About African Unity Health

African Unity Health (Pty) Ltd (AUH) is a 100% owned subsidiary of African Unity Group Ltd and operates as an administrator of short and long-term insurance products specialising in the health and accident insurance market.

At African Unity, we are progressive in our thinking, yet calculated in the management of our clients. We believe in providing our clients with products that are agile, easy to understand and valuable in every sense of the word.

African Unity adopts and implements the Treating Customers Fairly (TCF) principles as part of our business culture.

We believe there is a simple formula to creating a win-win relationship; a clear mission that is executed by an exceptional team, which leads to satisfied clients.

We prefer to work in close collaboration with our partners and design products specific to their unique environments.

Our strength lies in the quality, diversity and adaptability of our products and services.

Our philosophy of creating mutually beneficial partnerships is more than a mere thought – it is what drives us. We know that our wellbeing depends on the wellbeing of our clients and partners.

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What Is Gap Cover?
Gap cover is a short-term insurance product designed to assist you with covering the shortfalls that may arise during a hospital admission for a medical or surgical procedure due to the doctors and specialists charging a higher rate than what your medical scheme pays, or when you are required to pay a co-payment or upfront cost for a procedure.

Why Do I Need Gap Cover?
Your medical scheme may cover your medical procedure up to 100% of the scheme rate but the majority of specialists, surgeons and anaesthetists charge well above the set medical scheme rate, in fact, some charge as much as five times or 500% more than what the medical schemes cover.

Who Can Join, And Who Is Covered?
Any active employee of Mutual & Federal who is a member of a registered South African medical scheme can join. Coverage will be available for you, your spouse (or life partner) and all dependants registered on your medical scheme membership. (The Gap Cover principle member does not have to be the main member on the medical scheme membership).

What Are The Waiting Periods?
An open window period will be given to existing employees without gap cover to join the company Gap cover scheme on the 1st of January 2017 and except for a 10 month maternity waiting period and a 6 month condition specific waiting period for: Joint surgery, Endoscopic and Arthroscopic procedures and Cardiac Surgery, all other waiting periods will be waived.

Oncology Cover is only available for new members that have not previously been diagnosed with any form of cancer or have been in remission for a period of more than 5 years.

Employees who join, outside of the open window period, i.e. during the course of the year will have a 3 month general waiting period and a 10 month maternity specific waiting period and will also have a 6 month procedure specific waiting period for: Joint surgery, Nasal and Sinus surgery, Tonoplasty, Adenoidectomy, Grommets, Endoscopic and Arthroscopic procedures, Hernia repairs, Hysterectomy, Cardiac Surgery, Spinal surgery, Dentistry and Cataract procedures. Oncology Cover is only available for new members that have not previously been diagnosed with any form of cancer or have been in remission for a period of more than 5 years.

Different Levels of Cover
African Unity Health offers two levels of cover to Mutual & Federal employees. For more details, please consult the following pages.

African Unity has paid in excess of R 31 million in shortfall and co-payment claims over the last 12 months

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<th>Procedure</th>
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<th>Shortfall Paid by Gap Cover</th>
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<td>Dental procedures</td>
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Cancer Diagnosis
First time diagnosis of cancer: Lump sum paid R 25 000.00
Option 1 (R190 per month):

Tariff shortfalls: Unlimited cover for the tariff shortfalls on doctors and specialists accounts, including medicines, materials and appliances used, during an authorised in-hospital procedure (includes a list of selected procedures done in doctors rooms) as a result of the medical practitioner charging more than the medical scheme reimbursement rate. The benefit provides cover of 5 times or 50% over and above the medical scheme rate and includes in-hospital shortfalls for x-rays, specialised radiology like MRI, CT and PET scans, pathology, physiotherapy as well as shortfalls on all dental procedures except for normal dental implants. Prescribed Minimum Benefit (PMB) conditions are covered.

Standard co-payments: Unlimited cover for the standard co-payments or upfront deductibles imposed by your medical scheme on authorised in-hospital procedures, including MRI and CT scans done on an outpatient basis. Cover excludes any co-payments due to you not following the medical scheme rules in respect of the use of network providers, pre-authorisations and referrals.

