



#### Welcome to Jubilee Health

Jubilee Health Insurance Ltd is a leading Medical Insurer in East Africa, providing tailored first-class health insurance products to suit individual and corporate needs.

Our robust financial strength, extensive partnerships with service providers, and cost-effective solutions give clients access to the best healthcare services in East Africa and beyond.

With our Maisha Fiti Wellness Program, you'll have access to lifestyle management programs, loyalty rewards, and telemedicine services that allow for convenient virtual consultations and drug delivery. With Jubilee Health Insurance, you'll have the health protection and peace of mind you need.

#### Why Choose J Care Health Cover

J-Care is a comprehensive family medical insurance cover designed to provide you and your family with the highest level of protection.

The cover is affordable, with various cover plans for your selection. It comes with a wide range of inbuilt benefits offerings, such as last expense and personal accident, as well as coverage for wellness solutions, cancer, congenital, pre-existing, and chronic conditions making it the ideal way to take care of your family's health.



#### Comprehensive Coverage

- Up to 6 levels with optional benefits such as outpatient, maternity, dental, and optical cover.
- Extensive cover for pre-existing and chronic conditions
- Enhanced prestige cover of up to 10M Inpatient cover.
- Inbuilt Covid-19 cover for inpatient treatment and outpatient testing.
- Inbuilt annual general check-ups for member and spouse.
- 1st emergency CS, diagnosis and physiotherapists fees, prescribed drugs, dressings, surgical & external appliances, hearing aids & hearing test and pain management
- Air and road evacuation services
- Free last expense benefit for principal member.
- Free personal accident benefit for principal member



#### Eligibility

- Eligibility is from birth (a term baby of 38 weeks) up to 64 years of age.
- Existing members of 65 years and above are transitioned into our J-Seniors plan and covered for life without any age
  restrictions, subject to annual renewal.



#### Geographical Coverage

- Wide Geographical Coverage with extensive network of service providers
- Overseas inpatient referrals covered on credit basis under listed hospitals
- Direct access to treatment while travelling within east africa.



#### Value Additions

- Automatic enrolment to Jubilee Health Insurance Wellness Club
- Telemedicine Services
- Drug Delivery Services
- 24 hour customer support

#### INPATIENT BENEFITS - ( CORE PLAN )

### All inpatient treatment is subject to pre-authorization. All benefits are subject to overall annual benefit unless specified otherwise. Amounts shown in Kenya Shillings.

	CLASSIC	PREMIER	ADVANCED	EXECUTIVE	ROYAL	PRESTIGE	
Overall benefit limits per family per annum ( <b>KES</b> )	500,000	1,000,000	2,000,000	3,000,000	5,000,000	10,000,000	
Pre -existing and/or chronic conditions, gynaecological conditions, Hernias, Haemorrhoids, Thyroidectomy, Adenoidectomy, congenital, organ transplant, HIV/AIDS and related conditions existing and/or diagnosed at the time of joining.  (1 year waiting period)  Cancer treatment subject to	250,000	300,000	400,000	500,000	1,000,000	2,000,000	
above conditions (2 years waiting period)							
Confirmed newly diagnosed chronic conditions after 3 months of cover inception	200,000	400,000	800,000	1,200,000	2,000,000	3,000,000	
Psychiatric conditions subject to above conditions (1 year waiting period)	100,000	200,000	250,000	300,000	500,000	750,000	
Last Expense (free for principal member, optional for dependents).	50,000	50,000	75,000	100,000	100,000	100,000	
Pre maturity - for child born to an existing member who has completed 1 year waiting period on maternity benefit	50,000	100,000	150,000	200,000	250,000	500,000	
Bed Limits per day. NHIF rebate will be applied on the limits shown	G	eneral Ward B	ed	Standard Private Room up to KShs. 12,500	Standard Private Room up to KShs. 24,000	Ensuite Room up to KShs. 32,000	
Post hospitalisation treatment/ review - up to 3 weeks after discharge from hospital	up to Kes. 10,000	up to Kes. 15,000	up to Kes. 20,000	up to Kes. 25,000	up to Kes. 30,000	up to Kes. 30,000	
1st emergency cesarean (12-month waiting period) limited to principal member or spouse only) from date of purchase and subject to purchase of maternity benefit	100,000	120,000	150,000	150,000	150,000	200,000	
COVID-19 coverage			500	,000			
Lodger fees for parent accompanying sick child member	Covered for child under 10 years						
Commercial Air Evacuation out of Kenya (must be pre authorised) for inpatient treatment not available locally or not safe to undertake locally	Not ap	Not applicable Economy return fare only within Africa, Inc. Pakistan					

