



Cinagi

EMPLOYER

INSURANCE SOLUTIONS

*That inspire!*



# Cinagi employer group solutions

offer optimal financial protection to employees in the event of death, disability and critical illness.

Our use of digital engagements minimises operational costs, thereby offering maximum value and seamless service levels to employees.

Our integrated Wellniciti Rewards Wellniciti programme incentivises members to achieve health-positive outcomes that maximises cover levels and reduces insurance costs.

## PRODUCT FEATURES



### LIFE COVER

In the unlikely event of death our lump sum life cover benefit will provide financial protection for your family



### DISABILITY COVER

A lump sum benefit is payable in the event of total and permanent disability



### INCOME REPLACEMENT COVER

During either temporary or permanent disability, a monthly income replacement benefit ensures that you are able to cover your living costs



### CRITICAL ILLNESS COVER

A lump sum benefit is paid upon the diagnosis of a critical illness



### FUNERAL COVER

In the event of the passing of member or their immediate family (spouse and/or children), a lump sum benefit is paid to assist in the costs of a burial or memorial service



### GAP COVER

Gap cover ensures that members and their immediate family are protected against shortfalls in their medical aid cover



### WELLNICITI REWARDS

Wellniciti incentivises members with monthly rewards for undertaking health-positive activities Visit [www.wellniciti.co.za/rewards](http://www.wellniciti.co.za/rewards) for more details



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## Employee Wellness with Wellnicipiti Rewards

Cinagi is passionate about improving employee health and wellness – and about deploying the best technology possible in order to achieve that.

Wellnicipiti Rewards is our digital wellness programme that incentivises and rewards members to undertake health-positive activities, thereby improving the cover levels on the group insurance and reducing premiums.

It is a global phenomenon that disease burden is growing which is placing increasing pressure on the cost of employee insurance as well as reducing productivity levels within the workforce.

Here are some of the key challenges facing South African employers and employees:



### PRODUCTIVITY LOSS

The cost of absenteeism to the South African economy has increased to an estimated R19 billion per year. This is equivalent to about 15% of employees being absent on any given day.



### LOW ACTIVITY RATES

According to the World Health Organisation (WHO), nearly 40% of South Africans are completely inactive, resulting in poorer health and wellness levels.



### MENTAL HEALTH IMPACT

Poor mental health is estimated to cost the South African economy up to R200 billion annually.



### LACK OF HEALTH AWARENESS

Employers often lack comprehensive data on their employees' health, leading to insufficient support and management, which negatively impacts work performance and increases employee insurance costs.



### LOW UTILISATION OF WELLNESS PROGRAMMES

Traditional employee wellness programmes often see low engagement, with participation rates typically around 10-15%, limiting their effectiveness.



### HIGH BLOOD PRESSURE

High blood pressure (or hypertension) is now the most common chronic condition globally and sub-Saharan Africa has the world's fastest growing prevalence. In South Africa, more than a third of adults have high blood pressure and 50% of those people are undiagnosed and thus untreated.

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## Replaces the Company Wellness Day

Wellness days were traditionally seen as a mechanism for companies to get an insight into the health of their workforce. Gathering employee data required health workers on-site to gather the data from each employee and then manually compile a company report indicating trends and prevalences.

