PREMIER POINT
Magazine

6th Issue

Produced by PSMAS Communications and Stakeholder Relations

MEDICAL AID COVER IS NOT AUTOMATIC UPON RETIREMENT

Retiring members of the Premier Service Medical Aid Society (PSMAS) must take proactive steps to ensure seamless benefits upon retirement as medical aid coverage will not automatically continue when they cease to work.

PSMAS Director marketing & member service Mr Edgar Makore presenting at the Public Service Commission Retirement Conference

The warning was delivered during the Public Service Commission (PSC) 2nd Retirement Conference, which was held from the 24th to the 26th of September 2025 in Bulawayo. Attended by nearly 2 500 participants drawn from various Ministries and departments in the civil service, the conference ran under the theme: Retirement planning in action: Transforming insights into realities.

PSMAS used the platform to educate members approaching retirement on the necessary administrative steps to maintain their cover.

Speaking at the conference, health experts noted that retirement years often coincide with an increased need for healthcare, citing the prevalence of chronic conditions such as hypertension, diabetes, and arthritis, as well as rising cases of cancer and kidney disease, hence the need to remain on medical aid.

Retirement expert Mr Sebastian Zuze emphasised on the need to extend retirement beyond finances to include proactive healthcare management.

“Retirement is not only about receiving a pension. It must go beyond that to also include healthcare management and planning for that management starts now. We need to plan for our future healthcare needs now,” said Mr Zuze.

It was against this backdrop that PSMAS officials outlined the simple yet crucial procedure for members. PSMAS marketing and member services Director, Mr Edgar Makore said members in civil service, salary-based contributions cease upon retirement because of the change in pay source.

Before retirement, subscriptions are normally deducted from salaries and upon retirement, the pay source becomes Government pensions, hence members must notify the Society of this change for deductions to continue.

He explained that notification is done through completion of a membership amendment form, changing their employer details to ‘pension.’ The form is obtainable at any PSMAS office or respective institutions’ human resource departments.

Mr Makore urged members to act swiftly, ideally within two months of leaving employment, to prevent any disruptions in their medical aid benefits.

“All a member needs to do is complete a membership amendment form when they retire, changing their employer details to ‘pension.’ This ensures no break in cover and retirees can continue enjoying their medical aid benefits seamlessly. The process is simple, but it is important that members act on it quickly, ideally within two months of leaving employment, to avoid any disruptions in their cover,” said Mr Makore.

During the conference, PSMAS emphasized that its role goes beyond simply providing financial cover for medical bills. Its programmes are designed to promote preventive care, early detection, and long-term management of illnesses, ensuring retirees to enjoy a higher quality of life.

The benefits available to pensioners under PSMAS include disease management programmes for conditions such as diabetes, cancer and chronic kidney disease, as well as access to the chronic medicines programme. Retirees are also covered for hospitalization, dental and optical services, wellness and screening programmes and mental health support.

Speaking at the same occasion, PSMAS population health and wellness coordinator, Dr Tapiwa Chiworeka, reiterated the Society’s commitment to preventive care.

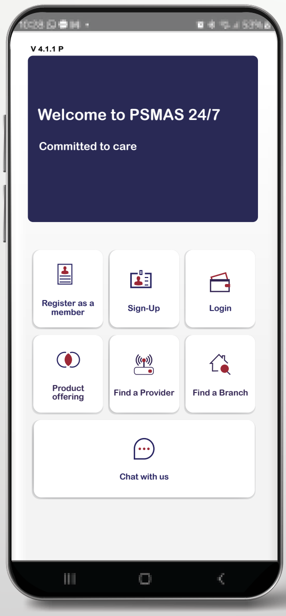
He stated that early screening and consistent care were fundamental to helping retirees enjoy healthier, fuller lives, adding that PSMAS believes retirement should be a time of dignity and peace of mind, not worry over medical bills.

The conference concluded with a clear call to action for all PSMAS members nearing retirement to initiate contact with the Society to facilitate a smooth transition and uninterrupted healthcare cover.

