

THE GAP

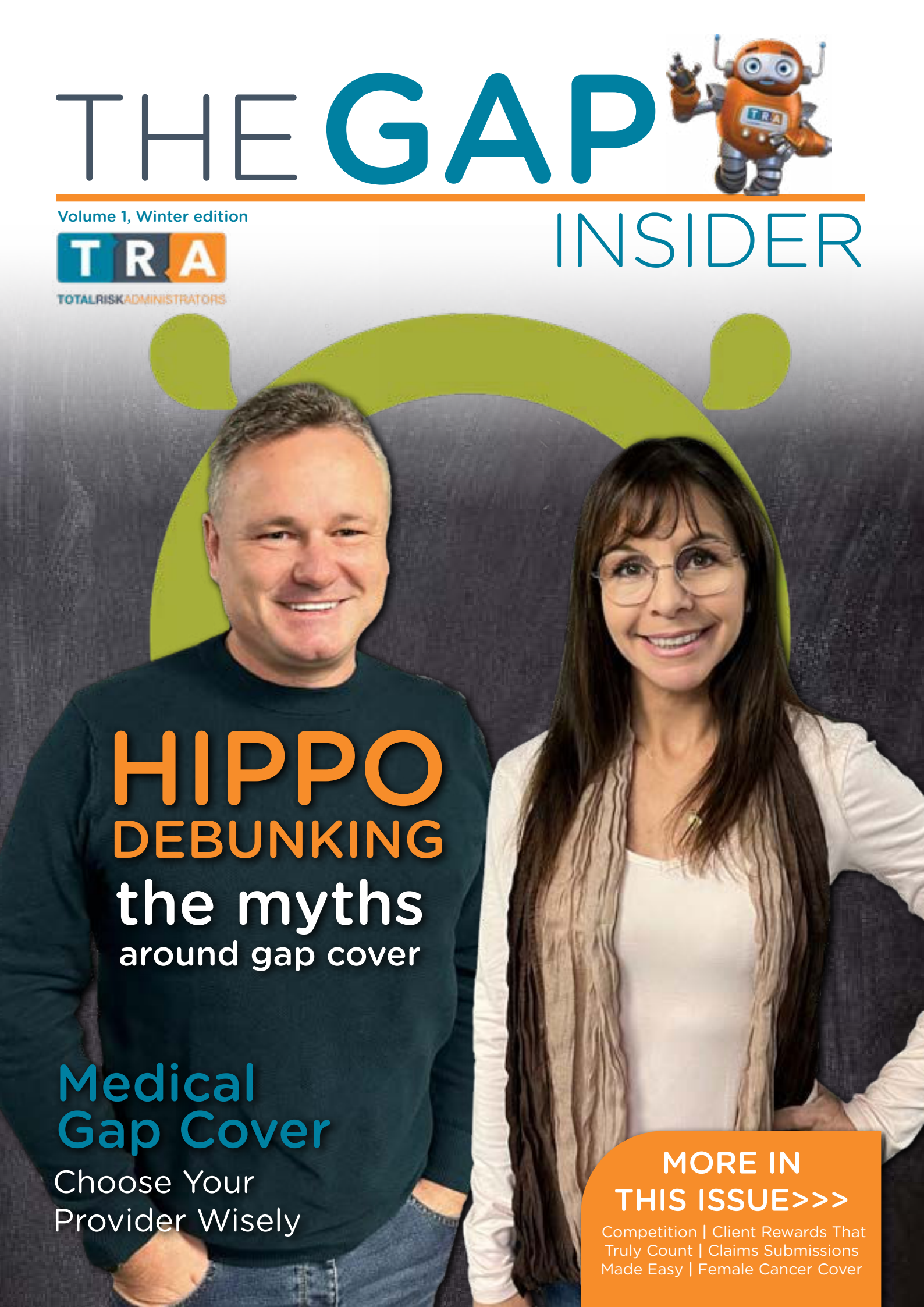


Volume 1, Winter edition



TOTALRISKADMINISTRATORS

INSIDER



HIPPO

DEBUNKING

the myths

around gap cover

Medical Gap Cover

Choose Your
Provider Wisely

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Is your medical aid product
getting **too expensive?**
Choose a **more affordable**
medical aid plan and let
Female Cancer Cover sort out
your co-payments!

Now with TRA Assist
a mobile app offering access to Uber trips,
a panic button and trauma counselling

Contact your
Financial Advisor for
more information

**Female
CANCER COVER**

by

TRA

TOTALRISKADMINISTRATORS

www.totalrisksa.co.za

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From the editor

Welcome to our first edition of The Gap Insider, a quarterly, interactive publication designed to keep you abreast of the freshest news and developments in the world of medical gap cover.

