

Guardrisk
FINANCING RISK EFFICIENTLY

ADMEDGAP

PERSONAL ACCIDENT CLAIMS ADMINISTRATION GUIDELINE




A 24 hour Personal Accident policy provides a benefit to employees, who suffer accidental bodily injury.

Accidental Bodily Injury could be the result of any of the following:

- Motor vehicle / bus accident
- Recreational Sports Injuries
- Injuries on Duty
- Injuries at home
- Hi-Jacking and/or Assault
- Snake or dog bites
- And many more....

HOW DO YOU SUBMIT A CLAIM?

All claims must be submitted to Guardrisk Insurance Company Limited / Admed. Complete the claim form and send it to either of the following:

	E-Mail Address	: admed@guardrisk.co.za
	Telephone Number	: 0860 102 936
	Postal address	: P.O. Box 786015, Sandton, 2146

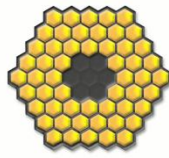
All claims must be notified within 180 days from the date of the injury. Failure to do so will result in the claim being declined for late notification.

EXCLUSIONS

There is a list of Exclusions that you must be aware of, which are as follows:

The Insurers shall not be liable to pay any claim under this Policy in respect of any Insured Person

1. whilst engaging in flying as pilot or member of the crew. This exception does not apply to Insured Persons engaging in ballooning, hang-gliding, paragliding and parachuting, provided that such activities are solely for social and/or pleasure purposes and not of a competitive nature or for reward
2. caused by the Insured Person's suicide or intentional self-injury
3. caused solely by an existing physical defect or other infirmity of the Insured Person
4. as a result of the influence of alcohol, drugs or narcotics upon the Insured Person unless administered by a member of the medical profession (other than himself) or unless prescribed by and taken in accordance with the instructions of a member of the medical profession (other than himself)
5. caused by the Insured Person's participation in any riot or civil commotion
6. arising from war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power
7. as a result of the Insured Person's deliberate exposure to exceptional danger (except in an attempt to save human life) or the Insured Person's own criminal act
8. while participating in sport as a professional player.



Guardrisk
FINANCING RISK EFFICIENTLY

24 HOUR CLAIMS DOCUMENTS

Once the claim has been submitted to the Insurers they will advise exactly what documentation is required to fully assess the claim. The documentation required for each claim varies on the circumstances of the claim. A useful guide to the claim requirements is as follows:

PERMANENT DISABILITY CLAIMS

This is a unique benefit and the claims requirements differ for every single claim that is submitted, as the Insurers need to get specialist medical reports from the attending doctors.

The basic requirements are as follows:

1) Motor Vehicle Accident

- Fully completed claim form
- Confirmation of earnings
- Fully completed Medical Report, attached to claim form
- Traffic Collision Report

Once the Insurers have received the above information they will write to the doctors directly.

2) Injuries resulting from an Assault or Hijacking

- Fully completed claim form
- Confirmation of earnings
- Fully completed Medical Report, attached to claim form
- Police Report of the incident
- Newspaper reports (if any are issued)

Once the Insurers have received the above information they will write to the doctors directly.

3) Pedestrians injured whilst crossing a road

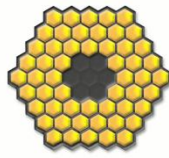
- Fully completed claim form
- Confirmation of earnings
- Fully completed Medical Report, attached to claim form
- Police Report of the incident

Once the Insurers have received the above information they will write to the doctors directly.

4) Sports Injuries or Injuries at home

- Fully completed claim form
- Confirmation of earnings
- Fully completed Medical Report, attached to claim form

Once the Insurers have received the above information they will write to the doctors directly.



Guardrisk
FINANCING RISK EFFICIENTLY

HOW TO OBTAIN THE RELEVANT INFORMATION / DOCUMENTATION

It is important to note that the quicker you start asking for the information, the easier it will be to obtain the documentation

Traffic Collision Report

All motor vehicle accidents must be reported to the police within 24 hours of the occurrence of a motor vehicle accident.

This report is usually completed on the day of the accident and should be available to the family within 5 days of the accident. The family should again advise the police that they require this report for an insurance claim and follow up with the police until they get the report.

Police Case Number / Police Report

In the event of Bodily Injury resulting from an assault or hijacking situation, the police will issue a Cas Number and Report detailing the information that they have regarding the incident. This report generally takes a bit longer to obtain, as there are usually a number of witnesses that the police need to talk to before they can be sure of the exact circumstances surrounding the incident.

Guardrisk Insurance Company Limited will send the police a form which they can complete, so it is important that we are the police station name, the case number and the name of the investigating officer.

Newspaper Clippings/Reports

In most cases there will not be any newspaper reports of the incident. However, there are times where there are reports in the local newspapers about the incident. These reports are very useful in the assessment of the claim and will certainly speed up the claims process.

GENERAL

Once we have been advised of your claim, you will be given a copy of the Claim Form, which includes a Medical Report section for completion by your attending Medical Practitioner. This will make it a lot easier for Guardrisk Insurance Company Limited to deal directly with the doctors in order to get the information they require to assess the claim fully.

It is important to note that these claims can take up to 24 months to finalise, as the Insurer always has to make provision for sufficient healing time and also time for possible deterioration of the Member's condition.