

OLDMUTUAL

SME HEALTH COVER

THAT KEEPS YOUR BUSINESS GOING



DO GREAT THINGS EVERY DAY

oldmutual.co.ke

WHY HAVE SME HEALTH COVER?



No Waiting Periods

Get treated sooner by going to an accredited provider.



Critical Illness

Embedded coverage, Cash lumpsum payment



Renew for life

Continue enjoying cover without an upper age limit.



Hospital Cash

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



Personal Accident Cover

Covers loss of life, permanent disablement due to an accident



Flexibility of Cover

Various plans to choose and combine

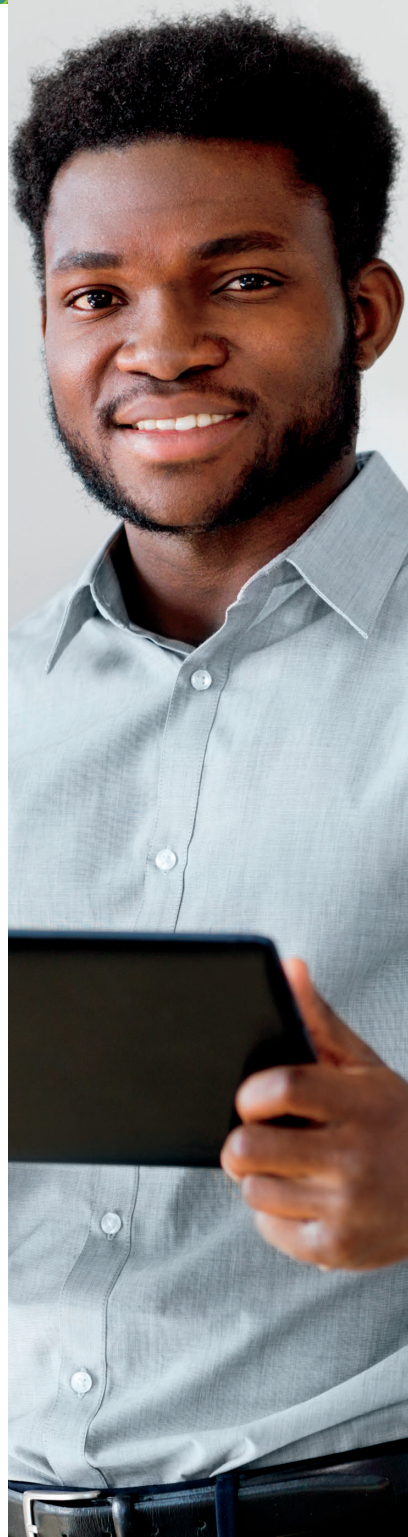


No Co-payment:

Enjoy a hassle-free check-up and treatment without co-paying.

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 Kshs. 250 000 per family to Kshs. 10 000 000 per family
 - ii. Outpatient options from Kshs. 50 000 to Kshs. 250 000
 - iii. Dental and optical covers from Kshs. 10 000 to Kshs. 50 000 each
 - iv. Maternity cover from 50 000 to Kshs. 300 000 per Family Per annum
 - v. Hospital Cash that pays Cash benefits for days spent in hospital of up to Kshs. 25 000 per year
- b) There are no waiting periods
- c) Lifetime cover for members
- d) 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) Critical Illness Cover
- g) Personal accident cover for the employee



