



kaelogap

shortfall cover: **Fusion**

KaeloGap gives you the freedom to choose whichever doctor or specialist will give you the best care, regardless of your medical aid; regardless of rates.

We have you covered for the best care, without the stress of having to worry about additional bills.

Speak to your healthcare advisor today.

Peace of mind and the freedom to choose.

kaelo Simply healthcare

shortfall cover: **Fusion**

Benefit	Description
Shortfall Benefit	The Shortfall Benefit provides an additional 500% of the medical aid rate, covering shortfalls for all service providers such as surgeons, radiologists, pathologists and physiotherapists. Also includes cover for Prescribed Minimum Benefits (PMBs).
Oncology Treatment Benefit	<p>Shortfall</p> <p>The Oncology Shortfall Benefit provides an additional 500% of the medical aid rate, to cover oncology treatment shortfalls.</p>
	<p>Co-payment</p> <p>The Oncology Co-payment Benefit provides full cover for the 20% oncology related co-payments imposed by medical aids.</p>
	<p>Booster</p> <p>When a medical aid imposes an overall annual limit on oncology treatment and the benefit has been exhausted, the Oncology Booster Benefit provides full cover thereafter.</p>
Co-Payment and Deductible Benefit	<p>Provides full cover for fixed, upfront payments applied to defined surgical procedures, basic in-patient dentistry and diagnostic services such as MRI/CT/PET scans and scopes.</p> <p>The Co-payment and Deductible Benefit will provide full cover for these upfront payments.</p> <p>In the event that a non-designated hospital or day clinic is voluntarily utilised, a maximum of R14 000 cover per policyholder per year is provided.</p>
Sub-Limit Enhancer	<p>Provides full cover for fixed, upfront payments applied to defined surgical procedures, basic in-patient dentistry and diagnostic services such as MRI/CT/PET scans and scopes.</p> <p>The Sub-Limit Enhancer will provide up to an additional R48 500 per event.</p> <p>Covers services or devices such as internal prostheses, MRI/CT/PET scans, cornea or lens transplants, pacemakers and cochlear implants.</p> <p>There are no limits on this benefit, in terms of the number of claims per year.</p>
Casualty Benefit	The Casualty Benefit provides R14 000 cover per incident. Cover applies to all services delivered in the casualty ward relating to an accident or trauma event, even if the costs are paid from the medical savings account.
Benefit Extender	<p>Family Booster</p> <p>For a premature birth, more than 6 weeks before the due date, a R13 200 lump-sum payment will be paid.</p>
	<p>Hospital Booster</p> <p>A lump-sum payment, related to the length of the hospital stay, will be paid in the event of an accident or premature birth.</p> <ul style="list-style-type: none"> From day 1 to day 13, a payment of R350 per day will be made From day 14 to day 20, a payment of R700 per day will be made From day 21 to day 30, a payment of R1 400 per day will be made
	<p>Family Protector</p> <p>On death or permanent disability of an insured member on the policy, a lump-sum payment of R13 000 will be paid. If the cause of death was accidental, the benefit doubles to R26 000.</p>
	<p>Dental Reconstruction</p> <p>If dental reconstruction is required as a result of trauma or oncology treatment, all related costs up to R44 000 per event will be covered. This benefit only applies to events occurring after commencement of cover.</p>
	<p>Contribution Waiver</p> <p>If the principal member of the medical aid passes away or becomes permanently disabled, the medical aid contributions will be covered for 6 months up to a maximum amount of R5 000 per month. The Fusion policy premium will also be waived for these 6 months.</p>
	<p>Road Accident Cover</p> <p>Assistance for Road Accident Claims where the policy holder was not at fault in the vehicle accident.</p>
Fusion Lifestyle	Fusion Lifestyle combines all the rich and comprehensive Fusion Gap cover benefits with our AskNelson Lifestyle programme, ensuring cover for both physical & mental wellness. Fusion Lifestyle is available to employer groups of 20 or more employees only on a compulsory basis. Please refer to the KaeloLifestyle brochure for details on the AskNelson Programme.
Maximum Annual Benefit Limit	The maximum annual benefit payable for claims by an insured person under this policy is limited to a maximum of R157 000.

Policy exclusions

In order to ensure the long term sustainability of Fusion, certain exclusions will apply. The main exclusions are listed below - for more detail, please refer to the policy document:

- Day-to-day claims, unless otherwise specified
- Claims not approved by, excluded by or paid as an ex-gratia by the medical aid
- Co-payment/deductible that is not a fixed Rand amount (excluding oncology co-payments)
- Any penalty co-payment, deductible or limitation applied to the medical aid benefits for non-adherence to rules or authorisation procedures (unless specified in these benefits)
- Specialised dentistry such as implants, crowns, bridges, orthognathic surgery, etc. (does not apply to basic in-hospital dentistry, e.g. wisdom extractions or fillings for young children)

Terms and Conditions of cover

- Claims that are older than 4 months
- Waiting periods may apply to cover. Check the policy schedule or contact us directly
- Cover is only applicable to the principal insured, spouse and children up to the age of 26
- Families covered on two different medical aids will be covered by a single Fusion policy
- A spouse who is a dependant on their partner's medical aid can take out a Fusion policy and the family will be covered
- This brochure is a summary of the cover - please refer to the policy document for all conditions of cover or contact us directly
- In terms of the policy rules, it is a requirement that all persons covered under this policy are active members of a registered medical aid