

⊕ 2018 GAP COVER PRODUCT RANGE OVERVIEW



2018 BENEFIT OVERVIEW

⊕ EDGE ²⁰⁰	⊕ COMPACT ²⁰⁰ & CORP.COMPACT ²⁰⁰	⊕ BASE	⊕ CO-EVOLUTION	⊕ ELITE & CORPORATE ELITE	⊕ ACCESS OPTIMISER & CORP. ACCESS
Our EDGE²⁰⁰ option covers the private healthcare fees charged by doctors and specialists which your medical scheme does not cover in full, provides cover for casualty events and covers your Gap Cover policy premium when life happens, and the premium payer no longer can.	Our COMPACT²⁰⁰ option provides cover when your medical scheme does not cover the private fees charged by your doctor or specialist, refunds the costs of co-payments, casualty events & trauma counselling consultation fees, and pays a lump sum payment in the event of first time cancer diagnosis & accidental death. Our CORPORATE COMPACT²⁰⁰ option is available to employer groups of 10 or more employees.	Our BASE option not only covers account shortfalls when your doctor or specialist charges more than your medical scheme pays, it also provides cover for casualty events, trauma counselling consultations fees & pays a lump sum payment in the event of first time cancer diagnosis & accidental death.	Our CO-EVOLUTION option covers the gap that exists when your doctor or specialist charges a rate more than what your medical scheme pays, refunds the costs of co-payments, casualty events & trauma counselling consultation fees, and offers financial assistance in the event of first time cancer diagnosis & accidental death.	Our ELITE option provides cover when you become liable to pay the difference between what your doctor or specialist charges and the rate your medical scheme pays. We also provide cover for co-payments, casualty events, trauma counselling, rehabilitative & preventative care, and covers your gap policy premiums & medical scheme contributions when life happens and the premium or contribution payer no longer can. Our CORPORATE ELITE option is available to employer groups of 10 or more employees.	Our ACCESS OPTIMISER option covers medical procedures that you cannot claim from your medical scheme, because the procedures are listed as specific exclusions over and above the general exclusions applicable to your medical scheme option. Our CORPORATE ACCESS option is available to employer groups of 10 or more employees.
BENEFIT OVERVIEW					
GAP BENEFIT	GAP BENEFIT	GAP BENEFIT	GAP BENEFIT	GAP BENEFIT	GAP BENEFIT (Optional to add to our ACCESS OPTIMISER BENEFIT but automatically included in our CORPORATE ACCESS option)
N/A	CO-PAYMENT BENEFIT	N/A	CO-PAYMENT BENEFIT	CO-PAYMENT BENEFIT	
N/A	ONCOLOGY BENEFIT	N/A	N/A	ONCOLOGY BENEFIT	
N/A	ONCOLOGY OPTIMISER BENEFIT	N/A	N/A	ONCOLOGY OPTIMISER BENEFIT	
N/A	CANCER DIAGNOSIS BENEFIT	CANCER DIAGNOSIS BENEFIT	CANCER DIAGNOSIS BENEFIT	CANCER DIAGNOSIS BENEFIT	
N/A	SUB-LIMIT BENEFIT	N/A	N/A	SUB-LIMIT BENEFIT	
CASUALTY BENEFIT	CASUALTY BENEFIT	CASUALTY BENEFIT	CASUALTY BENEFIT	CASUALTY BENEFIT	
N/A	TRAUMA COUNSELLING BENEFIT	TRAUMA COUNSELLING BENEFIT	TRAUMA COUNSELLING BENEFIT	TRAUMA COUNSELLING BENEFIT	
N/A	N/A	N/A	N/A	REHAB OPTIMISER BENEFIT	
N/A	N/A	N/A	N/A	PREVENTATIVE CARE BENEFIT	
ADDITIONAL BENEFIT	ADDITIONAL BENEFIT	ADDITIONAL BENEFIT	ADDITIONAL BENEFIT	ADDITIONAL BENEFITS	ADDITIONAL BENEFIT
GAP POLICY PREMIUM WAIVER BENEFIT	N/A	N/A	N/A	GAP POLICY PREMIUM WAIVER BENEFIT	
N/A	N/A	N/A	N/A	MEDICAL SCHEME CONTRIBUTION WAIVER BENEFIT	
N/A	ACCIDENTAL DEATH BENEFIT	ACCIDENTAL DEATH BENEFIT	ACCIDENTAL DEATH BENEFIT	ACCIDENTAL DEATH BENEFIT	ACCIDENTAL DEATH BENEFIT

