



Discovery

2019

GAP COVER

## Why gap cover from Discovery?

*You and your family already have medical scheme cover, but unexpected medical costs, including when healthcare professionals charge more than what your medical scheme pays, or when you have a life-changing event, can place significant financial strain on your family.*

*Gap Cover from Discovery is a cost-effective solution that gives you additional financial protection against these unforeseen costs.*

### 01 In- and out-of-hospital cover

Discovery Gap Cover gives you rich protection against shortfalls in medical scheme cover for specialist treatment received in-hospital and extended cover for specific shortfalls incurred out-of-hospital

### 02 Extended cover for scopes and scans

You get cover for co-payments and deductibles that apply to MRI and CT scans out-of-hospital and endoscopies performed in-hospital

### 03 Comprehensive cover for cancer

Discovery Gap Cover provides additional funding to help cover oncology co-payments. Discovery Supplementary Gap Cover helps fund high-cost treatments and gives you access to advanced genomic sequencing for certain cancers

### 04 International travel cover

Discovery Gap Comprehensive provides cover for shortfalls on approved international claims while you travel outside of South Africa

### 05 Hassle-free payments

With Discovery Gap Cover, you do not need to submit a separate claim to us. Gaps are identified, assessed and paid once the medical scheme claim has been processed

### 06 Affordable premiums

Starting at just R95 for a single member for Discovery Gap Cover and R70 for Discovery Supplementary Gap Cover, you get cost-effective protection at competitive rates

This brochure is a summary of the key features and benefits of Discovery Gap Cover and Discovery Supplementary Gap Cover. You can read full details on [www.discovery.co.za](http://www.discovery.co.za) and in your policy schedule after activating the product. Discovery Gap Cover and Discovery Supplementary Gap Cover are insurance products. This is not a medical scheme and the cover is not the same as that of a medical scheme. These policies are not a substitute for medical scheme membership. Discovery Gap Cover is a short-term insurance policy, underwritten by Discovery Insure Ltd, registration number 2009/011882/06, an authorised financial services provider. Discovery Supplementary Gap Cover is a long-term insurance policy, underwritten by Discovery Life Limited. Registration number 1966/003901/06, is a registered long-term insurer, and an authorised financial services and registered credit provider, NCR Reg No. NCRCP3555.



# Discovery Gap Cover and Discovery Supplementary Gap Cover

*Insuring you and your family against additional, unexpected health-related expenses*

## Discovery Gap Cover

You can choose between the Discovery Gap Comprehensive and Core options to suit your needs. You get cover for tariff shortfalls on in-hospital specialist claims and specific out-of-hospital costs. You also get cover for co-payments on approved endoscopies, MRI and CT scans and cancer-related claims, depending on the option you choose. An overall annual limit of R157 500 applies to each person.



**In-hospital Specialist Gap Cover**  
Pays you up to 200% of your medical scheme rate when your approved in-hospital specialist claim is higher than what your medical scheme pays your specialist



**Hospital Admission Benefit Extender**  
Provides additional cover of up to R20 000 per policy for gaps in cover over and above what is covered by In-hospital Specialist Gap Cover. Also provides cover for specific out-of-hospital shortfalls related to an authorised hospital admission or procedure. Your cover depends on the Discovery Gap Cover option you choose



