



OLDMUTUAL

AFYAIMARA SENIORS COVER

No one is too old to enjoy a good medical cover.
With Afyaimara Seniors, you are guaranteed a quality,
healthy life, with financial freedom.



DO GREAT THINGS EVERY DAY

General cover scope

Afyalmara Seniors cover is an enhanced insurance solution that provides health benefits for individuals between the ages of 65 years and 80 years. Once an individual is enrolled, they are covered for life.

It covers day and inpatient hospitalization, outpatient treatment, optical and dental with enhanced limits for chronic conditions & pre-existing conditions.

Below are the key enhancements offered by **Afyalmara Seniors Cover**;

- a) Lifetime cover;
 - Once you join, you can renew your cover for life.
- b) Wide geographical coverage and Hospital Network
 - Access to all of Old Mutual General Insurance Company Ltd's comprehensive network of hospitals across East Africa.
 - Overseas referral is available for conditions not covered locally at accredited overseas partners.
- c) Convenient
 - Air evacuation for cover limits above Kshs 1M
 - Road evacuation for all cover limits
 - Overseas emergency treatment cover of 60 days for limit on reimbursement for all cover limits.
- d) Affordable
 - No excess for inpatient cover
 - Instalment premium payments through IPF
 - No claim discount (NCD)
- e) Comprehensive benefits
 - Inpatient limits from Kes 500,000 to Kes 10,000,000.
 - Optional outpatient cover from Kes 50,000 to Kes 200,000.

This caters for;

- Routine outpatient services, consultations, diagnostics, drugs and dressings.
- Medical check-ups within the outpatient cover
- Covers pre-existing, chronic conditions & HIV/AIDs
- Dental & Optical benefits included as an optional stand alone cover
- Hospitalization expenses including surgeon, physician, theatre, ICU & HDU fees
- Home Nursing subject to pre-authorisation up to 90 days from discharge based on the applicable benefit sublimit.
- Diagnostics and physiotherapists fees, prescribed drugs, dressings, surgical appliances
- Covid-19 inpatient coverage.

Inpatient Limits

	Waiting Period	Option I	Option II	Option III	Option IV	Option V
Overall Limit		500,000	1,000,000	3,000,000	5,000,000	10,000,000
Bed		General Ward / Max Kes 8,000	General Ward / Max Kes 10,000	Standard Private Room / Max Kes 18,000	Standard Private Room / Max Kes 18,000	En Suite / Max Kes 26,000
Emergency Evacuation Within East Africa	No waiting period	Road Ambulance	Road Ambulance	Road & Air Ambulance	Road & Air Ambulance	Road & Air Ambulance
Accidents	No waiting period	To overall Limit	To overall Limit	To overall Limit	To overall Limit	To overall Limit
Acute Conditions	28 days illness claims/60days surgical claims	To overall Limit	To overall Limit	To overall Limit	To overall Limit	To overall Limit
Newly Diagnosed Chronic illnesses after inception of cover	28 days illness claims/60days surgical claims	350,000	700,000	2,000,000	2,500,000	3,500,000
Chronic, Pre-existing illnesses, Congenital Conditions & HIV/AIDS	1 Year	250,000	400,000	700,000	800,000	1,000,000
Organ Transplant (cost of donor or securing the organ is excluded). This is in addition to the relevant condition's benefit allocation.	1 Year	100,000	200,000	200,000	300,000	500,000
Psychiatric and Psychological illnesses	1 Year	200,000	300,000	500,000	500,000	700,000
Post Hospitalization 21 days after discharge (On Reimbursement)	Depends on the condition Sub-limit	20,000	20,000	30,000	30,000	30,000
In patient non-accident related dental surgery/ treatment	1 Year	150,000	150,000	200,000	200,000	250,000
In patient non-accident related eye treatments excluding surgery for refractive errors and laser treatment	1 Year	150,000	150,000	200,000	200,000	200,000
Accident Related Inpatient Dental and Ophthalmological treatment	No waiting period	500,000	1,000,000	3,000,000	5,000,000	5,000,000
Illness related reconstructive/ plastic surgery (excludes cosmetic, obstetrics and gynecology related)	1 Year	200,000	200,000	250,000	300,000	300,000
Non accident related maxillofacial surgery (Excluding routine dental surgery and dental fixtures)	1 year	200,000	300,000	400,000	400,000	500,000
Gynecological surgery	1 year	200,000	300,000	400,000	400,000	500,000
Cost of purchase of internal and external surgical implants, appliances, and prostheses (excluding dental fixtures)	Depending on the Condition sub-limit	300,000	300,000	400,000	400,000	500,000
Last Expense - Per Member (as a stand-alone benefit)	As per illness/ Accidents Clause	75,000	100,000	100,000	150,000	150,000
Passive War /Terrorism and Political Violence	No waiting period	300,000	500,000	700,000	1,000,000	1,000,000
Covid-19 Treatment (moderate cases)	28 days illness claims/60days surgical claims	250,000	250,000	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/60days surgical claims	500,000	1,000,000	1,000,000	1,000,000	1,000,000