PSMAS
PREMIER SERVICE
MEDICAL AID SOCIETY

MOBILE APP FUNCTIONALITIES

- View Our Product Offering
- Check Claim Status
- Update Contact Details
- Add A Beneficiary
- View Our Service Provider Network
- Plan Change



- Enquire On Contributions
- Instantly Chat With A Psmas Assistant
- Certification Of Membership
- Online Registrations
- Perform Online Payments

Download the PSMAS 24/7 Mobile App today

Download on the App Store

GET IT ON Google Play

EVERY STORY MATTERS: PSMAS CHAMPIONS EARLY DETECTION

AS THOUSANDS EMBRACE LIFE-SAVING SCREENINGS

This Pink October, as the world unites under the powerful theme, "Every story is unique, every journey matters," the Premier Service Medical Aid Society (PSMAS) is putting that mantra into life-saving action.

PSMAS is proud to announce a significant milestone in its ongoing commitment to preventive healthcare. To date, over 3,254 women within the PSMAS membership have undergone breast cancer screening through intensified outreach programmes.

These are not just numbers, they represent thousands of individual stories of women taking proactive control of their health.
Of these screenings, 27 members were promptly referred for further diagnostic tests based on initial findings.

Crucially, two cases were identified at an early stage, enabling immediate and timely medical intervention. These early detections are a profound testament to the programme's success, turning what could have been a difficult journey into a story of hope and proactive care.

"This is the very core of our preventive health philosophy," said PSMAS's population, health and wellness coordinator Dr Tapiwa Chioreka.

"By moving the focus from treatment to early detection, we are not just managing illness; we are actively saving lives and protecting families. Each early detection is a victory for our members and a validation of our strategy," he added.

While breast cancer awareness month rightly shines a spotlight on this critical issue, PSMAS's commitment to preventive care is a year-round, comprehensive effort. The Society has taken its outreach programmes to almost all corners of the country, including hard to reach areas, sometimes at the invitation of member organisations and sometimes at its own initiative.

PSMAS wellness outreach also covers screening for other cancers with equally impactful results:

- Prostate Cancer: 1,634 members have been screened, with 42 referred for further diagnostics.
- Cervical Cancer: 1,000 members have been screened, leading to 11 referrals for advanced testing.

These figures reflect a powerful, collective shift towards a health-conscious culture among our members and demonstrate the tangible value of being proactive about one's well-being.

In a landscape where medical aid societies often focus solely on curative measures, PSMAS is leading the paradigm shift towards preventive healthcare. We are investing directly in the wellness of our members, empowering them with the knowledge and access to services that stop disease before it can take hold. This proactive approach is not only better for members' health status but is also fundamental to building a sustainable, healthier community.

This Pink October, PSMAS invites every member to write the next chapter in their health story. A screening is more than a test; it's an act of empowerment.

Let's make early detection our most powerful, life-saving tool together.

PSMAS encourages you to:

- Get Screened: Schedule your breast, prostate, or cervical cancer screening today.
- Spread the Word: Encourage a loved one, a colleague, or a friend to do the same.
- Stay Engaged: Participate in our upcoming wellness campaigns and health education sessions.

Your health journey is unique, and it matters deeply to us. At PSMAS, we are not just your medical aid; we are your dedicated partner in building a healthier, more secure future.

For more information on screening locations and upcoming wellness events, please visit our social media platforms.

Breast Cancer: who should be screened and when?

National and professional organizations continue to refine their recommendations on when patients should be screened for breast cancer. The American College of Radiology advises that all women should begin annual mammography by age 40. The American College of Obstetricians and Gynecologists (ACOG) recommends that individuals at average risk begin screening mammography at age 40 and then proceed every one to two years. The American Cancer Society also supports yearly mammograms from ages 45 to 54, and the option to begin between 40 and 44.

For those at higher risk screening often begins earlier. It's important to speak with your physician to determine when you should be screened.