BENEFIT	⊕ EDGE ²⁰⁰	⊕ COMPACT ²⁰⁰ & CORP.COMPACT ²⁰⁰	⊕ BASE	⊕ CO-EVOLUTION	⊕ ELITE & CORPORATE ELITE	⊕ ACCESS OPTIMISER & CORP. ACCESS
OVERALL POLICY LIMIT (OPL) Our gap cover options are subject to OVERALL POLICY LIMITS (OPL's) per year.	✔ Subject to an OVERALL POLICY LIMIT (OPL) of R 150 000 per year.	✔ Subject to an OVERALL POLICY LIMIT (OPL) of R 150 000 per person per year.	✔ Subject to an OVERALL POLICY LIMIT (OPL) of R 150 000 per person per year.	✔ Subject to an OVERALL POLICY LIMIT (OPL) of R 150 000 per person per year.	✔ Subject to an OVERALL POLICY LIMIT (OPL) of R 150 000 per person per year.	✔ Our ACCESS OPTIMISER option is subject to an OVERALL POLICY LIMIT (OPL) of R 100 000 per policy per year or when adding our GAP BENEFIT increases to R 150 000 per policy per year. Our CORPORATE ACCESS option is subject to an OVERALL POLICY LIMIT (OPL) of R 150 000 per policy per year.
GAP BENEFIT Our GAP BENEFIT provides additional cover, when you become liable for the difference between what your service providers charge and what your medical scheme pays from your medical scheme hospital benefit for account shortfalls related to the following: <ul style="list-style-type: none"> Doctors and specialists Dentistry and related procedures Basic radiology Specialised radiology limited to MRI, CT and PET scans Pathology Physiotherapy Consumable items such as surgical gloves, bandages and gauze Medication provided as part of your in- or out-of-hospital event 	✔ Additional 200% cover. Dentistry and related procedures limited to R 3 000 per year. Specialised radiology limited to R 2 000 per year.	✔ Additional 200% cover. Dentistry and related procedures limited to R 3 000 per policy per year. Specialised radiology limited to R 2 000 per policy per year.	✔ Additional 500% cover. Dentistry and related procedures limited to R 3 000 per policy per year. Specialised radiology limited to R 2 000 per policy per year.	✔ Additional 500% cover. Dentistry and related procedures limited to R 3 000 per policy per year. Specialised radiology limited to R 2 000 per policy per year.	✔ Additional 500% cover. Dentistry and related procedures limited to R 5 000 per policy per year. Specialised radiology limited to R 2 000 per policy per year.	✔ ✘ Our GAP BENEFIT , providing an additional 500% cover, can be taken voluntarily at an additional premium per month on our ACCESS OPTIMISER option but is automatically included in our CORPORATE ACCESS option. Dentistry and related procedures limited to R 3 000 per policy per year. Specialised radiology limited to R 2 000 per policy per year.

INSURED BY CONSTANTIA INSURANCE COMPANY LIMITED (FSP 31111)
THIS POLICY IS A NON-MEDICAL SCHEME PRODUCT, PROVIDING BENEFITS THAT CANNOT BE COMPARED TO OR SUBSTITUTED FOR MEDICAL SCHEME MEMBERSHIP

