

Jubilee
INSURANCE

J-Biz

**SMALL AND MEDIUM
ENTERPRISE MEDICAL
INSURANCE**

ABOUT JUBILEE

Jubilee Insurance was incorporated on 3rd August 1937, in a small office in Mombasa and is one of the pioneers in the establishment of a local composite insurance company.

In keeping with our mission of contributing to the economic growth of the region, Jubilee Holdings the parent company of Jubilee Insurance took the bold step of converting itself into a public company in 1984, to broaden its ownership base locally which now consists of over 5,000 shareholders. Today more than seventy five years since inception Jubilee is a leading Insurance company in East Africa with the largest shareholders' funds and solid emphasis on security for policyholders, information technology, committed, knowledgeable & professional staff, and a reputation for superior customer service.

Currently, the Jubilee Insurance is the largest medical insurance underwriter in East Africa.

KEY BENEFITS

1. Wide range of plans to choose from:
 - 10 levels of inpatient plan
 - 6 levels of outpatient plan
 - 3 levels of dental & optical plans
 - 5 levels of maternity plans
2. Cover for pre-existing, chronic, psychiatric, congenital and HIV/AIDS including related conditions
3. Country wide provider network
4. Overseas inpatient referrals on credit with listed hospitals
5. Cover for inpatient dental and optical treatment
6. Post hospitalization benefit
7. Funeral expense benefit for the family shared
8. Free Personal Accident benefit for the Principle member and optional for dependents

PLAN SUMMARY

J-BIZ HEALTHCARE FOR YOUR EMPLOYEES

INPATIENT BENEFITS (CORE PRODUCT - COMPULSORY)

All inpatient treatment is subject to pre authorization

All benefits are subject to overall annual benefit unless specified otherwise

Group Size - Minimum 5 employees - Maximum 50 employees

OVERALL BENEFIT LIMITS IN KSHS PER INSURED FAMILY PER ANNUM	5,000,000	4,000,000	3,000,000	2,000,000	1,000,000	750,000	500,000	400,000	300,000	250,000
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Pre-existing & Chronic Conditions .HIV is covered within this sub-limit .Hearing Aids is covered under this sublimit up to a maximum of ksh. 100,000	750,000	600,000	500,000	400,000	350,000	300,000	300,000	300,000	150,000	125,000
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Psychiatric Conditions	Covered up to 20% of inpatient limit									
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Congenital and pre-maturity and related conditions and/or complications	200,000	200,000	200,000	200,000	200,000	150,000	150,000	150,000	150,000	150,000
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Bed limits per day. NHIF rebate applicable on the cost of the bed per night.	Std Private Room up to 16,500 per night	Std Private Room up to 15,000 per night	Std Private Room up to 12,500 per night	General Ward Bed						
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Lodger fees for parent accompanying sick child member	Covered for a child below 10 yrs									
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Physicians, specialists, surgical fees including anaesthetist fees, theatre charges, HDU, CCU & ICU, Diagnostic Tests, Physiotherapy as part of inpatient treatment.	Paid in full up to the applicable inpatient limit									
Inpatient MRI/CT Scans and PET Scans (authorisation required)	Paid in full up to the applicable inpatient limit									
Surgical appliances/internal prosthesis	Paid in full up to the applicable inpatient limit									
Reconstructive surgery following an accident	Paid in full up to the applicable inpatient limit									
First ever emergency caesarean section in the lifetime of a female employee/spouse (delivery and complications) subject to 10 months waiting period	120,000	120,000	120,000	120,000	120,000	120,000	120,000	120,000	120,000	120,000
Inpatient dental surgery from accident	Paid in full up to the applicable inpatient limit									
Inpatient ophthalmology surgery as a result of an accident	Paid in full up to the applicable inpatient limit									
Inpatient non accident related dental surgery/treatment	100,000	100,000	100,000	100,000	100,000	100,000	50,000	50,000	50,000	50,000
Inpatient non accident related eye treatment (excluding correction of refractive errors and laser treatment)	100,000	100,000	100,000	100,000	100,000	100,000	50,000	50,000	50,000	50,000
Day Case Admission	Paid in full up to the applicable inpatient limit									
Post hospitalization treatment – up to 3 weeks after discharge from hospital	15,000	15,000	15,000	15,000	15,000	15,000	15,000	15,000	15,000	15,000
Medically necessary home nursing on doctor's recommendation after discharge from hospital	Up to 30 days									
OTHER BENEFITS INCLUDED WITHIN INPATIENT COVER										
Local road ambulance to hospital for emergency cases	Covered within the annual inpatient limit									
Commercial Air Evacuation out of Kenya (must be pre authorised) for treatment not available or not safe to undertake locally	Economy return fare only within Africa, India and Pakistan					Not applicable				
Funeral Expenses (Free for Employee.)	50,000	50,000	50,000	50,000	50,000	50,000	50,000	50,000	50,000	50,000
Personal Accident (Free for Employee. Optional for dependents over 18 years)	500,000	500,000	500,000	500,000	500,000	500,000	500,000	500,000	500,000	500,000

