

KENYA | Heritage Blue corporate benefit table 2021

This table will give you an overall summary of the benefits we offer. Please read this summary together with the Liberty Health Cover Policy Conditions, which provides more detailed information. The annual benefit limits per insured person for the year are in Kenyan Shilling (KES).

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

Day-to-day benefits (for conditions that generally appear suddenly, progress rapidly and are relatively short in duration)

<ul style="list-style-type: none"> GP and specialist consultations Prescribed acute medication including vaccinations 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 pre-authorized at designated centres 	277 500	166 500	111 000	88 800	55 500	x
Prescribed acute medication including vaccinations	111 000	77 700	55 500	44 400	27 800	x
Wellness Check-up Benefit This benefit covers the following tests: <ul style="list-style-type: none"> Lipid profile Blood sugar Urinalysis PAP smear (women over 25 years old) Mammogram (women over 40 years old) PSA (men over 40 years old) Blood pressure Body mass index (BMI) measurement HIV test ECG (resting) 	33 300	27 800	22 200	16 700	x	x

Optical benefits

1 x eye test per insured person per year Frames and lenses (including contact lenses) every 2 years	44 400	38 900	33 300	27 800	16 700	x
In-Hospital Optical Surgery	330 000	280 000	220 000	167 000	110 000	110 000

Dental benefits (subject to clinical funding protocols)

Dentistry (Basic and Specialised)	72 200	44 400	38 900	33 300	16 700	x
In-Hospital Dental Surgery	330 000	280 000	220 000	167 000	110 000	110 000

Psychological wellbeing benefits

Psychologist/social worker consultations and prescribed acute medication	Subject to day-to-day benefits limit	Subject to day-to-day benefits limit	Subject to day-to-day benefits limit	Subject to day-to-day benefits limit	Subject to day-to-day benefits limit	Subject to day-to-day benefits limit
Ongoing psychiatric consultations and associated chronic medication	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit
Hospital benefits (subject to pre-authorization and clinical funding protocols)	28 days per annum	24 days per annum	24 days per annum	20 days per annum	10 days per annum	10 days per annum

Maternity benefits (subject to pre-authorization and clinical funding protocols)

Out-patient maternity care Antenatal consultations, ultrasounds and pathology services, including amniocentesis, are paid from this benefit. Any additional maternity claims will be paid from the available day-to-day benefits.	<ul style="list-style-type: none"> Consultations x 12 Ultrasound scans x 3 Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorization) 	<ul style="list-style-type: none"> Consultations x 12 Ultrasound scans x 3 Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorization) 	<ul style="list-style-type: none"> Consultations x 12 Ultrasound scans x 3 Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorization) 	<ul style="list-style-type: none"> Consultations x 12 Ultrasound scans x 3 Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorization) 	Covered under Acute Conditions Benefit	x
Out-patient high-risk pregnancies Subject to enrolment for case management	Additional consultations and ultrasound scans	Additional consultations and ultrasound scans	Additional consultations and ultrasound scans	Additional consultations and ultrasound scans		
In-patient maternity - childbirth and management of high-risk pregnancies	444 000	390 000	330 000	270 000	220 000	220 000
Maternity complications (Post delivery)	Subject to overall limit, maximum of 6 weeks	Subject to overall limit, maximum of 6 weeks	1110 000	890 000	550 000	550 000
Neonatal care - incubator, phototherapy, congenital conditions, prematurity	5 600 000	2 780 000	2 200 000	1110 000	550 000	550 000
Postnatal depression - medication, consultations, pathology	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	x

Chronic conditions benefits (subject to pre-authorization and clinical funding protocols for conditions that require medication and treatment for more than three continuous months)

GP and specialist consultations, prescribed medication, radiology and pathology (e.g. blood tests)	340 000	270 000	220 000	170 000	120 000	x
---	---------	---------	---------	---------	---------	---

Note: If the start date of your health cover is after the start date of your employer's Liberty Health Cover Policy, your day-to-day 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 Liberty Health Cover 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 Liberty Health Cover Policy Conditions, the Policy Conditions will prevail. E&OE

KENYA | Heritage Blue corporate benefit table 2021

This table will give you an overall summary of the benefits we offer. Please read this summary together with the Liberty Health Cover Policy Conditions, which provides more detailed information. The annual benefit limits per insured person for the year are in Kenyan Shilling (KES).

