

NEEDS ANALYSIS

Thank you for taking the time to fill out this questionnaire.

Please complete and email to liesl@cmacldp.co.za and we will get back to you asap.

1. Name

2. ID No

3. Residential Address

4. Tel 5. Cell

6. Email

7. Indicate how many members should be quoted for

Name	<input type="text"/>	DOB	<input type="text"/>
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8. Are you currently on a Medical scheme? Yes No

If YES, please mention scheme and option and starting date. If NO, please indicate when last you had membership on a scheme. (This information should be as complete and accurate as possible to determine waiting periods and late joiner penalties)

9. What problems/challenges do you have with your current scheme?

10. Does anyone seeking membership have any chronic conditions?

11. Any other medical conditions that needs to be attended to?

12. Has anyone been admitted to hospital in the last 12 months?

13. What is your Income per month? *(As some products are income-based)*

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14. Do you want cover for your day-to-day expenses?..... Yes No
(e.g. doctors, specialist, dentists and medicines)

15. Would you be willing to use a network of service providers.... Yes No
(Hospitals, doctors and specialists)

16. Which hospital is your preferred hospital in your area?

17. What is your monthly budget for a medical aid premium

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**18. Would you like more information on
GAP and Co-Payment cover?**..... Yes No

**19. Would you be interested in additional products that
could enhance your medical aid:**

- Life style programs e.g. Vitality, Multiply and Reality..... Yes No
- Dental Insurance..... Yes No
- Trauma and emergency cover..... Yes No

20. What other schemes would you want to receive information about?

21. Can I review your short-term insurance?
(Car and household) Yes No

22. Can I review your Life and annuity policies?..... Yes No

23. Where did you hear of my services?

Thank you for taking the time to fill out this questionnaire.
Please email to liesl@cmacldp.co.za and I will get back to you asap.

Kind Regards

Liesl du Plessis
Medical Aid Specialist
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liesl@cmacldp.co.za

