



2019 Focus page

## Focus on Momentum GapCover

(Underwritten by Guardrisk Insurance Company Limited, an authorised FSP)

Why worry about potential shortfalls for in-hospital procedures and other healthcare related expenses not covered by your option when you can get Momentum GapCover? Momentum GapCover offers you supplementary cover to assist with shortfalls in the event of hospitalisation involving surgery or medical treatment, as well as for certain procedures performed out-of-hospital. Momentum GapCover is not a medical scheme and cover is not the same as that of a medical scheme. This product is not a substitute for medical scheme membership.

<b>Shortfall benefits (these benefits aggregate to a maximum benefit of R157 000 per insured person per year)</b>	
Benefit for shortfalls in medical practitioner costs	Covers the shortfall between what the medical practitioner charged and the medical scheme paid, up to 2 times the amount paid by the medical scheme.  Obstetrics and gynaecology, cardiothoracic and neurology are covered up to 2½ times the amount paid by the medical scheme  Momentum GapCover also covers you for certain medical procedures performed out of hospital, in day clinics or other registered facilities
Co-payments	Covers co-payments applied by the medical scheme, subject to a R750 excess per co-payment. This benefit does not cover co-payments payable for voluntary use of non-Designated Service Providers
Co-payments on oncology treatment	Covers the 20% co-payment applied to oncology treatment after the medical scheme limit has been reached
Casualty benefit	Covers the casualty cost fees associated with admissions to the emergency room, at a registered hospital casualty facility, due to a medical emergency and an accident.  Limited to 3 casualty visits and up to R10 000 per policy per calendar year.  The medical scheme must have paid the first portion of the cost
Internal prosthesis shortfall benefit	Covers shortfalls on internal prosthesis costs, up to a maximum amount of R30 000 per policy per year
<b>Lump sum benefits (these benefits do not aggregate to the R157 000 cap)</b>	
Lump sum cancer benefit	If you are diagnosed for the first time whilst covered on this policy with minimum stage 2, local and malignant cancer, we will pay you R5 000.  If, however, you are diagnosed with minimum stage 2, regional and malignant cancer, we will pay you R15 000.  If, after receiving the R15 000 benefit, your medical scheme pays more than R200 000 for the cost of your oncology treatment within 12 months of your diagnosis, we will pay you a further R10 000.  This benefit is payable once in a lifetime per person covered on the policy
Accidental death and disability benefit	Benefit of R50 000 payable for death or permanent disability due to an accident. Subject to one claim per insured per lifetime
Benefit for trauma counselling	If you are a victim of, or witness to, an act of violence (such as murder, assault, robbery, rape, kidnapping or hijacking) or a traumatic accident, we will refund any trauma counselling fees paid by you up to R750 per session, limited to R25 000 per policy per year

Please note that you may only apply for Momentum GapCover if you are a member of Momentum Health.

\*GapCover is a voluntary complementary product available from Momentum. You can choose to make use of additional products available from Momentum Group a division of MMI Group Limited (Momentum), to seamlessly enhance your medical aid. These complementary products are not medical scheme benefits. Momentum is not a medical scheme and is a separate entity to Momentum Health. You can be a member of Momentum Health without taking any of the complementary products that Momentum offers.



## **Premiums**

Under 42	R278
Over 42	R392
Over 65	R505

Rates are per policy per month.

No dependants may be added to Momentum GapCover if the principal insured is over 65 at the time of applying for the cover.

Premiums for groups of more than 20 members on Momentum Health will be calculated based on the demographics of the group. We take into account the average age of the group, the number of members and whether membership is voluntary or compulsory.

## **Waiting periods**

### **Individuals or groups under 20 members**

- 3-month general waiting period – applies to all claims
- 9-month waiting period – applies to any pre-existing physical defect, injury, disease, illness or medical condition for which medical advice, diagnosis, care or treatment was recommended or received within the past 12 months, including but not limited to the following conditions:
  - Bone or joint-related
  - Heart-related
  - Gynaecology-related
  - Spinal or brain-related
  - Abdominal-related
  - Conditions of the eye
  - Conditions of the ear, nose or throat
  - Conditions of the mouth, teeth or gums
  - Metabolic-related (Diabetes)
  - Thyroid-related
  - Liver-related
  - Kidney-related
  - Conditions of the blood
  - Conditions of the prostate
- 12-month waiting period applies to:
  - Cancer: where an insured has received or was recommended for medical advice, diagnosis, care or treatment for cancer of any type in the past 12 months
  - Birth or pregnancy: where an insured has given birth within the past 12 months or is currently pregnant

### **Voluntary groups over 20 members**

- 3-month general waiting period: not applicable
- 9-month waiting period: applies to pre-existing conditions
- 12-month waiting period: applies to cancer of any type, pregnancy and birth

### **Compulsory groups over 20 members – All waiting periods will be waived**

- 3-month general waiting period: not applicable
- 9-month waiting period – pre-existing conditions: not applicable
- 12-month waiting period: not applicable

## How to claim

Momentum GapCover shortfall claims are processed seamlessly through our system. What this means is that our system will automatically pick up any potential claims without you having to complete a claim form or submit documentation. You will be notified that that we have picked up a potential gap claim and then notified shortly after of the outcome of the claim.