T'S & C'S APPLY | E&OE

BENEFIT	⊕ EDGE ²⁰⁰	⊕ COMPACT ²⁰⁰ & CORP.COMPACT ²⁰⁰	⊕ BASE	⊕ CO-EVOLUTION	⊕ ELITE & CORPORATE ELITE	⊕ ACCESS OPTIMISER & CORP. ACCESS
CO-PAYMENT BENEFIT Our CO-PAYMENT BENEFIT covers in- and out-of-hospital medical procedure related and specialised radiology scan co-payments, deductibles or hospital admission fees, represented as either a rand amount or a percentage.	⊗	✔ Our CO-PAYMENT BENEFIT is limited to R 15 000 per policy per year.	⊗	✔ Our CO-PAYMENT BENEFIT is limited to R 50 000 per policy per year.	✔ Our CO-PAYMENT BENEFIT does not have a benefit limit but is subject to the OPL . You will also be covered for 1 co-payment up to an amount of R 8 500 per policy per year, for the voluntary use of a hospital or day clinic outside your medical scheme's designated network.	⊗
ONCOLOGY BENEFIT You are covered when your medical scheme only pays a portion towards your approved oncology treatment such as radiotherapy, chemotherapy, basic and specialised radiology, pathology, specialist consultations, registered oncology facility fees, biological or specialised medication etc. Our ONCOLOGY BENEFIT covers you when your medical scheme only pays a portion towards your service providers' accounts.	⊗	✔ Our ONCOLOGY BENEFIT does not have a benefit limit but is subject to the OPL .	⊗	⊗	✔ Our ONCOLOGY BENEFIT does not have a benefit limit but is subject to the OPL .	⊗
ONCOLOGY OPTIMISER BENEFIT You are covered when your medical scheme provides you with an oncology benefit but applies a rand amount limit from which you can claim per year. Once this rand amount limit is reached, you will be liable to pay all treatment costs thereafter. Our ONCOLOGY OPTIMISER BENEFIT covers your oncology treatment costs when your medical scheme no longer does.	⊗	✔ Our ONCOLOGY OPTIMISER BENEFIT is limited to R 50 000 per person per year.	⊗	⊗	✔ Our ONCOLOGY OPTIMISER BENEFIT does not have a benefit limit but is subject to the OPL .	⊗
CANCER DIAGNOSIS BENEFIT Our DIAGNOSIS BENEFIT provides a once-off payment when you are diagnosed with cancer for the first time and the diagnosis aligns to specific qualifying criteria. This benefit ceases at the age of 65.	⊗	✔ Our CANCER DIAGNOSIS BENEFIT provides a once-off payment of R 15 000 . Not subject to the OPL.	✔ Our CANCER DIAGNOSIS BENEFIT provides a once-off payment of R 5 000 . Not subject to the OPL.	✔ Our CANCER DIAGNOSIS BENEFIT provides a once-off payment of R 5 000 . Not subject to the OPL.	✔ Our CANCER DIAGNOSIS BENEFIT provides a once-off payment of R 30 000 . Not subject to the OPL.	⊗
SUB-LIMIT BENEFIT Our SUB-LIMIT BENEFIT provides cover when you become liable to settle a portion of your internal prosthesis provider's account, or the service providers' accounts relating to your non-PMB day procedure or renal dialysis treatment, as indicated.	⊗	✔ Our SUB-LIMIT BENEFIT provides cover for your internal prosthesis provider's account, up to R 15 000 per event with a maximum of R 30 000 per person per year.	⊗	⊗	✔ Our SUB-LIMIT BENEFIT provides cover for your internal prosthesis provider's account, or the service providers' accounts relating to your non-PMB day procedure or renal dialysis treatment, up to R 30 000 per event with a maximum of R 60 000 per person per year. You will also be covered for 2 MRI or CT scans up to an amount of R 2 500 per scan per policy per year, when you become liable to settle a portion of, or the full amount of your service provider's account.	⊗

