

Financial protection for unexpected  
**medical expense shortfalls**



## ONCOLOGY SUPPLEMENTARY BUY-UP SUMMARY OF COVER 2026

### How does the Oncology Supplementary Benefit work??

The Oncology Supplementary Benefit pays out a lump sum, and additional benefits where applicable, to Insured Parties who have been diagnosed with cancer for the first time. The purpose of the Benefit is to provide additional financial support to help with the high costs of medical treatment as well as the unexpected personal and social costs related to the treatment of cancer.

Any Benefit provided is considered to be a contribution to any pre-estimated costs and expenses related to your Insured Event. We are continuously improving our communications and content. The latest version of this document is available on [www.kaelo.co.za](http://www.kaelo.co.za). Any material changes to your policy terms and conditions, once your Policy has been issued, will be communicated.

## Who can join and who is covered?

Any Western Gap Policyholder up to 66 years of age, has the option to add the Oncology Supplementary Benefit as an added Benefit. All Insured Parties listed on the Western Gap Policy will be covered under the Oncology Supplementary Benefit required treatment.

## How long do I have to wait before I claim?

Your cover will be in place on the first day of the month in which your Policy is activated, i.e. there is no waiting period.

## What are the limits applied to my cover?

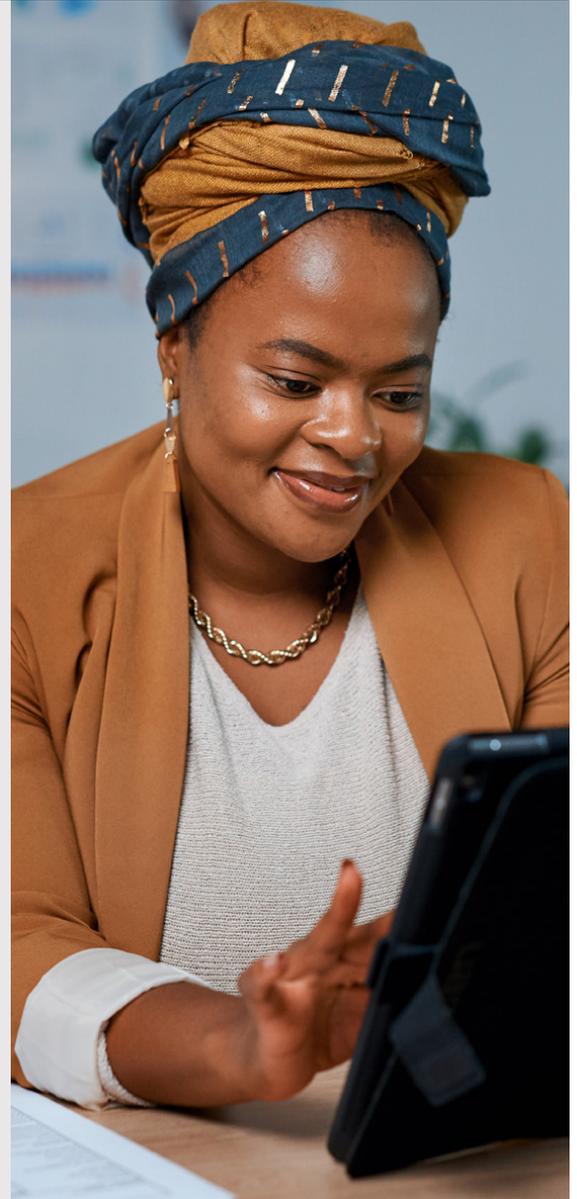
**First-time Oncology Diagnosis, limited to R42 450 per Insured Party per lifetime**, and provided that the Insured Party is younger than **66 years** (at time of claim). The Benefit is for the first-time diagnosis of stage 2 or a higher form of cancer, confirmed by an oncologist or pathologist.

If the Medical Scheme approves reconstructive surgery on the affected breast as part of the oncology treatment plan, a benefit of **R45 000** will be provided **for the reconstruction of the non-affected breast**. An additional **R4 000** will be **available for prosthesis if needed**. This benefit is limited to **one** event per Insured Party over the Policy lifetime.

Supporting documents will be required to claim the Benefits.

## Rules

- The Benefit will not cover secondary or metastasized cancer.
- The claim must be submitted to Western Gap within **six months** of diagnosis.
- A medical report is required confirming the cancer as stage 2 or higher and this must be provided by the oncologist.



## How to submit a claim

To claim from Western Gap, you will need to submit the following:

- A completed Western Gap Claim form, ([www.kaelo.co.za/western-gap-claim-pre-screen-questionnaire/](http://www.kaelo.co.za/western-gap-claim-pre-screen-questionnaire/)).
- A copy of the oncologist's or pathologist's report.
- Additional documents may be required at the claims stage and will be communicated if needed.

### Time frame to submit your claim:

You have six months from the first day that you were hospitalised to submit your claim. Any claim received after the six month period has ended, will not be accepted.

### Time frame to process your claim:

Once all required documents have been received, your claim will be assessed and if valid, paid within 7-14 working days.



Please direct all queries to the **Western Gap Service Centre on 0861 493 587**.



**Submit**



**Notified**