



H.E.L.P Product Brochure



INSURANCE
POLICY

H.E.L.P



An easy to use summary of our Health products.
For more information please [visit our website](#).

Health Cover



Clientèle Health Plans
are **affordable**

We have a range of options for you and your family. Plans start from R500 per month and pays up to R250,000 cover per year. The money is paid as a cash lump sum, to use as you choose.

This is **not** a medical aid.

*Insurance that pays non-medical expense cover as a result of hospitalisation. This is not a medical scheme and cover is not the same as that of a medical scheme. This policy is not a substitute for medical scheme membership.

Health insurance that's
affordable and **easier to
apply for.**





Basic Benefits

Clientèle H.E.L.P (Health Event Life Plan) plans pay out a daily cash amount for long hospital* stays (more than 10 days). They also include a lump sum pay out of up to R25,000 per annum for stays longer than 72 hours. Plans include additional cover for Accidental Death, Accidental Disability, Dread Disease and a Maternity Benefit. All plans include access to a 24 Hour emergency line as well as emergency flight and ambulance services, trauma counselling and HIV support.

- It is easy to apply;
- There are no physical examinations or blood tests required;
- It's easy to claim;
- No unnecessary paperwork.

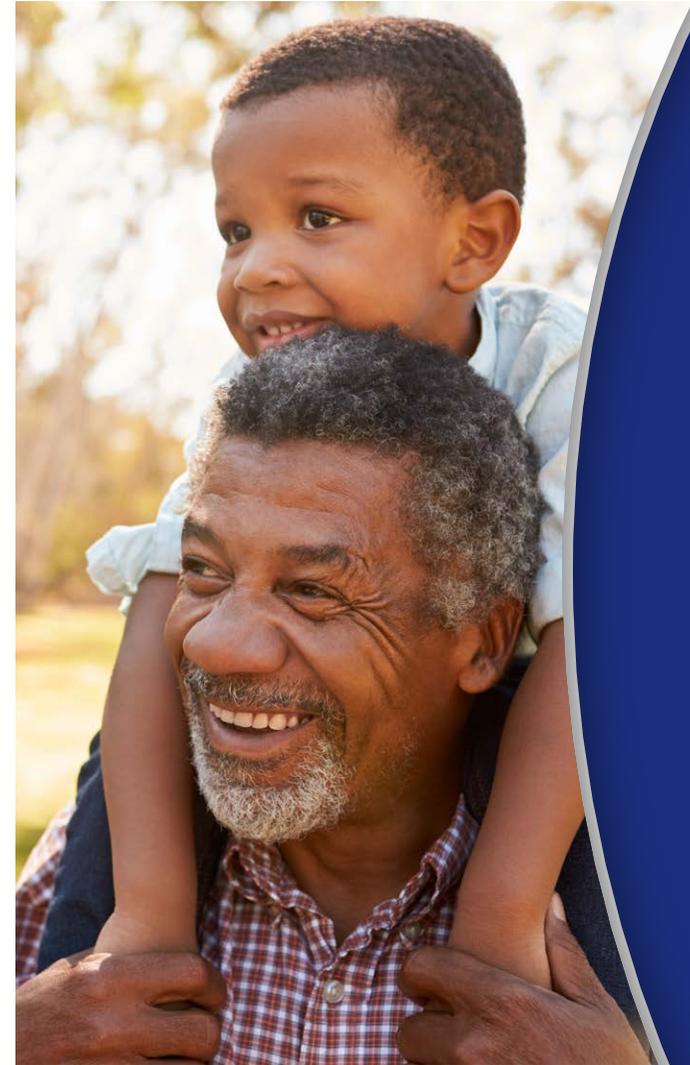


For a personalised quote, please visit our [website](#) and use the quote calculator



Glossary

- **Hospitalised:** When admitted to one of the institutions included on our list. (For an updated list, please visit our [website](#)).
- **Accident:** Injury or admission that is not resultant from a disease nor is self-inflicted.
- **Pre-existing medical conditions:** Conditions that existed before the policy is effective.





Compare our Health Plans

Pick the product you can afford and the option that suits your needs.

	STANDARD H.E.L.P PLAN	ULTIMATE H.E.L.P PLAN	ACCIDENT PLUS PLAN
Cover starts from	R500 p/m	R546 p/m	R406 p/m
Daily Cash	Amount of up to R2,500 (if hospitalised* more than 10 days).	Amount of up to R2,500 (if hospitalised* more than 10 days).	Amount of up to R2,500 (if hospitalised* more than 10 days).
Pays up to	R250,000 annual cover	R250,000 annual cover	R250,000 annual cover for hospitalisation* due to an accident*
Lump Sum Pay out	Up to R25,000 lump sum per stay (if hospitalised* for more than 72 hrs).	Up to R25,000 lump sum per stay (if hospitalised* for more than 72 hrs).	Up to R25,000 lump sum per stay (if hospitalised* for more than 72 hrs).
Maternity Benefit	Yes	Yes	No
Accidental Death Benefit	Up to R250,000 cover	Up to R250,000 cover	Up to R250,000 cover
Accidental Disability Benefit	Up to R250,000 cover	Up to R250,000 cover	No
Dread Disease Benefit	Up to R250,000 cover	Up to R250,000 cover	No
Pre-existing Conditions	Covers pre-existing medical* conditions after a waiting period of 12 months.	Covers pre-existing medical* conditions after a waiting period of 12 months.	N/A
Premium Payback Benefit	No	Yes, pays back all your premiums for the deceased member with valid death claim. 50% of premiums back in cash at age 65 and remaining 50% paid back to beneficiaries upon death.	No
Children Covered	4 at no additional cost	4 at no additional cost	4 at no additional cost





