



## Roll-Over benefit claim

tel 061 285 5400  
 fax 061 223 904  
 email [claims@nhp.com.na](mailto:claims@nhp.com.na)  
 website [www.nhp.com.na](http://www.nhp.com.na)  
 Unit 2, Demushuwa Suites, Corner of Grove and Ombika Street,  
 Kleine Kuppe, Windhoek  
 PO Box 23064, Windhoek, Namibia  
 Reg No: MOHSS 003

**Please note** In order for the administrator to deliver efficient service to you, it is imperative that all sections of this application form to be completed in full. Failing this may cause delay in the processing of the application. Print clearly using capital letters. Only one character per block. Leave open one block between words. Mark with an X where necessary.

### Particulars of principal member (must be completed)

Membership number  Benefit option

Title  Initials  First name(s)

Surname

Tel (H)  Tel (W)

Cell  Fax

### Roll-Over benefit (once accumulated)

Automated  Manual

Per family  Per beneficiary

If you choose per beneficiary (please specify)

Dependant code	<input type="text"/>	Title	<input type="text"/>	Initials	<input type="text"/>	First name(s)	<input type="text"/>
Surname	<input type="text"/>						
Dependant code	<input type="text"/>	Title	<input type="text"/>	Initials	<input type="text"/>	First name(s)	<input type="text"/>
Surname	<input type="text"/>						
Dependant code	<input type="text"/>	Title	<input type="text"/>	Initials	<input type="text"/>	First name(s)	<input type="text"/>
Surname	<input type="text"/>						

\_\_\_\_\_  
 Signature of principal member

Date



## **Important to remember**

*If a member claims less than a certain threshold amount included in their Day-to-Day benefits, they can build up a roll-over benefit that they can use to pay for healthcare treatment and medical costs. Claims paid in accordance to the Day-to-Day benefits of each benefit option, taking into account the threshold level, will first be debited against the roll-over benefit where after the normal Day-to-Day benefits will be utilised.*

*At the end of April, in the following benefit year, if the previous year's Day-to-Day benefit claims excluding costs for chronic medication are less than the Roll-over benefit threshold amount, the remaining balance will be transferred into the members accumulated roll-over benefit account.*

- *Members roll-over benefit accumulates in their name for as long as they are members of NHP*
- *A roll-over benefit claims form for manual roll-over refunds must be completed and can be sent via fax 061 223 904 or emailed to [info@nhp.com.na](mailto:info@nhp.com.na)*
- *If members select the automated claims process, the completed form can be sent via fax 061 230 465 or emailed to [members@nhp.com.na](mailto:members@nhp.com.na)*

**Whilst being a member of NHP, any positive balance accumulated in their roll-over benefit account can pay for:**

- *Routine medical costs*
- *Outstanding member's portions*
- *Treatment normally excluded from benefits*
- *Medical treatments with a valid chargeable NAPPI code, a registered healthcare provider must provide these medical treatments*
- *Sunglasses, whether or not prescribed by an optometrist or ophthalmologist*
- *The difference between the actual medical costs and the NAMAf benchmark tariff for medical services covered by the rules of the Fund*
- *Medical aid contributions and for contribution "holidays"*

**Claims not eligible for payment from the roll-over benefit:**

- *Any non-medical expenses without a valid chargeable NAPPI code and which are not provided by a registered healthcare provider will not be covered by the accumulated roll-over benefit.*
- *Any medical or non-medical expenses claimed for dependants not actively registered as a dependant of the principal member.*

*Upon resignation from an employer group, the member may elect to continue membership with the Fund, either as an individual or as a member of another employer group, in which case the accumulated roll-over benefit transfers to the new membership without forfeiture of the accumulated benefit.*