And what better way to start than with an exclusive interview with Hippo Insurance, a digital platform that is growing in popularity with regular South Africans who use it to compare insurance quotes in every sphere of life.

Ashley Smart, CEO: Hippo and Alexia Graham, Senior Manager: Hippo Advisory Services explain, why taking out gap cover is a necessity, and shed light on some of the misconceptions surrounding this short-term insurance product. For instance, how does medical gap cover work exactly and when does it kick in to cover medical aid shortfalls? This is a 'grey' area that continues to confuse consumers.

Our feature story on page 6 further highlights the importance of choosing your medical gap cover

insurer with great care, by following the steps and guidelines provided, so that you are not disappointed and left to cover shortfalls out of pocket.

And we introduce you to our new Podcast series, which went live in March. If you haven't yet had the time to tune in, not to worry, we have provided you with a synopsis plus live link to click on in this edition, that will take you straight into the particular podcast that sparks your interest.

All this and more in the Winter edition of The Gap Insider. Please let us know what you think, and what stories you would like to see featured. Pop us a mail – admin@totalrisksa.co.za. We would love to hear from you!!

Stay warm.

Liana

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TRA

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HIPPO DIGITAL PLATFORM

A big hit with younger generation

WHY MEDICAL GAP COVER IS BECOMING A NEED, NOT A WANT

By Liana Shaw

Hippo has become a household name in South Africa, and not for its obvious connection to one of Africa's largest land mammals. Such is the growth and popularity of the hippo.co.za digital platform, that every month over 250 000 South Africans shop on Hippo, 12 500 of whom are looking for health cover - including medical gap cover.

First introduced in 2007 – initially as a means to compare motor vehicle insurance providers, this well-known South African brand now dominates the aggregator market through its product range offering and popularity, especially among the younger generation, which has embraced the digital age in just about every segment of their lives.

To talk more about Hippo and shed light on some of the common myths and misconceptions surrounding medical gap cover, we caught up with Ashley Smart, CEO: Hippo and Alexia Graham, Director: Hippo Advisory Services.

Thank you both for taking time out of your busy schedules to explain the differences between a medical aid plan and gap cover, and why it is important for people to have both.

But first, talk us through the evolution of hippo.co.za and what led to its inception.

Our holding company owns a few aggregators globally including Compare the Market in the United Kingdom and Hippo in South Africa. In more developed markets, online aggregators dominate the car insurance market with over 80% of all car insurance purchased online. Hippo dominates the aggregator space in South Africa and we are seeing impressive growth as more consumers enjoy the convenience of easily comparing different quotes and shopping online.

In layman terms, aggregation refers to the comparison of various products and prices in an objective way. In the medical aid environment, it's all about fully understanding products by eliminating their complexity, understanding the core components of cover and ultimately making the right purchasing decision for you and your family.

The hippo.co.za platform does this effectively by asking simple but key questions which results in instant quotes from various providers. The site offers a user-friendly journey providing customers with confidence to either make a decision or engage further with Hippo Advisory Services advisors. Moreover, it has contracts with all the major open market medical schemes, to allow consumers to make informed decisions from a broad range of products.

We've invested heavily in building the brand, and over the past five years, have focused on improving the user experience using specialised software and state-of-the-art technology. We are now at the point where the site is not only easy and convenient, but each interaction is followed up by one of our consultants who is able to impart additional advice and explain the differences between the respective products in a clear concise way.

Why would I need to consider taking out medical gap cover if I happen to subscribe to a medical aid's premium product offering that provides 100% coverage?

Medical aid providers sell products that promise 100% coverage, but bear in mind that this only means 100% of medical aid tariffs. Should your health care practitioner, surgeon or other specialist in-hospital charge above these tariffs, which is mostly the case, you will be left with a substantial shortfall. And let's not forget the costs of an anesthetist, who can charge up to five times those of medical aid tariffs due to the specialty of the service offered. Even those options that cover members at 200% of medical aid rates are likely to experience shortfalls.

This is where having gap cover becomes a necessity. Bear in mind, all medical aid products, are somewhat limited and restricted. This, together with attracting young healthy lives, helps medical schemes manage their contributions and ensures long term sustainability. It's important for consumers to be aware of the limitations and restrictions in their medical aid product.

I know of people who have gap cover but who are dissatisfied with the way their claim was met by their provider. How would you explain this?

These types of occurrences are usually the result of the consumer having signed up to a gap product that may be unsuitable for their respective needs. This is where the Hippo model can save you undue stress and confusion, as you are able to select from various levels of cover and then compare available products in that category, including the merits and limitations of the product.

But first, before even considering gap cover options, you need to understand exactly what your medical aid will cover and what it will not. You need to understand the shortfalls of your medical aid, before choosing a gap cover product, as they are not all the same.

