

First Afya Biashara

Your SME Health bila Worries!!



Welcome to First Assurance

Company Profile

1930 -Prudential Assurance Company PLC

First Assurance started its operations as Prudential Assurance Company PLC, a British Multinational Insurance Company that had commenced its operations in East Africa.

1st January 1991-Changed to First Assurance Company Limited

Prudential Assurance company became a wholly owned Kenyan company and changed its name to First Assurance Company limited.

30th April 2015-Acquired by Barclays

Barclays PLC through Barclays Africa Group Limited acquired 63.3% of First Assurance Company Limited and became the majority shareholder.

11th July 2018-Acquired by Absa

Barclays Africa Group Limited changed its name to Absa in a rebranding exercise, after selling off the controlling stake in Absa South Africa's third largest lender. First Assurance Company Limited is part of Absa Group Limited.

We trade as First Assurance.

Our Vision

To be preferred and trusted provider of insurance and integrated financial Services

Our Mission

To provide Assurance and Quality Services for all Insurable Financial and Social expectations that create and add Value for all our Stakeholders.

Our Values

Integrity:

We act fairly, ethically, and openly in all we do.

Quality Service:

We put our clients and customers at the center of what we do.

Professionalism:

We use our energy, skills, and resources to deliver the best, sustainable results.

Corporate responsibility:

We are passionate about leaving things better than we found them.

Security

We are here to offer security for our clients



Why First Afya Biashara?

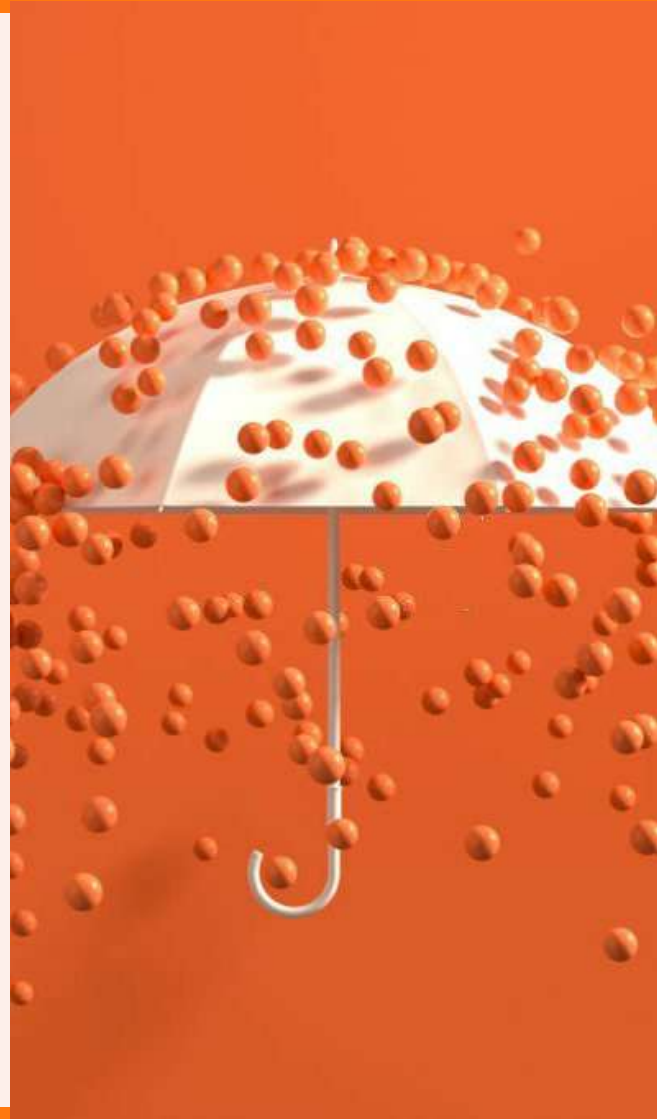
Enjoy the ultimate peace of mind when it comes to healthcare for you and your employees with our plan that offers extensive medical coverage both locally and overseas. With a steadfast commitment to your well-being, we've designed this plan to encompass a wide spectrum of medical conditions, from routine check-ups and preventive care to critical illnesses and emergencies, ensuring that you and your team receive top-tier medical attention whenever and wherever you may need it. Your health is our priority, and our SME medical cover is your assurance of a secure and healthy future.

Eligibility

- **Size of group** – Minimum 3 employees
- While we anticipate that all eligible members will enroll into the scheme, the minimum enrolment for the scheme must be 100% of all eligible members and dependents.
- **Age** adult. 18 years to 65 year and extendable up to 75 years provided he/she remains in active service and subject to underwriting. Age children – Own, legally adopted (0 months (term baby of 37 weeks) up to 18 years or to age 25 years if residing with their parents and enrolled full-time in a recognized post-secondary institution (Share proof). No age restriction for children with mental/physical impairment (Share medical proof)
- **Newborns:** A newborn baby will be placed on cover effective from day zero if birth notification is issued within 14 days of birth.

