

PREMIER

2024

Monthly premium: R588 per family for under 65yrs

Monthly premium: R845 per family for 65yrs+

Monthly premium: R433 per individual for under 65yrs

Monthly premium: R591 per individual for 65yrs+

2025

Monthly premium: R673 per family for under 65yrs

Monthly premium: R968 per family for 65yrs+

Monthly premium: R496 per individual for under 65yrs

Monthly premium: R677 per individual for 65yrs+

National Treasury annually publishes new limits under the Demarcation Regulations. The changes are effective from 1st April. Please refer to our website for the latest Overall Annual Limit (OAL) on each of our products.

In-hospital benefits

	2024	2025
Medical Expense Shortfall Cover	Increases the Medical Aid rate up to 600%. Subject to OAL	Increases the Medical Aid rate up to 600%. Subject to OAL
Co-payment Cover	Subject to OAL	Subject to OAL
Non-DSP Hospital Penalty Cover	R15 500 per admission. Limited to 2 claims per family per annum. Subject to OAL	R16 500 per admission. Limited to 2 claims per family per annum. Subject to OAL
Sub-limit Cover	R41 000 per admission. Subject to OAL	R43 000 per admission. Subject to OAL
Trauma Recovery Cover	Provides cover for when the Medical Scheme has imposed a sub-limit on a step-down facility for physical rehabilitation as a result of an accident which occurred while on the Policy. Limited to R5 000 per admission per insured and R10 000 per family per annum. Subject to OAL	Provides cover for when the Medical Scheme has imposed a sub-limit on a step-down facility for physical rehabilitation as a result of an accident which occurred while on the Policy. Limited to R6 000 per admission per insured and R10 000 per family per annum. Subject to OAL

In hospital and out of hospital benefits

	2024	2025
Traditional Cancer Cover	Pays for treatment in a private facility, including sub-limits, deductibles or co-payments related to cancer treatment. Subject to OAL	Pays for treatment in a private facility, including sub-limits, deductibles or co-payments related to cancer treatment. Subject to OAL
Biological Cancer Drug Cover	Provides cover for Biological Cancer Drug when the Medical Scheme imposes a sub-limit. Subject to formulary and OAL	Provides cover for Biological Cancer Drug when the Medical Scheme imposes a sub-limit. Subject to formulary and OAL
Innovative Cancer Drug Cover	Provides cover for new innovative cancer drugs. Limited to R11 000 per claim. Subject to the OAL	Provides cover for new innovative cancer drugs. Limited to R12 000 per claim. Subject to the OAL
Breast Cancer Reconstruction Cover and Breast Cancer Prevention Cover	Increases the medical aid rate up to 600% for a breast reconstruction post mastectomy due to Cancer and for a prophylactic mastectomy. Reconstruction of the unaffected, where there is no benefit on the Insured person's Medical Scheme is limited to R27 000 per insured person, per lifetime. Subject to the OAL	Increases the medical aid rate up to 600% for a breast reconstruction post mastectomy due to Cancer and for a prophylactic mastectomy. Reconstruction of the unaffected, where there is no benefit on the Insured person's Medical Scheme is limited to R29 000 per insured person, per lifetime. Subject to the OAL
MRI and CT scan Cover	Provides cover for MRI and CT scans when there is no benefit available on your Medical Scheme. Limited to R7 500 per event and 2 claims per family per annum. Subject to OAL	Provides cover for MRI and CT scans when there is no benefit available on your Medical Scheme. Limited to R8 000 per event and 2 claims per family per annum. Subject to OAL
Trauma Care Cover	Covers the cost of trauma counselling consultations with a registered healthcare provider after a member has been diagnosed with a critical illness, a victim of a violent crime or experienced the death of an immediate family member. Limited to R2 500 per consultation and R8 000 per family per annum. Subject to OAL	Covers the cost of trauma counselling consultations with a registered healthcare provider after a member has been diagnosed with a critical illness, a victim of a violent crime or experienced the death of an immediate family member. Limited to R3 000 per consultation and R8 000 per family per annum. Subject to OAL
Investigative Treatment	Scopes for Screening purposes will be limited to 1 every 5 years, per insured person and R8 000 . Subject to the Overall Annual Limit.	Scopes for Screening purposes will be limited to 1 every 5 years, per insured person and R8 500 . Subject to the Overall Annual Limit.

Out of hospital benefits

	2024	2025
Co-payments for MRI, CT and PET scans	Subject to OAL	Subject to OAL
Co-payments for scopes	R5 000 per event. Limited to 2 claims per insured per annum. Subject to OAL	R6 000 per event. Limited to 2 claims per insured per annum. Subject to OAL
Sub-limit Cover for MRI, CT and PET scans	R41 000 per event per insured. Subject to OAL	R43 000 per event per insured. Subject to OAL
Casualty Benefit for Accidents	R16 500 per event per insured. Subject to OAL	R18 000 per event per insured. Subject to OAL
Casualty Benefit for Illness	R4 000 per event. Limited to 3 claims per family per annum. Subject to OAL. Treatment is restricted to between the hours of 6pm - 6am Mondays to Fridays, Saturdays, Sundays and Public Holidays	R5 000 per event. Limited to 3 claims per family per annum. Subject to OAL. Treatment is restricted to between the hours of 6pm - 6am Mondays to Fridays, Saturdays, Sundays and Public Holidays

