

**JULY
2025**

DIASPORA PLANS

Cater for your family
back home

Care without borders.

Support their health from wherever you are.



Minimum to no shortfalls & co-payment

Pay minimum to no top-ups with our plans, and enjoy more peace of mind knowing your loved ones' medical requirements are catered for.



Wellness and health risk management program

Stay pro-active about healthy living and lifestyle with ongoing fitness and wellness activities designed to keep you fit, active and smiling. Included in all our packages!



Access to a wide range of medical facilities & services

We give you access to a vast world of medical services! From general practitioners and specialists to radiology services, and pharmacies - you've got coverage.



Hospital Cash Back plan

We'll pay a discretionary cash amount for the inconvenience of a hospital stay exceeding two days through our hospital cash back plan. That's real value!



Pay easily & flexibly. Anywhere, anytime.

Make payments for your loved ones online.



Enjoy convenience with the Healthmate App!

Manage subscription, claims, and access support on-the-go.



**CELLMED
SWEET
REWARDS**

PLAN BENEFITS

	MANUKA (Annual Limit)	LAVENDER (Annual Limit)	CLOVER (Annual Limit)	SAGE (Annual Limit)
Annual Limit	13,000.00	21,000.00	33,000.00	33,000.00
Hospitalisation Limit	5,000.00	8,000.00	13,000.00	13,000.00
Ward Admission (Pre-authorisation required)	B-F & Gen. Wards	B-F & Gen. Wards	All (P,G,M I) 2 bedded wards	All (P,G,M I) 2 bedded wards
ER Consultations- Outpatient	500.00	700.00	1,000.00	1,000.00
GP Consultations- Outpatient	400.00	500.00	700.00	700.00
Specialist Consultations- Outpatient	500.00	700.00	1,000.00	1,000.00
Surgical Procedures	Accrues to hospital limit	Accrues to hospital limit	Accrues to hospital limit	Accrues to hospital limit
Chronic Medication	800.00	1,200.00	1,500.00	1,500.00
Acute Medication	600.00	1,000.00	1,300.00	1,300.00
Oncology (Chemotherapy & Radiotherapy) Members must register on Oncology program	Accrues to hospital limit	Accrues to hospital limit	Accrues to hospital limit	Accrues to hospital limit
Organ Transplant	Accrues to hospital limit	Accrues to hospital limit	Accrues to hospital limit	Accrues to hospital limit
Blood Transfusion	Accrues to hospital limit	Accrues to hospital limit	Accrues to hospital limit	Accrues to hospital limit
Ambulance Services	Accrues to hospital limit	Accrues to hospital limit	Accrues to hospital limit	Accrues to hospital limit
Air Evacuation (Pre-authorisation required)	No Benefit	No Benefit	Accrues to hospital limit	Accrues to hospital limit
Maternity (Members must register on the Maternity Care Network Program)	7 Ante -natal visits 3 Post-natal visits 2 Ante-natal scans	7 Ante -natal visits 3 Post-natal visits 2 Ante-natal scans	7 Ante -natal visits 3 Post-natal visits 2 Ante-natal scans	No benefit
Foreign Treatment (Pre-authorisation required)	Not covered	Not covered	Covered (South Africa and India)	Covered (South Africa and India)
Allergy Tests	150.00	240.00	320.00	320.00
Other Pathology Tests	250.00	360.00	460.00	460.00

Note: All quoted benefits are in USD

Terms and conditions apply

Bringing your healthy smile back!

