



Sanlam Gap Cover

At Sanlam we're in the business of planning for tomorrow.

Of safeguarding futures. And while we wish we could guarantee you a trouble-free future, unfortunately challenges are bound to come your way. One of life's biggest challenges often come in the form of poor health and while no one can promise you a long healthy life, we can promise you peace of mind - with Sanlam Gap Cover. Regardless of your current medical scheme, Sanlam Gap Cover provides you with that security.



What is Gap Cover?

You may think that if you're a member of a medical scheme you're fully covered for all in-hospital expenses, but in many instances, you're not. In most cases there's a difference between what a specialist charges in hospital, and what your medical scheme will cover. As the medical scheme member, you remain liable for the additional medical expenses. Gap cover ensures that you would not have to pay this unexpected cost from your own pocket (T&Cs apply).



Sanlam Comprehensive Gap Cover 2020 Benefits

Monthly Premiums 2020

<p>Individuals younger than 60 years</p> <p>R200.00*</p>	<p>Individuals older than 60 years</p> <p>R400.00*</p>	<p>Families younger than 60 years</p> <p>R352.00*</p>	<p>Families older than 60 years</p> <p>R700.00*</p>
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Hospital Tariff Shortfall Benefit	Provides an Additional 500% of the medical aid rate, covering shortfalls for all service providers such as surgeons, radiologists, pathologists and physiotherapists. Also includes cover for Prescribed Minimum Benefits (PMBs). Shortfall benefits are limited to R165 000 per insured per year .
Oncology Shortfall Benefit	Provides an Additional 500% of the medical aid rate, to cover oncology treatment shortfalls.
Oncology Co-payment Benefit	Provides full cover for the 20% oncology related co-payments imposed by medical aids.
Oncology Booster Benefit	When a medical scheme imposes an overall annual limit on oncology treatment and the benefit has been exhausted, the Oncology Booster Benefit provides full cover to the statutory maximum of R165 000 per insured per annum .
Co-payment & Deductible Benefit	Provides full cover to the statutory maximum of R165 000 per insured per annum for fixed co-payments applied to defined surgical procedures, basic in-patient dentistry and diagnostic services such as MRI/CT/PET scans and scopes.
Penalty Co-payment	A fixed value Penalty co-payment or deductible or a percentage penalty co-payment that does not exceed 30%, up to a maximum of R15 000
Shortfalls from Sub-Limits	Provides up to an Additional R52 100 per event when a medical scheme imposes an overall annual limit, known as a sub-limit, on certain in-hospital medical procedures such as prosthetic devices or when a shortfall occurs.
Accidental Casualty	Provides up to R15 000 cover per event for all services delivered in the casualty ward, relating to an accident (physical injury that requires immediate medical attention), even if the costs are paid from the Medical Schemes savings account.
Family Booster Benefit	For a premature birth (more than 6 weeks before the due date), a lump-sum of R14 000 will be paid.



Sanlam Gap Cover ensures that you are covered for additional medical expenses

<p>Hospital Cash Benefit</p>	<p>A lump-sum payment, related to the length of the hospital stay, will only be payable for accidents and premature births – 6 weeks or earlier, subject to a maximum of R25 190 per beneficiary per year.</p> <ul style="list-style-type: none"> • Day 1 to 13: R380 per day • Day 14 to 20: R750 per day • Day 21 to 30: R1 500 per day
<p>Family Protector Benefit</p>	<p>On the death or permanent disability of an Insured as a result of accidental harm, a lump sum of R28 000 is payable.</p>
<p>Dental Reconstruction Benefit</p>	<p>If dental reconstruction is required as a result of trauma or oncology treatment, all related costs up to R48 000 per event will be covered.</p>
<p>Medical Scheme and Gap Cover Premium contribution waiver Benefit</p>	<p>If the principal member of the medical scheme is involved in an accident/trauma and passes away or becomes permanently disabled, the medical aid contributions will be covered for 6 months of R5 500 per month with a lump sum up to a maximum amount of R33 000 will be paid upfront to the claimant. The Sanlam Gap Cover policy premium will also be waived for these 6 months.</p>
<p>Road Accident Fund Benefit</p>	<p>Assistance for Road Accident Claims where the policy holder was not at fault in the vehicle accident.</p> <p>An end-to-end legal service is provided by the nominated service provider of Kaelo Risk to assist Insured members with legitimate claims against the Road Accident Fund.</p> <p><i>Services providers are contracted to Kaelo Risk and not to the Underwriter Centriq Insurance.</i></p>

*Commission of 20% of premium is payable to the intermediary, as and when premiums are paid, subject to regulations.



Treatments not paid for by Gap Cover

- ⌚ Certain treatments such as specialised dentistry and treatment for cosmetic surgery.
- ⌚ Claims older than 6 months.
- ⌚ Any claim that is excluded or rejected by the Insured's medical scheme.
- ⌚ Day-to-day claims, unless otherwise specified.
- ⌚ Claims not approved by, excluded by or paid as an ex-gratia by the medical scheme.

The full list of exclusions are available in the Sanlam Gap policy document.

Waiting periods

The following waiting periods may apply:

- ⌚ A general waiting period of **3 months** on all benefits.
- ⌚ A 12 month condition specific for pre-existing conditions for which you received advice, treatment or diagnosis during the 12 months prior to the cover commencing.

Contact information



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Sanlam Gap Cover is underwritten by Centriq Insurance Company Limited (FSP: 3417)
Administered by Kaelo Risk (Pty) Ltd. (FSP: 36931)

General disclaimer

This brochure is intended for marketing purposes and contains only a summary of Sanlam Gap Cover benefits. On joining Sanlam Gap Cover, eligible members will receive detailed information in their policy document. This is not a medical scheme and the cover is not the same as that of a medical scheme. This policy is not substitute for a medical scheme membership.