Added benefits

	2024	2025
Cancer Diagnosis Benefit	Once off payment for first diagnosis of Cancer based on stage at time of diagnosis Stage 1: R5 000 Stage 2: R15 000 Stage 3: R25 000 Stage 4: R30 000	Once off payment for first diagnosis of Cancer based on stage at time of diagnosis Stage 1: R7 500 Stage 2: R18 000 Stage 3: R25 000 Stage 4: R30 000
Medical Scheme Contribution Waiver	Up to R6 600 per month for 6 months; in the event of death or permanent and total disability as a result of an accident, of the Medical Scheme Contribution Payer	Up to R7 500 per month for 6 months; in the event of death or permanent and total disability as a result of an accident, of the Medical Scheme Contribution Payer
Gap Premium Waiver	Pays the premium of your Policy for 12 months in the event of death or permanent and total disability as a result of an accident, of the Contribution Payer	Pays the premium of your Policy for 12 months in the event of death or permanent and total disability as a result of an accident, of the Contribution Payer
Personal Accident Benefit	R32 000 per insured on the Policy in the event of accidental death or permanent and total disability	R34 000 per insured on the Policy in the event of accidental death or permanent and total disability
Critical Illness Benefit	R12 500 per insured on the Policy in the event of death due to a critical illness (excludes cancer)	R13 500 per insured on the Policy in the event of death due to a critical illness (excludes cancer)
International Travel Cover	R5 million per insured (notification of travel required 48 hrs prior to departure)	R5 million per insured (notification of travel required 48 hrs prior to departure)

In Hospital dental cover

	2024	2025
Medical Expense Shortfall Cover	Increases the medical aid rate up to 600% for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident and oral cancer (which was diagnosed while on the Policy). Subject to the OAL	Increases the medical aid rate up to 600% for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident and oral cancer (which was diagnosed while on the Policy). Subject to the OAL
Co-payment Cover	Subject to OAL	Subject to OAL
Basic Dental Cover for children	Up to 600% for basic dentistry for children up to 12 years. Limited to R4 500 per family per annum	Up to 600% for basic dentistry for children up to 12 years. Limited to R5 000 per family per annum
Sub-limit and Co-payment Cover for dental implants	Covers the cost of dental implants f or reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Limited to R54 000 per family per annum. Subject to the OAL	Covers the cost of dental implants f or reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Limited to R55 000 per family per annum. Subject to the OAL
Sub-limit Cover	R32 500 per admission per insured for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Subject to the OAL	R34 000 per admission per insured for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Subject to the OAL

OPTIMAL

2024

Monthly premium: R445 per family for under 65yrs

Monthly premium: R643 per family for 65yrs+

2025

Monthly premium: R510 per family for under 65yrs

Monthly premium: R736 per family for 65yrs+

National Treasury annually publishes new limits under the Demarcation Regulations. The changes are effective from 1st April. Please refer to our website for the latest Overall Annual Limit (OAL) on each of our products.

In hospital benefits

	2024	2025
Medical Expense Shortfall Cover	Increases the Medical Aid rate up to 500%. Subject to OAL	Increases the Medical Aid rate up to 500%. Subject to OAL
Co-payment Cover	Subject to OAL	Subject to OAL
Non-DSP Hospital Penalty Cover	R12 500 per admission. Limited to 1 claim per family per annum and subject to OAL	R13 500 per admission. Limited to 1 claim per family per annum and subject to OAL
Sub-limit Cover	R31000 per admission per insured. Limited to R70 000 per family per annum. Subject to OAL	R33 000 per admission per insured. Limited to R72 000 per family per annum. Subject to OAL

In hospital and out of hospital benefits

	2024	2025
Traditional Cancer Cover	Co-payment cover for traditional cancer treatment limited to 20% per admission. Subject to the OAL	Co-payment cover for traditional cancer treatment limited to 20% per admission. Subject to the OAL
Biological Cancer Drug Cover	Provides cover for Biological Cancer Drug when the Medical Scheme imposes a sub-limit. Subject to formulary and OAL	Provides cover for Biological Cancer Drug when the Medical Scheme imposes a sub-limit. Subject to formulary and OAL
Innovative Cancer Drug Cover	Provides cover for new innovative cancer drugs. Limited to R11 000 per claim. Subject to the OAL	Provides cover for new innovative cancer drugs. Limited to R12 000 per claim. Subject to the OAL
Breast Cancer Reconstruction Cover and Breast Cancer Prevention Cover	Increases the medical aid rate up to 500% for a breast reconstruction post mastectomy due to Cancer and for a prophylactic mastectomy. Reconstruction of the unaffected, where there is no benefit on the Insured person's Medical Scheme is limited to R20 000 per insured person, per lifetime. Subject to the OAL	Increases the medical aid rate up to 500% for a breast reconstruction post mastectomy due to Cancer and for a prophylactic mastectomy. Reconstruction of the unaffected, where there is no benefit on the Insured person's Medical Scheme is limited to R22 000 per insured person, per lifetime. Subject to the OAL
MRI and CT scan Cover	Provides cover for MRI and CT scans when there is no benefit available on your Medical Scheme. Limited to R6 000 per event and 2 claims per family per annum. Subject to OAL	Provides cover for MRI and CT scans when there is no benefit available on your Medical Scheme. Limited to R7 000 per event and 2 claims per family per annum. Subject to OAL
Trauma Care Cover	Covers the cost of trauma counselling consultations with a registered healthcare provider after a member has been diagnosed with a critical illness, a victim of a violent crime or experienced the death of an immediate family member. Limited to R2 500 per consultation and R7 000 per family per annum. Subject to OAL	Covers the cost of trauma counselling consultations with a registered healthcare provider after a member has been diagnosed with a critical illness, a victim of a violent crime or experienced the death of an immediate family member. Limited to R3 000 per consultation and R7 000 per family per annum. Subject to OAL
Investigative Treatment	Scopes for Screening purposes will be limited to 1 every 5 years, per insured person and R6 000 . Subject to the Overall Annual Limit.	Scopes for Screening purposes will be limited to 1 every 5 years, per insured person and R6 500 . Subject to the Overall Annual Limit.

