

TIBA MEDICAL - BENEFIT TABLE

This is a comprehensive medical insurance package offered to individuals and families. The cover is reliable, affordable and flexible to suit your needs.

Eligibility:

Members of the Sacco between the ages of 18 years and 64 years are eligible for cover. A member already in the scheme can have cover extended up to 80 years of age provided that he/she remains in active service and Jubilee is satisfied with his/her detailed medical report. Dependent children are eligible for cover from 0 month (a term baby of 37 weeks) of age up till the age of 18 years or to the age of 25 years if residing with their parents and enrolled full-time in a recognized post-secondary institution.

SCOPE OF COVER

Outpatient Benefit

This benefit caters for medical procedures or tests that are done in a recognized medical facility but do not require admission or stay in hospital or day care. The benefit also covers treatment of chronic, HIV/AIDS-including costs of ARVs and congenital/genetic disorders.

Inpatient benefit

This benefit caters for:

- Medical procedures and treatments that require admission of the patient in a hospital
- Bodily injury and related complications caused by an accident occurring while this policy is in force
- Sickness or disease which first manifests itself while the policy is in force. This includes all complications arising there from and all related conditions and recurrences thereof
- Day care surgeries-This is when an insured person is admitted to hospital and uses a hospital bed during the day but does not stay overnight
- Maternity i.e. natural birth, 1st ever emergency caesarian section, ante-natal, post-natal and routine immunizations. This benefit is accessible within the various sublimit, depending on the cover chosen. A waiting period of 12 months is applicable from the date of purchase of the benefit
- Pre-existing, chronic, congenital, HIV/AIDS related conditions subject to various sublimit depending on the cover chosen. Chronic conditions diagnosed within the first year of cover will be treated under the Pre-existing, chronic, congenital, HIV/AIDS.
- Cancer & all related conditions shall be covered within the inpatient. This benefit has a 9 months waiting period.

Dental benefit (Optional Benefit)

The dental benefit caters for dental consultation, teeth extractions, fillings dental X-rays prescriptions, gum treatment and is accessible as a standalone benefit with various sublimit. The benefit is subject to pre-authorization by Jubilee Insurance.

Optical benefit (Optional Benefit)

The optical benefit caters for frames and prescription lenses upon purchase of the benefit at the inception of the policy. The benefit is subject to pre-authorization by Jubilee Insurance.

Note: The outpatient, inpatient, dental and optical benefits are accessed through **the listed panel of medical service provider.**

Waiting Periods

The following waiting periods will apply to the scheme:

- 6 months for cancer and cancer related conditions.
- 12 months for maternity related conditions and 1st ever emergency cesarean section claims
- 30 days waiting period for all Outpatient benefits.

Note

- The above waiting periods will also apply to new dependents being added to the scheme
- However, there are no waiting periods for accident cases.



OUTPATIENT BENEFITS (OPTIONAL) - PER FAMILY

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Outpatient Annual limits	CAT A – Kes.50,000	CAT B to CAT E - Kes.100,000	CAT F to CAT H - Kes.150,000
An overall waiting period of one (1) month applies for all outpatient benefits			
Consultation fees (doctors on panel)	Covered	Covered	Covered
Diagnostic Laboratory and Radiology services (Preauthorization required).	Covered	Covered	Covered
Prescribed physiotherapy	Covered	Covered	Covered
Routine Immunizations (KEPI & Baby Friendly) for children upto 1.5years	Covered	Covered	Covered
Outpatient congenital and genetic disorders	Covered	Covered	Covered
Outpatient Pre-existing conditions, Chronic, & HIV/AIDS including cost of ARVs	Covered	Covered	Covered
Outpatient Cancer (6 months waiting period)	Covered	Covered	Covered
Prescribed drugs/medicines (drugs above Kes.15,000 are subject to pre-authorizations).	Covered	Covered	Covered
Pre-natal & Postnatal care up to six weeks post-delivery subject to maternity benefit	Covered	Covered	Covered