MyHealth Programs

PSMAS
PREMIER SERVICE
MEDICAL AID SOCIETY

- Maternity Benefit Program
- Dental Management Program
- Disease Management Program
- Hospital Benefit Management Program
- Chronic Medicines Program
- Wellness and Screening Program
- Optical Benefit Program

As part of membership benefits, all PSMAS members are entitled to the above complimentary care benefit programs aimed at enhancing their overall healthcare experience.

I GOT SCREENED:
IT SAVED MY LIFE A CERVICAL CANCER SURVIVOR'S STORY

In a powerful testament to the importance of proactive health, we sit down with Eunice Ndemera, a 56-year-old Harare resident and PSMAS member. Her journey began at a 2023 Premier Service Medical Aid Society wellness outreach, a routine check-up that became a life-saving decision. Diagnosed with a high-risk strain of HPV, an early warning for cervical cancer, Eunice's story underscores a critical message: early detection is not just a medical term; it's a second chance. Through her resilience, she highlights the power of knowledge, the strength of family support, and the peace of mind that comes from taking control of your health.

Eunice Ndemera

Interviewer: Can you tell us a little about yourself?

Eunice Ndemera: My name is Eunice Ndemera. I'm 56, a Harare resident, and I have been a proud PSMAS member for years.

Interviewer: What motivated you to get screened for cervical cancer?

Eunice Ndemera: It was straightforward, really. In 2023, PSMAS was conducting a wellness outreach right here in Harare. The Society made it so accessible, so I decided to participate. I believe in using the benefits available to me, and this was one of them.

Interviewer: What happened after that initial screening?

Eunice Ndemera: I was contacted by Population Solutions for Health, PSMAS's partner in the outreach. They asked me to come in to discuss my results. That's when I learned I had tested positive for the Human Papillomavirus (HPV). They explained it's a common virus, but certain high-risk types can lead to cervical cancer if left unchecked. The most crucial thing they told me was that I had no symptoms this was a silent finding. I was advised to return for a follow-up in a year.

Interviewer: And what were the results of your follow-up in 2024?

Eunice Ndemera: I was tested again, and the HPV was still present. The clinicians explained that this persistent infection increased my risk. It was a lot to take in, but it was the clarity I needed. I went home, discussed it with my family, and we decided my next step was to see a gynaecologist.

Interviewer: **How did you process the diagnosis, and what happened next?**

Eunice Ndemera: I received counselling, which helped me accept the situation. I scheduled an appointment with a gynaecologist, who walked me through my options. It was overwhelming, I felt perfectly healthy, and there was no family history of this. It really hit home that I had only gone for a check-up because PSMAS was offering it. That decision might have been what saved me.

Interviewer: **What was the key takeaway from your consultation with the specialist?**

Eunice Ndemera: He was very thorough. He explained that there are many types of HPV, and the high-risk kind I had can cause changes in the cervix that may develop into cancer over time. That knowledge was power. It meant we weren't guessing; we were acting on clear, early information to prevent a problem before it could start.

Interviewer: What is the message you would share with other PSMAS members?

Eunice Ndemera: My message is simple and from the heart: do not wait. Do not wait for symptoms. Do not wait until you feel sick. A screening is a small act that can save your life. I am living proof. I urge every single member, not just women, to take advantage of the outreach programs PSMAS provides. They are not just perks; they are a vital part of our healthcare. I am so grateful for the early detection and for the support from my family and from PSMAS, who started me on this path to staying healthy.

Note from PSMAS:
Eunice's story is why we exist. It fuels our commitment to leading the way in preventive healthcare. We are dedicated to creating more stories of early detection and hope. Your journey matters to us. Schedule your screening today.

CHOOSING THE RIGHT MEDICAL AID PLAN

Navigating the confusion of medical aid options can be overwhelming, but selecting the right plan is essential in safeguarding your health and finances. Whether you are young and healthy, managing a chronic condition, or supporting a growing family, understanding how to align a medical aid plan with your unique needs ensures you are prepared for life's uncertainties.When selecting a medical aid cover, individuals are advised to evaluate their unique circumstances to ensure the chosen plan aligns with their health needs, financial capacity, and lifestyle.

