



Discovery Gap Cover

2026

COVER THAT BRIDGES
THE GAP, ALWAYS.

Reimagining your healthcare

You and your family already have medical scheme cover, but unexpected medical costs can still place significant financial strain on your family.

This can happen when healthcare professionals charge more than what your medical scheme pays or when you have a life-changing event.

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



This brochure is a summary of the key features and benefits of Discovery Gap Cover. You can read full details on www.discovery.co.za and in your policy schedule after activating the product. Discovery Gap Cover is an insurance product. This is not a medical scheme and the cover is not the same as that of a medical scheme. It is not a substitute for medical scheme membership. Discovery Gap Cover is a non-life insurance policy, underwritten by Discovery Insure Ltd, registration number 2009/011882/06, a licensed insurer and an authorised financial services provider.

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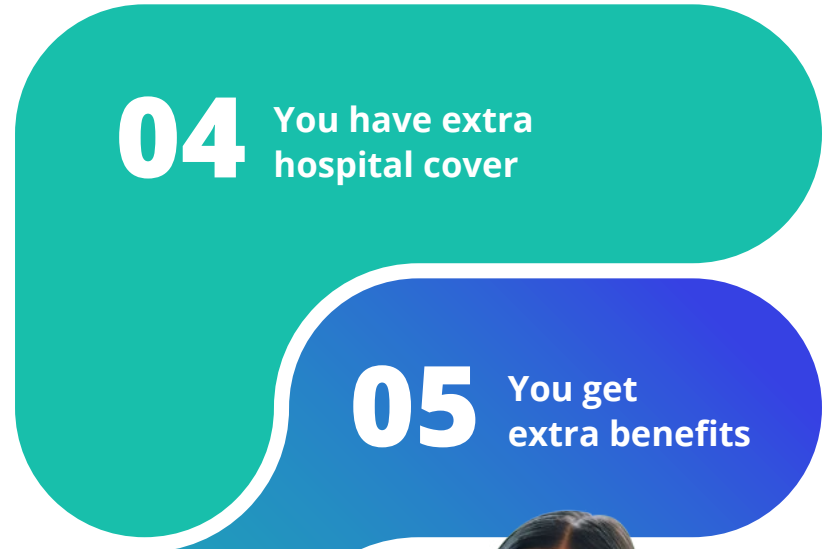


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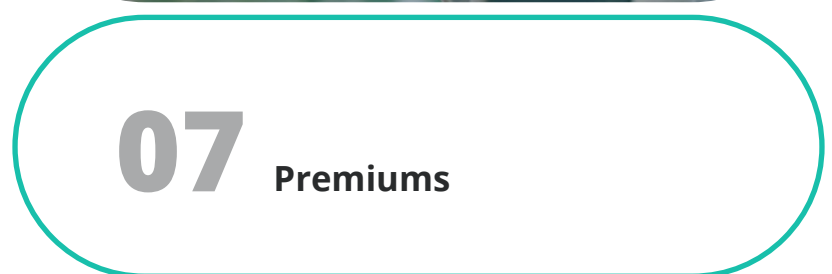


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Why Gap Cover from Discovery?



In- and out-of-hospital cover

Discovery Gap Cover gives you rich protection against shortfalls you have on specialist treatment in hospital and extended cover for specific shortfalls you have on out-of-hospital care.



Extended cover for scopes and scans

You get cover for co-payments and deductibles that apply to MRI and CT scans when they are done out of hospital, and digestive endoscopies that are done in hospital or in-rooms.



Comprehensive cover for cancer

Discovery Gap Cover provides additional funding to help cover oncology co-payments



International travel cover

Discovery Gap Comprehensive covers shortfalls on approved international claims while you travel outside South Africa.



Hassle-free payments

With Discovery Gap Cover, you don't have to submit a separate claim to us. We automatically identify gaps and then assess and pay once the medical scheme claim has been processed.



Affordable premiums

You get cost-effective protection at competitive rates starting at only R53 for Gap Active, from R171 for Gap Core and R270 for Gap Comprehensive for a single member a month.

