SIRAGO
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GOV GAP 2025
INFORMATION GUIDE

0 - 64
Individual **R437**
Family **R546**

Age Limit: 64
Overall Annual Limit (OAL) Per Beneficiary: R213 000

*Additional dependants over and above 2 (two) adults and 3 (three) child dependants or 1 (one)policyholder and 4 (four) dependants will incur an additional levy for dependant 6: 64 and under: R50.00. Thereafter, from dependant 7 onwards: 64 and under -R25.00

Information is subject to change. Premiums are reviewed and may be adjusted annually.

IN-HOSPITAL BENEFITS

The following benefit categories form part of the aggregated OAL of **R213 000**.

GAP COVER
This covers the difference (the shortfall or the gap) between what the medical scheme pays and the doctors and specialists charge in hospital. We settle claims up to **500%** above scheme rate to a maximum of **600%** or at the stated benefit value. **Subject to the OAL.**

CO-PAYMENTS AND CO-PAYMENTS CHARGED AS A PERCENTAGE
Co-payment cover is for the co-payments (including co-payments expressed as a percentage), excesses, or deductibles **as stipulated, or imposed by a medical scheme, for specified procedures, cover for hospital admission fees, or surgical procedures.** The co-payment must be part of your medical scheme rules which will be highlighted on the authorisation for your procedure. **Subject to the OAL.**

DAY HOSPITAL/CLINIC AND/OR IN-ROOM SURGICAL PROCEDURES COVER
This benefit will cover the shortfall for any day hospital, clinic, or in-room procedures including acute hospitals if a policyholder elects to have the treatment that would normally be performed in hospital, done in a day hospital, clinic, or in a doctor's room by a registered medical professional. **Subject to the OAL.**

PRESCRIBED MINIMUM BENEFIT (PMB) COVER
Prescribed Minimum Benefits (PMB) give all scheme members access to certain minimum health benefits, regardless of your medical scheme option. Medical schemes are required to pay the full cost of diagnosis and treatment of a defined list of PMB medical conditions.

PMB Cover on this policy is only for the shortfalls resulting from the voluntary use of a non-designated service provider for a planned PMB procedure. This is not applicable in the event of an emergency. In the event of an emergency, PMB protocols should be adhered to. **Subject to the OAL.**

HOSPITAL ACCOUNT SHORTFALLS
This benefit will cover any charges, like consumables on the hospital account that the medical scheme has not paid. We also cover take-home medication that the medical scheme has not paid from risk.

We pay up to **R7 000** per policy, and **R1 500** per claim, **3** claims per beneficiary. **Subject to the OAL.**

SUB-LIMIT ENHANCER
This benefit has a sub-limit of **R45 000** per policy, up to **R19 000** per claim. Medical scheme benefits available on the medical scheme option for MRI & CT scans, intraocular lenses, internal prostheses, and Transcatheter Aortic Valve Implantation (TAVI) procedure valves only. When you exceed your medical scheme benefit limit during the time of the event, resulting in a shortfall or "gap", we will pay the shortfall depending on the Gap option you are on.
If you claim and your medical scheme limit has been reached at the time of the event, meaning it was used up before the claim event, and your medical scheme does not contribute anything towards this benefit, we will also not pay.
Subject to the OAL.

This is not a medical scheme. The cover is not the same as that of a medical scheme and is not intended to be a substitute for a medical scheme membership.

RESILIENCE IS RARE
#FUTUREBUILT

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Sirago Underwriting Managers (Pty) Ltd is an Authorised Financial Services Provider (FSP: 4710), underwritten by GENRIC Insurance Company Limited (FSP: 43638).
GENRIC is an authorised Financial Services Provider and licensed non-life insurer and member of the Old Mutual Group.

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SIRAGO

OUT-OF-HOSPITAL BENEFITS

SPECIALIST CONSULTATION FEE
This benefit covers the shortfall on the consultation fee only at a specialist outside of hospital (excluding Psychiatrist and Psychologist) up to **R5 500** per policy, and **R1 100** per claim. This benefit is only applicable to consultation codes 0190, 0191, and 0192. The medical scheme needs to make at least partial payment towards the consultation code mentioned above. **Subject to the OAL.**

CASUALTY BENEFIT (REF 1, 2)
There is a sub-limit of **R8 000** for all Casualty Benefits. This benefit covers the initial emergency event at any registered casualty facility when you require immediate medical treatment due to an accident and trauma, or illness. We will cover a general practitioner (GP)'s consultation rooms if no other emergency facility is available within a **30** km radius. Ambulance costs are not covered by this benefit.

