



SME HEALTH SOLUTION

HEALTH COVER FOR YOUR EMPLOYEES

INSURANCE | INVESTMENT | SAVINGS | BANKING



OLDMUTUAL

WHY TAKE SME HEALTH COVER?



No waiting periods

Get treated sooner by going to a private hospital.



Flexibility on No. of employees

From as low as 3 employees to 100 employees



Volume Discounts

Bigger groups will enjoy discounts on their premiums



Hospital Cash

Get cash payments for stays in hospital for 5 or more days



Personal Accident Cover

Covers loss of life and permanent disablement due to an accident



Flexibility of Cover

Various Plans to choose and combine

ABOUT THE COVER

The Health SME Solution is a Health Insurance Product designed to meet the Health Insurance needs of SME's; and caters for medical expenses incurred by the insured members and their dependants for either Inpatient or Outpatient cases. It also caters for Maternity, Dental & Optical expenses.

SPECIAL FEATURES

- a) This is a comprehensive cover with an equally comprehensive list of options to choose from;
 - i. The range includes inpatient options from 250,000 per family to Kes 10,000,000 per family.
 - ii. Outpatient options from Kes 50,000 to Kes 250,000.
 - iii. Dental and optical covers from Kes 10,000 to Kes 50,000 each.
 - iv. Maternity cover from 50,000 to Kes 200,000 per Family Per annum.
 - v. Hospital Cash that pays Cash benefits for days spent in hospital of up to Kes 25,000 per year.
- b) There are no waiting periods.
- c) Cover for pre-existing chronic conditions, psychiatry, congenital, cancer and HIV/AIDS including related conditions.
- d) A comprehensive country wide provider network
- e) Overseas inpatient referrals, including catering for airfare to listed hospitals abroad (India) on credit.
- f) Cover for inpatient dental and optical treatment
- g) Post hospitalization benefit
- h) Home nursing
- i) External aids
- j) Funeral expense for each person covered.
- k) Free Personal Accident benefit for the employee.

PRODUCT BENEFITS

INPATIENT OPTIONS

1. Kes 250,000 – 1,000,000

Inpatient	Limits	250,000	300,000	500,000	750,000	1,000,000
Inpatient Expenses Related to Acute Conditions or accidents		Covered To Full Limit	Covered To Full Limit	Covered To Full Limit	Covered To Full Limit	Covered To Full Limit
Lodger Fees (Parent/Guardian Accommodation)		12 Years	12 Years	12 Years	12 Years	12 Years
Pre-existing Chronic conditions including Cancer, HIV/AIDs		100,000	150,000	300,000	300,000	400,000
Congenital Conditions		100,000	100,000	100,000	150,000	150,000
Organ Transplant (cost of donor or securing the organ is excluded)		100,000	100,000	300,000	300,000	400,000
Bed Limit (Net of NHIF)		General Ward: Max 8,000 Per Day				
Psychiatry & Psychotherapy		200,000	200,000	200,000	200,000	250,000
Hospitalisation costs due to Terrorism & Political Violence		250,000	300,000	300,000	300,000	500,000
External Aids on Prescription		50,000	50,000	75,000	75,000	80,000
Non-accidental Dental treatment & surgery		50,000	50,000	50,000	100,000	120,000
Non-accidental optical treatment and surgery	Sub-limits	50,000	50,000	50,000	100,000	120,000
Post-Hospitalization treatment related to cause of pre-authorization (limited to 3 weeks after discharge)		15,000	15,000	15,000	20,000	20,000
First Ever Emergency Caesarean Section		120,000	120,000	120,000	120,000	120,000
Ectopic Pregnancy		125,000	150,000	250,000	300,000	300,000
Last Expense for death as a result of covered conditions Per Person		50,000	50,000	75,000	75,000	75,000
Personal Accident – For Principal Member only.		500,000	500,000	500,000	500,000	500,000
Emergency Evacuation		Road & Air Subject to to overall Limit				
Air Fare - Overseas Referral		Not Provided				
Day Care Surgery (under General Anaesthesia)		Fully Covered	Fully Covered	Fully Covered	Fully Covered	Fully Covered
Home Nursing(Subject to Pre-authorization)		90 Days	90 Days	90 Days	90 Days	90 Days
Hospital Cash Per Admission (Payable once per admission that last 5 or more days for up to five(5) admissions in a year)		3,000 Max 12,000 Per Year	3,000 Max 12,000 Per Year	3,000 Max 12,000 Per Year	4,000 Max 16,000 Per Year	4,000 Max 16,000 Per Year