Out of hospital benefits

	2024	2025
Co-payments for MRI, CT and PET scans	Subject to OAL	Subject to OAL
Co-payments for scopes	R5 000 per event. Limited to 2 claims per insured per annum. Subject to OAL	R6 000 per event. Limited to 2 claims per insured per annum. Subject to OAL
Sub-limit Cover for MRI, CT and PET scans	R31000 per event per insured. Limited to R70 000 per family per annum. Subject to OAL	R33 000 per event per insured. Limited to R72 000 per family per annum. Subject to OAL
Casualty Benefit for Accidents	R11 000 per event per insured. Subject to OAL	R12 000 per event per insured. Subject to OAL
Casualty Benefit for Illness	R4 000 per event. Limited to 2 claims per family per annum. Subject to OAL. Treatment is restricted to between the hours 6pm - 6am Mondays to Fridays, Saturdays, Sundays and Public Holidays	R5 000 per event. Limited to 2 claims per family per annum. Subject to OAL. Treatment is restricted to between the hours 6pm - 6am Mondays to Fridays, Saturdays, Sundays and Public Holidays

Added benefits

	2024	2025
Medical Scheme Contribution Waiver	Up to R6 600 per month for 6 months; in the event of death or permanent and total disability as a result of an accident, of the Medical Scheme Contribution Payer	Up to R7 500 per month for 6 months; in the event of death or permanent and total disability as a result of an accident, of the Medical Scheme Contribution Payer
Gap Premium Waiver	Pays the premium of your Policy for 12 months in the event of death or permanent and total disability as a result of an accident, of the Contribution Payer	Pays the premium of your Policy for 12 months in the event of death or permanent and total disability as a result of an accident, of the Contribution Payer
Personal Accident Benefit	R18 000 per insured on the Policy in the event of accidental death or permanent and total disability	R19 500 per insured on the Policy in the event of accidental death or permanent and total disability
Critical Illness Benefit	R8 500 per insured on the Policy in the event of death due to a critical illness (excludes cancer)	R9 500 per insured on the Policy in the event of death due to a critical illness (excludes cancer)
International Travel Cover	R5 million per insured (notification of travel required 48 hrs prior to departure)	R5 million per insured (notification of travel required 48 hrs prior to departure)

In Hospital dental cover

	2024	2025
Medical Expense Shortfall Cover	Increases the medical aid rate up to 500% for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident and oral cancer (which was diagnosed while on the Policy). Subject to the OAL	Increases the medical aid rate up to 500% for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident and oral cancer (which was diagnosed while on the Policy). Subject to the OAL
Co-payment Cover	Subject to OAL	Subject to OAL
Basic Dental Cover for children	Up to 500% for basic dentistry for children up to 12 years. Limited to R3 500 per family per annum	Up to 500% for basic dentistry for children up to 12 years. Limited to R4 000 per family per annum
Sub-limit and Co-payment Cover for dental implants	Covers the cost of dental implants for reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Limited to R22 000 per admission and R50 000 per family per annum. Subject to the OAL	Covers the cost of dental implants for reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Limited to R24 000 per admission and R50 000 per family per annum. Subject to the OAL
Sub-limit Cover	R22 000 per admission and R50 000 per family for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Subject to the OAL	R24 000 per admission and R50 000 per family for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Subject to the OAL

SYNERGY

2024

Monthly premium: R380 per family for under 65yrs
 Monthly premium: R532 per family for 65yrs+

2025

Monthly premium: R441 per family for under 65yrs
 Monthly premium: R628 per family for 65yrs+

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In hospital benefits

	2024	2025
Medical Expense Shortfall Cover	Increases the Medical Aid rate up to 500%. Subject to OAL	Increases the Medical Aid rate up to 500%. Subject to OAL
Co-payment Cover	Subject to OAL	Subject to OAL
Non-DSP Hospital Penalty Cover	R9 700 per admission. Limited to claim per family per annum and subject to OAL	R10 500 per admission. Limited to claim per family per annum and subject to OAL
Sub-limit Cover	R31 000 per admission per insured. Limited to R70 000 per family per annum. Subject to OAL	R33 000 per admission per insured. Limited to R70 000 per family per annum. Subject to OAL

In hospital and out of hospital benefits

	2024	2025
MRI and CT scan Cover	Provides cover for MRI and CT scans when there is no benefit available on your Medical Scheme. Limited to R5 000 per event and 1 claim per family per annum. Subject OAL	Provides cover for MRI and CT scans when there is no benefit available on your Medical Scheme. Limited to R5 500 per event and 1 claim per family per annum. Subject OAL
Trauma Care Cover	Covers the cost of trauma counselling consultations with a registered healthcare provider after a member has been diagnosed with a critical illness, a victim of a violent crime or experienced the death of an immediate family member. Limited to R2 500 per consultation and R6 000 per family per annum. Subject to OAL	Covers the cost of trauma counselling consultations with a registered healthcare provider after a member has been diagnosed with a critical illness, a victim of a violent crime or experienced the death of an immediate family member. Limited to R3 000 per consultation and R6 000 per family per annum. Subject to OAL

