



# ADMED GAP COVER 2026

UNDERWRITTEN BY GUARDRISK INSURANCE COMPANY LIMITED





## Admed Gap Overview

Admed Gap Cover is not a medical scheme. Products that are offered in this brochure are not the same as that of a medical scheme.

Only active medical scheme members are eligible for the cover on Admed's products.

These products are not a substitute for a medical scheme membership, and no day-to-day benefits are covered.



## Guarding Yourself and Your Family Against Medical Expense Shortfalls

If you are a member of a medical scheme in South Africa, you are probably already aware of the rising costs of medical care in our country.

The reality is that many medical professionals and facilities charge more than what your medical scheme will pay out. This leaves you open to a variety of additional payments that you need to pay out of your own pocket.

Admed Gap Cover is a way to ensure that these shortfalls, as well as out-of-pocket expenses, are taken care of in the event of ill health or injury. Our aim is to give you the peace of mind you need to focus on yourself and your loved ones.

# Our Supreme Benefits



R535

Single

If you're under 65

R620

Family

Monthly family premium  
for under 65's

R358

Single

If you're 35 or under

R884

Single

If you're 65 or older

## Shortfall Benefits

(These benefits are collectively limited to R219 800 per person per year)

### Medical Expense Shortfall Benefit For In-Hospital Procedures

We cover the shortfall between what the specialist has charged and what your medical scheme pays up to 500% of medical scheme tariff. Prescribed Minimum Benefits (PMB) procedures are covered under this benefit.

### Medical Expense Shortfall Benefit For Out-Of-Hospital Procedures

We also cover certain medical procedures performed out of hospital, in day clinics or other registered facilities, up to 500% of medical scheme tariff paid by your medical scheme towards in-hospital shortfalls. Prescribed Minimum Benefits (PMB) procedures are covered under this benefit.

### Medical Expense Shortfall Benefit For Allied Professionals

We cover the shortfall between what the Allied professional has charged and what your medical scheme has paid for in hospital care following an associated in-hospital procedure. This is paid up to 500% of medical scheme tariff paid by your medical scheme towards in-hospital shortfalls and is limited to R2 500 per policy per year. Examples of Allied professionals are Chiropractors, Clinical technologists, Genetic counsellors, Myotherapists, Occupational therapists, Orthoptists, Osteopaths, Perfusionists, Physiotherapists, Podiatrists, Speech pathologists.

### Co-payment Benefit

Co-payments and deductibles are commonly applied to authorised hospital admissions, radiology scans (MRI, CAT, PET) and specialist referral procedures, depending on your medical scheme option. Our Co-payment benefit provides you with the peace of mind that if your medical scheme levies a co-payment for an approved in-hospital or out-of-hospital procedure, which you need to pay upfront out of your own pocket, we will cover this.

### Non-DSP Co-payment Benefit

Certain medical scheme options stipulate the use of their preferred network hospitals for elective procedures. Should you need to use a non-network hospital and your medical scheme imposes an additional rand value or percentage-based co-payment, we will cover this co-payment subject to a limit of R16 800 to a maximum of 2 per policy per year.

### Pre & Post-Surgery Specialist Consultations

This benefit covers shortfalls on consultation fees charged by an admitting medical practitioner 30 days prior to and 30 days following in-hospital surgery. It is subject to a limit of R3 200 per insured.

### Oncology Co-payment Benefit

Based on your medical scheme options, once the oncology benefit limit has been reached for the year, a co-payment of up to 20% may be imposed by the medical scheme. If you are registered with your medical scheme oncology treatment programme and you deplete this limit for the year, we will cover for the first 20% of the cost (including biological drugs and specialised medication) of each treatment paid thereafter by you.



## Internal Prosthesis Benefit

If you undergo a medical procedure that requires the use of an internal prosthesis to replace a body part and you reach your medical scheme limit for the year, we will pay the shortfall of up to R46 000 per family per year. Stents will be covered up to R5 000, intraocular lenses covered up to R6 500 and pacemakers are covered up to R8 000 per claim event.

## Sub-Limit Benefit

Certain medical schemes will only cover MRI/CT scans and scopes up to a specific limit. Our Sub-limit benefit will pay up to R16 000 per policy per year where your medical scheme limit has been exhausted.

## Casualty Benefit

In the event of an emergency resulting from an accident, where you are required to visit an emergency casualty ward within 24 hours of the incident, we will cover costs of up to R26 700. For emergency only treatment of a child aged 11 years or younger, the benefit is limited to the figure as R2 950 per policy per year, which aggregates to the overall annual limit of R26 700.

## Robotic Procedures Benefit

Should your condition require the use of robotic-assisted surgery, our Robotic procedures benefit will cover the shortfalls charged by medical practitioners and any co-payments levied by your medical scheme. This cover is up to R39 500 per policy per year.

## Assist Benefits (These benefits do not accumulate to the overall limit of R219 800)

### Cancer Assist Benefit

If you are diagnosed for the first time with minimum stage II, LOCAL and malignant cancer, we will pay you R8 000. If however, you are diagnosed with minimum stage II, REGIONAL and malignant cancer, we will pay you R20 000. In addition, if you are successful in claiming the R20 000 benefit, and the extent of treatment that you need results R200 000 or more for your oncology treatment within 12 months from the date of your diagnosis, we will pay you a further R15 000. This benefit assist in covering the unexpected costs which may arise as a result of diagnosis.

### Breast Reconstruction Benefit For The Non-Affected Breast

Should you be diagnosed with breast cancer and require cosmetic breast reconstruction for the non-affected breast due to a mastectomy, we will provide assistance cover of R29 000 per policy per year. This can be used to recover the costs incurred for the treatment or related to the treatment.