Sub-limitation cover: The policy will cover shortfalls on surgical procedures or the shortfall on an internal prosthesis above a sub-limitation in terms of the Medical Scheme rules. Limited to R40 000 per policy per annum.

Step down facility benefit: The policy will pay a once off lump sum benefit of R5 000 when a member spends a minimum of 10 consecutive days in a Step down or subacute facility where they require rehabilitation for a medical, post-surgical, post-trauma, neurological, orthopaedic, musculo-skeletal and other conditions. These include burn victims, head injuries, strokes, trauma, hand injuries, amputation, respiratory, cardiac and other disorders. It does not include frail care or rehabilitation for mental, drug or alcohol related conditions. Limited to one event per member per year.

Accident/Trauma related Dental implant benefit: Although the cost related to normal dental implants is not covered under your policy, the policy will cover the cost of dental implants due to an accident/trauma or cancer related reconstructive surgery limited to R100 000 per member, per year.

Accidental Emergency Casualty cover: Covers all the costs incurred in a registered casualty unit following an accidental injury (physical injuries or wounds resulting from external force requiring immediate treatment) where the cost was not covered under the in-hospital risk benefits of your medical scheme. Cover is limited to R10 000 per policy per annum.

Cancer Diagnosis benefit: The policy provides cover for a once off lump sum payment of R25 000 on the first time diagnosis of any form of cancer that requires treatment on your medical schemes oncology program.

Accidental death and disability benefit: The policy will pay a once off lump sum benefit of R25 000 following the accidental death or total and permanent disability of the main member as registered on the gap cover policy. Limited to one event per year.

Medical scheme premium waiver: The policy will cover your medical scheme contributions for a period of 6 months following the death or total and permanent disability of the medical scheme main member. The cover is limited to the actual monthly cost or R3 000 per month.

Gap cover premium waiver: A member’s Gap cover premiums will be waived for a period of 6 months following the death or total and permanent disability of the gap cover main member.

Option 2 (R210 per month):

Includes all the benefits of Nedgroup Option 1 plus additional cover for:

Oncology co-payments cover: The policy will cover the shortfalls on chemotherapy or radiotherapy, and other related cancer treatment including biological cancer drugs, as a result of co-payments imposed by your medical scheme after a member has reached his schemes oncology benefit limit. Limited to R250 000 per member per annum.

MUTUAL & FEDERAL OPTIONS

What are the exclusions on the policies?

- Any cost related to consultations or services provided on an out-patient basis or outside of the hospitalisation dates.
- Co-payments and shortfalls as a result of not following the medical scheme rules in respect of pre-authorisations, referrals or the use of network providers.
- Admin fees, levies or doctors co-payments paid directly to the doctor or specialist and not related to the medical scheme.
- All costs related to ward fees, theatre fees and other hospital accounts are not covered.
- All costs related to dental implants unless the implants relate to the medical scheme.
- All costs related to dental implants unless the implants relate to accidental, trauma or cancer related reconstruction.

Important to note:

- You are not allowed to upgrade or downgrade your cover during the course of the year. Changes may only be made at renewal which is annually on 31 December. Employees on a group arrangement must remain on cover until 31 December or on termination of employment. You must inform us when you terminate your employment with Mutual & Federal.
- It is your responsibility to ensure you are familiar with the policy wording explaining your limits and benefits on your option.

EXCLUSIONS

- Any kind of flying where a member are the pilot or any form of motorised race or speed test.
- Any cost related to depression, insanity, mental or mental stress-related conditions, suicide, attempted suicide, or intentional self-injury or injury as a direct result of the insured person having exceeded the legal alcohol limit.
- Emergency casualty services, other than in a hospital casualty ward or emergency casualty admissions paid from the risk portion of your medical scheme.
- Any shortfalls on take home medication.

Disclaimer: The above is merely a summary of the policy’s key benefits, features and contributions. Full details are available directly from the Administrator and will be subject to the Master Policy.
FOR MORE INFORMATION ON THE GAP COVER PRODUCT
please contact the Customer Care Centre:

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0860 004 162

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gapadmin@africanunity.co.za