in an exceptional case: Provided that the Surgeon-General may at any time after the expiration of such period of military service or training, authorise the treatment or the resumption of the treatment of a disability to which section 146 of the Act applies and in respect of which no award referred to in subregulation (2)(a) has been made;

(c) shall be provided with due consideration, and where applicable, in compliance with the prescripts with regard to medical treatment for such members whose claims for compensation for injuries or diseases have been accepted in terms of the Military Pensions Act, 1976 (Act No 84 of 1976), and

(d) shall not be offered to a member of the Citizen Force, the Commando, the Reserve or the Cadet Corps who absented him or herself from duty without leave.

(3) Regulations 8, 9 and 12 are applicable to a member of the Citizen Force, the Commandos or the Reserve and the Cadet Corps at all times for any period which such member is serving in terms of Chapter X of the Act: Provided that-

(a) the teeth of such member may in an emergency be extracted or temporarily filled; and

(b) the Surgeon-General may, in an exceptional case for professional reasons, suspend any provision of this Regulation with regard to a specific member.

(4) A member of the Citizen Force, the Commandos or the Reserve and the Cadet Corps shall, for the purposes of this Regulation, be deemed to be performing military service or to be undergoing training during any period in which such member -

(a) is serving in terms of Chapter X of the Act;

(b) is undergoing any training in terms of the Act;
(c) is performing special duty approved in terms of the Act or the Regulations;

(d) has, owing to unavoidable circumstances, to remain longer than the stipulated duration of any military service or training, at the place designated therefor;

(e) is in terms of these Regulations treated as an inpatient in a hospital;

(f) in the course of a period of full-time or continuous service or training-

(i) is, in terms of these Regulations, temporarily absent on leave from such service or training;

(ii) is absent from such service or training owing to treatment in terms of these Regulations (including any period required for convalescence);

(g) is required to travel with Government or other public transport to or from any military service or training or is compelled in the course of such journey to stop over at any place: Provided that this Regulation shall not be so construed as to mean that any member who is absent from any service or training without leave or has been temporarily exempted from service or training in terms of the Act, shall be deemed to be performing service or to be undergoing training while he or she is so absent or exempted.

(5) A member to whom treatment in terms of subregulation (1) has been offered, shall receive pay of rank for each day on which-

(a) such member has, owing to such treatment, not undergone or performed full-time or continuous service or training for which such member would otherwise have been paid; and

(b) after the expiration of a period of service or training, such treatment has been offered to the member as an inpatient in a hospital: Provided that-

(i) any payment in terms of this Regulation shall be in accordance with the pay of rank approved by the Department of State Expenditure on the recommendation of the Department of Public Service and Administration; and

(ii) this Regulation shall not apply to a member to whom such treatment is provided in respect of a disability, injury or illness which is due to such member's own misconduct.
16. If circumstances arise which in the opinion of the Chief of the SANDF justify a departure from any provision of this Chapter, he or she may, on approval of the Department of State Expenditure where expense to the State is involved, authorise such departure.
PART IV

PERMANENT FORCE MEDICAL CONTINUATION FUND

17. The fund that is hereby established shall be known as the Permanent Force Medical Continuation Fund, is a corporate body and is deemed to be a fund in terms of section 87(1)(f) of the Defence Act, 1957, which provides medical, dental and hospital treatment to members of the Permanent Force who retired or retire on pension on or after 1 January 1964, and their families and of the families of members of the said Force who died or die on or after the said date.

Authority of the Fund

18. Without derogating from the provisions of regulation 19(5), 20 and 25, the Fund shall be an autonomous fund which is authorised to-

(a) receive and keep in trust any income that may become due to it in terms of these regulations from contributions or levies on members or from interest on investment that may accrue by way of a donation, a grant, a subsidy or in any other manner;

(b) defray any expenses from revenue due to it and thus received -

(i) which have been incurred as a result of treatment referred to in regulation 17; and

(ii) which have been incurred for the management and functioning of the Fund;

(c) invest any part of such income for the benefit of the Fund or recall such investments.

Establishment of Board of Trustees

19. (1) A Board of Trustees is established for the Fund. The Board consists of the following members:

(a) Surgeon-General as the chairperson;

(b) Chief of Joint Support;

(c) Chief of Corporate Staff;
(d) the Chief Financial Officer of the DOD (irrespective of whether that person serves in a post on the establishment of the Secretary for Defence or the SANDF);

(e) a senior manager appointed by each of the Chiefs of the Services of the SANDF and the Chief of Defence Intelligence;

(f) the Sergeant-Major of the SANDF;

(g) three retired members of the Permanent Force who are beneficiaries of the Fund which members are elected during an annual general meeting for a term of office not exceeding four years at any given time of which at least one shall be a Warrant Officer or Non Commissioned Officer.

(h) two representatives from those Military Trade Unions admitted to the Military Bargaining Council; and

(i) a medical officer and a legal qualified officer nominated by the Surgeon-General.

(j) The administrator and principal officer of the fund.

(2) Each member of the Board appoints a secundus who has to attend the meeting of the Board in the absence of such member and participate in the proceedings of the meeting and have a right to cast a vote at such a meeting.

(3) The Board may at any time co-opt or appoint a person, persons or any relevant institution to assist the Board in any advisory capacity, including but not limited to financial planning, management of the fund, and the administration and control of the fund: Provided that where such a person or institution is not a member of the SANDF or in the employ of the DOD, the fund shall carry the full cost of such co-option or appointment.