Age and Health Profile

Risk and disease burden increases as one ages. Younger, healthier individuals might prioritize low-cost plans with essential inpatient and emergency benefits. In most cases these are entry level to medium tier products. PSMAS has the I-propel plan for students in tertiary institutions, The standard Plan, Basic and Regular plans for the entry level. However, those entering middle age or supporting families should consider higher benefit limits, broader coverage, including maternity, paediatric care, or chronic disease management. The Optimum, Status and Classic plans suit the medium tier plans, while the Executive, Premium, and the Elite Plans are for the high end of the market.

Established and experienced medical aid Societies like PSMAS now have wellness product and extra benefits for chronic conditions. Older citizens or those with pre-existing conditions, such as diabetes or hypertension, require plans offering comprehensive outpatient benefits, medication coverage, and access to specialists. Waiting periods for chronic conditions, often imposed by medical aid societies, must also be understood before signing up.

Cost

While affordability is a key consideration, it should always be subordinate to the benefit or need. After having considered the expectations, the prospective member must then consider the cost they can afford. This may come with some sacrifices in some instances and readjustments to align the budgets accordingly.

Employer-Assisted Medical Aid

Many people access medical aid through employer-sponsored schemes. While these plans often subsidize subscriptions, their scope may be limited. Employees should verify the medical aid policy by the employer, coverage details, such as included dependents. Some employees lose out on their contributory medical aid benefit by failing to sign up for employer assisted medical aid. Sadly, the employer's contribution if not taken up will never be converted into a cash benefit. Understanding the employer policy helps ensure that members do not lose-out on the medical aid benefit should it available on pension as with government employees.

Understanding Benefit Limits and Terms

A common pitfall is overlooking sub-limits on specific benefits, annual ceilings, or co-payments. For instance, a plan may cap oncology treatments, annual drug limits or impose daily limits on hospitalization costs. Members must review brochures thoroughly and have an appreciation of the tariffs that medical aid societies and service providers use. Prospective members must also look out for exclusions such as cosmetic procedures, and over the counter medications. Additionally, pre-authorization requirements for certain procedures should be understood to avoid claim rejections.

Maximizing Value from Medical Aid

To optimize benefits, individuals are encouraged to:

- Use Network Providers: Medical Aid Societies often negotiate tariffs with affiliated service providers, reducing out-of-pocket costs. While members still have the right to seek medical services from any provider of choice, even those outside the network, this may come at a cost of out-of-pocket payments. PSMAS uses the Premier Express Network (PEN) that has service providers by discipline and location.

- Leverage Preventive Care: Many mid- to high-end plans cover annual check-ups or vaccinations, helping to pre-empt costly treatments. Consider funders with such benefits.

- Track Claims: Regularly monitor statements to detect billing errors, unauthorised deductions or abuse of your medical aid card by unauthorized persons.

Always bear in mind: A medical aid plan isn't just a financial product, it's a lifeline. By prioritizing your health needs, understanding policy details, and proactively managing benefits, you secure not just coverage, but peace of mind

For any feedback and clarification regarding information shared on this platform, email: communications@psmas.co.zw

PSMAS
PREMIER SERVICE
MEDICAL AID SOCIETY

HEALTH SECURITY BEYOND THE WORKPLACE

Retirement doesn't mean the end of your healthcare journey. With PSMAS, you remain covered, cared for, and connected. From routine check-ups to chronic condition management, we ensure your wellbeing every step of the way.

Committed to *Care*

PSMAS Zimbabwe @PSMASZim PSMAS Zimbabwe

WELLNESS CORNER

UNPACKING WELLNESS WITHIN MEDICAL AID SOCIETIES SOCIAL WELLNESS: CONTINUED

A holistic approach to wellness emphasizes balance and harmony across all aspects of life to achieve optimal health. In this article we will focus on another facet of wellness which is the social aspect of wellness.