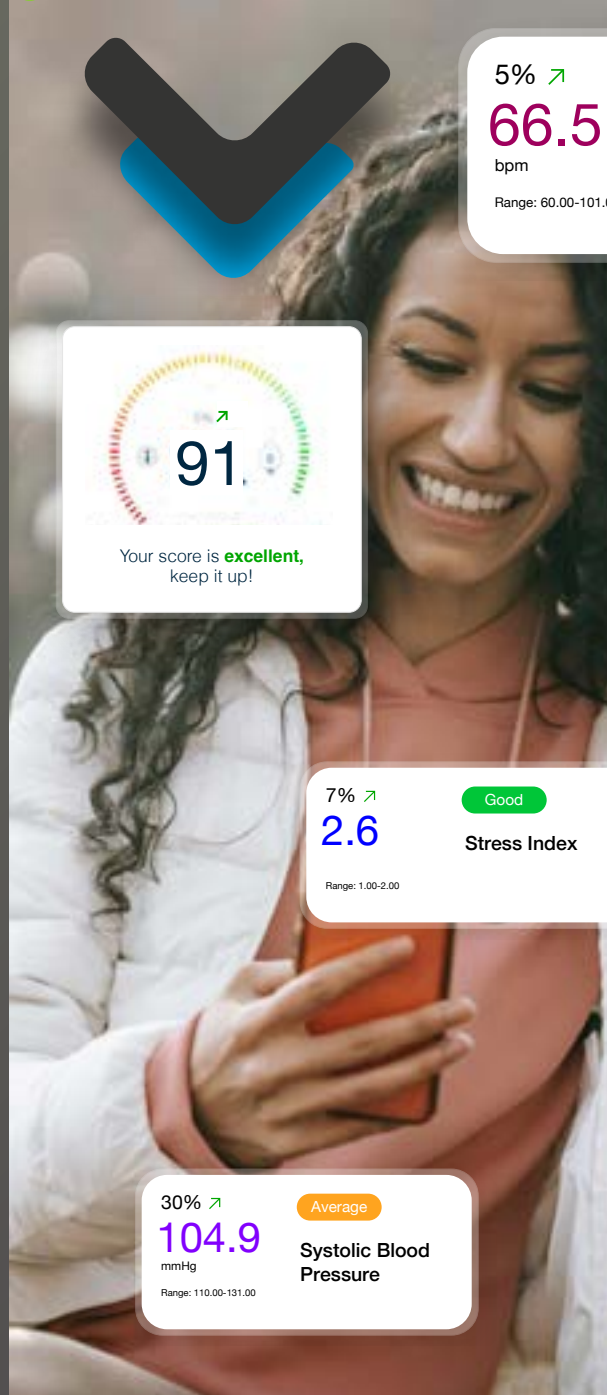
However, historical patterns indicate that employee engagement is low, with only a small minority of employees attending wellness days. This limits the value that employers can achieve from the cost and time involved in organising wellness days.

Wellnicipiti Rewards has changed all of that, substantially reducing the cost and time to gather employee health data and dramatically increasing the proportion of employee engagement in health checks.

Wellnicipiti Rewards provides a personalised mobile app for each employee to routinely gather a range of insights on their health status via their smart phone. Employees can undertake a simple 30-second health check by taking a face scan on Wellnicipiti's VivaScore app on their smart phone to get instant insights into health measures such as blood pressure, cardiovascular risk, stress, diabetes risk and mental wellbeing.

They can also link wearable and health smart devices to the app for even deeper insights into health aspects such as sleep duration, steps achieved per day, exercise activities and stress levels.

All Wellnicipiti Rewards clients have access to an unlimited number of face scans per month and the app stores a full history of health and wellness data for easy reference to trends over time.



5% ↗

66.5

bpm

Range: 60.00-101.00

Excellent

Heart Rate



Your score is **excellent**,  
keep it up!

7% ↗

2.6

Range: 1.00-2.00

Good

Stress Index

30% ↗

104.9

mmHg

Range: 110.00-131.00

Average

Systolic Blood  
Pressure

## Earning Rewards Points with Wellnicipiti

By registering on Wellnicipiti and downloading the VivaScore app, members can earn rewards points for health-positive activities and regular health checks on the VivaScore app.

## Linking Smart Devices

Linking any of the smart devices below to your app will further improve your ability to earn rewards points.



Apple Health



Google Health



Whoop



Oura



Dexcon



Coros



Dexcom



Fitbit



Garmin



Polar



Withings



OMRON

Rewards points earned can be redeemed monthly for vouchers at one of the Wellnicipiti Rewards partners.

Visit [www.wellnicipiti.co.za/rewards](http://www.wellnicipiti.co.za/rewards) for more details and registration.

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# How does Wellniciti Rewards work?

## COLLECT HEALTH DATA FROM YOUR EMPLOYEES

Your employees take a simple 30-second health check using their smart phone. They get instant insights into things like their blood pressure, cardiovascular risk, stress and mental wellbeing. They can also link up wearable devices and health apps for even deeper insights.

