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# RETAIL MEDICAL POLICY



## J CARE POLICY

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**The Jubilee Insurance Company of Kenya Limited**  
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In witness whereof the undersigned has hereunto set his hand  
at NAIROBI.

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**Authorised Officer**

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**Date**

Whereas the Insured named in the Policy Data Page has by a written proposal and declaration, applied to THE JUBILEE INSURANCE COMPANY OF KENYA LIMITED (herein referred to as Jubilee) for the insurances (herein referred to as the benefits) specified in the Schedule in respect of the persons (herein referred to as the Members) named in the Schedule, Jubilee issues this Policy to the Insured provided the agreed premium as consideration for insurance has been paid plus acceptance letter issued.

It is understood and agreed that the basis of this contract is the proposal and declaration made to Jubilee by the Members and/ or on behalf of their dependants and that the proposal and declaration shall be deemed to be incorporated herein.

The contract is composed of; policy proposal, letter of acceptance and any policy endorsement thereof.

Jubilee hereby undertakes and agrees to provide reimbursement of otherwise non-recoverable medical and surgical expenses necessarily and reasonably incurred by the Member as a direct result of sustaining accidental bodily injury and/or illness and/or disease within the period of insurance as follows, subject to the provisions, exclusions and conditions herein:

- a) The proportion specified on the Policy Data Page of all approved surgeons', anaesthetists', operating theatre fees and hospital board and accommodation charges;

- b) The proportion specified on the Policy Data Page of all approved physicians', specialists' and/or pathologists' fees or nursing home and nursing attendance charges, x-ray and physiotherapy fees, clinic and laboratory fees, charges for drugs, dressings, surgical appliances for accident during the insurance period; and
- c) The proportion, if any, specified on the Policy Data Page of the cost of repatriating the Member for medical treatment not available in Kenya where certified to be necessary and essential by a physician in Jubilee's panel of Physicians. For such referrals, the costs of travel (airfare only, economy class) will be covered. Where the member being repatriated is a child who is aged six (6) years and below, the cost of travel (airfare only, economy class) for one parent/guardian accompanying the child will be covered. Stay outside the hospital for the Member or the costs of anyone accompanying the Member are not covered.

Provided that the stated proportions shall not exceed the amount specified in the Schedule.

