



Jubilee
HEALTH INSURANCE

J Senior

HEALTH COVER FOR SENIOR CITIZENS

EFFECTIVE 1ST DECEMBER 2023

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 Senior Health Cover

J Senior is the ultimate medical insurance solution for senior citizens designed specifically for individuals above 65 years. This cover is designed to ensure access to the best healthcare when you need it the most.

The cover is offered through 5 simplified plans, allowing you to choose the most appropriate coverage for you, your spouse, and your family.

With J Senior, you can rest easy knowing that you are protected against unexpected medical expenses; this policy covers everything from doctor visits to hospital stays.

Don't let age hold you back from living life to the fullest.

Get J Senior today and enjoy peace of mind in your golden years.



Comprehensive Coverage

- Cover newly diagnosed chronic conditions under inpatient and outpatient.
- Extensive cover for pre-existing, chronic conditions, Psychiatric, congenital cancer treatment, and related conditions.
- Covers hospice care, diagnostics and physiotherapists fees, prescribed drugs, dressings, surgical & external appliances, Hearing aids & Hearing test, and pain management.
- Cover for the terminally ill.
- Drug delivery for members with chronic ailments.



Eligibility

- Eligibility is from 65 years to a maximum entry of 79 years extended for life, subject to annual renewal terms.



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.**

	COPPER	BRONZE	SILVER	GOLD	DIAMOND
Overall benefit limits in KES per annum	500,000	1,000,000	3,000,000	5,000,000	10,000,000
Pre-existing, and/or Chronic, Congenital Conditions, Gynaecological Conditions, Hernias, Haemorrhoids, Adenoidectomy, HIV/AIDS and related conditions, thyroidectomy existing at the time of joining. Subject to full disclosure at the time of joining. (1 year waiting period)	200,000	300,000	600,000	1,000,000	1,500,000
Cancer treatment (2 years waiting period)	200,000	300,000	600,000	1,000,000	1,500,000
Organ Transplant for the insured (1 year waiting period)	200,000	300,000	600,000	1,000,000	1,500,000
Knee and hip replacement (1 year waiting period)	200,000	300,000	600,000	1,000,000	1,500,000
Confirmed newly diagnosed chronic conditions after 3 months of cover inception	200,000	400,000	1,200,000	2,000,000	3,000,000
Covid-19 hospitalization benefit	500,000	500,000	500,000	500,000	500,000
Psychiatric conditions (1 year waiting period)	Covered	Covered	Covered	Covered	Covered
Bed limits per day NHIF applicable on the limits shown	General Ward	General Ward	Standard private room up to 12,500	Standard private room up to 24,000	Standard private room up to 32,000
Physiotherapy as part of inpatient treatment	Covered				
Physicians, specialists, surgical fees including anaesthetist fees, theatre charges, HDU, CCU & ICU, Diagnostic Tests	Covered				
Inpatient MRI/CT Scans and PET Scans (pre- authorisation required)	Covered				
Surgical appliances/internal prosthesis	Covered				
Reconstructive surgery following an accident	Covered				
Inpatient non accident related dental surgery/ treatment (1 year waiting period)	100,000	100,000	100,000	100,000	150,000
Inpatient dental surgery from an accident	Covered under applicable benefit				
Inpatient ophthalmological surgery as a result of an accident					
Inpatient non accident related eye treatment (excluding correction of refractive errors and laser treatment) (1 year waiting period)	100,000	100,000	100,000	100,000	150,000
Day case admission	Covered under applicable sub-limit				
Medically necessary home nursing on physicians recommendation (subject to pre authorisation) after discharge from hospital	30 days	30 days	30 days	30 days	30 days
Post hospitalisation treatment within 60 days of discharge from hospital	up to 20,000	up to 20,000	up to 30,000	up to 50,000	up to 50,000
Prescription drugs and dressings upon discharge - maximum of 30 days supply	Covered				