For example, take the network hospital aspect. Some medical aids prefer you to use designated hospitals for planned procedures that fall within their network, to avoid penalty co-payments. Some gap cover products make provision for this penalty co-payment, while others do not.

“Before considering gap cover options, you need to understand exactly what your medical aid will cover and what it will not.”

this stage, these are simply opinions as we are yet to see actual implementation of NHI and the impact thereof.

What are the current trends you are seeing regarding gap cover?

What is increasingly evident is that demand for gap cover is growing and will increase over time. Consumers are becoming even more aware of the shortfalls in medical aid products. This is partly due to increased awareness of consumers because of consistently high medical aid increases and better access to easy-to-use price and product comparison tools, like Hippo.

Medical aid price increases that often outperform inflation, coupled with benefit management in the form of bigger co-payments and shortfalls are becoming an unwelcome reality for the consumer.

What do gap cover providers need to do to remain relevant and uppermost in the consumer's mind?

Gap cover providers are differentiating themselves by offering different levels of cover and a range of add-ons, such as emergency assistance, driver assistance, panic and emergency support and the like, all of which are extremely meaningful and important to South Africans at this time.

There are many gap providers in the market but the ones that will remain the most competitive are those that similar to medical aid schemes, have distribution and marketing strategies that continually grow with young healthy lives. Hippo's market is typically a younger, tech savvy generation. The average age of a Hippo consumer is 34 years which is considerably lower than the average age of most open market medical aid scheme members. The profile of the average Hippo customer is valuable to medical aid schemes, gap insurers and the participating policy holders.

This clearly shows that to remain sustainable, gap cover providers will need to keep up with all the digital and social media platforms that exist, as well as embrace and become prominent on any new digital products and services that may be introduced in the future. In short, they need to fish where the younger generation fish!

What recourse does a consumer have in the event of an unsatisfactory experience with a gap cover provider?

Thankfully, when it comes to health care insurance, fair, objective rules are clear and well applied by the regulator. The Financial Sector Conduct Authority (FSCA), allows additional measures and penalties to be imposed on insurers in the best interests of members, if claims are not paid when they should be, or consumers are not treated fairly.

Every gap cover provider needs to make a complaints policy available on their website and relevant material, which provides clarity on what to do if the need arises to lodge and escalate a formal complaint.



NEWSFLASH!

The annual aggregate limit for TRA gap cover is R198 660 per insured person.

The limit came into effect on 1 April 2023 and will change on 1 April 2024. It is important for our policyholders to be aware that the annual aggregate limit has changed from R185 837 per insured person, which was effective from 1 January 2023 to 31 March 2023.

“The demand for gap cover is growing as consumers become ever more aware of the shortfalls in med-aid products.”

It's important to remember that the regulated overall policy maximum per beneficiary on all Gap products is R198 660 per annum.

In closing, is there anything else you would like to add?

In the past, gap cover was mistakenly considered as an add-on for the wealthy, but this could not be further from the truth.

Buying gap cover can translate into substantial cost savings and better benefits. If you are looking to save money by making better healthcare decisions, it often makes better sense to buy a cheaper medical aid plan and boost the benefits by adding gap.

What the people have to say...

<https://www.feefo.com/en-GB/reviews/hippo-co-za?displayFeedbackType=SERVICE&time-Frame=YEAR>

★★★★★
SANELE
'Perfect'
Was easy and effortless

★★★★★
TAWANDA
'Loved the way they clearly explain.'
Satisfied. Very articulate

★★★★★
TRUSTED CUSTOMER
Quick. More info from each insurer should be provided. diff options and prices

★★★★★
NJABULO
They have a great user interface and having the ability to choose from a variety of choices in under 5 minutes is the best part. No long calls

hippo.co.za



The very structure of the comparison methodology Hippo uses provides all such information with regards to tariff cover for specialists in hospital, exclusions, co-payments and other major medical expense components, so you can accurately compare one product against another, with confidence.

In short, on the Hippo platform, you focus on key aspects of cover that are important to you so that you can supplement the shortfalls with the right gap cover product. The journey allows you to view benefit information at a summarised level and allows you to select more detail if needed.

Medical aids are not always transparent on these issues. How do we know for certain, where their shortfalls lie?

A select number of gap cover providers provide useful tools on their websites that help you determine precisely what your medical aid plan offers and excludes. This is another way to ensure you have all the information you require. The important questions to ask are;

- At what tariff rate does my medical aid reimburse specialists who treat me in-hospital?
- Are there defined co-payments and sub-limits on certain in-hospital procedures?
- Are there any defined limits and co-payments on non-pmb oncology treatments?
- Am I on a network hospital product?