Out of hospital benefits

	2024	2025
Co-payments for MRI, CT and PET scans	Subject to OAL	Subject to OAL
Co-payments for scopes	R5 000 per event. Limited to 2 claims per insured per annum. Subject to OAL	R6 000 per event. Limited to 2 claims per insured per annum. Subject to OAL
Sub-limit Cover for MRI, CT and PET scans	R31 000 per event per insured. Limited to R70 000 per family per annum. Subject to OAL	R33 000 per event per insured. Limited to R72 000 per family per annum. Subject to OAL
Casualty Benefit for Accidents	R10 000 per event per insured. Subject to OAL	R12 000 per event per insured. Subject to OAL
Casualty Benefit for Illness	R3 500 per event. Limited to 2 claims per family per annum. Subject to OAL. Treatment is restricted to between the hours 6pm -6am Mondays to Fridays, Saturdays, Sundays and Public Holidays	R4 000 per event. Limited to 2 claims per family per annum. Subject to OAL. Treatment is restricted to between the hours 6pm -6am Mondays to Fridays, Saturdays, Sundays and Public Holidays

Added benefits

	2024	2025
Medical Scheme Contribution Waiver	Up to R6 600 per month for 6 months; in the event of death or permanent and total disability as a result of an accident, of the Medical Scheme Contribution Payer	Up to R7 500 per month for 6 months; in the event of death or permanent and total disability as a result of an accident, of the Medical Scheme Contribution Payer
Gap Premium Waiver	Pays the premium of your Policy for 12 months in the event of death or permanent and total disability as a result of an accident, of the Contribution Payer	Pays the premium of your Policy for 12 months in the event of death or permanent and total disability as a result of an accident, of the Contribution Payer
Personal Accident Benefit	R12 000 per insured on the Policy in the event of accidental death or permanent and total disability	R13 500 per insured on the Policy in the event of accidental death or permanent and total disability
International Travel Cover	R5 million per insured (notification of travel required 48 hrs prior to departure)	R5 million per insured (notification of travel required 48 hrs prior to departure)

In Hospital dental cover

	2024	2025
Medical Expense Shortfall Cover	Increases the medical aid rate up to 500% for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident and oral cancer (which was diagnosed while on the Policy). Subject to the OAL	Increases the medical aid rate up to 500% for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident and oral cancer (which was diagnosed while on the Policy). Subject to the OAL
Co-payment Cover	Subject to OAL	Subject to OAL
Basic Dental Cover for children	Up to 500% for basic dentistry for children up to 12 years. Limited to R2 500 per family per annum	Up to 500% for basic dentistry for children up to 12 years. Limited to R3 000 per family per annum
Sub-limit and Co-payment Cover for dental implants	Covers the cost of dental implants for reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Limited to R22 000 per admission and R50 000 per family per annum. Subject to the OAL	Covers the cost of dental implants for reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Limited to R24 000 per admission and R50 000 per family per annum. Subject to the OAL
Sub-limit Cover	R22 000 per admission and R50 000 per family for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Subject to the OAL	R24 000 per admission and R50 000 per family for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Subject to the OAL



LAUNCH

2024
Monthly premium: R164 per family for under 65yrs
Monthly premium: R285 per family for 65yrs

2025
Monthly premium: R169 per family for under 65yrs
Monthly premium: R294per family for 65yrs+

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In-hospital benefits

	2024	2025
Medical Expense Shortfall Cover	Increases the Medical Aid rate up to 350%. Subject to OAL	Increases the Medical Aid rate up to 350%. Subject to OAL
Co-Payment Cover	R3 500 per admission. Limited to 1 claim per family per annum. Subject to the Overall Annual Limit	R4 000 per admission. Limited to 1 claim per family per annum. Subject to the Overall Annual Limit

Out of hospital benefits

	2024	2025
Casualty Benefit for Accidents	R6 500 per event per insured. Subject to OAL	R7 000 per event per insured. Subject to OAL

Added benefits

	2024	2025
Medical Scheme Contribution Waiver	Up to R6 600 per month for 6 months; in the event of death or permanent and total disability as a result of an accident, of the Medical Scheme Contribution Payer	Up to R7 500 per month for 6 months; in the event of death or permanent and total disability as a result of an accident, of the Medical Scheme Contribution Payer
Gap Premium Waiver	Pays the premium of your Policy for 12 months in the event of death or permanent and total disability as a result of an accident, of the Contribution Payer	Pays the premium of your Policy for 12 months in the event of death or permanent and total disability as a result of an accident, of the Contribution Payer
International Travel Cover	R5 million per insured (notification of travel required 48 hrs prior to departure)	R5 million per insured (notification of travel required 48 hrs prior to departure)

In Hospital dental cover

	2024	2025
Medical Expense Shortfall Cover	Increases the medical aid rate up to 350% for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident and oral cancer (which was diagnosed while on the Policy). Subject to the OAL	Increases the medical aid rate up to 350% for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident and oral cancer (which was diagnosed while on the Policy). Subject to the OAL

