

# CURA

## GAP COVER

Gap Cover is an Insurance Product that provides cover for you and your immediate family for the shortfall (Gap) resulting from any Medical Practitioner charging above the Medical Scheme Tariff for in-hospital surgical procedures and certain out of hospital procedures.

The insured will receive a benefit equivalent to the costs incurred because of the Gap for any hospital admission as an in-patient. The Gap is defined as services rendered by a Medical Practitioner who charges above the Medical Scheme tariff.

**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.**

### HOW TO CLAIM

Policyholders need to submit certified copies of the following documentation to [claims@curaadmin.co.za](mailto:claims@curaadmin.co.za) to initiate the claiming process:

- Give written notice of the claim within 6 months from the date of medical treatment for such incident;
- Supply in writing any such proof or other information as Cura may reasonably request, which would include:
  - A duly completed Cura claim form;
  - Fully specified hospital and relevant doctor's accounts;

### GENERAL EXCLUSIONS

Ward fees, theatre fees and medicines are excluded on this policy.

The Product Provider shall not be liable for hospitalisation, bodily injury, sickness, or disease directly or indirectly caused by, related to, or in consequence of:

- Exposure to discharged nuclear weaponry fallout or nuclear material or by ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exception combustion shall include any self-sustaining process of nuclear fission;
- Investigations, treatment, or surgery for obesity, directly or indirectly attributed to, or related to, or in consequence of cosmetic surgery, other than as a result of an insured authorised event;
- Cosmetic surgery shall include surgery for breast reduction or reconstruction unless necessary subsequent to having undergone a mastectomy due to cancer;
- A routine physical or any procedure of a purely diagnostic nature, or any other examination where there is no indication of impaired health nor laboratory diagnostics or X-rays, except in the course of a previously diagnosed condition;
- Suicide, attempted suicide or intentional self-injury;
- Drug addiction or the consumption of any drug or narcotic unless prescribed by and taken in accordance with the instructions of a registered medical practitioner (other than the insured person) or any illness caused by alcohol abuse;
- An event directly attributable to the insured individual having a blood alcohol concentration exceeding the legal permitted level;

As a member of a Private Medical Scheme, you would expect that an event in-hospital would be covered in full.

This is not the case.

- Members medical scheme remittance advice;
- Proof of banking details for reimbursement purposes;
- Any benefit payable in respect of hospital confinement shall become due at the end of the period of such confinement only;
- Any claims in terms of this policy will lapse after 12 calendar months from the date of occurrence of the insured incident provided it is not subject to the outcome of a pending court case;
- All benefits payable shall be paid to the principal insured member and not the service provider;
- No benefit payable shall accrue interest.
- Participation in:
  - Active military duty, police duty, police reservist duty, civil commotion, labour disturbances, riot, strike or the activities of locked out workers;
  - Aviation other than as a passenger (excl. commercial pilots);
  - Any form of race or speed test (other than on foot or involving any non-mechanically propelled vehicle, vessel, craft or aircraft);
- Any procedure not covered or declined by the medical scheme;
- No benefits shall be payable for an insured event for which the insured person received treatment or advice 12 months prior to becoming an insured person. This exclusion applies to the first 12 months of cover only;
- No benefits shall be payable for pregnancy or childbirth for a period of 9 months from inception of the policy;
- Investigations, treatment or surgery for artificial insemination or hormone treatment for infertility;
- Depression, insanity or mental stress or psychotic/psychoneurotic disorders;
- No benefits shall be payable in the event of fraudulent claim submission;

**Cura benefits do not apply to any territory outside of the Republic of South Africa, Botswana, Lesotho, Swaziland and Namibia.**



Administrators (Pty) Ltd  
"an authorised financial services provider"  
Reg No: 1997/017797/07 FSP No: 26848



Insurance made personal  
Constantia Insurance Company Limited, an authorised FSP 31111

# 2022

## GAP COVER

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010 021 0260

E-mail:

[mail@curaadmin.co.za](mailto:mail@curaadmin.co.za)

Website:

[www.curaadmin.co.za](http://www.curaadmin.co.za)

We don't just sell solutions;  
we create them.

Underwritten by: Constantia Insurance Company Ltd FSP 31111

Funeral is underwritten by: Constantia Life & Health Assurance Company Ltd FSP 49986

Product provider of travel insurance: Travel Insurance Consultants (TIC) - TIC is a division of Santam Ltd.  
Insurer of travel insurance: Santam Ltd an authorised FSP 3416