Onboarding requirements

1. Certificate of registration/Incorporation.
2. KRA PIN certificate.
3. CR12.
4. ID of director(s) and shareholder(s) Any shareholder with more than 10% shareholding as per CR12.
5. Member list.
6. Proof of payment.
7. Employee application form/Company authorization form



INPATIENT BENEFITS (CORE PRODUCT-COMPULSORY KSHS)

PLANS	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 5	OPTION 6	OPTION 7	OPTION 8	OPTION 9	OPTION 10	OPTION 11	OPTION 12	OPTION 13
Overall Annual Limit	10 Million	7.5 Million	5 Million	4 Million	3 Million	2 Million	1.5 Million	1 Million	750,000	500,000	400,000	300,000	250,000
Accommodation (Bed Type)	Ensuite room up to 26,500 net of NHIF	Ensuite room up to 23,500 net of NHIF	Private Standard Room up to 22,500 net of NHIF	Private Standard Room up to 19,000 net of NHIF	Private Standard Room up to 18,000 net of NHIF	Private Standard Room up to 17,000 net of NHIF	Private Standard Room up to 13,500 net of NHIF	Private Standard Room up to 13,000 net of NHIF	Standard ward bed net of NHIF				
Pre-existing, Chronic conditions and HIV (including ARV's)	1.3 Million	1 Million	850,000	750,000		500,000			375,000	350,000		200,000	125,000
Newly diagnosed chronic conditions	5 Million	4.5 Million	4.5 Million	3 Million	Full limit								
Psychiatry conditions	2 Million	1.5 Million	1 Million	800,000	600,000	400,000	300,000	200,000	150,000				
Pandemics such as covid-19 hospitalization and management	1.3 Million	1 Million	850,000	750,000		500,000			375,000	300,000		200,000	125,000
Pre-Term & Congenital conditions	300,000	250,000	200,000			150,000				100,000			
Post Hospitalization visits/review-up to 4 weeks after discharge from Hospital	50,000		40,000			30,000				25,000			
Infertility treatment - IVF (in Vitro fertilization)	200,000			150,000					100,000				
Surgical operations and Procedures including Doctor's fees{physician fees,surgeons fees,anesthetic fees,ICU,HDU charges,theatre charges,Diagnostic Tests,Physiotherapy} as part of Inpatient treatment.	Paid in Full												

INPATIENT BENEFIT(KSHS)

PLANS	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 5	OPTION 6	OPTION 7	OPTION 8	OPTION 9	OPTION 10	OPTION 11	OPTION 12	OPTION 13
Overall Annual Limit	10 Million	7.5 Million	5 Million	4 Million	3 Million	2 Million	1.5 Million	1 Million	750,000	500,000	400,000	300,000	250,000
Day care surgery under general anaesthesia	Paid in Full												
Reconstruction surgery following an accident	Paid in Full												
Lodger fees for parent accompanying sick child member	Available for children up to 12 years and no age capping for children with mental or physical impairment												
Radiology services-X ray, Electrocardiography (ECG) computerized tomography, MRI and CT-scans(net of NHIF)-Subject to Pre-authorization	Paid in Full												
Organ transplants (excluding donor costs)	1.3 Million	1 Million	850,000	750,000		500,000			375,000	300,000		200,000	125,000
Inpatient Dental due to an ailment	400,000	350,000	200,000		150,000				100,000				
Inpatient Optical/related to eye treatment (excluding correction of refractive errors and Laser eye treatment)	400,000	350,000	200,000		150,000				100,000				
Inpatient Dental surgery due to an accident	Paid in Full												
Inpatient Ophthalmology surgery as a result of an accident	Paid in Full												
Surgical appliances/Internal prosthesis required after hospitalization on physician recommendation	Paid in Full												
External appliances (Non-Motorized wheelchairs, crutches, corsets, insoles. Etc) subject to pre-authorization	200,000		150,000		100,000				80,000				

INPATIENT BENEFIT (KSHS)

PLANS	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 5	OPTION 6	OPTION 7	OPTION 8	OPTION 9	OPTION 10	OPTION 11	OPTION 12	OPTION 13
Overall Annual Limit	10 Million	7.5 Million	5 Million	4 Million	3 Million	2 Million	1.5 Million	1 Million	750,000	500,000	400,000	300,000	250,000
Emergency and accident only cover while travelling abroad	6 weeks per trip on reimbursement												
Medically necessary home nursing on doctor's recommendation after discharge from hospital	Up to 60 days												
Local rescue and evacuation (including airlifting and ambulance) for emergency cases	Paid in Full												
Treatment Abroad- where treatment costs arising from a condition that warrants treatment overseas because the treatment is not available or not safe to undertake locally-(Must be Preauthorized and Medical Report provided Prior)	Cover is on reimbursement basis except in our panel in India. We provide an economy return fare only within Africa and India for patient and one accompanying member								Cover is on reimbursement basis except in our panel in India.				
Terrorism and political violence - Covers medical expenses arising from terrorism/political violence where the insured is the victim	2,000,000						FULL LIMIT						
Management for substance dependency (employee only and acquired during employment term)	150,000	100,000				75,000					50,000		
Attempted Suicide & Intentional Self Injury	150,000	100,000				75,000					50,000		