FORMULARY AND WAITING PERIODS

Waiting Periods

- A 3-month general waiting period applies to all benefits (except in the event of an accident, which occurred while on the Policy). In the event the commencement date of the Policy is the same as the commencement date of the Medical Scheme, no 3-month general waiting period will apply to Medical Expense Shortfall Cover
- A 10-month waiting period on pregnancy/childbirth
- A 12-month waiting period on investigations, treatment or surgery for:
hysterectomy, hysteroscopies, endometriosis, ovarian cysts and fibroids (myomectomy), muscular-skeletal (except in the event of an accident, which occurred while on the Policy), tonsillectomy, myringotomy, grommets, adenoids, wisdom teeth, hernia, cataracts, gastroscopies, colonoscopies, cancer, nasal and sinus

Biological Cancer Drugs

The lists below provide the Biological Cancer Drugs covered under Premier and Optimal

LIST OF DRUGS

Herceptin	Faslodex	Avastin
Mylotarg	Velcade	Erbix
Nexavar	Tarceva	Sutent
Gleevec	Alimta	Fludara
Sprycel	Zevalin	Mabthera



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INFORMATION
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NAVIGATING THE WAY

MED-EXTEND

2024
Monthly premium: R386 per family for under 65yrs
Monthly premium: R525 per family for 65yrs+

2025
Monthly premium: R398per family for under 65yrs
Monthly premium: R562 per family for 65yrs+

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Benefits

	2024	2025
Medical Expense Shortfall Cover	Increases the Medical Aid rate up to 300%. Subject to OAL	Increases the Medical Aid rate up to 300%. Subject to OAL
Co-payment Cover	R6 000 per admission. 2 claims pfpa. Subject to OAL	R6 500 per admission. 2 claims pfpa. Subject to OAL
Casualty Benefit - Accident & Illness	R4 000 per family per annum. The Casualty Benefit for Illness will be restricted to between the hours of 6pm – 6am, Mondays – Fridays, Saturdays, Sundays and Public Holidays	R4 500 per family per annum. The Casualty Benefit for Illness will be restricted to between the hours of 6pm – 6am, Mondays – Fridays, Saturdays, Sundays and Public Holidays
MRI and CT scan Cover	Provides cover for MRI and CT scans when there is no benefit available on your Medical Scheme. Limited to R5 000 per event and 1 claim per family per annum. Subject to OAL	Provides cover for MRI and CT scans when there is no benefit available on your Medical Scheme. Limited to R5 500 per event and 1 claim per family per annum. Subject to OAL
Medboost Claim free years	2024 3 years :R3 000 4 years :R4 000 5 years :R5 000 5+ years :R6 000	2025 3 years :R3 500 4 years :R4 500 5 years :R5 500 5+ years:R6 500

Added benefits

	2024	2025
International Travel Cover	R5 million per insured (notification of travel required 48 hrs prior to departure)	R5 million per insured (notification of travel required 48 hrs prior to departure)
Medical Scheme Contribution Waiver	Up to R6 600 per month for 6 months; in the event of death or permanent and total disability as a result of an accident, of the Medical Scheme Contribution Payer	Up to R7 500 per month for 6 months; in the event of death or permanent and total disability as a result of an accident, of the Medical Scheme Contribution Payer
Gap Premium Waiver	Pays the premium of your Policy for 12 months in the event of death or permanent and total disability as a result of an accident, of the Contribution Payer	Pays the premium of your Policy for 12 months in the event of death or permanent and total disability as a result of an accident, of the Contribution Payer

2024

2025

Defined Procedures	Benefit	Benefit
Arthroscopic surgery	R72 000	R75 000
Back or neck surgery	R72 000	R75 000
Bunion surgery	R20 000	R22 000
Cochlear implant, auditory brain implant and internal nerve stimulator surgery	R92 000	R95 000
Dental procedures for impacted teeth for children younger than 18 years	R20 000	R22 000
Dental procedures for reconstructive surgery required due to an accidental event	R92 000	R95 000
Functional nasal surgery	R30 000	R32 000
Joint replacement surgery	R60 000	R65 000
Knee or shoulder surgery (excl joint replacements and arthroscopic surgery)	R33 500	R36 000
Non-Cancerous breast conditions	R26 000	R28 000
Oesophageal reflux and hiatus hernia surgery	R66 000	R70 000
Removal of varicose veins	R26 000	R28 000
Skin disorders (including benign growths and lipomas)	R26 000	R28 000
Endoscopic procedures	R7 500	R8 500

Med-Extend has been designed to assist clients with **medical expense shortfalls** for Specialists and with covering Defined Procedures that have been excluded on their specific Medical Scheme option.





EXTENDED FAMILY COVER

The "Family" means the Principal Insured person and the eligible spouse, and eligible children, who have not attained the age of 26 years unless mentally or physically disabled and unable to earn any form of income. Any dependants falling under this definition are included at no additional cost.

If you have extended family or an additional dependant registered on your Medical Scheme and they do not qualify in terms of our definition of a "Family" as per the definition above, you may add them onto your Policy. The cost per each additional extended family member or dependant is detailed below.