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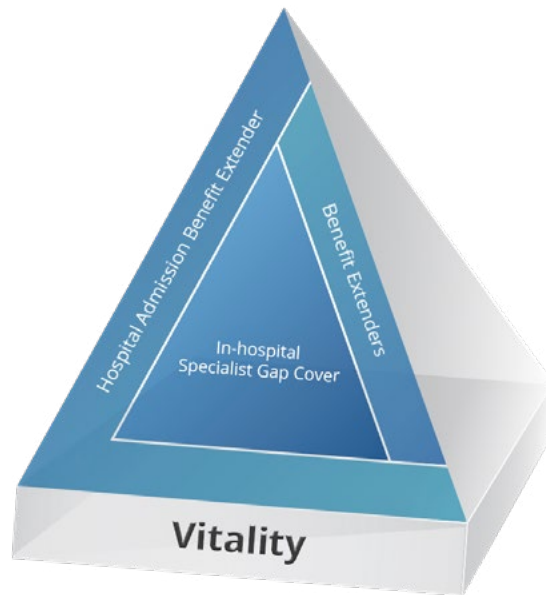
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Discovery Gap Cover

You can choose between the Discovery Gap Comprehensive, Core and Active options to meet your needs. You get cover for tariff shortfalls on in-hospital specialist claims, cancer-related claims, specific out-of-hospital costs, private ward cover, cover for international claims, and scopes and scans, depending on the option you choose.

In-hospital Specialist Gap Cover

In-hospital Specialist Gap Cover gives you cover of up to 500% of the medical scheme rate on Discovery Gap Comprehensive, up to 250% on Discovery Gap Core and up to 100% on Discovery Gap Active when your approved in-hospital specialist claim is higher than what your medical scheme pays your specialist.



Hospital Admission Benefit Extender

- On the Comprehensive option, you get an extra benefit of up to R15,000 on each policy to cover any additional gaps over and above what is covered by In-hospital Specialist Gap Cover, as well as private ward cover and specific out-of-hospital shortfalls related to an authorised hospital admission.
- On the Core option, you get an extra benefit of up to R7,500 per policy to cover any additional gaps over and above what is covered by In-hospital Specialist Gap Cover.
- On the Active option, in addition to cover provided by the In-hospital Specialist cover, you are also covered for the procedural deductible incurred under the Active Smart scheme plan, up to a maximum of R7,750 per event. This cover is subject to funds available in your overall annual limit.

An overall annual limit of R219,846 applies to each person.

* Only available on the Discovery Gap Cover Comprehensive option

Benefit Extenders

Oncology

Covers shortfalls of up to R110,000 a year on the Comprehensive option or up to R85,000 a year on the Core option for approved cancer-related claims once you reach the medical scheme's oncology threshold.

Travel*

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

Scopes and Scans*

Co-payments and deductibles that apply to MRI and CT scans when they are done out of hospital, and digestive endoscopies that are done in hospital or in-rooms.

Vitality is a separate wellness product, sold and administered by Discovery Vitality (Pty) Ltd, registration number 1999/007736/07. Limits, terms and conditions apply.

Discovery Gap Cover

The In-hospital Specialist Gap Cover and Benefit Extenders work together to provide comprehensive levels of cover for specified healthcare services.

	DISCOVERY GAP COMPREHENSIVE	DISCOVERY GAP CORE	DISCOVERY GAP ACTIVE
In-hospital Specialist Gap Cover	Provides cover of up to 500% of the medical scheme rate over and above what your medical scheme pays	Provides cover of up to 250% of the medical scheme rate over and above what your medical scheme pays	Provides cover of up to 100% of the medical scheme rate over and above what your medical scheme pays
	You will receive up to R15 000 extra gap cover for:	You will receive up to R7,500 extra gap cover for:	
Hospital Admission Benefit Extender	Shortfalls still remaining on approved specialist claims in-hospital, over and above what is covered by your In-hospital Specialist Gap Cover		You are covered for the procedural deductible incurred under the Active Smart scheme plan, up to a maximum of R7,750 per event. This cover is subject to funds available in your overall annual limit
	Specified out-of-hospital expenses related to your authorised hospital admission		
	Private ward cover for an approved hospital admission, subject to hospital availability. It covers the difference in cost between the general ward fee your medical scheme covers for your authorised hospital admission and the private ward fee you are charged when you are admitted to a private ward, subject to a maximum of 5 nights a person a year		
Benefit Extenders	Oncology Benefit Extender <ul style="list-style-type: none"> Provides up to R110 000 a person a year, to cover shortfalls on approved cancer-related claims once you have reached your scheme's oncology threshold 	Oncology Benefit Extender <ul style="list-style-type: none"> Provides up to R85,000 a person a year, to cover shortfalls on approved cancer-related claims once you have reached your scheme's oncology threshold 	
	Scopes and Scans Benefit Extender <ul style="list-style-type: none"> Provides cover for co-payments or deductibles on the hospital account for endoscopies (gastroscopy, sigmoidoscopy, proctoscopy and colonoscopy), related to an authorised hospital admission 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 		
	Travel Benefit Extender <ul style="list-style-type: none"> 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. This benefit also covers shortfalls on the Cleveland MyClinic second-opinion consultation fee 		

An overall annual limit of R219,846 applies to each person.

