PUMA **GAPCOVERSERIES** 2023

UNDERWRITTEN BY **GUARDRISK INSURANCE COMPANY LIMITED (GICL)** A LICENSED NON-LIFE INSURER, REG. NO. 1992/001639/06, FSP NO.75







Guardrisk Insurance Company Limited, a licensed non-life Insurer and an authorised financial services provider (No.75)

Ambledown is an Authorised Financial Services Provider, No. 10287

THIS IS NOT A MEDICAL SCHEME AND THE COVER IS NOT THE SAME AS THAT OF A MEDICAL SCHEME. THIS POLICY IS NOT A SUBSTITUTE FOR MEDICAL SCHEME MEMBERSHIP. THE MASTER POLICY ISSUED IS THE SOURCE OF ALL BENEFITS, RIGHTS, AND OBLIGATIONS AND EXCLUSIONS. TO DETERMINE YOUR INDIVIDUAL NEEDS, WE SUGGEST THAT YOU CONTACT YOUR BROKER AND REQUEST ADVICE FROM HIM / HER.



Where your Medical Scheme ends, Gap Cover begins.

Medical Schemes have revolutionised health. They give ordinary people access to advanced life-saving medical procedures that are too costly for most people. Indeed, medical technology and procedures are advancing ever faster, becoming more complicated and more expensive. Medical Schemes and members simply can't keep up.

This expanding gap between medical scheme coverage and the actual fees charged by private healthcare providers has created a financial shortfall with devastating consequences. You, the Medical Scheme member, are liable to pay the outstanding amounts.

That is where Ambledown Gap Cover steps in.

When the Specialists you need charge more than the rates your Medical Scheme pays, our products cover the shortfall – so you don't have to.

Simply put, Ambledown Gap Cover covers the gap.

2023 Product Range The health of your family is in caring hands

Ambledown cares about more than your medical bills (although, we REALLY care about that). We love what we do. We get excited about every claim we pay because it represents a family that we have helped through a tough situation.

The Ambledown team carefully investigates and identifies shortfalls in Medical Scheme cover to help you mitigate the financial risks that come with life's health risks. That is why we have built the Ambledown Gap Cover Series.

This Insurance Product is designed to protect you and your immediate family from the shortfall (Gap) resulting from any medical practitioner charging above the Medical Aid Tariff for in-hospital surgical procedures and for certain out of hospital procedures.

Choose an Ambledown product that has the perfect combination of benefits for your individual needs.



Benefits Overview



Gap Cover

Gap Cover benefit covers charges above the medical scheme tariff for associated services in-hospital, listed out-patient procedures, or as chemotherapy or radiotherapy for the treatment of cancer and kidney dialysis. Gap Cover 100 ensures insured persons have up to up 600% cover.



Major Medical Co-payment/Deductible Cover

Co-payment benefit covers co-payments or deductibles levied by the medical scheme for in-hospital admissions, listed out-patient procedures and CT, MRI and PET scans. Includes a once-off payment per family, per annum for the penalty imposed by a medical scheme for the use of a non-network hospital. Penalty Co-payment is limited to R13, 000



Casualty Ward Benefit

Casualty ward benefit covers the cost of a medical or a surgical procedure following an emergency incurred in a hospital casualty unit of a hospital where such costs were not met by the medical scheme.



LPE Advanced

Provides a benefit equal to the cost of in-hospitalisation and associated medical expenses (as defined) relating to one of the listed procedures less the cover provided by the medical scheme option: plus

Gap Cover 100 benefit; plus Casualty ward benefit

All Gap Cover Benefits highlighted in green are limited to R185,837 per insured person per annum or any higher amount which may be published by the Regulator during the year.



ER24 Virtual Support

24/7 medical advice and support, ER24 Emergency button, Mental Health self-assessment screening and Lifestyle self-assessment screening.



Boston Online Home Education

Supercharge your family's Social Emotional Learning (SEL) and High School Learning with Boston Online Home Eduction:

- Social Emotional Learning (SEL)
- Online Caps support for Grades 10-12
- Access to a discount on Cambridge International Curriculum
- Career Guidance.

Benefit Details



Boost your cover up to 6 times the Medical Scheme tariff with Gap Cover

Gap Cover

Gap Cover provides for charges levied by the Medical Practitioners above the Medical Scheme Tariff for associated services in-hospital and/or the necessity for chemotherapy or radiotherapy for the treatment of Cancer on an out-patient basis, and/or the necessity for kidney dialysis on an out-patient basis (as well as other defined out-patient procedures).

