



Understanding your **Base Gap** Cover Policy.

Summary of Cover

2025

What is Gap Cover?

Gap Cover is additional protection against shortfalls to complement your Medical Scheme cover. Shortfalls occur when your healthcare provider charges higher rates than what your Medical Scheme will pay. These shortfalls expose you to out-of-pocket expenses that could lead to exorbitant debts.

What Cover is Included

Core Benefits

- Tariff Shortfalls
- Shortfalls from Sub-Limits
- Out-of-Hospital Tariff Shortfalls
- Dental Reconstruction Benefit

Benefit Extenders

- Hospital Booster
- Family Protector
- Medical Scheme Contribution Waiver
- End to End assistance with Road Accident Fund

What can I add to my Gap Cover?

Lifestyle Benefits

Lifestyle Benefits are Kaelo offerings. Service Providers are contracted to Kaelo.

- Counselling
- Coaching
- Legal and Financial Advice
- **extraRewards** by Dis-Chem

Kaelo Lifestyle through our AskNelson programme provides valuable psychological, legal and financial support to Members and their families to best assist them in coping with life, work, or school challenges that may be affecting their well-being.

What is extraRewards?

extraRewards is a rewards programme available to Dis-Chem Health policyholders who, by making healthy choices, have access to an immediate **20%** discount on a variety of healthy and essential products including health, home care, personal care and baby products from leading brands.

Understanding the Waiting Periods

Waiting Periods

The waiting periods for Dis-Chem Health Gap are as follows:

- 12-month Condition-Specific Waiting Period - you cannot claim any benefits relating to a condition for which medical advice, diagnosis, care or treatment was recommended or received within the 12-month period prior to your cover Inception Date.
- 3-month General Waiting Period - the period in which you may not claim any benefits, except if your claim is due to an accident.
- Waiting periods will not be applied to a newborn or Spouse if they are added to your Policy within 90 days from the birth or marriage date.

Moving from another Gap provider?

You can easily move from your previous Gap cover to Dis-Chem Health Gap. In order to ensure that the waiting periods are applied fairly and in line with the below, we suggest that you do not allow for a break in your cover.

If there is less than 90 days break in cover, then the unexpired portion of the waiting periods from the previous policy will be applied to your Dis-Chem Health Gap policy when you move over and if you already completed your waiting periods on your previous Gap cover, no waiting periods will apply on Dis-Chem Health Gap.

Exclusions (What we will not cover)

Claims caused by or related to any of the following, will not be covered:

- Any claim that is excluded or rejected by the Insured Party's medical aid. This means that, if your medical aid has not paid their portion toward any particular line item charged, it will not be covered by your Gap Cover Policy
- Any claim that does not form part of the registered benefits of the Insured Party's medical aid but has been paid on an ex-gratia basis
- Any fee charged by a Medical Practitioner, Hospital or other healthcare providers that constitutes Split Billing as defined in your policy. This exclusion does not apply to Balance Billing, also defined in your policy
- Any Treatment or Medical Procedure for infertility
- Any Treatment or Medical Procedure where such treatment occurred outside of the period of cover
- External prosthesis
- Any appliances including, but not limited to, wheelchairs, beds or convalescing equipment
- All dental procedures classified as specialised dentistry including, but not limited to, crowns, bridges, dental implant related procedures, orthognathic surgery, temporomandibular joint ("TMJ") surgery, labial frenectomy, bone augmentations, bone or tissue regeneration.
- Harvesting and/or preserving of human tissues, including but not limited to stem cell regeneration
- Breast augmentation
- Gastroplasty, lipectomy or otoplasty
- Gender reversal procedures
- Therapeutic massage therapists
- Rehabilitation, frail care or hospice services
- Step-Down Facilities
- TTO (To-Take-Out) medicines

For a detailed outline of all Policy Exclusions, please refer to section I of your Policy document. Benefits apply only for services rendered within the territory of the Republic of South Africa. Any services provided outside of the borders of South Africa are excluded from cover.