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

Hospital benefits (subject to pre-authorisation and clinical funding protocols)

In-hospital accommodation	Standard private room en-suite	Standard private room en-suite	Standard private room en-suite	Standard private room	Standard private room	Standard private room
Intensive care	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	30 days per annum	20 days per annum	20 days per annum
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
Specialised radiology - combined limit in and out of hospital	222 000	200 000	167 000	150 000	110 000	90 000
Prosthesis and devices - per prosthesis/device	500 000	389 000	330 000	270 000	190 000	190 000
External medical appliances	105 000	67 000	50 000	39 000	22 000	22 000
Hospitalisation related to Chronic conditions	3 400 000	2 780 000	2 200 000	1 700 000	1 110 000	1 110 000

Ambulance benefits (within region of cover)

Emergency road ambulance services	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
Non-emergency road ambulance, cross-border ambulance (subject to pre-authorisation)	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit

Major diseases benefits (subject to pre-authorisation and clinical funding protocols)

Major diseases benefits limit	6 200 000	3 200 000	2 300 000	2 000 000	1 330 000	1 330 000
Provision of treatment (subject to the major diseases benefits limit)	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis

International benefits (subject to pre-authorisation and clinical funding protocols)

International emergency medical evacuations In the case of a medical emergency/life-threatening condition and where treatment is not available locally, cover includes: international evacuation and foreign treatment costs	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Available in India or South Africa where treatment is not locally available	x	x
Critical care In the case of a medically necessary, non-emergency life-threatening condition, where treatment for in-patient care is not available locally, cover includes: international travel/accommodation and foreign treatment costs	Subject to the overall limit and appropriate sublimits.	Subject to the overall limit and appropriate sublimits.	Subject to the overall limit and appropriate sublimits.	x	x	x
Travel and accommodation costs per event Applicable only to international emergency medical evacuations and critical care cases for the patient, and where applicable, one accompanying person	For an accompanying family member, return economy class ticket and up to 34 000 per day for ancillary charges, (max 14 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 27 000 per day for ancillary charges, (max 7 days)	Return economy class ticket for accompanying parent/ guardian where patient is a child aged 12 years and younger	x	x
Repatriation of mortal remains Applicable to international emergency medical evacuations and critical care cases only	1 000 000	333 000	222 000	220 000	x	x
Elective roaming Applicable to beneficiaries electing to obtain medical services outside their country of residence and in line with their benefit plan region of cover. Cover includes foreign treatment cost and services but not travel.	Subject to the overall limit and appropriate sublimits	Subject to the overall limit and appropriate sublimits	Subject to the overall limit and appropriate sublimits	Subject to overall limit and appropriate sub limits (in patient care only, where treatment is not locally available)	x	x
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.	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.	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 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 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.	x	x

LIBERTY WELLBEING AND DIGITAL TOOLS	Available to all beneficiaries. Access to the Liberty Wellbeing online platform for self-completion of health assessments and easy, 24-hour access to clinically approved health promotion material. Access to digital tools including a unique customer profile via desktop login or the Liberty Health Mobile App (iOS and Android).
--	--

Note: If the start date of your health cover is after the start date of your employer's Liberty Health Cover Policy, your day-to-day 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 Liberty Health Cover 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 Liberty Health Cover Policy Conditions, the Policy Conditions will prevail. E&OE

Heritage

Insurance Company

A member of  LIBERTY

KENYA

Heritage Insurance Company Ltd,
Liberty House (formerly CFC House), Mamlaka Road,
PO Box 30390 00100 – GPO, Nairobi, Kenya
T +254 20 278 3000
M +254 711 039 000/+254 734 101 000
E info@heritage.co.ke

Medical Call Centre number

+254 711 076 333

Emergency numbers and pre-authorisation

+254 278 111 001

+254 728 111 002

+254 733 750 004

+254 733 550 050

healthcareundertakings@heritage.co.ke

Post claims to the postal address above, or email:

claims.medical@heritage.co.ke

The Heritage Blue product is licenced and administered by
Heritage Insurance Company Limited
Registration No. IRA/017/01.