(4) The Board may-

(i) appoint a competent officer or retired officer of the Permanent Force or any employee of the DOD, or any other civilian person or institution as Administrator and Manager of the Fund to control, co-ordinate and perform the administrative and managerial duties relating to the fund on behalf of the Board on a day to day basis: Provided that where such a person or institution is not a member of the SANDF or an employee of the DOD, the fund shall carry the full cost of employment of such a person or institution;
(ii) appoint a competent officer or retired officer of the Permanent Force or any employee of the DOD, or any other civilian person or institution as the accountant of the Fund to control, co-ordinate and perform the financial duties relating to the fund on behalf of the Board on a day to day basis: Provided that if such a person or institution is not a member of the SANDF or an employee of the DOD, the fund shall carry the full cost of employment of such a person or institution as Accountant of the Fund;

(iii) appoint any competent officer or retired officer(s) of the Permanent Force or any employee(s) of the DOD, or any other civilian person(s) or institution to provide full- or part-time administrative, secretarial and support duties relating to the fund on behalf of the Board on a day to day basis: Provided that if such a person(s) or institution is not a member of the SANDF or an employee(s) of the DOD, the fund shall carry the full cost of employment of such (a) person(s) or institution; and

(iv) appoint a competent officer or retired officer of the Permanent Force or any employee of the DOD, or any other civilian person or institution as the principal officer of the Fund to control, co-ordinate and perform the duties relating to the statutory functions of a principal officer to the fund on behalf of the Board on a day to day basis: Provided that if such a person or institution is not a member of the SANDF or an employee of the DOD, the fund shall carry the full cost of employment of such a person or institution;

(v) delegate certain responsibilities, including but not limited to the judicial basis of the fund, the making of decisions on the payment of benefits or any other matter relating to the functioning of the fund: Provided that such decisions shall be legal and shall comply with the provisions of this Chapter, and

(vi) outsource the managerial, administrative and any other functions to an administrator in order to execute, control, co-ordinate or perform such functions required for the efficient management and control of the Fund on behalf of the Board or the fund, or both, on a day-to-day basis: Provided that the fund shall carry the full cost of such outsourcing.

(b) The Secretary for Defence or his or her delegate may approve the establishment of posts on the fixed establishment of the Permanent Force for appointing personnel to perform the co-ordinating and administrative functions required for the efficient management and control of the Fund: Provided that the Fund shall carry the full cost of such posts as required
by the Public Finance Management Act, 1999 (Act 1 of 1999) as amended.

(5) In the absence of the Chairperson, the Board shall designate a chairperson from the members present at a meeting of the Board as provided for in Regulation 20. (2).

(6) The fund is incorporated as a legal person independent of its members, is the owner of its assets and is competent to procure rights and incur liabilities in its own name and to act as claimant and defendant in litigation.

Duties and Powers of the Board

20. (1) The Board exercises control over the assets of the Fund in such a manner that at all times sufficient liquid assets are available to cover expenditure and for this purpose the Board is authorised to -

(a) open an account at a financial institution in the name of the Fund, to operate the account and to decide on the availability of cash from that account, before defraying any expenses or making any investment in terms of regulation 18(b) and (c);

(b) exercise general control over the scope and manner in which treatment shall be provided in terms of these regulations and, with regard to such provision, to repeal a decision or instruction given in terms of these regulations by the Surgeon-General or an official of the Fund, or to amend or replace them with another decision or instruction; and

(c) do anything deemed necessary to organise or operate the Fund or the provision of medical, dental or hospital treatment to a beneficiary of the Fund.

(2) The Surgeon-General is the chairperson of the Board and in his or her absence the most senior member of the members mentioned in regulation 19 (1)(b), (c) and (d) shall act as chairperson.

(3) The Board may implement any additional measures regarding their method of work: Provided that such measures are not in conflict with the provisions contained in this Chapter.

(4) The Board convenes as often as the chairperson deems necessary but at least once every three months in addition to the annual general meeting, which shall be attended by the Board members or their secundi unless the serving chairperson, for sound reasons, exempt them from attending the meeting.
(5) (a) A quorum for a meeting consists of a two-third majority of the total number of members serving on the Board;

(b) a decision is reached by majority vote of Board members attending the meeting and, in the event of an equality of votes, the presiding chairperson of the meeting shall have the casting vote;

(c) a two-third majority vote of the Board members attending the meeting is required to revoke, amend or replace any of the decisions regarding the rendering of service contemplated in subregulation (1)(b) and (c).

(6) The minutes of every meeting of the Board shall be recorded in a book kept for this purpose by the Manager, and the minutes of the previous meeting shall, after approval, and after the chairperson has signed them, serve as *prima facie* proof that the business, as recorded, is the business of that previous meeting.

(7) Any deed, contract, power of attorney, promissory note or other document shall deemed to have been executed on behalf of the Fund or the Board, if it has been signed under the name of the Fund by one member of the Board designated by the Board for that purpose and by the Manager thereof and a promissory note or a cheque drawn against an account of the Fund, shall be signed by two persons designated by the chairperson for that purpose.

(8) The Manager of the Fund may, with the consent of the Board, or if the Board cannot be convened in time, the chairperson of the Board, according to the circumstances of the case, on behalf of the Fund sue, institute action, appear in any action against the Fund, lodge an appeal or give notice of intention to defend: Provided that any such action which was taken with the consent of the chairperson shall be submitted by the Manager to the Board for confirmation at the next meeting.

(9) Any full member, but excluding secundi of members, of the Board may request the Chairperson, in writing and through the office of the manager or administrator, to convene a meeting of the Board to discuss matters raised by the request. The Chairperson shall, without delay, inform the other members of the Board of such a request, and convene a meeting of the Board within 30 days after having been informed of the request. If the Chairperson fails to convene such a meeting, the members of the Board may, after informing the Chairperson in writing, convene a meeting themselves. If a quorum is present at such a meeting, the decision of the two thirds of full members of the Board present at such a meeting, subject to the provisions of this Chapter shall be binding.

(10) The Department of Defence, the members of the Board, any member of the SANDF and anyone who makes a contribution to or is benefiting from the Fund, is not, without an undertaking to the contrary, liable for any debt of the Fund.
Members of and Contributions to Fund

21. (1) Every-

(a) member of the Permanent Force who contributes to the Government Employees Pension Fund in terms of the Government Employees Pension Law, 1996;

(b) person who, in terms of subregulation (4), becomes a beneficiary of the Fund; and

(c) former member of the Permanent Force who, through compelled demilitarisation, becomes an employee of the DOD,

is a member of the Fund and compelled to contribute towards the Fund according to the tariffs, which the Board may determine from time to time.