Is it recommended for younger people with fewer health issues to take out medical gap cover?

That's a good point. Let us reiterate that gap cover will only apply if you have medical aid. And if your medical aid specifically excludes a medical service, then gap cover will also not provide benefits for this service.

What's more, gap cover will mostly only kick in to settle shortfalls or co-payments resulting from in-hospital procedures. It cannot be used to supplement doctors' visits or medication that fall outside of hospital stays and procedures.

Now to go back to your question. Medical gap cover costs as little as R99.00 per month, a small sum that will meet the requirements of an average person, young or old, when it comes to shortfalls relating to medical aid tariff differences. Typically, a younger person would not require

a more expensive medical aid product that focuses on conditions that present later in life, such as hip or knee replacements, for example. So, for this market sector, where the medical aid excludes certain elective procedures, a gap product that boosts those expenses would not be relevant. It would make more sense for them to buy a basic gap product for tariff differences and co-payments as opposed to one that boosts sub-limits on elective procedures.

And remember, subscribing to a comprehensive medical aid plan does not necessarily mean fewer co-payments. Often, it means that the plan includes a more extensive range of benefits, which could equate to even higher shortfalls. Your age and specific needs are critical when choosing both medical aid and gap cover. Gap Insurers often increase the premium for new entrants where age exceeds 60 or 65 years.

What effect is the proposed National Health Insurance (NHI) likely to have on gap cover and its providers?

The NHI is ANC policy and will be implemented at some point. What the NHI will look like, when exactly it will be established and how it will be rolled out, remains unknown. We assume the NHI will offer free services for certain basic care benefits.

The biggest challenge for government is the funding of the NHI. It seems reasonable that the NHI will not be able to cover the scope of treatments that are currently provided by medical schemes. This ultimately means that medical aid schemes will continue to play a significant role in providing finance for more complex procedures and diseases.

Whilst medical aid products are still available to South Africans, so too will the need remain for gap cover. With the framework of NHI focusing on delivery of basic care benefits, we can expect more specialised procedures to be covered by a medical aid policy. In this scenario, more pressure will be placed on medical aid products under the current Medical Schemes Act, to manage benefits and premiums which in turn, will result in continued dependency on gap products to provide peace of mind and cover any product shortfalls. It's important to remember that at

MEDICAL GAP COVER – CHOOSE YOUR PROVIDER WISELY!

Need to be admitted to hospital but are concerned over the shortfall costs your hospital stay may incur? Don't delay diagnosis and treatment due to insufficient funds!

By Liana Shaw



Why is it that our medical aid benefits run out when we need them the most? And why are some medical procedures covered by medical aids while others are only partially covered, or not at all? Medical aid scheme rules and regulations can be exasperating and frustrating to follow. If you are anything like me, you eventually give in and somehow find the money to settle the outstanding shortfalls they are refusing to pay.

But what if there was a way to safeguard yourself? There is! Taking out medical gap cover can prove life-saving!

But are all medical gap providers created equal? Seemingly, not.

DO YOUR HOMEWORK

Doing your homework before signing up with a particular provider or policy is paramount. We are all

individuals with varying needs and medical conditions, so what may suit one person may not necessarily suit another.

Coverage: First, look for a policy that provides coverage for the specific medical procedures and services that you may require. More important, make sure that the policy covers the gap between what your medical aid scheme pays and what your healthcare provider charges.

Cost: Consider the cost of the policy and whether it fits within your budget and compare the premiums and benefits of different policies to find one that provides the best value for your money.

Provider network: Check whether the policy covers the healthcare providers and facilities that you prefer or need to use.

Limits and exclusions: Look carefully at any limits or exclusions on the policy to ensure that it meets your specific needs. Some policies may have exclusions for pre-existing conditions, or may have annual or lifetime limits on the amount of coverage provided.

Reputation and customer service: Consider the reputation of the insurance company offering the policy and their customer service record. Read reviews from other customers to get a sense of their experiences with the company.

Check the reputation and status of your medical gap cover provider

In my search, this final point played a big role in my personal selection process. I began with an organic google search, alongside consulting credible platforms such as Hellopeter to hear of others' views and experiences with respect to service issues, claims issues or admin issues.

Even if your provider is not the worst rated insurance company, poor service can lead to lack of

communication, customers being ignored and plenty of stress, as well as poor insurance ratings. Equally, when claims are not processed properly, or not processed at all, the result is a lack of trust in the insurer. Companies that make big, empty promises to no avail quickly lose their standing, while racking up poor reviews.

Admin issues can be just as stressful. Unauthorised deductions, debit orders being duplicated or not going off, suspicious charges, policies not being updated, incorrect details being added to claims and the like, are red flags.

