

Pricing Incl Vat	Dependants				
	0	1	2	3	4
Ages 0 - 29	R180	R330	R500	R600	R700
Ages 30 - 49	R330	R473	R605	R715	R825
Ages 50 - 64	R385	R495	R616	R759	R902
Ages 65+	R605	R770	R935	R1100	R1265

#### **UNDERSTANDING YOUR PREMIUM**

Your rate category is determined by the age of the oldest person insured on the policy.

For example: If you are between the ages of 30 and 49 and have no dependants, your monthly premium will be R330. If you take out a policy for yourself and add one dependant, the total monthly premium will be R473. This structure ensures that your pricing is transparent and tailored to your household's specific needs.

## **In-hospital benefits**

#### MEDICAL EXPENSE SHORTFALL COVER

Increases the Medical Aid rate up to 500% (e.g. Specialists, GPs, Anaesthetists, Radiology, Pathology, Consumables, etc.). Subject to the Overall Annual Limit

#### **CO-PAYMENT COVER**

R25 000 per claim. Subject to the Overall Annual Limit

#### **NON-DSP HOSPITAL PENALTY COVER**

R10 000 per admission. Limited to 1 claim per family per annum. Subject to the Overall Annual Limit

#### **SUB-LIMIT COVER**

R20 000 per family per annum. Subject to the Overall Annual Limit

## **Out-of-hospital benefits**

#### **CO-PAYMENTS FOR SCOPES**

R6 500 per family per annum. Limited to 2 claims per family per annum. Subject to the Overall Annual Limit

# SUB-LIMIT COVER FOR MRI, CT AND PET SCANS

R20 000 per family per annum. Subject to the Overall Annual Limit

#### **CASUALTY BENEFIT FOR ACCIDENTS**

R10 000. Limited to one claim per family per annum. Subject to the Overall Annual Limit

#### **CASUALTY BENEFIT FOR ILLNESS**

R2 000 per event. Limited to 2 claims per family per annum. Subject to the Overall Annual Limit. Treatment is restricted to between the hours of 6pm – 6am Mondays – Fridays, Saturdays, Sundays and Public Holidays

## In-hospital dental cover

#### MEDICAL EXPENSE SHORTFALL COVER

Increases the medical aid rate up to 500% for impacted wisdom teeth, orthognathic surgery, reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Subject to the Overall Annual Limit

#### **CO-PAYMENT COVER**

R25 000 per claim. Subject to the Overall Annual Limit

# In-hospital and out-of-hospital benefits

#### TRADITIONAL CANCER COVER

Pays for treatment in a private facility, including sub-limits, deductibles or co-payments related to cancer treatment. Subject to the Overall Annual Limit

#### **BIOLOGICAL CANCER DRUG COVER**

Provides cover for Biological Cancer Drugs when the Medical Scheme imposes a sub-limit. Subject to the formulary (Refer page on Formulary and Waiting periods) and the Overall Annual Limit

#### MRI AND CT SCAN COVER

Covers the cost of MRI and CT scans when there is no benefit available on your Medical Scheme. Limited to R5 000 per event and limited to 1 claim per family per annum. Subject to the Overall Annual Limit

#### TRAUMA CARE COVER

Covers the cost of trauma counselling consultations with a registered healthcare provider after a member has been diagnosed with a critical illness, has been a victim of a violent crime or experienced the death of an immediate family member. Limited to R2 000 per consultation and R8 000 per family per annum. Subject to the Overall Annual Limit

NO EXTENDED FAMILY ALLOWED FOR THE DYNAMIC OPTION

National Treasury annually publishes new limits under the Demarcation Regulations. The changes are effective from 1st April. Please refer to our website for the latest Overall Annual Limit (OAL) on each of our products.

Refer to page on Waiting Periods

### **Added benefits**

## COMPLIMENTARY INTERNATIONAL TRAVEL COVER

Turnberry has secured free international travel cover for policyholders which provides R5 million medical emergency cover

We have also negotiated preferential rates for top up benefits for travellers under the age of 69. This benefit is provided through Santam Travel Insurance and does not form part of your GAP cover product, it is a value-added product with its own terms and conditions.

Notification of travel required 48 hours prior to departure from RSA

# FORMULARY AND WAITING PERIODS

## **Waiting Periods**

- A 3-month general waiting period applies to all benefits (except in the event of an accident, which occurred while on the Policy). In the event the commencement date of the Policy is the same as the commencement date of the Medical Scheme, no 3-month general waiting period will apply to Medical Expense Shortfall Cover
- A 10-month waiting period on pregnancy/childbirth
- A 12-month waiting period on investigations, treatment or surgery for: hysterectomy, hysteroscopies, endometriosis, ovarian cysts and fibroids (myomectomy), muscular-skeletal (except in the event of an accident, which occurred while on the Policy), tonsillectomy, myringotomy, grommets, adenoids, wisdom teeth, hernia, cataracts, gastroscopies,

colonoscopies, cancer, nasal and sinus

## **Biological Cancer Drugs**

The lists below provide the Biological Cancer Drugs covered under Premier, Optimal and Dynamic

#### **LIST OF DRUGS**

Herceptin	Faslodex	Avastin
Mylotarg	Velcade	Erbitux
Nexavar	Tarceva	Sutent
Gleevec	Alimta	Fludara
Sprycel	Zevalin	Mabthera



FOR MORE INFORMATION CLICK HERE

**NAVIGATING THE WAY** 

Please note that 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.

Disclaimer: This document is a summary for information purposes only and does not supersede the Policy Terms and Conditions. In the event of any discrepancy, the Policy Terms and Conditions will prevail. Insured by Lombard Insurance Company Limited.