



FREQUENTLY ASKED QUESTIONS

BPOMAS Embedded Wellness Benefit

1. What are the BPOMAS Embedded Wellness Benefits?

The BPOMAS Embedded Wellness Benefits are preventative health screening services available to eligible members on the High Benefit and Premium Benefit Options. These benefits are designed to detect health conditions early, promote healthy lifestyles, and reduce the risk of disease through regular health screening.

2. Who qualifies for the Wellness Benefits?

The Wellness Benefits are available to members enrolled on the High and Premium Benefit Options. Eligibility for specific screening tests depends on your age and gender in accordance with the BPOMAS Benefit Guide.

3. What Wellness Screening Benefits are available

Wellness Benefit	Who Qualifies?	Frequency
Annual Health Check	Members aged 40 years and above	Once a year
Breast Cancer Screening (Mammogram)	Women aged 40–70 years	Once every 2 years
Cervical Cancer Screening (Pap Smear)	Women aged 25–55 years	Once every 2 years
HPV Test	Women aged 25 years and above	Every 2–5 years
Diabetes & Cardiovascular Disease Screening (Blood Glucose, Full Blood Count & Cholesterol)	Members aged 40 years and above	Once a year
HIV Rapid Test	Members aged 16 years and above	Once a year
Prostate Cancer Screening (PSA)	Men aged 40 years and above	Once every 2 years
Flu Vaccine	Children 6 months–10 years Members 65 years and above and Members enrolled in the Chronic Disease Programme	Once a year

NB: Eligibility and frequency are subject to the BPOMAS Scheme Rules and Benefit Guide.

Flu vaccine is applicable across ALL Benefits including STANDARD BENEFIT OPTION.

4. How do I access these benefits?

Visit a contracted:

- General Medical Practitioner (GP)
- Family Physician

Where additional pathology or radiology investigations are required, your doctor will refer you to a contracted laboratory or radiology provider.

5. Can a provider conduct these screenings at my workplace?

No. The Embedded Wellness Benefits are **not workplace wellness services**. Members should visit a contracted healthcare provider's consulting rooms or healthcare facility to receive their wellness screening. Should you come across such arrangements inquire from the Scheme at +267 3702940/41 & 3168900.

6. What happens during an Annual Health Check?

Your healthcare provider will:

- Review your medical history.
- Conduct a physical examination.
- Assess your health risks.
- Perform eligible screening tests.
- Refer you for additional investigations where clinically appropriate.
- Arrange a follow-up consultation to discuss your results.

7. Why does my doctor complete a Health Screening Form?

The Health Screening Form helps BPOMAS:

- Monitor member health.
- Evaluate the effectiveness of the Wellness Programme.
- Improve future preventative healthcare services.

8. Will I pay for these services?

Members should not be charged any co-payment for approved wellness services provided within the applicable Scheme tariff.

9. What happens if my results are abnormal?

Your healthcare provider will explain your results and recommend appropriate follow-up care. Where a chronic condition is diagnosed, your doctor may enrol you into the BPOMAS Chronic Care Programme.

BPOMAS Chronic Care Programme

10. What is the BPOMAS Chronic Care Programme?

The BPOMAS Chronic Care Programme is designed to support members living with approved chronic conditions by providing coordinated care, chronic medicine benefits, ongoing clinical monitoring, and health education. The Programme aims to improve members' health outcomes, prevent disease complications, and promote better quality of life.

11. Who qualifies for the Chronic Care Programme?

Members diagnosed with any approved chronic condition and who meet the Scheme's clinical and benefit requirements. These conditions are prioritized because if they are not managed they can lead to serious complications, leading to more complex and costly management.

12. Which chronic conditions are covered?

- HIV/AIDS
- Diabetes Mellitus
- Cardiovascular Diseases (including hypertension)
- Hyperlipidaemia (high cholesterol)

* Please note that registration and medication approval requests for other chronic conditions not listed above may be submitted to chronicmedsreg@bpomas.

13. Why do I need to enrol in the Chronic Care Programme?

Enrolment enables BPOMAS to:

- Authorise chronic medication.
- Monitor your condition.
- Provide ongoing clinical support.
- Promote medication adherence.
- Reduce the risk of disease complications.

14. Who enrolls me into the Programme?

Your General Medical Practitioner (GP), Family Physician, or Specialist is responsible for enrolling you. Your healthcare provider will complete the required registration documents and submit them to BPOMAS together with the necessary supporting clinical information.

15. Can I enrol myself?

No. Enrolment must be initiated by your treating healthcare provider after confirming your diagnosis.

16. How is my application submitted?

Your healthcare provider will submit the completed Chronic Care Registration Form, prescription, and supporting clinical information to BPOMAS through the designated Chronic Care email: chronicmedsreg@bpomas.co.bw or diseasemanagement@bpomas.co.bw

17. What happens after I have been enrolled?

Once your application has been approved, you may receive:

- Authorisation for approved chronic medication.
- Ongoing disease management support.
- Medication adherence support.
- Health education.

- Clinical monitoring.
- Follow-up communication where necessary.

18. Why am I required to undergo regular laboratory tests?

Laboratory tests help your healthcare provider and BPOMAS to:

- Monitor how well your condition is controlled.
- Assess whether your medication is effective.
- Detect complications early.
- Support appropriate treatment decisions.

19. Can I submit my results after laboratory tests to the Scheme

Yes, members are encouraged to submit results via email to diseasemanagement@bpomas.co.bw to support risk profiling, timely updating of results in the system, and monitoring of programme effectiveness.

20. What happens if my medication changes?

If your doctor changes your treatment, they should submit an updated prescription and any required supporting clinical information to BPOMAS for review and authorisation at chronicmedsreg@bpomas.co.bw

21. Why is medication adherence important?

Taking your medication as prescribed helps to:

- Keep your condition under control.
- Prevent complications.
- Reduce hospital admissions.
- Improve your quality of life.

22. Why should I keep my contact details updated?

Keeping your contact information current allows BPOMAS to:

- Send important programme updates.
- Contact you regarding your treatment.
- Provide health education and reminders.
- Support ongoing disease management.

23. What happens if I miss my follow-up appointments?

Regular follow-up appointments are essential for monitoring your condition. Missing appointments may delay treatment adjustments and increase your risk of developing complications.

24. Does the Programme only provide medication?

No. The Chronic Care Programme offers more than medication. It also provides:

- Clinical monitoring.
- Health education.
- Medication adherence support.
- Early identification of complications.
- Coordinated disease management through dedicated Case Managers who provide regular telephonic follow-up, guidance, and support to help you effectively manage your condition.

26. What are my responsibilities as a member?

As a member enrolled in the Programme, you should:

- Attend scheduled medical appointments.
- Take your medication as prescribed.
- Follow your healthcare provider's advice.
- Submit your results to the Scheme
- Maintain healthy lifestyle habits.
- Notify BPOMAS of any changes to your contact details.

27. Where can I obtain more information?

For further information or assistance on the BPOMAS Chronic Care Programme, contact chronicmedsreg@bpomas.co.bw or diseasemanagement@bpomas.co.bw or call 316 8900 / 370 2940 / 370 2941

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