## TURN DATA INTO INSIGHTS

Our powerful algorithm turns health data into clear, actionable insights. Track your company health score. Enable your employee benefits advisers to analyse trends at portfolio level. Drill down into segments and cohorts. It's all presented in a dashboard you can customise.

## IMPROVE THE HEALTH OF YOUR WORKFORCE

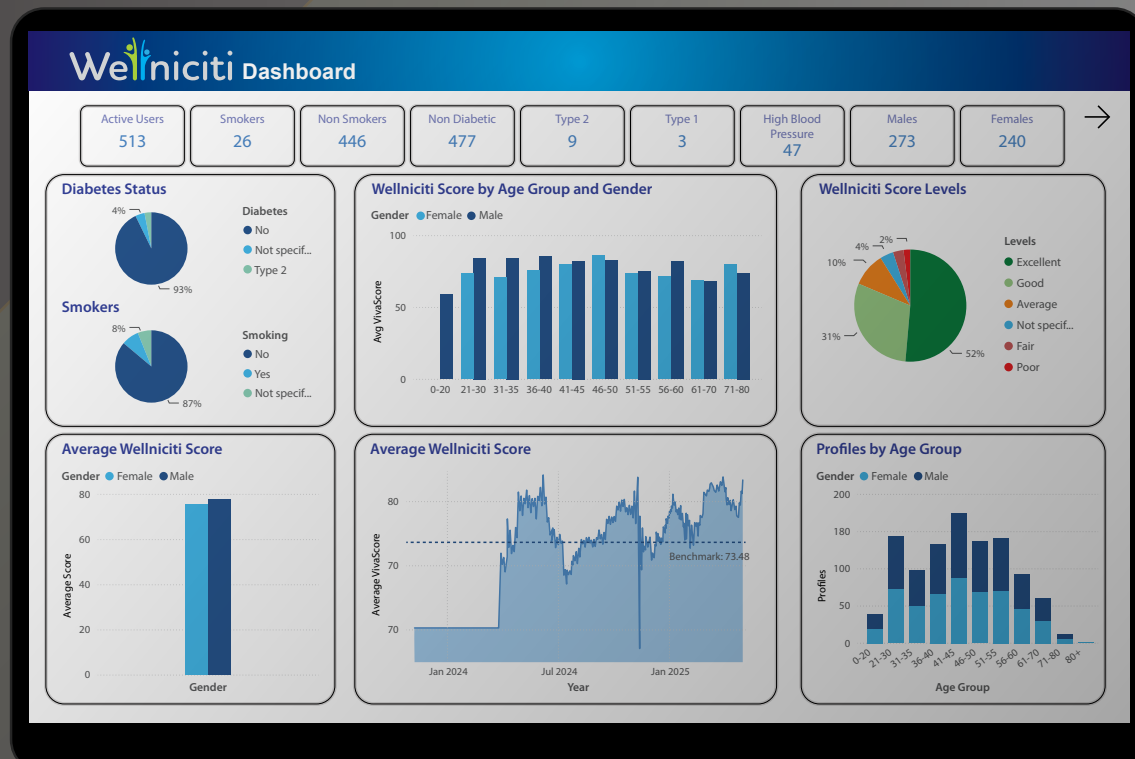
Once you have a clear view of your business health profile, you can start improving it. Use risk report insights to guide prevention and intervention services. Use nudges to encourage your employees to better health. You get maximum impact from what you spend, while your employees get guidance that's personalised to them.



## Employers get a 360 View of Employee Wellness

An in-depth employer report of aggregated health data is automatically supplied monthly by Wellniciti.

This provides an update on insights such as the aggregated health status of the workforce, benchmarking, industry views, comparisons, and recommendations.