PRODUCT BENEFITS

a) Inpatient

Inpatient	Limits	250,000	500,000	1,000,000	2,000,000	3,000,000	5,000,000	10,000,000
Inpatient Expenses Related to Acute Conditions and accidents	Sub-limits	Covered To Full Limit	Covered To Full Limit	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	12 Years	12 Years
Newly diagnosed chronic conditions		250,000	500,000	1,000,000	2,000,000	3,000,000	4,000,000	4,000,000
Chronic, Pre-existing illnesses, & HIV/ AIDS		125,000	300,000	400,000	450,000	500,000	800,000	1,250,000
Neonatal, Prematurity and Congenital Conditions		100,000	100,000	150,000	200,000	200,000	300,000	300,000
Bed Limit per day (Net of NHIF)		8,000	8,000	10,000	18,000	18,000	22,500	26,000
Psychiatric and Psychological Illnesses		200,000	300,000	400,000	500,000	600,000	1,000,000	1,250,000
Passive War / Terrorism and Political Violence		250,000	300,000	500,000	700,000	1,000,000	2,000,000	2,000,000
External Aids on Prescription		50,000	75,000	80,000	120,000	150,000	200,000	200,000
Non-accidental Dental treatment & surgery		50,000	50,000	120,000	150,000	200,000	300,000	350,000
Non-accidental optical treatment and surgery for refractive errors		50,000	50,000	120,000	150,000	200,000	300,000	350,000
Post-Hospitalization treatment related to cause of pre-authorization limited to 3 weeks after discharge and is on a reimbursement basis		15,000	15,000	20,000	25,000	25,000	40,000	40,000
Maternity related complications (subject to purchase of the maternity benefit)		125,000	250,000	300,000	300,000	300,000	300,000	300,000
Organ Transplant (cost of donor or securing the organ is excluded) this is in addition to the relevant conditions benefit allocation		100,000	200,000	200,000	300,000	500,000	500,000	500,000

Last Expense for death as a result of covered conditions Per Person (stand alone benefit)	Sub-limits	50,000	75,000	75,000	75,000	75,000	100,000	150,000
Personal Accident Cover- For Principal Member only		500,000						
Air Fare - Overseas Referral		Economy return fare (India only)						
Day Care Surgery (under General Anaesthesia)		Fully Covered	Fully Covered	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	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	4,000 Max 16,000 Per Year	5,000 Max 20,000 Per Year	5,000 Max 20,000 Per Year	7,500 Max 30,000 Per Year	7,500 Max 30,000 Per Year
Covid-19 Inpatient Treatment		250,000	500,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
Critical Illness lumpsum payout upon first diagnosis of either cancer, stroke, heart attack, kidney failure or paralysis. (Cover ceases at 65 years)		750,000	750,000	750,000	750,000	750,000	750,000	750,000

b) Outpatient Options

Outpatient Options	50,000	100,000	150,000	200,000	250,000
Covered Services	Consultations, Medications, Radiology (Net of NHIF), KEPI Vaccines				

c) 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 The frames shall be limited to one pair for every two years				

Dental and Optical benefits, of equal limits, must be purchased together alongside inpatient and outpatient benefits.

d) Maternity Options

Maternity Options	50,000	75,000	100,000	150,000	200,000	300,000
Covered Services	Normal delivery and C- Section delivery Covered Services Normal and C- Section delivery, labour/recovery ward, professional fees. The Old Mutual negotiated maternity packages are recommended.					

All maternity related benefits, whether inpatient or outpatient are subject to the organization having purchased the maternity benefit.

RATES

Inpatient							
Family Size	250,000	500,000	1,000,000	2,000,000	3,000,000	5,000,000	10,000,000
M	32,139	34,040	37,595	43,198	43,811	53,685	78,010
M+1	40,529	45,849	51,066	62,672	69,729	96,781	133,688
M+2	50,464	58,458	76,833	84,671	106,121	140,666	185,048
M+3	63,098	75,633	102,044	111,661	141,187	184,884	239,775
M+4	74,459	92,081	129,722	139,832	179,040	228,402	287,428
M+5	86,263	108,684	156,873	167,750	216,297	272,070	336,592
M+6	97,618	125,129	184,559	195,924	254,158	315,587	384,222
Additional Premium per Member Above 50 years	19,325	20,381	22,130	26,417	31,265	47,336	70,654

Maternity							
Limit	50,000	75,000	100,000	150,000	200,000	300,000	
Premium	10,483	14,483	20,483	28,293	38,471	54,828	