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	STANDARD H.E.L.P PLAN	ULTIMATE H.E.L.P PLAN	ACCIDENT PLUS PLAN
Children cover	Benefits in respect of children covered under this policy are subject to restrictions. These may be subject to legislative changes and are defined in the table below:		
	AGE (YEARS)	Up to Age 4	4–18
	PERCENTAGE OF BENEFIT AMOUNT	50%	100%
	In addition, cover for children under the age of 6 is limited to R10,000 per annum and cover for children between 6 and 13 years is limited to R30,000 per annum.		
Inflation protection	<ul style="list-style-type: none"> • Premiums and benefits will be reviewed annually and will be increased on 1 January each year; • Annual premium increases are subject to the Consumer Price Index (CPI) annual inflation rate published by Statistics South Africa. 		
Premium guarantee	<ul style="list-style-type: none"> • Premiums are not guaranteed but will be reviewed by 1 December each year; • Notification will be sent to you providing the premium increase. 		
Waiting period	<ul style="list-style-type: none"> • There is no waiting period for hospitalisation due to an accident; • There is a 3 months waiting period for illness; • 6 Month waiting period for dread disease; • Waiting period for maternity benefit is 12 months; • 12 Months for specific pre-existing conditions. 		
When will I not be covered	<ul style="list-style-type: none"> • Hospitalisation that has not been authorised by us or where we have not received reasonable notification; • Hospitalisation or treatment received for excluded conditions (refer to the policy terms and conditions); • Hospitalisation not recommended by a medical specialist; • Hospitalisation in a month where the premium is not received; • Hospitalisation for 3 days or less (other than for maternity claims); • Hospitalisation due to illness during the waiting period; • Where the claim is fraudulent or exaggerated in any way; • Hospitalisation in a facility that does not meet our definition of a Hospital; • Hospitalisation related to any illness where the length of stay exceeds the maximum recommended number of days for such conditions (refer to limits of cover and definitions). 		
When will my policy commence and end?	<p>Your policy commences once the application and risk has been accepted by the insurer and will continue until one of the following events happen:</p> <ul style="list-style-type: none"> • Failure to pay 3 (three) consecutive premiums; • The life assured dies; • Cancellation of the policy is subject to 31 day notice period. 		



Claiming is easy with Clientèle

The E-card containing your policy information and our contact details is available on the App.

To claim, you will need to notify us of your hospitalisation* immediately or by no later than the next business day following your admission.

The hospital will assist you with the necessary medical documentation, which you can email to us or fax.

We make it easy for you to submit your claim. Choose the method you are most comfortable with:

- Contact us on 011 320 3000;
- Fax us on 011 320 3170
- SMS your policy number to 47081 and we'll call you back (standard rates apply);
- Email us at claims@clientele.co.za;
- Dial *120*337# (Standard rates apply);
- Visit our [website](#);
- Clientèle App: click on 'Claim'.

Basic documents required when submitting a Hospital claim

Hospital illness:

- The original hospital account to confirm the dates of admission and discharge. Or, a hospital discharge summary if admitted to a public hospital;
- A certified copy of the identity document. (Only at the first claim for each insured life).

Hospital maternity:

- The original hospital account to confirm the dates of admission and discharge. Or, a hospital discharge summary if admitted in a public hospital;
- A certified copy of the baby's birth certificate.

Hospital accident and hospital motor vehicle accident:

- All of the requirements in the section called "Hospital Illness";
- The 'Police Report' to be completed by the Investigating Officer;
- The Official Road Accident Report (In the event of a motor vehicle accident);
- A certified copy of the driver's license. (Only if the claimant was the driver of the vehicle).

NB: In some instances, additional documents will be required to assess and finalise the claim.

H.E.L.P Plans:
****sms HELP to 45487**



You can change your details, buy a new product or lodge a claim via our App, 24 Hours a day.

The App is free to use on all major SA networks. This means that Clientèle will pay for the data that the App uses.



Clientèle

Clientèle Office Park, Corner Rivonia & Alon Roads, Morningside, 2196

Monday to Friday: 08h00 – 17h00 • Saturday: 08h00 – 12h00

Tel: 011 320 3000

Fax: 011 320 3133

Email: services@clientele.co.za

Website: www.clientele.co.za

Mobisite: www.clientele.mobi

H.E.L.P Plans: sms HELP to 45487*

*(sms free of charge)

Disclaimers

**This is not a medical scheme and the cover is not the same as that of a medical scheme. This policy is not a substitute for medical scheme membership.

By sending a SMS you consent to Clientèle processing and retaining your personal information in line with our Privacy Policy which is available on www.clientele.co.za.

Life Insurance policies are underwritten by Clientèle Life Assurance Company Limited, a licensed life insurer and authorised FSP 15268. Annual premium increases are subject to the Consumer Price Index (CPI) annual inflation rate published by Statistics South Africa. Non-life insurance policies are underwritten by Clientèle General Insurance Limited, a licensed non-life insurer and authorised FSP 34655. Premiums and benefits escalate by 10% annually.

Third parties are remunerated for their services to the brand.

This information does not constitute financial advice.

Terms and conditions apply visit www.clientele.co.za.