Personal Accident (Free for principal member, optional for dependents over 18 years)	500,000
Physicians, specialists, surgical fees including anaesthetist fees, theatre charges, HDU, CCU & ICU, diagnostic tests, physiotherapy as part of inpatient treatment	Covered
Inpatient MRI/CT Scans and PET Scans (subject to pre authorisation)	Covered
Surgical appliances/internal prosthesis	Covered
External Aids Cover- This benefit caters for external aids on prescription including wheel chair, corsets/walking frames, crutches and hearing Aids & hearing tests	100,000
Reconstructive surgery following an accident	Covered
Inpatient non accidental related dental surgery/treatment (1 year waiting period)	100,000
Inpatient dental surgery from an accident	Covered
Inpatient opthalmology surgery as a result of an accident	Covered
Inpatient non accident related eye treatment (excluding correction of refractive errors and laser treatment) (1 year waiting period)	100,000
Day case admission	Covered under relevant sub-limit
Medically necessary home nursing (subject to pre authorisation)	45 days
Take home prescribed medication after discharge from hospital	up to 30 days after discharge
Occupational and/ Speech Therapy caused by an acute episode of an eligible condition or caused by an accident. Eligible therapies will be limited to 6 months maximum, from the onset of episode within the cover period subject to preauthorization.	Covered

Pain management Within inpatient subject to pre- existing & chronic sub benefit		Covered							
Medically necessary local road ambulance leading to admission in hospital		Covered							
MATERNITY BENEFITS - (OPTIONAL)									
	CLASSIC	PREMIER	ADVANCED	EXECUTIVE	ROYAL	PRESTIGE			
Annual limits per member/ spouse	80,000	100,000	120,000	120,000	150,000	200,000			
Benefits covered under maternity limit (1 year waiting period). Excludes expenses related to the new born		maternity rela	n delivery. Lab ted hospitalisati ng etopic pregr	on, other relate	ed ailments & d				
	OUTPA	TIENT BENE	FITS - (OPTION	VAL)					
	CLASSIC	PREMIER	ADVANCED	EXECUTIVE	ROYAL	PRESTIGE			
Annual Maximum limit per person	50,000	50,000	80,000	100,000	150,000	200,000			
COVID-19 testing for symptomatic cases at designated facilities		15,000							
Consultation fees for GP (doctors on panel)			Cov	ered					
Consultation fees for Specialist on referral only (doctors on panel)		Covered							
Pathology, Xrays, MRI, CT Scan and other necessary diagnostic tests (pre authorisation required)		Covered							
Prescription drugs and dressings upto a maximum of 30 days dosage		Covered							
Pre -existing and/or chronic conditions, gynaecological conditions, Hernias, Haemorrhoids, Thyroidectomy, Adenoidectomy, Psychiatric, congenital, organ transplant, HIV/AIDS and related conditions existingand/or diagnosed at the time of joining. Subject to full disclosure at the time of joining. (1 year waiting period)	Covered								
Cancer treatment (2 years waiting period)			Cov	ered					
Confirmed newly diagnosed chronic conditions after 3 months of cover inception			Cov	ered					
KEPI/Baby Friendly Vaccinations			Cov	ered					