Compare insurance companies on Hellopeter

Hellopeter proved a valuable source of information, with certain insurers standing out in terms of customer satisfaction, among them, Total Risk Administrators, who also came out tops in a comparative exercise recently featured in the online publication justmoney.co.za.

In a recent article, written by Marelize de Villiers, the magazine compared the performance of some of the better-known medical gap providers in South Africa:

	TRA (Total Risk Administrators)	Competitor A	Competitor B	Competitor C
	Super Cover Plus	Universal Gap Cover	Gap Plus	Gap Cover
Monthly installment per family	R300	R606	R481	R429
Cover offered above medical aid tariff	Up to 700%	Up to 500%	Up to 600%	Up to 500%
Age at which higher premiums apply	65	65	66	60
General waiting period	None	None	3 months	3 months
Casualty ward benefits	Up to R12,000, accident related only, per plicy, per annum	Up to R22,100, accident related only, per policy, per annum	Up to R10,000, any medical emergency, per insured person, per annum	Up to R17,400 per insured event, accident only

What the people have to say...

<https://www.hellopeter.com/total-risk-administrators>

★★★★★
15 May 2023 at 12:44pm
TRA BEST GAP COVER
I was recently in a motorcycle accident, and my medical aid did not cover everything. Contacted TRA and once the claim was finalized within 1 hour the outstanding amount was in my account and I could pay it immediately. DEFINITELY THE BEST GAP COVER AVAILABLE

★★★★★
15 May 2023 at 11:29am
Gap Claim
Courteous, friendly & prompt service. Much appreciated.

★★★★★
14 May 2023 at 06:39am
Excellent Service
Always friendly, very helpful and claims are done very quickly. I have never had a problem in all the years that I have been with TRA Gap cover.

What the people have to say...

<https://www.hellopeter.com/total-risk-administrators>

★★★★★
06 May 2023 at 10:52am
GAP COVER THAT WORKS!
I was quite amazed when I received your gap payment without having to claim!
Thank you.

★★★★★
05 May 2023, 11:16
EXCELLENT SERVICE
Total Risk Administrators integrate seamlessly with the medical aid. TRA communicated immediately, reviewed the claims and settled very quickly. Communication was clear and consistent and the payment fair and very satisfactory. I am delighted with the service and will confidently refer TRA as a preferred provider. Thank you!

★★★★★
04 May 2023 at 10:04am
EXCELLENT SERVICE!!!
The service was excellent. Payment of my claim was dealt with very efficiently. I'm impressed as before.

★★★★★
22 Apr 2023 at 10:52am
COMMUNICATING WITH TRA
I used their chat option and found that it worked well. Gap cover payment for a cost not covered by medical aid was paid promptly!

★★★★★
28 Apr 2023 at 13:57pm
REALLY GREAT SERVICE.
They have been really fantastic. The staff are friendly and helpful and claims have been settled very promptly. We can definitely recommend them for GAP cover.



Coming across this article on the internet was fortuitous. This, together with the positive reviews on Hellopeter, aided me in my decision to sign up with Total Risk Administrators (TRA). The price was right and their service offering, according to all I managed to glean via Hellopeter, was credible and fuss-free, with claims paid out timeously and efficiently - within 48 hours of the claim being lodged.

In South Africa, out of 1108 insurance businesses, Total Risk Administrators ranks as the 8th best insurer in the country. Best of all, customer reviews attest to the integrity and efficiency of the company.

In South Africa, insurance has become almost mandatory to get full peace of mind. Thankfully, platforms such as Hellopeter, make it easier than ever to compare insurance companies online, and are a good resource to use when researching gap cover providers and their customer service record.



YOU can still ENTER to WIN!

Due to unprecedented interest the competition had been extended to 9 June 2023. Details of the winner will be announced in the next edition.

WIN a full day African Spa Experience at Mangwanani for 2

2023 is already speeding ahead and we need to slow down and take care of ourselves. What better way than a full day **Africa Spa Experience** at **Mangwanani** for you and a loved one.

By requesting an obligation free quote for **TRA's Female Cancer Cover** you will go into the draw for the grand prize.

Mangwanani
African Spa
SINCE 2002

SMS CARE to 45776, request a quote for Female Cancer Cover and stand a chance to win the grand prize

Click [HERE](#) to read the terms and conditions



CLIENT REWARDS THAT TRULY COUNT!

TRA ADDS VALUE TO MEDICAL GAP COVER

By Liana Shaw

What if a short-term insurance policy could provide you with value-add services that you actually need? Total Risk Administrators (TRA) medical gap cover policy does precisely that! A small monthly contribution to this scheme, starting from R99.00 per month, qualifies members for a host of useful, and potentially life-saving services.

