

MED-EXTEND

Monthly premium:

Per family: R443 for under 65yrs | R658 for 65yrs+

FIND OUT MORE



Benefits

IN-HOSPITAL PROCEDURES FUNDED BY YOUR MEDICAL SCHEME

Increases the Medical Aid rate up to 300%. (e.g. Specialists, GPs, Anaesthetists, Radiology, Pathology, Consumables, etc.). Subject to the Overall Annual Limit

DEFINED PROCEDURES EXCLUDED BY YOUR MEDICAL SCHEME

Med-Extend will assist in paying for Defined Procedures that have been excluded by your Medical Scheme up to a specified rand value, as listed below. Subject to the Overall Annual Limit

CO-PAYMENT COVER

R7 500 per admission. Limited to 2 claims per family per annum. Subject to the Overall Annual Limit

Added benefits

MEDICAL SCHEME CONTRIBUTION WAIVER

Up to R9 000 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 for your Med-Extend Policy for 12 months; in the event of death or permanent and total disability as a result of an accident, of the contribution payer

COMPLIMENTARY INTERNATIONAL TRAVEL COVER

Turnberry has secured free international travel cover for policyholders which provides R5 million medical emergency cover. We have also negotiated preferential rates for top up benefits for travellers under the age of 69. This benefit is provided through Santam Travel Insurance and does not form part of your GAP cover product, it is a value-added product with its own terms and conditions. Notification of travel required 48 hours prior to departure from RSA

Out-of-hospital benefits

CASUALTY BENEFIT FOR ACCIDENT AND ILLNESS

R5 500 per family per annum. The Casualty Benefit for Illness will be restricted to between the hours of 6pm – 6am Mondays – Fridays, Saturdays, Sundays and Public Holidays

MRI AND CT SCAN COVER

Covers the cost of MRI and CT scans when there is no benefit available on your Medical Scheme. Limited to R6 500 per event and 1 claim 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 300% 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

MedBoost

MedBoost provides a lump sum benefit pay-out when you need to undergo a Defined Procedure and have been claim free for a number of years. The MedBoost pay-out would depend on the number of consecutive claim free years you have had as per the table provided.

Number of claim free years	MedBoost pay-out
3 years	R4 000
4 years	R5 200
5 years	R6 300
5+ years	R7 500

Refer to page on Waiting Periods

Defined Procedures	Benefit
Arthroscopic surgery	R85 000
Back or neck surgery	R85 000
Bunion surgery	R26 000
Cochlear implant, auditory brain implant and internal nerve stimulator surgery	R110 000
Dental procedures for impacted teeth for children younger than 21 years	R26 000
Dental procedures for reconstructive surgery required due to an accidental event	R110 000
Functional nasal surgery	R37 000
Joint replacement surgery	R75 000
Knee or shoulder surgery (excl joint replacements and arthroscopic surgery)	R42 000
Non-Cancerous breast conditions	R32 000
Oesophageal reflux and hiatus hernia surgery	R80 000
Removal of varicose veins	R33 000
Skin disorders (including benign growths and lipomas)	R33 000
Endoscopic procedures	R11 000
Adenoidectomy, myringotomy (grommets), tonsillectomy	R18 000

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.

Med-Extend has been designed to assist clients with
medical expense shortfalls
 for Specialists and with covering Defined Procedures that
 have been excluded on their specific Medical Scheme option.

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
- 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



FOR MORE
INFORMATION
[CLICK HERE](#)

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.