



OLDMUTUAL

AFYAIMARA COUNTY COVER

AFFORDABLE MEDICAL COVER DESIGNED FOR YOU

Our tailored Afya Imara County solution means you're always covered for what you need, when you need it. The time is now to protect your health.

For enquiries email us on RetailMedical@uap-group.com
or call us on 0711 065 100



DO GREAT THINGS EVERY DAY

GENERAL COVER SCOPE

Afyalmara County Family cover is an enhanced medical insurance cover at affordable rates designed for families.

It covers day and inpatient hospitalization, maternity, outpatient treatment, optical and dental with enhanced limits for chronic conditions including cancer. One is only eligible for outpatient cover if they have taken the inpatient cover. There is also the option of taking the inpatient cover only.

Below are the key enhancements offered by **Afyalmara County Family Cover**;

a) Wide geographical coverage and Hospital Network

- Access to selected affordable hospitals within UAP's comprehensive network of hospitals across East Africa.
- Overseas referral is available for conditions not covered locally on accredited overseas partners for 1M limit.

b) Convenient

- Air evacuation for cover limits of Kes 1M.
- Road evacuation for all cover options.
- Overseas emergency treatment cover of 42 days for limit on reimbursement for the KES 1M cover limit.

c) Affordable

- No excess for inpatient cover
- Instalment premium payments for your inpatient cover
- No claim discount (NCD)

d) Comprehensive benefits

- Inpatient limits from Kes 100,000 to Kes 1,000,000.
- Optional outpatient cover from Kes 25,000 to Kes 50,000. This caters for;
 - i) Routine outpatient services, consultations, diagnostics, drugs and dressings.
 - ii) Routine dental and optical services, including cost of frames, lenses.
 - iii) Well baby Clinics.
- Covers pre-existing, chronic conditions & HIV/AIDs
- Cover for prematurity and neonatal conditions
- Maternity cover within inpatient.
- Dental & Optical benefits included within the outpatient cover
- Hospitalization expenses including surgeon, physician, theatre, ICU & HDU fees
- Home Nursing up to 90 days from discharge.
- Diagnostics and physiotherapists fees, prescribed drugs, dressings, surgical appliances
- Accommodation costs for parent/guardian accompanying child of 12 years and below

SCOPE OF COVER

INPATIENT	WAITING PERIOD	OPTION 1	OPTION 2	OPTION 3	OPTION 4
OVERALL LIMIT		KES 100,000	KES 250,000	KES 500,000	KES 1,000,000
Bed		General Ward Max Kes 8,000	General Ward Max Kes 8,000	Private Room, Max Kes 8,000	Private Room, Max Kes 14,000
Lodger Fee for Accompanying Parent		12 Years	12 Years	12 Years	12 Years
Emergency Evacuation Within East Africa	No waiting period	Road Ambulance	Road Ambulance	Road Ambulance	Road & Air Ambulance
Accidents	No waiting period	To overall Limit	To overall Limit	To overall Limit	To overall Limit
Acute Conditions	28 days illness claims/ 60 days surgical claims	To overall Limit	To overall Limit	To overall Limit	To overall Limit
Newly Diagnosed Chronic illnesses	28 days illness claims/ 60 days surgical claims	Kes 50,000	Kes 50,000	Kes 300,000	Kes 400,000
Chronic, Pre-existing illnesses, Congenital Conditions & HIV/AIDS	1 Year	Kes 50,000	Kes 50,000	Kes 200,000	Kes 250,000
Organ Transplant (cost of donor or securing the organ is excluded). This is in addition to the relevant condition's benefit allocation	1 Year	Kes 50,000	Kes 50,000	Kes 200,000	Kes 250,000
Psychiatric and Psychological Illness	1 Year	Kes 50,000	Kes 50,000	Kes 100,000	Kes 150,000
Post Hospitalization 21 days after discharge (On Reimbursement)	Depends with the Sub-limit	Kes 5,000	Kes 10,000	Kes 15,000	Kes 20,000
Neo-natal and prematurity conditions	1 Year	Kes 50,000	Kes 100,000	Kes 200,000	Kes 250,000
Inpatient non-accident related dental surgery/ treatment	1 Year	Kes 30,000	Kes 60,000	Kes 100,000	Kes 120,000