Product	Ages 26 - 64 (incl) Rate per person	Ages 65 - 79 (incl) Rate per person	Ages 80+ Rate per person
Premier	R174	R562	R716
Optimal	R163	R459	R587
Synergy	R162	R454	R580
Launch	R40	R69	R105
Med-Extend	R150	R566	R722



Exceptions

Turnberry shall not be liable for hospitalisation, bodily injury, sickness or disease directly or indirectly caused by, related to or in consequence of:

1. Nuclear weapons or nuclear material or by ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exception combustion shall include any self-sustaining process of nuclear fission;
 2. LASIK or Lasik (laser-assisted in situ keratomileusis) surgery or any type of refractive surgery for correcting myopia, hyperopia, and astigmatism;
 3. Investigations, treatment or surgery for obesity its sequela or cosmetic surgery or surgery directly or indirectly caused by or related to or in consequence of cosmetic surgery other than as a result of an insured event otherwise insured. For the purpose of this exception cosmetic surgery shall include surgery for breast reduction or reconstruction unless necessitated as a result of treatment for cancer;
 4. Routine physical or any procedure of a purely diagnostic nature or any other examination where there are no objective indications of impairment in normal health and laboratory diagnostic or X-ray examinations except in the course of a disability established by prior call or attendance of a Medical practitioner;
 5. Suicide, attempted suicide or intentional self-injury;
 6. The taking of any drug or narcotic unless prescribed by and taken in accordance with the instructions of a Medical Practitioner (other than the Insured person) or drug addiction;
 7. An event directly attributable to the Insured person having an alcohol content exceeding the legal limit or the Insured person suffering from alcoholism or any illness caused by the use of alcohol;
 8. Participation in:
 - a. Active military duty, police duty, police reservist duty, civil commotion, labour disturbances, riot, strike, or the activities of locked-out workers
 - b. Aviation other than as a passenger
 - c. Any form of race or speed test (other than on foot or involving any non-mechanically propelled vehicle, vessel, craft or aircraft);
 9. Investigations, treatment or surgery for artificial insemination or hormone treatment for infertility;
 10. No benefits are payable which should be provided by the Medical Scheme, this exception includes ward fees, theatre fees, medicines, appliances and other hospital expenses;
 11. No benefits shall be payable in the event of fraudulent submission by the claimant;
 12. No benefits shall be payable in the event the insured did not pre-authorise, make use of a Designated Service Provider (this is not applicable to the Non-DSP Hospital Penalty Cover on Premier, Optimal and Synergy) or any condition set by the Insured's Medical Scheme;
 13. No benefits shall be payable in the event there is no benefit for the treatment and/or the condition or if it is excluded and/or declined by the Insured's Medical Scheme (including split billing) or if the Medical Scheme pays less than tariff for benefits associated with costs incurred above Medical Aid rate;
 14. No benefit shall be payable in respect of any medical or surgical treatment unless such treatment occurred during the period of hospital confinement as an in-patient or as an out-patient (as defined);
 15. The table of benefits applies in the territory of the RSA and no benefits are payable for expenses incurred for transport charges or for services rendered whilst being transported in any emergency vehicle, vessel or aircraft;
 16. No ward fee benefits shall be payable in respect of any additional costs incurred as a result of confinement to a private ward if such confinement to a private ward was requested by the Insured person;
 17. Treatment resulting from failure to carry out the instructions of a Medical Practitioner;
 18. Treatment for the Casualty Illness Benefit when treatment was not received between the hours of 18:00-06:00 Mondays-Fridays, Saturdays, Sundays and Public Holidays;
 19. Injuries arising from professional sport or any other recreational activity which is not commonly recognised as a sport and/or involves uncontrolled competition, unusual skill or violent activity and is generally considered to be inherently dangerous for the emergency casualty benefit (as defined in the Policy document) provided in a hospital out-patient emergency facility;
- ADDITIONAL EXCEPTIONS APPLICABLE ONLY TO PREMIER, OPTIMAL AND SYNERGY OPTIONS
20. Psychiatric conditions including but not limited to depression, insanity, mental and or stress related conditions for co-payments and sub-limits;
 21. Co-payments and Sub-limits are covered for dentistry except for investigations, treatment or surgery related to dental implants, except in the event for reconstructive maxillofacial surgery as a result of oral cancer or an accident (which occurred/ was diagnosed while on the Policy) and will be limited to R50 000 per policy per annum. No benefit is payable while an Insured person is within a waiting period;
 22. Benefit 1 (Private Rate Cover) for dentistry is limited to impacted wisdom teeth, orthognathic surgery, and/ or reconstructive maxillofacial surgery as a result of an accident while on the Policy and oral cancer (which was diagnosed while on the Policy). No benefit is payable while an Insured person is within a waiting period;
 23. Basic Dental Medical Expense Shortfall Cover for children will only be covered for children up to (and including) 12 years of age.
 24. No benefits shall be payable for gender reassignment treatment and/or surgery or the reversal thereof.
- ADDITIONAL EXCEPTION APPLICABLE TO TRAUMA RECOVERY COVER
25. The step down facility must be authorised and paid from the Medical Scheme's Risk Benefit (i.e. not from day to day benefits);
- ADDITIONAL EXCEPTION APPLICABLE TO MED-EXTEND
26. For the Defined Procedures listed on the Policy no benefit shall be payable unless the Defined Procedure has been fully declined by the Insured person's Medical Scheme.