OTHER BENEFITS INCLUDED WITHIN INPATIENT COVER(KSHS)

PLANS	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 5	OPTION 6	OPTION 7	OPTION 8	OPTION 9	OPTION 10	OPTION 11	OPTION 12	OPTION 13
Overall Annual Limit	10 Million	7.5 Million	5 Million	4 Million	3 Million	2 Million	1.5 Million	1 Million	750,000	500,000	400,000	300,000	250,000
Waiting periods	No waiting period												

OUTPATIENT BENEFIT - OPTIONAL (Standalone) KSHS

PLANS	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 5	OPTION 6	OPTION 7	OPTION 8	OPTION 9	OPTION 10	OPTION 11	OPTION 12
Overall Annual Limit	500,000	450,000	400,000	350,000	300,000	250,000	200,000	150,000	100,000	75,000	50,000	30,000
Copayment	A co-pay of . 2,000 shall be applicable at Aga Khan Hospitals, Mp shah Hospital, AAR hospital, Karen hospital, Nairobi hospital & Gertrude's Children hospital. No co-pay at all other providers. Co-pay may be waived with a 10% loading on rates on inception or renewal											
Pre-Existing, Chronic and cancer	Full limit											
HIV/AIDS related treatment including Anti-Retroviral therapy	Full limit											
Consultation Fees (Panel Doctor)-Professional fees including primary consultations, diagnostic examinations, injections and procedures performed at a primary care level in a Doctor's consultation Room	2,200/per consultation for general practitioners and 4,000/per consultation for specialists.											
Prescribed drugs/Medicine and dressing and procedures	Full limit											
Outpatient surgeries	Full limit											
Diagnostic Laboratory services (Pathology, blood Transfusion, Haemodialysis) etc	Full limit											
Physiotherapy (by a registered physiotherapist) on referral by a physician subject to pre-authorization	Full limit											

OUTPATIENT BENEFIT - OPTIONAL (Standalone) (KSHS)

PLANS	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 5	OPTION 6	OPTION 7	OPTION 8	OPTION 9	OPTION 10	OPTION 11	OPTION 12
Overall Annual Limit	500,000	450,000	400,000	350,000	300,000	250,000	200,000	150,000	100,000	75,000	50,000	30,000
Radiology services-X ray, Electrocardiography (ECG) computerized tomography, MRI and CT-scans (net of NHIF)-Subject to Pre-authorization	Full limit											
Prescribed referrals to specialist by GP (Doctors on Panel)	Full limit											
Counselling upon referral by a General Practitioner	Full limit											
Gynaecological Ailments & Treatments	Full limit											
Annual Health Check-Ups (Employee & Spouse- must be preauthorized)	50,000	45,000	40,000	35,000	30,000	25,000	20,000	15,000	10,000	7,500	5,000	5,000
Vaccinations for children up to 2 years(KEPI and Baby Friendly Vaccination)	30,000											
Travel & Private vaccines	10,000	10,000	10,000	10,000	10,000	8,750	7,000	5,250	3,500	2,625	1,750	1,050
Family planning	10,000	10,000	10,000	10,000	10,000	8,750	7,000	5,250	3,500	2,625	1,750	1,050
Hearing Aids	50,000	45,000	40,000	35,000	30,000	25,000	20,000	15,000	10,000	7,500	5,000	3,000

MATERNITY BENEFIT - OPTIONAL (Standalone) (KSHS)

PLANS	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 5	OPTION 6	OPTION 7
Annual Benefit limit per member and spouse in each family	300,000	250,000	200,000	150,000	100,000	75,000	50,000
Normal Deliveries, subsequent CS, elective CS	Full limit						
First Emergency C-Section in the lifetime of a female employee/spouse (delivery only) is covered within the inpatient limit	300,000	250,000	200,000	150,000	100,000	75,000	50,000
Maternity complications including PRE-ECLAMPSIA, ECTOPIC PREGNANCY shall be covered within the inpatient limit	300,000	250,000	200,000	150,000	100,000	75,000	50,000
Pre & post-natal care	Covered under the outpatient limit						
Maternity Waiting period Normal Deliveries, subsequent CS, elective CS, First CS and maternity complications	NO WAITING PERIODS						

ROUTINE DENTAL (OPTIONAL) (Standalone) (KSHS)

ROUTINE DENTAL (OPTIONAL)	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 5	OPTION 6	OPTION 7	OPTION 8
Annual Benefit Limit	50,000	40,000	30,000	20,000	15,000	10,000	7,500	5,000
Extraction, fillings, X-rays, root canal procedures, prescribed scaling, and polishing	Full limit							
Dental exclusions	Orthodontics, Dentures, Caps, Crowns, Braces, Self-prescribed scaling and polishing							
Dental WAITING PERIOD	No waiting period							