(2) Any amount contemplated in subregulation (1), that is payable from time to time by-

(a) any such member referred to in paragraph (a) of subregulation (1), is deducted monthly from that member's salary; or

(b) any beneficiary referred to in paragraph (b) of subregulation (1), the amount is deducted monthly from that beneficiary, and

is paid to the Fund subject to the provisions of subregulation (3) hereunder.

(3) Any member of the Permanent Force who, in terms of his or her employment contract, will not be able to render ten years' continuous service or who will not be able to render such service prior to attaining the age of 60 years, may be allowed by the Board to become a member of the Fund in exceptional cases on such conditions as the Board may determine.

(4) A contributor to the Fund who has contributed for a continuous period of at least ten years towards the Fund, becomes a beneficiary of the Fund if-

(a) he or she retires and is in terms of the Government Employees Pension Law, 1996, or Special Pensions Act, 1996 (Act No 69 of 1996) entitled to an annuity;

(b) he or she is discharged from the Permanent Force for medical reasons and in lieu of or in addition to the annuity referred to in paragraph (a), is entitled to an annuity in terms of the Compensation for Occupational Injuries and Diseases Act, 1993 (Act No 130 of 1993);
(c) he or she reaches a retirement age determined by or in terms of Chapter III or Chapter IV of these Regulations, and is discharged, is entitled to an annuity in terms of the Government Employees Pension Law, 1996; or

(d) his or her service is terminated prior to his or her retirement date as a result of voluntary acceptance of a severance package offered to him or her in terms of the Pension Rules and on conditions as prescribed by the Chief of the SANDF; and

(e) such member or employee pays to the fund an amount as may be determined by the Board on recommendation of the actuary from time to time: Provided that such amount be a realistic and justifiable amount to carry the cost of services provided by the fund.

(5) The spouse, contemplated in the definition of "dependant", of a contributing member who dies whilst serving, becomes a beneficiary of the Fund.

(6) Notwithstanding any provision in these regulations-

(a) a beneficiary in terms of subregulation (4) above who, prior to the commencing date of these regulations was a contributor to the Fund and who, between 1 January 1964 and 31 March 1990, (both dates inclusive), retired or was discharged in terms of subregulation (4) and the spouse of such beneficiary in the case where the beneficiary dies or has died, are exempted from any obligations regarding the payment of any further monthly contributions to the Fund or any increases thereof;

(b) a beneficiary who was a contributor and who, between 1 April 1990 and the commencing date of these regulations (both dates inclusive) retired or was discharged in terms of subregulation (4) and the spouse of such beneficiary in the case where such beneficiary dies or has died, must pay in one sum, monthly contributions that were applicable on the date of retirement, discharge or death calculated until the contributor would have attained the age of 60 years to the Fund: Provided that-

(i) the beneficiary is responsible and compelled to pay any subsequent increase in the monthly contributions applicable to serving members of the Permanent Force in one sum, calculated from the date on which such increase becomes effective and until the beneficiary attains or would have attained the age of 50 years, to the Fund; and

(ii) should the beneficiary not be in a position to pay the increase in one sum to the Fund, the Board may allow the beneficiary to settle the outstanding amount plus interest in monthly instalments as arranged with the Manager of the Fund from time to time;

(c) any beneficiary who is a contributor to the Fund who retires or is discharged in terms of subregulation (4) as from the commencing date of
these regulations and the spouse of such beneficiary in the case where
such beneficiary dies after that date, must pay in one sum, monthly
contributions that were applicable on the date of retirement, discharge or
death calculated until the contributor would have attained the age of 60
years to the Fund: Provided that-

(i) the beneficiary is responsible and compelled to pay any subsequent
increase in the monthly contributions applicable to serving members
of the Permanent Force in one sum, calculated from the date on
which such increase becomes effective and until the beneficiary
attains or would have attained the age of 60 years, to the Fund; and

(ii) should the beneficiary not be in a position to pay the increase in one
sum to the Fund, the Board may allow the beneficiary to settle the
outstanding amount plus interest in monthly instalments as arranged
with the Manager of the Fund from time to time;

(d) any contributor who enrolled in the Permanent Force under contract and
whose contract expires after completion of 10 years' continuous service,
but prior to attaining the age of 60 years, may at his or her own request,
be allowed by the Board to continue the payment of monthly contributions
to the Fund as may be determined from time to time until the contributor
attains the age of 60 years in exceptional cases and on such conditions
that the Board may determine; and

(e) any beneficiary contemplated in paragraphs (b) to (d) may,
notwithstanding the provisions of those paragraphs, be compelled by a
decision of the Board to continue with monthly contributions to the Fund
after attaining the age of 60 years at a rate determined from time to time
in respect of the beneficiary and dependants, until the beneficiary attains
the age of 75 years.

(7) The provisions of subregulation (6) are applicable, with the necessary
changes, to a widow or widower who becomes a beneficiary of the Fund owing to
the death of a person referred to in subregulation (4), (a), (b), (c), (d) and (e).

(8) Without derogating from the provisions of regulation 23, the Board may,
subject to subregulation (6) above, authorise that a child contemplated in the
definition of dependant be entitled to the benefits of the Fund if:

(a) the child is a child of a deceased beneficiary referred to in subregulation
(6) who is not survived by a spouse or whose widow or widower dies after
the death of a beneficiary; and

(b) a widow or widower, who is a beneficiary of the Fund, has remarried and
the child has thus forfeited his or her rights to the benefits of the Fund in
terms of these regulations; and
(c) the Board is satisfied that the child will otherwise not be adequately provided for in respect of medical, dental and hospital expenses.

(9) The Board may authorise that the child be entitled to the benefits of the Fund in terms of subregulation (8) on condition that regular monthly contributions applicable to serving members in respect of the child are paid and that any otherwise applicable stipulations of subregulation (5) as determined by the Board, are complied with.

