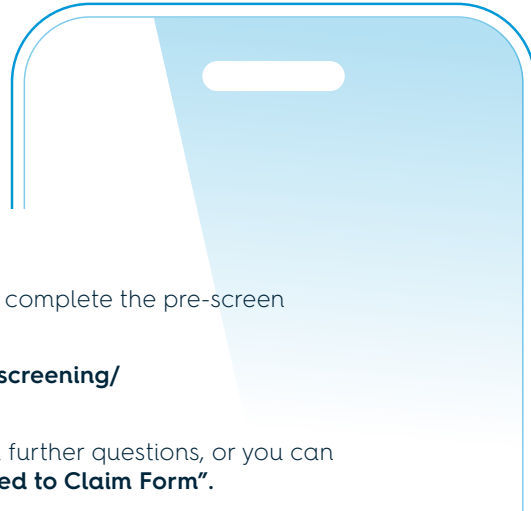


## Priority Pass Step by Step guide



**1** Follow the link to the Kaelo Gap claim form and complete the pre-screen questionnaire.

<https://www.kaelo.co.za/kaelo-gap-claim-pre-screening/>

**2** Depending on your selection, you may be asked further questions, or you can proceed to the claim form by clicking on **“Proceed to Claim Form”**.

**kaelogap**  
shortfall cover

### Kaelo Gap Claim Pre – Screen Questionnaire

We understand that claiming from your Kaelo Gap policy may feel overwhelming, so we've put together a quick questionnaire to guide you through the Claims process.

Where did your procedure/treatment take place? \*

- In-hospital
- Casualty ward
- Doctor's rooms
- Co-payment (a fixed amount, defined by your Medical Scheme, paid to the Service Provider before receiving the service)
- Other

[Proceed to Claim Form](#)

**3** Read the instructions displayed points 1 - 7 and ensure that you have all the supporting documentation.

**4** Scroll down and enter your ID or Policy number and click **“Next”** to receive your OTP (One time Pin).

Please enter your ID, Passport No. or your Kaelo Gap Policy No. in order for us to find your policy.

What would you like us to search with? \*

- South African ID Number
- Passport Number
- Policy Number

Cellphone No. \*

Please ensure you enter the cellphone number that is linked to your policy. You will receive a OTP to verify your policy and continue with the online submission for your claim.

Broker Submission

I am submitting on behalf of the policyholder

[Next](#)

**5** Enter the OTP sent to your cellphone and click next:

Instructions   **OTP Validation**   Policyholder Details   Payment Instructions   Patient and Event Details   Declaration

17% Complete 2 of 6

One Time Pin \*

Please enter the OTP that was SMS'd to the cellphone number provided on the previous screen.

Should you not receive the OTP within a few minutes, please click the Next button and a new OTP will be generated. Alternatively please [complete the PDF claim form](#).

Previous   Next

**6** Follow steps 3 - 6 by entering all the details of the Policyholder; patient and event. At the end of each step, click next:

Instructions   OTP Validation   **Policyholder Details**   Payment Instructions   Patient and Event Details   Declaration

33% Complete 3 of 6

**Policyholder Details**

Title \*

Mr

First Name \*   Surname \*

Medical Scheme Name \*   Medical Scheme Plan \*

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. The administrator of this product is Kaelo Risk (Pty) Ltd, an authorised Financial Services Provider (FSP 36931). Insurance products are insured by Centriq Insurance Company Limited, a licensed non-life insurer and an authorised Financial Services Provider (FSP 3417). Lifestyle Benefits are Kaelo offerings. Service Providers are contracted to Kaelo. This document may not, in whole or in part, be copied, photocopied, reproduced, translated, simplified, published or distributed in any way without the prior written consent of Centriq Insurance Company Limited.