



TURNBERRY – FAQ's 2024



INSURER



LOMBARD

(FSP no.1596)

Q. If I transfer my existing Gap Cover policy to Turnberry would reduced waiting periods apply?

A. If you have been on your existing Gap Cover policy for 3 months or longer and have not had a break in membership then reduced waiting periods will apply. Upon acceptance of your application a policy document will be sent to you, which will advise you of your reduced waiting periods.

Q. Can I transfer my existing Gap Cover policy to Turnberry?

A. Yes you can transfer your Gap Cover policy to Turnberry. In order to do so please complete a Turnberry application form and submit it with your existing Gap Cover policy document to Turnberry. Please note that you would be required to obtain financial advice from your Financial Advisor.

Q. What waiting periods are applicable to my Turnberry Gap Cover policy? <https://turnberry.co.za/what-is-a-waiting-period/>

- A. The following waiting periods will apply from the date of inception if you have never had a Gap Cover policy previously:
 - A 3-month general waiting period applies to all benefits, with exception of benefits providing cover up to 600% should the commencement of the Policy be in line with the commencement date of the Medical Scheme
 - A 10-month waiting period on pregnancy/childbirth
 - A 12-month waiting period on / investigations, treatment or surgery for:
hysterectomy, hysteroscopies, endometriosis, ovarian cysts and fibroids (myomectomy), muscular-skeletal (except in the event of an accident, which occurred while on the Policy), tonsillectomy, myringotomy, grommets, adenoids, wisdom teeth, hernia, cataracts, gastroscopies, colonoscopies, cancer, nasal and sinus

NEW BUSINESS FAQ'S contd.



Q. Can I add an extended family member onto my Turnberry Gap Cover Policy?

A. Definition of a “family”: means the principal insured person, eligible spouse, and eligible children, who have not attained the age of 26 years unless mentally or physically disabled and unable to earn any form of income. Any dependents falling under this definition are included at no additional cost. If you have an extended family member registered on your medical aid and they do not qualify in terms of our above definition of a family, you may add them onto your policy for an additional premium per month.

Q. Who can be covered under my Turnberry Gap Cover Policy?

A. Turnberry’s premiums are per family per month. A Family is defined as the principal insured person, the eligible spouse, and eligible children, who have not attained the age of 26 years, unless mentally or physically disabled and unable to earn any form of income. Any dependents falling under this definition are included at no additional cost.

Q. Can my Gap Cover claim be processed and paid prior to the procedure?

A. No. A claim may only be submitted after the procedure has been performed.

Q. Is it possible for Turnberry to pay the Medical Service Provider?

A. No. Legislation does not permit us to pay Medical Service Providers. Further, it is advisable for you not to tell your Medical Service Provider that you have a Gap Cover policy. We have incidences where providers have charged higher rates than they would otherwise have, which will have a detrimental effect on future premium rates. There are some providers that ask the question on their forms, again you are not required to disclose this information. A Gap Cover contract is between you, the client, and the insurer. No other person or institution has a right to know whether you have a contract or not.

Q. How long do I have to submit a Gap Cover claim to Turnberry?

A. You have 5 months to provide written notice from the date of treatment of a pending claim. Outstanding documentation needs to be submitted within 90 days from the date, outstanding documentation is requested by Turnberry.

Q. Once my Gap Cover claim has been assessed and a payment is made, how long will it take for the amount to reflect in my account?

A. When the payment will reflect in your account generally depends on with whom you bank. The time varies from 1 to 3 working days. In addition, Turnberry will send you a claim statement, which will provide details of your claim and the amount that will be paid into your account.

CLAIMS FAQ's contd.

Q. How long will it take for Turnberry to settle my Gap Cover claim?

A. Upon receipt of all the required documentation it will take, 5 to 10 working days for the claim to be finalised.

Q. Where can I obtain a Turnberry Gap Cover claim form?

A. You can obtain a claim form by clicking on this link, under [document downloads](#) on our website or you can complete our [online claim form](#). Should you require additional assistance you can contact us on 011 677 9891 or email claims@turnberry.co.za

Q. What documentation do I need to submit when I have a Gap Cover claim?

A. You will be required to submit the following documents –

- Turnberry's claim form.
- Medical Aid statement reflecting the transactions processed by the Medical Service Provider for which you are claiming, as well as the transactions your Medical Aid has processed from your hospital account.
- Invoices from the Medical Service Providers for whom you are claiming.
- Hospital account for the period you were hospitalised.
- You can also refer to the infographic on our website - <https://turnberry.co.za/how-to-submit-a-gap-cover-claim-form/>

POLICY ADMINISTRATION FAQ'S



Q: How do I change my banking details for my Turnberry Gap Cover policy?

A: A signed debit order authorisation form must be completed and returned to us. We will also accept a written instruction from the client giving us the new banking details.

