



EXACT COVER WITH GAP & CO-PAY 2027

0 - 64

Individual **R460**

Family **R560**

Age Limit: Maximum entry age 64

Overall Annual Limit (OAL) Per Dependant: R232 000

Increase Effective: 1 April 2027

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

All benefit categories are per policy. Refer to Policy Wording for full details and explanations. This document is for basic information purposes only.

WHAT IS EXACT WITH GAP AND CO-PAY COVER?

*To access the exact cover benefits, policyholders are required to **preauthorise** the event with Sirago **prior** to incurring any expenses and admissions to hospital. Failure to do so will render the claim repudiated.

The Exact with Gap and Co-Pay option provides cover for specific procedures that your Medical scheme excludes, with additional Gap and Co-payment cover for the events that are covered by the Medical scheme. The Exact Cover option provides access to a defined list of stated procedures when your Medical scheme option excludes those specific procedures over and above their standard exclusions. Sirago will negotiate with all service providers on your behalf and pay the claim directly, up to the stated amounts as listed below.

The cost of the hospital and all service providers are included in the cover limit.

Procedures we will cover

ARTHROSCOPIC SURGERY - R100 000

BACK NECK, SHOULDER AND KNEE SURGERY - R100 000

BUNION SURGERY - R100 000

**COCHLEAR IMPLANT, AUDITORY BRAIN IMPLANT AND
INTERNAL NERVE STIMULATOR SURGERY INCLUDING THE
DEVICE AND PROCESSOR** - R100 000

**DENTAL PROCEDURES FOR RECONSTRUCTIVE PLASTIC
SURGERY DUE TO AN ACCIDENT** - R100 000

**DENTAL PROCEDURES FOR IMPACTED WISDOM TEETH FOR
CHILDREN UNDER 18 YEARS OLD** - R15 000

FUNCTIONAL NASAL SURGERY - R100 000

JOINT REPLACEMENT SURGERY - R100 000

OESOPHAGEAL REFLUX AND HIATUS HERNIA SURGERY
- R100 000

VARICOSE VEIN SURGERY - R100 000

MRI AND CT SCANS DUE TO AN ACCIDENT - R10 000

**SKIN DISORDERS INCLUDING BENIGN GROWTH AND
LYMPHOMAS** - R100 000

NON-CANCEROUS BREAST CONDITIONS - R100 000

TONSILLECTOMY, GROMMETS, AND ADENOIDECTOMY
- R12 000 per policy, R20 000 combined procedure

**ENDOSCOPIC PROCEDURES (Bronchoscopy, Colonoscopy,
Cystoscopy, Enteroscopy, Gastroscopy, Hysteroscopy,
Laparoscopy, Laryngoscopy, Mediastinoscopy, Sigmoidoscopy,
Thoracoscopy, Pleuroscopy, Ureteroscopy)**
- R15 000 per policy

*These benefits are applicable per policy per annum, **subject to the OAL**.

RESILIENCE IS RARE **#FUTUREBUILT**

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.

f SiragoGapCover in sirago-underwriting-managers @ siragogapcover 🌐 sirago.co.za



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.



PEACE OF MIND GUARANTEED

In-Hospital Benefits

GAP COVER

Gap Cover will settle the claims up to **400%** above the Medical scheme rate or stated benefit value.

CO-PAYMENTS

The excesses imposed by your Medical scheme payable to a maximum rand limit for specified procedures or tests. Cover for co-payments imposed by Medical schemes for hospital admissions, scans and surgical procedures. Co-payment benefits are subject to OAL, limited to **R15 000** per claim, including co-payments charged as a percentage.

Out-Of-Hospital Benefits

CASUALTY BENEFIT

Sub-limit of **R10 000** for Accident/Trauma and Child Casualty Illness outside of normal consultation hours; costs related to the illness for children **18 years** and younger; stated benefit, **R2 000** per claim. **Out of normal consultation hours means 18:00 to 07:00 Monday to Friday, all of Saturday, Sunday and South African public holidays. Subject to the OAL.**

EXACT COVER EXCLUSIONS

Medical procedures listed as specific exclusions by the Medical scheme that do not form part of our list of medical procedures covered.
Service providers' accounts where the Medical scheme applied an Overall Annual Limit (OAL) as a cover limit to in-hospital medical procedures.
Service providers' accounts where the Medical scheme sub-limit benefit is exhausted at the time of the event.
Service providers' accounts where the chosen service providers charge a rate that exceeds the cover limit we provide.

WAITING PERIODS FOR EXACT COVER

10-month waiting period applies where no claims can be submitted for a procedure or surgery related to our list of procedures.
12-month waiting period on pre-existing conditions, specific diseases and/or illnesses related to our list of procedures.

WAITING PERIODS FOR GAP AND CO-PAY COVER

3-month general waiting period is applicable on any newly inception policies and/or additional dependants to the current policy, except in the event of an accident.
10-month waiting period on pre-existing conditions, diseases, or illnesses for Gap and Co-pay Cover claims.

BROKER DETAILS



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