Hospice care for terminally ill	100,000	100,000	200,000	300,000	300,000
Medically necessary local road ambulance leading to hospitalisation	Covered				
Commercial Air Evacuation out of Kenya (must be pre authorised) for inpatient treatment not available locally or not safe to undertake locally	Not covered		Economy return fare to India		
Personal accident (free cover principle member, optional for dependants over 18)	500,000	500,000	500,000	500,000	500,000
Last expense per person (free cover principle member, optional for dependants)	50,000	50,000	75,000	100,000	100,000
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 inpatient subject to pre-existing & chronic sub benefit	Covered				
OUTPATIENT BENEFITS - (OPTIONAL)					
Annual limits per person (KES)	100,000	100,000	150,000	200,000	200,000
COVID-19 testing for symptomatic cases at designated facilities	15,000	15,000	15,000	15,000	15,000
Consultation fees (doctors on panel)	Covered				
Pathology, Xrays, MRI, CT Scan and other necessary diagnostic tests (*1)	Covered				
Prescription drugs and dressings up to a maximum of 30 days dosage	Covered				
Outpatient medical appliances/equipment (crutches, non motor wheelchair, oxygen purchase or hire) after hospitalisation/surgery and on doctors recommendation	25,000	25,000	35,000	50,000	50,000
Hearing aids 1 every 3 years (1 year waiting period)	50,000	50,000	75,000	100,000	100,000
Pre -existing, and/or Chronic, Congenital Conditions, Gynaecological Conditions, Hernias, Haemorrhoids, Adenoidectomy, HIV/ AIDS and related conditions, thyroidectomy existing at the time of joining. Subject to full disclosure at the time of joining. (1 year waiting period)	Covered				
Pain management	Covered				
Cancer treatment (2 years waiting period)	Covered				
Psychiatric treatment (1 year waiting period)	Covered				
Physiotherapy/occupational therapy (pre authorisation required)	Covered				
Confirmed newly diagnosed chronic conditions after 3 months of cover inception	Covered				

One annual routine check	Annually up to a maximum of 10,000				
Preventative vaccinations - Pneumonia, Flu vaccines	Annually up to a maximum of 5,000				
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				
Prescription medicine delivery program	Included				
DENTAL BENEFITS - (OPTIONAL)					
Annual Limit per person (Benefits covered subject to pre-authorization)	30,000	30,000	40,000	50,000	50,000
	Dental consultations, Extractions, fillings, dental x-rays, dentures and prescriptions				
OPTICAL BENEFITS - (OPTIONAL)					
Annual Limit per person (KES)	30,000	30,000	40,000	50,000	50,000
Spectacle frames and prescription lenses	10,000	10,000	12,500	15,000	15,000
First prescription must be from an ophthalmologist (Benefits covered subject to pre-authorization)	1 eye test annually by an ophthalmologist. Frames and prescription lenses every 2 years				

OUTPATIENT CO-PAYMENTS			
HOSPITAL	CO-PAY AMOUNT	HOSPITAL	CO-PAY AMOUNT
Nairobi Hospital – Main facility only	2,000	Mater Hospital, Main Hospital	1,000
MP Shah Hospital – Parklands		Avenue Hospital, Parklands	
Karen Hospital – Karen		Mediheal Hospital- Parklands and Eldoret	
Aga Khan University Hospital - Parklands only		Eldoret Hospital	
Gertrude's Children's Hospital -Muthaiga		St Luke's Orthopaedic Hospital- Eldoret	
AAR Hospital, Kiambu Road		Mombasa Hospital Premier Hospital, Nyali	
* No Outpatient Co- Payment in all other hospitals.			

- * All inpatient treatment is subject to pre-authorization
- * All benefits are subject to overall annual benefit unless specified otherwise
- * This is only a summary of the benefits, for more details refer to the policy document