You can choose from three Discovery Gap Cover options: Gap Comprehensive, Gap Core and Gap Active.

You have 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 in-hospital claims.

Your dental specialist's claims also qualify for funding from this benefit where the claim was funded by your scheme's hospital benefit.

Plan type	Medical scheme covers	DISCOVERY GAP COMPREHENSIVE		DISCOVERY GAP CORE		DISCOVERY GAP ACTIVE	
		In-hospital Specialist Gap Cover	Total cover for in-hospital specialist claims*	In-hospital Specialist Gap Cover	Total cover for in-hospital specialist claims*	In-hospital Specialist Gap Cover	Total cover for in-hospital specialist claims
Discovery Health Medical Scheme Executive Plan covers specialist claims in-hospital up to a maximum of three times (300%) of the Scheme Rate	300%		800%		550%		400%
Discovery Health Medical Scheme Classic plans covers specialist claims in-hospital up to a maximum of two times (200%) the Scheme Rate	200%	500%	700%	250%	450%	100%	300%
Discovery Health Medical Scheme Essential and Coastal plans covers specialist claims in-hospital up to a maximum of the Scheme Rate (100%)	100%		600%		350%		200%

In-hospital Specialist Gap Cover gives you cover of up to **500% of the medical scheme rate on Discovery Gap Comprehensive**, up to **250% on Discovery Gap Core** and up to **100% on Discovery Gap Active**.



On the Gap Comprehensive and Gap Core options, the Hospital Admission Benefit Extender further extends your cover for shortfalls on approved, in-hospital specialist claims up to the rate your specialist charges, subject to your benefit entitlements.



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

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Annual Hospital Admission Benefit Extender

For the Gap Comprehensive and Gap Core plans, the amount of additional cover you get depends on your family structure, Discovery Vitality Health status and health plan type. An overall annual limit of R219,846 applies to each person.

Discovery Gap Comprehensive

PLAN	FAMILY STRUCTURE	DISCOVERY VITALITY HEALTH STATUS				
		NONE/BLUE	BRONZE	SILVER	GOLD	DIAMOND
MSA plans*	Single	R3,750	R4,685	R5,625	R6,565	R7,500
	Family	R7,500	R9,375	R11,250	R13,125	R15,000
Non-MSA plans**	Single	R1,875	R2,345	R2,815	R3,280	R3,750
	Family	R3,750	R4,685	R5,625	R6,565	R7,500

Discovery Gap Core

	FAMILY STRUCTURE	DISCOVERY VITALITY HEALTH STATUS				
		NONE/BLUE	BRONZE	SILVER	GOLD	DIAMOND
	Single	R1,875	R2,345	R2,815	R3,280	R3,750
	Family	R3,750	R4,685	R5,625	R6,565	R7,500

* Plans with a Medical Savings Account

** Plans without a Medical Savings Account.

The Vitality integration benefits do not apply to Gap Active.