**SECTION 1: DEFINITIONS**

Chronic Condition	A disease, illness or injury which has at least one of the following characteristics: no known cure, is recurrent, leads to permanent disability, is caused by changes to one's body which cannot be reversed, requires one to be specially trained or rehabilitated or needs prolonged supervision, monitoring or treatment.
Commencement Date	The date on which an eligible individual or eligible dependant becomes a Member on or after the Effective Date.
Customary and Reasonable Charges	Means charges for medical care made by a service provider which shall be considered by Jubilee to be customary and reasonable to the extent that they do not exceed the general level of charges being made by other service providers of similar standing in the locality where the charge is incurred when providing like or comparable treatment, services or supplies to individuals of the same sex and of comparable age, for a similar disease or injury. The scales of charges agreed from time to time between Jubilee and the Panel of Service Providers shall be indicative of such customary and reasonable charges.
Dependant	Means one (1) legal spouse of the Member and/ or unmarried children or legally adopted children who are dependant upon the Member for support, provided always that such children are aged not less than 3 months and not more than 18 years at the date of enrolment into the scheme..
Effective Date	The date that this medical insurance cover commences as shown on the Policy Data Page.
Eligible Dependant	A dependant will be considered to be eligible if the dependent is able to perform all the normal activities of a person of the same age and sex and is neither confined at home nor in a hospital or any other medical facility. Or as may be acceptable by Jubilee as being eligible
Exclusion	Category of treatment, conditions, activities and their related or consequential expenses that are excluded from this Policy for which Jubilee shall not be liable
General Patient	A Member, who has been admitted to a hospital, is assigned a bed and is receiving treatment under the care of the hospital's panel of Physicians.
Hospital	Means an institution, which is legally licensed as a medical hospital in the country in which it is located and which must be under the constant supervision of a Physician.
In-patient	A Member who has been admitted to a hospital, is assigned a bed and given diagnostic tests or receives treatment for a disease or injury.
In Force	The Policy is in effect for the medical benefits specified in the Schedule.
In-patient Treatment	Treatment which requires admission in and stay in a hospital or day care surgery.
Limit of Indemnity	This is Jubilee's liability as limited in events and amount to the limits and sub-limits specified in the Schedule as applying to each item or type of cover provided. The overall maximum limit stated thereon is the maximum amount recoverable under this Policy as a whole by any Member during any one period of insurance and in total in respect of any one covered claim or event.
Member	Means an eligible person who has completed a membership application form or an eligible dependant whose name is included on the membership application form for this policy and commencement of cover has been confirmed in writing by Jubilee
Out-patient Treatment	Treatment that does not require admission and stay in a hospital or day care.
Panel of Service Providers	The list of Hospitals, Pharmacies, Clinics, Physicians and other service providers approved by Jubilee from whom Members may seek services on credit.
Period of Insurance	The period from the Effective Date to the renewal date and each twelve-month period, from the renewal date thereafter.
Physician	Means a properly qualified medical practitioner licensed by the competent medical authorities of the country in which treatment is provided and who in rendering such treatment is practicing within the scope of his or her licensing and training.
Pre-existing Condition	Means any injury, illness, condition or symptoms: a. For which treatment or medication or advice or diagnosis has been sought or received or was foreseeable prior to the Commencement Date for the Member concerned, or b. Which originated or was known by the Insured or the Member to exist prior to the commencement date whether or not treatment or medication, or advice or diagnosis was sought or received.
Proportion of Expenses Covered	As indicated on the Policy Data Page
Waiting Period	The period from the commencement date during which a Member is not entitled to any benefit except in the event of an accident and which waiting period is indicated on the Policy Data Page
We, Us, Our	The Jubilee Insurance Company of Kenya Limited

Words importing the singular number shall be deemed to include the plural number and vice versa. Where the context so admits, words denoting the masculine gender shall be deemed to include the feminine.

## SECTION 2: SUMMARY OF BENEFITS

### In-patient Cover

#### Hospital treatment and services:

All necessary medical treatment and services provided by or on the order of a Physician to the Member when admitted as a registered general patient to a hospital. Cover includes hospital accommodation (as per the plan taken- refer to the schedule), nursing care, diagnostic, laboratory or other medically necessary facilities and services, physician's, surgeon's, anaesthetist's or physiotherapist's fees, operating theatre charges, intensive care unit charges, specialist consultations or visits and all drugs dispensed at discharge for a maximum period of one month, dressings or medications prescribed by treating physician for in-hospital use. The cost of non-medical goods or services including such items as telephone, newspaper or accommodation for the Member's family is excluded. We will only cover accommodation for a parent or guardian accompanying a Member who is below 6 years of age.

#### Day Care Surgery

#### Home nursing

Medically necessary home nursing care shall be provided upon approval by Jubilee. This shall be covered up to a maximum of 90 days in any policy year

#### Pre-Hospitalisation Diagnostic Services.

Laboratory, X-ray or other necessary medical diagnostic procedures ordered by a physician and which results in the Member being admitted (on the same day the tests are done) as a registered general patient to a hospital for treatment of the specific medical condition diagnosed, provided that such medical condition is covered.

#### Local road ambulance Services:

Local road emergency ambulance services for transportation of a sick Member for treatment from an area where facilities for adequate care do not exist to the nearest capable and licensed medical facility will be covered within the annual inpatient limit.

Cover for in-patient services are subject to the amount specified in the Schedule.

### Out-patient Cover

Necessary medical treatment provided to a Member who is not a registered in-patient at a hospital and defined as:

#### General Out-patient Services

Outpatient services provided by or on the order of a Physician who is licensed as a general practitioner under the Jubilee panel.

#### Specialist Out-patient Services

Outpatient services provided by or on the order of a Physician who is licensed as a specialist or consultant within the Jubilee panel only and to whom the Member has been referred to by a general practitioner under the

Jubilee panel.