OUTPATIENT BENEFITS (OPTIONAL)										
Annual limits (limits below 50,000/- cannot be shared per family)	200,000	150,000	100,000	100,000	75,000	75,000	50,000	50,000	30,000	30,000
Consultation fees (doctors on panel)	Paid up to a maximum of Kshs. 2,200/- per consultation									
Pathology, Xrays, MRI, CT Scan and other necessary diagnostic tests * 1	Covered									
Prescription drugs and dressings up to a maximum of 30 days dosage	Covered									
Pre-existing, chronic cover, psychiatric, congenital conditions (and HIV/AIDS and related treatment if Enhanced II option is purchased)	Covered									
Physiotherapy(pre authorization required)	Covered									
KEPI and Baby friendly Vaccination	up to a maximum of KShs. 5,000 within the outpatient limit for child member up to 1.5 years									
Routine medical check-up for Employee & Spouse	up to a maximum of KShs. 10,000 within the outpatient limit for employee & spouse only									
Pre-natal & Ante-natal outpatient treatment (10 months waiting period)	Covered provided that maternity option has been purchased and subject to the waiting period									
ROUTINE DENTAL (OPTIONAL)	OPTION 1			OPTION 2			OPTION 3			
Annual limit per person	Ksh.20,000			Ksh.15,000			Ksh.10,000			
Benefits covered (pre authorization required)	Cover provides for cost of fillings, x-rays, extractions,prescription including surgical extraction together with anesthetics fees									
ROUTINE OPTICAL (OPTIONAL)	OPTION 1			OPTION 2			OPTION 3			
Annual limit per person	Ksh.20,000			Ksh.15,000			Ksh.10,000			
Benefits covered(pre authorization required)	Cover provides for the cost of eyeglasses and eye testing									
Frame limit	10,000/- per frame per prescription - limited to 1 frame every 2 years									
ROUTINE MATERNITY (OPTIONAL)	OPTION 1		OPTION 2		OPTION 3		OPTION 4		OPTION 5	
Annual limit per member/ spouse	Kshs.200,000		Kshs.150,000		Kshs.100,000		Kshs. 75,000		Kshs. 50,000	
Pre-natal & Ante-natal outpatient treatment (10 months waiting period)	Covered under the outpatient limit									
Benefits covered under maternity limit (10 months waiting period)	Normal and C-Section delivery, labour/recovery ward, professional fees, pregnancy/maternity related hospitalisation other related ailments & complications including ectopic pregnancy and miscarriage.Excludes charges for the baby									

This is only a summary of the benefits for more details refer to the policy document

