Sanlam gap cover member guide: 2025 vs 2026

This is a comprehensive comparison of Sanlam Gap Cover across 2025 and 2026. It highlights year-on-year increases, benefit enhancements (especially oncology), optional add-ons, waiting periods, exclusions, and updated claiming processes—so you can plan confidently and avoid surprises.

Executive overview of year-on-year changes

- **Premiums:** Around 8% increase across single and family bands; Mediclinic Extender add-on increased ±8%.
- **Overall annual limit:** Increased from R210,580 (2025) to R219,845 (2026), with automatic CPI escalation effective 1 April.
- **Oncology coverage:** Expanded in 2026—higher tariff shortfall cover, increased innovative medicines cap, and new agreed lump-sum benefits (including breast reconstruction).
- **Mediclinic Extender:** Higher casualty illness limit and markedly higher cancer lump sum in 2026.
- **Claims process:** Shift to Medscheme integration and new claims email in 2026, with a slightly longer processing window.
- **Waiting periods and exclusions:** Broadly unchanged, but a 2026 concession exists for voluntary group inception on 1 January 2026.

Premium comparison

Retail comprehensive premiums

Category	2025	2026	Absolute change	% change
Single under 30	R320	R346	+R26	+8.1%
Single 30–45	R444	R480	+R36	+8.1%
Single 45–60	R495	R535	+R40	+8.1%
Single 60+	R832	R899	+R67	+8.0%
Family under 30	R485	R524	+R39	+8.0%
Family 30–45	R540	R583	+R43	+8.0%
Family 45–60	R582	R629	+R47	+8.1%
Family 60+	R999	R1,079	+R80	+8.0%

Notes: Premiums reflect retail comprehensive cover. Age bands remain consistent year-on-year.

Mediclinic extender add-on premiums

Category	2025	2026	Absolute change	% change
Single under 60	R51	R55	+R4	+7.8%
Single 60+	R93	R100	+R7	+7.5%
Family under 60	R114	R123	+R9	+7.9%
Family 60+	R193	R208	+R15	+7.8%

Overall annual limit and key benefit changes

Overall annual limit

- **2025:** R210,580 per insured per annum.
- **2026:** R219,845 per insured per annum (+4.4%), with an **automatic CPI escalation** on 1 April each year. For example, if CPI is 3%, the limit increases to R226,440 from 1 April.

Why this matters

- **Broader buffer:** As specialist costs and scheme co-payments rise, a higher annual limit provides more room to absorb shortfalls.
- **CPI link:** Protects members mid-year against inflation, aligning benefits with real-world cost trends.

Key benefits (comprehensive option) — what changed

Benefit	2025	2026	What's the change
Hospital tariff shortfalls	Up to 600% above scheme tariff	Up to 600% above scheme tariff	No change
Out-of-hospital tariff shortfalls	Up to 600% (risk/hospital funded only)	Up to 600% (risk/hospital funded only)	No change
Co-payments & deductibles	Unlimited (subject to annual limit)	Unlimited (subject to annual limit)	No change
Penalty co-payment (non-network hospital)	Max 2 family events, ≤30%, cap R18,550 per event	Max 2 family events, ≤30%, cap R18,550 per event	No change
Shortfalls from sub-limits	R66,400 per event	R68,500 per event	Increased (+3.2%)
Oncology tariff shortfalls	Up to 500% above scheme tariff	Up to 600% above scheme tariff	Expanded coverage
Oncology co-payments	Covers 20% co-pay beyond scheme threshold	Covers 20% co-pay beyond scheme threshold	No change
Oncology sub-limits	Unlimited (subject to annual limit)	Unlimited (subject to annual limit)	No change
Innovative oncology medicines	Lesser of 25% or R14,250	Lesser of 25% or R20,000	Increased (+40%)
Oncology agreed benefit	R15,500 (lump sum)	R30,000 (lifetime per cancer type)	Doubled and reframed
Breast reconstruction (unaffected breast)	Not present	R30,000 lifetime	New benefit
Dental reconstruction	R49,900 per annum	R49,900 per annum	No change
Major affective disorders	R2,500/day for up to 5 days	R2,500/day for up to 5 days	No change

Member guidance on oncology

- **Tariff shortfalls at 600%** provide more protection where oncologists charge high multiples of scheme rates.
- **Innovative medicines cap** rising to R20,000 per cycle helps with modern therapies that may be partly funded by schemes.