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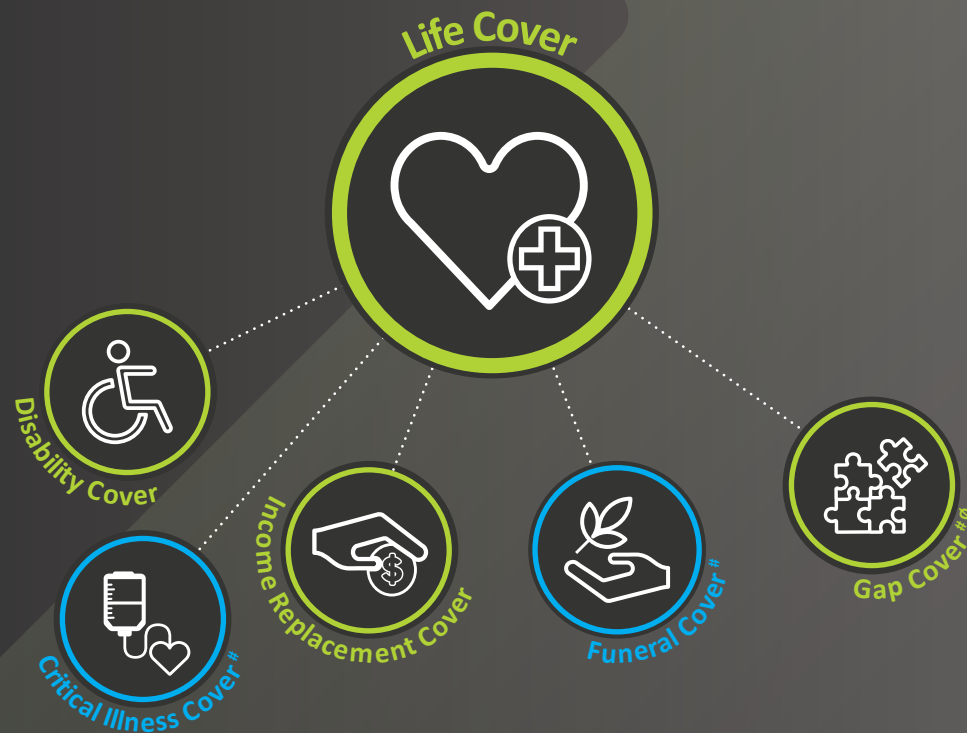
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# COVER SELECTION

Our employer group solutions\* can be structured by bundling any combination of the supplementary cover products with the core life cover offering.

Bundling products boosts the overall cover for employees and reduces the insurance rates, thereby creating meaningful monthly savings in premiums while maximising cover levels.



Supplementary cover products that can be bundled with the core life cover offering

\* - The employer is the group insurance policyholder and employees are the members/beneficiaries

# - Can also be taken as a stand-alone product

Ø - Only applicable to members who are on medical aid



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## LIFE COVER EXPLAINED

The level of life cover is flexible and is determined by the employer in accordance with required cover levels and affordability.

The group cover level is set as a multiple of the annual income of employees (i.e. members), up to a maximum multiple of 10 (ten) or R50 million, whichever is the lesser.

In the event of an employee passing, their nominated beneficiaries are paid the lump sum life cover benefit.

## FREE COVER LIMIT

For employees whose life cover benefit is within the free cover limit, their full cover is automatically in place without providing any medical evidence. For any employee whose life cover exceeds the free cover limit, evidence of good health will be required in order to secure the portion of their life cover benefit that is above the free cover limit. Cinagi will arrange directly with each respective employee for the necessary medical questionnaires, reports and/or examinations.

If the employer is transferring cover to Cinagi from another insurance provider, in most instances an employee who formerly provided evidence of good health and was accepted for their full cover by the previous insurer, will not have to provide the same evidence of good health again (subject to written confirmation prior to implementation).

## SUPPLEMENTARY COVER RIDERS

The employer can select to add any one or more of the following riders to the life cover benefit:

**ACCIDENT/CRIME COVER** – Additional life cover resulting from accidents or crime, up to a maximum income multiple of 2 (two) or R2 million, whichever is the lesser.

**SPOUSE LIFE COVER** – Life cover can be selected for spouses of employees, up to a maximum income multiple of 2 (two) times the employee's salary or R8 million, whichever is the lesser. A separate free cover limit may apply to this benefit.

**EDUCATION COVER** – a benefit covering the future costs of education for an employee's children in the event of the employee passing.

**FORWARD COVER** – Implementing forward cover means that no medical evidence is required in future for any employee whose cover level increases above the free cover limit because of a salary increase.

