



OLDMUTUAL

## **AFYAIMARA COUNTY COVER**

### **AFFORDABLE MEDICAL COVER DESIGNED FOR YOU**

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



**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 hospitalisation, 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 Old Mutual'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 Kshs. 1M
  - Road evacuation for all cover options
  - Overseas emergency treatment cover of 42 days for limit on reimbursement for the Kshs. 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 Kshs. 100 000 to Kshs. 1 000 000
  - Optional outpatient cover from Kshs. 25 000 to Kshs. 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
  - Negotiated attractive and comprehensive maternity packages that cover delivery.
  - Dental & Optical benefits included within the outpatient cover
  - Hospitalisation 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		100 000	250 000	500 000	1 000 000
Bed		General Ward Max Kshs. 8 000	General Ward Max Kshs. 8 000	Private Room. Max Kshs. 8 000	Private Room. Max Kshs. 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	To overall Limit	To overall Limit	To overall Limit	To overall Limit
Chronic Pre-existing illnesses, Congenital Conditions & HIV/AIDS	1 Year	50 000	50 000	300 000	400 000
Organ Transplant (cost of donor or securing the organ is excluded). This is in addition to the relevant condition's benefit allocation	1 Year	50 000	50 000	200 000	250 000
Psychiatric and Psychological Illness	1 Year	50 000	50 000	100 000	150 000
Post Hospitalisation 21 days after discharge (On reimbursement)	Depends with the Sub-limit	5 000	10 000	15 000	20 000
Neo-natal and prematurity conditions	1 Year	50 000	100 000	200 000	250 000
Inpatient non-accident related dental surgery/ treatment	1 Year	30 000	60 000	100 000	120 000
Inpatient non-accident related eye treatments excluding surgery for refractive errors and laser treatment	1 Year	30 000	60 000	100 000	120 000
Accident related inpatient dental and ophthalmological treatment	No waiting period	100 000	200 000	500 000	1 000 000
Illness related reconstructive/plastic surgery (excludes cosmetic obstetrics and gynecology related)	1 Year	50 000	75 000	100 000	120 000
Non-accident related maxillofacial surgery (Excluding routine dental surgery and dental fixtures)	1 Year	30 000	75 000	150 000	200 000
Gynecological surgery	1 Year	40 000	100 000	200 000	300 000
Cost of purchase of internal and external surgical implants, appliances and prostheses (excluding dental fixtures)	Depending on the Condition sub-limit	60 000	150 000	250 000	300 000
Last Expense - Per member (as a stand-alone benefit)	As per illness/Accidents Clause	50 000	50 000	75 000	100 000
Passive War/Terrorism and Political Violence	No waiting period	50 000	50 000	300 000	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	30 000	40 000	50 000
Covid-19 Treatment (moderate cases)	28 days illness claims/ 60 days surgical claims	100 000	250 000	250 000	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/ 60 days surgical claims	100 000	250 000	500 000	1 000 000

## OUTPATIENT OPTIONS

OUTPATIENT OPTIONS	25 000	40 000	50 000
Dental Sub-limit	Nil	Nil	10 000
Optical Sub-limit Frames can only be replaceable once in every 2 years up to a sublimit of Kshs. 5 000. Optical exclusions: Plano, photochromatic, antiglare lenses	Nil	Nil	10 000
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 up to 6 weeks from delivery (maximum of 2 ultrasounds)	After 1 year waiting period		
<b>CO-PAYS:</b>			
All Visits	200		

## PREMIUMS - INPATIENT RATES

Principal member is the oldest insured	OPTION 1	OPTION 2	OPTION 3	OPTION 4
	Kshs. 100 000	Kshs. 250 000	Kshs. 500 000	Kshs. 1 000 000
<b>19 YRS - 29 YRS.</b>				
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
<b>30 YRS - 40 YRS.</b>				
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
<b>41 YRS - 50 YRS.</b>				
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
<b>51 YRS - 65 YRS.</b>				
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

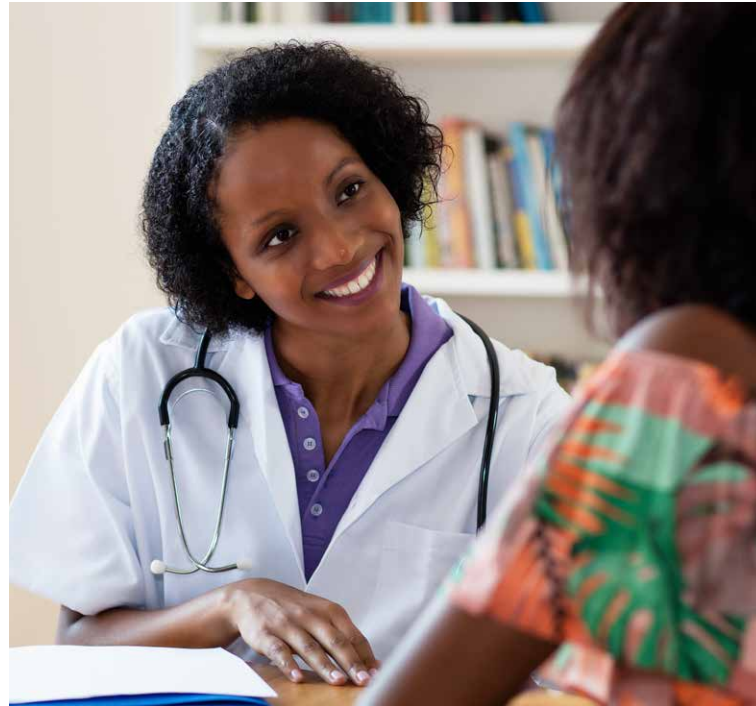
## RULES OF SELECTION OF COVER;