BENEFIT	⊕ EDGE ²⁰⁰	⊕ COMPACT ²⁰⁰ & CORP.COMPACT ²⁰⁰	⊕ BASE	⊕ CO-EVOLUTION	⊕ ELITE & CORPORATE ELITE	⊕ ACCESS OPTIMISER & CORP. ACCESS
CASUALTY BENEFIT Our CASUALTY BENEFIT covers the cost of your casualty event, including return visits for follow-up treatment that is required as a result of your initial casualty event, for: <ul style="list-style-type: none"> • Doctor or specialist consultations • Basic and specialised radiology • Pathology • Consumable items such as surgical gloves, bandages and gauze • Medication provided as part of your casualty event at the registered medical facility • Upfront casualty co-payments or facility fees 	✔ Our CASUALTY BENEFIT is limited to R 2 500 per year.	✔ Our CASUALTY BENEFIT is limited to R 5 000 per policy per year.	✔ Our CASUALTY BENEFIT is limited to R 6 000 per policy per year.	✔ Our CASUALTY BENEFIT is limited to R 7 000 per policy per year.	✔ Our CASUALTY BENEFIT is limited to R 10 000 per policy per year.	✘
TRAUMA COUNSELLING BENEFIT Our TRAUMA COUNSELLING BENEFIT covers your consultation fees in the event that you witnessed or were directly affected by an act of physical violence or an accident resulting in serious bodily injury or death, when you are diagnosed with a dread disease or are affected by a loved one's diagnosis of a dread disease or death.	✘	✔ Our TRAUMA COUNSELLING BENEFIT is limited to R 5 000 per policy per year.	✔ Our TRAUMA COUNSELLING BENEFIT is limited to R 6 000 per policy per year.	✔ Our TRAUMA COUNSELLING BENEFIT is limited to R 7 000 per policy per year.	✔ Our TRAUMA COUNSELLING BENEFIT is limited to R 10 000 per policy per year.	✘
REHABILITATION OPTIMISER BENEFIT Our REHABILITATION OPTIMISER BENEFIT covers your rehabilitation treatment costs when your medical scheme provides you with a rehabilitation benefit for accidental events, but applies a rand amount limit or a limit to the number of days you may be admitted from which you can claim per year. Once these limits are reached, you will be liable to pay all treatment costs thereafter. You are covered for rehabilitation treatment provided by on-site therapists as well as your stay at a registered sub-acute or step-down facility, when your medical scheme no longer provides cover.	✘	✘	✘	✘	✔ Our REHABILITATION OPTIMISER BENEFIT is limited to R 10 000 per person per year.	✘
PREVENTATIVE CARE BENEFIT Our PREVENTATIVE CARE BENEFIT covers your consultation fee or the cost of a Pap smear, prostate screening (PSA test) or full blood count (FBC test) to help diagnose certain cancers.	✘	✘	✘	✘	✔ Our PREVENTATIVE CARE BENEFIT is limited to R 500 per policy per year.	✘
ADDITIONAL BENEFITS Our GAP POLICY PREMIUM WAIVER BENEFIT covers your Stratum Benefits policy premium in the event of death, permanent disability or forced retrenchment of the Stratum Benefits policy premium payer.	✔ Our GAP POLICY PREMIUM WAIVER BENEFIT covers your Stratum Benefits policy premium for 12 months in the event of death, permanent disability or forced retrenchment of the Stratum Benefits policy premium payer. Not subject to the OPL.	✘	✘	✘	✔ Our GAP POLICY PREMIUM WAIVER BENEFIT covers your Stratum Benefits policy premium for 12 months in the event of death, permanent disability or forced retrenchment of the Stratum Benefits policy premium payer. Not subject to the OPL.	✘
Our MEDICAL SCHEME CONTRIBUTION WAIVER BENEFIT covers your medical scheme contribution in the event of death or permanent disability of the medical scheme contribution payer.	✘	✘	✘	✘	✔ Our MEDICAL SCHEME CONTRIBUTION WAIVER BENEFIT covers your medical scheme contribution for 6 months to a maximum of R 4 500 per month, in the event of death or permanent disability of the medical scheme contribution payer. Not subject to the OPL.	✘

INSURED BY CONSTANTIA INSURANCE COMPANY LIMITED (FSP 31111)
 THIS POLICY IS A NON-MEDICAL SCHEME PRODUCT, PROVIDING BENEFITS THAT CANNOT BE COMPARED TO OR SUBSTITUTED FOR MEDICAL SCHEME MEMBERSHIP

