
Aon Member Letter

Admed Gap 2026

Dear Aon Client

It is that time of year for you to evaluate your current healthcare arrangements to ensure the most appropriate cover for 2026. Whether or not you wish to remain on your current gap option or change to a more suitable plan for 2026, it remains Aon's responsibility to guide you through the review process. We recommend you speak to your Aon Employee Benefits Consultant to assist you in selecting the correct Gap Cover option.

What is the contribution increases for 2026?

Overall Average Increase is 12%

New Benefits for 2026

- Pre and Post Surgery Specialist Consultation Benefit – provides a benefit for 30 days before and 30 days after treatment. The benefit will cover the shortfall between the specialist consultation cost and what the medical scheme covers up to a benefit limit of R3 200 per insured.
- Accidental Dentistry Benefit – covers accidental tooth fracture. There is an overall benefit per annum of R27 000 with a sub limit of R3 900 per tooth regardless of what the medical scheme benefit is for treatment.

Benefit Enhancements for 2026

- The Shortfall limit has increased from R200 000 to R219 800 per insured person, per year.
- Breast reconstruction benefit limit increased from R15 000 to R29 000 per annum.
- Casualty benefit enhancement limit of R24 000 increased to R26 700 – number of visits has been removed.
- Emergency only benefit for children age limit has increased from 8 to 11 years of age.
- Non-DSP copayment limit increased from R12 000 to R16 800 - up to two events per policy per year and percentage-based copayments will be covered.
- Internal prosthesis benefit limit has been increased from R35 000 to R45 000 per annum. A new sub limit for interocular lenses of R6 500 has been included. The

limit for pacemakers has been retained for 2026 at R8 000. The limits for interocular lenses, stents and pacemakers do not draw down from the overall internal prosthesis benefit limit.

- The Robotic Procedure benefit shortfall and co-payments will now be combined into one overall limit of R39 500.
- Premium Waiver benefit limit has been increased from R36 000 to R130 000 per annum.
- Individual Trauma Counselling benefit has increased from R800 to R950 per consultation.
- Primary Option has been enhanced to include:
 - Casualty, Robotic Procedures, 1st Time Cancer, Accidental Death, Breast Reconstruction, Trauma Counselling, Premium Waiver, Accidental Dental – the same benefit limits as the Supreme option will apply.
- A 3-month general waiting period and 9-month condition specific waiting period will no longer be applied to new members. Only a 12-month pre-existing condition waiting period will be applied.
- Match-Pay benefit has changed to a percentage of scheme tariff and is applied as follows:
 - Supreme option: Up to 500% of the scheme tariff
 - Primary option: Up to 300% of the scheme tariff
 - Under 35 option: Up to 400% of the scheme tariff

Benefit Reductions for 2026

- Emergency benefit for children has decreased from R5 000 to R2 950 and is available at any time of the day.
- The stent limit has decreased from R8 000 to R5 000.

Comprehensive Benefit Comparison

Benefit	Supreme	Primary
OVERALL ANNUAL LIMIT	R219,800	R219,800
MEDICAL EXPENSE SHORTFALL BENEFIT FOR IN-HOSPITAL PROCEDURES	Covers the shortfall between what the specialist has charged and what the medical scheme paid: Supreme option: Up to 500% of the scheme tariff Primary option: Up to 300% of the scheme tariff Under 35 option: Up to 400% of the scheme tariff	

Benefit	Supreme	Primary
CO-PAYMENT SHORTFALLS	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.	
SUB-LIMIT BENEFIT	The benefit will pay up to R16,000 per policy per year when the medical limit has been exhausted.	No benefit
MEDICAL EXPENSE SHORTFALLS FOR ALLIED PROFESSIONALS	Covered shortfall up to three times the amount up to a limit of R2,500 per policy per year – for examples refer to list in the benefit brochure.	No benefit
NON-DSP CO-PAYMENT BENEFIT	Limited to R16,800 per policy per year – maximum of 2 events per policy per year.	No benefit
INTERNAL PROSTHESIS SHORTFALL BENEFIT	Covered up to R46,000 per family per year, with the exception of stents with a sub-limit of R5,000, intraocular lenses covered up to R6,500 and pacemakers covered up to R8,000 per claim event.	No benefit
ONCOLOGY CO-PAYMENT BENEFIT	Cover co-payment up to 20% imposed by medical scheme after benefit limit has been reached OR covers the 1 st 20% of cost of each treatment after the annual limited has been reached, and there are no further medical scheme benefits available.	No benefit
CASUALTY BENEFIT	Accidental casualty benefit up to R26,700 due to emergency and accident. Visits may be for an emergency for a child up to 11 years or younger limited to R2,950 per policy per year.	Accidental casualty benefit up to R26,700 due to emergency and accident. Visits may be for an emergency for a child up to 11 years or younger limited to R2,950 per policy per year.
ROBOTIC PROCEDURE BENEFIT	Cover the shortfall charged by practitioners and any co-payment levied by your medical scheme and cover is up to R39,500 per policy per year.	Cover the shortfall charged by practitioners and any co-payment levied by your medical scheme and cover is up to R39,500 per policy per year.

Assist Benefits

Additional benefits that do not aggregate towards the R219,800 overall annual limit - only available on the **Supreme Gap** option.

- **Cancer Assist Benefit**
Pays a once-off lump sum benefit of R8,000 if an insured is diagnosed with minimum stage 2, **local** or malignant cancer for the 1st time while covered up to the policy **OR** the benefit pays R20,000 for 1st time diagnosis of at least stage 2, **regional** and malignant cancer. If you are successful in claiming the R20 000 benefit and the extent of the treatment 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, there will be a further R15,000 payment.
- **Breast Reconstruction Benefit**
Should you be diagnosed with breast cancer and require breast reconstruction surgery, Admed will provide assistance cover of R29,000 per policy per year.
- **Accident Assist Benefit**
An amount of R55,000 will be paid if you or your dependent dies or becomes permanently and totally disabled because of an accident while covered on this policy.
- **Violent Crime benefit**
If the insured accidentally dies or is disabled because of a violent crime, Admed will double the Accident Assist benefit to cover the unexpected costs which may arise as a result of the violent nature of the incident. This benefit will be capped at legislated.
- **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, or witness to, a traumatic accident, or if you lose an immediate family member, Admed will pay a fixed amount of R950 towards the cost of each counselling session, limited to R30,000 per family per year.
- **Baby Bump Benefit**
On diagnosis of pregnancy by a medical practitioner, R2,500 will be paid to the member.

Policy Exclusion:

Please note that all costs related to ward fees and other Hospital expenses, including materials and medication on the Hospital account, are not covered on the Admed Gap policy. Please also take note that should a specific exclusion apply to member's particular medical scheme's option, that this exclusion will be applicable to the gap cover as well.

There are various other exclusions and benefits not covered. Please refer to the 2026 Admed Gap Cover brochure for more details.

Where do I get more information and who can I contact if I have any questions?

Admed Gap call centre can be contacted on **0860 102 936** for the clarification of benefit changes and contribution increases and the **Aon Resolution Centre** will also be available to provide advice on option selections for 2025 on arc@aon.co.za or call **0860 100 404**.

Connect with us

We focus on communication and engagement, across insurance retirement and health, to advise and deliver solutions that create great client impact.

We partner with our client and seek solutions for their most important people and HR challenges.

We have established presence on social media to engage with our audiences on all matter related to risk and people.

For more information from Aon Employee Benefits on healthcare, retirement benefits and a wide range of topics feel free to go to www.aon.co.za

Aon Employee Benefits – Healthcare

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