- **Agreed benefits** (R30,000) and **breast reconstruction** (R30,000) add meaningful financial support beyond tariff-based claims.

Additional benefits and limits

Additional benefit	2025	2026	What's the change
Accidental casualty	R18,450 per event	R18,450 per event	No change
Casualty – child illness (<12, after hours)	2 events/year, R3,000/event	2 events/year, R3,000/event	No change
Family booster (premature birth)	R16,400	R16,900	Increased (+3.0%)
Hospital booster (accident/premature birth)	Daily schedule to 30 days, cap R29,300	Same	No change
Family protector (accidental death/disability)	R20,000 (<6 yrs), R30,000 (others)	Same	No change
Medical aid contribution waiver	6 months, max R40,000	Same	No change
Gap premium waiver	6 months	Same	No change
Oncology agreed benefit	R15,500 lifetime	R30,000 lifetime	Enhanced
Breast reconstruction (unaffected breast)	Not present	R30,000 lifetime	New

Optional add-on: Mediclinic extender benefit

What changed year-on-year

Benefit	2025	2026	What's the change
Casualty illness (Mediclinic after hours)	R2,800 per event, 2 events/year	R3,000 per event, 2 events/year	Increased
Specialist benefit (out-of-hospital at Mediclinic)	R5,200 per insured/year	R5,200 per insured/year	No change
Private unit (childbirth)	R5,200 per event	R5,200 per event	No change
Cancer lump sum (Mediclinic facility, stage 2+)	R10,900 (first-time diagnosis)	R20,000 (first-time diagnosis)	Increased (+83%)
Cashless co-payment (diagnostic procedures)	Unlimited at Mediclinic	Unlimited at Mediclinic	No change
Cashless penalty co-payment (non-network hospital)	R17,500/event, 2 events/year	R17,500/event, 2 events/year	No change

Process requirements (unchanged mechanics, updated contacts in 2026)

- **Pre-authorisation:** Complete the Mediclinic cashless co-payment pre-authorisation form and submit at least 48 working hours before admission; in emergencies, submit within 3 working days post-event.
- **2025 submission:** SanlamGapInfo@sanlam.co.za
- **2026 submission:** authorisations@sanlamgap.com

All Mediclinic Extender claims aggregate into your main policy's Overall Annual Limit.

Core option and partner-specific updates (2026)

While your attachments focus on retail comprehensive, the 2026 launch adds clarity for Core and partner scenarios:

- **Core overall annual limit:** R219,845 per insured per annum.
- **Core hospital tariff shortfalls:** Up to 300% above scheme tariff.
- **Core diagnostics:** Up to R11,510 per insured per annum.
- **Core penalty co-payment:** 1 event per policy per annum, up to R12,650.
- **Core shortfalls from sub-limits:** Up to R32,800 per event.
- **Core oncology:** Tariff shortfalls up to 300%; co-payments covered to 20%, with annual caps (e.g., R32,800).
- **Automated claims integration:** Fedhealth, Medshield, Bonitas (where Medscheme administers).

Fedhealth NexGen (Savvy & Elect members)

- **Penalty co-payment:** R9,330 (Savvy) / R15,940 (Elect), 1 event/year.
- **MRI/CT scan co-payment:** R4,220, 1 event/year.
- **Casualty ward co-payment (accidental injury):** R870, 1 event/year.
- **Sports injury appliances/orthotics:** R1,740 per insured per annum.
- **Premiums:** Single under 35: R75; Single over 35: R93; Family under 35: R127; Family over 35: R187.

If you are on Fedhealth or Medshield, use plan-specific brochures and forms for clean alignment and faster onboarding.

Process and administration updates

Claims submission and timelines

- **Automated claims (Medscheme-administered schemes):**
  - **2025:** Automation on "selected schemes" with claims to SanlamGapInfo@sanlam.co.za.
  - **2026:** Formalised automation via Medscheme for eligible schemes. Manual claims go to gapclaims@centriq.co.za.
- **Manual claim submissions:**
  - **Documents required:** Specialist accounts, hospital accounts, medical scheme statement (showing processing and shortfall).
  - **Deadline:** Submit within 6 months from the end of the insured event.
  - **Processing times:** 2025 = 7–10 working days; 2026 = 7–14 working days.

Pre-authorisation for Mediclinic cashless co-payments

- **Timing:** At least 48 working hours prior to admission; emergency submissions within 3 working days post-procedure.
- **Email:** 2025 to SanlamGapInfo@sanlam.co.za; 2026 to authorisations@sanlamgap.com.
- **Note:** Keep the pre-auth letter available at admission; benefits pay directly to Mediclinic under cashless rules.