SCOPE OF COVER

INPATIENT	WAITING PERIOD	OPTION 1	OPTION 2	OPTION 3	OPTION 4
OVERALL LIMIT		KES 1 00,000	KES 250,000	KES 500,000	KES 1,000,000
In patient non-accident related eye treatments excluding surgery for refractive errors and laser treatment	1 Year	Kes 30,000	Kes 60,000	Kes 100,000	Kes 120,000
Accident Related Inpatient Dental and Ophthalmological treatment	No waiting period	Kes 100,000	Kes 200,000	Kes 500,000	Kes 1,000,000
Illness related reconstructive/plastic surgery (Excludes cosmetic, obstetrics and gynecology related)	1 Year	Kes 50,000	Kes 75,000	Kes 100,000	Kes 120,000
Non accident related maxillofacial surgery (Excluding routine dental surgery and dental fixtures)	1 Year	KES 30,000	Kes 75,000	Kes 150,000	Kes 200,000
Gynecological surgery	1 Year	Kes 40,000	Kes 100,000	Kes 200,000	Kes 300,000
Cost of purchase of internal and external surgical implants, appliances, and prostheses (excluding dental fixtures)t	Depending on the Condition sub-limit	Kes 60,000	Kes 150,000	Kes 250,000	Kes 300,000
Last Expense - Per Member	As per illness/Accidents Clause	Kes 50,000	Kes 50,000	Kes 75,000	Kes 100,000
Passive War /Terrorism and Political Violence	No waiting period	Kes 50,000	Kes 50,000	Kes 300,000	Kes 400,000
Maternity: Normal Delivery, Elective & subsequent Caesarean sections, First Ever Emergency Caesarean Section, Ectopic Pregnancy, Maternity Complications before & after delivery	1 Year	Not Covered	Kes 30,000	Kes 40,000	Kes 50,000
Covid -19 Treatment (moderate cases)	28 days illness claims/ 60days surgical claims	Kes 100,000	Kes 250,000	Kes 250,000	Kes 250,000
Covid-19 Treatment (Critical cases requiring ICU/HDU) This is a cumulative amount that will be inclusive of any amounts already paid for in the treatment of moderate inpatient cases	28 days illness claims/ 60days surgical claims	Kes 100,000	Kes 250,000	Kes 500,000	Kes 1,000,000

OUTPATIENT OPTIONS

OUTPATIENT OPTIONS	25,000	40,000	50,000
Dental Sub-limit	Nil	Nil	10,000
Optical Sub-limit <i>Frames can only be replaceable once in every 2 years up to a sublimit of KES 5,000.</i>	Nil	Nil	10,000
Optical exclusions: <i>Plano, photochromatic, antiglare lenses</i>			
Vaccines		KEPI	
Pre-existing and chronic conditions	After 1 year waiting period, to the full limit		
Supplements	Covered subject to pre-authorization and medical necessity		
Antenatal and postnatal <i>up to 6 weeks from delivery (maximum of 2 ultrasounds)</i>	After 1 year waiting period		
CO-PAYS:			
All Visits	Kes 200		

PREMIUMS - INPATIENT RATES

	KES 100,000	KES 250,000	KES 500,000	KES 1,000,000
19 YRS - 29 YRS.				
Principal Member	11,184	14,833	23,189	26,908
Spouse	9,438	11,223	17,818	20,488
Child (0-18yrs.)	5,438	6,725	10,552	13,856
30 YRS - 40 YRS.				
Principal Member	11,752	15,471	24,203	28,068
Spouse	9,846	11,681	18,638	21,428
Child (0-18yrs.)	5,438	6,725	10,552	13,856
41 YRS - 50 YRS.				
Principal Member	14,100	18,111	28,495	32,864
Spouse	11,722	13,791	22,072	25,262
Child (0-18yrs.)	5,438	6,725	10,552	13,856
51 YRS - 70 YRS.				
Principal Member	17,662	22,117	34,445	40,144
Spouse	14,600	17,027	26,622	31,142
Child (0-18yrs.)	5,438	6,725	10,552	13,856

RULES OF SELECTION OF COVER;

a) Inpatient is the primary option and is purchased before purchasing outpatient.