### Out-patient Laboratory and X-ray Services

Laboratory testing, radiographic and procedures used to diagnose or treat medical conditions. Such services must be provided or ordered by a Physician and must be covered.

### Out-patient Prescription Drugs

Drugs and medicines, the use of which is restricted to the order of a Physician and prescribed for use by the Member as an outpatient for a maximum period of one month. Such treatment must be covered.

Cover for outpatient services are subject to the amount specified in the Schedule.

### Maternity Cover

Exclusion 2 (e) in Section 3 is amended to the extent that Jubilee will reimburse the Member the proportion of expenses shown on the Policy Data Page arising from childbirth provided the Member is admitted in a hospital as a general patient. The benefit shall cover delivery fees, consultation and treatment only during the period of confinement/admission in hospital. Jubilee will also reimburse cost arising out of miscarriage and abortion provided that such abortion shall be certified by a gynaecologist and/or a psychiatrist as being necessary to preserve the mental and/or physical health of the mother. Jubilee reserves the right to require the mother to be examined by a specialist of its choice. This benefit is not available for dependant children. Expenses related to the treatment of baby during this period is not covered (after delivery)

Jubilee shall not be liable for payments in respect of:

- (i) Expenses resulting from any existing pregnancy not disclosed at the commencement date.
- (ii) Expenses resulting from use of incubators for premature babies or babies born with deformities.

The total reimbursement under this section in any one period of insurance shall not exceed the limit specified in the Schedule.

### Last Expense Cover

Jubilee shall, upon written notification and submission of a burial permit and death certificate of the death of a Member while this Policy is in force, pay to the nominated beneficiary, the amount specified in the Schedule to cater for the funeral expenses.

### SECTION 3: GENERAL EXCLUSIONS

1. Expenses incurred as a result of a Member's participation in:
  - a. Naval, military or air force service or operations;
  - b. Hazardous sports including but not limited to Winter sports, water sports mountaineering, hunting, polo, racing on horseback, rugby, league football, motorcycling or motor racing on machines of greater than 125 c.c.;
  - c. Riding or driving in any kind of race;
  - d. Air travel except as a fare-paying passenger in any aircraft licensed for passenger carrying. Cover shall not in any event apply to a Member whilst operating, learning to operate or serving as a Member of a crew of any aircraft or to travel in any aircraft being used for sky-diving, racing, testing or exploration.
2. Expenses directly or indirectly incurred as a result of:
  - a. War ("declared or undeclared"), riot, strike and civil commotion;
  - b. Intentional self-injury, suicide or attempted suicide (whether sane or insane), venereal disease, Member's own criminal act, intoxication, the use of drugs not prescribed by a physician or injury sustained whilst in a state of insanity, alcoholism or costs resulting from dependency on or abuse of drugs or other addictive substance;
  - c. Nervous breakdown, general debility, psychoneurosis, general "overhaul"
  - d. Vaccination, or any treatment undertaken or carried out as a preventative measure;
  - e. Treatment by chiropractors, acupuncturists and herbalists, stays and/or maintenance or treatment received in nature cure clinics or similar establishments or private beds registered within a nursing home, sanatoria, convalescent and/or rest homes or 'cures' attached to such establishments;
  - f. Pregnancy, childbirth, maternity benefits, abortion, miscarriage, ante-or-postnatal care, caesarean operation except where purchased subject to twelve months waiting period;
  - g. Family planning and fertility treatment e.g. costs of treatment related to infertility and impotence, hormonal imbalance, hormone replacement therapy (HRT);
  - h. Cosmetic or beauty treatment and/or surgery;
  - i. Massage
  - j. Dental treatment or cost of dentures except for injury to natural teeth caused entirely by an accident occurring during the policy period. Replacement of natural teeth or dentures are excluded
  - k. Optical treatment or the cost of eyeglasses, except for injury to the eyes caused through an accident occurring during the policy period;
  - l. Hearing tests or cost of hearing aids;
  - m. Any injury, illness or disease specified as an exclusion and complications caused by a condition that is excluded
  - n. Birth defects, Congenital illness, conditions and illnesses related to genetic disorders;
  - o. Psychiatric illness, mental disorders and/or insanity expenses will be covered up to the applicable sub limit subject to twelve months waiting period.
  - p. Any claim for expenses relating to any contingency arising whilst the Member is outside the territorial limits of Kenya, but this limitation shall not apply to any Member temporarily abroad and requiring emergency treatment for an illness or injury that occurs during the period of travel provided that such period does not exceed six weeks in any one visit. Travel and accommodation costs are not covered.
- q. Any claim for expenses related to an accident or illness which may have occurred prior to the effective date or illness occurring within Sixty (60) days of the effective date or to any illness where it was within the knowledge of a Member that he was suffering from it at the effective date.
- r. Any claim for expenses occasioned by or through or in consequence, directly or indirectly caused by acts of God (natural causes)
- s. Treatment of obesity and slimming preparations
- t. Epidemics or unknown diseases
- u. Expenses incurred in connection with Examinations for check-up purposes not incidental to diagnosis of a sickness or accidental bodily injury such as general health examinations, scans of any nature or any other form of disease / illness prevention.
- v. Experimental treatment and drugs not scientifically recognised or not proven to be effective based on established medical practice
- w. Costs of treatment for, or related to, Menopause, andropause, ageing, puberty and pre-menstrual tension syndrome
- x. All expenses associated with HIV/AIDS and related conditions (subject to twelve months waiting period and full declaration on the application at policy inception)
- y. Pre-existing and Chronic conditions (subject to twelve months waiting period and full declaration on the application at policy inception)
- z. Cancer treatment (subject to twenty four months waiting period)
  - aa. Organ transplant (subject to twelve months waiting period)
  - ab. Treatment of Haemorrhoids, Fibroids, Hernia, Adenoidectomy (subject to twenty four months waiting period)
  - ac. Any treatment arising from an accident or event because the member or dependant was under the influence of alcohol or drugs, unless prescribed and taken according to the instructions of a medical practitioner
  - ad. Medical expense directly or indirectly resulting from or in connection with any act of terrorism ("declared or undeclared"), regardless of any other cause contributing concurrently or in any other sequence to the medical expense All expenses in respect of illnesses/conditions that were subject to waiting periods when the member and dependant joined the scheme
3. Charges recoverable under any Workmen's Injury Benefit Act or Government Health Services Schemes of compensation including NHIF or any other medical plan.