Gap Cover 100 is limited to **6 times** the Medical Scheme tariff less the higher of the Medical Scheme Tariff or the Medical Scheme Option Reimbursement Rate.



Just a reminder

Gap Cover 100 does not provide for charges above the tariff for ward fees, theatre fees, medicines and materials (eg. prosthesis). Cover is for the services provided by Specialists, General Practitioners and Medical Professionals such as Physiotherapists during the period of hospitalisation.



Get reimbursed for the upfront costs when you are admitted to hospital or go for a scan

Major Medical Co-payment/Deductible Cover

Major Medical Co-payment/Deductible Cover provides for charges in the form of a co-payment or deductible applied for in-hospital admissions and charges in the form of a co-payment or deductible for major medical out-patient treatment limited to specialised diagnostic radiology, namely MRI, CT and PET Scans.

A Co-payment is a procedure specific upfront payment charged by the Medical Scheme payable to the Medical Services Provider prior to undergoing the procedure. The co-payment or deductible amounts applied are as per the rules of the patient's registered Medical Scheme.



Penalty Co-Payment

The benefit includes a once-off payment per family, per annum for the penalty imposed by a Medical Scheme for the use of a non-network hospital. The benefit is limited to R13,000.



Ensure that a health emergency never becomes a financial emergency

Casualty Ward Benefit

Casualty Ward Benefit covers you for treatment received in a casualty unit of a hospital provided that such treatment is not for routine physical treatment or any other medical examination or treatment other than emergency medical treatment.

You are covered when immediate treatment is required and your Medical Scheme does not provide you with cover and you become liable to pay the cost of the casualty event. This benefit will cover the facility fee, consultations, medications, radiology and pathology associated with admission to a registered hospital's casualty facility.



Limitation

Treatment in a casualty unit of a hospital is subject to a specific limitation of R10,000 per insured person per annum.

All Gap Cover Benefits above are limited to R185,837 per insured person per annum or any higher amount which may be published by the Regulator during the year.



Supplement your Gap Cover to include the medical expenses on 10 Listed Procedures which may be heavily restricted by some medical schemes

LPE Advanced

The Listed Procedure Enhancer is a benefit that combines Gap Cover 100, the Casualty Ward Benefit and a selection of listed procedures which provides a benefit equal to the cost of in-hospitalisation and associated medical expenses relating to one of the procedures less the cover provided by the Medical Scheme option.

The 10 Defined Listed Procedures

The Listed Procedures mentioned below are limited to the actual costs incurred, calculated at the Medical Scheme Rate and subject to a specific limitation of R100,000 in aggregate per insured person per annum.

1.	In-hospital management of Dentistry, limited to impacted teeth for minors under 18 years or reconstructive plastic surgery due to an accident that occurs during the period of cover.	6. Cochlear implants, auditory brain implants and internal nerve stimulators – this includes procedures, devices and processors.
2.	Functional nasal surgery.	7. Bunionectomy.
3.	Surgery for oesophageal reflux and hiatus hernia.	8. Arthroscopy.
4.	Back and neck treatment or surgery.	9. Removal of varicose veins.
5.	Joint replacements, including but not limited to hips, knees, shoulders and elbows.	10. Skin disorders including benign growths and lipomas.



Overall benefit limitation

All LPE Advanced benefits above are subject to an overall benefit limitation of R185,837 per insured person per annum or any higher amount which may be published by the Regulator during the year.



Ambledown members have access to ER24 Virtual Support.





Ambledown has partnered with ER24 to bring you the following services:



24/7 medical advice and support



Mental Health self-assessment screening



ER24 Emergency button



Lifestyle self-assessment screening





All Benefits in this brochure are protected by ER24 Virtual Support.



Supercharge your family's Social Emotional Learning (SEL) and High School Learning with Boston Online Home Education.





Social & Emotional Learning (SEL)



Online CAPS support for Grades 10-12



Access to a discount on Cambridge International Curriculum



Career Guidance

Ambledown members have free access to the Boston Online Home Education CAPS platform. Ambledown has partnered with Boston Online Home Education to bring you and your family an extensive range of internationally recognised online learning options.

How to register

- Register your dependants for this benefit by visiting www.ambledown.co.za
- Click through to generate your unique coupon code to access the Boston Online Home Education CAPS platform Now you and your children have the additional support needed to learn and develop while at home. Let's start learning.

Boston Online Home Education is included with all products in this brochure.