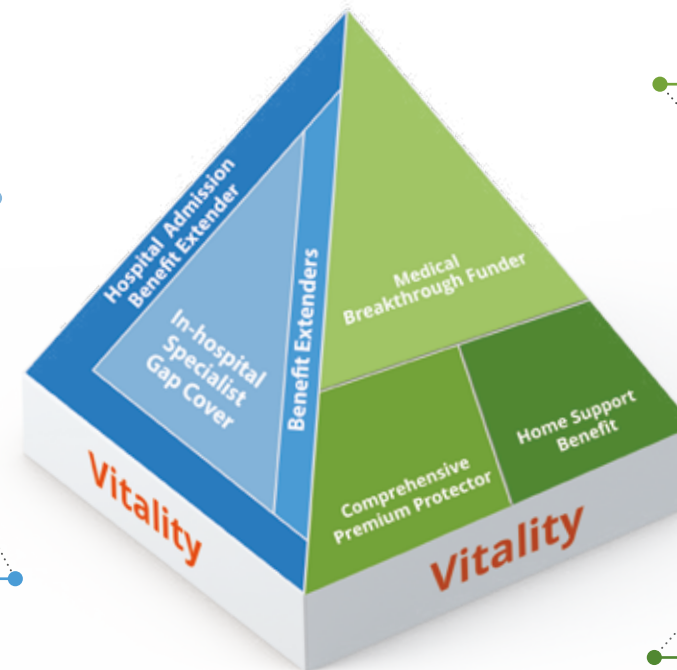
**Benefit Extenders**

**Oncology Benefit Extender**  
Provides cover of up to R100 000 a year for shortfalls on approved cancer-related claims once the medical scheme's oncology threshold has been reached. Your cover depends on the option you choose

**Travel Benefit Extender**  
Provides cover for shortfalls on approved emergency international claims incurred while you travel outside of South Africa.


**Scopes and Scans Benefit Extender**  
Provides cover for co-payments and deductibles that apply to MRI and CT scans out-of-hospital, and for endoscopies performed in-hospital.

Available on Discovery Gap Comprehensive only




## Discovery Supplementary Gap Cover


Provides lump-sum payouts, premium protection and home support when you need it most




**Medical Breakthrough Funder**  
Provides you with a lump-sum payout of up to R550 000 on diagnosis of qualifying illnesses associated with high treatment costs, as well as access to advanced genomic sequencing for certain cancers



**Comprehensive Premium Protector**  
Covers your medical scheme, Discovery Vitality and Discovery Gap Cover premiums for up to two years in the event of death, disability or severe illness



**Home Support Benefit**  
Pays you R10 000 every month for a year if you or your spouse suffer a qualifying life-changing event



**Annual PayBack**  
Pays back up to 25% of your Discovery Supplementary Gap Cover premiums every year



# Discovery Gap Cover

## You can choose from two Discovery Gap Cover options

	DISCOVERY GAP COMPREHENSIVE	DISCOVERY GAP CORE
<b>In-hospital Specialist Gap Cover</b>	Provides cover of up to 200% of the medical scheme rate. This amount is over and above what your medical scheme pays	
	You will receive up to <b>R20 000</b> extra gap cover for:	You will receive up to <b>R10 000</b> extra gap cover for:
<b>Hospital Admission Benefit Extender</b>	<ul style="list-style-type: none"> <li>Shortfalls still remaining on approved specialist claims in-hospital, over and above what is covered by your In-hospital Specialist Gap Cover</li> <li>Specified out-of-hospital expenses related to your authorised hospital admission</li> </ul>	Not applicable
	<b>Oncology Benefit Extender</b> <ul style="list-style-type: none"> <li>Provides up to R100 000 per person per year, to cover shortfalls on approved cancer-related claims once you have reached your scheme's oncology threshold</li> </ul>	<b>Oncology Benefit Extender</b> <ul style="list-style-type: none"> <li>Provides up to R75 000 per person per year, to cover shortfalls on approved cancer-related claims once you have reached your scheme's oncology threshold</li> </ul>
<b>Benefit Extenders</b>	<b>Scopes and Scans Benefit Extender</b> <ul style="list-style-type: none"> <li>Provides cover for co-payments or deductibles on the hospital account for endoscopies (gastroscopy, sigmoidoscopy, proctoscopy and colonoscopy), related to an authorised hospital admission</li> <li>Provides cover for the co-payment that applies to out-of-hospital MRI and CT scans, when the balance is covered by your medical scheme</li> </ul>	Not applicable
	<b>Travel Benefit Extender</b> <ul style="list-style-type: none"> <li>You get cover for shortfalls on approved emergency medical claims while traveling outside of South Africa, including the \$150 / €100 deductible on emergency out-of-hospital claims</li> <li>This benefit also covers shortfalls on the Cleveland MyClinic second opinion consultation fee</li> </ul>	Not applicable

An overall annual limit of R157 500 applies to each person.