(10) Notwithstanding the other provisions of this regulation, the Board may, on such conditions as it may determine, admit as a beneficiary of the Fund someone who is not or who in terms of the regulation may not be such a beneficiary if, in the discretion of the Board such a person should on account of considerations of fairness, be such a beneficiary, and such conditions may provide for-

(a) any amount or amounts which the beneficiary is liable to pay and any future contributions which he or she, or, if he or she dies within a period determined by the Board, his widow or her widower or other dependant who is entitled to benefits under the Fund, shall be liable to the Fund;

(b) circumstances under which the benefits of the beneficiary or, in the event of his widow or her widower being compelled to pay future contributions to the Fund, his or her benefits, or the benefits of his or her dependants, as the case may be, may lapse;

and thereupon the provisions of regulations 24 and 25 shall apply to such beneficiary or to his widow or her widower if he or she becomes a beneficiary by virtue of the conditions laid down by the Board and to his or her dependants, as the case may be.

(11) The Board is authorised, in cases, which the Board deems to be exceptional and deserving, to grant, without prejudicing a person's right to benefits from the Fund, exemption from payment of contributions referred to in subregulation (6) or from any portion thereof.

(12) Notwithstanding any provision in these regulations, it is the responsibility of a member who wishes to be registered as a beneficiary of the Fund, to ensure that such application is submitted through the prescribed channels, to the administrative offices of the Fund, before he or she leaves the service of the SANDF but in any event not later than 3 months after his or her last day of service."

Termination of Membership

22. The membership of a member who is a contributor to the Fund as well as his or her dependant's claim to the benefits emanating from the Fund, shall lapse with effect from the date on which such contributor's service in the Permanent Force is terminated if-
(a) that service is terminated for any reason other than the reasons mentioned in regulation 21(4);

(b) the contributor is serving in terms of a Service Term System in the Permanent Force and such term of service is terminated-

(i) prior to the completion of 10 years' continuous service, but after attaining the age of 60 years; and

(ii) on completion of 10 years' continuous service, but before attaining the age of 60 years and the contributor does not elect in terms of regulation 21(6)(d) to continue contributing to the Fund, or the Board refuses his or her request to continue to contribute, or if such contributor neglects to continue with the payment of monthly contributions to the Fund as authorised by the Board.

Inclusion of Dependant to Participate in Benefits of Fund

23. The person or category of person contemplated in the definition of "dependant" in regulation 1 may only enjoy in the benefits offered by the Fund if prior written approval has been obtained from the Manager for such persons or category of person's inclusion as a "dependant" of a beneficiary: Provided that such dependant conforms to the requirements contemplated in regulation 14.

Rights, Privileges and Duties in Respect of Fund

24. (1) Notwithstanding any provision in these regulations, a member who has contributed to the Fund for a continuous period of not less than 10 years and whose payments are up to date, and his or her dependants are entitled to the benefits offered by the Fund with effect from the date on which the contributor's service in the Permanent Force is terminated for any one of the reasons referred to in regulation 21(4). Provided that such member has met all financial obligations provided for in this Chapter

(2) Any person including a beneficiary referred to in regulation 21(6) and a dependant of such a beneficiary who is entitled to benefits from the Fund in terms of these regulations, is only entitled to the treatment and service referred to in regulations 7, 8, 9, 10, 11 and 12, on condition that any contribution that is due or payable to the Fund, by him or her or is paid, and that any provision or requirements determined by these regulations are complied with.

(3) The Board may, with due regard to the circumstances, age and mental development of, and the custody and the guardianship of a child referred to in regulation 21(8), determine conditions deemed to be necessary for the control and administration of the treatment of such child in terms of regulations governing the Fund.
(4) Notwithstanding any other provisions of this Part-

(a) every person who is entitled to benefits from the Fund, and to whom medical, dental or hospital treatment or any prescriptions or copies of such prescriptions, medicine, dressings, medical prosthesis, m\_edical aids or any other service is supplied on conditions determined by the Surgeon-General, shall pay to the Fund a contribution in the form of a levy as referred to in subregulation (14): Provided that different levies in respect of different categories of beneficiaries or suppliers of such services may be determined;

(b) every beneficiary and every other person who is entitled to the benefits from the Fund, must comply with prescripts and furnish the particulars which the Board may determine or require from time to time in connection with any levies contemplated in subparagraph (a) of this subregulation; and

(c) every person who is entitled to benefits from the Fund shall, in order to receive any treatment -

(i) furnish at such times, in such manner and to such person as the Board may, either in general or in a particular instance, designate, such personal or other particulars for the proper application of these regulations and for properly exercising control over the provision of such treatment; and

(ii) comply with the instructions issued from time to time by the Board with regard to the identification of the person to whom the treatment is given and such person shall comply with the procedures which have been laid down by the Surgeon-General with regard to the provision of such treatment.

(5) If a beneficiary or the dependant of a beneficiary fails to comply with any of the requirements of subregulation (4)(b) or (c) or an instruction issued in terms thereof, the Surgeon-General or the Manager shall arrange that, for the duration of such failure, all treatment and benefits derived from the Fund, be discontinued in respect of such beneficiary and his or her dependant or such other person.

(6) If a beneficiary or any other person entitled to the benefits from the Fund fails to inform the Manager within 30 days from the date, of any change in marital status or the status of the dependant concerned, which change affects the right of the beneficiary or his or her dependant to treatment in such a manner that the right must be suspended, or if such beneficiary or any other person concerned fails to comply with the provisions of subregulation (4)(b) and (c) or with any of the instructions issued in terms thereof, and as a result of such failure treatment is given to any person contrary to a subregulation (5) ruling, the Manager must report the
failure to the Board who may order that the expenses incurred for the treatment be refunded to the Fund and the Surgeon-General shall arrange that, for the duration of the failure, all treatment and benefits derived from the Fund be discontinued in respect of such beneficiary or his or her dependant or any other person.

(7) The Surgeon-General shall report any -
(a) treatment received by a beneficiary of the Fund or by his or her dependant or by any other person who is entitled to benefits from the Fund which has been provided in contravention of this regulation; and
(b) malpractice or irregularity that occurs with regard to the provision by a pharmacist, doctor or any other person of medicine, dressings, medical prosthesis, treatment or service to a beneficiary, his or her dependant or to another person entitled to benefits from the Fund, which comes to his or her notice to the Board, and the Board may terminate the benefits received by the beneficiary, his or her dependant or any other person, or instruct the beneficiary concerned or the other person to repay the unauthorised expenditure to the Fund.