2. Kes 1,500,000 – 5,000,000

Inpatient	Limits	1,500,000	2,000,000	3,000,000	4,000,000	5,000,000
Inpatient Expenses Related to Acute Conditions or accidents		Covered To Full Limit	Covered To Full Limit	Covered To Full Limit	Covered To Full Limit	Covered To Full Limit
Lodger Fees (Parent/Guardian Accommodation)		12 Years	12 Years	12 Years	12 Years	12 Years
Pre-existing Chronic conditions including Cancer, HIV/AIDs		400,000	450,000	500,000	500,000	500,000
Congenital Conditions		150,000	200,000	200,000	300,000	300,000
Organ Transplant (cost of donor or securing the organ is excluded)		400,000	450,000	500,000	500,000	500,000
Bed Limit (Net of NHIF)		General Ward: Max 8,000 Per Day		Standard Private Room (Max 17,000 Per Day)		
Psychiatry & Psychotherapy		300,000	500,000	600,000	800,000	1,000,000
Hospitalisation costs due to Terrorism & Political Violence		500,000	700,000	1,000,000	1,500,000	2,000,000
External Aids on Prescription		80,000	120,000	150,000	150,000	200,000
Non-accidental Dental treatment & surgery		150,000	150,000	200,000	250,000	300,000
Non-accidental optical treatment and surgery		150,000	150,000	200,000	250,000	300,000
Post-Hospitalization treatment related to cause of pre-authorization (limited to 3 weeks after discharge)	Sub-limits	20,000	25,000	25,000	30,000	40,000
First Ever Emergency Caesarean Section		120,000	150,000	150,000	150,000	150,000
Ectopic Pregnancy		300,000	300,000	300,000	300,000	300,000
Last Expense for death as a result of covered conditions Per Person		75,000	75,000	75,000	100,000	100,000
Personal Accident – For Principal Member only.		500,000	500,000	500,000	500,000	500,000
Emergency Evacuation		Road & Air Subject to to overall Limit				
Air Fare - Overseas Referral		Economy return fare only within Africa and India (Excluding SA)				
Day Care Surgery (under General Anaesthesia)		Fully Covered	Fully Covered	Fully Covered	Fully Covered	Fully Covered
Home Nursing (Subject to Pre-authorization)		90 Days	90 Days	90 Days	90 Days	90 Days
Hospital Cash Per Admission (Payable once per admission that last 5 or more days for up to five(5) admissions in a year)		4,000 Max 16,000 Per Year	4,000 Max 16,000 Per Year	5,000 Max 20,000 Per Year	7,500 Max 30,000 Per Year	7,500 Max 30,000 Per Year

