

GAP COVER TRANSFER PROCESS FOR INDIVIDUALS



WHEN CAN YOU SWITCH COVER?

Anytime!

You can switch cover even if waiting periods apply to your policy with another **Gap Cover** provider. We'll carry over any remaining months.

WHAT DOCUMENTS DO WE NEED?

- 2025 Gap Cover Client Application Form.
- Recent copy of your policy document dated not older than **31 days** for underwriting purposes. Standard underwriting will apply if proof isn't submitted. You'll have **60 days** after receiving your **Cover Letter** to request underwriting to be amended.

REPLACEMENT POLICY DISCLOSURE

- A change in terms and conditions, monthly premiums and benefits will apply a products offered by **Gap Cover** providers differ.
- Unless we offer an underwriting concession, standard waiting periods will apply if there's a break between the last day of cover with the current provider and the first day with us.
- The waiting periods for each insured person will be confirmed in the **Cover Letter** you'll receive when your policy is activated.

WAITING PERIODS

Unless we offer an underwriting concession, the below waiting periods will apply when switching cover:

<p>GENERAL WAITING PERIOD</p> <ul style="list-style-type: none"> • If you switch cover when your current policy is within a General Waiting Period, the remainder of this waiting period will be carried over to your new policy. • 0 Month General Waiting Period on all benefits, except for a 3 Month General Waiting Period on the OUT-PATIENT SPECIALIST CONSULTATION BENEFIT offered on our ELITE⁵⁰⁰ option unless it's a like-for-like benefit.
<p>PRE-EXISTING MEDICAL CONDITION WAITING PERIOD ON LIKE-FOR-LIKE BENEFITS <i>(Benefits that are similar in design when comparing your current policy's benefits with ours.)</i></p> <ul style="list-style-type: none"> • If you switch cover when your current policy has been active for less than 12 months and a Pre-Existing Medical Condition Waiting Period applies, the remainder of this waiting period will be carried over to your new policy. • During a Pre-Existing Medical Condition Waiting Period, you don't have cover for investigations, medical procedures, surgeries or treatments related to any illness or medical condition diagnosed or for which advice or treatment was received 12 months before your cover start date. • If your current policy has been active for 12 months or longer and a Pre-Existing Medical Condition Waiting Period doesn't apply, we won't apply it either. • If you claim from a like-for-like benefit in the first 12 months of your cover start date, even if a Pre-Existing Medical Condition Waiting Period doesn't apply, the claim will be investigated to determine if the medical procedure was planned and disclosed to us. If the claim is for an unplanned medical procedure, we'll assess the claim based on the benefit's qualifying criteria.
<p>PRE-EXISTING MEDICAL CONDITION WAITING PERIOD ON ENHANCED BENEFITS <i>(Benefits that your current policy doesn't offer, but ours does.)</i></p> <ul style="list-style-type: none"> • If we provide benefits that your current policy doesn't, a 12 Month Pre-Existing Medical Condition Waiting Period will apply to the enhanced benefits. • If you claim from enhanced benefits in the first 12 months of your cover start date, the claim will be investigated to determine if it's a pre-existing medical condition. If it's for a new medical condition diagnosed after your cover start date, we'll assess the claim based on the benefit's qualifying criteria.
<p>CLAIMING FOR A PLANNED MEDICAL PROCEDURE DISCLOSED TO US <i>(Any investigation, medical procedure, surgery or treatment you plan on having and inform us of when applying for cover.)</i></p> <p>If you claim within the first 10 months of your cover start date for a medical procedure that you were aware of when applying for cover and informed us of, we'll cover 20% of the approved claim amount subject to applicable benefit limits. This applies to the entire claim, not only a specific medical procedure or benefit.</p>
<p>CLAIMING FOR A PLANNED MEDICAL PROCEDURE NOT DISCLOSED TO US <i>(Any investigation, medical procedure, surgery or treatment you plan on having but don't inform us of when applying for cover.)</i></p> <p>If you claim within the first 12 months of your cover start date for a medical procedure that you were aware of when applying for cover but didn't inform us of, your claim may be rejected based on non-disclosure.</p>

GOOD TO KNOW

- The oldest applicant's age will determine your policy premium, not the entry age that applied when you joined another provider.
- Transfer underwriting will apply to applicants switching cover where proof of previous cover is provided. Standard waiting periods will apply to transfer applicants who don't submit proof and to first-time joiners unless we offer an underwriting concession.
- Accidental events that occur after your cover start date won't be subject to waiting periods. Accidental events that occurred before your cover start date or a change in health status between signing and submitting your application form and your start date will be considered pre-existing.
- Don't forget to cancel your current policy when switching cover.
- Want to switch cover as a group? Chat with your financial advisor about a group quote.