1. ACCIDENT & TRAUMA BENEFIT
All costs related to the initial accident/trauma event will be covered, whether you are liable to pay the costs out of your own pocket or if your medical scheme pays from your savings - stated benefit.

2. ILLNESS BENEFIT
All costs related to the initial emergency illness event will be covered and paid up to **R1 500** per claim of the sub-limit, if you are liable to pay the costs out of your own pocket, or if paid from your medical scheme savings. This is applicable to any beneficiary **13** years and older who needs emergency treatment outside of normal consultation hours or treatment that can only be done in an emergency facility.

Out of normal consultation hours means 18h00 to 07h00 on Monday to Friday, and all of Saturday, Sunday, and South African public holidays. Subject to the OAL.

VALUE-ADDED BENEFITS

These benefits **do not** form part of the aggregated OAL of **R213 000.**

GAP COVER PREMIUM WAIVER
In the event of **accidental** death only or total permanent disability of the Sirago policyholder, we will keep the premiums for your policy as a credit for **4 months.** This benefit may be claimed by the surviving spouse or adult dependent on the Sirago policy.

MEDICAL SCHEME PREMIUM WAIVER
Sirago will pay the rand amount of the medical scheme premium, not higher than **R3 800** per month for a **4**-month period. This will be paid to the beneficiary for the upkeep of the medical scheme contributions in event of **accidental** death or total permanent disability of the Sirago policyholder and where all beneficiaries are linked to a single medical scheme. This benefit is only payable for the medical scheme that the policyholder was on if there is dual medical scheme membership.

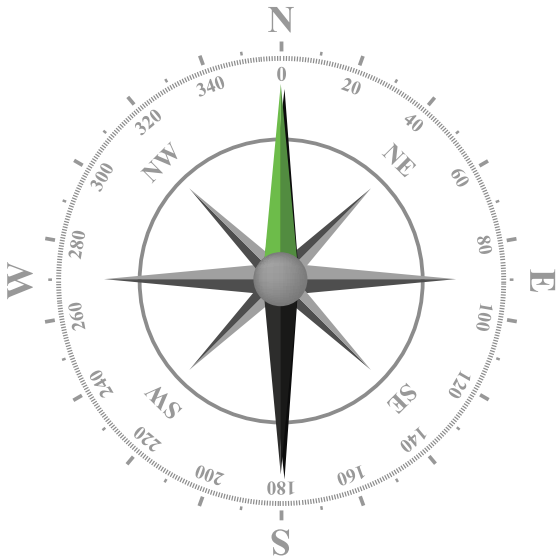
ACCIDENTAL DEATH
This benefit will pay out for accidental death at **R6 000** for the adult dependants, and **R3 000** for child dependants registered on the policy.

INITIAL CANCER DIAGNOSIS (FIRST DIAGNOSIS)
This benefit will pay out a lump sum of **R11 000** per beneficiary per lifetime in the event where you are diagnosed with malignant cancer from **stage 2** onwards for the first time ever. Any cancer prior to inception of the policy or pre-existing cancer is excluded. Skin cancer is specifically excluded from cover on this policy, except malignant melanomas.

CANCER BENEFITS

Cancer benefits apply if cancer treatments do not form part of the legislative PMB framework.

CANCER BOOST BENEFIT
The Cancer Boost Benefit is applicable to policyholders whose medical scheme option has a **defined rand limit** for cancer treatment and the rand limit on the medical scheme has been reached. We will cover the costs of ongoing treatment in line with the medical scheme's registered treatment plan once the rand limit has been reached. **Subject to the OAL.**



SIRA'GO BABY
Sirago will pay out a lump sum of **R2 000** to you, per newborn baby, when the baby is registered on your gap policy within **90** days of birth.

SIRAGO MEDCARE - FREE MEDICAL SCHEME ALTERNATIVE DISPUTE RESOLUTION SERVICE (ADR)
This benefit gives you access to MedCare's free ADR service for all disputed PMB claims exceeding **R9 000**. You can also access the MedCare service for all claims **less than R9 000**, including all potential medical scheme disputes, at a **60%, 20%, and/or 15%** discounted rate depending on the required service. Your broker can also access this service on your behalf and will subsequently have access to the MedCare website: *siragomedcare.co.za*

BROKER DETAILS

RESILIENCE IS RARE
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All benefit categories are per policy. Refer to Policy Wording for full details and explanations. This documents is for basic information purposes only. Premiums are reviewed and may be adjusted annually.

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