## SECTION 4: PROVISIONS AND GENERAL CONDITIONS

### Inception of Insurance

No insurance shall be in force or effective until the Proposal form has been accepted by Jubilee in writing and the Insured has paid the full premium.

### Policy and Schedule

This Policy and the Schedule shall be read together as one contract and any word or expression to which a specific meaning has been attached in any part of this Policy or of the Schedule shall bear such specific meaning wherever it may appear.

### Recovery of Uninsured Expenses

If Jubilee pays expenses incurred by a Member, which are not covered under the terms and conditions of this Policy, then the Member/Insured shall repay such amounts to Jubilee upon demand. Such expenses shall include amounts in excess of Schedule limits and other expenses not covered under this Policy.

### Notification of claims

In the event of any illness or accident giving rise to a claim under this Policy the Member shall notify Jubilee within 48 hours prior to scheduled admission and within 48 hours after emergency admission. The liability of Jubilee in respect of any contingency in any period of insurance giving rise to a claim hereunder shall be limited in respect of such claim to the period of two calendar months immediately following the next annual renewal date and to the maximum benefits as stated in the Schedule.

Failure to observe this notification of claim condition will invalidate a claim.

### Eligibility

An eligible person shall be any person who is:

- An individual under 60 years of age;
- A spouse under 60 years of age;
- The child or dependant stepchild or legally adopted child if over 3 months and under 18 years of age.