**CONVERSION OPTION** – this allows employees to continue their life cover in their private capacity without providing new medical evidence after leaving employment. This option ceases at age 55.

**REPATRIATION SERVICE** – This is a service that allows for the transport of the deceased member's body back to a funeral home closest to the place of burial in South Africa.

This service is limited to a maximum of R20,000 per claim event.

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# INCOME REPLACEMENT COVER EXPLAINED

The group cover level is flexible and is determined by the employer in accordance with required cover levels and affordability, subject to a maximum of R240,000 per month.

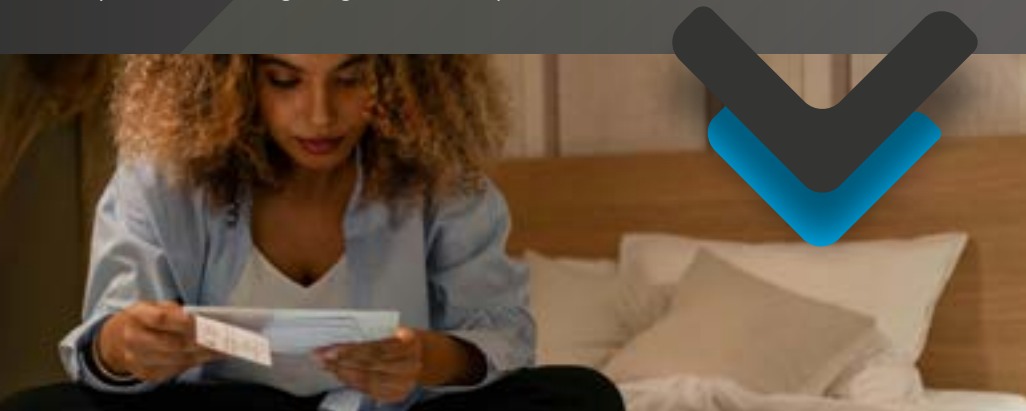
This provides financial support for a member in the event of a loss of income resulting from injury or illness and the benefit will last until the earlier of either recovery, death or reaching the benefit cease age. The waiting period before any benefit is paid can be selected by the employer as 3, 6 or 12 months, which will commence from the date of the event that gave rise to the disability.

Income replacement covers total or partial disability that prevents the member from performing their job or any suitable alternative from their employer. Where a member is still able to work but only in a role/function where they earn less than their pre-disability income, they will qualify for a partial benefit based on the earnings difference.

The monthly benefit amount is set as a percentage of pre-disability monthly salary (according to the selected group cover level), capped at a maximum of 100% of after tax income.

Disability benefit amounts payable will increase annually in accordance with the group's chosen annual increase option, which can be set between 0% and 10%. Where applicable, increases are effective after each 12-month period from the start of benefit payments.

Vocational rehabilitation services are provided to all claimants to assist them, where possible, in reintegrating into the workplace.



## SUPPLEMENTARY COVER RIDERS

The employer can select to add any one or more of the following riders to the income replacement benefit:

**RECOVERY BONUS** – Upon the successful return to employment in his or her own or any occupation (with own or other employer), for a continuous period of at least 6 (six) months, a disability claimant will be entitled to a recovery bonus payment of three (3) months' disability benefit payment.

**RETIREMENT FUND WAIVER** – This option covers the total monthly contribution towards retirement funding, in addition to the income replacement benefit (subject to a maximum of R50,000 per month).

**MEDICAL SCHEME WAIVER** – This option covers the monthly medical scheme contributions (including for spouse and/or children, if applicable) immediately prior to the event that gave rise to the disability. This is subject to the following current monthly maximums:

INSURED	BENEFIT
Member	R3,500
Spouse	R3,000
Child	R1,500
Overall	R11,000

**CONVERSION OPTION** – this allows employees to continue their life cover in their private capacity without providing new medical evidence after leaving employment. This option ceases at age 55.

**SALARY REFUND** – this benefit will refund the employer the full amount of the salaries paid by the employer to the employee during the waiting period.

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# DISABILITY COVER

## EXPLAINED

The monetary value of disability cover provided is determined by the employer in accordance with their required cover level and affordability.