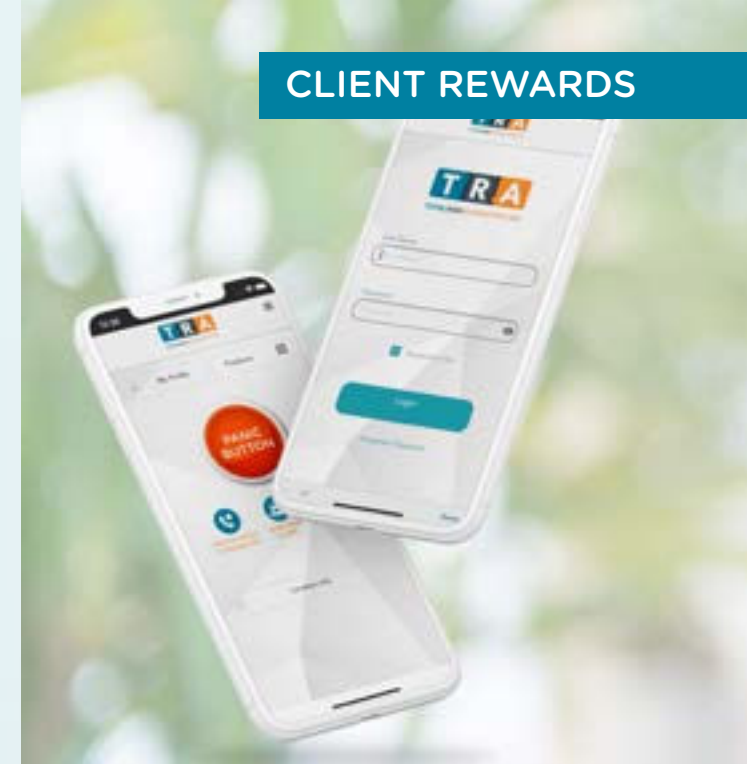
Taking out medical gap cover for health-related emergencies, which are often only partially covered by medical aid schemes, is paramount, but TRA have found a way to ensure their members are privy to additional day-to-day services to make their investment worthwhile, even when they do not need to use their policy to top up their medical cover shortfalls.

For example, all TRA Gap Cover policyholders, under the age of 71, have access to the benefit of comprehensive travel insurance to the value of R600 000! In addition, they qualify to buy a top-up plan to increase their medical and baggage related cover, as well as the option to add cover for trip cancellation, pre-existing medical conditions, missed connections and more.

Moreover, TRA's partnership with the eAssist Call Centre, provides further exciting benefits to all Gap Cover policyholders, irrespective of option or choice, all of which can be easily accessed via the TRA mobile app.

If a policyholder does not want to or cannot download the app, they can still utilise these services by using the eAssist Number: 087 135 1241.

CLIENT REWARDS



TRA MOBILE APP

Home Drive: Members can enjoy access to their Home Drive feature (own vehicle and uber), a facility that is proving very popular with TRA's client base. Stranded by the roadside or indulged in one too many before driving home? eAssist will send out a driver (or two, should you wish for one to drive your vehicle home) to assist.

Panic button: This particular feature on the app, is also growing in popularity, with TRA clients using the panic button to request immediate assistance via eAssist, in the event of an emergency. This includes police services, ambulance services, accidents, medical emergencies and any other traumatic event. eAssist 24-hour emergency call centre agents have more than four years of experience behind them, and will call back within 2 minutes of receiving a Panic alert to confirm how they can assist.

For Police services, the agents contact the nearest police station and send them out to the client's location. For accidents, they confirm if clients have insurance and contact the client's insurance on their behalf. Should they not have insurance, TRA will send out one of their service providers to assist on a cash basis.

For Medical emergencies, eAssist uses reputable SAPAESA providers for clients with medical aid coverage together with a provincial ambulance for clients who do not have medical aid. They also make use of qualified nurses to train and upskill their staff, thereby ensuring that every panic situation is appropriately managed, according to a medical script and process. Last but not least, e-Assist agents follow up after a client emergency to ensure everyone has been assisted, before closing the case.

Nurse and trauma line: The nurse and trauma line can also be accessed via the TRA mobile app, with eAssist qualified agents first determining the needs of the client before transferring the case to a registered nurse

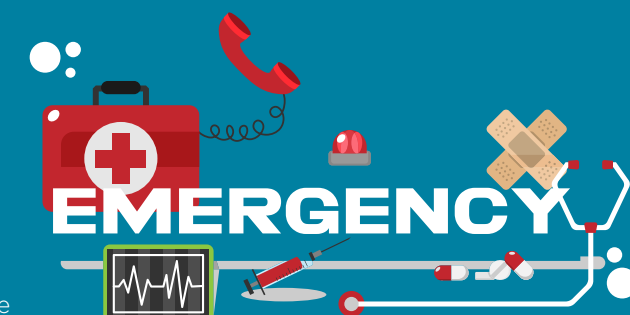
who has experience in telephonic medical advice, as well as trauma debriefing.

