

UCT | Ambledown Gap Cover 2019

Dear UCT member

Ambledown Increases for 2019

This information provides a summary of total claims and contributions paid in 2018 for the UCT Gap Cover.

Product Name	2018 Risk Premium	2018 Total Claims paid	Underwriting Result	Net Loss Ratio
All products (939)	R934 580	R1 262 737	-R328 157	135%

Based on the above claiming patterns, Ambledown have increased the contributions going into 2019:

Product Name	2018 Premium	2019 Premium
UCT Gap Cancer	R 186,62	R 220,00
UCT Gap Comprehensive	R 282,45	R 320,00
UCT Gap Executive	R 292,55	R 335,00
UCT Gap In Hospital	R 262,28	R 300,00
UCT Gap Plus Seniors	R 322,81	R 370,00
UCT Key Gap	R 141,23	R 160,00

2019 Ambledown benefit schedule

Please review the table below according to your 2019 health care needs. Members have the opportunity to upgrade their product from 1 January 2019. **Please note that all benefits, except for Premium Waiver and Dread Disease benefit, will be limited to R157,000 per beneficiary on the policy.**



Ambledown	UCT Gap Executive	UCT Gap Comprehensive	UCT Gap & In-hospital	UCT Gap & Cancer	Gap LPE Advanced – only KeyCare plans
Products & Tariff Shortfalls in-hospital to max of 400%	Benefit	Benefit	Benefit	Benefit	Benefit
Co-Payments and Deductibles	Benefit	Benefit	Benefit	Benefit	No Benefit
In Hospital Sub-limitation cover	Benefit	Benefit	Benefit	No Benefit	No Benefit
Cancer Cover – R150,000	Benefit	Benefit	No Benefit	Benefit	No Benefit
Casualty Ward Benefit	Benefit	Benefit	Benefit	Benefit	No Benefit
Medical Expenses Related to 10 defined procedures on Keycare plans	No Benefit	No Benefit	No Benefit	No Benefit	Benefit
Dread Disease (Severe Illness) Benefit	Benefit	Benefit	No Benefit	Benefit	No Benefit
Premium Waiver Benefit	Benefit	No Benefit	No Benefit	No Benefit	No Benefit
2019 UCT Group rate per family per month	R355	R320	R300	R220	R160

Definition of benefit

Herewith an overview of Ambledown product for 2019:



Product & Tariff shortfalls in-hospital for specialist cost

This Gap Cover policy provides additional cover for in-hospital specialist charges. It enhances existing medical scheme cover to a maximum of 400%, subject to the Overall Policy Limit of R157 000 per insured person per year. For example, if your medical scheme option has covered you at 100% of the medical scheme rate, the Gap Cover will cover you for an additional 400%, should the specialist have charged 500% of the medical scheme rate. The maximum cover you will receive between your medical scheme option and Gap Cover for the specialist while admitted to hospital, will not be more than 500%.

The benefits below are also subject to the Overall Policy Limit of R157 000 per insured person per year:

Additional Benefits



Co-payment cover

Co-payments are charged by medical schemes for amongst other MRI/ CT scans, scopes and dentistry which takes place in-hospital.

These co-payments and deductibles can be claimed back from Gap Cover, limited to R100 000 per family per annum.



Sub-limitation cover

This Sub-Limit cover covers the charges above any sub-limitation imposed by the Medical Scheme for in-hospital admissions, limited to R50 000 per family per annum.



Casualty Cover

Hospital Casualty Cover covers the cost of emergency treatment in a casualty unit of a hospital and is limited to R10 000 per family per annum. Usually the costs in a casualty unit is paid from the members' medical savings account or is for their own cost.



Oncology Benefit

The policy provides for charges related to cancer treatment in a private institution subject to the medical scheme rules, in the form of a co-payment or deductible applied after the sub-limits imposed by the medical scheme for cancer treatment. It provides for charges after the sub-limit imposed by the medical scheme for defined biological cancer drugs, for defined oncological conditions and/or specific sub-groups of cancer. List of biological cancer drugs apply.

KeyCare Members

Gap LPE Advance

Gap LPE Advance option is applicable to KeyCare members and provides members with an additional 400% cover when they are liable for the difference between what their specialists charge when admitted to hospital and what their medical scheme pays from their Hospital Benefit. The benefit is subject to an Overall Policy Limit of R157 000 per insured person per year.

The Gap LPE Advanced benefit provides cover for hospital and service providers' accounts up to the rand amount limit for listed medical procedures, subject to the OPL of R157 000 per insured person per year:

The benefits below are not subject to the Overall Policy Limit of R157 000 per insured person per year (falls away after age 65) :

Diagnosis Oncology Benefit (part of benefit on point 5)

The Gap Supreme policy provides a lump-sum benefit of R50 000 for first time diagnosis on Cancer (Clinical Protocol for type of Cancer). The lump sum benefit will exclude any member that has been an Ambledown client and was diagnosed prior to inception or during the period of cover.