T'S & C'S APPLY | E&OE

BENEFIT	⊕ EDGE ²⁰⁰	⊕ COMPACT ²⁰⁰ & CORP.COMPACT ²⁰⁰	⊕ BASE	⊕ CO-EVOLUTION	⊕ ELITE & CORPORATE ELITE	⊕ ACCESS OPTIMISER & CORP. ACCESS
<p>Our ACCIDENTAL DEATH BENEFIT provides a lump sum payment in the event of the accidental death of the principal insured, spouse or dependant, as indicated.</p>	⊗	⊙ Our ACCIDENTAL DEATH BENEFIT provides a payment of R 15 000 in the event of the accidental death of the principal insured or spouse, and R 5 000 for the accidental death of a dependant. Not subject to the OPL .	⊙ Our ACCIDENTAL DEATH BENEFIT provides a payment of R 6 000 in the event of the accidental death of the principal insured or spouse. Not subject to the OPL .	⊙ Our ACCIDENTAL DEATH BENEFIT provides a payment of R 7 000 in the event of the accidental death of the principal insured or spouse. Not subject to the OPL .	⊙ Our ACCIDENTAL DEATH BENEFIT provides a payment of R 25 000 in the event of the accidental death of the principal insured or spouse, and R 5 000 for the accidental death of a dependant. Not subject to the OPL .	⊙ Our ACCIDENTAL DEATH BENEFIT provides a payment of R 5 000 in the event of the accidental death of the principal insured or spouse. Not subject to the OPL .
<p>ACCESS OPTIMISER BENEFIT</p> <p>Our ACCESS OPTIMISER BENEFIT provides cover when your medical scheme excludes a medical procedure that forms part of a specific list of exclusions, over and above the general exclusions applicable to your medical scheme option, leaving you liable to pay all hospitalisation and related service providers' accounts in full.</p>	⊗	⊗	⊗	⊗	⊗	⊙ Our ACCESS OPTIMISER BENEFIT provides cover for your hospital and service providers' accounts up to the rand amount limit for the below listed medical procedures: <div style="text-align: right; margin-right: 20px;"> R 14 000 <ul style="list-style-type: none"> • Bunion surgery R 20 000 <ul style="list-style-type: none"> • Varicose veins surgery R 23 000 <ul style="list-style-type: none"> • Functional nasal surgery R 25 000 <ul style="list-style-type: none"> • Knee or shoulder surgery R 50 000 <ul style="list-style-type: none"> • Arthroscopic surgery • Back or neck surgery • Joint replacement surgery R 55 000 <ul style="list-style-type: none"> • Oesophageal reflux and hiatus Hernia surgery R 80 000 <ul style="list-style-type: none"> • Cochlear implant, auditory brain implant and internal nerve stimulator surgery incl. the device and processor • Dental procedures for reconstructive surgery due to an accident R 10 000 <ul style="list-style-type: none"> • MRI or CT scan due to an accident (CORPORATE ACCESS option only) </div>

INSURED BY CONSTANTIA INSURANCE COMPANY LIMITED (FSP 31111)
 THIS POLICY IS A NON-MEDICAL SCHEME PRODUCT, PROVIDING BENEFITS THAT CANNOT BE COMPARED TO OR SUBSTITUTED FOR MEDICAL SCHEME MEMBERSHIP