(8)
(a) Whenever the Surgeon-General deems it necessary, in respect of the admission or future admission of a person to a hospital in terms of subregulation (2) and the person's medical condition makes him or her unfit to provide his or her own transport, the Surgeon-General may authorise the transportation of such person to and from hospital in an ambulance or any government or public transport, and for this purpose authorise the issue authority for the most economical method of transport against repayment: Provided that authorisation for the use of private transport, where government or public transport is not available or feasible, may be granted by the Manager of the Fund on a standing authorisation of the Surgeon-General;
(b) the Fund must pay for the use of any transport authorised in terms of paragraph (a) according to-
   (i) the tariffs laid down by Treasury for government transport;
   (ii) the public tariffs laid down in respect of transport by rail or by air; and
   (iii) the tariffs applicable to any other form of transport,
as the case may be
(9) Notwithstanding any provision in this Part, a beneficiary must make use of the medical facilities offered by a military medical or nursing institution, sickbay or a military medical clinic of the SANDF or any other institution designated by the Surgeon-General: Provided that-

(a) any person who is entitled to make use of the benefits offered by the Fund, may, for sound reasons, obtain prior approval from the Surgeon-General in consultation with the Manager to make use of the services of a medical or dental practitioner who does not have any of the facilities of the mentioned institutions;

(b) any beneficiary or person entitled to benefits from the Fund, may, without creating liability for the Fund, obtain medical treatment elsewhere at own expense; and

(c) the Board may, on the recommendation of the Surgeon-General, authorise the Fund to defray the expenses incurred for urgent medical, dental or hospital treatment by any medical or dental practitioner or hospital in a case of emergency to any person who is entitled to the benefits offered by the Fund.

(10) If any person who is entitled to the benefits offered by the Fund, wishes to obtain treatment additional to the treatment provided for in terms of these regulations or the use of alternative hospital facilities he or she shall obtain prior written approval from the Surgeon-General who may lay down conditions regarding the nature and provision thereof, or may authorise that it, or any part thereof, be provided at the expense of the Fund: Provided that if the conditions laid down are not complied with, the Fund will not be liable for the payment of those expenses.

(11) The Fund may claim from the beneficiary, or any other person entitled to benefits from the Fund, the costs of any treatment provided to the beneficiary or his or her dependant or to such other person for any injury or illness caused by a third party against whom such a beneficiary, or his or her dependant or such other person, would otherwise have had a right to claim damages if the Fund had not paid such costs, irrespective of whether the beneficiary or his or her dependant or such other person has exercised that right or not: Provided that the said costs will not be recovered from the beneficiary or the person concerned if-

(a) the Manager is notified in writing of the cause for such claim within 30 days after a claim has arisen;

(b) he or she has, at no time, accepted an unauthorised settlement of such claim or, if it is applicable, has not agreed to the acceptance of a settlement by a dependant of the person concerned, or has not made an admission to the detriment of the Fund to a third party; and
(c) he or she has recovered the costs of such treatment and has reimbursed the Fund, or has ceded any claim for the reimbursement of such treatment or expenses to the Fund.

(12) This regulation does not authorise the provision, at the expense of the Fund, of treatment as contemplated in regulation 14(3), irrespective of whether such treatment is provided in terms of the aforementioned regulation or in terms of any other Act.

(13) The Manager may withdraw a document issued in terms of these regulations for the identification of a beneficiary or his or her dependant or any other person entitled to benefits from the Fund which authorises any treatment in terms of these regulations, if the benefits of a person referred to therein or the right of such a person to treatment in terms of these regulations, has been suspended or cancelled or if such person's right thereto has been terminated. If the Manager demands the document, the person in whose possession the document may be, must hand or cause it to be handed over to the Manager.

(14) The contribution in the form of a levy referred to in subregulation (4)(a), is an additional payment of a percentage determined by the Board from time to time on all medical services rendered by a private practitioner, other than the Surgeon-General: Provided that such levy is not payable in cases where the beneficiary has been referred to an authority outside the SANDF by the Surgeon-General or his or her delegate for such treatment or service.

Basis for Provision of Treatment

25. (1) The Surgeon-General regulates and controls the provision of medical, dental and hospital treatment to a person entitled to it in terms of these regulations. The treatment is, subject to subregulation (2), given to him or her as if he or she is a serving member of the Permanent Force or a dependant of any such member or any other person entitled to benefits from the Fund.

(2) The Surgeon-General or a medical officer delegated by the Surgeon-General may, subject to subregulation (3) when authorising the treatment contemplated in subregulation (1)-

(a) use any military medical service or facility under the control of the Surgeon-General;

(b) without derogating from the provisions of regulation 24(9) and (10) if any beneficiary or, if applicable, his or her dependant or any other person entitled to benefits from the Fund resides at a place where there is no military hospital or where a military hospital is unable to accommodate or to treat the person concerned, because of lack of space or the absence of facilities which, in the opinion of the Surgeon-General or the medical
officer· are required for the treatment of such person, authorise the
admission to or the treatment of that patient at any other hospital or
institution that may be designated for the purpose;

(c) without derogating from the provisions of regulation 24(9)(b) and (10),
grant prior authorisation for the provision of such service or facility by a
private medical practitioner or medical institution in addition to the
services and facilities referred to in subparagraphs (a) and (b); and

(d) provide any person referred to in subregulation (1) with medicine,
dressings, medical prostheses, medical aid and other services from
government supplies as part of such person's treatment, or give prior
authorisation for the provision thereof in another manner.

