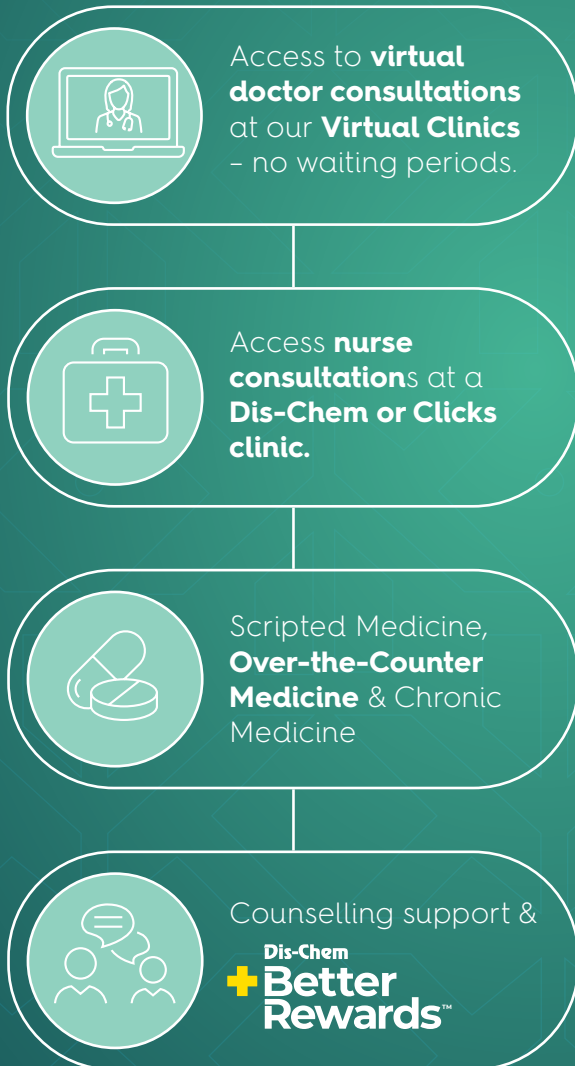


Making **Private Healthcare Affordable**
and Accessible for all South Africans



MYHEALTH PLUS SUMMARY OF COVER 2026

Why Kaelo MyHealth Cover?

Kaelo Health MyHealth Plus is a medical insurance plan that covers everyday healthcare needs, including doctor visits, medications, chronic illness management, along with a Maternity Benefit. Policyholders can access a wide network of healthcare providers through the Prime Cure Network for private healthcare.

Day-to-Day Benefits

What Cover is Included

- Doctor Visits
- Virtual Consultations
- Out-of-network GP Visits
- Clinic Visits (Nurse Visits)
- Specialist Visits
- Scripted Medicine
- Over the Counter (OTC) Medicine
- Flu Vaccinations
- Chronic Medicine
- HIV Programme
- Dentistry
- Dentures
- Eye Tests and Glasses
- X-rays and Scans
- Blood Tests
- Maternity Scans
- COVID-19 Testing
- Pregnancy and Childbirth cover is available as an optional Buy-Up for compulsory corporate groups with 100 employees or more.

This brochure is only a summary of cover. For a comprehensive list of benefits and limits that apply to a specific plan, please contact your Financial Advisor.

How to Access your Benefits

You will need to pre-authorise certain benefits in order to ensure that the visit is paid in full. Please view your detailed benefits in your Policy Wording to see which benefits need to be pre-authorised.

When you visit a Prime Cure Network provider, you can tell them that Kaelo Health is serviced by the Prime Cure Network. You can also show them your membership card which has the Prime Cure logo on it.

Understanding the Waiting Periods

Waiting periods on Kaelo Health Policies are as follows:

- **One (1)-month** General Waiting Period on all Benefits except nurse consultations in a Clicks or Dis-Chem Clinic, telephone or video consultations through our Virtual Clinics and any medicine that has been scripted by these Healthcare Providers for Acute or Over-the-Counter Medicine on our Medicine List.
- **Six (6)-month** Condition-Specific Waiting Period could apply to this policy for:
 - Chronic Medicine for HIV and type 2 diabetes mellitus, and
 - Dentures, in respect of any dental condition or disease which gave rise to, or is reasonably likely to give rise to, the requirement for dentures. This Condition-Specific Waiting Period shall not apply where the requirement for dentures arises directly and solely as a result of an accidental bodily injury or trauma sustained after the Start Date of cover.
 - A Condition-Specific Waiting Period is the period during which no Benefits can be claimed for a specific condition for which medical advice, diagnosis, care, or treatment was recommended or received within the **12 months** prior to the Start Date of cover for the Insured Party.
 - Should Condition-Specific Waiting Period apply, the waiting periods and their duration will be listed on Your Policy Schedule.