GENERAL CONDITIONS

1. Medical fees will be subject to customary and reasonable charges and the applicable rates of the Jubilee Health Insurance panel of service providers.
2. Outpatient maximum consultation limit of Kshs. 2,200 for every outpatient visit.
3. A co-pay of Ksh. 2,000 is applicable at Nairobi Hospital and MP Shah Hospital per outpatient consultation.
4. A countrywide network of providers is accessible to members.
5. General waiting period of 14 days for new groups for illness claims. No waiting period for accident related treatment. However, provided there is no break in cover, and subject to the underwriting procedures some of the waiting periods may be waived. The evidence of transfer will be a copy of renewal invitation letter and claims experience for the current period/policy.
6. Eligibility of main member and spouse is from 18 years to 60 years. Members of the scheme will continue to be covered up to the age of 65 years.
7. Eligibility of dependent children is from 0 days (term baby of 38 weeks) up to 18 years or to the age of 23 years if residing with the parents and enrolled in fulltime post-secondary institution.
8. Cover must be confirmed in writing and premiums paid in full to Jubilee Health Insurance for the policy to commence.
9. All scheduled admissions must be pre authorised at least 48 hours prior to admission.
10. For emergency admission the hospital will contact Jubilee Health Insurance within 48 hours of admission.
11. All hospital bills shall be paid net of National Hospital Insurance Fund (NHIF) rebate.
12. 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.
13. 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.

EXCLUSIONS (These are some of the exclusions. For more details please refer to the policy document)

1. Cosmetic or plastic surgery unless necessitated by an accidental injury that occurs while the insured is covered under this contract.
2. Riding or driving in any kind of race.
3. Beauty treatment or massage.
4. Sexually transmitted diseases except HIV/AIDS.
5. Naval, military and air force operations.
6. Stays at sanatoria, old age homes, places of rest etc.
7. Vaccinations except for KEPI and baby friendly vaccinations.
8. Transportation other than a licensed ambulance, as provided for under the in-patient coverage of this contract.
9. Nutritional food supplements or replacements.
10. Injury resulting from insurrection of war, civil commotion or an act of terrorism, whether declared or undeclared.
11. Injury as a result of participating in riot, strike.
12. Alternative treatment such as herbal treatment, acupuncture treatment, chiropractors etc.
13. Expenses resulting from the insured participating in extreme/hazardous sports and activities.
14. Pain management.
15. Dental treatment including teeth extractions, fillings, teeth scaling, etc. unless the dental cover has been purchased.
16. Optical treatment relating to correction of eyesight e.g. eye glasses, contact lenses, laser eye treatment unless the optical cover has been purchased.
17. Intentional self-injury while sane or insane, suicide or attempted suicide, treatment of acute or chronic alcoholism and drug addiction.
18. Expenses recoverable under any other insurance e.g. NHIF, GPA, etc.
19. Treatment required as a result of noncompliance, failure or refusal to comply with medical advice.
20. Pregnancy, childbirth, maternity benefits, medically necessary abortion, miscarriage, antenatal or postnatal care, caesarean operation except where purchased and subject to ten months waiting period.
21. Contraceptive services and supplies, family planning and fertility treatment e.g. costs of treatment related to infertility and impotence.
22. Any injury, illness or disease specified as exclusion and complications caused by a condition that is excluded.
23. Services primarily for weight reduction or treatment of obesity and slimming operations or any care which involves weight reduction as a main method of treatment.
24. Peri-Menopause, Menopause, Andro-pause, hormone replacement therapy, age and puberty related treatment.
25. Epidemics, pandemics or unknown diseases.

PROVIDER PANEL

Jubilee Health Insurance's provider panel allows members access to the eligible medical care required on credit basis, which means that provided the treatment is covered and has been pre-authorized where necessary, the bill will be settled directly with the service provider. This allows members to get quality care when required.

The provider panel will be in the membership pack upon purchase of the policy and the same can also be accessed via the Jubilee Insurance website www.jubileeinsurance.com.

APPLYING FOR COVER

The following documents are required for a group application:-

- Application form duly completed and signed by each employee
- Quotation and proof of premium payment
- Certificate of Incorporation and PIN Certificate for the Group
- List of members and dependants(where applicable) and relevant details.
- Group Proposal Form duly completed and signed by the group administrator and letter of commitment.

Supporting documents required in addition to a fully completed and signed application form are:-

- ID and PIN copies for all adult applicants/dependents
- Birth Certificate/birth notification copies for all child dependents (under 18 years)
- Passport size colored photographs of each applicant

MEMBERSHIP PACK

Once the policy commences, you will receive a membership pack within 30 days which will include:-

- Membership Cards(s)
- Welcome Letter confirming the plan and benefits purchased
- Policy document
- Policy Endorsement
- List of providers

Jubilee Health Insurance Limited is regulated by the Insurance Regulatory Authority (IRA).



CONTACT US

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