b) Outpatient is limited to the amount of inpatient and is restricted as below;

INPATIENT LIMIT	CAN PURCHASE OUTPATIENT OF:
100,000	25,000
250,000	40,000 and below
500,000	50,000 and below
1,000,000	50,000 and below

OUTPATIENT RATES

LIMIT	KES 25,000	KES 40,000	KES 50,000
M (Also Per Person)	9,390	10,821	11,775
M+1	10,841	18,050	22,856
M+2	15,921	22,120	26,252
M+3	21,002	26,647	30,411
M+4	23,856	30,788	35,408
M+5	24,603	34,661	41,366

GENERAL CONDITIONS

GENERAL CONDITIONS	
Eligibility	<ul style="list-style-type: none">-Eligibility is all persons and their legal dependents from age of zero (0) months to sixty five (65) years. Existing members can continue renewing in the scheme for life subject to renewal review by UAP Insurance Company Ltd.· Persons over 60 years will be required to submit a medical report in the prescribed manner for eligibility.· Eligible dependents include one spouse (age 18 to 65 years at joining) and own children from age of 0 months to 18 years of age. Children will be added on cover provided they are discharged from hospital and at least 37 weeks at birth.· Children above 19 years will be covered as principal Persons.· Birth notification must be included in the application form.
NHIF	NHIF shall apply where the child already has an NHIF Cover; bills shall be settled net of NHIF
Waiting Periods	28 days waiting period applies to illness claims and 60 days for surgical claims subject to condition specific waiting period indicated in the benefit schedule.

GENERAL CONDITIONS

Premium Payments(s)	Upfront payment is required. For members who require instalments, we facilitate premium financing.
Territorial Limit	<ul style="list-style-type: none">· Kenya, Uganda, Tanzania, Rwanda and South Sudan.· In case of services sought outside the specified region, the insured member's claims shall be settled on re-imburement.· Reimbursement will be on UAP Insurance Company Ltd's reasonable and customary rates.· The cover on reimbursement basis is valid for the first 42 days outside the geographical scope.
Overseas Referral	<ul style="list-style-type: none">· Treatment(s) not available locally will be to a medical facility approved by the company and excludes Western Europe, Australia, USA, South Africa and Canada.· The Company has credit facilities in India, and the referral must be approved by the company and respective government department.· Air fare for patient and accompany person on economy class is payable from the overall cover limit (inpatient), while accomodation costs are excluded.
Administration	<ul style="list-style-type: none">• Cards<ul style="list-style-type: none">· Medical cards shall be issued to all members of the scheme.• Healthcare Providers:<ol style="list-style-type: none">i. Restricted to hospital network in the panel option chosenii. In case of genuine reasons for using a non-panel provider, reimbursement shall be allowed subject to UAP Insurance Company Ltd's customary and reasonable rates. Consultation shall be reimbursed at Kes. 2,000 for General Practitioners and Kes. 3,000 for Specialists.iii. Inpatient total reimbursement shall be capped at 80% after application of the (i) above.
Reimbursements	<ul style="list-style-type: none">· Only allowed for genuine medical emergencies and shall be reimbursed in accordance with the terms provided in the policy document.
General Exclusions	<ul style="list-style-type: none">· Expenses where material information is withheld or misstated.· Infertility treatment· Cosmetic surgery unless caused by accident· Weight management treatments and drugs.· Participation in professional & hazardous sports e.g. bungee jumping, paragliding· Treatment other than by registered medical practitioner· Self-referred or self-prescribed treatment.· Drugs dispensed by the treating doctor.· Nutritional supplements unless prescribed as part of medical treatment.· Alternative treatment - Chiropractors, Acupunturist, Herbalist· Drunkenness, drug addiction, intentional self-injury.· Expenses incurred in connection with participation in Riot, Strike and Civil commotion.· Naval, Military or Air force operations.· Expenses recoverable under any other insurance e.g. NHIF, GPA, WIBA· Beauty treatment in nature cure clinics or health hydro's· Diagnostic equipment (e.g. Glucometers, BP machines)· Experimental treatment· Declared Pandemics, epidemics and natural disasters· Contamination by radio activity from nuclear fuel, waste or fission· Benefits not purchased or not indicated in the brochure. <p>*Refer to the policy document for details</p>

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