Physiotherapy (pre authorisation required)		Covered						
Routine Pre-natal & post- natal outpatient treatment (1 Year waiting period). Only applicable if maternity benefits have been purchased.		Covered						
Annual medical checkup applicable for main member and/spouse within outpatient		10,000						
Occupational and/ Speech Therapy caused by an acute episode of an eligible condition or caused by an accident Eligible therapies will be limited to 6 months maximum, from the onset of episode within the cover period subject to pre-authorization		Covered						
Pain management Covered within Outpatient subject to pre-existing & chronic sub benefit	Covered							
Family Planning cover limited to long-acting methods such as Intrauterine Contraceptive Device (IUCD) and Norplant implants Only, within outpatient	2,500	2,500 2,500 2,500 2,500 2,500 2,500						
	DEN'	TAL BENEFIT	S - (OPTIONAL	_) *				
	CLASSIC	PREMIER	ADVANCED	EXECUTIVE	ROYAL	PRESTIGE		
Annual Limit per person only	5,000	10,000	20,000	30,000	40,000	50,000		
Benefits covered (pre- authorisation required)	Dental Consu		ctions, Fillings, I or buried teeth			s. Removal of		
	ОРТІ	CAL BENEFIT	<b>S -</b> (OPTIONAL	L) *				
	CLASSIC	PREMIER	ADVANCED	EXECUTIVE	ROYAL	PRESTIGE		
Annual Limit per person only	5,000	10,000	20,000	30,000	40,000	30,000		
Annual Limit per person only  Benefits covered subject to pre-authorisation	•	•	son per annum					

OUTPATIENT CO-PAYMENTS							
HOSPITAL	CO-PAY AMOUNT	HOSPITAL	CO-PAY AMOUNT				
Nairobi Hospital – Main facility only		Mater Hospital, Main Hospital					
MP Shah Hospital – Parklands		Avenue Hospital, Parklands					
Karen Hospital – Karen	2,000	Mediheal Hospital- Parklands and Eldoret	1,000				
Aga Khan University Hospital - Parklands only	2,000	Eldoret Hospital	1,000				
Gertrude's Children's Hospital -Muthaiga		St Luke's Orthopaedic Hospital- Eldoret					
AAR Hospital, Kiambu Road		Mombasa Hospital					
		Premier Hospital, Nyali					

**INPATIENT** 

# J CARE MEDICAL INSURANCE RATES

	CLASSIC	PREMIER	ADVANCED	EXECUTIVE	ROYAL	PRESTIGE
Limit per family (KES)	500,000	1,000,000	2,000,000	3,000,000	5,000,000	10,000,000
Principal 18 - 30 years	21,316	25,621	30,215	36,928	48,028	55,033
Spouse	15,673	21,513	25,380	32,004	42,539	48, <i>7</i> 44
Child Birth -17 years	10,282	13,899	16,920	21,295	27,444	31,448
Principal 31 - 40 years	22,569	26,709	32,027	40,375	50,773	58,1 <i>7</i> 8
Spouse	18,808	22,480	27,192	35,082	43,911	50,316
Child Birth -17 years	10,282	13,899	16,920	21,295	27,444	31,448
Principal 41 - 50 years	23,215	32,027	39,883	46,776	62,313	71,401
Spouse	19,453	25,984	32,632	41,852	52,275	59,900
Child Birth -17 years	10,282	13,899	16,920	21,295	27,444	31,448
Principal 51 - 59 years	30,989	39,266	48,186	61,263	78,793	90,28 <i>7</i>
Spouse	26,030	32,957	40,463	51,404	66,196	<i>7</i> 5,852
Child Birth -17 years	10,282	13,899	16,920	21,295	27,444	31,448
Principal 60 - 64 years	38,737	49,083	60,232	67,391	86,672	99,315
Spouse	32,538	41,197	50,579	56,544	<i>7</i> 2,815	83,43 <i>7</i>
Child Birth -17 years	10,282	13,899	16,920	21,295	27,444	31,448
		OUTPATIENT -	- ( OPTIONAL )			
	CLASSIC	PREMIER	ADVANCED	EXECUTIVE	ROYAL	PRESTIGE
Limit per person per annum	50,000	50,000	80,000	100,000	150,000	200,000
Premium per person (40 years and below)	26,555	26,555	31,982	40,354	50,1 <i>7</i> 5	55,168
Premium per person (41-50 years)	30,315	30,315	39, <i>7</i> 11	49,158	55,750	60,63 <i>7</i>
Premium per person (51-59 Years)	35,537	35,53 <i>7</i>	46,641	54,294	61,006	65, <i>7</i> 92
Premium per person (60-64 Years)	40,537	40,537	55,302	63,832	<i>77,7</i> 31	82,197