# 2022 CURA GAP COVER & BENEFIT LIMITS SUMMARY

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	CURA GAP ULTIMATE +	CURA GAP ULTIMATE	CURA GAP ADVANCED +	CURA GAP ADVANCED	CURA GAP STANDARD	CURA GAP BASIC	CURA GAP STUDENT
<b>Overall Annual Limit of R177 800 per Insured.</b>	✓	✓	✓	✓	✓	✓	✓
<b>Cover for PMBs:</b>	✓	✓	✓	✓	✓	✓	✓
<b>Gap Cover:</b>	Up to 600%	Up to 600%	Up to 500%	Up to 500%	Up to 500%	Up to 500% (In-hospital procedures only)	Up to 400% (In-hospital procedures only)
<b>In-hospital Co-payment:</b> (MRI/CT scans out-of-hospital included)	OAL (R177 800)	OAL (R177 800)	OAL (R177 800)	OAL (R177 800)	OAL (R177 800)	OAL (R177 800)	OAL (R177 800)
<b>Co-payment:</b> Non-DSP Hospital	R12 500 / Insured	R12 500 / Insured	R8 000 / Family	R7 500 / Family	No Benefit	No Benefit	No Benefit
<b>Sub-limitations:</b> In and out of hospital as per master policy	R70 000 / Insured	R70 000 / Insured	R25 000 / Family	R15 000 / Family	No Benefit	No Benefit	No Benefit
<b>Internal Prosthesis:</b>	Included in Sub-Limit	Included in Sub-Limit	Included in Sub-Limit	Included in Sub-Limit	No Benefit	No Benefit	No Benefit
<b>Sub-limitations on Intra-Ocular Lenses:</b>	R9 000 / lens per year	R9 000 / lens per year	R9 000 / lens per year	R9 000 / lens per year	No Benefit	No Benefit	No Benefit
<b>External Prosthesis:</b>	R5 000 / Family	No Benefit	No Benefit	No Benefit	No Benefit	No Benefit	No Benefit
<b>External Medical Appliances:</b> Limited to CPAP Machine, Hearing Aids and Compression stockings (DVT treatment). Only covers the Gap portion or once medical scheme limit has been depleted.	R5 000 / Family	No Benefit	No Benefit	No Benefit	No Benefit	No Benefit	No Benefit
<b>Radiology and Pathology Services:</b> Combined capped amount where a member's available out of hospital benefits are depleted.	R10 000 / Insured	R15 000 / Family	R10 000 / Family	R10 000 / Family	No Benefit	No Benefit	No Benefit
<b>Oncology treatment:</b> Approved treatment after oncology limit (Excess R200 000) have been reached including co-payments on terms such as biological medication, radiotherapy, and chemotherapy per treatment cycle.	OAL (R177 800)	OAL (R177800)	R100 000 per Insured	R100 000 per Insured	No Benefit	R10 000 per Insured	No Benefit
<b>Specialist Consultations:</b> Only the gap portion of the Specialist Consultation will be covered for out of Hospital Visits up to a maximum of 2 claims per annum.	R500 / Claim	No Benefit	R300 / Claim	No Benefit	No Benefit	No Benefit	No Benefit
<b>Dental procedures:</b> Due to accidental impact resulting in severe physical injury or due to cancer. Implants are excluded.	R10 000 / family per annum	No Benefit	R7 500 / Family per annum	No Benefit	No Benefit	R2 500 / Family per annum	R2 500 / Policy per annum
<b>Shortfall on Consumables In-hospital:</b> Covers shortfalls on disposable items such as surgical gloves, bandages and gauze.	R6 000 / Insured	R6 000 / Insured	R6 000 / Insured	R6 000 / Insured	R6 000 / Insured	R2 000 / Insured	No Benefit
<b>Casualty Benefit:</b> The cost of emergency medical treatment or a surgical procedure performed in the hospital casualty unit, should such cost not be covered by the medical scheme. Emergency Triage Index applies. (Include: Orange and Red triage).	R12 500 / Insured	R10 000 / Insured	R12 500 / Family	R10 000 / Family	R10 000 / Family	R10 000 / Family	R15 000 / Policy
<b>Trauma Counselling:</b> This benefit covers counselling sessions with registered counsellor or clinical psychologist that may be required after a serious or traumatic event. Must receive counselling within (1) one year of trauma incident.	R10 000 / Insured	R10 000 / Insured	R10 000 / Family	R10 000 / Family	R10 000 / Family	No Benefit	No Benefit
<b>Additional Care Cover:</b> Covers stay at a registered sub-acute or step-down facility for rehabilitation treatment, including therapy provided by on-site therapists (Sub-limit per policy and once Medical Scheme benefit limits are depleted).	R8 000 / Family	No Benefits	R4 000 / Family	No Benefit	No Benefit	No Benefit	No Benefit
<b>Additional Benefits (These benefits do not aggregate to the R177 800 cap per insured)</b>							
<b>Cancer Lump Sum Benefit:</b> Stage 2 Cancer and higher. Excludes pre-existing Cancer and Skin Cancer.	Once-Off R15 000 / Insured	Once-Off R10 000 / Insured	No Benefit	No Benefit	No Benefit	No Benefit	No Benefit
<b>Accidental Death Benefit:</b> Must meet the definition of Accidental.	R10 000 / Insured	R10 000 / Insured	No Benefit	No Benefit	No Benefit	No Benefit	No Benefit
<b>Premature Birth:</b> Lump Sum Benefit (Birth between 24 - 34 weeks of pregnancy).	R5 000 / policy	No Benefit	R2 500 / policy	No Benefit	No Benefit	No Benefit	No Benefit
<b>International Medical Travel Cover:</b> Maximum of 90 days per trip.	R5 million per Insured	R5 million per Insured	R5 million per Insured	R5 million per Insured	No Benefit	No Benefit	No Benefit
<b>12 Months Medical Scheme Premium Waiver:</b> On Death or permanent Disability of Principal member.	No Maximum per month	No Maximum per month	Maximum R5 500 / month	Maximum R5 500 / month	Maximum R5 000 / month	No Benefit	No Benefit
<b>Gap Premium Waiver:</b> On Death or Permanent Disability of Principal member.	12 Months	12 Months	6 Months	No Benefit	No Benefit	No Benefit	No Benefit
<b>Monthly Premium per Individual &lt;65 years</b>	<b>R569.00</b>	<b>R509.00</b>	<b>R399.00</b>	<b>R363.00</b>	<b>R257.00</b>	<b>R166.00</b>	<b>Individual (18 to 27 Years)</b>
<b>Monthly Premium per Family &lt;65 years</b>	<b>R699.00</b>	<b>R615.00</b>	<b>R480.00</b>	<b>R433.00</b>	<b>R406.00</b>	<b>R267.00</b>	
<b>Monthly Premium per Individual / Family &gt;65 years</b>	<b>R988.00</b>	<b>R865.00</b>	<b>R670.00</b>	<b>R595.00</b>	<b>R573.00</b>	<b>R408.00</b>	<b>R159.00</b>