

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.





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Why Choose

J Care Junior Health Cover

Children are the most important little people in our lives, and they deserve all the love and care to help them grow into healthy adults. At Jubilee Health, we recognize this, and that's why we have come up with a stand-alone cover for children aged 0 – 17 years with great benefits that will cater to their health needs.

J-Care-Junior is the perfect medical cover for parents who want to ensure their children are always taken care of through comprehensive healthcare coverage. At Jubilee Health, we recognize this and that's why we have come up with a stand-alone cover for children aged 0 – 17 years with great benefits that will cater to their health needs.

J-Care-Junior also covers immunizations, so you can keep your little ones healthy and safe!

Invest in your children's health with J-Care-Junior, the ultimate medical cover.





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J Care Junior Health Cover Key Features

- Annual child check-ups
- Inpatient cover
- Outpatient cover
- Immunization
- Optional dental cover and optical cover
- 24/7 Telemedicine Consultations
- Countrywide provider network





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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 Shilling

| | CLASSIC | PREMIER | ADVANCED | EXECUTIVE | ROYAL | PRESTIGE |
|--|---------|-----------|-----------|-----------|-----------|------------|
| Overall benefit limits per family per annum | 500,000 | 1,000,000 | 2,000,000 | 3,000,000 | 5,000,000 | 10,000,000 |
| COVID- 19 Coverage | | 1 | 500 | ,000 | <u>.</u> | <u></u> |
| 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) | 250,000 | 250,000 | 250,000 | 250,000 | 250,000 | 250,000 |
| Cancer treatment subject to above conditions (2 years waiting period) | 250,000 | 300,000 | 400,000 | 500,000 | 1,000,000 | 2,000,000 |
| Confirmed newly diagnosed chronic conditions after 3 months of cover inception | 250000 | 500,000 | 1,000,000 | 1,500,000 | 2,500,000 | 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 |



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| | CLASSIC PREMIER ADVANCED | EXECUTIVE | ROYAL | PRESTIGE | |
|--|----------------------------------|--|--|--|--|
| Bed Limits per day. NHIF rebate will be applied on the limits shown | General Ward Bed | Standard Private Room up to KShs. 12,500 | Standard Private Room up to KShs. 18,000 | Standard Private Room up to KShs. 22,500 | |
| Lodger fees for parent accompanying sick child member | Covered for child under 10 years | | | | |
| 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 | Cov | vered | | | |
| 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 | | | | |



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| | CLASSIC | PREMIER | ADVANCED | EXECUTIVE | ROYAL | PRESTIGE | | |
|--|----------------------|----------------------------------|----------------------|---------------------|----------------------|----------------------|--|--|
| Inpatient dental surgery from an accident | | | Cov | vered | | | | |
| Inpatient opthalmology surgery as a result of an accident | | | Cov | vered | | | | |
| 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 | | | | | | | |
| 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 | | |
| 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 | | | Cov | Covered | | | | |



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| | CLASSIC | PREMIER | ADVANCED | EXECUTIVE | ROYAL | PRESTIGE | |
|--|----------------|-----------------|------------------|-------------------------|--------------------------|-------------|--|
| OTHER BENEFITS INCLUDED WITHIN INPATIEN | IT COVER | | • | | • | | |
| All benefits are subject to overall annual benefit unless | specified othe | rwise. Benefits | /treatment subje | ect to pre autho | risation | • | |
| Medically necessary local road ambulance leading to admission in hospital | | Covered | | | | | |
| Commercial Air Evacuation out of Kenya (must be pre authorised) for inpatient treatment not available locally or not safe to undertake locally | Not ap | plicable | Economy | return fare only Pak | v within Africa istan | , India and | |
| OUT PATIENT BENEFITS (OPTIONAL) | | • | • | | • | • | |
| Annual Maximum limit per person | 50,000 | 50,000 | 80,000 | 100,000 | 1 <i>5</i> 0,000 | 200,000 | |
| COVID-19 testing for symptomatic cases at designated facilities | 15,000 | 15,000 | 15,000 | 15,000 | 15,000 | 15,000 | |
| Consultation fees for GP (doctors on panel) | | | Cov | vered | | | |
| Consultation fees for Specialist on referral only (doctors on panel) | | | Cov | vered | | | |
| 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 | | | Cov | vered | | | |



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| | CLASSIC | PREMIER | ADVANCED | EXECUTIVE | ROYAL | PRESTIGE |
|---|---------|---------|----------|-----------|--------|----------|
| 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) | | | Cov | rered | | |
| Physiotherapy (pre authorisation required) | | | Cov | ered | | |
| 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 | | | | | |
| ROUTINE DENTAL BENEFITS (OPTIONAL) | | | | • | | |
| Annual Limit per person only | 5,000 | 10,000 | 20,000 | 30,000 | 40,000 | 50,000 |