Q. How do I change my debit order date for my Turnberry Gap Cover policy?

A: A debit order authorisation form would need to be completed. The available debit order dates are the 1st, 7th, 15th and 25th. Should the collection date selected fall on a weekend or public holiday, a debit will be processed against your account on the first working day following the weekend or public holiday.

Q. We have changed Medical Aid membership and the medical aid is now in the name of my spouse/partner. Should the principle insured person on our Turnberry Gap Cover policy be changed as well?

A: No, the change in membership will not affect your policy benefits. Either spouse may be the owner on the policy. We will however require the new medical aid details in order to update our records. (Please speak to your financial advisor to ensure your policy is still appropriate for your medical aid option).

Q. If I was hospitalised during the period of non-payment will Turnberry pay my claim if I reinstate my policy?

A. No. The policy terms and conditions require that premiums are paid by the due date. Turnberry will likely reject your application for reinstatement and then you will need to apply for a new policy, which will be subject to all the contractual waiting periods. If Turnberry do decide to accept your application for reinstatement it will be on condition that no benefits will be paid for any hospitalisation during the period of non-payment and any other terms and conditions Turnberry may decide to impose.

Q. My Turnberry Gap Cover policy has lapsed. How do I reinstate my Gap Cover policy again?

A: A reinstatement application form must be completed and the request for reinstatement will be underwritten. Once our underwriters have agreed to the reinstatement the policy owner will be notified and proof of payment of the arrear premiums will be required. Cover will only recommence on written acceptance and the payment of the arrear premiums. If the policy has been in a state of lapse or cancelled for more than three months a new application form will generally be requested.

Q. How do I go about upgrading my existing Turnberry Gap Cover Policy?

A: The principle insured person would be required to complete an upgrade form. Existing benefits will not be affected and will not have any new waiting periods. Any new benefits will be subject to waiting periods. Please discuss any material changes that could affect your cover with your financial advisor.

Q. How do I register my newborn baby or another member of my family as a dependant on my Turnberry Gap Cover policy?

A: The baby will be covered from date of birth under the Gap Cover policy. To initiate the cover for the baby the principle insured person needs to complete a dependent addition form. Please note, A newborn must be added onto the Policy within 90 days, from the date of birth, in order to avoid waiting periods.

If an older child or adult dependent is added, the addition of the new member will be subject to waiting periods.

Once the baby or new dependent is added, an amended Policy Document will be issued as confirmation of the change.

Q. Will I be covered for any pre-existing conditions?

A. The standard policy offers travel cover of R5 000 000 per insured for emergency medical expenses and does not cover pre-existing medical conditions. Should you require travel cover for pre-existing medical conditions we do offer top-up cover for an additional rate.

Q. What do I do in the event of an emergency that requires hospitalisation or evacuation?

A. The MSO contact number is available on all Travel Insurance policies. You need to contact them in the event of any emergency (other than a general GP visit). They will take care of all necessary arrangements to ensure you receive the best treatment possible.

Q. Am I covered if I work in another country?

A. For short business trips the free travel cover is the ideal product to have when travelling. It is however important to note that the aim of the product is to provide free leisure travel insurance. The terms and conditions of the policy excludes manual labour as well as things such as off-shore drilling, being part of an airline crew and specialised sports events on a professional level. Please refer to the TIC policy terms and conditions appendix for more information. You may contact Gordene to obtain a travel quote or policy specifically suited to your needs.

Q. What if I am travelling for more than 90 days?

A. The maximum length of your free International Travel cover is 90 days. You may purchase an additional leisure travel insurance policy from TIC in order to extend your cover until you return to South Africa. Should you require cover for more than 90 days, please email gordenes@turnberry.co.za or phone 011 677 9891 in order to obtain a quote.

Q. Am I covered when travelling outside of South Africa?

A. You will have cover for each trip outside of South Africa provided that you have completed the application form and have been issued a travel insurance policy for the particular trip.

Q. How long does it take to obtain a Travel Certificate?

A. The turnaround time for Travel Certificates to be issued is 2 working days.

Q. What do I need to do if I am going overseas? Do I automatically qualify for the international travel benefit when I travel?

A. Prior to each trip outside of the borders of South Africa, a Travel Insurance Application form needs to be completed and sent to gordenes@turnberry.co.za or 011 677 9891 in order for a certificate of travel to be issued. This has to be done for each and every trip.

Q. Does a client need to apply for the International Travel Insurance?

A. Yes, the client needs to complete the Travel Insurance Application Form at least 48 hours prior to departure.

Q. Are there any waiting periods for International Travel Insurance?

A. If there is a general 3-month waiting period on the policy then it also applies to the travel benefit. If there is no general waiting period, they may make use of the travel benefit from the date of inception of the policy.



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Thank you!