## Our seamless claims process will work with the following claims:

- Shortfall for medical practitioners for in-hospital procedures
- Co-payments
- Oncology co-payments
- Internal prosthesis
- Casualty benefit

If you are claiming for one of the following lump sum benefits, you will need to submit a claim form as we need additional information:

- Lump sum pay out for cancer diagnosis
- Accidental death/disability
- Trauma counselling

## Below is a list of all the out-of-hospital/day clinic procedures we will cover:

- Urology - Circumcision (due to medical necessity), cystoscopy, orchidopexy, prostate biopsy, vasectomy
- Ear, nose, throat - Adenoidectomy, direct laryngoscopy, grommets, myringotomy, sinus surgery and tonsillectomy
- Orthopaedic - Arthroscopy, bunionectomy, carpal tunnel release, ganglion surgery
- Radiology - CAT, MRI and PET scans, nuclear radiology, varicose vein removal, x-rays
- Gastro-intestinal - Closure of colostomy, colonoscopy, endoscopy, gastroscopy, laparoscopy, oesophagoscopy, haemorrhoidectomy
- Gynaecology - Cervical laser ablation, dilatation and curettage, hysteroscopy, tubal ligation
- Cardiovascular - Coronary angioplasty and angiogram
- Ophthalmology - Cataract removal, pterygium removal, trabeculectomy
- General surgery - Hernia repairs and certain biopsies
- Obstetrics - Childbirth in a non-hospital setting
- Oncology - Chemotherapy and radiotherapy
- Renal - Kidney dialysis

## What we do not cover

### Medical Expense Shortfall Benefit

- Shortfalls where your medical scheme has not paid the first portion of costs
- Hospital and day clinic fees including theatre charges, ward charges or any other hospital or day clinic costs
- Pre-admission or out-of-hospital consultation costs
- Materials or medication used during a procedure
- Dental implants
- Appliances (wheelchairs, crutches, braces, etc.)
- Out-of-hospital dental procedures
- Home and private nursing
- Procedures for cosmetic purposes
- Exploratory procedures such as blood tests, pap smears, ultrasounds etc.
- Procedures that are paid for by your medical scheme on an exception or ex-gratia basis
- Procedures performed specifically for the treatment of obesity
- Any costs levied as a direct result of the patient's Body Mass Index (BMI) or bodily weight
- Hospice or step-down facilities
- Medical examinations performed annually or routinely such as pap smears, annual check-ups, etc.
- Procedures performed with the use of robotic machinery
- Anxiety disorders, mood disorders, psychotic disorders, dementias and eating disorders

- Transportation costs (including resuscitation) in an emergency vehicle or aircraft and emergency medical service costs
- Auxiliary or para medical services (speech therapists, audiologists, physiotherapists, etc.)

#### **Co-payment benefit**

- Co-payments applied for the use of a non-Designated Service Provider (non DSP)
- Co-payments applied for not adhering to the medical scheme's protocols (e.g. not being referred to a specialist by a GP, not obtaining a pre-authorisation for a procedure, etc.)
- Co-payments applied for use of a private ward or any other special request not covered by your medical scheme
- Co-payments applied to a condition for which you are in a waiting period

#### **Oncology co-payment benefit**

- Co-payments applied for undergoing treatment with a non-Designated Service Provider

#### **Internal prosthesis shortfall benefit**

- Shortfalls where your medical scheme has not paid the first portion of costs
- Devices that are placed inside a body to assist with the functioning of a body part (pacemakers, stents, etc.)
- External prostheses or dental implants

#### **Casualty benefit**

- Elective procedures undertaken at a casualty ward
- Casualty ward visits due to illness
- Casualty ward claims in which the first cost is not paid by your medical scheme
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#### **Benefit for first time cancer diagnosis**

- Any diagnosis which does not meet the minimum criteria for eligibility of the benefit
- Any diagnosis which is not a first time diagnosis
- All skin cancers and cancers diagnosed and treated by primary biopsy

#### **Benefit for accidental death or accidental permanent and total disablement**

- Death or permanent and total disablement which is not directly due to an accident as defined in the policy
- Disability which is not total and permanent as defined in the policy

#### **Benefit for trauma counselling**

- Any counselling that is not related to an act of violence or a traumatic accident
- Any counselling not undertaken by a counsellor as defined in the policy

#### **General exclusions**

We do not cover any claims that arise from the below events:

- Participation in war, invasion, terrorist activity, rebellion, active military duty, police duty, police reservist duty, civil commotion, labour disturbances, riot, strike or the activities of locked out workers
- Nuclear weapons, nuclear material, ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the burning of nuclear fuel, including any self-sustaining process of nuclear fission (the splitting of an atomic nucleus into small parts)
- Taking of any legal drug unless it has been prescribed by a registered medical practitioner (other than you) and you are following the instructions of the medical practitioner in your taking of the drug
- Taking of any illegal drug
- Illegal behaviour or as a result of breaking any law of the Republic of South Africa
- Suicide, attempted suicide, intentional self-injury or any form of exposure to danger
- Aviation except if you are on a commercial flight as a fare-paying passenger
- Participation in sports on a professional basis. Professional means that you are paid to participate in the sport
- Participation in hazardous (dangerous) sports, including hang-gliding, kite-surfing, mountaineering, paragliding, scuba diving and skiing
- Participation in any form of race or speed test, other than on foot or involving any non-mechanically propelled vehicle, vessel, craft or aircraft.

**Terms and conditions of cover**

All of the benefits offered are subject to the terms and conditions of the policy. A comprehensive description of the terms and conditions, as well as the exclusions, is available upon request or in the policy document.

Momentum GapCover is underwritten by Guardrisk Insurance Company Limited, an Authorised Financial Services Provider in terms – FSP No. 75.

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