

# KENYA | HERITAGE BLUE CORPORATE BENEFIT TABLE October 2020 - September 2021 (LH20B)

This table will give you an overall summary of the benefits we offer. Please read this summary together with the Heritage Blue Policy Conditions, which provides more detailed information.

**Annual benefits limit per insured person per year in KES.**

PRODUCT OPTION	Core	Lite	Classic	Classic Roaming	Plus	Elite
Region of cover	In-country only	In-country only	Out-patient care: East Africa only In-Patient care: East Africa and India where treatment is medically necessary and not available locally.	Out-patient care: East Africa only In-Patient care: East Africa and India where treatment is medically necessary and not available locally.	Africa and India, Thailand and U.A.E	Worldwide (excluding North America)
Network Providers paid at Liberty Tariffs	Restricted Network of providers only Out of Network will be reimbursed subject to Restricted network tariffs	Restricted Network of providers only Out of Network will be reimbursed subject to Restricted network tariffs	Standard Network Out of Network will be reimbursed subject to Standard network tariffs	Enhanced Network Out of Network will be reimbursed subject to Enhanced network tariffs	Enhanced Network Out of Network will be reimbursed subject to Enhanced network tariffs	Enhanced Network Out of Network will be reimbursed subject to Enhanced network tariffs
Overall limit	2 200 000	4 400 000	9 000 000	44 000 000	90 000 000	220 000 000

HOSPITAL BENEFITS (In-patient) Subject to pre-authorisation and clinical funding protocols						
In-patient accommodation	Standard private room	Standard private room	Standard private room	Standard private room en-suite	Standard private room en-suite	Standard private room en-suite
In-hospital accommodation, specialists, theatre, ward, acute dialysis and medicine costs	Subject to overall limit Discharge medicine limited to 14 days after hospitalisation	Subject to overall limit Discharge medicine limited to 14 days after hospitalisation	Subject to overall limit Discharge medicine limited to 14 days after hospitalisation	Subject to overall limit Discharge medicine limited to 14 days after hospitalisation	Subject to overall limit Discharge medicine limited to 14 days after hospitalisation	Subject to overall limit Discharge medicine limited to 14 days after hospitalisation
Ambulance services	Subject to overall limit	Subject to overall limit	Subject to overall limit	Subject to overall limit	Subject to overall limit	Subject to overall limit
Intensive care	20 days per annum	20 days per annum	30 days per annum	Subject to overall limit	Subject to overall limit	Subject to overall limit
Specialised radiology (combined limit in-hospital and out-of-hospital)	90 000	110 000	150 000	167 000	200 000	222 000
In-patient maternity (childbirth)	220 000	220 000	270 000	330 000	390 000	444 000
Maternity complications (Post delivery)	550 000	550 000	890 000	1 110 000	Subject to overall limit, maximum of 6 weeks	Subject to overall limit, maximum of 6 weeks
Neonatal care (incubator, phototherapy, congenital conditions, prematurity)	550 000	550 000	1 110 000	2 200 000	2 780 000	5 600 000
Psychiatric hospitalisation	10 days per annum	10 days per annum	20 days per annum	24 days per annum	24 days per annum	28 days per annum
Prosthesis and devices (per prosthesis/device)	190 000	190 000	270 000	330 000	389 000	500 000
External medical appliances	22 000	22 000	39 000	50 000	67 000	105 000
Hospitalisation related to Chronic conditions	1 110 000	1 110 000	1 700 000	2 200 000	2 780 000	3 400 000
Optical Surgery	110 000	110 000	167 000	220 000	280 000	330 000
Dental Surgery	110 000	110 000	167 000	220 000	280 000	330 000

MAJOR DISEASE BENEFITS Subject to pre-authorisation and clinical funding protocols						
Overall limit	1 330 000	1 330 000	2 000 000	2 300 000	3 200 000	6 200 000
Oncology (Cancer) treatment	✓	✓	✓	✓	✓	✓
Organ transplants	✓	✓	✓	✓	✓	✓
Renal (Kidney) dialysis	✓	✓	✓	✓	✓	✓