(3) The Fund must reimburse the State for any treatment and for the
medicine, dressings, medical prostheses, medical aids as well as any other services
provided in terms of these regulations, subject to the conditions and at the rates laid
down from time to time by the Surgeon-General with the approval of the Treasury in
respect of-

(a) the use of military services and facilities and the provision of medicine,
dressings and medical prostheses, medical aids and other items from
government supplies;

(b) the provision of a service or the use of a facility referred to in
subregulation (2)(b); and

(c) a service or facility referred to in subregulation (2)(c), by agreement with
the institution or person concerned: Provided that-

(i) the tariffs laid down for the purpose of paragraphs (a) and (b) do not
include the provision of anything which does not form part of
government supplies and which has to be procured by the State for
the treatment, or of medicine, dressings, medical prostheses,
medical aids or services which, for the purposes of this regulation,
are supplied by a private pharmacist on prescription to a beneficiary
or his or her dependant or any other person who is entitled to benefit
from the Fund, and any such acquired article, medicine, dressing,
medical prostheses, medical aids or service shall be paid for in full
by the Fund; and

(ii) the tariffs laid down for the purposes of this paragraph do not exceed
the preferential scale applicable to the provision of similar services
and facilities to members of other medical aid societies.
Administrative Provisions

26. (1) The accountant and other personnel of the Fund shall -

(a) open and keep up to date account books of the Fund;

(b) undertake the financial administration of the Fund in accordance with the decisions of the Board; and

(c) arrange for the auditing, by a chartered accountant, appointed by the Board, of the account books and accounts of the Fund and for submission to the Board of the report and statements referred to in sub-regulation (5).

(2) The Manager controls, co-ordinates and carries out the administrative duties relating to his or her office, keeps a record of contributors and beneficiaries, and exercises control over contributors and beneficiaries in accordance with regulation 24(2) up to and including (13).

(3) The Chief of Finance (Chief Paymaster) deducts the contributions of a member referred to in regulation 21(1)(a), (b) and (c) from his or her salary and deposits the total amount of contributions into the Fund every month and notifies the accountant of the Fund of the total amount thus deposited.

(4) The Surgeon-General shall regularly submit to the accountant of the Fund for settlement-

(a) accounts drawn up in accordance with tariffs laid down in terms of regulation 25(3) for services, facilities, medicine, dressings and medical prostheses and any other services which the military medical organisation has rendered in terms of these regulations.

(b) accounts submitted by any institution or person in accordance with regulation 25 after examining and certifying them as payable; and

(c) any account referred to in paragraph (b) which has not been certified, but the payment of which has been specially authorised by the Board.

(5) The Board shall submit annually within six months of the closing of the financial year of the Fund-

(a) audited statements of accounts of the assets and liabilities and of the income and expenditure of the Fund for the financial year concerned; and

(b) a report on the execution of the control functions for the period and the aims and planning for future activities,

to the Chief of the SANDF.
(6) The statements referred to in subregulation (5)(a) shall be made available to contributor or beneficiary on submission of a written application.
MEDICAL FUND B FOR PERMANENT FORCE MEMBERS WHO RETIRED ON PENSION BEFORE 7 JANUARY 1964, AND THEIR FAMILIES

Establishment of Fund

27. The Fund which is hereby established, shall be known as the Permanent Force Medical Fund B for the Permanent Force and is a corporate body and deemed to be a fund in terms of section 87(1)(f) of the Defence Act, 1957, which provides medical, dental and hospital treatment to members of the Permanent Force who retired on pension before 1 January 1964, and their families and to the families of members of the said Force who died before the said date.

Authority of Fund

28. Without derogating from the provisions of regulations 35, the Fund is authorised to-

(a) receive and keep in trust any income that may become due to it in terms of these regulations from contributions or levies on members or from interest on investments, which may accrue by way of donations, grants, or a subsidy or in any other manner;

(b) defray any expenses from revenue due to it and received-

(i) which result from treatment referred to in regulation 27;

(ii) which have necessarily been incurred for the organisation and functioning of the Fund; and

(c) invest any part of such income for the benefit of the Fund or recall any such investments.

Establishment of Board of Trustees

29. (1) A Board of Trustees is established for the Fund. The provisions of Regulations 19 and 20 of this Chapter apply mutatis mutandis to this Part.

Members of and Contributions to Fund

30 (1) Every person who retired on pension before 1 January 1964-

(a) who, during that period of service in the Permanent Force contributed to a government pension fund in terms of the applicable pension laws and receives an annuity therefrom;
(b) who before the said date was discharged as medically unfit and instead of or in addition to such annuity receives an annuity in terms of the Compensation for Occupational Injuries and Diseases Act, 1993; and

(c) who is the widow or widower of a person who died during his or her period of service,

may, subject to the provisions of these regulations be admitted as a member of the Fund: Provided that any widow or widower who is admitted to the fund shall contribute to the Fund in terms of regulation(32)(1).

31 (1) Every beneficiary of the Fund shall contribute annually an amount of R36 in advance to the Fund, which contribution may, from time to time be increased by the Board, by not more than 15% annually.

(2) Every person who in terms of this regulation is entitled to become a member of the Fund, shall on acceptance of his or her application, sign an undertaking to the effect that all financial and other obligations referred to in these regulations towards the Fund shall be met.

(3) If a beneficiary of the Fund dies, his widow or her widower may, on payment of the contribution referred to in subregulation (1) and on signing the undertaking referred to in subregulation (2), remain a beneficiary of the Fund and enjoy the medical benefits referred to in regulation 35.

Termination of Membership

32 (1) The benefits of a widow or widower who, in terms of these regulations became a beneficiary and who annually before 31 March, must submit documentary proof to confirm his or her status as a widow or widower to the Manager of the Fund, lapse on the date upon which she remarries, from which date his or her obligation to make further contributions to the Fund also terminates.

(2) No person whose membership has lapsed in terms of subregulation (1) or has been terminated in terms of regulation (33)(1), is entitled to any reimbursement of contributions made by or on his or her behalf to the Fund.

