



Cura Administrators (Pty) Ltd is an authorised Financial Services Provider (FSP:26848) underwritten by GENRIC Insurance Company Limited (FSP: 43638). GENRIC is an authorised Financial Services Provider and licensed non-life insurer

Telephone: 010 021 0260 I Email: mail@curaadmin.co.za I Website: www.curaadmin.co.za

Specialist Consultations: Only the gap portion of the Specialist Consultation will be covered for out of Hospital procedures.	No Benefit	No Benefit	No Benefit	No Benefit	R500 / Claim Maximum of 2 claims per annum	R500 / Claim Maximum of 3 claims per annum	R500 / Claim Maximum of 4 claims per annum
Dental procedures: Due to accidental impact resulting in severe physical injury or due to cancer. Implants are excluded.	R2 500 / Policy per annum	R5 000 / Family per annum	No Benefit	No Benefit	R7 500 / Family per annum	R10 000 / Family per annum	R10 000 / Family per annum
Shortfall on Consumables In-hospital: Covers shortfalls on disposable items such as surgical gloves, bandages and gauze.	No Benefit	R4 000 / Insured	R6 000 / Insured	R6 000 / Insured	R6 000 / Insured	R6 000 / Insured	R6 000 / Insured
Casualty Benefit: The cost of emergency medical treatment or a surgical procedure performed in the hospital casualty unit, should such cost not be covered by the medical scheme. Emergency Triage Index applies. (Includes: Orange and Red triage. Excludes: medical appliances and take home medication).	R15 000 / Policy	R10 000 / Family	R10 000 / Family	R10 000 / Family	R12 500 / Family	R10 000 / Insured	R12 500 / Insured
Trauma Counselling: This benefit covers counselling sessions with registered counsellor or clinical psychologist that may be required after a serious or traumatic event. Must receive counselling within (1) one year of trauma incident.	No Benefit	No Benefit	R10 000 / Family	R10 000 / Family	R10 000 / Family	R10 000 / Insured	R10 000 / Insured
Additional Care Cover: Covers stay at a registered sub-acute or step-down facility for rehabilitation treatment, including therapy provided by on-site therapists (Sub-limit per policy and once Medical Scheme benefit limits are depleted).	No Benefit	No Benefit	No Benefit	No Benefit	R4 000 / Family	R5 000 / Family	R8 000 / Family

Additional Benefits (These benefits do not aggregate to the R193 000 cap per insured)								
Cancer Lump Sum Benefit: Stage 2 Cancer and higher. Excludes pre-existing Cancer and Skin Cancer.	No Benefit	No Benefit	No Benefit	No Benefit	No Benefit	Once-Off R10 000 / Insured	Once-Off R15 000 / Insured	
Accidental Death Benefit: Must meet the definition of Accidental.	No Benefit	No Benefit	No Benefit	No Benefit	No Benefit	R10 000 / Insured	R10 000 / Insured	
Premature Birth: Lump Sum Benefit (Birth between 24 to 34 weeks of pregnancy).	No Benefit	No Benefit	No Benefit	No Benefit	R2 500 / policy	R2 500 / policy	R5 000 / policy	
International Medical Travel Cover: Maximum of 90 days per trip. Maximum age is 80 years at next birthday.	No Benefit	No Benefit	No Benefit	R5 million per Insured	R5 million per Insured	R5 million per Insured	R5 million per Insured	
12 Months Medical Scheme Premium Waiver: Accidental Death and Permanent Disability of Principal member as a result of an accident.	No Benefit	No Benefit	Maximum R5 000 / month	Maximum R5 500 / month	Maximum R5 500 / month	No Maximum per month	No Maximum per month	
Gap Premium Waiver: Accidental Death and Permanent Disability of Principal member as a result of an accident.	No Benefit	No Benefit	No Benefit	3 Months	6 Months	12 Months	12 Months	
Monthly Premium per Individual <65 years	Individual	R182.00	R281.00	R397.00	R437.00	R557.00	R623.00	
Monthly Premium per Family <65 years	(18 to 27 Years)	R286.00	R434.00	R463.00	R514.00	R658.00	R748.00	
Monthly Premium per Individual / Family >65 years	R170.00	R428.00	R602.00	R625.00	R704.00	R908.00	R990.00	