Waiting periods are determined at take on, and may be applied or waived. Waiting periods will not be applied to:

- Compulsory corporate group Policyholders

- Voluntary corporate group Policyholders, if the employee joins Kaelo Health within **three (3) months** from their employment start date
- Newborns, Child Dependants or a Spouse if they are registered with Kaelo Risk within **90 days** and added to the Policy, as a Dependant, from the birth or marriage date or Policy Start Date in the case of a new Policy. Premiums will be payable from the birth or marriage date
- Should the newborn, Eligible Child or Spouse not be registered with Kaelo Risk and added to the Policy within **90 days** of the birth or marriage date, the General waiting period and/or Condition-Specific Waiting Period will apply.

Moving from another Medical Insurer or Medical Scheme

- If you can prove that you had previous medical insurance or medical aid cover for a certain period, the waiting periods for your Policy will be waived waiting periods.
- The General Waiting Period will be waived if you can provide proof of previous medical insurance or medical scheme cover of a minimum of **three (3) months**, with less than **two (2) months'** break in cover from the termination date of the previous cover.
- The Condition-Specific Waiting Period will be waived if you can provide proof of previous medical insurance or medical scheme cover of a minimum of **six (6) months**, with less than **two (2) months'** break in cover from the termination date of the previous cover.
- It's important to provide proof of previous cover to Kaelo Risk before the Start Date of your Policy. If you don't submit the proof of cover in time, there will be a delay in finalising your claims. You will then need to manually submit these claims for payment if you paid for these claims yourself or request that the provider resubmit these claims to Prime Cure within **120 days** from the date of service.

Key Role Players

Your Insurer

Centriq Insurance Company Limited, FSP 3417, a licensed non-life insurer, is the company providing your insurance coverage.

Your Underwriting Manager

Kaelo Risk (Pty) Ltd, registration number 2008/019335/07, an authorised Financial Services Provider (FSP 36931) is your Underwriting Manager.

Your Network Provider

Kaelo Prime Cure (Pty) Ltd, registration number 1997/017429/07, is your network provider.

Premiums

Your Policy will stay active as long as you keep paying your Premiums on time. Premiums for the month must be paid by the last working day of each month. Not paying your Premium may lead to your claims being rejected or your cover being suspended until you pay all outstanding Premiums.

The Insurer may adjust your Premiums by giving you **31 days** written notice. Your Premium will be reviewed every year.

Please note the Premium shown in your Policyholder Schedule/Renewal Letter is the Total Premium due to us and does not take into account any subsidies provided by your Employer.

Cancelling your Policy

You can cancel this Policy at any time by giving **31 days** written notice before the date of cancellation. The Insurer may cancel the Policy for any reason by giving **31 days** notice. Premiums are payable up to and including the Termination Date.

Disclaimer: For a detailed outline of all benefits, conditions and policy exclusions please refer to your Policy Wording.

What we do not Cover

Claims or Benefits will not be paid for any incident, illness, or event that happens because of or related to the following:

- Intentional self-harm, like suicide or attempted suicide
- Using any kind of drug, legal or illegal, unless it was prescribed by a Healthcare Provider and taken as instructed
- Not following the medical advice given by a Healthcare Provider
- Any Benefit or service that is not covered by this Policy
- Claims that fall within a waiting period
- Claims submitted after **120 days** from the date of service
- Cosmetic surgery or cosmetic procedures
- Specialised dental procedures like crowns, bridges, dental implants, orthognathic surgery, temporo-mandibular joint (TMJ) surgery, labial frenotomy, bone augmentations and bone or tissue regeneration
- Any Treatment related to infertility
- Services provided by non-Prime Cure Network Healthcare Providers without Pre-authorisation
- Any criminal or fraudulent act by the Insured Party in an attempt to access Benefits.



The Benefits apply only for services rendered within the territory of the Republic of South Africa. Any services provided outside of the borders of South Africa are excluded from cover. The events listed below are deemed as separate events and may qualify for coinciding yet distinct Benefits, as the case may be.