OPTICAL BENEFIT – OPTIONAL (Standalone) (KSHS)

ROUTINE OPTIONAL (OPTIONAL)	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 5	OPTION 6	OPTION 7	OPTION 8
Annual Benefit Limit	50,000	40,000	30,000	20,000	15,000	10,000	7,500	5,000
Spectacle lenses and contact lenses.	Full limit							
Optometrist consultations & eye examination	Full limit							
Frames Limit (One pair every 2 years)	25,000	20,000	15,000	10,000	7,500	5,000	3750	2,500
Optical exclusions	Laser correction of eyesight, Plano (flat) lenses							
OPTICAL WAITING PERIOD	No waiting period							

LAST EXPENSE BENEFIT – FREE (Standalone) (KSHS)

The sum assured will be payable within 48 hours of confirmation of death of a member of the scheme by the employer.

LAST EXPENSE PER PERSON	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 5	OPTION 6	OPTION 7	OPTION 8	OPTION 9	OPTION 10	OPTION 11	OPTION 12	OPTION 13
Overall Annual Limit	10 Million	7.5 Million	5 Million	4 Million	3 Million	2 Million	1.5 Million	1 Million	750,000	500,000	400,000	300,000	250,000
Last expense limit	200,000	150,000	100,000	100,000	100,000	100,000	100,000	100,000	50,000	50,000	50,000	50,000	50,000

Claim requirement:

1. Letter /mail from HR reporting death
2. Beneficiary where principal member has passed on
3. Copy of a death certificate /Stamped copy of burial permit
4. Copy of front face of ATM /Cancelled cheque (for the beneficiary)
5. Fully completed First Assurance EFT form

GROUP PERSONAL ACCIDENT.**Group Personal Accident Cover (Principal & Spouse)**

PLANS	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 5	OPTION 6	OPTION 7
Personal Accident -Death	5,000,000	4,000,000	2,500,000	1,000,000	750,000	500,000	250,000
PTD	5,000,000	4,000,000	2,500,000	1,000,000	750,000	500,000	250,000
TTD (weekly benefit - Maximum 52 weeks)	20,000	15,000	12,500	10,000	5,000	2500	
Premium (Exclusive of levies)	5,100	2,075	1,375	1,050	775	513	263

Exclusions:

1. Death or injury while the insured person is engaged in the following activities is excluded.
2. Manufacture of fireworks or explosives
3. Sinking of air, water or gas wells
4. Construction and maintenance of coffer dam
5. Airline crew & ship or boat crew
6. Racing, Rallies and speed testing
7. Naval, military, police or Air force operations
8. Professional sports
9. Diving
10. Mining

Subject to policy terms and conditions.

Waiting periods: No waiting periods

SPECIAL CLAUSES

- **Geographical scope:** East Africa.
- **Medical examination on enrolment:** Required for members over 60 years of age.
- **Panel of providers:** Open panel.
- **Reimbursement:** 90 % subject to reasonable and customary charges for off-panel visits.
- **Mode of Identification:** virtual cards.
- **Contribution to NHIF is mandatory.**
- **Cover outside geographical scope** shall be covered for medical emergencies on reimbursement subject to prior notification up to any 90 days per visit.
- **Treatment costs** arising from a condition that warrants treatment overseas because the treatment is not available in Kenya will be covered on **reimbursement (except at our approved panel in India where cover will be on credit).**
- **Local Ambulance services** for transportation of a sick Member for treatment from an area where facilities for adequate care do not exist to the next available hospital or licensed medical facility will be covered within the annual inpatient limit.

Note: These are general clauses. Any other terms and conditions may be included in the policy document.

CREDIT CLAIMS

Members shall use the virtual smart cards for identification at the selected service providers.

- They will be required to complete the First Assurance claim form provided at the appointed hospital / clinic.
- Upon seeking treatment, both the member and doctor must sign the claim form

REIMBURSEMENT CLAIMS

First Assurance Claim forms must be completed by both the patient and attending doctor for each course of treatment and the following forwarded to First Assurance:

- Original receipts
- Prescription Copy for drugs dispensed
- Lab/ X-ray requests
- Referral letters where applicable
- Invoices where applicable
- Duly filled EFT Bank form

- Claim form fully filed and signed
- Copy of front face of ATM (Must indicate payee's name and details)

All reimbursement claims shall be settled within 10 working days from the date of receipt

ADMISSIONS PROCEDURES

Scheduled Admissions

The member needs to contact First Assurance prior to the admission via our 24/7 call center number **0709 544 000** or email: medical@firstassurance.co.ke.

All scheduled admissions are payable less of NHIF rebate including Surgical Supra cover rebate. The Hospital will assist in facilitation of the NHIF approval.

Emergency Admissions

The hospital shall notify First Assurance within 24 hours of admission & a letter of undertaking forwarded directly to the hospital.