INTERNATIONAL EMERGENCY EVACUATION BENEFITS Subject to pre-authorisation and clinical funding protocols						
International emergency evacuation and repatriation	x	x	Available in India or South Africa where treatment is not locally available	Subject to overall limit	Subject to overall limit	Subject to overall limit
Compassionate travel for one person accompanying an evacuated person	x	x	Return economy class ticket for accompanying parent/ guardian where patient is a child aged 12 years and younger	For an accompanying family member, return economy class ticket and up to 27 000 per day for ancillary charges, (max 7 days)	For an accompanying family member, return economy class ticket and up to 27 000 per day for ancillary charges, (max 10 days)	For an accompanying family member, return economy class ticket and up to 34 000 per day for ancillary charges, (max 14 days)
Repatriation of mortal remains following an international emergency evacuation	x	x	220 000	222 000	333 000	1 000 000

EMERGENCY TREATMENT WHILST TRAVELLING OUTSIDE AREA OF COVER (up to max 60 days per trip)						
Emergency treatment whilst travelling outside area of cover (up to max 60 days per trip). The International emergency evacuation benefits are not covered outside the area of cover.	x	x	Up to Kes 6 700 000 in USA and Canada. For other countries when outside your area of cover, benefits are subject to limits specified in this benefit table	Up to Kes 9 000 000 in USA and Canada. For other countries when outside your area of cover, benefits are subject to limits specified in this benefit table	Up to Kes 11 000 000 in USA and Canada. For other countries when outside your area of cover, benefits are subject to limits specified in this benefit table	Up to Kes 13 300 000 in USA and Canada. For other countries when outside your area of cover, benefits are subject to limits specified in this benefit table

DAY-TO-DAY BENEFITS (Out-patient)						
<b>Acute Conditions Benefit</b> (conditions that generally appear suddenly, progress rapidly and are relatively short in duration) • Consultations (GP and specialist) • Diagnostic tests • Pathology, i.e., blood tests requested by a doctor in the course of your consultations • Basic radiology, i.e., out-of-hospital basic x-rays • Out-of-hospital non-surgical procedures, such as applying plaster of paris and stitches • Auxillary services such as physiotherapy, chiropractics and speech therapy • Annual medical examination at your doctor's rooms	x	55 500	88 800	111 000	166 500	277 500
<b>Prescribed medication for acute medication</b>	x	27 800	44 400	55 500	77 700	111 000
<b>Chronic Conditions Benefit</b> (conditions that require medication and treatment for more than three continuous months) • Consultations (GP and specialist) • Prescribed chronic medication • Pathology, i.e., blood tests requested by a doctor in the course of your consultations • Basic radiology <i>Note: If this benefit is depleted, then claims will be paid from the available Day-to-Day Benefits</i>	x	120 000	170 000	220 000	270 000	340 000
<b>Out-patient maternity care</b> <i>Note: If this benefit is depleted, then claims will be paid from the available Day-to-Day Benefits</i>	x	Covered under acute conditions benefit	22 200	27 800	33 300	38 900
<b>Dentistry</b>	x	16 700	33 300	38 900	44 400	72 200
<b>Optical benefits</b> • 1 x eye test per insured person per year • Frames and lenses (including contact lenses) every 2 years	x	16 700	27 800	33 300	38 900	44 400
<b>Wellbeing benefit</b>	x	x	16 700	22 200	27 800	33 300

**Note:** If the start date of your health cover is after the start date of your employer's Heritage Blue Policy, your benefits will be available to you on a pro-rata basis.

**Disclaimer:** The benefits described in the table above are subject to the Policy Conditions in the Heritage Blue Policy Document. Every attempt has been made to ensure complete accuracy of this document. However, in the event of a conflict between this document and the Heritage Blue Policy Conditions, the Policy Conditions will prevail. E&OE