(3) Subject to subregulation (1), the Board may enrol the dependant of a beneficiary referred to in regulation (30)(1) who dies as a beneficiary of the Fund, or a widow or widower referred to in subregulation (2), and may, after a widow or widower, who is a beneficiary of the Fund has remarried, and if the Board is satisfied that the dependant of a deceased beneficiary who in consequence of such remarriage has forfeited his or her claim to treatment in terms of these regulations shall otherwise not enjoy adequate medical or hospital treatment, grant authority that such dependant be enrolled as a beneficiary of the Fund as if the widow or widower concerned has died, or that from time to time such dependant may be provided with
treatment in terms of these regulations which the Board deems adequate, as if the
dependant has been enrolled as a beneficiary of the Fund.

Rights, Privileges and responsibilities of Members of Fund

33 (1) A beneficiary and his or her dependant or any other person contemplated
in regulation (30) who, in terms of this regulation is entitled to benefits from the Fund
is, whilst his or her membership of the Fund continues, but subject to the provisions
of this regulation and subregulation (2), restricted to the treatment and services
referred to in regulations 7, 8, 9, 10 11 and 12, and receives them as if he or she has
not retired, on condition that any contribution or contributions payable to the Fund by
any person, or is paid and that any instruction or condition laid down in terms of
these regulations has been complied with: Provided that no such beneficiary or his or
her dependant or any other person who is entitled to benefits from the Fund is
entitled to any treatment and services in terms of this regulation unless he or she has
made contributions for three months in terms of regulation (34)(1), to the fund:
Provided further that the Board may determine the treatment to which a beneficiary
of the Fund is entitled.

(2) The Board may, with due regard to the circumstances, age and mental
development and the custody and guardianship of a dependant referred to in
regulation (32)(3), determine conditions deemed necessary for the control and
administration of the treatment of such dependant in terms of regulations governing
the Fund.

(3) Every person who is entitled to benefits from the Fund shall, in order to
receive any treatment-

(a) furnish, at times, in a manner determined by the Board and to a person
whom the Board may, whether in general or in a particular instance,
designate, personal or other particulars required for the proper application
of these regulations and for the proper exercise of control over the
provision of such treatment;

(b) comply with the instructions issued from time to time by the Board with
regard to the identification of a person to whom treatment or service is
given rendered, and such person shall also comply with the procedures
that have been laid down by the Surgeon-General with regard to the
provision of such treatment; and

(c) notwithstanding the provisions of subregulation (1) above, pay a levy
determined in subregulation (13) to the Fund for any prescription or copy
of a prescription or for any medicine, dressings, medical prosthesis,
medical aid, or any other service supplied on such conditions as may be
determined by the Surgeon-General: Provided that different levies in
respect of different categories of beneficiaries or suppliers can be determined.

(4) If a beneficiary or his or her dependant or any other person entitled to benefits from the Fund, fails to comply with any of the requirements of subregulation (3)(b) or (c) or an instruction issued in terms thereof, the Surgeon-General or the Manager shall arrange that, for the duration of such failure, all treatment and benefits derived from the Fund, be discontinued in respect of such beneficiary, his or her dependant or such other person.

(5) If a beneficiary or any other person entitled to benefits from the Fund fails to inform the Manager within 30 days from the date, of any change in his or her marital status or the status of a dependant, which affects the right of the beneficiary or that of his or her dependant to receive treatment, to an extent that his or her right must be suspended, if the beneficiary or any other person fails to comply with the provisions of subregulations (3)(a) and (b) or with any of the instructions issued in terms thereof, and as a result of such failure treatment is given to any person contrary to subregulation (4), the Manager shall report this state of affairs to the Board. The Board can instruct the person concerned to repay the costs of the treatment to the Fund, and the Surgeon-General shall arrange that, for the duration of the failure, all treatment and benefits derived from the Fund, be discontinued in respect of such beneficiary or his or her dependant or any other person.

(6) The Surgeon-General shall report any-

(a) treatment of a beneficiary of the Fund, or of his or her dependant or of any other person entitled to benefits from the Fund which has been provided contrary to this regulation; and

(b) malpractice or irregularity that occurred with the provision by a pharmacist, doctor or any other person, of medicine, dressings, medical prosthesis, treatment or service to a beneficiary or his or her dependant or to another person entitled to benefits from the Fund, which comes to his or her notice to the Board. The Board may terminate the benefits of the beneficiary or of his or her dependant or of such other person entitled to benefits from the Fund, or instruct the beneficiary or the other person, as the case may be, to repay the unauthorised expenses to the Fund.

(7) (a) Whenever the Surgeon-General deems it necessary, in respect of a consultation with regard to an admission or the admission of a person to a hospital in terms of subregulation (1), he or she may authorise the transportation of such person to and from the hospital in an ambulance or any government or public transport, and for this purpose authorise the issue of rail warrants against repayment: Provided that the authorisation
for the use of private transport, where government or public transport is not available, may be granted by the Manager of the Fund on a standing authorisation of the Surgeon-General;

(b) the Fund must pay for the use of any transport authorised in terms of paragraph (a) according to-

(i) the tariffs laid down by Treasury for government transport;

(ii) the public tariffs laid down in respect of transport by rail or by air; and

(iii) the tariffs applicable for this purpose to any other form of transport, as the case may be.

(8) Notwithstanding any provision in this Part, a beneficiary must make use of the medical facilities offered by a military medical or nursing institution, sickbay or a military medical clinic: Provided that-

(a) any person who is entitled to make use of the benefits offered by the Fund, may, for sound reasons, obtain prior approval from the Surgeon-General in consultation with the Manager to make use of the services of a medical or dental practitioner who is not attached to any of the mentioned institutions;

(b) any beneficiary or person entitled to the benefits of the Fund, may, without creating any liability for the Fund, obtain medical treatment elsewhere at own expense; and

(c) the Board may, on the recommendation of the Surgeon-General, authorise the Fund to defray the expenses incurred for urgent medical, dental or hospital treatment by any medical or dental practitioner or hospital in a case of emergency given to any person entitled to benefits offered by the Fund.

(9) If any person entitled to benefits offered by the Fund wishes to obtain treatment additional to the treatment provided for in terms of these regulations or to use alternative hospital facilities, he or she shall obtain prior written approval from the Surgeon-General who may lay down conditions regarding the nature and provision thereof or may authorise that it or any part thereof be provided at the expense of the Fund: Provided that if the conditions laid down are not complied with, the Fund will not be liable for the payment of such expenses.