Discovery Gap Cover is a short-term insurance policy, underwritten by Discovery Insure Ltd, registration number 2009/011882/06, an authorised financial services provider.



## You get additional hospital cover

### In-hospital Specialist Gap Cover

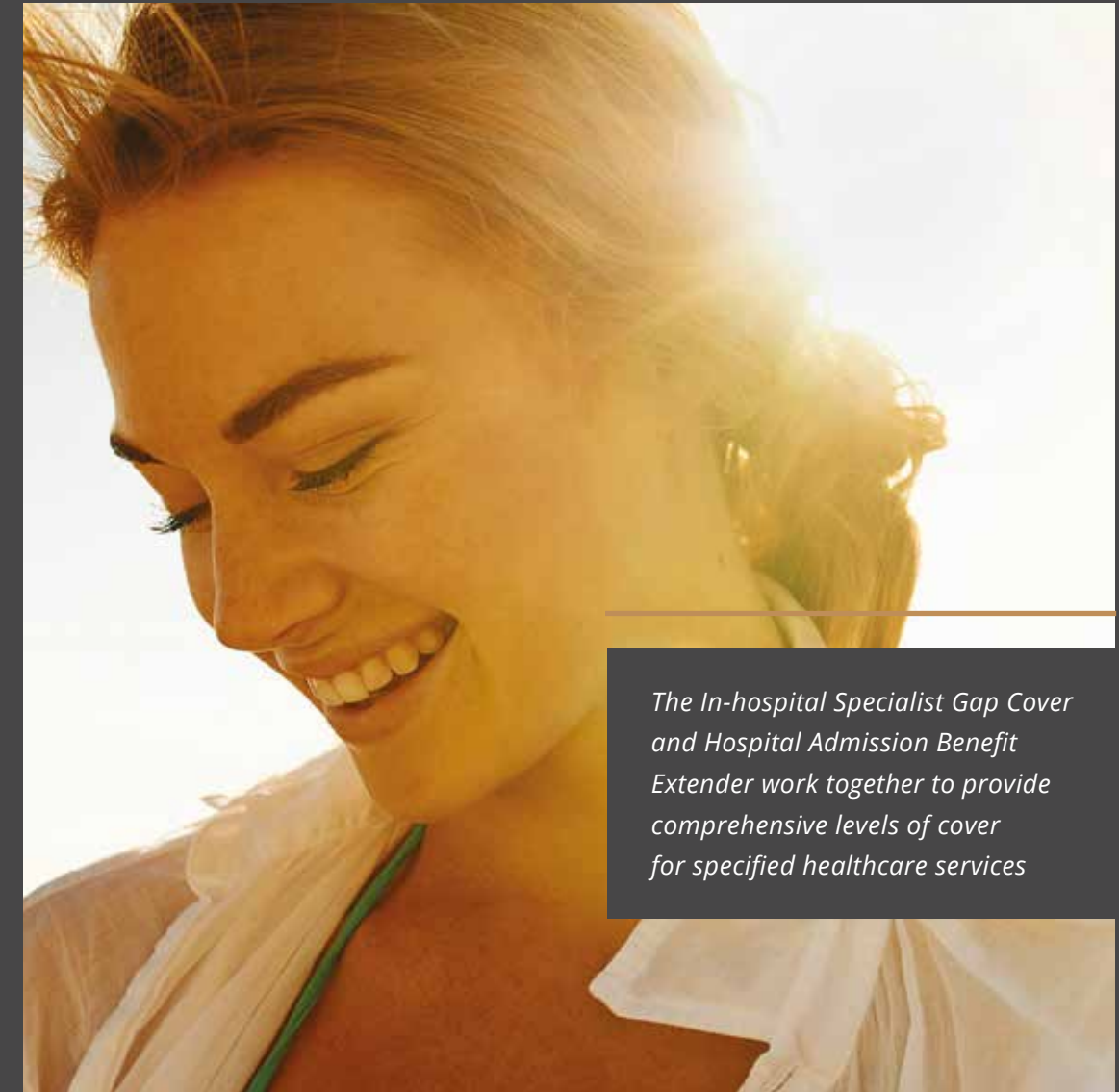
When you are admitted to hospital, your specialist may charge more than the amount covered by your medical scheme. When this happens, our gap cover pays for these tariff shortfalls on your approved specialist claims in hospital. Your dental specialist's claims qualify for funding from this benefit where the claim was funded by your scheme's hospital benefit.

