

momentum

Your guide to Momentum Interactive



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What is Momentum Interactive?

A lifestyle programme for Momentum Myriad policyholders. We reward you with premium discounts for everyone you insure that follows a healthy lifestyle, based on the assessment of a set of active rating factors. You have access to features such as standard assessment-based premium discounts, guaranteed premium discounts for insured persons on their Longevity Protector benefits, and access to spare cover and cover switching.

What are the active rating factors?

The active rating factors include the insured person's:

- blood pressure;
- cholesterol;
- body mass index (BMI);
- marital status;
- number of kilometres travelled in the past year; and
- number of vehicle accident insurance claims during the last three years.

Who will get assessed?

Each insured person on your policy has to do an initial assessment and ongoing reassessments in the form of an online health questionnaire every three years.

Initial assessment

How does the process work?

Each insured person has to submit all the information about the Interactive assessment factors at the same time. If not, you will lose the Interactive discount. If an insured person submits the assessment later than the indicated date, we will apply the discount only in the following month. We will send the insured person a letter with the assessment results.

Who pays for the assessment?

We do.

Will you load premiums based on the active rating factors assessment results?

No. We will only use the results in underwriting decisions when it has been a standard requirement of the normal underwriting process.

Reassessments

The insured person has to complete an online health questionnaire every three years to keep the discount. We will let the insured persons know three months before the reassessment dates if their assessment results are about to expire.

Once the insured persons complete the questionnaire, we will move the reassessment date forward by three years.

If the insured person didn't complete the questionnaire, he or she won't qualify for the discount (including the guaranteed discounts) any longer. If the insured person completes the questionnaire later, we will reinstate the discount only in the following month.

There is only one reassessment date for an insured person, irrespective of the start date of a specific benefit or policy. All stand-alone benefits will have the same reassessment date.

However, when the insured person buys more cover, we will move the reassessment date forward by three years from the date on which the additional cover starts. We don't move the reassessment date for automatic voluntary benefit or premium increases.

Momentum Interactive features

This offers you features such as:

- a premium discount based on the active rating factors assessment results ;
- a guaranteed Longevity Protector™ premium discount;
- spare cover; and
- cover switching.

With Momentum Interactive you can save a significant amount of money on your premium. It will also be easier if you want to switch or add cover later on, with limited medical examinations.

Standard assessment-based premium discount

We will reward you with premium discounts for everyone you insure that follows a healthy lifestyle based on a set of active rating factors. We base your discounts on the active rating factors assessment results of all the people you insure on your Myriad policy.

The more they improve their lifestyles, the bigger your discount. We keep the assessment results and discount guarantee on an insured person level across all policies, and not on a benefit level. Benefits can have different insured lives with varying results linked to them and varying discount percentages can apply to different benefits.

How do I get and keep a premium discount?

There is an initial assessment, as well as ongoing reassessments in the form of online health questionnaires every three years.

Once we award the premium discount it will remain unchanged for each insured person until the next reassessment date, in three years' time. Then each insured person has to complete an online health questionnaire.

We guarantee that the premium discount based on the questionnaire will stay the same as before the reassessment. But this guarantee is only for this particular discount, and doesn't apply to the guaranteed discounts.

If you qualify for a premium discount at the start of a benefit such as death or disability cover, you will always pay less than the contract benefit premium. Each benefit that qualifies receives its own discount. That is why each benefit may have a different discount, but the total premium discount includes all the separate discounts.

If you pay your premiums yearly and the insured person gives us the test results on a date after the policy anniversary, you won't get the discount for the first year. After that policy anniversary date your discount will then remain unchanged for the next two years, and not three years.

If the insured person didn't complete the online health questionnaire, you won't qualify for the discount any longer, including the guaranteed discounts.

Guaranteed Longevity Protector™ discount

You will get a guaranteed discount of 7,5% on the Longevity Protector and the stand-alone benefit to which it is attached.

If this benefit is attached to a disability benefit and that benefit is an ancillary benefit on a Death Benefit, the discount will only apply to the disability benefit. The Death Benefit won't qualify for the guaranteed discount.

Calculating the premium discount

We calculate the premium discounts by using the higher of the:

- Standard premium discount based on the Momentum Interactive assessment;
- Guaranteed Longevity Protector™ premium discount.

Spare cover

This is optional. With spare cover you can increase your existing cover without any medical examination. You can double your existing cover just by exercising the spare cover option.