Medical Scheme Contribution waiver benefit

This benefit covers the actual medical scheme contributions following the death or the total and permanent disability of the Principal Member of the Medical Scheme. The benefit is limited to equal the total value of Medical Scheme Contribution calculated for 6 months.

Definition of benefit

Herewith an overview of Ambledown product for 2019:

Product & Tariff shortfalls in-hospital for specialist cost

This Gap Cover policy provides additional cover for in-hospital specialist charges. It enhances existing medical scheme cover to a maximum of 400%, subject to the Overall Policy Limit of R157 000 per insured person per year. For example, if your medical scheme option has covered you at 100% of the medical scheme rate, the Gap Cover will cover you for an additional 400% ,should the specialist charged 500% of the medical scheme rate. The maximum cover you will receive between your medical scheme option and Gap Cover for the specialist while admitted to hospital, will not be more than 500%.

The benefits below are also subject to the Overall Policy Limit of R157 000 per insured person per year:

Co-payment cover



Co-payments are charged by medical schemes for amongst other MRI/ CT scans, scopes and dentistry which takes place in-hospital.

These co-payments and deductibles can be claimed back from Gap Cover, limited to R100 000 per family per annum.

Additional Benefits

Sub-limitation cover



This Sub-Limit cover covers the charges above any sub-limitation imposed by the Medical Scheme for in-hospital admissions, limited to R50 000 per family per annum.

Casualty Cover



Hospital Casualty Cover covers the cost of emergency treatment in a casualty unit of a hospital and is limited to R10 000 per family per annum. Usually the costs in a casualty unit is paid from the members' medical savings account or is for their own cost.

Oncology Benefit



The policy provides for charges related to cancer treatment in a private institution subject to the medical scheme rules, in the form of a co-payment or deductible applied after the sub-limits imposed by the medical scheme for cancer treatment. It provides for charges after the sub-limit imposed by the medical scheme for defined biological cancer drugs, for defined oncological conditions and/or specific sub-groups of cancer. List of biological cancer drugs apply.

Gap LPE Advance

Gap LPE Advance option is applicable to KeyCare members and provides members with an additional 400% cover when they are liable for the difference between what their specialists charge when admitted to hospital and what their medical scheme pays from their Hospital Benefit. The benefit is subject to an Overall Policy Limit of R157 000 per insured person per year.

KeyCare Members

The Gap LPE Advanced benefit provides cover for hospital and service providers' accounts up to the rand amount limit for listed medical procedures, subject to the OPL of R157 000 per insured person per year. The sub-limitation for the 10 defined procedures listed in the Listed Procedures Enhancer policy increased to R100,000 per insured person per annum

Casualty cover has been added to the LPE option R10 000 limitation in the aggregate per insured person per annum

The benefits below are not subject to the Overall Policy Limit of R157 000 per insured person per year (falls away after age 65) :

Diagnosis Oncology Benefit (part of benefit on point 5)

The Gap Supreme policy provides a lump-sum benefit of R50 000 for first time diagnosis on Cancer (Clinical Protocol for type of Cancer). The lump sum benefit will exclude any member that has been an Ambledown client and was diagnosed prior to inception or during the period of cover.

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This benefit covers the actual medical scheme contributions following the death or the total and permanent disability of the Principal Member of the Medical Scheme. The benefit is limited to equal the total value of Medical Scheme Contribution calculated for 6 months.

Important documents to be submitted when claiming

- Ambledown Claim Form
- A copy of the hospital account or the claims statement from the medical scheme reflecting the hospital event, must be submitted as proof of admission.
- All medical practitioner accounts
- Medical Scheme membership certificate

The claim form must be received by Ambledown within six months of the first day of your hospital confinement or procedure. Any claim received later than the six month claiming period will not qualify for any benefit.

Claims form with the relevant documentation needs to be submitted to Ambledown at:

Fax: 011 463 1665

Email: claims@ambledown.co.za

Contact details



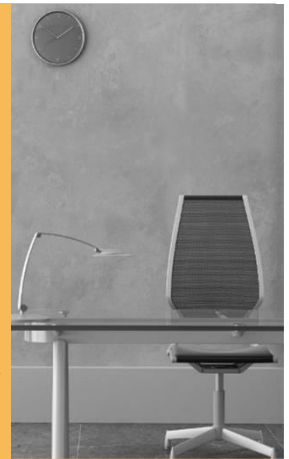
Please do not hesitate to contact your NMG Healthcare Consultants should you need assistance:

Consultant

Lionel Joe
Tel: 021 943 1862
Email: ljoe@nmg.co.za

Should you require further assistance, please contact your dedicated Healthcare Consultant:

Dominique Ortone
Tel: 021 943 1889
E-mail: dortone@nmg.co.za



E&OE. Although care is taken to represent the benefits correctly, in case of any conflict, the Ambledown Policy Rules will prevail.