	Maternity – ( optional )								
	CLASSIC	PREMIER	ADVANCED	EXECUTIVE	ROYAL	PRESTIGE			
Limit per family	80,000	100,000	120,000	120,000	150,000	200,000			
Premium per principal/ spouse per annum	30,129	32,356	34,818	34,818	41,618	50,633			
		DENTAL - (	OPTIONAL)						
Limit per Person	5,000	10,000	20,000	30,000	40,000	50,000			
Premium per person per annum	2,696	3,51 <i>7</i>	<i>7</i> ,151	10,668	17,819	21,483			
		OPTICAL -	(OPTIONAL)						
Limit per Person	5,000	10,000	20,000	30,000	40,000	50,000			
Premium per person per annum	2,696	3,51 <i>7</i>	<i>7</i> ,151	10,668	17,819	21,483			
		LAST EXPENSE	- ( OPTIONAL	)					
Limit per Person	50,000	50,000	75,000	100,000	100,000	100,000			
Premium per person per annum	1,007	1,007	1,567	2,014	2,014	2,014			
	PER	SONAL ACCID	ENT - ( OPTION	VAL)					
Limit per Person	500,000	500,000	500,000	500,000	500,000	500,000			
Premium per Adult (18 Years & Above)	586	586	586	586	586	586			

## J CARE JUNIOR MEDICAL INSURANCE RATES

	FOR CH	ILDREN 0-17 Y	FOR CHILDREN 0-17 YEARS AS MAIN MEMBER							
	INPATIENT									
	CLASSIC	PREMIER	ADVANCED	EXECUTIVE	ROYAL	PRESTIGE				
Limit per Person (KES)	500,000	1,000,000	2,000,000	3,000,000	5,000,000	10,000,000				
Premium per person per annum	21,316	25,621	30,215	36,928	48,028	55,033				
OUTPATIENT - ( OPTIONAL )										
Limit per Person	50,000	50,000	80,000	100,000	150,000	200,000				
Premium per person per annum	26,555	26,555	31,982	40,354	50,175	55,168				
		DENTAL - (	OPTIONAL)							
Limit per Person	5,000	10,000	20,000	30,000	40,000	50,000				
Premium per person per annum	2,696	3,517	<i>7</i> ,151	10,668	17,819	21,483				
OPTICAL – ( OPTIONAL )										
Limit per Person	5,000	10,000	20,000	30,000	40,000	50,000				
Premium per person per annum	2,696	3,517	<i>7</i> ,151	10,668	17,819	21,483				

ENHANCED COVID-19 COVER- OPTIONAL								
DESCRIPTION/OPTIONS	OPTION 1	OPTION 2	OPTION 3	OPTION 4				
Overall annual limit	500,000 1,000,000 1,500,000 2,000							
Covid-19 Admissions and Mild symptomatic cases	Covered	Covered	Covered	Covered				
Confirmed asymptomatic outpatient cases	50,000 (within overall limit)							
Premium per person	6,141	9,490	10,886	12,840				

