



## PLAN COMPARISON

This is a short term insurance product and not a medical aid.

### CORE

Single	R 285
Single Insured + 1 Child	R 475
Single Insured + 2 Children	R 660
Single Insured + 3 Children	R 830
Single Insured + 4 Children	R 1 050
Couple	R 555
Couple + 1 Child	R 740
Couple + 2 Children	R 920
Couple + 3 Children	R 1 090
Couple + 4 Children	R 1 305

### HEALTH

Single	R 300
Single Insured + 1 Child	R 540
Single Insured + 2 Children	R 770
Single Insured + 3 Children	R 1 010
Single Insured + 4 Children	R 1 245
Couple	R 605
Couple + 1 Child	R 835
Couple + 2 Children	R 1 075
Couple + 3 Children	R 1 310
Couple + 4 Children	R 1 545

### BLUE

Single	R 525
Single Insured + 1 Child	R 830
Single Insured + 2 Children	R 1 140
Single Insured + 3 Children	R 1 445
Single Insured + 4 Children	R 1 755
Couple	R 1 015
Couple + 1 Child	R 1 340
Couple + 2 Children	R 1 555
Couple + 3 Children	R 1 775
Couple + 4 Children	R 1 990

### PROFESSIONAL

Single	R 670
Single Insured + 1 Child	R 1 070
Single Insured + 2 Children	R 1 410
Single Insured + 3 Children	R 1 680
Single Insured + 4 Children	R 1 955
Couple	R 1 280
Couple + 1 Child	R 1 535
Couple + 2 Children	R 1 780
Couple + 3 Children	R 2 170
Couple + 4 Children	R 2 415

### EXECUTIVE

Single	R 840
Single Insured + 1 Child	R 1 230
Single Insured + 2 Children	R 1 560
Single Insured + 3 Children	R 1 830
Single Insured + 4 Children	R 2 090
Couple	R 1 485
Couple + 1 Child	R 1 760
Couple + 2 Children	R 2 095
Couple + 3 Children	R 2 445
Couple + 4 Children	R 2 690

### ELITE

Single	R 1 075
Single Insured + 1 Child	R 1 475
Single Insured + 2 Children	R 1 815
Single Insured + 3 Children	R 2 295
Single Insured + 4 Children	R 2 625
Couple	R 1 875
Couple + 1 Child	R 2 185
Couple + 2 Children	R 2 530
Couple + 3 Children	R 2 850
Couple + 4 Children	R 3 315

### PREMIER

Single	R 1 340
Single Insured + 1 Child	R 1 795
Single Insured + 2 Children	R 2 245
Single Insured + 3 Children	R 2 700
Single Insured + 4 Children	R 3 155
Couple	R 2 585
Couple + 1 Child	R 3 040
Couple + 2 Children	R 3 495
Couple + 3 Children	R 3 945
Couple + 4 Children	R 4 400

ADD ON:  
EXCESS  
BUSTER  
**R25** PM  
T & C's apply

ADD ON:  
EXCESS  
BUSTER  
**N/A**

ADD ON:  
EXCESS  
BUSTER  
**R35** PM  
T & C's apply

ADD ON:  
EXCESS  
BUSTER  
**R50** PM  
T & C's apply

ADD ON:  
EXCESS  
BUSTER  
**R50** PM  
T & C's apply

ADD ON:  
EXCESS  
BUSTER  
**R50** PM  
T & C's apply

ADD ON:  
EXCESS  
BUSTER  
**R75** PM  
T & C's apply

Underwritten by South Africa



Tel:  
Address:

010 001 0141 Web: [www.oneplan.co.za](http://www.oneplan.co.za) | [www.onepet.co.za](http://www.onepet.co.za)  
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Oneplan and Onepet are administered by Onecard Management Services (PTY) Ltd, an authorised financial services provider 43628. Oneplan is not a Medical Aid Scheme but a short-term insurance product underwritten by Zurich Insurance Company South Africa Limited. 19 January 2016

# PLAN COMPARISON

## COVER LIMITS

HEALTH COVER	WAITING PERIODS	CORE	HEALTH	BLUE	PROFESSIONAL	EXECUTIVE	ELITE	PREMIER
General Practitioner (Doctor)	30 Days	Up to R260 per visit	Up to R260 per visit	Up to R270 per visit	Up to R285 per visit	Up to R295 per visit	Up to R310 per visit	Up to R340 per visit
Scripted Medication	30 Days	Up to R115 per script	Up to R170 per script	Up to R125 per script	Up to R185 per script	Up to R220 per script	Up to R250 per script	Up to R285 per script
Pathology (Blood Tests)	30 Days	Up to R340 per event	Up to R400 per event	Up to R340 per event	Up to R395 per event	Up to R510 per event	Up to R565 per event	Up to R680 per event
Radiology (X-Rays)	30 Days	Up to R340 per event	Up to R400 per event	Up to R340 per event	Up to R395 per event	Up to R510 per event	Up to R565 per event	Up to R850 per event
Dentistry	90 Days	Up to R455 per visit	Up to R565 per visit	Up to R455 per visit	Up to R565 per visit	Up to R680 per visit	Up to R795 per visit	Up to R795 per visit
Specialist Cover	90 Days					Up to R1 700 per visit. (Referral from GP required)	Up to R1 700 per visit. (Referral from GP required)	Up to R1 700 per visit. (Referral from GP required)
Maternity Pre Birth Confirmation of pregnancy required	7 months applicable to new policies thereafter waiting period of 4 months from date of conception	Up to R455 per visit	Up to R455 per visit	Up to R455 per visit	Up to R455 per visit	Up to R455 per visit	Up to R510 per visit	Up to R740 per visit
Optometry	12 Months	Up to R800	Up to R800	Up to R800	Up to R1 130	Up to R1 130	Up to R1 470	Up to R1 700