CORPORATE GROUP GAP COVER

PREMIER GROUP OPTION

OPTIMAL GROUP OPTION

SYNERGY GROUP OPTION

LAUNCH GROUP OPTION

MED-EXTEND GROUP OPTION

*Rates are subject to change due to the demographics of a groups



RATES DEPENDENT ON GROUP DEMOGRAPHICS

- Ave age
- Medical aid option
- Voluntary or compulsory
- Nature of business
- Current claims report/NLR



TAILOR MAKE A PRODUCT FOR GROUPS OF 500+



GROUPS - 20+ MEMBERS FOR 2025



FAVOURABLE UNDERWRITING (WAITING PERIODS)

dependent on size of group. To be discussed.



ELECTRONIC TAKE-ON

Employee benefits form an influential part in the corporate talent attraction and retention strategy, and companies can leverage these contributions to differentiate their employee value proposition (EVP). As such, many businesses have started to offer Employee Assistance Programmes (EAP) to cater to physical, financial and mental health, along with the more common medical aid, pension and provident funds. However, while screening is offered as part of EAP, and medical aid pays for a portion of medical expenses, the reality is that the shortfalls between what medical aid pays and what medical procedures cost is widening all the time. Adding gap cover into the employee benefit basket is cost effective and can make a real difference in employees' lives – and productivity – today as well as in the future.

THE TRUE COST

With the gap between medical aid payments and the cost of procedures growing, as well as new treatments coming in that are not fully covered by medical schemes, many people cannot afford the co-payment or shortfalls that will result from having necessary treatments and procedures. These shortfalls can run into tens of thousands of rands, sums that most people simply do not have available to them. Often in these instances, people will try and treat problems that require surgical intervention with conservative means, which in turn results in increased sick leave as they take time off when they are in pain or unwell. Their well-being also suffers because of ongoing pain and suffering from

not being able to seek the right treatment. When they cannot avoid surgery any longer, the payments can put them into significant financial difficulty. They may have to take loans from the bank, or microloans from the business, make payment arrangements with doctors, and in general deal with considerable stress at a time when their health should be the focus.

PEACE OF MIND AND FINANCIAL WELL-BEING

The addition of gap cover to benefits is an affordable way for corporates to make a real, tangible difference to their employees' health and financial well-being. With gap cover in place, those who need medical treatments or surgical interventions can seek the care they need without fear of massive financial repercussions. Co-payments and shortfalls are covered up to the Overall Annual Limit (OAL), providing peace of mind and allowing people to prioritise their health. In the case of unexpected illness or injury, the added stress of having to pay for these shortfalls is reduced.

THE BENEFITS OF GROUP GAP COVER

Corporates have access to group gap cover for their employees, which has a number of benefits over private gap cover, including preferential rates and reduced waiting periods. Value-added benefits include access to trauma counselling, additional cancer cover and a lump sum pay-out on first cancer diagnosis, depending on the plan, all of which can help with both financial and mental well-being.

EASY TO CLAIM

Turnberry claim form

You can get the claim form under documents on our website.

You can also access the online claim form at <https://turnberry.co.za/claim-form/> (this can be completed and submitted online).

Requirements

A list of the requirements appears on the Claim form as well.

Should we require any further documentation, an email will be sent to you and your broker advising you of the outstanding requirements.

Turnberry Claims

Please submit the following to claims@turnberry.co.za



Invoices

All doctors invoices and/or statements

Hospital accounts

Please request a detailed invoice from the hospital's accounts department that includes date of admission, date of discharge and the ICD-10 codes and Procedure codes

Medical Aid Remittance/ Claim Statement

This statement from the Medical Aid will reflect the invoiced amount(s) for the service providers, the amounts paid and/or rejected by the Medical Aid.

Please note all claims are assessed in terms of the Benefits provided by the Policy and the Policy Terms and Conditions. Once a claim is admitted, the claimed amount is paid directly to the Policyholder who must settle outstanding amounts with the service providers. Provided that all requirements are received valid claims are settled within 10 working days.

All these documents are required with every claim as each document contains relevant information required to process the claim. You have 5 months to provide written notice from the date of treatment of a pending claim. Outstanding documentation needs to be submitted within 90 days from the date, outstanding documentation is requested by Turnberry. Please do not hesitate to contact Turnberry should you have any queries.

[CLICK HERE TO COMPLETE ONLINE CLAIM FORM](#)



Client Testimonials

THERE WHEN I NEEDED THEM THE MOST

What a great experience when submitting my claim. Turnberry was there when I needed them most. The assistance I received was more than I expected. I would recommend Turnberry to anyone who showed interest.

PEACE OF MIND

My experience was good. Turnberry Staff assisted me a professional manner with much empathy and patience. I WAS MOST IMPRESSED HOW MY CLAIM WAS HANDLED. For peace of mind of self and family, it's a must. DONT DELAY. I have no hesitation in recommending Turnberry Gap Cover.

HAVE TO HAVE IT!

No nonsense and honest! Quick and easy claim process. Not optional you HAVE to have it! Highly recommend to family and friends.

EXCELLENT SERVICE

The Turnberry Broker has been nothing but supportive throughout my whole claim. Definitely a must. I had a partial hip replacement and not even 3 weeks later needed a full hip replacement. I was not disappointed with the claim submission / payment. Excellent service.

PROFESSIONALISM

My experience with support was absolutely phenomenal! From the receptionist who answered the call to explain the process, to the actual claim assistant who processed and explained things to me in detail. I must be honest and explain the simplicity of Turnberry gap cover. The professional manner in which the claims' assessors conduct themselves. I have already recommended your gap cover to 12 of my family members. Service - EXCELLENT!!