### Termination

The insurance shall cease in respect of:

- a. Members (adults) who attain the age of 65 years coincident with the annual renewal date of this policy or otherwise at the next renewal date immediately following attainment of age 65;
- b. Members (children) on the annual renewal date coincident with or immediately following the attainment of age 18 years. Thereafter, such Members may if desired continue to be insured by this Policy as an adult Member at the applicable rate of premium; and
- c. Death of the main member unless requested otherwise by the Insured in writing and Jubilee has accepted. In such circumstance, the next adult shall assume the contracting role until policy end. The continuance of the insurance in respect of such persons shall be subject to the terms, conditions and limitations contained herein.
- d. Members who Withhold relevant information or give us

- e. incorrect information
- e. Members who make any false or fraudulent claim;
- f. Members who fail to provide any reasonable information we have asked for;

### Premium

All premiums for medical insurance are payable annually in advance at the beginning of the coverage period.

Insured persons included during the currency of the period of insurance

Full premium is payable immediately for anyone who becomes a Member at any time during the coverage period.

### Company's right to decline renewal

Jubilee shall not be bound to renew this Policy. Jubilee shall have the right to decline or qualify the terms of the insurance in respect of all or any Member on giving the Insured Fourteen (14) days notice in writing prior to any annual renewal date.

### Co-ordination of Benefits

The Policy will not provide compensation other than on a proportionate basis if the Member has any other insurance in force or is entitled to indemnity from any other source in respect of the same accident, illness or expense. Jubilee has full rights of subrogation and may take proceedings in the Member's name, but at Jubilee's expense, to recover for its benefit the amount of any payment made under this Policy.

### Cancellation

Jubilee may cancel this Policy by sending Fourteen (14) days notice by registered mail to the Insured's last known address and in such event Jubilee shall refund to the Insured a pro-rata portion of the premium for the unexpired term of the current period of insurance.

The Insured may cancel this Policy by giving Fourteen (14) days notice by registered mail to the insurer last known address.

Cancellation within 30 days from commencement date shall attract a prorated premium refund for the remaining days to policy expiry subject to no claims incurred and/or reported less administration expenses at 15%. This shall be after claims submission time bar period of 90 days from date of deletion. There will be no refund on cancellation by the member after 30 days from commencement date

### Case management

The medical treatment of the Member as in-patient shall be managed according to the following regulations:

- The service must be medically necessary and delivered in a hospital;
- The service must have been authorized in terms of our pre-authorization procedure;
- The service, medication or supplies that the Member is charged for must relate to the reason for the admission. Should the Member undergo any further treatment not covered under this policy that is deemed by us to be

medically unnecessary we shall avoid all liability for such costs.

### **Arbitration**

Should any dispute arise between Jubilee and the Insured touching on the meaning of this Policy or as to the rights, obligations or liability of either party under this Policy, the same shall in the first instance be referred to arbitration in accordance with the statutory provisions for the time being in force applicable thereto.

### **Time Bar**

In the event of Jubilee disclaiming liability in respect of any claim hereunder Jubilee shall not be liable to such claim or possible claim after expiry of Sixty (60) days from the date of such disclaimer unless the disclaimer shall be the subject of legal proceedings or arbitration actually commenced against Jubilee.

### **Fraudulent/Unfounded Claims**

If any claim under this policy is in any respect fraudulent, false, intentionally exaggerated or unfounded or if any false declaration or statement shall be made in support thereof then, all benefits paid and/or payable in relation to that claim shall be forfeited and recoverable. In addition all cover in respect of the Insured person shall be terminated from Date of Entry without refund of premiums, and the member shall no longer be eligible for cover for any future periods

### **Jurisdiction**

Any legal proceedings instituted in connection with this Policy shall be brought before a court of competent jurisdiction in the Republic of Kenya.

This insurance is made and accepted subject to all the provisions, conditions and warranties set forth herein and in any forms or endorsements attached hereto all of which are to be considered as incorporated herein, and any provisions or conditions appearing in any forms or endorsements attached hereto which alter the insurance provisions stated above shall supersede such insurance provisions in so far as they are inconsistent therewith.

In any action, suit or other proceedings where the insurer alleges that any medical expense is not covered by this Policy, the burden of proving that such expense is covered shall be upon the Insured.

### **Renewal of the Policy**

This plan is a one-year contract, renewable each year on the anniversary of the start date. The Policy will remain in force for a period of 12 months from the effective date, provided that all premiums due have been paid and that the Policy has not been terminated.