Limited to Inpatient limits:						
	250,000 and above	500,000 and above	1,000,000 and above	2,000,000 and above	3,000,000 and above	
Outpatient limit	50,000	100,000	150,000	200,000	250,000	
M	30,345	32,965	38,284	42,239	42,505	
M+1	49,999	60,416	69,871	77,170	80,183	
M+2	49,999	80,107	88,506	94,075	99,655	
M+3	49,999	91,380	106,766	115,042	119,755	
M+4	49,999	96,318	126,086	132,050	137,344	
M+5	49,999	98,648	136,048	160,021	155,218	
M+6	49,999	99,818	145,289	171,454	184,704	
Additional premium per insured above 50 years	32,741	35,568	41,307	45,574	45,861	

All maternity related benefits, whether inpatient or outpatient are subject to the organization having purchased the maternity benefit.

Limited to Outpatient limit					
	50,000 and above	100,000 and above	150,000 and above	200,000 and above	250,000
Dental limit	10,000	20,000	30,000	40,000	50,000
M	2,000	3,330	6,000	8,618	9,087
M+1	2,886	6,550	8,658	14,384	16,151
M+2	3,917	9,420	11,612	19,084	21,995
M+3	5,136	12,456	15,452	24,276	28,403
M+4	6,231	14,940	19,125	27,829	32,936
M+5	7,371	17,622	22,858	31,971	38,143
M+6	8,477	19,999	26,544	35,658	42,829

Limited to Outpatient limit					
	50,000 and above	100,000 and above	150,000 and above	200,000 and above	250,000
Optical limit	10,000	20,000	30,000	40,000	50,000
M	4,196	8,425	10,259	11,410	12,560
M+1	6,609	11,684	14,841	16,113	17,385
M+2	8,510	14,211	18,355	19,687	21,019
M+3	9,999	17,062	22,343	23,763	25,182
M+4	9,999	18,785	24,685	26,097	27,508
M+5	9,999	19,999	27,623	29,061	30,500
M+6	9,999	19,999	29,999	31,538	32,976

CRITICAL ILLNESS COVER

Newly Diagnosed Critical illness cash pay-out for cancer, stroke, heart attack, kidney failure and paralysis. Amount payable under critical illness cover - KES 750,000 (benefit is on 1st diagnosis of the mentioned diseases).

Conditions

Cover cease age of 65year (up to 65.9years)

For family cover, only one claim is payable per policy period.

GPA	
Principal member only	
GPA Benefit	
Death	500,000
Permanent Total Disablement	500,000
Temporary Total Disablement (Weekly)	5,000

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 email Medical Retail

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 detail . 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 for life.
- 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.
- A countrywide network of providers is accessible to members.
- Waiting Periods have been waived under the inpatient, outpatient, dental, optical and maternity benefits, provided that all the employees of the organization taking cover are enrolled. A 28-day waiting period will apply for the Critical illness benefit.
- All scheduled admissions must be pre-authorized at least 48 hours prior to admission. For emergency admissions the hospital should contact Old Mutual within 48 hours of admission.
- All hospital bills shall be paid net of National Hospital Insurance Fund (NHIF) rebates as shall be advised from Old Mutual.
- Virtual Smart cards will be used 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 with a limit of KES 1M and above 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.

GENERAL EXCLUSIONS

- 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 practitioners
- Self-referred or self-prescribed treatment.
- Nutritional supplements unless prescribed as part of medical treatment.
- Alternative treatment - Chiropractors, Acupuncturist, Herbalist
- 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
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- Diagnostic equipment (e.g. Glucometers, BP machines)
- Experimental treatment.
- Contamination by radio activity from nuclear fuel, waste, or fission
- Pandemics and epidemics, unless where the Company has offered a buy back option, usually by way of a sub-limit within the main cover limit, for a specified pandemic or epidemic.
- Benefits not purchased or not indicated in the brochure.
 - *Refer to the policy document for detailed exclusions

HOW TO SIGN UP

Visit any of our branches countrywide or speak to your agent or broker.

Call us on +254 (0) 711 065 100, +254 (20) 2850 000.

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