The group cover level is set as a multiple of annual income of employees, up to a maximum multiple of 8 (eight) or R9.5 million, whichever is the lesser.

If disability cover is taken in conjunction with income replacement cover, then this disability benefit is subject to a maximum income multiple of 2 (two).

In the event of an employee becoming totally and permanently disabled, they will be paid their disability benefit as a lump sum.

## SUPPLEMENTARY COVER RIDERS

**SPOUSE COVER** – Disability cover can be selected for spouses of employees, up to a maximum income multiple of 1 (one) times the member's salary or R2 million, whichever is the lesser.

**CONVERSION OPTION** – this allows employees to continue their disability cover in their private capacity after leaving employment without needing to provide new medical evidence. This option ceases at age 55.

Disability Cover only applies in the event of an employee becoming totally and permanently disabled. Income replacement provides cover for wider definitions of disability, including temporary and/or partial disability

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# CRITICAL ILLNESS COVER EXPLAINED

The level of critical illness cover is determined by the employer in accordance with their required cover level and affordability.

The group cover level is set as a multiple of annual income of employees, up to a maximum multiple of 3 (three) or R3 million, whichever is the lesser.

In the event of an employee being diagnosed with a critical illness, they are paid the insured benefit as a lump sum.

## COVERED ILLNESSES OR CONDITIONS

### SCALED BENEFIT

The benefits for the conditions in the table below are scaled in accordance with the severity of the condition, as measured against the ASISA critical illness definitions. The percentages indicate the proportion of the sum insured benefit that will be paid upon diagnosis.

CRITICAL ILLNESS	Level A Most Severe	Level B Moderate Impairment	Level C Mild Impairment	Level D Almost Fully Recovered
Cancer	100%	75%	50%	25%
CABG	100%	75%	50%	25%
Heart Attack	100%	75%	50%	25%
Heart Valve Replacement Surgery	100%	75%	50%	25%
Multiple Sclerosis	100%	75%	50%	25%
Stroke	100%	75%	50%	25%

### NON-SCALED BENEFIT

The following conditions have a payout benefit of 100% of the sum insured benefit:

• Accidental Brain Injury	• Coma
• Advanced Dementia (incl Alzheimer's)	• Parkinson's Disease
• Major Organ Transplant	• Severe Burns
• Blindness	• End-Stage Kidney Failure
• Paraplegia	

### FREE COVER LIMIT

On implementation of cover, we will define a free cover limit for the group scheme.

For employees whose critical illness cover is within the free cover limit, their full cover is automatically in place without providing any medical evidence. For any employee whose critical illness cover exceeds the free cover limit, evidence of good health will be required in order to secure the portion of their critical illness benefit that is above the free cover limit. Cinagi will arrange directly with each respective employee for medical questionnaires, reports and/or examinations.

If the employer is transferring cover to Cinagi from another insurance provider, in most instances an employee who formerly provided evidence of good health and was accepted for their full cover by the previous insurer, will not have to provide the same evidence of good health again (subject to written confirmation prior to implementation).

### SUPPLEMENTARY COVER RIDER (OPTIONAL)

**CONVERSION OPTION** – this allows employees to continue their critical illness cover in their private capacity without providing new medical evidence after leaving employment. This option ceases at age 55.

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## FUNERAL COVER EXPLAINED

The monetary value of funeral cover provided is determined by the employer in accordance with their required cover level and affordability. Cover options allow for cover for employees only or employees plus their immediate family or employees plus their extended family.

The group cover level is set in any multiple of R5,000 cover from R10,000 up to a maximum of R100,000 sum insured, with benefit sub-limits as shown below:

FAMILY COVERED	BENEFIT
Employee, Spouse, Parent or Child 14+	100% of Sum Insured
Child 5 - 14	50% of Sum Insured
Child 0 - 5	25% of Sum Insured
Stillborn	12.5% of Sum Insured

Monthly premiums are defined in rand terms per policy.

In the event of an employee passing, the relevant benefit is paid to the nominated beneficiary as a lump sum. In the event of a family member of an employee passing, the relevant benefit is paid to the employee as a lump sum.