As the anniversary of the Policy approaches, Jubilee shall notify the insured with the terms of the next period of coverage and the premiums due. If it is necessary to make changes to the Policy, they will only apply from the renewal date. All renewal confirmation should be received prior to the expiry of the preceding policy period. All renewal instructions received after expiry of the policy period shall be deemed as new members and all terms applicable to new members shall apply. Renewal

shall be upon receipt of the full premium

### **Duty of Disclosure**

The duty of disclosure continues throughout the life of the policy:

In addition to providing all basic information necessary to enable us to place the risk, you must ensure that you are complying with your legal duty of disclosure of all material matters relating to the risk. In particular, you must satisfy yourself as to the accuracy and completeness of the information you provide to Jubilee both at inception of the policy and throughout the policy term.

### **Waiting Period**

Upon expiry of the waiting period (s) as indicated in the policy data page, members will be required to enrol and adhere to Jubilee's chronic disease management program in various provider outlets which may vary from time to time. These conditions must be declared at the time of application for a member to qualify for the benefit and is subject to Jubilee's written acceptance

SECTION 5: BENEFIT GUIDE SUMMARY

CORE PLANS	ROYAL PLAN		EXECUTIVE PLAN		ADVANCED PLAN		PREMIER PLAN	
	5M		3M		2M		1M	
<b>Overall limit per year</b>								
Bed limits payable Net of NHIF	Standard Private Room with private bathroom		Standard Private room with wash basin		General Ward Bed		General Ward Bed	
<u>Main Benefits</u>								
<b>Inpatient Benefits</b>								
Prescription drugs and dressing upon discharge - maximum of 30 days supply	Paid in full		Paid in full		Paid in full		Paid in full	
Surgical appliances and internal prostheses	Paid in full		Paid in full		Paid in full		Paid in full	
Nursing care	Paid in full		Paid in full		Paid in full		Paid in full	
Physiotherapy as part of treatment	Paid in full		Paid in full		Paid in full		Paid in full	
Physicians' fees, Specialist fees, procedure fees and anaesthetist fees								
Paid according to the fees guideline of the Kenya Medical Practitioners and Dentist Board								
Gynaecological illness and treatment *								
Payable in full except for Fibroids, Hernia, Adenotomomy and Haemorrhoids shall have a waiting period of 24 months								
Cancer treatment (Year 3)	300,000		300,000		250,000		200,000	
HIV/AIDS treatment (Year 2)								
Organ Transplant (Year 2)								
Theatre charges, ICU & HDU	Paid in full		Paid in full		Paid in full		Paid in full	
Lodger fee for parent accompanying child below 6 years	Paid in full		Paid in full		Paid in full		Paid in full	
Day surgery under general anaesthesia or heavy sedation	Paid in full		Paid in full		Paid in full		Paid in full	
Home nursing								
Medically necessary subject to approval by Jubilee. Maximum 90 days								
Local emergency road ambulance which is medically necessary	Paid in full		Paid in full		Paid in full		Paid in full	
Air evacuation through AMREF membership at an additional fee								
Available through Amref / Flying Doctors Membership								
Non elective (emergency) treatment outside Kenya - preauthorization compulsory (INDIA, PAKISTAN & S. AFRICA)	Within applicable limits		Within applicable limits		Within applicable limits		Within applicable limits	
Air fare costs for non elective treatment outside Kenya for the patient. Also, airfare for an accompanying guardian where patient is below 6 years	Economy Class		Economy Class		N/A		N/A	
Psychiatric treatment (Year 2)	200,000		200,000		200,000		100,000	
Pathology, Radiology, and other necessary diagnostic tests	Paid in full		Paid in full		Paid in full		Paid in full	