POLICY EXCLUSIONS

- Costs of treatment related to impotence.
- Expenses recoverable under any other insurance
- Cosmetic surgery, massage, or beauty treatment
- Naval, Military and Air force operations
- Riding or driving in any kind of race.
- Participation in extreme sports
- Experimental treatment.
- Stays at sanatoria, old age homes, places of rest etc.
- Active participation in war, invasion, civil war, participation in riots
- Chiropractors, acupuncturists, or herbalist's treatment
- Treatment related to hormonal imbalance.
- Treatment other than by a registered medical practitioner, self-referred/prescribed treatment.
- Nutritional supplements unless prescribed as part of medical treatment.
- Diagnostic equipment (e.g. Glucometers, BP machines etc.)

Note: These are general exclusions. Any other terms and conditions may be included in the policy document.

RATES

A guide on how to calculate premiums.

Step 1: Calculate the average of principal members and spouses in the group and determine the applicable age band e.g if average age is 35.5 years then use 30-39

Step 2: Select the benefit limits and applicable rates.

Step 3: Add government levies (Training levy – 0.25% & Policy holder fund – 0.2%), smart fees (Kshs. 870 for new members & Kshs. 696 for members with cards) and finally add stamp duty (Kshs. 40)

Step 4: Get Quote.

AGE 18 - 29							
Inpatient (Kshs)							
Limit	M	M+1	M+2	M+3	M+4	M+5	Additional Dependant
10,000,000	45,533	64,404	75,707	84,675	93,972	99,535	14,361
7,500,000	43,443	61,449	72,233	80,789	89,660	94,968	13,702
5,000,000	40,498	57,284	67,337	75,313	83,583	88,530	12,773
4,000,000	38,979	55,134	64,810	72,487	80,446	85,208	11,219
3,000,000	38,381	54,288	63,816	71,375	79,212	83,901	11,047
2,000,000	34,358	48,598	57,127	63,893	70,909	75,106	9,889
1,500,000	30,347	42,925	50,458	56,435	62,631	66,339	9,571
1,000,000	27,985	39,583	46,530	52,042	57,756	61,175	8,054
750,000	26,652	37,698	44,315	49,564	55,006	58,262	7,671
500,000	25,383	35,903	42,204	47,204	52,386	55,487	7,306
400,000	22,675	32,073	37,702	42,168	46,798	49,568	6,526
300,000	20,680	29,251	34,384	38,457	42,680	45,206	5,952
250,000	19,321	27,329	32,126	35,931	39,877	42,237	5,561

AGE 18 - 29							
Outpatient (Kshs)							
Limit	M	M+1	M+2	M+3	M+4	M+5	Additional Dependant
500,000	93,134	128,526	155,534	182,544	206,294	231,685	25,790
450,000	83,156	114,755	138,870	162,986	184,191	206,861	23,027
400,000	69,296	95,629	115,725	135,822	153,492	172,384	19,189
350,000	57,270	79,033	95,641	112,249	126,853	142,467	15,858
300,000	52,063	71,848	86,946	102,045	115,321	129,515	14,417
250,000	50,061	69,084	83,602	98,120	110,886	124,534	13,862
200,000	45,727	63,103	76,364	89,625	101,286	113,752	12,662
150,000	36,582	50,483	61,091	71,700	81,029	91,002	10,130
100,000	29,352	40,506	49,018	57,530	65,015	73,018	8,128
75,000	26,684	36,824	44,562	52,300	59,105	66,380	7,389
50,000	24,063	33,206	40,185	47,163	49,999	49,999	6,663
30,000	19,795	27,318	29,999	29,999	29,999	29,999	5,481

AGE 30-39							
Inpatient (Kshs)							
Limit	M	M+1	M+2	M+3	M+4	M+5	Additional Dependant
10,000,000	60,542	85,634	100,663	112,587	124,949	132,345	14,361
7,500,000	57,764	81,704	96,044	107,420	119,215	126,272	13,702
5,000,000	53,848	76,166	89,534	100,139	111,134	117,713	12,773
4,000,000	51,827	73,308	86,174	96,381	106,964	113,296	11,219
3,000,000	51,032	72,183	84,852	94,903	105,323	111,557	11,047
2,000,000	45,683	64,617	75,958	84,955	94,283	99,864	9,889
1,500,000	40,350	57,074	67,091	75,038	83,277	88,206	9,571
1,000,000	37,209	52,631	61,868	69,197	76,794	81,340	8,054
750,000	35,437	50,125	58,922	65,902	73,138	77,467	7,671
500,000	33,750	47,738	56,116	62,763	69,655	73,778	7,306
400,000	30,149	42,645	50,130	56,068	62,224	65,907	6,526
300,000	27,496	38,892	45,718	51,134	56,748	60,107	5,952
250,000	25,690	36,338	42,716	47,776	53,021	56,160	5,561

AGE 30-39

Outpatient (Kshs)