T'S & C'S APPLY | E&OE

BENEFIT	⊕ EDGE ²⁰⁰	⊕ COMPACT ²⁰⁰ & CORP.COMPACT ²⁰⁰	⊕ BASE	⊕ CO-EVOLUTION	⊕ ELITE & CORPORATE ELITE	⊕ ACCESS OPTIMISER & CORP. ACCESS																																																																		
WE COVER	<ul style="list-style-type: none"> You, whether you are the main member or dependant on a medical scheme option. You, as the only individual insured on this option. 	<p>INDIVIDUALS 64 AND YOUNGER</p> <ul style="list-style-type: none"> We cover you and your spouse on one policy, even if you belong to different medical schemes or medical scheme options, including all dependants registered on your or your spouse's medical scheme option. <p>INDIVIDUALS 65 AND OLDER</p> <ul style="list-style-type: none"> We cover you and your spouse on one policy, even if you belong to different medical schemes or medical scheme options, or you and one other dependant registered on your medical scheme option. Where either one, or both individuals are 65 and older the 65+ premium will apply, limited to two insured individuals per policy. The above age categories and criteria will apply to our CORPORATE COMPACT²⁰⁰, CORPORATE ELITE and CORPORATE ACCESS options, unless otherwise specified in the tailored Employer Group Scheme Proposal. 																																																																						
MONTHLY PREMIUM	<table border="1"> <tr><td>18 - 27 *</td><td></td></tr> <tr><td>👤 Single</td><td>R 100</td></tr> <tr><td>28 - 64 *</td><td></td></tr> <tr><td>👤 Single</td><td>R 180</td></tr> <tr><td>65+ *</td><td></td></tr> <tr><td>👤 Single</td><td>R 300</td></tr> </table> <p><small>*Limited to one insured individual per policy</small></p>	18 - 27 *		👤 Single	R 100	28 - 64 *		👤 Single	R 180	65+ *		👤 Single	R 300	<table border="1"> <tr><td>64 AND YOUNGER</td><td></td></tr> <tr><td>👤 Single</td><td>R 180</td></tr> <tr><td>👤 Family</td><td>R 210</td></tr> <tr><td>65+ *</td><td></td></tr> <tr><td>👤 Single or 👤 Family ...</td><td>R 350</td></tr> </table> <p><small>*Limited to two insured individuals per policy Monthly premiums applicable to our CORPORATE COMPACT²⁰⁰ option are subject to a tailored Employer Group Scheme Proposal</small></p>	64 AND YOUNGER		👤 Single	R 180	👤 Family	R 210	65+ *		👤 Single or 👤 Family ...	R 350	<table border="1"> <tr><td>64 AND YOUNGER</td><td></td></tr> <tr><td>👤 Single</td><td>R 180</td></tr> <tr><td>👤 Family</td><td>R 205</td></tr> <tr><td>65+ *</td><td></td></tr> <tr><td>👤 Single or 👤 Family ...</td><td>R 350</td></tr> </table> <p><small>*Limited to two insured individuals per policy</small></p>	64 AND YOUNGER		👤 Single	R 180	👤 Family	R 205	65+ *		👤 Single or 👤 Family ...	R 350	<table border="1"> <tr><td>64 AND YOUNGER</td><td></td></tr> <tr><td>👤 Single</td><td>R 200</td></tr> <tr><td>👤 Family</td><td>R 250</td></tr> <tr><td>65+ *</td><td></td></tr> <tr><td>👤 Single or 👤 Family ...</td><td>R 400</td></tr> </table> <p><small>*Limited to two insured individuals per policy</small></p>	64 AND YOUNGER		👤 Single	R 200	👤 Family	R 250	65+ *		👤 Single or 👤 Family ...	R 400	<table border="1"> <tr><td>64 AND YOUNGER</td><td></td></tr> <tr><td>👤 Single</td><td>R 295</td></tr> <tr><td>👤 Family</td><td>R 355</td></tr> <tr><td>65+ *</td><td></td></tr> <tr><td>👤 Single</td><td>R 470</td></tr> <tr><td>👤 Family</td><td>R 575</td></tr> </table> <p><small>*Limited to two insured individuals per policy Monthly premiums applicable to our CORPORATE ELITE option are subject to a tailored Employer Group Scheme Proposal</small></p>	64 AND YOUNGER		👤 Single	R 295	👤 Family	R 355	65+ *		👤 Single	R 470	👤 Family	R 575	<table border="1"> <tr><td>64 AND YOUNGER</td><td></td></tr> <tr><td>👤 Single or 👤 Family ...</td><td>R 235</td></tr> <tr><td>⊕ Add Gap Benefit.....</td><td>R 65</td></tr> <tr><td>65+ *</td><td></td></tr> <tr><td>👤 Single or 👤 Family ...</td><td>R 285</td></tr> <tr><td>⊕ Add Gap Benefit.....</td><td>R 115</td></tr> </table> <p><small>*Limited to two insured individuals per policy Monthly premiums applicable to our CORPORATE ACCESS option are subject to a tailored Employer Group Scheme Proposal</small></p>	64 AND YOUNGER		👤 Single or 👤 Family ...	R 235	⊕ Add Gap Benefit.....	R 65	65+ *		👤 Single or 👤 Family ...	R 285	⊕ Add Gap Benefit.....	R 115
18 - 27 *																																																																								
👤 Single	R 100																																																																							
28 - 64 *																																																																								
👤 Single	R 180																																																																							
65+ *																																																																								
👤 Single	R 300																																																																							
64 AND YOUNGER																																																																								
👤 Single	R 180																																																																							
👤 Family	R 210																																																																							
65+ *																																																																								
👤 Single or 👤 Family ...	R 350																																																																							
64 AND YOUNGER																																																																								
👤 Single	R 180																																																																							
👤 Family	R 205																																																																							
65+ *																																																																								
👤 Single or 👤 Family ...	R 350																																																																							
64 AND YOUNGER																																																																								
👤 Single	R 200																																																																							
👤 Family	R 250																																																																							
65+ *																																																																								
👤 Single or 👤 Family ...	R 400																																																																							
64 AND YOUNGER																																																																								
👤 Single	R 295																																																																							
👤 Family	R 355																																																																							
65+ *																																																																								
👤 Single	R 470																																																																							
👤 Family	R 575																																																																							
64 AND YOUNGER																																																																								
👤 Single or 👤 Family ...	R 235																																																																							
⊕ Add Gap Benefit.....	R 65																																																																							
65+ *																																																																								
👤 Single or 👤 Family ...	R 285																																																																							
⊕ Add Gap Benefit.....	R 115																																																																							