Contact points

- **2025 general support:** SanlamGapInfo@sanlam.co.za; Customer Care 0861 111 167.
- **2026 general support:** gapinfo@centriq.co.za; Claims gapclaims@centriq.co.za; Customer Care 0861 111 167.

Member guidance

- **Update email records** to use 2026 addresses for faster processing.
- **Use 2026 forms** consistently (application, claim, pre-auth) to avoid delays.
- **Automated claims save time**—opt in if your scheme is eligible.

Exclusions (key points unchanged year-on-year)

- **Medical scheme non-payment:** If your scheme does not pay its portion from the risk/hospital benefit, the gap claim will not be covered under Key Benefits.
- **Ex-gratia payments:** Not covered if a scheme benefit is not part of registered benefits but paid ex-gratia by the scheme.
- **Split billing:** Excluded (balance billing is not excluded).
- **Outside insured event period:** Not covered.
- **Territorial limit:** Cover applies only within South Africa.

Common service categories excluded

- **Infertility treatments, specialised dentistry (e.g., crowns, implants, TMJ surgery), external prostheses, appliances (wheelchairs, beds), harvesting/preserving tissues (e.g., stem cells), breast enlargement, gastroplasty/lipectomy/otoplasty, gender reversal, therapeutic massage, rehabilitation/frail care/hospice/step-down, TTO medicines, consumables.**

Always consult the 2026 policy wording for definitive exclusions and definitions.

Member actions and FAQs

What should I do now?

- **Review premiums and add-on value:**
  - **Mediclinic Extender** is more valuable in 2026 (bigger cancer lump sum; higher casualty limit). Add it if you often use Mediclinic facilities.
- **Map your 2026 healthcare exposure:**
  - **Oncology:** If you anticipate oncology treatment, 2026 enhancements (600% tariff shortfalls, R20,000 innovative medicines cap, R30,000 agreed benefits) significantly improve protection.
  - **Co-payments & sub-limits:** Check your scheme's 2026 co-payment and sub-limit changes; align with comprehensive cover.
- **Update processes:**
  - **Claims:** Use gapclaims@centriq.co.za (2026) and include all supporting documents. Expect 7–14 working days.
  - **Pre-auth:** Send Mediclinic cashless co-payment pre-auth to authorisations@sanlamgap.com (2026).

FAQs

- **Do I need to be on a medical scheme?**
  - **Yes.** Gap cover complements your medical scheme; it does not replace it.
- **Does the overall annual limit cap all my claims?**
  - **Yes.** All Key Benefits (including Mediclinic Extender claims) aggregate towards your annual limit.
- **Are PMBs covered?**
  - **Yes**, subject to clinical review and the requirement that your medical scheme pays from the risk/hospital benefit.

- **What if I move from another gap provider?**
    - If there's **no break in cover**, unexpired waiting periods may carry over; completed waiting periods are recognised.
- **Can I claim for costs paid from my savings account?**
    - For certain casualty benefits, reimbursement is available even if paid from your medical savings or out-of-pocket. Key Benefits require risk/hospital benefit funding by the scheme.

Quick checklist for 2026

- **Premiums:** Note ±8% increase and updated add-on rates.
- **Limits:** New overall annual limit R219,845 with CPI escalation from 1 April.
- **Oncology:** Enhanced tariff shortfalls (600%), innovative medicines cap (R20,000), new R30,000 agreed benefits.
- **Mediclinic:** Higher casualty illness limit (R3,000) and cancer lump sum (R20,000); ensure pre-auth.
- **Claims process:** Use gapclaims@centriq.co.za; automated integration for Medscheme-administered schemes.
- **Waiting periods:** Unchanged; group concession may apply for 1 Jan 2026 voluntary onboarding.

Conclusion

Sanlam Gap Cover's 2026 enhancements provide stronger protection without disrupting the familiar structure members rely on. Premium increases are modest and aligned with meaningful improvements, including a higher annual limit with CPI escalation, expanded oncology benefits, and enhanced Mediclinic Extender cover. The updated claims process adds efficiency, and waiting periods and exclusions remain consistent. On this basis, we endorse the 2026 offering and do not recommend any changes for existing members. Should your healthcare needs or circumstances shift, please contact HealthGroup for tailored advice to ensure your cover remains optimally aligned.