Social Wellness:
Building Meaningful Connections
Social wellness is about nurturing healthy, supportive relationships and fostering a sense of belonging. Humans are inherently social beings, and our connections with others play a vital role in our overall well-being. At PSMAS, we understand the importance of social wellness and encourage our members to build strong, supportive networks.

Here are some ways to enhance your social wellness:

- Reflect on your social needs: What aspects of your social life bring you joy? What areas could need improvement?
- Stay connected: Make an effort to keep in touch with supportive friends and family members.
- Practice openness: Share your thoughts and feelings with trusted individuals to build deeper connections.
- Engage in your community: Join clubs, organisations, or group activities that align with your interests.
- Listen actively: Show genuine interest in others by practicing active listening during conversations.

Premier Lifestyle Wellness Tip:
Participate in our community wellness events and support groups to connect with others who share your health and wellness goals. Together, we can create a supportive network that fosters growth and resilience. Our calendar of events is normally shared by our social media platforms. Please follow and like our pages to stay informed.

Take Charge of Your Wellness Journey with PSMAS
Wellness is not a destination but an ongoing journey. By adopting positive lifestyle behaviors such as regular exercise, healthy eating, quality sleep, and meaningful social interactions you can significantly improve your physical and emotional well-being.

At PSMAS, we're committed to helping you live your best life. Our Premier Lifestyle is here to support you every step of the way, offering resources, programs, and personalized guidance to help you achieve your wellness goals.

For more tips and resources on wellness, reach out to us at *premierlifestyle@psmas.co.zw* or follow and like our social media pages to learn more about our wellness initiatives.

Remember, small changes can lead to big results. Start today, and take the first step toward a healthier, happier you with PSMAS!

STAY HEALTHY THIS SUMMER WITH PSMAS

As temperatures rise, it's important to stay mindful of your health and make the most of your medical aid benefits. Here are some simple yet effective tips to help you enjoy a safe, healthy and active summer.

1. Stay Hydrated
Drink plenty of water throughout the day to prevent dehydration. Avoid excessive caffeine or alcohol to prevent dehydration.

2. Protect Your Skin
Use sunscreen, wear a hat and see your doctor for any unusual skin changes.

3. Eat Light and Nutritious Meals
Choose fresh fruits, vegetables, and lean proteins. Diet plays a vital role in managing chronic conditions. PSMAS members registered under the Chronic Care Programme can access nutritional advice as part of their care plan.

4. Stay Active Safely
Exercise early in the morning or late in the evening when it's cooler. If you are starting a new fitness routine, consider a wellness check-up to assess your fitness level and heart health.

5. Manage Chronic Conditions
Heat can affect chronic illnesses such as hypertension and diabetes. Ensure you are registered under the Chronic Care Programme to access medication through the Chronic Medicines Fund and receive ongoing support.

6. Stay Alert for Seasonal Illnesses
Summer often comes with flu, allergies, and heat-related infections. Use your consultation and pharmacy benefits for timely diagnosis and treatment and avoid self-medication.

WELLNESS OUTREACH PROGRAM CALENDAR

Outreach	Dates
Manicaland wellness outreach	3- 7 November 2025
Mashonaland West Outreach	20 – 24 October 2025
Mashonaland Central Outreach	24 – 28 November 2025

FREQUENTLY ASKED QUESTIONS RETIREMENT

1. Do I remain covered by PSMAS medical aid after retirement?
No, unless you notify the Society.
Once you retire, your pay source changes from Government salaries to Government pensions, hence deductions cease. You will have to notify the Society that you wish to continue with your medical aid for deductions to continue. Unpaid contributions for two consecutive months results in automatic termination of membership.

2. How do I migrate my membership when I retire?
You need to fill in a membership amendment form and change your employer details from "Government salaries" to "Government Pension." Membership amendment forms are available at any PSMAS branch near you.