2023 CURA BENEFITS AND LIMITS SUMMARY



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	CURA GAP STUDENT	CURA GAP BASIC	CURA GAP STANDARD	CURA GAP ADVANCED	CURA GAP ADVANCED PLUS	CURA GAP ULTIMATE	CURA GAP ULTIMATE PLUS
Overall Annual Limit of R193 000 per Insured: (Limit subject to regulatory amendment).	v	V	v	V	V	v	V
Cover for PMB's:	V	V	V	V	V	V	V
Gap Cover:	Up to 400% (In-hospital procedures only)	Up to 500% (In-hospital procedures only)	Up to 500%	Up to 500%	Up to 500%	Up to 600%	Up to 600%
In-hospital Co-payment: (MRI/CT scans out-of-hospital included)	OAL (R193 000)	OAL (R193 000)	OAL (R193 000)	OAL (R193 000)	OAL (R193 000)	OAL (R193 000)	OAL (R193 000)
Co-payment: Non-DSP Hospital	No Benefit	No Benefit	No Benefit	R8 000 / Family	R10 000 / Family	R12 500 / Insured	R15 000 / Insured
Sub-limitations: in and out of hospital as per master policy	No Benefit	No Benefit	No Benefit	R15 000 / Family	R25 000 / Family	R70 000 / Insured	R70 000 / Insured
Internal Prosthesis:	No Benefit	No Benefit	No Benefit	Included in sub-limit	Included in sub-limit	Included in sub-limit	Included in sub-limit
Sub-limitations on Intra- Ocular Lenses:	No Benefit	No Benefit	No Benefit	R9 000 / lens per year	R9 000 / lens per year	R9 000 / lens per year	R9 000 / lens per year
External Prosthesis:	No Benefit	No Benefit	No Benefit	No Benefit	No Benefit	R2 000 / Family	R5 000 / Family
External Medical Appliances: Limited to CPAP Machine, Hearing Aids and Compression stockings (DVT treatment). Only covers the Gap portion or once medical scheme limit has been depleted.	No Benefit	No Benefit	No Benefit	No Benefit	No Benefit	R2 500 / Family	R5 000 / Family
Radiology and Pathology Services: Combined capped amount where a member's available out of hospital benefits and / or savings of any kind with an annual limit indicated by the medical scheme are depleted.	No Benefit	No Benefit	No Benefit	R10 000 / Family	R12 000 / Family	R10 000 / Insured	R12 000 / Insured
Oncology treatment: Approved treatment after oncology limit (Excess R200 000) have been reached including copayments on terms such as biological medication, radiotherapy, and chemotherapy per treatment cycle.	No Benefit	No Benefit	No Benefit	R100 000 / Insured	R100 000 / Insured	OAL (R193 000)	OAL (R193 000)

다. CURA GAP COVER

Gap Cover is an Insurance Product that provides cover for you and your immediate family for the shortfall (Gap) resulting from any Medical Practitioner charging above the Medical Scheme tariff for in-hospital and certain outof-hospital surgical procedures.

The insured will receive a benefit equal to the Gap (subject to limitations) for in-hospital and specified out-patient treatment. The Gap is defined as services rendered by a Medical Practitioner who charges above the Medical Scheme tariff.

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GENERAL EXCLUSIONS

The Product Provider shall not be liable for costs incurred for hospitalisation, bodily injury, sickness, or related disease directly or indirectly because of or in consequence of:

- Exposure to discharged nuclear weaponry fallout or by ionising radiation or contamination by radioactivity from any nuclear matter or from any nuclear waste from the combustion of nuclear fuel. For this exception, combustion shall include any self-sustaining process of nuclear fission.
- Suicide, attempted suicide, or intentional self-injury (no benefit will be payable under this policy where a member commits suicide within 12months of the inception date of the policy);
- Cosmetic surgery shall include surgery for breast reduction or reconstruction unless necessary subsequent to having undergone a mastectomy due to cancer.
- A routine physical or any procedure of a purely diagnostic nature, or any other examination where there is no indication of impaired health nor laboratory diagnostics or X-rays, except in the course of a previously diagnosed condition.
- Consuming any drug or narcotic unless prescribed by and taken in accordance with the instructions of a registered medical practitioner (other than the insured person) or drug addiction.
- An event directly attributable to the insured person having a blood alcohol concentration exceeding the legal permitted level, or the insured person presenting with alcoholism or an illness resulting from alcohol abuse.
- Participation in:
 - Active military duty, police duty, police reservist duty, civil commotion, labour disturbances, riot, strike, or the activities of locked out workers.
 - Aviation other than as a passenger (excl. commercial pilots).
 - Any form of race or speed test, other than on foot or nonmechanically propelled vehicle, vessel, craft, or aircraft.
- Any procedure not covered or declined by the medical scheme, Drug Addiction.
- No benefits shall be payable for an insured event for which the insured person received treatment or advice 12 months prior to becoming an insured person. This exclusion applies to the first 12 months of cover only.
- No benefits shall be payable for pregnancy or childbirth for a period of 9 months from inception of the policy; Investigations, treatment or surgery for artificial insemination or hormone treatment for infertility.
- Depression, insanity or mental stress or psychotic/psycho- neurotic disorders.
- No benefits shall be payable in the event of fraudulent claim submission.

HOW TO CLAIM

All required relevant documents must be submitted to us within 180 (one hundred and eighty) days after the event date. Claims can be emailed to claims@curaadmin.co.za.

Documents Required:

- Cura Administrators claim form completed and signed by the policyholder.
- Detailed hospital and related accounts substantiating your claim.
- Medical scheme statement reflecting all payments by medical scheme for treatment dates of health event.
- Medical reports substantiating the clinical information or any other documentation if requested by our claims team.
- Pre-authorisation letter from medical scheme for co-payment claims.
- Proof of banking details
- Value Added Benefit claims: documentation and certification which may include reports from a registered medical practitioner confirming total permanent disability.

MAXIMUM ENTRY AGE

No Maximum entry age is applicable to this policy.

Child dependants are covered until they reach the age of 21 years, with the option to continue cover as a principal insured and no new underwriting or waiting periods will apply.

The age of 21 may be extended up to 26 years in respect of an unmarried child dependant who is a full time student. Proof thereof can be provided to Cura Administrators. All newborns must be registered on this policy within 30 days after birth.

WAITING PERIODS APPLICABLE

- 3-month general waiting period.
- 12-month waiting period for pre-existing conditions.
- 9-month waiting period on pregnancy.

Concessions on the above waiting period will be considered for group schemes.



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