MATERNITY BENEFITS (OPTIONAL)* - PER FAMILY		
Annual Limit per Family	CAT A & CAT B - Kes.100,000	CAT C to CAT H - Kes.200,000
Maternity and related complications (12 months waiting period) Within Inpatient	covered with the limit	covered with the limit
ROUTINE DENTAL BENEFITS (OPTIONAL)* - PER PERSON		
Annual Limit per person	CAT A to CAT H - Kes.20,000	
Dental Consultations, Extractions, Fillings, Dental Xrays and Prescriptions, routine dentistry excluding dentures, braces, crowns and bridges.	Covered up to full limit limit	
ROUTINE OPTICAL BENEFITS (OPTIONAL)* - PER PERSON		
Annual Limit per person	CAT A to CAT H - Kes.20,000	
Routine optical consultations, prescriptions, optometrist consultations, eye examinations, frames, Prescribed lenses and replacement of lenses	Covered within the optical limit. Frames limit - Kshs.10,000/- every 2 years	

Exclusions:

- Self-referred or self-prescribed treatment
- Family planning, infertility & impotence & related costs
- Intentional self-injury, chronic drunkenness, suicide or attempted suicide, alcohol, drug and substance abuse, hazardous pursuits (sports and hobbies)
- Cosmetic and beauty treatment (unless necessitated by accidental injury)
- Outpatient ambulance services that do not lead to hospitalization
- Outpatient treatment unless otherwise purchased at the inception of policy
- Experimental treatment or treatment subject to medical research
- Weight management treatment and or surgery and drugs
- Diagnostic equipment (glucometers, BP Machines, etc.)
- General medical checkups and medical checkups not incidental to diagnosis of an illness or injury except for the ones specified as part of the benefits mentioned herein
- Venereal diseases
- External surgical appliances (covered on hire if related to an accident) must be on referral by a physician and a discharge from hospital (crutches and wheelchairs and prosthesis)
- Dental prosthesis, crowns, dentures, bridges and braces
- Expenses recoverable under any other insurance or source e.g. NHIF
- Nutritional supplements unless prescribed as part of medical treatment of specified conditions
- Adult vaccinations and private (non-KEPI) vaccines - for children
- Donor costs for transplant
- Optical services including eye glasses/lenses/frames and eye testing unless purchased as a standalone benefit
- Laser treatment and or surgery, transplants/grafts are excluded with or without a standalone benefit
- Costs of treatment for or related to menopause, andropause, ageing, puberty and pre-menstrual tension syndrome
- Medical expenses incurred after 6 weeks whilst the insured is outside Kenya will not be payable but a member travelling outside the country will be eligible for emergency medical benefits up to a period of six (6) weeks in any one trip. All medical expenses will be on reimbursements subject to reasonable and customary rates and the policy terms and conditions.
- Any claim where material information shall have been mis-stated or withheld at the time of application
- Chiropractors, acupuncturists or herbalists treatment
- Treatment of obesity or slimming preparation
- **Hearing tests and cost of hearing aids**
- Expenses in excess of the specified policy limits and/or sub-limits
- Non-adherence/non-compliance to medical treatment
- Naval, Military and Air force operations, War, invasion, civil war, riots or act of terrorism

Definitions:

Chronic conditions: A disease/illness or injury which has at least one of the following characteristics:

- Has no known cure
- Leads to permanent disability
- Is caused by changes to the body which cannot be reversed
- Requires one to be specially trained or rehabilitated and needs prolonged supervision, monitoring or treatment

Congenital Conditions

A genetic, physical or (bio) chemical defect, disease or malformation which may be either hereditary/familial or due to an influence during gestation up to birth which may or may not be obvious at birth whether diagnosed or not

Special Features:

Waiting periods:



- 9 months for disclosed pre-existing, chronic, congenital and HIV/AIDS and related conditions
- 9 months for cancer and related conditions
- 12 months for maternity and related conditions and 1st every emergency cesarean section
- 12 months for organ transplant
- 30 days waiting period for all Outpatient cases except accidents.