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| | CLASSIC | PREMIER | ADVANCED | EXECUTIVE | ROYAL | PRESTIGE |
|---|--------------|-----------------------------|---|------------------------------------|---------------------------------|----------------|
| Benefits covered (pre-authorisation required) | Dental Cons | ultations, Extr Impacted | actions,Fillings,I d or buried teeth | Dental X-rays a , and root cand | nd Prescriptior Il treatment | ns, Removal of |
| ROUTINE OPTICAL BENEFITS (OPTIONAL) | | | | | | |
| Annual Limit per person only | 5,000 | 10,000 | 20,000 | 30,000 | 40,000 | 50,000 |
| Benefits covered subject to pre-authorisation | 1 | eye test per p | erson per annur | m. Frames and _I | orescription le | nses |
| Frames limit (1 every 2 years) | Up to full o | optical limit | | Kes. 10,000 | /= per frame | • |

ENHANCED COVID-19 COVER- OPTIONAL

| DESCRIRPTION/OPTIONS | OPTION 1 | OPTION 2 | OPTION 3 | OPTION 4 |
|--|----------|---------------|-------------------|-----------|
| Overall annual limit | 500,000 | 1.000,000 | 1,500,000 | 2,000,000 |
| Covid-19 Admissions and Mild symptomatic cases | Covered | Covered | Covered | Covered |
| Confirmed asymptomatic outpatient cases | | 500,000 (with | in overall limit) | |
| Premium per person | 5,500 | 8,500 | 9,750 | 11,500 |



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VALUE ADDITIONS

- Automatic enrolment to Jubilee Health Insurance Wellness Club
- Telemedicine Services
- **Drug Delivery Services**

*This is only a summary of the benefits for more details refer to the policy document *Dental and Optical options are available only with Outpatient plans

*A number of benefits above require pre authorisation

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General Conditions

- 1. 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.
- 5. Premium will be based on the age of the applicant.
- 6. Eligible for the main member and his/her dependents from birth (provided it is a term baby of 38 weeks) to 17 years.
- 7. All applications including Continuous transfer applications are subject to medical underwriting and acceptance.
- 8. Cover must be confirmed in writing and premiums paid in advance and in full to Jubilee Health Insurance for the benefits to be effective.
- 9. Co-payments of Kes. 2,000/- will be applicable for all outpatient visits at Nairobi Hospital and M P Shah Hospital and their satellite clinics unless the Co-payment opt-out option has been purchased.
- 10. All scheduled admissions must be preauthorized at least 48 hours prior to admission.
- 11. For emergency admissions, the hospital will contact Jubilee Health Insurance within 48 hours of admission.
- 12. All inpatient hospital bills shall be paid net of all National Hospital Insurance Fund (NHIF) rebates.
- 13. 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.
- 14. 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



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Exclusions

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

- 1. Peri-Menopause Menopause, andropause, hormone replacement therapy, age, and puberty related treatment.
- 2. Genetic disorders, genetic testing and related conditions.
- Cosmetic or plastic surgery unless necessitated by an accidental injury that occurs while the insured is covered under this contract.
- 4. Beauty treatment or massage, stays in sanatoria, old age homes, places of rest etc.
- 5. Transportation other than a licensed ambulance, as provided for under the inpatient coverage of this contract.
- 6. Nutritional food supplements or replacements and vitamins whether prescribed by a physician or not.
- 7. Navel, Military or air force operations, injury or illness resulting from insurrection, war, civil commotion or an act of terrorism, whether declared or undeclared or as a result of participation in riot and/or strikes.
- 8. Alternative treatment such as herbal, acupuncture treatment, chiropractors etc.
- 9. Expenses resulting from the insured participating in extreme/hazardous sports and activities and/or riding or driving in any kind of race.
- 10. Intentional self-injury while sane or insane, suicide or attempted suicide, treatment of acute or chronic alcoholism and drug addiction.
- 11. Expenses recoverable under any other insurance such as NHIF, Workmen's Compensation, Personal Accident among others.
- 12. Treatment required because of non-compliance, failure or refusal to comply with medical advice.
- 13. Fertility treatment e.g. costs of treatment related to infertility and impotence, any injury, illness or disease specified as an exclusion and complications caused by a condition that is excluded.
- 14. Services primarily for weight reduction or treatment of obesity and slimming operations or any care which involves weight reduction as a main method of treatment.
- 15. Epidemics, pandemics, or unknown diseases except for COVID-19 up to the indicated limits.
- 16. Treatment for consumption of alcohol, drugs, intoxication, dependency on or abuse of alcohol, drugs or any other substance abuse, complications, injury or illness arising directly or indirectly thereof.



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What you get once you purchase your J Care Junior 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 Junior 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.
- 5. Pay for the cover.
- Receive your welcome pack.



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*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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