Because Your Wellbeing Matters

Understanding Your Medical Insurance Cover, Powered by Kenbright and Underwritten by Jubilee Health Insurance

About Kenbright

Kenbright is a niche player in the financial sector space having operated in kenya for over 30 years. Our team of experts have experience offering financial services to both private and public institutions within different markets regionally and internationally. We have the unique ability to apply our expertise to the specific needs of our clients, regardless of their geographic location and core business practice. Our headquarters are in Nairobi Kenya with focus to provide services to the East and Central African Market. Our Other Branches are in Uganda, Tanzania and Malawi.

1993	2005	2015	2018	2024	2025
Kenbright Insurance Brokers Limited	Kenbright Health Administrators Limited	Kenbright Actuarial and Financial Services Limited	Kenbright Reinsurance Brokers Limited	Kenbright Pensions	Kenbright Investments

VALUES

- Integrity
- Professionalism
- Client Service
- Innovation
- Teamwork
- Client Satisfaction

MISSION

We are committed to providing our clients with Innovative, Sustainable Risk and Financial Advisory Solutions in a timely manner, while maintaining client trust through professional excellence.

VISION

Kenbright's vision is to be a Global Leader in Providing Unique Risk and Financial Solutions. We also seek to be an Innovative Financial Partner.

The Role of Kenbright

Negotiating Insurance Premium & Benefits

- Kenbright has sourced for quotations from local insurance providers with a view to get the best deal for Client– We are able to negotiate improved terms based on the client's budget

Technical Support on Insurance Clauses

- Insurance benefits sub-limits, exclusions and Gap analysis

Employees Wellness

- Provision of health talks, member education, health check ups and service meetings

Risk Management

- Regular analysis of the Client employee benefits program , industry trends and advise client management on appropriate action

Panel of Providers

- Regular analysis of the Client employee benefits program , industry trends and advise client management on appropriate action

24hr call Centre

- Kenbright has a 24hr call center, to get assistance

Why Jubilee

Trusted Expertise:

Jubilee is the leading health insurer in East Africa with decades of experience in managing comprehensive medical schemes.

Extensive Provider Network:

Over 800 accredited medical facilities across Kenya and the East African region, including top hospitals, doctors, and laboratories.

Efficient Claims & Support:

Seamless cashless access and fast claim settlement backed by responsive customer service.

Innovative Health Solutions:

Tailored medical plans designed to meet the diverse needs of individuals and organizations.

Proven Financial Strength:

Backed by strong financial stability, ensuring reliable cover when it matters most.

Insured Benefit Limits

ANNUAL BENEFITS (KES)							
	Options	Inpatient	Outpatient	Dental	Optical	Maternity	Covid-19 in IP
Benefits Limits	1	1,000,000	100,000	20,000	20,000	150,000	500,000
	2	2,000,000	200,000	20,000	20,000	500,000	500,000
	3	5,000,000	300,000	20,000	20,000	500,000	500,000

INPATIENT BENEFIT (STAND ALONE)

SCOPE OF COVER	BENEFITS		
Cover Type	**Per Family**	**Per Family**	**Per Person**
Annual Benefit Limit	**5,000,000**	**2,000,000**	**1,000,000**
Hospital Accommodation (Bed Type) per night. **SHIF applicable on the limit shown**	Standard Private Room up to KES 20,000	Standard Private Room up to KES 14,500	Standard Private Room up to KES 12,500
Acute Illness and Accidents	Covered up to full Inpatient Limit	Covered up to full Inpatient Limit	Covered up to full Inpatient Limit
Pre-existing, Chronic, HIV & Aids (including ARV's)- sub-limit of inpatient limit	1,500,000	800,000	400,000
Newly Diagnosed Chronic Conditions	Covered up to full Inpatient Limit	Covered up to full Inpatient Limit	Covered up to full Inpatient Limit
Pre-terms, neonatal & Congenital conditions - sub-limit of inpatient limit	350,000	200,000	150,000
Inpatient dental accidents	Covered up to full Inpatient Limit	Covered up to full Inpatient Limit	Covered up to full Inpatient Limit
Inpatient Optical accidents	Covered up to full Inpatient Limit	Covered up to full Inpatient Limit	Covered up to full Inpatient Limit
Inpatient non-accidental Dental ailments - sub- limit of inpatient limit	350,000	200,000	150,000
Inpatient non-accidental Optical ailments Excluding laser eye surgery	350,000	200,000	150,000
Last Expense Benefit per person (both principal members and their defendants) per year on stand-alone basis	150,000	100,000	100,000