IMPORTANT TO NOTE:

- Where a claim under our **GAP BENEFIT**, **CO-PAYMENT BENEFIT** or **SUB-LIMIT BENEFIT** is received for a condition, procedure, surgery, treatment or an investigation and any related accounts in respect of Adenoidectomy, Tonsillectomy, Myringotomy/Grommets, Cardiovascular procedures, Cataract removal, Dentistry, Hysterectomy (unless due to cancer diagnosis), Hernia repair, Joint replacement, MRI, CT and PET scans, Nasal and sinus surgery, Pregnancy and childbirth, Spinal procedures and Scopes within the first **10 months** of cover, and is not deemed as pre-existing or accidental, **20%** of the medical expense shortfall amount will be payable.
This benefit structure will apply to our **CORPORATE COMPACT²⁰⁰** and **CORPORATE ELITE** options, unless otherwise stipulated in the Employer Group Scheme Proposal.
- Where a claim under our **ACCESS OPTIMISER BENEFIT** is received for a condition, procedure, surgery, treatment or an investigation and any related accounts in respect of Arthroscopic surgery, Back or neck surgery, Bunion surgery, Cochlear implant, auditory brain implant and internal nerve stimulator surgery including the device and processor, Dental procedures for impacted wisdom teeth for child dependants under 18 years of age, Dental procedures for reconstructive plastic surgery, Functional nasal surgery, Joint replacement surgery, Knee or shoulder surgery, MRI or CT scan (applicable to our **CORPORATE ACCESS** option only), Oesophageal reflux and hiatus hernia surgery or Varicose veins surgery within the first **10 months** of cover, and is not deemed as pre-existing or accidental, **20%** of the medical expense shortfall amount will be payable.
This benefit structure will apply to our **CORPORATE ACCESS** option unless otherwise stipulated in the Employer Group Scheme Proposal.
- Our **CANCER DIAGNOSIS BENEFIT**, **GAP POLICY PREMIUM WAIVER BENEFIT** and **MEDICAL SCHEME CONTRIBUTION WAIVER BENEFIT** are not subject to the **OVERALL POLICY LIMIT (OPL)**.