*For both the Discovery Gap Comprehensive and Core options, the In-hospital Specialist Gap Cover gives you cover of up to 200% of the medical scheme rate. This amount is over and above what your medical scheme pays.*

Plan type	Medical scheme covers	In-hospital Specialist Gap Cover	Total cover for in-hospital specialist claims*
Discovery Health Medical Scheme <b>Executive Plan</b> where your medical scheme covers specialist claims in hospital up to a maximum of 300% of the scheme rate	300%		500%
Discovery Health Medical Scheme <b>Classic plans</b> where your medical scheme covers specialist claims in hospital up to a maximum of 200% of the scheme rate	200%	200%	400%
Discovery Health Medical Scheme <b>Essential and Coastal plans</b> where your medical scheme covers specialist claims in hospital up to a maximum of 100% of the scheme rate	100%		300%

**\* Gaps still experienced over and above those covered by In-hospital Specialist Gap Cover are covered by the Hospital Admission Benefit Extender**

*The Hospital Admission Benefit Extender further extends your cover for shortfalls on approved, in-hospital specialist claims up to whatever rate your specialist charges, subject to your benefit entitlements.*



*The In-hospital Specialist Gap Cover and Hospital Admission Benefit Extender work together to provide comprehensive levels of cover for specified healthcare services*

## Hospital Admission Benefit Extender

### Discovery Gap Comprehensive and Core

You will receive up to R20 000 extra gap cover on the Comprehensive option and up to R10 000 extra gap cover on the Core option, which you can use for the approved healthcare services listed below:

#### In-hospital specialist claims\*

Covers shortfalls in the third-trimester where maternity claims are higher than the amount covered by your medical scheme's Maternity Benefit.

The following additional healthcare services are covered on Discovery Gap Comprehensive: where your related hospital admission was approved by your medical scheme

#### Third-trimester maternity claims\*\*

Covers shortfalls where specific third-trimester maternity claims are higher than the amount covered by your medical scheme

#### Out-of-hospital specialist claims\*

Covers shortfalls on your admitting specialist's claims that occur within one month before a hospital admission if your admitting specialist charges more than the amount covered by your medical scheme

#### Medicine prescribed on discharge\*

Covers shortfalls on your claims for medicine to take home when you are discharged from hospital

#### Out-of-hospital radiology\*

Covers shortfalls on radiology claims that occur within one month before a hospital admission if your radiologist charges more than the amount covered by your medical scheme

#### Out-of-hospital rehabilitation\*

Covers shortfalls on claims for the professional fees charged by certain allied healthcare professionals in the month after your discharge from hospital, if your allied healthcare professionals charge more than the amount covered by your medical scheme

\* Only available to medical scheme plans with a Medical Savings Account

\*\* If your medical scheme plan does not include a Medical Savings Account, you are only covered for shortfalls on third trimester claims paid from the Scheme's maternity risk benefit

Cover starts after any applicable waiting periods have ended.

### Annual Hospital Admission Benefit Extender per Policy

The amount of additional cover you get depends on your family structure, Discovery Vitality status and health plan type, and is subject to the overall annual limit of R157 500 per person.