## SUPPLEMENTARY COVER RIDERS

**CONVERSION OPTION** – this allows employees to continue their funeral cover in their private capacity after leaving employment. This option ceases at age 55.

**REPATRIATION SERVICE** – This is a service that allows for the transport of the deceased member's body back to a funeral home closest to the place of burial in South Africa.

The transport is provided via road or air, from anywhere in South Africa, Lesotho, Swaziland, Zimbabwe, Botswana, Namibia, or Mozambique south of the -22 degree latitude line. If the insured was deceased in South Africa, their remains must be more than 150km from the place of burial in order to qualify for the repatriation service. This service is limited to a maximum of R20,000 per claim event.

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## GAP COVER EXPLAINED

Gap Cover is a supplementary product for medical scheme members that covers shortfalls between actual medical costs incurred and the benefits paid by the employee's medical scheme.

The traditional categories of shortfalls covered by stand-alone gap cover products are mainly for in-hospital procedures and oncology treatment.

However, by adding gap cover as a supplementary product within the group scheme offering, enhanced gap cover is then available also covering day-to-day benefits such as GP and dentist visits and consultations with medical specialists.

This cover is only available to employees who are on a registered medical scheme and cover applies to all registered beneficiaries on the employee's medical scheme membership.

Monthly premiums are defined in rand terms per member.

## AUTOMATIC COVER RIDERS

**CONVERSION OPTION** – this allows employees to continue their gap cover in their private capacity after leaving employment.

**GAP COVER WAIVER** – this waives the premiums for gap cover if an income replacement benefit is being paid to the employee.

**SPOUSE COVER** – Cover is extended to employees who are dependants on their spouse's medical scheme. In such an instance, all family dependants registered on the spouse's medical scheme will be covered.



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## MEMBER PORTAL

To ensure efficient, quick and user-friendly client servicing, Cinagi has developed a bespoke digital member portal for all clients. To access the portal, please [click here](#).

Through this member portal you can undertake the following administrative services:

**SUBMIT A CLAIM** – Claiming is a quick and simple online process. Once you have indicated your claim type, an online link will be sent to you requesting submission of the relevant details and uploading of the supporting documentation.

**UPDATE YOUR DETAILS** – you can update any of your personal details here such as contact details, changes to your cover (where permissible) or nomination of beneficiaries.

**GET A COPY OF YOUR POLICY** – you can download a copy of your policy document and/or a confirmation of your cover with us.

**Please visit [www.cinagi.co.za/contact](http://www.cinagi.co.za/contact) to Access Our Digital Contact Channels**

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# OUR TERMS & CONDITIONS EXPLAINED

## AGE LIMITS

The minimum entry age for cover is 18 and a maximum of 64 if an insured was not previously covered on another compulsory group life policy. The expiry age on all cover is the earlier of retirement, death or 80 years of age.

On the funeral cover, the maximum age for children is 21 unless studying and financially dependent on parents, where cover will extend to 26 years of age.

## PRE-EXISTING CONDITIONS

On disability, critical illness and income replacement cover, any claims for pre-existing conditions within the first 12 (twelve) months of the life insured joining the group scheme will not be covered. This clause is waived where a group scheme is switching cover from another insurer to the same cover with Cinagi.

## EXCLUSIONS

- Disability or critical illness claims that are a result of a self-inflicted injury or condition
- Non-disclosure of pertinent medical information or conditions that affect the employee and/or dependants, where applicable
- Claims arising from the wilful and deliberate breaking of any law
- Claims arising from the wilful involvement in any riot, insurrection, usurpation of power, martial law or war
- Intentional and negligent consumption of poisons, alcohol, drugs and/or narcotics
- Claims as a consequence of participation in a hazardous sport or pursuit, including (but without limiting the generality of the foregoing) rock climbing, scuba diving, hang gliding and speed contests of any kind
- Claims participation in a hazardous occupation which was not disclosed and is not normally associated with the industry in which the employee is employed



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Cinagi is an authorised financial services provider (FSP 50104). Life products are underwritten by Bryte Life Company Limited, a licensed life insurer and authorised financial services provider (FSP 17705). Non-Life products are underwritten by Infiniti Insurance Ltd, a licensed non-life insurer and authorised financial services provider (35914).