Limit	M	M+1	M+2	M+3	M+4	M+5	Additional Dependant
500000	99,991	137,989	166,986	195,984	221,482	248,743	27,688
450000	89,278	123,204	149,094	174,986	197,752	222,092	24,722
400000	74,398	102,670	124,245	145,821	164,793	185,076	20,602
350000	61,486	84,851	102,682	120,514	136,193	152,956	17,026
300000	55,897	77,138	93,347	109,558	123,812	139,051	15,478
250000	53,747	74,171	89,757	105,344	119,050	133,702	14,883
200000	49,094	67,749	81,986	96,224	108,743	122,127	13,594
150000	39,275	54,200	65,589	76,979	86,994	97,702	10,876
100000	31,513	43,488	52,627	61,766	69,802	78,393	8,726
75000	28,648	39,535	47,843	56,151	63,456	71,267	7,933
50000	25,834	35,651	43,143	49,999	49,999	49,999	7,154
30000	21,253	29,999	29,999	29,999	29,999	29,999	5,885

AGE 40-49

Inpatient (Kshs)

Limit	M	M+1	M+2	M+3	M+4	M+5	Additional Dependant
10000000	71,634	101,324	119,107	133,216	147,843	156,594	19,010
7500000	68,347	96,675	113,642	127,103	141,059	149,408	18,138
5000000	63,714	90,122	105,939	118,487	131,497	139,281	16,908
4000000	61,324	86,740	101,963	114,041	126,563	134,054	14,851
3000000	60,383	85,409	100,399	112,291	124,621	131,998	14,623
2000000	54,053	76,457	89,875	100,521	111,558	118,162	13,090
1500000	47,743	67,531	79,384	88,787	98,535	104,368	12,670
1000000	44,027	62,275	73,204	81,875	90,865	96,244	10,662
750000	41,931	59,309	69,718	77,976	86,538	91,661	10,154
500000	39,934	56,485	66,398	74,263	82,417	87,296	9,671
400000	35,674	50,459	59,315	66,341	73,625	77,983	8,639
300000	32,534	46,019	54,095	60,503	67,146	71,121	7,879
250000	30,398	42,996	50,542	56,529	62,736	66,450	7,361

AGE 40 - 49								
Outpatient (Kshs)								
Limit	M	M+1	M+2	M+3	M+4	M+5	Additional Dependant	
500000	121,362	167,480	202,675	237,870	268,818	301,905	35,872	
450000	108,359	149,536	180,959	212,384	240,016	269,558	32,028	
400000	90,299	124,613	150,800	176,987	200,014	224,631	26,690	
350000	74,627	102,986	124,628	146,270	165,300	185,646	22,058	
300000	67,843	93,624	113,298	132,973	150,273	168,769	20,053	
250000	65,234	90,023	108,940	127,859	144,493	162,278	19,281	
200000	59,586	82,229	99,509	116,789	131,984	148,229	17,612	
150000	47,669	65,783	79,607	93,431	105,587	118,583	14,090	
100000	38,248	52,783	63,875	74,967	84,720	95,148	11,305	
75000	34,771	47,984	58,068	68,152	74,999	74,999	10,278	
50000	31,356	43,271	49,999	49,999	49,999	49,999	9,268	
30000	25,795	29,999	29,999	29,999	29,999	29,999	7,624	

AGE 50-59								
Inpatient (Kshs)								
Limit	M	M+1	M+2	M+3	M+4	M+5	Additional Dependant	
10000000	88,648	125,390	147,396	164,856	182,957	193,787	19,010	
7500000	84,580	119,636	140,633	157,291	174,562	184,894	18,138	
5000000	78,847	111,527	131,100	146,629	162,729	172,362	16,908	
4000000	75,889	107,342	126,181	141,127	156,623	165,894	14,851	
3000000	74,724	105,695	124,245	138,962	154,220	163,348	14,623	
2000000	66,892	94,616	111,221	124,396	138,054	146,226	13,090	
1500000	59,083	83,571	98,238	109,874	121,939	129,157	12,670	
1000000	54,484	77,065	90,591	101,321	112,447	119,103	10,662	
750000	51,889	73,396	86,277	96,497	107,092	113,431	10,154	
500000	49,418	69,901	82,169	91,902	101,992	108,030	9,671	
400000	44,146	62,444	73,403	82,097	91,112	96,505	8,639	
300000	40,262	56,948	66,943	74,873	83,094	88,012	7,879	
250000	37,617	53,208	62,547	69,956	77,637	82,232	7,361	

AGE 50-59								
Outpatient (Kshs)								
Limit	M	M+1	M+2	M+3	M+4	M+5	Additional Dependant	
500000	137,725	190,061	230,001	269,942	305,062	342,610	35,872	
450000	122,969	169,697	205,358	241,020	272,377	305,902	32,028	
400000	102,474	141,415	171,131	200,850	226,981	254,918	26,690	
350000	84,689	116,872	141,431	165,991	187,588	210,676	22,058	
300000	76,990	106,247	128,574	150,901	170,534	191,524	20,053	
250000	74,029	102,160	123,628	145,097	163,975	184,157	19,281	
200000	67,620	93,316	112,925	132,536	149,779	168,214	17,612	
150000	54,096	74,653	90,340	106,028	119,823	134,571	14,090	
100000	43,405	59,900	72,487	85,075	96,143	107,977	11,305	
75000	39,459	54,454	65,897	74,999	74,999	74,999	10,278	
50000	35,583	49,105	49,999	49,999	49,999	49,999	9,268	
30000	29,273	29,999	29,999	29,999	29,999	29,999	7,624	