Benefits		
Health Service	Benefit	Dis-Chem Gap Base
Core Benefits	The Overall Annual Limit is R210 580 per Insured Party Per Annum which is the maximum combined Benefit payable by the Insurer for all Core Benefit clauses.	
Tariff Shortfalls	This Benefit provides additional cover of up to 500% of the medical aid rate for services provided during a Hospital Episode, covering shortfalls for healthcare service providers such as surgeons, radiologists, pathologists and physiotherapists. It also includes cover for Prescribed Minimum Benefits (PMBs).	✓
Shortfalls from Sub-Limits	This Benefit will apply for services provided during a Hospital Episode, where the charges relating to the service supplied have exceeded the Sub-limit benefit paid by the Insured Party's Medical Scheme.	R34 450
Out-of-Hospital Tariff Shortfalls	This Benefit provides additional cover of up to 500% of the Medical Scheme rate for out-patient procedures, subject to the costs being funded from the risk/hospital benefit by the Insured Party's Medical Scheme.	500%
Dental Reconstruction Benefit	The Benefit is payable where dental reconstruction surgery is required as a direct result of Accidental Injury or from oncology Treatment that occurred after the Inception of this Policy. The Benefit is only payable during an Insured Event. Limited to two events per Family per annum and a maximum rand value per annum, subject to the Core Benefit Limit.	R45 700
Benefits Extender		
Hospital Booster	A lump-sum payment, related to the length of the hospital stay, will be paid in the event of an accident or Premature Birth. A maximum of two Hospital Episodes per Family Per Annum.	Day 1 - 13: R412 Day 14 - 20: R803 Day 21 - 30: R1 555 Maximum Benefit of R28 500 per Insured Party Per Annum.
Family Protector	A lump sum payment upon the death or Permanent Disability of an Insured Party due to Accidental Injury.	Children below six years: R20 000 . All other Insured Parties: R28 000 .
Medical Scheme Contribution Waiver	A lump sum Benefit is payable upon the death or Permanent Disability of the Policyholder due to Accidental Injury and where the Policyholder is the principal member of the Medical Scheme. In the event of death, the Benefit will only apply (become payable) where there are dependants registered on the Medical Scheme, who are being paid for by the Policyholder.	Contributions will be covered for 6 months up to an overall maximum amount of R35 500 . This Benefit is limited to one event over the Policy lifetime.
Gap Cover Premium Waiver	In the event of the death or Permanent Disability of the Policyholder as a result of an accident, Policy Premiums will be waived. In the event of death, the Benefit will only apply where the Policyholder is the principal member of the Medical Scheme and only if there are dependants registered on the Gap policy, who are being paid for by the Policyholder.	Waived for a period of six months from the date of the event. The waiver is limited to one event over the policy lifetime.
Road Accident Fund Claims	Assistance with Road Accident claims. Service Providers are contracted to Kaelo Risk and not to the Insurer: Centriq Insurance Company Limited	✓

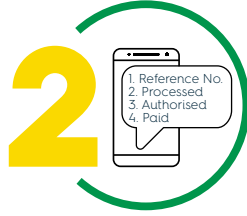
Lifestyle Benefits

Kaelo Lifestyle Digital gives you and your dependants access to Counselling, Coaching, Support and Care through our AskNelson programme. You can contact AskNelson on 0800 635 766 or visit www.kaelo.co.za. If you have opted in for Lifestyle Benefits, you also get access to extraRewards by Dis-Chem. For detailed information please refer to the Kaelo Lifestyle AskNelson Digital Benefits Brochure. This is a non-insurance product offered by Kaelo. Service Providers are contracted to Kaelo.

How to Claim



Submit



Notified

To claim from Dis-Chem Health Gap, you will need to submit the following documents to dischemgap@kaelo.co.za:

- A completed Dis-Chem Gap Claim form, (www.kaelo.co.za/dis-chem-health-gap-claim/).
- A copy of the specialist's account/s;
- Hospital accounts; and
- A copy of your Medical Scheme's statement showing the processing of the account and the shortfall


Time frame to submit your claim:

You have six months from the end of the Insured Event to submit your claim. Any claim received after the six month period has ended, will not be accepted.

Time frame to process your claim:

Once all required documents have been received, your claim will be assessed and if valid paid within 7 to 14 working days.

Contact Information

 0861 029 892

 dischemgap@kaelo.co.za

 www.dischemhealth.co.za/gap-cover



Please direct all queries to the
Service Centre on 0861 029 892