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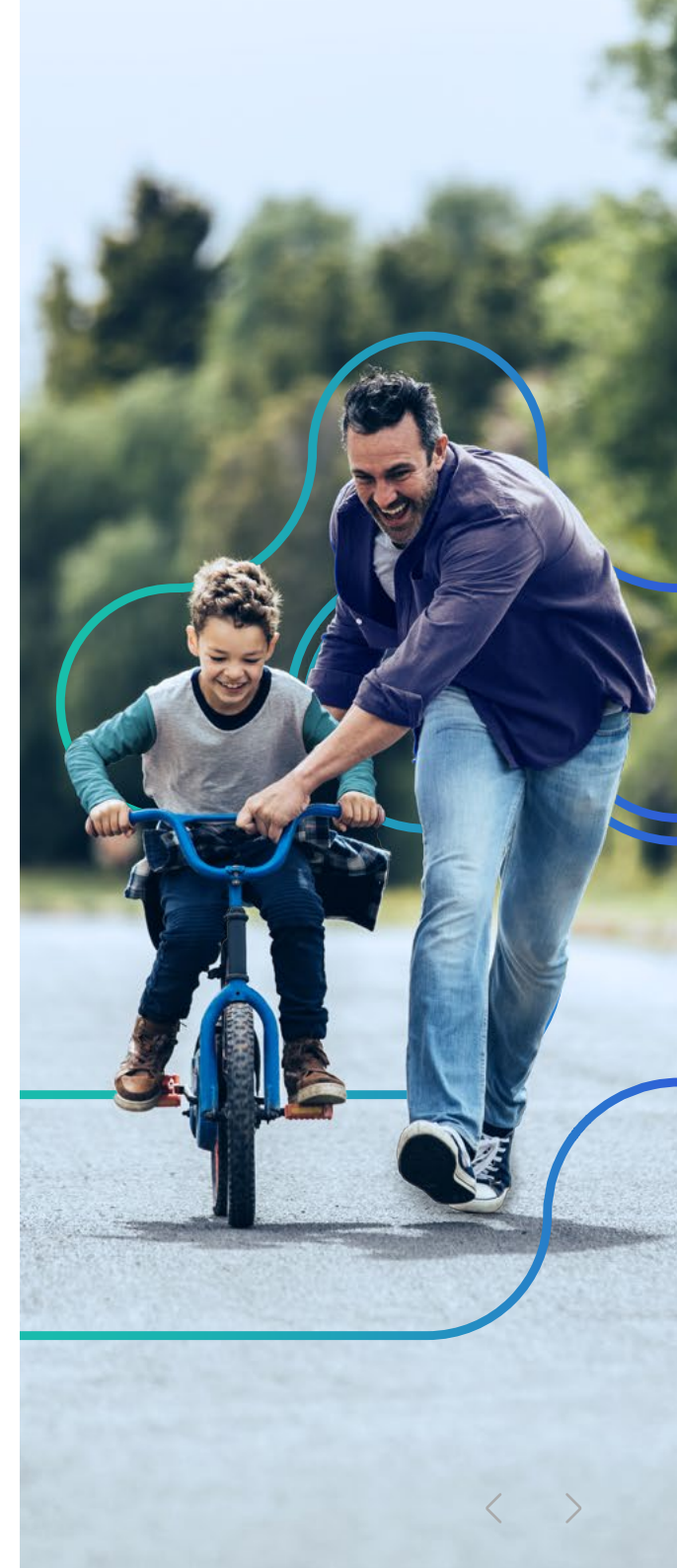
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You have extra hospital cover

Hospital Admission Benefit Extender

Discovery Gap Active

Under the Active option, in addition to cover provided by the In-hospital Specialist benefit, you are also covered for the procedural deductible incurred under the Active Smart scheme plan, up to a maximum of R7,750 per event. This cover is subject funds available in your overall annual limit.

Discovery Gap Comprehensive and Core

You have up to R15,000 extra gap cover on the Comprehensive option and up to R7,500 extra gap cover on the Core option, which you can use for shortfalls still remaining on approved specialist claims in-hospital, over and above what is covered by your In-hospital Specialist Gap Cover.

Discovery Gap Comprehensive

On Discovery Gap Comprehensive, the Hospital Admission Benefit Extender covers the following extra healthcare services where your hospital admission was approved by your medical scheme:



Private ward cover*

Covers the difference in cost between the general ward fee covered by your medical scheme and the private ward fee for approved hospital admissions.



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.



Third-trimester maternity claims***

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



Medicine prescribed on discharge**

Covers shortfalls on your claims for medicine provided 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.

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

* Subject to a maximum of 5 nights a person a year and subject to hospital availability

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

*** If your medical scheme plan does not include a Medical Savings Account, your gap cover only covers shortfalls on third trimester claims paid from the Scheme's maternity risk benefit

Additional Benefits



Benefit Extender

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 get up to R110,000 to cover shortfalls on approved, cancer-related claims once you have reached your scheme's oncology threshold. The amount depends on the Discovery Gap Cover option you choose.

ANNUAL BENEFIT PER PERSON	DISCOVERY GAP COMPREHENSIVE	DISCOVERY GAP CORE	DISCOVERY GAP ACTIVE
Discovery Health Medical Scheme Executive and Comprehensive plans	R110,000	R85,000	Not available
Other plans	R45,000	R35,000	

Scopes and Scans Benefit Extender

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

- The hospital account for approved endoscopies (gastroscopy, sigmoidoscopy, proctoscopy and colonoscopy)
- Digestive endoscopies that are done in-rooms.
- Out-of-hospital MRI and CT scans, when your medical scheme covers the rest of the account.