### Accident Assist Benefit

An amount of R55 000 will be paid if you or your dependent dies or becomes permanently and totally disabled as a result of an accident while covered on this policy. The death benefit will be reduced if death relates to a minor. Subject to one claim per insured lifetime. This benefit assists in covering unexpected costs which may arise as a result of the accident.

### Violent Crime Benefit

If the accidental death or disability is a result of a violent crime, we will double the Accident Assist cover and pay R110 000 and this will cover the unexpected costs which may arise as a result of the violent nature of the incident. This benefit will be capped at legislated limits.

## Accidental Dentistry Cover

A cover of up to R27 000 for accidental tooth fracture (crowns and implants are excluded due to an external injury to the mouth) is payable at a rate of R3 900 per fractured tooth, irrespective of medical aid contribution to treatment cost. Treatment must take place within 10 days of the accidental tooth fracture event.

## Premium Waiver Benefit

If the premium payer becomes permanently disabled or passes away as a result of an accident or violent crime, we will cover your medical scheme and gap cover premiums up to R130 000. The benefit is calculated based on your medical scheme and gap cover monthly contributions at the time of the claim, multiplied by 12 months.

## Trauma and Bereavement Counselling Benefit

If you are a victim of, or witness to, a traumatic accident, or if you lose an immediate family member, we believe that undergoing trauma and bereavement counselling is an important step in recovering from an event such as this. We will pay an amount of up to R950 towards the cost of each counselling session, limited to R30 000 per family per year.

## Baby Bump

(Only available to members on a Group Scheme)

Having a baby can be very exciting, but it also comes with many unexpected costs. If you are pregnant, we will pay an amount of R2 500 on confirmation of pregnancy, to assist with unforeseen associated costs.

## Our Primary Benefits

**R436**

Single

If you're under 65

**R500**

Family

Monthly family premium  
for under 65's

**R296**

Single

If you're 35 or under

**R829**

Single

If you're 65 or older

## Shortfall Benefits (These benefits are collectively limited to R219 800 per person per year)

### Medical Expense Shortfall Benefit For In-Hospital Procedures

We cover the shortfall between what the specialist has charged and what your medical scheme pays up to 300% of medical scheme tariff.

### Medical Expense Shortfall Benefit For Out-Of-Hospital Procedures

We also cover certain medical procedures performed out of hospital, in day clinics or other registered facilities, up to 300% of medical scheme tariff.

### Co-payment Benefit

Co-payments and deductibles are commonly applied to authorised hospital admissions, radiology scans (MRI, CAT, PET) and specialist referral procedures, depending on your medical scheme option. Our Co-payment benefit provides you with the peace of mind that if your medical scheme levies a co-payment for an approved in-hospital or out-of-hospital procedure, which you need to pay upfront out of your own pocket, we will cover this.

### Casualty Benefit

In the event of an emergency resulting from an accident, where you are required to visit an emergency casualty ward within 24 hours of the incident, we will cover costs of up to R26 700. For emergency only treatment of a child aged 11 years or younger, the benefit is limited to R2 950 per policy per year, which forms part of and aggregates to the overall annual limit of R26 700.



### Robotic Procedures Benefit

Should your condition require the use of robotic-assisted surgery, our Robotic procedure benefit will cover the shortfalls charged by medical practitioners and any co-payments levied by your medical scheme. This cover is up to R39 500 per policy per year.

### 1st Time Cancer Benefit

If you are diagnosed for the first time with minimum stage II, LOCAL and malignant cancer, we will pay you R8 000. If however, you are diagnosed with minimum stage II, REGIONAL and malignant cancer, we will pay you R20 000. In addition, if you are successful in claiming the R20 000 benefit and the extent of treatment that you need results in your medical scheme paying R200 000 or more for your oncology treatment within 12 months from the date of your diagnosis, we will pay you a further R15 000. This benefit assists in covering the unexpected costs which arise as a result of the diagnosis.

### Accidental Disability Benefit

An amount of R55 000 will be paid if you or your dependent dies or becomes permanently and totally disabled as a result of an accident while covered on this policy. The death benefit will be reduced if the death relates to a minor. This benefit is subject to one claim per insured per lifetime. It assists in covering the unexpected costs that may arise as a result of the accident.

### Accidental Dentistry Cover

A cover of up to R27 000 for accidental tooth fracture (crowns and implants are excluded due to an external injury to the mouth) is payable at a rate of R3 900 per fractured tooth, irrespective of medical aid contribution to treatment cost. Treatment must take place within 10 days of the accidental tooth fracture event.

### Premium Waiver Benefit

If the premium payer becomes permanently disabled or passes away as a result of an accident or violent crime, we will cover your medical scheme and gap cover premiums up to R130 000. The benefit is calculated based on your medical scheme and gap cover monthly contributions at the time of the claim, multiplied by 12 months.

### Trauma and Bereavement Benefit

If you are a victim of, or witness to, a traumatic accident, or if you lose an immediate family member, we believe that undergoing trauma and bereavement counselling is an important step in recovering from an event such as this. We will pay up to R950 towards the cost of each counselling session, limited to R30 000 per family per year.

This is a summarised document for our offering. For a detailed brochure, please visit our website: [www.admedonline.co.za](http://www.admedonline.co.za)

*Follow your*  *choose Admed*

**Web** [www.admedonline.co.za](http://www.admedonline.co.za) | **Email** [admed@guardrisk.co.za](mailto:admed@guardrisk.co.za) | **Post** Admed Claims, PO Box 786015, Sandton, 2146

**Admed**  
The heartbeat of Gap