J SENIOR

HEALTH INSURANCE RATES

INPATIENT – (CORE PLAN)					
	COPPER	BRONZE	SILVER	GOLD	DIAMOND
Limit per family per annum (KES)	500,000	1,000,000	3,000,000	5,000,000	10,000,000
Principal (65-69 years)	57,952	81,063	121,067	139,806	182,754
Spouse	49,781	68,199	101,653	117,426	156,987
Child (1 month - 17yrs)	9,638	13,482	20,281	23,447	30,393
Principal (70-74 years)	68,819	96,264	143,766	166,019	217,020
Spouse	59,115	82,691	123,254	142,379	186,421
Child (1 month - 17yrs)	9,638	13,482	20,281	23,447	30,393
Principal (75-79 years)	72,441	101,330	151,333	174,757	228,443
Spouse	62,227	85,248	127,066	146,783	196,234
Child (1 month - 17yrs)	9,638	13,482	20,281	23,447	30,393
OUTPATIENT – (OPTIONAL)					
Limit per person per annum (KES)	100,000	100,000	150,000	200,000	200,000
Premium per person (65 - 69 years)	60,080	60,080	69,771	80,971	80,971
Premium per person (70 - 74 years)	66,089	66,089	76,749	89,068	89,068
Premium per person (75 - 79 years)	76,662	76,662	88,833	102,578	102,578
Child (1 month - 17yrs)	28,136	28,136	39,805	43,309	43,309
DENTAL – (OPTIONAL)					
Limit per person per annum (KES)	30,000	30,000	40,000	50,000	50,000
Premium per person per annum	14,068	14,068	23,212	24,619	24,619
OPTICAL – (OPTIONAL)					
Limit per person per annum (KES)	30,000	30,000	40,000	50,000	50,000
Premium per person per annum	14,068	14,068	23,212	24,619	24,619
LAST EXPENSE – (OPTIONAL)					
Limit per person per annum (KES)	50,000	50,000	75,000	100,000	100,000
Premium per person (65 - 69 years)	1,466	1,466	2,931	4,397	4,397
Premium per person (70 - 74 years)	2,638	2,638	5,275	7,914	7,914
Premium per person (75 - 79 years)	4,924	4,924	9,789	14,654	14,654
PERSONAL ACCIDENT – (OPTIONAL)					
	COPPER	BRONZE	SILVER	GOLD	DIAMOND
Limit per person per annum (KES)	500,000	500,000	500,000	500,000	500,000
Premium per adult (18 years & above)	586	586	586	586	586
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	2,000,000	
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	

**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.**

Premium Payment

Payment must be made directly to Jubilee Health Insurance by the following means only:

- Cheque made out to Jubilee Health Insurance Ltd
- MPESA payment to Jubilee Health Insurance through Paybill Number **7195247**
- Direct deposit of the premium to the Jubilee Health Insurance bank account

Ensure that you get an official Jubilee Health Insurance receipt for all payments made as above. Jubilee Health Insurance shall not be liable for any premiums paid to other parties and not received by us.

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. 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.
9. 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.
11. 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

1. 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.
9. 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.
17. 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 Senior 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



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.

Welcome to the Seniors Wellness Club

As a senior citizen, you have unique healthcare needs, the main one being the need for healthy living to enhance quality of life, prolong life and prevent healthcare issues. The Jubilee Health Insurance Senior Plan is designed with an all-round wellness seniors' program that includes the following components:

Senior Wellness Club

- Lifestyle Management: Members receive support through lifestyle management facilities, tools and programs.
- Self-monitoring: Facilitation of self-monitoring devices
- e.g. glucometers and blood pressure machines at prices discounted by manufacturer for enhanced self-monitoring
- Loyalty Program with partners in the health eco-system to enable J Senior members access services and goods at discounts e.g. gyms, grocery shops, sports club memberships.
- Prevention Health Check-ups: Podiatrists, Dental, Optical, Access to Chiropractors, Nutritionists, Supplements on referral by a doctor etc.

Lifestyle Management Program

- Standardized Care Guidelines: With the support of key healthcare partners.
- Medication Management Therapy: To improve adherence to medication and lower the incidence of complications.
- Subsidized medication costs.
- Advocacy groups and group health talk sessions: Periodic health talks on key issues and disease prevention and lifestyle management.
- Delivery of prescribed medications to your office/home.

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 www.jubileeinsurance.com/ke/privacy/. For any privacy inquiries or concerns, email us at privacy@jubileekenya.com.

Jubilee

HEALTH INSURANCE

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Jubilee Health Insurance is Regulated by Insurance Regulatory Authority (IRA).