- Inpatient is the primary option and is purchased before purchasing outpatient.
- 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	Kshs. 25 000	Kshs. 40 000	Kshs. 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

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<b>Eligibility</b>	<ul style="list-style-type: none"> <li>Eligibility is all persons and their legal dependents from age of zero (0) months to sixty five (65) years.</li> <li>Persons over 60 years will be required to submit a medical report in the prescribed manner for eligibility</li> <li>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. Newborns will be added on cover from birth subject to receipt of birth notification and premium settlement to Old Mutual.</li> <li>Children above 19 years will be covered as principal Persons</li> <li>Birth notification must be included in the application form</li> </ul>
<b>NHIF</b>	NHIF shall apply where the child already has an NHIF Cover; bills shall be settled net of NHIF
<b>Waiting Periods</b>	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.
<b>Premium Payment(s)</b>	Upfront payment is required. For members who require instalments we facilitate premium financing
<b>Territorial Limit</b>	<ul style="list-style-type: none"> <li>Kenya, Uganda, Tanzania, Rwanda and South Sudan</li> <li>In case of services sought outside the specified region the insured member's claims shall be settled on reimbursement</li> <li>Reimbursement will be on Old Mutual's reasonable and customary rates</li> <li>The cover on reimbursement basis is valid for the first 42 days outside the geographical scope</li> </ul>
<b>Overseas referral</b>	<ul style="list-style-type: none"> <li>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</li> <li>The Company has credit facilities in India and the referral must be approved by the company and respective government department</li> <li>Air fare for patient and accompany person on economy class is payable from the overall cover limit (inpatient) while accommodation costs are excluded</li> </ul>
<b>Administration</b>	<p><b>Cards:</b></p> <p>i. Medical cards shall be issued to all members of the scheme</p> <p><b>Healthcare Providers:</b></p> <p>i. Restricted to hospital network in the panel option chosen</p> <p>ii. In case of genuine reasons for using a non-panel provider reimbursement shall be allowed subject to Old Mutual's customary and reasonable rates. Consultation shall be reimbursed at Kshs. 2 000 for General Practitioners and Kshs. 3 000 for Specialists</p> <p>iii. Inpatient total reimbursement shall be capped at 80% after application of the (i) above</p>

## GENERAL CONDITIONS

<b>Tele-medicine and drug delivery</b>	<p>Routine prescriptions and refill of prescriptions to be done using our 'Meds on wheels' platform which can be accessed through our Chronic Disease Management Program.</p> <p>We encourage members with chronic illnesses to have their treatment managed by specialists on our panel of providers.</p>
<b>Reimbursements</b>	Only allowed for genuine medical emergencies and shall
<b>General Exclusions</b>	<ul style="list-style-type: none"> <li>Expenses where material information is withheld or misstated.</li> <li>Infertility treatment</li> <li>Cosmetic surgery unless caused by accident</li> <li>Weight management treatments and drugs</li> <li>Participation in professional &amp; hazardous sports e.g. bungee jumping or paragliding</li> <li>Treatment other than by registered medical practitioner</li> <li>Self-referred or self-prescribed treatment</li> <li>Drugs dispensed by the treating doctor</li> <li>Nutritional supplements unless prescribed as part of medical treatment</li> <li>Alternative treatment - Chiropractors, Acupuncturist, Herbalist</li> <li>Drunkenness, drug addiction</li> <li>Expenses incurred in connection with participation in Riot, Strike and Civil commotion.</li> <li>Naval, Military or Air force operations</li> <li>Expenses recoverable under any other insurance e.g. NHIF, CPA, WIBA</li> <li>Beauty treatment in nature cure clinics or health hydro's</li> <li>Diagnostic equipment (e.g. Glucometers, BP machines)</li> <li>Experimental treatment</li> <li>Declared Pandemics, epidemics and natural disasters</li> <li>Contamination by radioactivity from nuclear fuel waste or fission</li> <li>Benefits not purchased or not indicated in the brochure</li> </ul> <p>* Refer to the policy document for details</p>





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