DISCOVERY GAP COMPREHENSIVE						
Plan	Family structure	Discovery Vitality status				
		None/Blue	Bronze	Silver	Gold	Diamond
MSA plans	Single	5 000	6 250	7 500	8 750	10 000
	Family	10 000	12 500	15 000	17 500	20 000
Non-MSA plans	Single	2 500	3 125	3 750	4 375	5 000
	Family	5 000	6 250	7 500	8 750	10 000

DISCOVERY GAP CORE						
Plan	Family structure	Discovery Vitality status				
		None/Blue	Bronze	Silver	Gold	Diamond
MSA plans	Single	2 500	3 125	3 750	4 350	5 000
	Family	5 000	6 250	7 500	8 750	10 000

# Additional benefits

## Benefit Extenders

### Oncology Benefit Extender

- Once you are registered on your scheme's oncology benefit, and you have reached the oncology threshold, the Oncology Benefit Extender will help you cover co-payments for cancer-related expenses approved by your medical scheme.
- You will receive up to R100 000, depending on the Discovery Gap Cover option you choose, to cover shortfalls on approved cancer-related claims once you have reached your scheme's oncology threshold.

Plan type	Annual benefit per person	
	Discovery Gap Comprehensive	Discovery Gap Core
Discovery Health Medical Scheme Executive and Comprehensive plans	R100 000	R75 000
Other plans	R40 000	R30 000

### Travel Benefit Extender

*On the Discovery Gap Comprehensive option you can get cover for shortfalls on emergency medical claims incurred while you were travelling outside of South Africa.*

Your policy covers the following shortfalls on International Travel Benefit claims, approved by your medical scheme:

- The \$150 / €100 deductible on emergency out-of-hospital claims
- Shortfalls on claims approved by your Scheme, once you have reached your scheme's travel limit of R5 million (\$1 million on Executive plans) per person per trip
- Shortfalls on the Cleveland MyClinic second opinion consultation fee.



## Hassle-free claims payment

- You do not need to submit a separate Discovery Gap Cover claim to us.
- By providing consent to access your claims information, we will automatically identify any potential gap cover claims, and then pay according to your Discovery Gap Cover benefits, once the medical scheme claim is processed.
- You will also receive a claims statement where you will see how your gap cover policy has covered any shortfalls.

### Scopes and Scans Benefit Extender

On the Discovery Gap Comprehensive option you get cover for co-payments that apply to:

- The hospital account for endoscopies (gastroscopy, sigmoidoscopy, proctoscopy and colonoscopy)
- Out-of-hospital MRI and CT scans, when your medical scheme covers the rest of the account.

Cover starts after any applicable waiting periods have ended.

### Eligibility for Discovery Gap Cover Comprehensive and Core options

- Only members of Discovery Health Medical Scheme qualify for Discovery Gap Cover. KeyCare plans are excluded.
- If you joined Discovery Health Medical Scheme Essential or Coastal plans from March 2017, you will need to wait 24 months before you can apply for Discovery Gap Cover.
- If you downgraded your medical scheme plan from an Executive or Classic plan to an Essential or Coastal plan from 1 March 2017, you will need to wait 24 months from then, before you can apply for Discovery Gap Cover.
- If you have an existing Discovery Gap Cover policy and later downgrade your health plan from an Executive or Classic plan to an Essential or Coastal plan, your Discovery Gap Cover policy will automatically be cancelled and you will need to wait 24 months before you may reapply.
- The new benefits described in this brochure are effective from 1 January 2019.

### Discovery Gap Cover option changes

- You can downgrade from Discovery Gap Comprehensive to the Core option at any time with 30 days' notice. This change will be effective from the first day of the following month.
- You can request an upgrade from Discovery Gap Core to the Comprehensive option at any time, with 30 days' notice and underwriting may apply.

### Exclusions

- All claims excluded by your medical scheme.
- All claims where the hospital admission was not approved by your medical scheme and you did not get an authorisation number (except for in-hospital dentistry specialist claims, where the admission is not subject to a hospital authorisation).
- Claims not processed, approved or covered by your medical scheme for any reason including plan deductibles (with the exception of MRI / CT scans and endoscopies) and where you have exceeded your available plan limits or benefit entitlements (except for International Travel Benefit limits), or if the claim is not recognised as valid by your medical scheme.
- Claims defined as out-of-hospital claims by your medical scheme, unless specified as an approved out-of-hospital claim that qualifies for funding from the policy's Benefit Extenders, as specified in your Discovery Gap Cover policy guide.
- All oncology-related co-payments related to innovative cancer treatments related to the scheme's Oncology Innovation Benefit.
- Any claim where the Discovery Gap Cover overall limit of R157 500 per person per year has been reached.

