

PREMIER

Monthly premium: R588 per family for under 65yrs
Monthly premium: R845 per family for 65yrs+
Monthly premium: R433 per individual for under 65yrs
Monthly premium: R591 per individual for 65yrs+



In-hospital benefits

MEDICAL EXPENSE SHORTFALL COVER

Increases the Medical Aid rate up to 600% (e.g. Specialists, GPs, Anaesthetists, Radiology, Pathology, Consumables, etc.). Subject to the Overall Annual Limit

CO-PAYMENT COVER

Subject to the Overall Annual Limit

NON-DSP HOSPITAL PENALTY COVER

R15 500 per admission. Limited to 2 claims per family per annum. Subject to the Overall Annual Limit

SUB-LIMIT COVER

R41 000 per admission per insured. Subject to the Overall Annual Limit

TRAUMA RECOVERY COVER

Provides cover for when the Medical Scheme has imposed a sub-limit on a step-down facility for physical rehabilitation as a result of an accident which occurred while on the Policy. Limited to R5 000 per admission per insured and R10 000 per family per annum. Subject to the Overall Annual Limit

In-hospital dental cover

MEDICAL EXPENSE SHORTFALL COVER

Increases the medical aid rate up to 600% 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

SUB-LIMIT COVER

R32 500 per admission per insured 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

Subject to the Overall Annual Limit

Out-of-hospital benefits

CO-PAYMENTS FOR MRI, CT AND PET SCANS

Subject to the Overall Annual Limit

CO-PAYMENTS FOR SCOPES

R5 000 per event. Limited to 2 claims per insured per annum. Subject to the Overall Annual Limit

SUB-LIMIT COVER FOR MRI, CT AND PET SCANS

R41 000 per event per insured. Subject to the Overall Annual Limit

CASUALTY BENEFIT FOR ACCIDENTS

R16 500 per event per insured. Subject to the Overall Annual Limit

CASUALTY BENEFIT FOR ILLNESS

R4 000 per event. Limited to 3 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

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.

SUB-LIMIT AND CO-PAYMENT COVER FOR DENTAL IMPLANTS

Covers the cost of dental implants for reconstructive maxillofacial surgery due to an accident (which occurred while on the Policy) and oral cancer (which was diagnosed while on the Policy). Limited to R54 000 per family per annum. Subject to the Overall Annual Limit

BASIC DENTAL MEDICAL EXPENSE SHORTFALL COVER FOR CHILDREN

Increases the Medical Aid rate up to 600% for basic dentistry for children up to and including 12 years old. Limited to R4 500 per family per annum. 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 (see pg 3) and the Overall Annual Limit

INNOVATIVE CANCER DRUG COVER

Provides cover for new innovative cancer drugs. Limited to R11 000 per claim. Subject to the Overall Annual Limit

MRI AND CT SCAN COVER

Provides cover for MRI and CT scans when there is no benefit available on your Medical Scheme. Limited to R7 000 per event and 2 claims per family per annum. Subject to the Overall Annual Limit

INVESTIGATIVE TREATMENT

Scopes for Screening purposes will be limited to 1 every 5 years, per insured person and R7 500. 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, a victim of a violent crime or experienced the death of an immediate family member. Limited to R2 500 per consultation and R8 000 per family per annum. Subject to the Overall Annual Limit

BREAST CANCER PREVENTION COVER

Increases the Medical Aid rate up to 600% for a Prophylactic Mastectomy. Subject to clinical entry criteria and the Overall Annual Limit

BREAST CANCER RECONSTRUCTION COVER

Increases the Medical Aid rate up to 600% for a breast reconstruction post mastectomy due to cancer for the affected breast. Reconstruction of the unaffected breast for the purposes of symmetry, when there is no benefit on the Insured person's Medical Scheme is limited to R27 000 per insured person, per lifetime. Subject to the Overall Annual Limit

For waiting periods please refer to page 3

Added benefits

CANCER DIAGNOSIS BENEFIT

Once off payment for first diagnosis of Cancer based on the stage at time of diagnosis:

Stage 1	R5 000	Stage 2	R15 000
Stage 3	R25 000	Stage 4	R30 000

MEDICAL SCHEME CONTRIBUTION WAIVER

Up to R6 600 per month for 6 months; in the event of death or permanent and total disability as a result of an accident, of the Medical Scheme Contribution Payer

GAP PREMIUM WAIVER

Pays the premium of your Premier Policy for 12 months in the event of death or permanent and total disability as a result of an accident of the Contribution Payer

PERSONAL ACCIDENT BENEFIT

R32 000 per insured on the Policy in the event of accidental death or permanent and total disability

CRITICAL ILLNESS BENEFIT

R12 500 per insured on the Policy in the event of death due to a critical illness (excludes cancer)

INTERNATIONAL TRAVEL COVER

R5 million per insured (notification of travel required 48 hrs prior to departure)



**Premier is
the umbrella**

sheltering your entire family. It
offers a vast range of benefits
to cater for unforeseen
medical expense shortfalls
and provides comprehensive
cancer benefits.

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 (increasing the medical aid rate up to 600%)
- 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

LIST OF DRUGS

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

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.