AGE 60-65								
Inpatient (Kshs)								
Limit	M	M+1	M+2	M+3	M+4	M+5	Additional Dependant	
10000000	112,235	158,753	186,615	208,719	231,637	245,348	23,825	
7500000	107,085	151,468	178,052	199,142	221,008	234,090	22,732	
5000000	99,827	141,201	165,982	185,643	206,027	218,223	21,191	
4000000	96,081	135,902	159,754	178,677	198,296	210,034	16,427	
3000000	94,606	133,817	157,303	175,936	195,254	206,811	16,175	
2000000	84,690	119,791	140,815	157,494	174,787	185,133	14,480	
1500000	74,804	105,807	124,377	139,109	154,383	163,522	15,879	
1000000	68,981	97,571	114,695	128,281	142,366	150,793	11,794	
750000	65,696	92,924	109,233	122,172	135,587	143,612	11,232	
500000	62,568	88,499	104,032	116,354	129,130	136,774	10,697	
400000	55,893	79,058	92,933	103,941	115,354	122,183	9,556	
300000	50,974	72,101	84,755	94,795	105,203	111,430	8,715	
250000	47,626	67,366	79,189	88,569	98,294	104,112	8,143	

AGE 60 - 65

Outpatient (Kshs)

Limit	M	M+1	M+2	M+3	M+4	M+5	Additional Dependant
500000	119,859	165,405	200,164	234,924	265,488	298,165	33,190
450000	107,017	147,683	178,718	209,753	237,043	266,218	29,634
400000	89,180	123,069	148,931	174,794	197,536	221,849	24,695
350000	73,703	101,710	123,084	144,458	163,253	183,346	20,409
300000	67,003	92,464	111,894	131,326	148,412	166,678	18,554
250000	64,426	88,908	107,591	126,275	142,703	160,268	17,840
200000	58,848	81,210	98,276	115,342	130,349	146,392	16,295
150000	47,078	64,968	78,621	92,274	104,279	117,114	13,036
100000	37,775	52,129	63,083	74,038	83,671	93,969	10,460
75000	34,340	47,390	57,349	67,308	74,999	81,999	9,509
50000	30,967	49,999	49,999	49,999	49,999	49,999	8,575
30000	25,475	29,999	29,999	29,999	29,999	29,999	7,054

Dental (Kshs)

Limit	M	M+1	M+2	M+3	M+4	M+5	Additional Dependant
50000	13,174	18,440	21,073	23,710	26,343	28,976	2,634
40000	10,539	14,752	16,858	18,968	21,074	23,181	2,107
30000	7,904	11,064	12,644	14,226	15,806	17,386	1,580
25000	6,587	9,220	10,536	11,855	13,171	14,488	1,317
20000	6,750	9,448	10,797	12,149	13,498	14,847	1,350
15000	5,034	7,046	8,052	9,060	10,066	11,072	1,006
10000	3,278	4,588	5,243	5,900	6,555	7,210	655
7500	1,976	2,766	3,161	3,556	3,951	4,346	395
5000	1,317	1,844	2,107	2,371	2,634	2,898	263

Optical (Kshs)

Limit	M	M+1	M+2	M+3	M+4	M+5	Additional Dependant
50000	13,925	19,491	22,274	25,062	27,845	30,628	2,784
40000	11,140	15,593	17,819	20,049	22,276	24,502	2,227
30000	8,355	11,695	13,364	15,037	16,707	18,377	1,671
25000	6,962	9,745	11,137	12,531	13,922	15,314	1,392
20000	7,135	9,987	11,413	12,841	14,267	15,693	1,427
15000	5,320	7,447	8,510	9,575	10,638	11,702	1,064
10000	3,464	4,849	5,541	6,235	6,927	7,620	693
7500	2,089	2,924	3,341	3,759	4,177	4,594	418
5000	1,392	1,949	2,227	2,506	2,784	3,063	278

Maternity

Limit	M
300000	58,135
250000	48,446
200000	38,757

Limit	M
150000	29,068
100000	19,379
75000	14,533
50000	9,689

PREMIUM PAYMENT OPTIONS

Please note the insurance act section 156 requires payment of premium at inception or renewal date of the policy (cash & carry)

BANK DETAILS

- Bank Name: Absa Bank Kenya Plc
- Account Name: First Assurance Company Limited
- Account Number: 2034405878
- Branch code: 106
- Branch Name: Sarit Centre
- Swift code: BARCKENX

IPF PAYMENT:

- Maximum of 4 installments.