### Exclusions continued

- Any claim related to any weight-loss surgery.
- Any claim where the healthcare service or treatment was not provided by an appropriately registered specialist (except for healthcare services specified in the Hospital Admission Benefit Extender).
- Any claim that is incurred outside the borders of the Republic of South Africa or charged in any foreign currency, except claims that qualify for funding from the Travel Benefit Extender.
- Any shortfalls on your scheme's Overseas Treatment Benefit claims.
- Out-of-pocket payments, not covered by the medical scheme, such as deductibles, exclusions and amounts claimed above health plan benefit limits are excluded from Discovery Gap Cover. This does not apply to co-payments and deductibles that qualify for funding as part of Discovery Gap Comprehensive.

### Waiting periods

- We apply waiting periods and exclusions to certain healthcare services from the start date of each person's policy.
- There is an automatic three-month general waiting period for all healthcare services and treatment, except authorised emergency hospital admissions.
- There is an automatic 12-month waiting period for any claims directly or indirectly related to the treatment of pregnancy and childbirth, endometrial ablations, hysterectomy, joint replacements, scopes, including minimally invasive scopes, endoscopies, hysteroscopies and arthroscopies, cataracts, cholecystectomy, wisdom teeth, orthognathic surgery, dental implants, tonsillectomy, grommets, adenoidectomy, nasal procedures, hernia procedures and reflux surgery.
- If you or any of your dependants have a pre-existing medical condition when you apply for cover, we will exclude any claims relating to the treatment of this condition for the first 12 months of cover.
- If you can show that you have had gap cover with another insurance company for at least six months, with less than 90 days' break in cover between the time you ended your policy with them and activated your policy with us, the three-month general, 12-month automatic and 12-month pre-existing-condition waiting periods may not apply to you.





## Discovery Supplementary Gap Cover

*Provides lump-sum  
payouts, premium  
protection and home  
support when you  
need it most*

## Lump-sum payouts for severe illnesses



### Medical Breakthrough Funder

Certain severe illnesses and types of cancer are associated with extremely high treatment costs. These costs are largely driven by new, advanced technologies that can be life-saving, but also very expensive.

*The Medical Breakthrough Funder increases your access to the very latest treatments and reduces the financial burden that often accompanies these illnesses. This will assist you and your family to maintain your quality of life after a life-changing event.*

We provide you, your spouse or child with a tax-free lump-sum payout of up to R550 000 on diagnosis of certain types of cancers and other severe illnesses typically associated with high treatment costs.

You can use this lump-sum payout for any shortfalls in medical scheme cover that you would otherwise have to fund yourself, or use the money for other financial needs. The amount paid out depends on the medical condition or the type and stage of cancer. We group these amounts into four benefit categories.

#### Medical Breakthrough Funder category amounts

Category 1	R55 000
Category 2	R137 500
Category 3	R275 000
Category 4	R550 000

In addition and in line with increasing your access to breakthrough treatments, the Medical Breakthrough Funder will also assist with funding advanced genomic sequencing of certain cancers, to inform the optimal treatment regime.

The Medical Breakthrough Funder does not end after the first payout of a single claim. Cover will continue for unrelated conditions, up until the maximum claim amount of R1 000 000 per insured person. It is possible for you to qualify for a payout under more than one category at the same time. In such cases, the benefit amount is based on the condition that provides the highest payout.

## Premium protection and home support when you need it most



### Comprehensive Premium Protector

Loss of income and the additional costs that accompany a life-changing event, could make it difficult for you to pay your monthly expenses.

This benefit pays these contributions for up to two years after a qualifying life-changing event.

The Comprehensive Premium Protector also gives you the option to upgrade your medical scheme plan to a Classic Comprehensive Plan level while you receive a claim payout, enhancing your family's protection against unforeseen health events. This is subject to your medical scheme's rules.

