



WHY HAVE SME HEALTH COVER?



No waiting periods

Get treated sooner by going to a private hospital



Flexibility on No. of employees

From as low as 3 employees to 100 employees



Volume Discounts

Bigger groups will enjoy discounts on their premiums



Hospital Cash

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



Personal Accident Cover

Covers loss of life and permanent disablement due to an accident



Flexibility of Cover

Various Plans to choose and combine

ABOUT THE COVER

The Health SME Solution is a Health Insurance Product designed to meet the Health Insurance needs of SME's; and caters for medical expenses incurred by the insured members and their dependants for either Inpatient or Outpatient cases. It also caters for Maternity, Dental & Optical expenses.

SPECIAL FEATURES

- 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. 200 000 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) 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

PRODUCT BENEFITS

250 000 - 3 000 000

Inpatient Expenses Related to Acute Conditions or accidents	Inpatient	Limits	250 000	300 000	500 000
Newly diagnosed chronic conditions 250 000 300 000 500 000					
Pre-existing Chronic conditions 100 000	Lodger Fees (Parent/Guardian Accommodation)		12 Years	12 Years	12 Years
100 000	Newly diagnosed chronic conditions		250 000	300 000	500 000
100 000	Pre-existing Chronic conditions		100 000	150 000	300 000
200 000 200	Congenital Conditions		100 000	100 000	100 000
200000 2000000 2000000 2000000 2000000 2000000 2000000 200000000	Bed Limit (Net of NHIF)		Ge	neral Ward: Max 8 00	0 Per Day
250 000 300	Psychiatry & Psychotherapy		200 000	200 000	200 000
S0 000			250 000	300 000	300 000
Non-accidental optical treatment and surgery Post-Hospitalisation treatment related to cause of pre-authorisation (limited to 3 weeks after discharge) First Ever Emergency Caesarean Section Ectopic Pregnancy Last Expense for death as a result of covered conditions Per Person Personal Accident – For Principal Member only. Emergency Evacuation Air Fare – Overseas Referral Day Care Surgery (under General Anaesthesia) Home Nursing(Subject to Pre-authorisation) Hospital Cash Per Admission (Payable once per admissions that last 5 or more days for up to five(5) admissions in a year) Sub-limits 15 000	External Aids on Prescription		50 000	50 000	75 000
Sub-limits Sub-limits Sub-	Non-accidental Dental treatment & surgery		50 000	50 000	50 000
Post-Hospitalisation treatment related to cause of pre-authorisation (limited to 3 weeks after discharge) First Ever Emergency Caesarean Section 120 000	Non-accidental optical treatment and surgery		50 000	50 000	50 000
Ectopic Pregnancy 125 000 125 000 125 000 125 000 125 000 125 000 125 000 126 000 127 000 127 000 128 000 128 000 129 000 129 000 129 000 120 000 12	of pre-authorisation (limited to 3 weeks after	Sub-limits	15 000	15 000	15 000
Last Expense for death as a result of covered conditions Per Person 50 000 50 000 Fersonal Accident – For Principal Member only. 500 000 Emergency Evacuation Air Fare - Overseas Referral Day Care Surgery (under General Anaesthesia) Fully Covered Fully	First Ever Emergency Caesarean Section		120 000	120 000	120 000
conditions Per Person 50 000 50 000 75 000 Personal Accident – For Principal Member only. 500 000 500 000 500 000 Emergency Evacuation Road & Air Subject to overall Limit Not Provided Day Care Surgery (under General Anaesthesia) Fully Covered Fully	Ectopic Pregnancy		125 000	150 000	250 000
Emergency Evacuation Road & Air Subject to overall Limit Air Fare - Overseas Referral Day Care Surgery (under General Anaesthesia) Fully Covered Fully			50 000	50 000	75 000
Air Fare - Overseas Referral Day Care Surgery (under General Anaesthesia) Fully Covered Fully	Personal Accident – For Principal Member only.		500 000	500 000	500 000
Day Care Surgery (under General Anaesthesia) Fully Covered Fully	Emergency Evacuation		Road	& Air Subject to overa	ıll Limit
Home Nursing(Subject to Pre-authorisation) Hospital Cash Per Admission (Payable once per admission that last 5 or more days for up to five(5) admissions in a year) Ovid-19 Inpatient Treatment	Air Fare - Overseas Referral			Not Provided	
Pre-authorisation) 90 Days	Day Care Surgery (under General Anaesthesia)		Fully Covered	Fully Covered	Fully Covered
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 12 000 Per Year			90 Days	90 Days	90 Days
Covid-19 Inpatient Treatment 250 000 300 000 500 000	per admission that last 5 or more days for up to				
	Covid-19 Inpatient Treatment		250 000	300 000	500 000