Providing much-needed medical advice and support, the nurse will then determine the plan of action. Should the client need to get to the hospital, the agents will confirm this with their medical aid and organise an ambulance. (or, alternatively, should they not have medical aid, they will send out a provincial ambulance that will take the client to the nearest provincial hospital). Again, their qualified nurse will arrange for a follow-up call to ensure that the client has been suitably assisted and does not require any further medical advice or assistance.

Call Centre: The eAssist Contact Centre employs qualified agents 365 days a year, 24 hours a day. There is always a Team Leader on standby who manages and oversees the operational functions of the contact centre, in case intervention is required.

Moreover, TRA's IT department ensures that both the mobile app and the system are functional at all times, with their quality assurance team managing the cases by rating their agents according to market benchmarks.

In short, anything and everything one might need in the event of an emergency has been carefully considered and included in TRA's mix of services to be managed and actioned via eAssist. Client rewards are not always what they are choked up to be, but in this case, TRA has implemented a set of client benefits that are worth their mettle.



CLAIMS SUBMISSIONS MADE EASY



Submitting your claim to TRA for re-imbbursement is simple, fast and effective.

By following the various links featured in the seven circles below, you can choose your preferred submission method - either via the TRA dedicated Claims Service email Channel, their Online Claims Facility or via their Mobile App.

Still confused? Click onto the Watch a Video feature provided that explains the entire process clearly.

And to find out exactly what documents are required for submitting claims, click on the Documents Required link.



TRA INTRODUCES AFFORDABLE FEMALE CANCER COVER

Given the growing prevalence of female cancer cases, both domestically and abroad and having recognised that many medical aid schemes do not inherently fully include comprehensive cancer benefits, in 2015, TRA introduced the Female Cancer Cover product, to provide support for women diagnosed with specific female cancers.

According to the World Health Organisation (WHO), breast cancer became the most common cancer globally in 2020, accounting for 11.7 percent of all new cancer cases. In 2018 alone, there were an estimated 2.1 million new breast cancer cases, marking a 10 percent increase compared to 2008. Cervical cancer is another major concern, with a 5 percent increase in new cases being recorded between 2008 and 2018. And let's not forget ovarian and uterine cancer, which remain critical health issues for women.

Cancer diagnoses among medical aid members highlight the need for these types of specialised products, like TRA's Female Cancer Cover. In a sample of approximately 4 500 members, the most diagnosed cancer types include: malignant neoplasm of the prostate (7 cases); breast cancer (13 cases); malignant neoplasm of the skin (6 cases); and malignant melanoma (5 cases), statistics that emphasise the rise of female cancers and the importance of providing financial support for those affected by these diseases.

With prostate cancer also on the upswing, TRA also offers an optional For Him Benefit for the spouse or common-law partner of the policyholder. Although this is not a stand-alone product, this additional benefit provides financial support upon diagnosis of authorised male cancers.



Affordable premiums

The TRA Female Cancer Cover is available in three tiers: Grand, Supreme and Ultimate, with monthly premiums starting at R130.00, R225.00, and R315.00, respectively, with these options corresponding to lump sum benefits of R50 000, R100 000, and R150 000, paid out upon the confirmed diagnosis of a covered female cancer.

These amounts can be used at the policyholder's discretion, be it towards treatment, income replacement or recuperative purposes.

Similarly, the For Him Benefit also comes in three variants: Select, Prime and Peak, with monthly premiums starting at R75.00, R125.00 and R180.00, respectively, and corresponding to lump sum payouts of R25 000, R50 000 and R75 000, upon the confirmed diagnosis of a listed male cancer.

The growing numbers of cancer cases inspired our new Podcast series – available through all our social media channels – where we hope to shed further light on these dread diseases.

We will also be sharing this important information in The Gap Insider (our quarterly digital magazine), in hopes of raising awareness of cancer and its physical, mental and financial impact on peoples' lives.

Do not wait until it is too late. Secure your peace of mind by investing in the right coverage for you and your family.



Learn more about TRA's Female Cancer Cover by visiting our website – www.totalrisksa.co.za

Female
CANCER COVER

by

TRA

TOTALRISKADMINISTRATORS

Without Female Cancer Cover,
your in-hospital bill could be in excess
of R100 000.

For less than R5 per day,
you can safeguard against
this financial setback.

