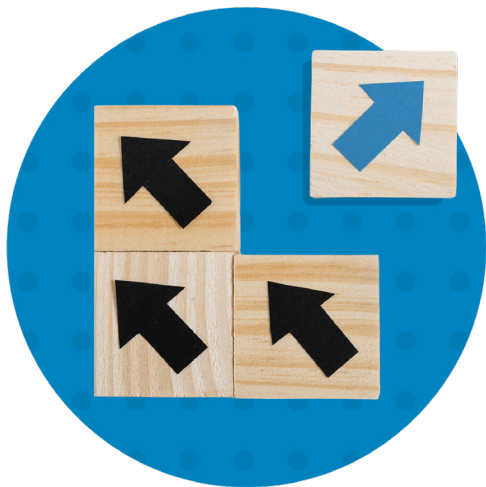


HEALTH INSURANCE TRANSFER PROCESS FOR INDIVIDUALS



WHAT IS HEALTH INSURANCE?

Health insurance typically pays for defined medical and surgical procedures, acute and chronic medication, and dentistry, depending on the type of cover you apply for. Health insurance reimburses you for expenses incurred due to illness or injury or pays your healthcare providers directly.

Health insurance can be taken as standalone health cover or in addition to medical aid cover.

For example, if you belong to a medical aid hospital plan, you can also take the **DAY-TO-DAY BENEFIT OPTION** as this provides benefits for GP and specialist visits, blood tests, x-rays and eye care. In the same way, if you belong to a comprehensive medical aid plan, the day-to-day benefits could be used for GP visits instead of depleting your medical savings account.

WHEN CAN YOU SWITCH COVER?

Your policy will be subject to standard waiting periods if you've been on medical aid or health insurance for **less than 12 months** or have a break in cover.

Your policy may be subject to waiting periods if you transfer after being on medical aid or health insurance for **12 months or longer** with no break in cover in the preceding **12 months**.

WHAT DOCUMENTS DO WE NEED?

- 2025 Health Insurance Client Application Form.
- Medical aid membership certificate from the current administrator or policy document from the current health insurance provider dated not older than **31 days**.

CAN YOU SWITCH TO ANY OF THE HEALTH INSURANCE BENEFIT OPTIONS?

Yes! You can switch to the **DAY-TO-DAY BENEFIT OPTION** or **EMERGENCY & ACCIDENT BENEFIT OPTION** and **HOSPITAL CASH PLAN**.

REPLACEMENT POLICY DISCLOSURE

- A change in terms and conditions, monthly premiums and benefits will apply as products offered by **Health Insurance** providers differ.
- Unless we offer an underwriting concession, standard waiting periods will apply if there isn't continuous cover between the last day of cover with your current medical aid or health insurance provider and the first day with us.
- The waiting periods for each insured person will be confirmed in the **Certificate of Membership** you'll receive when your policy is activated.

WAITING PERIODS

Waiting periods may apply to your policy when switching cover.

GENERAL WAITING PERIOD

A waiting period may apply to the **DAY-TO-DAY BENEFITS**, **WELLNESS ASSESSMENT**, and **PREVENTATIVE CARE BENEFITS**.

2 Month General Waiting Period may apply if the **GP PRE-AUTH WAIVER** is added.

1 Month General Waiting Period may apply if the **GP PRE-AUTH WAIVER** isn't added.

9 MONTH PRE-BIRTH CONSULTATION WAITING PERIOD

A waiting period may apply to the **PRE-BIRTH CONSULTATION BENEFIT** in the first **9 months** of cover.

12 MONTH CHRONIC MEDICATION WAITING PERIOD

A waiting period may apply to the **CHRONIC MEDICATION BENEFIT** in the first **12 months** of cover.

12 MONTH EYE CARE WAITING PERIOD

A waiting period may apply to the **EYE CARE BENEFIT** in the first **12 months** of cover.

12 MONTH CHILDBIRTH PAYOUT BENEFIT WAITING PERIOD

A waiting period may apply to the **CHILDBIRTH PAYOUT BENEFIT** in the first **12 months** of cover under the **HOSPITAL CASH PLAN**.

SWITCHING FROM MEDICAL AID COVER TO THE ESSENTIAL PRIMARY PLUS DAY-TO-DAY BENEFIT OPTION

GENERAL WAITING PERIOD

Medical aid cover for less than 12 months	Medical aid cover with day-to-day benefits for e.g. chronic medication and treatment benefits for 12 months or longer with no break in cover
2 Months if you take up the GP PRE-AUTH WAIVER 1 Month if you don't take up the GP PRE-AUTH WAIVER	No waiting period

PRE-BIRTH CONSULTATION WAITING PERIOD

Medical aid cover with pre-birth consultation benefit funded from a Medical Savings Account (regardless of cover period)	Medical aid cover with pre-birth consultation benefit for 12 months or longer with no break in cover
9 Months	No waiting period

CHRONIC MEDICATION WAITING PERIOD

Medical aid cover with no chronic medication benefit (regardless of cover period)	Medical aid cover with chronic medication benefit funded from a Medical Savings Account (regardless of cover period)	Medical aid cover with chronic medication benefit for 12 months or longer with no break in cover
12 Months	12 Months	No waiting period

EYE CARE WAITING PERIOD

Medical aid cover with eye care benefit funded from a Medical Savings Account (regardless of cover period)	Medical aid cover with eye care benefit for 12 months or longer with no break in cover
12 Months	No waiting period

SWITCHING FROM HEALTH INSURANCE COVER TO THE ESSENTIAL PRIMARY PLUS DAY-TO-DAY BENEFIT OPTION

GENERAL WAITING PERIOD

Health insurance cover for less than 12 months	Health insurance cover with day-to-day benefits for e.g. chronic medication and treatment benefits for 12 months or longer with no break in cover
2 Months if you take up the GP PRE-AUTH WAIVER 1 Month if you don't take up the GP PRE-AUTH WAIVER	No waiting period

PRE-BIRTH CONSULTATION WAITING PERIOD

Health insurance cover with no pre-birth maternity benefit	E.g. Health insurance cover with pre-birth maternity benefit for 8 months	Health insurance cover with pre-birth maternity benefit for 12 months or longer
9 Months	Remaining months to be carried over, namely 1 month in this example	No waiting period

CHRONIC MEDICATION WAITING PERIOD

Health insurance cover with no chronic medication benefit (regardless of cover period)	E.g. Health insurance cover with chronic medication benefit for 8 months	Health insurance cover with chronic medication benefit for 12 months or longer with no break in cover
12 Months	Remaining months to be carried over, namely 4 months in this example	No waiting period

EYE CARE WAITING PERIOD

Health insurance cover with no eye care benefit (regardless of cover period)	E.g. Health insurance cover with eye care benefit for 8 months	Health insurance cover with eye care benefit for 12 months or longer with no break in cover
12 Months	Remaining months to be carried over, namely 4 months in this example	No waiting period

The master policy issued is the source of all benefits, rights, obligations and exclusions.