PUMA		PRODUCTS 			
GAP COVER	Gap Plu:	s	Gap LPE Advanced		
BENEFITS	LIMITATIONS Per insured person per annum				
Gap Cover 100		0		(C
Co-Payment Cover		0			
One penalty Co-Payment (R13,000 Limitation)	R185,837	0			
Casualty Ward Benefit (R10,000 Limitation)	or any higher amount published by the Regulator	0		(C
Medical Expenses related to 10 defined procedures (R100,000 Limitation)				(O
ER 24 Virtual Support	24/7 medical advice and support	\circ			\circ
Boston Online Home Education	Social, Emotional Learning (SEL) and High School Learning support	0		(O
PREMIUMS	Per Family Per Month (incl.vat) 18 To 65 Years Old	R160,00		R11	6,00

Specific limitations

- Treatment in a casualty unit of a Hospital shall be limited to R10,000 in aggregate per insured person per annum.
- 2. The maximum benefit payable for cost incurred for the penalty co-payment imposed by the medical scheme is payable once per annum and limited to R10,000 per family per annum.

Overall limitations

1. The Policy Benefits are subject to an overall benefit limitation of R185,837 or any higher amount published by the Regulator in aggregate per Insured Person per annum.



Underwriting matters which are of importance

- Please note that this product will assist with the shortfalls for in-hospital expenses and does not provide cover for day-to-day expenses once your Medical Savings Account has been depleted, nor will it cover your expense if you are in the self-payment gap.
- The minimum entry age for the Principal insured person is 18 and the maximum entry age is 65. Applicants 66 and older have the option of selecting products for seniors.
- Extended Family Dependants: (parents, parents in-law, adult children etc.)
 A family is defined as the principal insured and immediate family which
 includes the spouse and children. Extended family dependants are not
 considered as part of the family.
- Eligible child is a person who has not reached the age of 21 and this age may be extended to 25 (under 26) in respect of a child who is unmarried and a dependant on the Principal Insured Persons' Medical Aid Scheme.
 - Biological, adopted, fostered and step children are eligible dependants if they are under 21 years of age, or they are under 26 years of age and who is unmarried and a dependant on the Principal Insured Persons' Medical Aid Scheme.
 - There is no age limit for mentally or physically handicapped children who
 are wholly dependent on the Principal Insured and such child is covered
 by a registered Medical Aid Scheme.
 - There is no limit to the amount of children covered by the policy.
- Continuation: Any individual may apply to continue cover if that individual
 was a member of group policy and terminates his employment. Ambledown
 has the right to alter the premium rates to individual rates or adjust the
 premium for the additional costs of the debit order and other
 administrative tasks. Terms and conditions shall apply according to the
 new contract issued.
- No benefit shall be payable for the severe illness benefit if the Insured Person was diagnosed with Cancer (as defined) prior to the inception of this Policy.
- This is not a Medical Scheme and the cover is not the same as that of a Medical Scheme. This policy is not a substitute for Medical Scheme membership.



Alexander Forbes Health (Proprietary)

Limited

FSP number: 33471

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Waiting periods

- Ambledown will apply the 3 month general waiting period condition to all applications for new membership.
- The only time we would not apply the 3 month general waiting period is:
 - Claims qualifying as an accident in terms of the policy definition,
 - If the client changes gap cover policies with similar benefits offered by different product providers with the same insurer (GICL).
- A 12 month pre-existing clause applies. The clause excludes claims for any
 treatment received for a condition for which treatment or advice has been
 received in the 12 months prior to the inception of the policy. The intention
 is to exclude any benefit where treatment or advice was received 12 months
 prior to inception. Once membership is greater than 12 months, then
 benefits are payable regardless of the date in which the illness manifested
 itself or the injury occurred.
- Benefit upgrades: A 3 month general waiting period and 12 month pre-existing clause will apply to the additional benefits obtained when a member upgrades cover. The existing benefits enjoyed prior to the upgrade will not be subjected to the waiting periods mentioned.



Claiming procedures

Claims should be submitted no later than one hundred and eighty (180) days / six (6) months from the first day of treatment. Claim forms are obtainable from www.ambledown.co.za and the completed form and supporting documentation should be returned to:

Email: claims@ambledown.co.za

Fax: 011 463 1665

Postal: Ambledown Financial Services (Pty) Ltd PO Box 1862, Cramerview, 2060

Or, you can download the g-App to submit and track your claim, quick and easy. The claim will be assessed and a decision made within ten (10) working days from receipt of all the correct documents. If there are any unforeseen delays, these will be communicated and an indication given of the expected date of a final decision.

We may use your email address and telephone number to inform you on the progress of the claim.



Enquiries should be addressed to Ambledown:

Tel: 086 126 2533 Fax: 011 463 1600

Individual debit order business: admin@ambledown.co.za

Group business: premium@ambledown.co.za



