

Name:

Date:

Age:

How to choose a medical aid plan that suits your needs.

To advise you, I will need more information regarding your cover needs.

Please could you complete the table below and send it back to me?

Do you have any chronic conditions you need cover for in terms of medication or consultations?	
What were your average out of hospital expenses in the last 2 years? (Doctors, medication, scans, etc.)	
Would you mind being restricted to network doctors or hospitals? Plans with network providers are cheaper than those where you have free choice.	
<u>N.B.: How much are you able to spend on cover?</u>	
Do you have dependents that need cover too? Who are they and how old are they?	
Do they have any specific conditions that need to be covered? Please list.	
When last were you on a medical aid?	
Will your employer be subsidizing your contribution?	