Spare cover is however not available when:

- there is a medical loading on a benefit (you will know if there is a loading as this would have influenced whether we insured the person);
- we placed spare cover restrictions on a benefit;
- the insured person's assessment results were poor and we allocated no assessment-based premium discount;
- the insured person is older than 54; and
- the insured person didn't complete the online health questionnaire.

How do I access spare cover?

You have to complete a short spare cover medical questionnaire. This questionnaire includes a statement that the insured person's health hasn't changed significantly since the start date of the benefit. Based on the information provided and the insured person's latest assessment results, we will decide whether you qualify for more cover in this way.

In addition, if more than three years have passed since the start date of the benefit, we may ask the insured person for an HIV test.

Are there any maximum limits?

Yes, you may not increase your cover with more than R5 million on lump sum benefits and R20 000 on income benefits. Limits apply per insured person and across all benefits and policies. Once you reach these limits, the spare cover feature will fall away.

Accessing spare cover to increase benefits attached to main benefits will not influence the overall maximum limits. The total benefit amount after you have accessed your spare cover is subject to the maximum benefit amount limits that apply at the time.

Does spare cover ever change?

Yes.

- Spare cover will increase on the benefit anniversary if you chose to increase your benefit amount or premium voluntarily.
- It will decrease every time you use your spare cover or reduce any benefit amount linked to Momentum Interactive.
- Spare cover will end when you have used the maximum amount of cover available to you, when you submit a claim, or when a premium waiver claim is in force on the benefit.

Cover switching

This is optional. With cover switching you can switch cover from one benefit to another with limited medical examinations.

Cover switching is not available when:

- there is a medical loading on a benefit;
- we placed cover switching restrictions on a benefit;
- the insured person's assessment results were poor and we allocated no assessment-based premium discount;
- the insured person is older than 54; and

- the insured person didn't complete the online health questionnaire.

How do I access cover switching?

You have to complete an application form. In addition, if more than three years have passed since the start date of the benefit, we may ask the insured person for an HIV test.

What are the rules and restrictions?

- You may not switch cover from benefits attached to main benefits.
- You may only switch cover on benefit amounts that have been in force for three years, and only to a benefit that has an equal or shorter outstanding term.
- Based on the information in the application form and the latest assessment results, we may apply a medical loading to the switched benefit amount or may decline the cover.

Does cover switching change?

Yes, it falls away if a claim is submitted and/or a premium waiver claim is in force on the benefit.

General membership rules

The terms and conditions are important. Please read them carefully. These terms and conditions replace any previous terms and conditions. It will overrule any published publicity material about the benefits.

Your signature on any long-term insurance policy application confirms your acceptance of the terms and conditions relating to membership of Momentum Interactive, if your application was accepted.

Momentum Interactive (Pty) Ltd reserves the right to change these rules at any time. This means that, without limiting our rights, we may increase membership fees and change benefits provided. However, benefits for which you qualified will remain in force for the period for which the benefit was granted, but an extension or continuation may be limited.

You may terminate your membership by writing to us. Then all member benefits enjoyed will terminate on the first day of the calendar month after we have received such notice.

We reserve the right to terminate the scheme by giving you six months' written notice.

Our benefits are subject to all applicable laws. Any change in legislation that impact your benefits may result in the adjustment, alteration or cancellation of a benefit. You will not be entitled to enforce an affected benefit or have any claim against us relating to the benefit.

Your membership entitles us to access your personal information. We may provide a service partner with this information to give you access to benefits.

Eligibility for membership is at our sole discretion and may vary from time to time in line with our policy.

You will not be entitled to cede, transfer or assign any of your rights to benefits in terms of these standard conditions.

These standard terms and conditions contain the entire agreement between you and us. Neither party will be bound by any undertakings, representations or warranties not set out in this document.

While we will do everything reasonable to make sure that the services, benefits, facilities and arrangements expressed or advertised by service partners are available, it provides no guarantees. We will not be responsible for any loss or damage, whether direct or indirect, due to the provision or non-provision, whether in whole or in part, of any such services, benefits, facilities or arrangements.

Any indulgence, latitude or extension of time will not constitute a novation of the terms and conditions of these standard terms and conditions, nor will it in any way prejudice a party from exercising any rights in the future.

Document headers serve for reference purposes only and will not affect the interpretation of the terms and conditions.