Shared outpatient per family- ( Optional )									
PLAN		ROYAL							
LIMIT PER FAMILY (KES)		150,000							
Family Size	M	M+1	M+2	M+3	M+4				
Below 40 years	50,1 <i>7</i> 5	94,615	123,286						
41 - 50 years	55,750	105,129	136,986		-				
51 - 59 years	61,006	115,040	149,901						
60 -64 years	77,731	146,578							

SHARED OUTPATIENT PER FAMILY- ( OPTIONAL )									
PLAN		PRESTIGE							
LIMIT PER FAMILY (KES)		200,000							
Family Size	М	M+1	M+2	M+3	M+4				
Below 40 years	55,168	104,031	135,555	167,079	198,603				
41 - 50 years	60,637	114,343	148,993	183,642					
51 - 59 years	65,792	124,065	161,661	199,256					
60 -64 years	82,197	155,000							

Premium exclusive of 0.45% (Training Levy & Policyholders funds) and Stamp Duty (Kshs 40.00). Inpatient is a core benefit. Dental and Optical options are available only with Outpatient plans.

#### **General Conditions**

- General waiting period of 30 days for new entrants on illness claims. No waiting period for accident-related treatment.
- 2. MRI, CT, PET scan on preauthorization.
- 3. Cancer treatment will be subject to 2 years waiting period.
- 4. Pre-existing, chronic, psychiatric, congenital, organ transplant, HIV/Aids and related treatment, maternity and related complications, inpatient non- accidental related ophthalmology, dental surgery, fibroids and all gynecological illness and treatment, adenoidectomy, hemorrhoidectomy, hernias, tonsillectomy, and thyroidectomy procedures shall be subject to 1 year waiting period.
- Pregnancy, childbirth, maternity benefits, maternity related complications, antenatal or post-natal care, prematurity, caesarean operation where purchased is subject to 1 year waiting period.
- 6. Premium will be based on the age of the oldest applicant.
- 7. Eligible for the main member and his/her dependents from birth (provided it is a term baby of 38 weeks) to 64 years. Existing members 65 years and above are smoothly transitioned into our J Seniors package and covered for life without any age restrictions, subject to annual renewal and underwriting review. Dependent children over 18 years are covered up to 25 years old with proof of schooling.
- 8. Minor children below the age of 18 years can come in as principal members under the J Care Junior plan and subject to applicable rates.
- New applicants aged 50 years and above will be required to undergo a medical examination at specific providers, before membership and eligibility of cover can be confirmed. Please note that this will be at applicant's cost.
- 10. All applications including Continuous transfer applications are subject to medical underwriting and acceptance.
- Cover must be confirmed in writing and premiums paid in advance and in full to Jubilee Health Insurance for the benefits to be effective.
- 12. Co-payments applicable in select hospital facilities as provided
- 13. All scheduled admissions must be preauthorized at least 48 hours prior to admission.
- 14. For emergency admissions, the hospital will contact Jubilee Health Insurance within 48 hours of admission.
- 15. All inpatient hospital bills shall be paid net of all National Hospital Insurance Fund (NHIF) rebates.
- 16. Medical cards must be run at the accredited panel of providers and identification provided for access to service. Each member will also be required to complete and sign a claim form. Members must confirm access to correct services by signing the provider's invoice.
- 17. A member travelling outside the country will be eligible for accident and 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. Accommodation and travel costs are not covered.
- 18. Reimbursement claims only acceptable once the outpatient credit limit has been reached. Eligible claims shall be paid up to 100% within the panel and 100% outside the panel subject to reasonable and customary rates.