(10) The Fund may claim from the beneficiary or any other person entitled to benefits from the Fund, the costs of any treatment provided to the beneficiary or his or her dependant or such other person, if the treatment provided is for an injury or illness caused by a third party against whom the beneficiary or a member of his or
her family or such other person, would otherwise have a right to claim damages if the Fund had not paid such costs, irrespective of whether the beneficiary or his or her dependant or such other person has exercised that right or not: Provided that the said costs will not be recovered from the beneficiary or such other person if he or she-

(a) notifies the Manager in writing of such right to claim within 30 days after it has arisen; and

(b) has, at no time, accepted an unauthorised settlement of such claim or, where applicable, has not agreed to the acceptance of a settlement by the dependant or has not made an admission to the detriment of the Fund to the third party; and

(c) has recovered the costs of such treatment and has reimbursed the Fund, or has ceded any claim for reimbursement in respect of such treatment or expenses to the Fund.

(11) This regulation does not authorise the provision, at the expense of the Fund, of treatment as contemplated in regulation 14(3), irrespective of whether such treatment is provided in terms of the aforementioned regulation or in terms of any other Act.

(12) The Manager may withdraw a document which has been issued in terms of these regulations for the identification of a beneficiary, his or her dependant or any other person entitled to benefits from the Fund, which authorises any treatment in terms of these regulations, if the benefits of a person referred to therein or his or her right to treatment in terms of these regulations has been suspended, cancelled or terminated. If the Manager at any time demands such document, such person shall hand over or cause it to be handed over to the Manager.

(13) The contribution in the form of a levy to which subregulation (3)(c) refers, is an additional payment of twenty percent on all medical services rendered by a private practitioner, other than the Surgeon-General: Provided that such levy is not payable in cases where the beneficiary has been referred to an authority outside the SANDF by the Surgeon-General or his delegate for such treatment or service: Provided further that this levy is not payable on dental or ophthalmological services.

Basis for Provision of Treatment

34 (1) The Surgeon-General regulates and controls the provision of medical, dental and hospital treatment to persons entitled to it in terms of Part IV of this chapter and such treatment shall, subject to subregulation (2), be given to them as if they are serving members of the Permanent Force or a dependant of such member.
(2) The Surgeon-General or a medical officer delegated by the Surgeon-General may, subject to subregulation (3), when authorising the provision of any treatment contemplated in subregulation (1)-

(a) use any military medical service or facility under the control of the Surgeon-General;

(b) without derogating from the provisions of regulation (33)(8) and (9), if any beneficiary or, if applicable, his or her dependant or any other person entitled to benefits from the Fund resides at a place where there is no military hospital or where a military hospital is unable to accommodate or to treat him or her effectively because of lack of space or the absence of facilities which, in the opinion of the Surgeon-General or the medical officer are required for the treatment of such person, authorise the admission to or the treatment of that patient at any other hospital or institution which may be designated for that purpose;

(c) without derogating from the provisions of regulation (33)(8)(b) and (9), grant prior authorisation for the provision of such service or facility by a private medical practitioner or medical institution in addition to the services and facilities referred to in subparagraphs (a) and (b); and

(d) provide any person referred to in subregulation (1) with medicine, dressings, medical prosthesis, medical aids and other service from Government supplies as part of such person's treatment, or give prior authorisation for the provision thereof in another manner.

(3) The Fund must reimburse the State for any treatment and for the medicine, dressings, medical prosthesis, medical aid, as well as any other service provided in terms of these regulations subject to the conditions and at the tariffs laid down from time to time by the Surgeon-General with the approval of Treasury in respect of-

(a) the use of military services and facilities and the provision of medicine, dressings and medical prosthesis, medical aids and other service from government supplies;

(b) the provision of a service or the use of a facility referred to in subregulation (2)(b); and

(c) a service or facility referred to in subregulation (2)(c) by agreement with the institution or person concerned: Provided that

(i) the tariffs laid down in terms of paragraphs (a) and (b) do not include the provision of anything which does not form part of government supplies and which has to be procured by the State for the
treatment, or the provision of medicine, dressings, medical prosthesis, medical aids or service which, for the purposes of this regulation, are supplied by a private pharmacist on prescription to a beneficiary or his or her dependant. Such article, medicine, dressings, medical prosthesis, medical aids or service shall be paid for in full by the Fund; and

(ii) the tariffs laid down for the purposes of this paragraph do not exceed the preferential scale applicable to the provision of similar services and facilities to members of other medical aid societies.

Administration Provisions

35 (1) The accountant and other personnel of the Fund shall-

(a) open and keep up to date account books for the Fund;

(b) undertake the financial administration of the Fund in accordance with the decisions of the Board; and

(c) arrange for the auditing, by a chartered accountant appointed by the Board, of the books and accounts of the Fund and for submission to the Board of the report and statements referred to in subregulation (4).

(2) The Manager controls, co-ordinates and carries out the administrative duties relating to his or her office, keeps a record of contributors and beneficiaries, and exercises control over such contributors and beneficiaries in accordance with regulation 34.

(3) The Surgeon-General shall regularly submit to the accountant of the Fund for settlement-

(a) accounts drawn up in accordance with tariffs laid down in terms of regulation (34) for services, facilities, medicine, dressings and medical prosthesis and any other service which the military medical organisation has rendered in terms of these regulations;

(b) accounts submitted by any institution or person in accordance with regulation (34)(3) after such accounts have been examined and certified payable; and

(c) any account referred to in subparagraph (b) which has not been certified, but for which the payment has been specially authorised by the Board.

(4) The Board submits annually within six months of the closing of the financial year of the Fund-
(a) audited statements of accounts of the assets and liabilities and of the income and expenditure of the Fund for the financial year for concerned; and

(b) a report on the execution of the control functions over the period and the aims and planning for future activities, to the Chief of the SANDF.

(5) The statements referred to in subregulation (4)(a) shall be made available to a contributor or a beneficiary on submission of a written application.