	MANUKA (Annual Limit)	LAVENDER (Annual Limit)	CLOVER (Annual Limit)	SAGE (Annual Limit)
MRI, CT & PET Scans (Pre-authorisation required)	900.00	1,500.00	1,800.00	1,800.00
Other Radiology	600.00	1,000.00	1,200.00	1,200.00
Dental- Preventative incl. Scaling & Polishing	100.00	150.00	200.00	200.00
Dental-Treatment incl Fillings, Extractions & Periodontics	250.00	350.00	500.00	500.00
Orthodontic/Prosthetics	400.00	600.00	1,000.00	1,000.00
Preventative Care	Annual GP Check-ups, Authorised Rabies Vaccines (2 per year), Check-ups (Papsmear, Cholesterol, Lipogram, Blood Glucose, TB Tests, Prostate Cancer & HIV Tests)	Annual GP Check-ups, Authorised Rabies Vaccines (2 per year), Check-ups (Papsmear, Cholesterol, Lipogram, Blood Glucose, TB Tests, Prostate Cancer & HIV Tests)	Annual GP Check-ups, Authorised Rabies Vaccines (2 per year), Check-ups (Papsmear, Cholesterol, Lipogram, Blood Glucose, TB Tests, Prostate Cancer & HIV Tests)	Annual GP Check-ups, Authorised Rabies Vaccines (2 per year), Check-ups (Papsmear, Cholesterol, Lipogram, Blood Glucose, TB Tests, Prostate Cancer & HIV Tests)
Physiotherapy	200.00	300.00	400.00	400.00
Mental Health	500.00	900.00	1,500.00	1,500.00
Psychiatric/ Psychology Consultations	Maximum of 6 consults per year	Maximum of 6 consults per year	Maximum of 6 consults per year	Maximum of 6 consults per year
Psychiatric Admissions	Maximum of 30 days per year	Maximum of 30 days per year	Maximum of 30 days per year	Maximum of 30 days per year
Contraceptives (Family Planning Tablets, Injections, Implants)	100.00	150.00	200.00	No benefit
Optical including refraction (2 yearly benefit)	250.00	300.00	400.00	400.00
Prosthesis				
i. Internal	800.00	1,600.00	2,600.00	2,600.00
ii. External	700.00	1,300.00	2,290.00	2,290.00
Special Appliances				
i. BP Machine	50.00	80.00	100.00	100.00
ii. Glucometer	50.00	700.00	100.00	100.00
iii. Nebuliser	100.00	150.00	200.00	200.00
Baby Benefit	20.00	30.00	50.00	No benefit
Bereavement Cover	200.00	250.00	300.00	300.00
Hospital Cash Back daily payout (After 48 hours)				
Adult	100.00	100.00	100.00	100.00
Child	50.00	50.00	50.00	No benefit

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CONDITIONS OF SERVICE: BENEFITS WAITING PERIODS

BENEFIT	WAITING PERIOD		
Consultations	3 Months	Psychiatric/Psychology	6 Months
General Practitioners	3 Months	Physiotherapy	6 Months
Acute Medication	3 Months	Maternity	9 Months
Dental - Fillings and Extraction	6 Months	Optical Benefit	12 Months
Specialist Services	6 Months	MRI , PET and CT Scans	12 Months
Diabetes	6 Months	Bereavement Token	12 Months
Hypertension	6 Months	Thyroidectomy	24 Months
Asthma	6 Months	Head Surgery	24 Months
HIV/ AIDS	6 Months	Spinal Surgery	24 Months
Arthritis	6 Months	Organ Transplant	24 Months
General Scans and X-rays	6 Months	Knee and Hip Replacement	24 Months
Congestive Cardiac Failure	6 Months	Lupus	24 Months
Hospitalisation	6 Months	Auto immune conditions	24 Months
Minor Surgeries (e.g. appendix , tonsil removal)	6 Months	Chemotherapy / Radiotherapy	24 Months
Auxiliary Services	6 Months	Haemodialysis	24 Months
Contraceptives	6 Months	Orthodontic Treatment	24 Months
Ambulance	6 Months	Major Surgeries	24 Months
Prosthesis	6 Months		

* CellMed retains the right to underwrite and invoke additional waiting periods
** High claims performance of account will result in loading of subscription

MONTHLY CONTRIBUTIONS

	MANUKA	LAVENDER	CLOVER	SAGE
Principal Member/ Spouse/ Adult	69.00	110.00	125.00	N/A
Child Dependent	47.00	79.00	78.00	N/A
Overage Adult Dependent up to 65 years	86.00	132.00	144.00	N/A
Above 65 years to 75 years	N/A	N/A	N/A	216.00

Note: All quoted prices are in USD

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Sign up for the CellMed Diaspora plan **today!**

Visit the website or scan the QR
code to get started



Get in touch

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MUTARE

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HWANGE

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Health Services Section
Hwange Colliery Hospital

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