Outpatient Limits

Overall Limit	100,000	150,000	200,000
<p>Dental (Stand alone) Anesthetist's fees, Hospital and Operating theatre cost, Fillings, Extraction, Root canal, Scaling/ Cleaning necessitated by a medical condition and prescribed by our appointed dentist.</p> <p>Dental Exclusions: Crowns, Caps, Bridges, Orthodontics, Dentures, Self-prescribed scaling, Replacement or repair of old dentures bridges and plates unless damage to dentures, bridges and plates becomes necessary as a result of accident.</p>	20,000	20,000	20,000
<p>Optical (Stand alone) Frames can only be replaceable once in every 2 years up to a sublimit of KES 8,000. Optical exclusions: Plano, photochromatic, antiglare lenses</p>	20,000	20,000	20,000
Annual Wellness Check-ups	5,000	10,000	10,000
Pre-existing conditions	After 1 year waiting period to the full limit		
Supplements	Covered subject to pre-authorization and medical necessity		

Co-Pays:

Hospital	Co-Pay
The Nairobi Hospital	2,000
Aga Khan University Hospital Nairobi & Kisumu	
Pandya Hospital	
The Karen Hospital	
AAR Healthcare	
MP Shah	
All Others	1,000

Premiums

Inpatient Rates

Limit per person	500,000	1,000,000	3,000,000	5,000,000	10,000,000
Per Person	116,352	132,299	178,535	206,231	229,049

Outpatient Rates

Limit per person	100,000	150,000	200,000
Per Person	94,968	101,270	107,534

Dental and Optical Rates:

Limit per person	Dental 20,000	Optical 20,000
Per Person	16,176	16,176

All Premiums shall attract a 0.45% levy and Kshs. 40 stamp duty

Rules of Selection Cover;

- One can only be eligible for the outpatient cover if they have taken the inpatient cover, it is however possible to take the inpatient cover only.
- The dental and optical benefits must be purchased together.
- The outpatient cover is limited to the amount of inpatient cover purchased and is restricted as below;

Inpatient Limit	Can Purchase Outpatient of:
500,000	100,000
1,000,000	150,000 and below
3,000,000	Any of the available options
5,000,000	Any of the available options
10,000,000	Any of the available options

General Conditions

<p>Eligibility</p>	<ul style="list-style-type: none"> Persons from age of sixty-five (65) years (age next birthday) to eighty (80) years are eligible. Existing members can continue renewing in the scheme for life subject to renewal review by Old Mutual Group. Eligible dependent includes one legal spouse only. All members will be required to submit a medical report in the prescribed manner for eligibility. The tests will be at a designated provider from the Old Mutual panel. Cover is subject to written acceptance by Old Mutual Group after review of medical report. If dependents are below 65 years, they will be covered under Afyaimara, Afyaimara County or Afyaimara Junior.
<p>NHIF</p>	<ul style="list-style-type: none"> NHIF shall apply where the principal already has an NHIF Cover. Hospital bills shall be undertaken net of NHIF where applicable and will be advised from time to time by the scheme administrator according to NHIF guidelines.
<p>Waiting Periods</p>	<ul style="list-style-type: none"> 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.
<p>Premium Payment(s)</p>	<ul style="list-style-type: none"> Upfront payment is required. For members who require instalments, we will facilitate premium financing through eligible banks.
<p>Territorial Limit</p>	<ul style="list-style-type: none"> Kenya, Uganda, Tanzania, Rwanda, and South Sudan. In case of services sought outside these regions, or where a valid provider is not found as regards emergency medical need, the insured member's claims shall be settled on reimbursement subject to reasonable and customary rates as determined by the company. Members can submit claims accessed within the first 60 days outside of the territorial scope. Claims must be submitted within 30 days of arriving in Kenya.
<p>Provider Panel</p>	<ul style="list-style-type: none"> Members shall access the Old Mutual panel of healthcare providers.
<p>Tele-medicine and drug delivery;</p>	<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>
<p>Overseas referral</p>	<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 accommodation and related costs such as taxi are excluded. Air fare shall be paid by member and reimbursed by the company, unless where the Old Mutual General Insurance has been able to procure a ticket.
<p>Administration</p>	<ul style="list-style-type: none"> Cards <ul style="list-style-type: none"> Medical Cards shall be issued to all members of the scheme.
<p>Reimbursements</p>	<ul style="list-style-type: none"> Reimbursement is not allowed except in cases of genuine medical emergency in a setting where no appointed service provider is available or an approval is sought beforehand. In case of genuine reasons for using a non-panel provider, reimbursement shall be allowed subject to Old Mutual General 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.

General Exclusions

- Expenses where material information is withheld or misstated
- Infertility treatment
- Cosmetic surgery unless caused by accident
- Weight management treatments and drugs.
- Participations 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, Acupuncturist, Herbalist
- Drunkenness, drug addiction
- 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.
- Contamination by radio activity from nuclear fuel, waste or fission
- Benefits not purchased or not indicated in the brochure.
- Maternity and maternity related complications.
- 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

****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.

Email: medicalretailretention@oldmutual.co.ke

Website: oldmutual.co.ke



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