750 000	1 000 000	1 500 000	2 000 000	3 000 000
Covered To Full Limit				
12 Years				
750 000	1 000 000	1 500 000	2 000 000	3 000 000
300 000	400 000	400 000	450 000	500 000
150 000	150 000	150 000	200 000	200 000
(General Ward: Max 8 000 I	Per Day	Std Pvt(Max 1	7,000 Per Day)
200 000	250 000	300 000	500 000	600 000
300 000	500 000	500 000	700 000	1 000 000
75 000	80 000	80 000	120,000	150 000
100 000	120 000	150 000	150,000	200 000
100 000	120 000	150 000	150 000	200 000
20 000	20 000	20 000	25 000	25 000
120 000	120 000	120 000	150 000	150 000
300 000	300 000	300 000	300 000	300 000
75 000	75 000	75 000	75 000	75 000
500 000	500 000	500 000	500 000	500 000
Road & Air Subje	ect to overall Limit	Roa	d & Air Subject to overall l	_imit
Not Provided		Economy return fa	re only within Africa and I	ndia (Excluding SA)
Fully Covered				
90 Days				
4 000 Max 16 000 Per Year	4 000 Max 16 000 Per Year	4 000 Max 16 000 Per Year	5 000 Max 20 000 Per Year	5 000 Max 20 000 Per Year
750 000	1 000 000	1000000	1 000 000	1 000 000

4M – 10M Options

Inpatient	Limits	4 000 000	5 000 000	6 000 000
Inpatient Expenses Related to Acute Conditions or accidents		Covered To Full Limit	Covered To Full Limit	Covered To Full Limit
Lodger Fees (Parent/Guardian Accommodation)		12 Years	12 Years	12 Years
Newly Diagnosed Chronic conditions		4 000 000	4 000 000	4 000 000
Pre-existing Chronic conditions		500 000	500 000	500 000
Congenital Conditions		300 000	300 000	300 000
Bed Limit (Net of NHIF)		Std Pvt(Max 17,000 F	Per Day)	
Psychiatry & Psychotherapy		800 000	1 000 000	1 000 000
Hospitalisation costs due to Terrorism & Political Violence		1 500 000	2 000 000	2 000 000
External Aids on Prescription		150 000	200 000	200 000
Non-accidental Dental treatment & surgery		250 000	300 000	300 000
Non-accidental optical treatment and surgery		250 000	300 000	300 000
Post-Hospitalisation treatment related to cause of pre-authorisation (limited to 3 weeks after discharge)	Sub- limits	30 000	40 000	40 000
First Ever Emergency Caesarean Section		150 000	150 000	150 000
Ectopic Pregnancy		300 000	300 000	300 000
Last Expense for death as a result of covered conditions Per Person		100 000	100 000	100 000
Personal Accident – For Principal Member only.		500 000	500 000	500 000
Emergency Evacuation		Road & Ai	r Subject to overall Li	mit
Air Fare - Overseas Referral				
Day Care Surgery (under General Anaesthesia)		Fully Covered	Fully Covered	Fully Covered
Home Nursing (Subject to Pre-authorisation)		90 Days	91 Days	92 Days
Hospital Cash Per Admission (Payable once per admission that last 5 or more days for up to five(5) admissions in a year)		7 500 Max 30 000 Per Year	7 500 Max 30 000 Per Year	7 500 Max 30 000 Per Year
Covid-19 Inpatient Treatment		1 000 000	1 000 000	1 000 000

7 000 000	8 000 000	9 000 000	10 000 000
Covered To Full Limit	Covered To Full Limit	Covered To Full Limit	Covered To Full Limit
12 Years	12 Years	12 Years	12 Years
4 000 000	4 000 000	4,000,000	4,000,000
500 000	500 000	500,000	500,000
300 000	300 000	300,000	300,000
	Std Pvt(Max 17,000) Per Day)	
1 000 000	1 000 000	1 000 000	1 000 000
2 000 000	2 000 000	2 000 000	2 000 000
200 000	200 000	200 000	200 000
300 000	350 000	350 000	350 000
300 000	350 000	350 000	350 000
40 000	40 000	40 000	40 000
180 000	180 000	200 000	200 000
300 000	300 000	300 000	300 000
100 000	150 000	150 000	150 000
500 000	500 000	500 000	500 000
	Road & Air Subject to overall Li	mit	
Economy return f	are only within Africa and India (Excluding SA)	
Fully Covered	Fully Covered	Fully Covered	Fully Covered
93 Days	94 Days	95 Days	90 Days
7 500 Max 30 000 Per Year	7 500 Max 30 000 Per Year	7 500 Max 30 000 Per Year	7 500 Max 30 000 Per Year
1 000 000	1,000,000	1 000 000	1 000 000

OUTPATIENT OPTIONS

Outpatient Options		50 000	100 000	150 000	200 000	250 000		
Covered Services	Consultation	ns, Medications, Radiology (Net of NHIF), KEPI Vaccines						
	1500		Nairobi, Ag	ga Khan, Kare	n, MP Shah			
	1 000	AAR						
Co-payment	500	Gertrude's, Mater						
	All others							

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								
Optical Options	10 000	20 000	30 000	40 000	50 000			

Dental and Optical benefits, of equal limits, must be purchased together

MATERNITY OPTIONS

Maternity Options	50 000	75 000	100 000	150 000	200 000

Covered Services

Normal and C- Section delivery, labour/recovery ward, professional fees, pregnancy/maternity related hospitalisation, other related ailments & complications and miscarriage.

