



GA FAMILY PLAN

SCOPE OF THE COVER

Medical and surgical expenses reasonably incurred by the insured members as a result of sustaining accidental bodily injury and/or illness and/or a disease within the period of insurance.

ENHANCED INPATIENT COVER (PLEASE SELECT ONE OPTION)

ANNUAL INPATIENT LIMITS/PREMIUMS IN KSHS	500,000/=	750,000/-	1 MILLION	2 MILLION	5 MILLION
Family Size					
M	19,682	25,967	26,804	30,226	39,511
M+1	26,571	35,054	36,185	40,805	53,340
M+2	34,542	45,572	47,041	53,047	69,342
M+3	43,177	56,964	58,801	66,308	86,677
M+4	51,813	68,357	70,562	79,570	104,013
M+5	62,175	82,029	84,674	95,484	124,815

ADDITIONAL COVER BENEFIT (WAITING PERIOD - 10 MONTHS)

MARTENITY LIMIT (KSHS)	PREMIUMS
50,000	13,975
75,000	15,992
100,000	18,525
150,000	20,250

BENEFITS (KES)	500,000	750,000	1 MILLION	2 MILLION	5 MILLION
Daily Bed Limit	8,500	10,000	12,000	15,500	18,000
New/pre-existing, Chronic & HIV/AIDS (Waiting period 12 months)	250,000	300,000	300,000	400,000	500,000
Congenital Conditions (Waiting period 12 months)	75,000	100,000	150,000	200,000	250,000
Inpatient optical (illness)-Non Accidental	50,000	50,000	60,000	80,000	100,000
Inpatient Dental (illness)-Non Accidental	50,000	50,000	60,000	80,000	100,000
Cataract Operation	45,000	50,000	60,000	70,000	75,000
Funeral Expenses	30,000	50,000	60,000	80,000	100,000
Psychiatry and psychotherapy (Waiting Period 12 months) within IP	250,000	300,000	300,000	400,000	500,000
Post accidental/surgical hospitalization treatment or Nursing at home (on doctor's recommendation) within 30 days of discharge	30,000	30,000	30,000	30,000	30,000
Surgical appliances on discharge (Waiting period 60 days)	30,000	30,000	30,000	30,000	30,000
Surgical cases (Admission) not related to a chronic condition (Waiting period 60 days)	Covered	Covered	Covered	Covered	Covered

Note

1. Premiums are inclusive of taxes.
2. Eligible age: 1 day to 59 years.
3. Upon turning 60 years of age, member is recruited to our senior cover with new terms and conditions.

BENEFITS PAYABLE TO FULL LIMIT

- ✓ Worldwide cover available on reimbursement up to 8 weeks on business trip or holiday
(Excluding USA, Canada)
- ✓ Surgical fees, including anesthesia and theatre charges
- ✓ Evacuation for treatment not available in Kenya – scheduled flight
- ✓ Diagnostic Radiology tests, X-rays, MRI, Ultrasounds, Scans, etc
- ✓ Accidental Dental conditions
- ✓ Local ambulance to hospital
- ✓ Prescription drugs and materials
- ✓ Lodging facilities for parent accompanying a child below 12 years being admitted
- ✓ Treatment outside Kenya is restricted to India, Pakistan & South Africa
- ✓ Consultations with GPs and Specialized Doctors on referral
- ✓ Psychological support, Counseling, Physiotherapy
- ✓ Accidental Optical conditions
- ✓ Special units such as ICU, HDU
- ✓ Day care procedures

MATERNITY COVER

- Applicable to female employee and/ or female spouse
- Normal deliveries and any maternity related complications resulting to admission
- Emergency/elective and subsequent caesarean sections

**Maternity option is available only with an Inpatient Cover.*

COVER DETAILS

Eligible age

- Children – From 3months to 18 years
- Principle member and spouse – up to 59 years

Provider Panel

- Geographical limit – Kenya but extended worldwide up to eight weeks from the date of travel.
- Mode of identification – GA Insurance Medical Card – no photo required
- Cover open to all approved GA medical provider panel

Special features

- No waiting period for accident cases, 30days waiting period for illness & 60 days for surgical cases.
- No refund for deleted members who have claimed or deletions done after 8 months
- All waiting period subject to continuous renewing without break-in (GA Insurance cover).
- Cancellation notice of 14 days by either party.

Claim procedure

1. This cover will be on credit based facility with GA Insurance providers.
2. All bills are paid less NHIF Rebate
3. Management by GA selected providers & Based on Stipulated average fee guidelines by the Kenya Medical Practitioners and Dentist Board(KMPD)
4. Own Private Doctors fees will be settled in full by client and GA will reimburse based on KMPD guidelines.

ADMISSIONS

For emergency admission GA Insurance will undertake after notification by the hospital. Schedule admissions, member should advise GA of Impending Admission, 48 hours prior to admissions and GA will issue a letter of Undertaking

Reimbursement Claims Procedure

- The member should settle the bills directly with the hospital.
- The original receipt(s) including the duly completed claim form, hospital itemized bill(s), medical report & discharge summary should be forwarded to GA by the member within 60 days from the date of treatment.
- GA will settle the bill(s) within 10 working days
- Official receipts must bear printed details of the service provider with official rubber stamp and Pin Number.
- Time bar at sixty(60) days from the day of ailment for reimbursement

Overseas Procedures - India, South Africa, Pakistan

- All treatment will require Pre-authorization by GA Insurance care team.
- All claims for the treatment expenses will be on reimbursement basis

Reimbursement of the claims will be made in full in Kenya shillings as per applicable exchange rate at the time of incurring the expenses subject to local treatment rates and limits set under the policy.

MAIN EXCLUSIONS

- Expenses recoverable by/under any other insurance e.g. NHIF, GPA and WIBA
- Non-declared Pre-existing conditions
- Cosmetic surgery unless caused by accident, senility/old age homes
- Nutritional supplements
- Family planning/infertility
- Intentional self injury, drunkenness, drug addiction
- Naval, military or air force operations
- Terrorism, war and kindred risks
- Hearing aids, eye glasses/lenses, eye testing
- Alternative treatment and diagnosis
- Beauty treatment in nature cure clinics or health hydros
- Personal care items
- Outpatient, dental and optical cover
- Claims arising or associated with Epidemics/Pandemics or unknown diseases

You can make payments using these cards



M-Pesa Paybill Number: 870250

Contact us

To register for GA Family Plan
Helpline: 0709 626 000 | 0709 626 400
Mombasa: 0736 372 881 | Kisumu: 0733 154 415
Email: careteam@gakenya.com

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4th floor, Ralph Bunche Road,
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**GA Insurance is regulated by The Insurance Regulatory Authority*