Maximum overall limits for Health Cover of:

Single: R5 950 or 3: R10 000 4 plus: R13 280	Single: R9 310 2 or 3: R14 470 4 plus: R17 920	Single: R5 950 2 or 3: R10 000 4 plus: R13 280	Single: R9 310 2 or 3: R14 470 4 plus: R17 920	Single: R16 470 2 or 3: R22 910 4 plus: R27 490	Single: R25 580 2 or 3: R33 090 4 plus: R39 240	Single: R28 350 2 or 3: R36 290 4 plus: R40 820
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HOSPITAL RISK COVER	WAITING PERIODS	CORE	HEALTH	BLUE	PROFESSIONAL	EXECUTIVE	ELITE	PREMIER
Emergency Illness	90 Days	* Up to R4 500		* Up to R4 500	* Up to R4 500	* Up to R4 500	* Up to R4 500	* Up to R4 500
Emergency Accident	Immediate	* Up to R4 500		* Up to R4 500	* Up to R4 500	* Up to R4 500	* Up to R4 500	* Up to R4 500
Accident Cover	Immediate	* Up to R113 000 per insured event		* Up to R153 000 per insured event	* Up to R153 000 per insured event	* Up to R250 000 per insured event	* Up to R374 000 per insured event	* Up to R567 000 per insured event
Illness in Hospital	90 Days Certain conditions are excluded for 12 Months			* Up to R34 000 per insured event p/p	* Up to R45 000 per insured event p/p	* Up to R57 000 per insured event p/p	* Up to R96 000 per insured event p/p	* Up to R170 000 per insured event p/p
Dread Disease	6 Months			Up to R210 000	Up to R210 000	Up to R283 000	Up to R283 000	Up to R340 000
Natural Birth and Emergency Caesareans	12 Months			* Up to R34 000 per insured event p/p	* Up to R45 000 per insured event p/p	* Up to R57 000 per insured event p/p	* Up to R96 000 per insured event p/p	* Up to R96 000 per insured event p/p
Accident Disability	Immediate	Up to R147 000		Up to R147 000	Up to R147 000	Up to R147 000	Up to R147 000	Up to R147 000
Family Death Cover	Accidental death (Immediate) Natural death (90 Days)	Principal Insured: R5 670 Spouse/Partner: R5 670 Children 14-21yrs: R5 670 Children 6-13 yrs: R2 835 Children 1-5yrs: R1 420 Children unborn (28 weeks) to 0yrs: R850		Principal Insured: R5 670 Spouse/Partner: R5 670 Children 14-21yrs: R5 670 Children 6-13 yrs: R2 835 Children 1-5yrs: R1 420 Children unborn (28 weeks) to 0yrs: R850	Principal Insured: R11 340 Spouse/Partner: R11 340 Children 14-21yrs: R11 340 Children 6-13 yrs: R5 670 Children 1-5yrs: R2 835 Children unborn (28 weeks) to 0yrs: R1 420	Principal Insured: R11 340 Spouse/Partner: R11 340 Children 14-21yrs: R11 340 Children 6-13 yrs: R5 670 Children 1-5yrs: R2 835 Children unborn (28 weeks) to 0yrs: R1 420	Principal Insured: R11 340 Spouse/Partner: R11 340 Children 14-21yrs: R11 340 Children 6-13 yrs: R5 670 Children 1-5yrs: R2 835 Children unborn (28 weeks) to 0yrs: R1 420	Principal Insured: R11 340 Spouse/Partner: R11 340 Children 14-21yrs: R11 340 Children 6-13 yrs: R5 670 Children 1-5yrs: R2 835 Children unborn (28 weeks) to 0yrs: R1 420

Trauma, Assault and Accidental HIV

Immediate

Trauma and Assault Counselling, Accidental HIV Protection Services, Accidental HIV Infection Treatment.

Repatriation

Immediate

Up to R11 300 per insured person. Repatriation of mortal remains to funeral home.

Ambulance and Emergency Services

Immediate

24 hr Medical Assistance with an emergency dedicated line. In the event of a justifiable, life-threatening medical emergency, the insured will be transported by ambulance to the nearest appropriate medical facility.

• Terms and Conditions Apply • Pre-Existing Conditions are excluded for a minimum of 12 Months • All healthcare cover amounts are paid onto your Onecard • \* Excess applies