Travel Benefit Extender

On the Discovery Gap Comprehensive option you can get cover for shortfalls on emergency medical claims incurred while travelling outside of South Africa. Your policy covers the following shortfalls on International Travel Benefit claims, approved by your medical scheme:

- The \$150 or €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.

Cover starts after any applicable waiting periods have ended

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.

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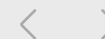
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Eligibility for Discovery Gap Cover

Comprehensive, Core and Active options

Only members of Discovery Health Medical Scheme qualify for Discovery Gap Cover. KeyCare plans are excluded. If you downgrade your health plan to a KeyCare plan, your Gap Cover policy will be cancelled.

Exclusions

- All claims excluded by your medical scheme plan
- 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 and CT scans, as well as 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 that are part of innovative cancer treatments related to the scheme's Oncology Innovation Benefit
- Any claim where after you have reached the Discovery Gap Cover overall limit of R219,846 per person per year has been reached
- Any claim related to 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 Gap Cover Comprehensive 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
- 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's Benefit Extenders or the procedural deductible of R7,750 that applies on Active Smart scheme option, if you are on Gap Active
- Any claims related to pregnancy and childbirth over the entire term of a Discovery Gap Active policy.
- Any claims related to materials, consumables, and external equipment.

Discovery Gap Cover option changes

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

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Eligibility for Discovery Gap Comprehensive, Core and Active options

Waiting periods

- We apply waiting periods and exclusions to certain healthcare services from the start date of each person's gap cover 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 exclusion for any claims directly or indirectly related to the treatment of pregnancy and childbirth (if you are on the Gap Active plan, this is an exclusion for the entire term of your policy), 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 or upgrade your cover, we will exclude any claims relating to the treatment of this condition for the first 12 months
- If you can show that you have had gap cover with another insurance company with less than 90 days' break in cover between the time you ended your policy with them and activated your policy with us, these may not apply:
 - The three-month general waiting period,
 - The 12-month pre-existing condition waiting period
 - The automatic 12 month exclusion list (if you are on the Gap Active plan, the pregnancy and childbirth exclusion still remains)

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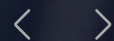
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Premiums

- Your Discovery Gap Cover premium depends on which Discovery Gap Cover option you choose, the medical scheme plan that you are on, and the age that the oldest member on your plan will turn at their next birthday after the application.
- 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 adjusted accordingly.

Discovery Gap Comprehensive

Age at next birthday of the oldest member on the Scheme plan	DISCOVERY HEALTH MEDICAL SCHEME EXECUTIVE AND CLASSIC PLANS		DISCOVERY HEALTH MEDICAL SCHEME ESSENTIAL AND ACTIVE SMART PLANS		DISCOVERY HEALTH MEDICAL SCHEME COASTAL PLANS	
	Single member	Family	Single member	Family	Single member	Family
0 - 54	R270	R457	R464	R815	R510	R1,165
55 - 64	R458	R699	R850	R1,779	R934	R1,779
65+	R586	R969	R1,129	R2,339	R1,241	R2,339

Discovery Gap Core

Age at next birthday of the oldest member on the Scheme plan	DISCOVERY HEALTH MEDICAL SCHEME EXECUTIVE AND CLASSIC PLANS		DISCOVERY HEALTH MEDICAL SCHEME ESSENTIAL AND ACTIVE SMART PLANS		DISCOVERY HEALTH MEDICAL SCHEME COASTAL PLANS	
	Single member	Family	Single member	Family	Single member	Family
0 - 54	R171	R295	R317	R572	R348	R816
55 - 64	R306	R365	R718	R1,186	R789	R1,186
65+	R356	R535	R1,076	R1,898	R1,183	R1,898

Discovery Gap Active

Age at next birthday of the oldest member on the Scheme plan	DISCOVERY HEALTH MEDICAL SCHEME EXECUTIVE AND CLASSIC PLANS		DISCOVERY HEALTH MEDICAL SCHEME ESSENTIAL AND ACTIVE SMART PLANS		DISCOVERY HEALTH MEDICAL SCHEME COASTAL PLANS	
	Single member	Family	Single member	Family	Single member	Family
0 - 30	R53	R153	R53	R218	R82	R327
31 - 40	R108	R191	R108	R327	R131	R436
41+	R291	R347	R436	R720	R750	R1,128

Premiums displayed are applicable to new members only.

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Download the Discovery Health app



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