Now with TRA Assist
a mobile app offering access to Uber trips,
a panic button and trauma counselling

Contact your Financial Advisor for more information

www.totalrisksa.co.za

Let's Take Care

Listen to our various PodCasts
hosted by Liana Shaw



Cervical Cancer CAN Be Combated

Did you know that the Human Papillomavirus (HPV), is the leading cause of cervical cancer? Thankfully, a vaccine targeting the HPV virus is now available, to protect young girls and boys. But what about those of us who were not privy to the vaccine? A large percentage of women will present with pre-cancerous cells on their cervix during the course of their lives, mostly due to an HPV infection. But for some infected with a high-risk type of HPV, the body will be unable to clear it. Over time, if left untreated, this can cause abnormal tissue growth as well as other changes, which can lead to cancer.

But what if you have already been diagnosed with cancer? All is not lost.

[Click here and join our podcast](#), where Liana Shaw delves into Cervical Cancer and how it can be combated.



Uterine Cancer – *Don't Mistake The Signs!*

All women are at risk for uterine cancer, with the most common form being endometrial cancer which forms in the lining of the uterus, but the risk increases with age. To find out whether you may be at risk and what symptoms to look out for, click on the link below to join our podcast series, where Liana Shaw explores the disease in greater depth.

[Click here and join our podcast](#), where Liana Shaw discusses the signs of Uterine Cancer – Don't Mistake The Signs.



The Silent Killer Stalking Women – Ovarian Cancer Cases Set To Rise

Ovarian cancer is the seventh most commonly occurring cancer in women and the eighth most common cause of death from cancer in women. More alarming still, the number of women being diagnosed with ovarian cancer is likely to rise by 2035. Could you be at risk? Join our podcast series, by clicking on the link below, where Liana Shaw provides stats, and talks about the subtle symptoms of the disease, treatment and costs.

[Click here and join our podcast](#), where Liana Shaw delves into The Silent Killer Stalking Women – Ovarian Cancer Cases Set to Rise.

COMPLIANCE CORNER

ISS Compliance is proud to support TRA in staying compliant and protecting its license to trade, every step of the way. Like TRA, we have a long established history, with a modern touch in compliance monitoring.

Watch this space for future compliance updates, upcoming videos on all the latest FICA amendments and make sure to also budget a little more for increased FSCA levies over the next two years.

Reach out to us if you're looking for any assistance at compliance@nfsgroup.co.za

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🤔 ON A LIGHTER NOTE...

DOCTORS SHARE THEIR FUNNIEST STORIES

"Here," says the nurse, handing the patient a urine specimen container. "The bathroom's over there." A few minutes later, the patient comes out of the bathroom. "Thanks," he says, returning the empty container. "But there was a toilet in there, so I didn't need this after all."

Travis Stork, MD, Nashville, Tennessee

As I leaned in to check her eyes, my older patient got a little frisky. "You remind me of my third husband," she said coyly. "Third husband?" I asked. "How many have you had?" "Two."

Leon Pendracky, OD, Avella, Pennsylvania

I gave my patients the results of her sleep study. "It looks like you stopped breathing in your sleep over 65 times per hour." Her response: "Did I start back?"

Michael Breus, PhD, Scottsdale, Arizona

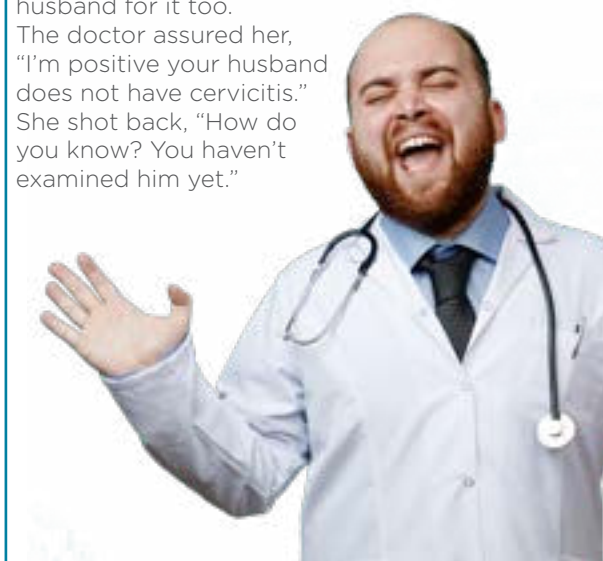
My patient announced she had good news – and bad. "The medicine for my earache worked," she said.

"What's the bad news?" I asked. "It tasted awful."

Since she was feeling better, I didn't have the heart to tell her they're called eardrops for a reason.

Dr Murray Grossan

The doctor explained to his patient that she suffered from inflammation of the cervix. Concerned, she demanded that he test her husband for it too. The doctor assured her, "I'm positive your husband does not have cervicitis." She shot back, "How do you know? You haven't examined him yet."



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