

New automated process for your Gap claims

CLAIM JOURNEY WITH THE PROCESS AND TURNAROUND TIMES BELOW

1

Medical event occurs

2

Medical provider submits claims to medical scheme for payment

3

Medical Scheme assesses claims and identifies shortfalls

4

Member receives statement noting payment shortfalls, requiring payment

5

Member does not complete ANY PAPERWORK as all information is automatically sent by the medical scheme directly to Sanlam Gap for assessment, according to the policy benefits

6

Claims shortfalls are paid within 7 to 14 working days

7

Member is paid and send a statement as confirmation

Please direct all queries to our **Customer Care Centre** on **0861 111 167**.

This brochure, which is also the Detail of Services and Benefits annexure to your Policy, should be read together with your Policy and Policy Schedule as it forms part of your agreement with the Insurer and the Underwriting Manager (UMA). Please ensure that you familiarise yourself with all the terms and conditions contained in all the documents you have received.

Contact Information

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