*The Comprehensive Premium Protector will make sure that you and your family can continue membership of your medical scheme, Vitality and gap cover products in the event of a qualifying severe illness, disability or death.*

This benefit will also cover a baby born to you and your spouse within nine months of the benefit payment start date. The Comprehensive Premium Protector will not cover any other new members that you add to your medical scheme while you are receiving a claim payout.

The Comprehensive Premium Protector premiums will be paid directly to your medical scheme.



### Home Support Benefit

If there is a severe illness in your family, one of your family members may have to stop working to care for the affected person. You may also need to employ someone to help at home.

*The Home Support Benefit pays you a monthly amount of R10 000 for a year, if you or your spouse suffer a qualifying life-changing event that results in a loss of ability to perform a certain number of Activities of Daily Living. This amount can be used as you see fit.*

Activities of Daily Living are routine activities like eating, bathing and dressing that people usually do without needing assistance.





## Annual PayBack

With Discovery Supplementary Gap Cover, you can receive an Annual PayBack of up to 25% of the total premiums paid over the calendar year, based on how you manage your health and for driving well. This is paid to you at the beginning of each year.

*Our shared-value approach to insurance enables us to reward you for living a healthier, safer and more active life.*

Vitality Drive status	Vitality status				
	None/Blue	Bronze	Silver	Gold	Diamond
None/Blue/Bronze	0%	5%	7.5%	10%	15%
Silver	5%	10%	12.5%	15%	20%
Gold/Diamond	10%	15%	17.5%	20%	25%

### PayBack considerations

- For Discovery Supplementary Gap Cover, any claims will be deducted from the PayBack amount in that year.
- The Annual PayBack calculation will exclude payments made under the Comprehensive Premium Protector.

### Exclusions

- For the purposes of the Discovery Supplementary Gap Cover policy, a pre-existing condition is defined as any injury, illness or physical defect that arose prior to the commencement or reinstatement dates of the policy that the principal, spouse or child suffered from, was aware of, or received medical treatment or advice for. Any pre-existing condition is specifically excluded.
- The principal life or spouse must be younger than 60 years of age in order to apply for Discovery Supplementary Gap Cover. Cover for all individuals will cease at the end of the month before they turn 65 years old.
- Members on Discovery Health Medical Scheme KeyCare plans or their equivalent plans on other schemes do not qualify for Discovery Supplementary Gap Cover.





# Premiums

## Discovery Gap Comprehensive

Age at entry of the oldest member on the Scheme plan	Discovery Health Medical Scheme Executive and Classic plans		Discovery Health Medical Scheme Essential and Coastal plans	
	Single member	Family	Single member	Family
0 - 54	145	249	275	620
55 - 64	249	375	499	949
65+	315	520	665	1250

## Discovery Gap Core

Age at entry of the oldest member on the Scheme plan	Discovery Health Medical Scheme Executive and Classic plans		Discovery Health Medical Scheme Essential and Coastal plans	
	Single member	Family	Single member	Family
0 - 54	95	159	185	435
55 - 64	165	195	425	635
65+	195	289	635	1015

- Your Discovery Gap Cover premium depends on the option you choose, your medical scheme plan and the age that the oldest member on your medical scheme plan will turn in the year of applying for the policy.
- Every person on your medical scheme plan must also be on your Discovery Gap Cover policy, subject to underwriting.
- If the oldest person leaves or joins the Scheme, or your family structure or plan type changes, your Discovery Gap Cover policy may be re-rated.

## Discovery Supplementary Gap Cover

- From as little as R70, you can get Discovery Supplementary Gap Cover.
- Your premium for Discovery Supplementary Gap Cover will depend on your age, smoker status and the number of members on your medical scheme plan.
- Your spouse's premium will depend on their age and smoking status. If your spouse is on a separate medical scheme plan, they will have to take out a separate Discovery Supplementary Gap Cover policy.



HOW TO JOIN

*Speak to  
your financial  
adviser or visit  
[www.discovery.co.za](http://www.discovery.co.za)*

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