PAID OUT TIMEOUSLY

Cover for birth-related shortfall of R22k paid out timeously. Waiting period for pregnancy claims is 10 months so plan ahead, and partner can be added to existing policy at no additional cost.

10 OUT OF 10 !

I hereby want to thank you for the excellent service of Turnberry Gap Cover. With every call that I have made to Turnberry I was served with patience, kindness and friendliness and every one that I have spoken to assisted me with any query. I will highly recommend anybody to make use of the Turnberry Gap Cover. Out of 10 I will surely give Turnberry 10.

PROMPT AND EFFICIENT

I received the usual prompt and efficient service as always. Would definitely recommend due to my personal dealings with the company. Work in a medical practice and so have exposure to various GAP insurers. Turnberry are by far the most efficient in my working environment.

WHAT A GREAT EXPERIENCE

What great experience I had with Turnberry. They were so professional and most of all so speedy to settle my claim. Very seldom does one get this kind of service, I can really recommend them with a good heart.

CLAIM PROCESS SO SIMPLE

Turnberry Gap Cover offers excellent gap cover at a cost which will not break the bank. The claims process is simple, and the payout happens within 10 days. Would HIGHLY recommend their services.

IMPECCABLE SERVICE

I joined Turnberry in December 2023. When my husband suddenly fell ill in May 2024 there was a number of accounts from the hospital and doctors that was not covered by my medical aid. I contacted Turnberry, and a staff member took me step by step through the entire process of submitting my documentation and claim form online to Turnberry. The process is very user friendly. With the high rates charged by specialists, Gap cover is a must even if you have a medical aid fund. I would recommend Turnberry to anybody that is considering Gap cover. Their service is impeccable and from my experience they definitely rate a 10!

TOP OF THE GAME

Turnberry are at the top of the game; service is great and every person considering Gap cover should put Turnberry at the top of the list for choice.

HASSLE-FREE CLAIM SUBMISSION

My claims were processed hassle-free. I want to thank Turnberry for the efficient way in which this claim was dealt with, well done to all.

GREAT GAP COVER

Absolutely amazing experience with Turnberry! Professional, always accessible consultants and claims assessors who know what they are doing! I would recommend them to anyone looking for a good gap cover!

CLAIM FINALISED IN 2 DAYS

This was my first claim. What a surprise - the amount I've claimed, was paid into my bank account within 2 days - excellent service!!! Well done.

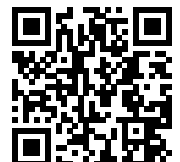
FRIENDLY, PROFESSIONAL – GLAD I SWITCHED

Turnberry Cap Cover finalized my claim without any issues. Whenever I called, I was dealt with in a friendly and professional manner. The claim application was done online and the whole process was quick and efficient. I am glad I switched to Turnberry.

HIGHLY RECOMMENDED

I have had 3 interactions with Turnberry and on all account was I helped without any issues at all. 1st time I supplied them with a quote to understand if it would be covered in which they responded in a timely fashion. 2nd and 3rd time I claimed and both was handled extremely fast without any issues at all. I would really recommend them to anyone.

FOR MORE
INFORMATION
CLICK HERE



LOMBARD INSURANCE COMPANY LIMITED



Turnberry Management Risk Solutions (Pty) Ltd is an authorised Financial Services Provider (FSP no. 36571). Underwritten by Lombard Insurance Company Limited, an Authorised Services Provider (FSP no 1596) an Insurer conducting non-life insurance business.

Lombard Insurance Company Limited, started in 1990 by the visionary George Lombard as a niche insurer operating specifically in guarantee markets, has developed into a multifaceted business that provides diversified insurance and related solutions to the business market.

Lombard values the entrepreneurial spirit – it's how we started in 1990 and how we've grown our businesses. Finding unique offerings and solutions, reacting to situations at critical moments, changes in the market and new opportunities – even in and from the most unexpected places and businesses – is core to what makes us leaders in specialist insurance. With more than R5.2 billion in assets (as at June 2021) and an A+ rating from Global Credit Ratings for our claims-paying ability, Lombard Insurance Company Limited is financially solid and poised for growth.

TURNBERRY MANAGEMENT RISK SOLUTIONS (PTY) LTD

Turnberry, founded in 2001, offers a range of products best suited to your needs, providing unsurpassed service, while at the same time helping you to avoid the potential financial burden of exorbitant medical expense shortfalls.

During the tough times, you need a partner that will be by your side navigating you to safety. This is why the iconic watchful Turnberry Lighthouse, situated on the point of the Turnberry Golf Course, Scotland; rises out of the darkness to carefully guide vessels to safety, inspired us. Much like its steady and constant beam of light that shows ships their safe passage away from danger, our products aim to help our clients journey through life by helping them deal with shortfalls and co-payments that usually arise when you or one of your dependents is hospitalised. Turnberry navigates the way through medical expense shortfalls, allowing you to create experiences in life.


You have a partner.

Turnberry. Navigating the way.



**You navigate through
life creating experiences
Turnberry will give you peace of mind.**

INSURER
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LOMBARD
(FSP no.1596)


Turnberry
GAP COVER
NAVIGATING THE WAY
(FSP no. 36571)

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to Apply Now
and Get Cover**

Contact Turnberry on 011 677 9891 or
visit the website www.turnberry.co.za