3. Will my employer continue to subsidise my contribution?
Yes. Nothing changes upon retirement. Government Pensions will continue to pay its obligation on the 80:20 principle.

4. What happens if I do not migrate my plan after retirement?
If you do not update your membership status within the stipulated time (often within 2 months of retirement), your cover may lapse, and you may have to reapply as a new member, which could involve waiting periods.

5. Can my dependents remain on my PSMAS medical aid after I retire?
Yes. Your spouse and dependents can remain covered under your membership if contributions are up to date.

6. Are chronic conditions covered in retirement?
Yes. Please ensure you register for chronic care programme. (e.g., hypertension, diabetes, heart disease),
Registering for the Chronic Care Programme ensures your chronic condition is properly managed and monitored, enabling you to access medication through the Chronic Medicines Fund and receive continuous, affordable care. Without registration, your treatment may be interrupted, and your chronic medication may not be processed under the Fund, depleting your main medical fund and resulting in shortfalls.

To register for the Chronic Programme email *premierlifestyle@psmas.co.zw* or WhatsApp 0783 183 530

7. How do I pay my contributions after retirement?
Contributions are deducted directly from your pension.

8. Are there waiting periods if I migrate to a pensioner plan?
No. If you migrate directly from your employer plan to a pensioner plan, your cover continues without waiting periods. However, if you let your membership lapse and rejoin later, waiting periods may apply.

9. Can I downgrade or upgrade my plan after retirement?
Yes. You may request to move to a lower or higher plan depending on your financial capacity and healthcare needs.

FUN SECTION

WORD BLOCK PUZZLE

I	U	T
N	I	O
R	N	T

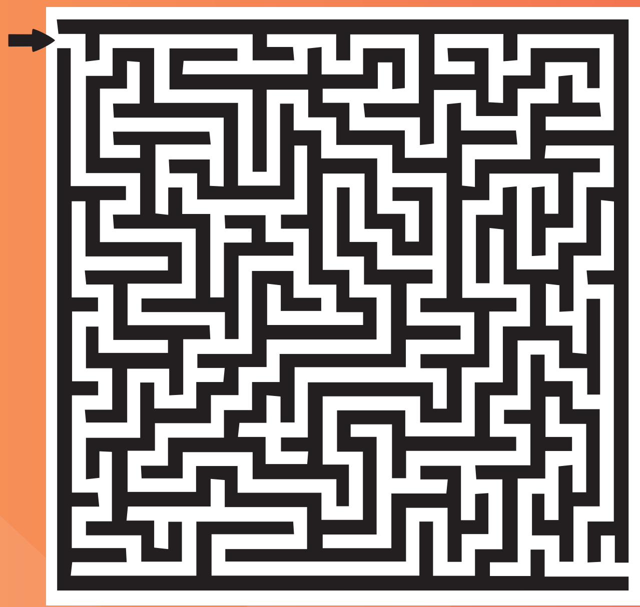
Rules

1. Find the 9-letter secret word in the 3×3 grid.
2. Make words by connecting letters horizontally, vertically, or diagonally.

Guide

- Use each letter only once per word.
- Words must be at least 3 letters long.
- The goal is the full 9-letter word; bonus points for shorter words.

MAZE



SPOT THE 5 DIFFERENCE

PICTURE CORNER

PSMAS Interim Manager Dr Simon Nyadundu, Executive Directors and staff members pose for a picture at the 2025 Zimbabwe Agricultural Show

PSMAS Interim Manager and team going through the Finance Department processes during an interdepartmental tour aimed at improving system efficiencies

PSMAS member receives eye screening at the Public Service Commission Retirement Conference 2025 in Bulawayo

PSMAS Population Health and Wellness Program Coordinator Dr Tapiwa T. Chiworeka talks about health and wellness in retirement at the Public Service Commission Retirement Conference 2025

PSMAS Marketing are Member Services team receive an award during the Annual AHFoZ Conference held in Victoria Falls

PSMAS member receives Blood Pressure screening during the Midlands Wellness Program Outreach