#### **Exclusions**

#### These are some of the exclusions. For more details please refer to the policy document

- Cosmetic or plastic surgery unless necessitated by an accidental injury that occurs while the insured is covered under this contract:
- 2. Riding or driving in any kind of race
- 3. Beauty treatment or massage
- 4. Naval, military and air force operations
- 5. Stays at sanatoria, old age homes, places of rest etc.
- 6. Vaccinations except for KEPI & baby-friendly vaccinations.
- 7. Transportation other than a licensed ambulance, as provided for under the in-patient coverage of this contract
- 8. Nutritional food supplements or replacements.
- Injury or illness resulting from insurrection or war, civil commotion or an act of terrorism, whether declared or undeclared
- 10. Injury as a result of participating in riot, strike
- 11. Alternative treatment such as herbal treatment, acupuncture treatment, chiropractors etc.
- 12. Expenses resulting from the insured participating in extreme/hazardous sports and activities
- 13. Dental treatment including teeth extractions, filings, teeth scaling, etc. unless the dental cover has been purchased.
- 14. Optical treatment relating to correction of eyesight e.g. eye glasses, contact lenses, laser eye treatment unless the optical cover has been purchased.
- 15. Intentional self-injury while sane or insane, suicide or attempted suicide, treatment of acute or chronic alcoholism and drug addiction
- 16. Expenses recoverable under any other .insurance e.g. NHIF, GPA, etc.
- 7. Any injury, illness or disease specified as exclusion and complications caused by a condition that is excluded.
- 18. Services primarily for weight reduction or treatment of obesity and slimming preparations or any care which involves weight reduction as a main method of treatment.
- 19. Peri-Menopause, Menopause, Andro-pause, hormone replacement therapy, age and puberty related treatment.
- 20. Epidemics, pandemics or unknown diseases except for COVID-19 up to the indicated limits above.
- 21. Treatment required as a result of non-compliance, failure or refusal to comply with medical advice
- 22. Fertility treatment e.g. costs of treatment related to infertility and impotence.

#### What you get once you purchase your J Care cover

#### **A comprehensive Welcome Pack**

Once the policy commences, you will receive a membership pack within 30 days which will include:



#### Membership Card

Proof of identity and cover when you need treatment



#### **Policy Document**

Terms and conditions of your policy.



#### **Welcome Letter**

Confirming the plan and benefits purchased.



#### **Provider Panel**

List of Hospitals, Physicians, Clinics and other Healthcare Providers.

When you receive your pack, ensure that you check the details of your policy on your welcome letter and keep your membership card in a safe place. You will need it when you require treatment, so the provider knows who you are (it's not used for payment). It also has all the emergency contact numbers you will need.

#### How to apply for J Care cover - Get a quote today

- Review and choose an Inpatient cover limit
- Add Optional Benefits
- 3. Fill in and sign the member application form and attach supporting documents.
- 4. Jubilee Health will revert within 3 working days of receipt of your application.
- Pay for the cover.
- 6. Receive your welcome pack.

\*The policy will be effective when the premium is paid in full and a confirmation is issued.

\*Waiting periods where applicable will start from the date the policy is effective or the date the benefit is purchased, whichever is later.

#### Supporting documents required in addition to a fully completed and signed application form are:

- National ID and KRA pin certificate of all adult applicants, dependents and beneficiaries.
- Birth Certificate/ birth notification (duly stamped by issuing facility) copies of all child dependents (under 18 years).

#### To find out more about our other products you can:



Give us a call on our 24hr Call Center 0709949000



Speak to your Jubilee
Health Sales Agent
or intermediary
today.



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Email Us at
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visit our website www.
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At Jubilee Health Insurance, we prioritize your data protection and privacy. We adhere to top industry standards to secure and maintain the confidentiality of your personal information throughout your healthcare journey. For more details on how we safeguard your data, refer to our comprehensive privacy notice at <a href="www.jubileeinsurance.com/ke/privacy/">www.jubileeinsurance.com/ke/privacy/</a>. For any privacy inquiries or concerns, email us at <a href="maintain-privacy@jubileekenya.com">privacy@jubileekenya.com</a>.



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