3. Kes 6,000,000 – 10,000,000

Inpatient	Limits	6,000,000	7,000,000	8,000,000	9,000,000	10,000,000
Inpatient Expenses Related to Acute Conditions or accidents		Covered To Full Limit	Covered To Full Limit	Covered To Full Limit	Covered To Full Limit	Covered To Full Limit
Lodger Fees (Parent/Guardian Accommodation)		12 Years	12 Years	12 Years	12 Years	12 Years
Pre-existing Chronic conditions including Cancer, HIV/AIDS		500,000	500,000	500,000	500,000	750,000
Congenital Conditions		300,000	300,000	300,000	300,000	300,000
Organ Transplant (cost of donor or securing the organ is excluded)		500,000	500,000	500,000	500,000	500,000
Bed Limit (Net of NHIF)		Standard Private Room (Max 17,000 Per Day)				
Psychiatry & Psychotherapy		1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
Hospitalisation costs due to Terrorism & Political Violence		2,000,000	2,000,000	2,000,000	2,000,000	2,000,000
External Aids on Prescription		200,000	200,000	200,000	200,000	200,000
Non-accidental Dental treatment & surgery		300,000	300,000	350,000	350,000	350,000
Non-accidental optical treatment and surgery		300,000	300,000	350,000	350,000	350,000
Post-Hospitalization treatment related to cause of pre-authorization (limited to 3 weeks after discharge)	Sub-limits	40,000	40,000	40,000	40,000	40,000
First Ever Emergency Caesarean Section		150,000	180,000	180,000	200,000	200,000
Ectopic Pregnancy		300,000	300,000	300,000	300,000	300,000
Last Expense for death as a result of covered conditions Per Person		100,000	100,000	150,000	150,000	150,000
Personal Accident – For Principal Member only.		500,000	500,000	500,000	500,000	500,000
Emergency Evacuation		Road & Air Subject to to overall Limit				
Air Fare - Overseas Referral		Economy return fare only within Africa and India (Excluding SA)				
Day Care Surgery (under General Anaesthesia)		Fully Covered	Fully Covered	Fully Covered	Fully Covered	Fully Covered
Home Nursing(Subject to Pre-authorization)		90 Days	90 Days	90 Days	90 Days	90 Days
Hospital Cash Per Admission (Payable once per admission that last 5 or more days for up to five(5) admissions in a year)		7,500 Max 30,000 Per Year	7,500 Max 30,000 Per Year	7,500 Max 30,000 Per Year	7,500 Max 30,000 Per Year	7,500 Max 30,000 Per Year

OUTPATIENT OPTIONS

Outpatient Options		50,000	100,000	150,000	200,000	250,000
Covered Services		- Consultations, Medications, Radiology (Net of NHIF), KEPI Vaccines				
Cop-payment	1,500	Nairobi, Aga Khan, Karen, MP Shah				
	1,000	AAR				
	500	Gertrude's, Mater				
	300	All others				

DENTAL AND OPTICAL OPTIONS

Dental Options	10,000	20,000	30,000	40,000	50,000
Anaesthetist's fees, Hospital and Operating theatre cost, Fillings, Extraction, Root canal, Scaling/ Cleaning necessitated by a medical condition and prescribed by our appointed dentist.					
Optical Options	10,000	20,000	30,000	40,000	50,000
Outpatient Optical Service, Consultations, Frames, Lenses					

MATERNITY OPTIONS

Maternity Options	50,000	75,000	100,000	150,000	200,000
Covered Services	Normal and C-Section delivery, labour/recovery ward, professional fees, pregnancy/maternity related hospitalisation, other related ailments & complications and miscarriage.				

RATES

Kes 250,000 – 2,000,000

3-15 Principal Members								
M	250,000	300,000	500,000	750,000	1,000,000	1,500,000	2,000,000	
M	36,510	37,167	40,588	42,980	45,172	49,118	53,176	
M+1	49,895	50,796	57,494	60,845	63,957	72,481	80,538	
M+2	62,195	63,319	72,378	76,572	80,495	92,436	104,359	
M+3	73,771	75,106	86,463	91,455	96,144	110,814	126,783	
M+4	84,985	86,525	100,149	105,917	111,351	127,363	147,305	
M+5	95,838	97,575	113,433	119,954	126,111	142,938	167,300	
M+6	106,329	108,256	126,315	133,565	140,424	157,916	186,769	

Kes 2,000,000 – 10,000,000

3-15 Principal Members								
M	3,000,000	4,000,000	5,000,000	6,000,000	7,000,000	8,000,000	9,000,000	10,000,000
M	54,052	55,206	56,085	57,663	59,242	60,821	62,399	63,978
M+1	81,870	83,479	84,815	87,215	89,614	92,013	94,413	96,812
M+2	106,087	108,094	109,827	112,941	116,056	119,170	122,284	125,398
M+3	128,885	131,265	133,373	137,159	140,946	144,733	148,520	152,307
M+4	149,748	152,470	154,920	159,323	163,725	168,128	172,530	176,933
M+5	170,077	173,131	175,916	180,918	185,920	190,922	195,925	200,927
M+6	189,870	193,248	196,358	201,945	207,531	213,117	218,704	224,290