PAYMENT PLAN:

For premiums above 1,000,000. We allow up to a maximum of 3 installments:

- 40% on inception.
- 30% after 30 days.
- 30% after 60 days.
-

EMERGENCY CONTACTS

- For Quotations: Medicalunderwriting@firstassurance.co.ke
- For Medical emergencies: medical@firstassurance.co.ke
- 24 hour call center: We have a team of nurses and clinical staffs 24 hrs to attend to any query or give guidance-Pilot numbers 0709-122000 / 0709-544000

Important Notes.

Service Providers

First Assurance has a Countrywide Network of medical providers – hospitals, pharmacies, clinics, doctors and specialists for BOTH In & Out Patient. Appointed Specialists will be available on direct access for members. All other specialists will only be accessed on referral by a General Practitioner. **Inclusion and deletion of service providers will be done at the discretion of client and FACL. First Assurance is flexible and are willing to accommodate the current client panel after vetting the providers and reviewing their documents and costing. If agreeable, we shall appoint the providers and advise client.** Members who chose to use non FACL panel providers will be required to settle the doctor's bill in full and seek reimbursement. **Reimbursement is subject to FACL panel doctors' rates.**

Access to Medical Services

Members will have **direct access to FA's comprehensive panel of service providers**. See attached list. Treatment will only be available at the appointed service providers and FA will not be liable for any bills incurred outside the panel unless authorization is given.

- Each member will be issued with a **digital Smart card for identification** and to enable them access services.
- Payments for non-panel providers may be considered subject to **the FA panel doctors' rates and Kenya Medical Practitioners and dentist Board rates.**
- All bills incurred at the appointed service providers will be forwarded directly to FA for settlement.
- For members who may travel out of station and may require medical treatment where a provider is not available, Reimbursement claims will be allowed. Claims will be settled on provision of the following documents:

Staff Welfare Programmes

Wellness Programmes and Health Management

Services focused on the promotion or maintenance of good health rather than the correction of poor health - **Integrated Employee Wellness Program**. This shall include;

- First Assurance shall work together with client to draw up a wellness programme based on the needs of the staff.
- We organise health camps regularly for our clients where we bring our providers to your premises to do health checks such as blood pressure, blood sugar, BMI's and also offer health advice.
- We have a robust health management programme where which we enrol members who have chronic conditions and refer them to specialists who will manage them.

Chronic Disease Management (CDM)

- Identification & enrolment to chronic disease management program
- Individualized Case Management for monitoring of compliance and outcomes
- Specialist Referral
- Health Education and Awareness
- Self-Care Coaching

Specialist Peer Review

- Occupational Health Management (OHM) – The intended outcomes of the OH&S management system are to prevent work-related injury and ill health to workers and to provide safe and healthy workplaces; Consequently, it is critically important for the organization to eliminate hazards and minimize OH&S risks by taking effective preventative an protective measures.

Health Education (including Health talks)

Disease outbreak alerts to our members Drug Delivery Program

- Members on maintenance drugs for chronic conditions will be able to enroll to our drug delivery program. This program aims to capture all members who are on repeat prescriptions. The enrolled members will have their prescriptions filled and delivered to their offices or homes by the reputable participating pharmacies.
- The members will thus benefit from improved benefit management – reduced claims amount due to discounts on drugs and increased convenience by saving the members time spent at hospitals.

X-press Pass Program-

- The members will thus benefit from improved benefit management – reduced claims amount due direct over the counter drug collection at select pharmacies without the need to under-go unnecessary lab testing and long wait times thus eased convenience by saving the members time spent at hospitals.

Provider panel

- Members shall have access to the First Assurance open panel.
- To access the panel, please scan the below QR code.



Our branches



Head Office

First Assurance House, Clyde Gardens,
Gitanga Road, Lavington
P.O Box 30064 - 00100 Nairobi, Kenya
Mobile : 020-269 2250160170180, 020-358 1135188
0709-544 000
Email:hoinfo@firstassurance.co.ke
www.firstassurance.co.ke



Nakuru Branch

Westside Mall 2nd Floor
P.O Box 18002-20100 Nakuru, Kenya
Tel: +254 20 2343989/94,
Email:nkrinfo@firstassurance.co.ke



Satellite Offices

Eldoret Branch-Absa Building, Uganda road
Tel: 0799 342 402
Email:eldinfo@firstassurance.co.ke

Nyeri Branch -Absa Building, Kenyatta road
Tel : 0716 922 415
Email:nyerinfo@firstassurance.co.ke



Town Office

Queensway Building 4th Floor
Tel: 2219852/3/4/5, Mobile: 0735 605 480
Email:cbdinfo@firstassurance.co.ke



Kisumu Branch

First Assurance, United Mall, Ground Floor
Kisumu-Kakamega Road
P.O Box 186-40100, Kisumu, Kenya
Tel: (020) 2030576, (020) 2082507
Email:ksminfo@firstassurance.co.ke



Mombasa Branch

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P.O Box 43559 Mombasa, Kenya
Tel: 041-4476494/4476700, (020) 2684011/12,
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