Accidental related dental treatment	Paid in full	Paid in full	Paid in full	Paid in full	Paid in full
Accidental related optical treatment	Paid in full	Paid in full	Paid in full	Paid in full	Paid in full
<b>Outpatient Benefits</b>	<b>100,000</b>	<b>100,000</b>	<b>100,000</b>	<b>80,000</b>	<b>50,000</b>
<b>Consultation fees (Doctors on panel)</b>	Paid in full	Paid in full	Paid in full	Paid in full	Paid in full
Pathology, X-rays, MRI, CT scan, and other necessary diagnostic tests	Paid in full	Paid in full	Paid in full	Paid in full. MRI and CT Scan must be pre-authorised by Jubilee	
Prescription drugs and dressing up to a maximum of 30 days dosage	Paid in full	Paid in full	Paid in full	Paid in full	Paid in full
Gynaecological illness and treatment	Payable in full except for Fibroids, Hernia, tonsillectomy, Haemorrhoids shall have a waiting period of 24 months				
Pre-existing and chronic cover (Year 2)	Paid in full	Paid in full	Paid in full	Paid in full	Paid in full
Cancer treatment (Year 3)	Paid in full	Paid in full	Paid in full	Paid in full	Paid in full
HIV/AIDS treatment (Year 2)	Paid in full	Paid in full	Paid in full	Paid in full	Paid in full
Psychiatric treatment (Year 2)	Paid in full	Paid in full	Paid in full	Paid in full	Paid in full
Physiotherapy	Upon approval by Jubilee	Upon approval by Jubilee	Upon approval by Jubilee	Upon approval by Jubilee	Upon approval by Jubilee
<b>Maternity Benefits</b>					
Normal Delivery	80,000	60,000	N/A	N/A	N/A
Normal delivery including all costs below shall not exceed limit					
Cost of delivery and related complications of pregnancy resulting in admission	Within applicable limits	Within applicable limits	Within applicable limits		
Professional fees	Paid according to the fees guideline of the Kenya Medical Practitioners and Dentist Board				
Labour and recovery ward	Within applicable limits	Within applicable limits	Within applicable limits		
Caesarean Section Delivery	150,000	120,000	N/A	N/A	N/A
Caesarean section delivery including all other costs above shall not exceed limit	Within applicable limits	Within applicable limits	Within applicable limits		
Cost of delivery and related complications of pregnancy resulting in admission	Within applicable limits	Within applicable limits	Within applicable limits		
Professional fees	Paid according to the fees guideline of the Kenya Medical Practitioners and Dentist Board				
Labour and recovery ward	Within applicable limits	Within applicable limits	Within applicable limits		
<b>Funeral Expense</b>	<b>100,000</b>	<b>100,000</b>	<b>100,000</b>	<b>50,000</b>	<b>50,000</b>
Provision of a burial Permit will allow the insurer to make payment to the nominated beneficiary	Paid in Full	Paid in Full	Paid in Full	Paid in Full	Paid in Full

FORMING PART OF PERSONAL ACCIDENT

Insured Person: Postal Address  Cell Phone No:	
Beneficiary Name & Details	
Perils Covered	24 hour cover for accidental death.
Benefits	Accidental Death Kshs. / =
Conditions	<ol style="list-style-type: none"> <li>1. 24 hour Worldwide Cover, Duty or Pleasure.</li> <li>2. Age Limit - 18 to 65 years</li> <li>3. Disappearance Clause</li> <li>4. Exposure Clause</li> <li>5. Hi-jack Clause</li> <li>6. Riot, Strike &amp; Civil Commotion</li> </ol>
Exclusions	<ol style="list-style-type: none"> <li>1. The Insured Person being under the influence of or being affected by alcohol drugs venereal disease or insanity.</li> <li>2. The Insured Person willfully exposing himself to needless peril (except in attempt to save human life) or committing or attempting to commit suicide</li> <li>3. The Insured Person suffering from any physical defect or infirmity which existed prior to an Accident.</li> <li>4. Childbirth or Pregnancy in the case of women.</li> <li>5. War, civil war, political risks and terrorism exclusion</li> </ol>
Claims Procedure	<p>The following documents are required in the event of a claim:</p> <ol style="list-style-type: none"> <li>1. Dully filed claim form</li> <li>2. Medical certificate</li> <li>3. Claimant's pay slips (three-four months) prior to the incident</li> <li>4. Medical bills and receipts incurred.</li> <li>5. Sick off sheets</li> </ol>