Detailed Benefits		
Health Service	Benefit	MyHealth Plus Limit
In-person Doctor Visits	Insured Parties are covered for doctor visits, but must visit a doctor that is part of the Prime Cure Network. Doctor visits are covered at 100% of the Agreed Rate.	Unlimited visits.
Virtual Clinics	Insured Parties are covered for phone and video consultations through our Virtual Clinics. Virtual consultations are covered at 100% of the Agreed Rate.	Unlimited visits.
Out-of- Network Doctor Visits	Insured Parties can see a medical doctor that is not on the Prime Cure Network once a year. Limited to one (1) visit per Insured Party, and two (2) visits per Family per year.	Limited to R1 100 per visit.
Clinic Visits	The Benefit covers visits to a nurse in a Dis-Chem or Clicks clinic for a range of needs including: <ul style="list-style-type: none"> • Coughs, colds, flu, asthma, skin rashes, allergies, nebulisation and minor wound care • Baby weigh-ins and check-ups • Blood glucose and blood pressure monitoring • Flu vaccinations 	Limited to eight (8) visits per Insured Party per year.
Specialist Benefit	Insured Parties can visit any authorised Specialist once a year. Limited to one (1) visit per Insured Party and two (2) visits per Family per year.	Cover for the Specialist visit is limited to R2000 per visit.
Scripted Medicine	Insured Parties are covered for scripted medicine (short-term medicine) if it is on our Medicine List. The script must be written by a Prime Cure Network doctor and the medicine must be collected from a Prime Cure Network pharmacy to be covered at 100% of the Agreed Rate.	Unlimited scripts.
Over-the-Counter (OTC)	OTC Medicine is covered at 100% of the Agreed Rate up to a specific limit. Benefits not utilised will carry over to the next quarter.	Limited to R115 per quarter to a maximum of R460 per Insured Party per year.
Chronic Medicine	Chronic Medicine is covered at 100% of the Agreed Rate if it's on our Medicine List.	Unlimited Chronic Medicine for twenty seven (27) conditions.
HIV Programme	Unlimited HIV medicine is available from the date an Insured Party registers on the HIV programme.	✓
Dentistry	Insured Parties can visit a dentist in the Prime Cure Network for one (1) dental check-up and one (1) cleaning per year. It includes fluoride Treatment for children under 12 years. Insured Parties also have cover for up to four (4) teeth repairs, called composite fillings and four (4) extractions per Policyholder per year and then four (4) dental (mouth) X-rays per Family per year.	✓
Dentures	Cover for plastic or acrylic dentures for Insured Parties over the age of 21 years according to a list of approved codes. There will be a 20% Co-Payment of the total cost.	✓
Out-of-Network Dentist	Insured Parties can see a dentist who is not part of the Prime Cure Network. This is limited to one (1) visit per Family per year and covers emergency Treatment for pain and sepsis.	Cover is limited to R800 for the visit.
Eye Tests	<ul style="list-style-type: none"> • Eye examinations at a Prime Cure Network optometrist. Limited to one (1) eye test per Insured Party per year. • Spectacles and lenses. Limited to one (1) pair every two (2) years. • A frame which is not in the Prime Cure selection will be covered up to R600 and the Insured Party will need to pay the difference in cost. 	✓
X-rays and Scans	Insured Parties are covered for X-rays and soft tissue ultrasound scans when referred by a doctor or nurse who is part of the Prime Cure Network or through a virtual clinic consultation. Cover is at 100% of the Agreed Rate.	Unlimited visits.
Blood Tests	Insured Parties are covered for blood tests through Ampath, Lancet, Pathcare or Lab24 when referred by a Prime Cure Network doctor or nurse, or a virtual clinic consultation according to a list of approved tests. Cover is at 100% of the Agreed Rate.	Unlimited visits.
Maternity	Two (2) 2D sonar scans per pregnancy per Insured Party at a Prime Cure Network provider.	✓
Health Screening	Two (2) health check-ups and an extra two (2) HIV tests per Insured Party every year at either Clicks or Dis-Chem clinics.	✓

COVID-19 Testing	Maximum of R850 if the result is positive.	✓
Flu Vaccination	Cover for one (1) flu vaccination every year for individuals older than six (6) months. The vaccination can be done at any pharmacy clinic in the Prime Cure Network.	✓
Lifestyle Benefits		
asknelson Services	Virtual, face-to-face and telephonic counselling, life, managerial and parent coaching services, workplace trauma interventions, financial and legal advice and assistance with Road Accident Fund claims.	
NETCARE 911 Health-on-Line	Netcare 911's 24hr medical advice line - 082 911	
Dis-Chem Better Rewards	Dis-Chem Better Rewards is a programme available to Kaelo Health Policyholders who, through making healthy choices, have access to 20% discounts on a variety of healthy and essential products.	

Access **benefits anywhere, anytime** through the **Kaelo MyHealth App**:

- » **Digital membership** card
- » **Find** Prime Cure **Network healthcare providers**
- » **Book virtual consultations** through Prime Cure virtual clinics
- » View and **download Policy documents**