OUTPATIENT OPTIONS

Outpatient Options	50,000	100,000	150,000	200,000	250,000
M	28,350	37,139	37,706	38,207	41,108
M+1	49,292	66,903	69,664	71,778	77,889
M+2	49,534	78,455	85,625	85,126	93,694
M+3	49,734	88,507	100,562	102,369	109,024
M+4	49,884	95,091	114,429	116,858	123,823
M+5	49,974	98,198	127,297	131,347	138,323
M+6	49,999	99,757	139,234	144,996	152,272

DENTAL OPTIONS

Dental	10,000	20,000	30,000	40,000	50,000
M	2,857	4,757	8,572	9,133	11,894
M+1	4,123	6,864	12,368	13,177	17,162
M+2	5,313	8,847	15,940	16,983	22,118
M+3	6,429	10,705	19,288	20,549	26,764
M+4	7,471	12,438	22,412	23,878	31,099
M+5	8,437	14,048	25,312	26,968	35,123
M+6	9,329	15,533	27,988	29,819	38,836

OPTICAL OPTIONS

Optical	10,000	20,000	30,000	40,000	50,000
M	4,487	9,078	13,666	18,222	22,696
M+1	6,267	12,679	19,087	25,449	31,698
M+2	7,989	16,162	24,330	32,440	40,406
M+3	8,793	17,696	26,597	35,462	44,241
M+4	9,396	18,847	28,297	37,729	47,118
M+5	9,798	19,614	29,430	39,240	49,035
M+6	9,999	19,998	29,996	39,995	49,994

MATERNITY RATES

Maternity Rates	50,000	75,000	100,000	150,000	200,000
Per Family	13,846	20,769	27,692	41,538	55,385

IMPORTANT INFORMATION

A) HOW TO SIGN UP:

- Visit our branches country wide.
- Speak to your insurance agent or broker
- Call us on **0711 065 100** or write to us on **retailmedical@uap-group.com**

B) DOCUMENTATION REQUIRED AT THE POINT OF APPLYING FOR COVER;

- Duly filled scheme Application Form by the scheme contact person or sponsor, signed and stamped.
- Duly filled and signed application form by each employee.
- Certificate of Incorporation and KRA PIN Certificate for the group.
- Letter of appointment of the insurance agent or broker if any.
- List of Members covered and dependents (where applicable) and relevant details. All employees or members of the organization must enrol.
- Proof of premium payment and the quotation. Cover will only commence after premiums payment.

C) GENERAL CONDITIONS

- Eligibility is all persons and their legal dependants from age of zero (0) months to sixty five (65) years. Existing members can continue renewing in the scheme up to the age of seventy (70) years.
- Product is applicable for businesses with three (3) to a hundred (100) employees.
- Eligible dependents include one spouse, own children from the age of zero (0) months to eighteen years (18), or up to twenty five (25) years if proof of schooling is provided.
- Co-Pays apply as per the details on the benefits schedule provided in this brochure.
- A countrywide network of providers is accessible to members.
- Waiting Periods have been waived under the product, provided the all the employees in of the organization taking cover are enrolled.
- All scheduled admissions must be pre authorised at least 48 hours prior to admission. For emergency admissions the hospital should contact UAP Insurance within 48 hours of admission.
- All hospital bills shall be paid net of National Hospital Insurance Fund (NHIF) rebates as shall be advised from UAP.
- Medical cards must be presented at the accredited panel of service providers for access to service. Each member will also be required to complete and sign a claim form.
- A member travelling outside the country will be eligible for emergency medical benefits up to a period of six (6) weeks in any one visit. All medical expenses will be on reimbursement basis and will be within the acceptable guidelines of the customary and reasonable charges and as per the policy terms and conditions. Travel and accommodation costs are not covered.
- Hospital cash is payable once per admission that lasts five (5) or more days for up to five (5) admissions in a year.

NOTES

CONTACTS

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