RATESKshs. 250 000 – 2 000 000

3-15 Princi	3-15 Principal Members										
IInpatient	250 000	300 000	500 000	750 000	1 000 000	1 500 000	2 000 000				
М	38 402	39 059	42 480	45 119	47 559	51 505	55 563				
M+1	53 679	54 580	61 278	65 124	68 731	77 255	85 312				
M+2	67 871	68 995	78 054	82 991	87 656	99 597	111 520				
M+3	81 339	82 674	94 031	100 013	105 692	120 362	136 331				
M+4	94 445	95 985	109 609	116 614	123 286	139 298	159 240				
M+5	107 190	108 927	124 785	132 791	140 433	157 260	181 622				
M+6	119 573	121 500	139 559	148 541	157 133	174 625	203 478				

Kshs. 3 000 000 - 10 000 000

3-15 Princip	3-15 Principal Members											
IInpatient	3 000 000	4 000 000	5 000 000	6 000 000	7 000 000	8 000 000	9 000 000	10 000 000				
М	56 439	57 593	58 472	60 050	61 629	63 208	64 786	66 365				
M+1	86 644	88 253	89 589	91 989	94 388	96 787	99 187	101 586				
M+2	113 248	115 255	116 988	120 102	123 217	126 331	129 445	132 559				
M+3	138 433	140 813	142 921	146 707	150 494	154 281	158 068	161 855				
M+4	161 683	164 405	166 855	171 258	175 660	180 063	184 465	188 868				
M+5	184 399	187 453	190 238	195 240	200 242	205 244	210 247	215 249				
M+6	206 579	209 957	213 067	218 654	224 240	229 826	235 413	240 999				

OUTPATIENT OPTIONS

Outpatient Options	50 000	100 000	150 000	200 000	250 000
М	28 350	37 139	37 706	38 207	41 108
M+1	49 292	66 903	69 664	71 778	77 889
M+2	49 534	78 455	85 625	85 126	93 694
M+3	49 734	88 507	100 562	102 369	109 024
M+4	49 884	95 091	114 429	116 858	123 823
M+5	49 974	98 198	127 297	131 347	138 323
M+6	49 999	99 757	139 234	144 996	152 272

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DENTAL OPTIONS

Dental	10 000	20 000	30 000	40 000	50 000
М	2 857	4 757	8 572	9 133	11 894
M+1	4 123	6 864	12 368	13 177	17 162
M+2	5 313	8 847	15 940	16 983	22 118
M+3	6 429	10 705	19 288	20 549	26 764
M+4	7 471	12 438	22 412	23 878	31 099
M+5	8 437	14 048	25 312	26 968	35 123
M+6	9 329	15 533	27 988	29 819	38 836

OPTICAL OPTIONS

Optical	10 000	20 000	30 000	40 000	50 000
М	4 487	9 078	13 666	18 222	22 696
M+1	6 267	12 679	19 087	25 449	31 698
M+2	7 989	16 162	24 330	32 440	40 406
M+3	8 793	17 696	26 597	35 462	44 241
M+4	9 396	18 847	28 297	37 729	47 118
M+5	9 798	19 614	29 430	39 240	49 035
M+6	9 999	19 998	29 996	39 995	49 994

MATERNITY RATES

Maternity Rates	50 000	75 000	100 000	150 000	200 000
Per Family	13 846	20 769	27 692	41 538	55 385

Discounting Based on Scheme Size

Discount Applicable							
Population (Employees)	3 - 15	16 - 30	31 - 50	Over 50			
Inpatient	0%	-5%	-10%	-15%			
Maternity	0%	-30%	-40%	-50%			
Outpatient	0%	0%	0%	0%			
Dental	0%	0%	0%	0%			
Optical	0%	0%	0%	0%			

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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 medicalretailretention@oldmutual.co.ke

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
- ii) Duly filled and signed application form by each employee
- iii) Certificate of Incorporation and KRA PIN Certificate for the group
- iv) Letter of appointment of the insurance agent or broker if any
- List of members covered and dependents (where applicable) and relevant details. All employees or members of the organisation must enrol
- vi) Proof of premium payment and the quotation. Cover will only commence

C) GENERAL CONDITIONS

- i) 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 up to the age of seventy (70 years)
- j) Product is applicable for businesses with three (3) to a hundred (100) employees
- k) 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
- Co-payment applies as per the details on the benefits schedule provided in this brochure
- m) A countrywide network of providers is accessible to members
- N) Waiting periods have been waived under the product, provided the all the employees of the organisation taking cover are enrolled
- All scheduled admissions must be pre authorised 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
- q) 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
- r) 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
- s) 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
- · 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
- · 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

Old Mutual Tower, Upper Hill Road P.O. Box 43013 - 00100, Nairobi, Kenya Call us on +254 711 065 100 Email us on medicalretailretention@oldmutual.co.ke Website: oldmutual.co.ke