INPATIENT BENEFITS CONT'D

SCOPE OF COVER	BENEFITS		
Post Hospitalization visits/review up to a max of 30 days after discharge sublimit of in-patient	50,000	35,000	30,000
Day care surgery	Covered	Covered	Covered
Psychiatry conditions sublimit of inpatient	Covered up to 25% of Inpatient	Covered up to 25% of Inpatient	Covered up to 25% of Inpatient
Local emergency road and air ambulance leading to hospitalization	Covered	Covered	Covered
Overseas Evacuation for conditions where treatment is not locally available	Covered	Covered	Covered
Lodger fees	12 Years	12 Years	12 Years
Medical emergency cover outside Jubilee Health geographical scope while on Business or	Covered	Covered	Covered
Overseas travel for six (6) weeks per trip	Covered	Covered	Covered
Physicians, specialists, surgical fees including anesthetist fees, theatre charges, HDU, CCU & ICU, Diagnostic Tests, Physiotherapy as part of inpatient treatment.	Covered	Covered	Covered
Post Hospitalization visits/review up to a max of 30 days after discharge sublimit of in-patientz	50,000	35,000	30,000
Day care surgery	Covered	Covered	Covered
psychiatry conditions sublimit of inpatient	Covered up to 25% of Inpatient	Covered up to 25% of Inpatient	Covered up to 25% of Inpatient
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Medical emergency cover outside Jubilee Health geographical scope while on Business or	Covered	Covered	Covered
Overseas travel for six (6) weeks per trip	Covered	Covered	Covered
Physicians, specialists, surgical fees including anesthetist fees, theatre charges, HDU, CCU & ICU, Diagnostic Tests, Physiotherapy as part of inpatient treatment.	Covered	Covered	Covered

INPATIENT BENEFITS CONT'D

SCOPE OF COVER	BENEFITS		
Inpatient MRI/CT scans and PET Scans (Authotization Required)	Covered	Covered	Covered
Surgical appliances/internal prosthesis	Covered	Covered	Covered
Reconstructive surgery following an accident	Covered	Covered	Covered
1st Emergency CS	300,000	200,000	150,000
Maternity related complications	300,000	200,000	150,000
Ectopic Pregnancy - sub-limit of inpatient limit	300,000	200,000	150,000
Pain management - Covered within inpatient subject to pre-existing & chronic sub benefit	Covered	Covered	Covered
External appliances (Hearing aids excluding hearing test, frames, corsets, Wheelchairs & crutches) shall be covered subject to pre-authorization.	150,000	100,000	100,000
Male Circumcision for members aged 15 years and below	100,000	100,000	75,000

OUTPATIENT BENEFITS

OUTPATIENT BENEFIT (STANDALONE)			
Cover Type	**Per Family**	**Per Family**	**Per Family**
Annual Benefit Limit	**300,000**	**200,000**	**100,000**
Newly Diagnosed Chronic Conditions	Covered	Covered	Covered
Pre-existing, Chronic & HIV (including ARV's)	Covered	Covered	Covered
KEPI, baby friendly vaccines Covered for children up to 1.5 years and below	Covered	Covered	Covered
General check-ups (including PSA and Pap smear)	Covered up to 30,000	Covered up to 20,000	Covered up to 10,000
Ante-natal and post-natal	Covered	Covered	Covered
Outpatient Ambulance services	Covered	Covered	Covered
Prescribed supplements	Covered	Covered	Covered
Prescribed drugs and dressing	Covered	Covered	Covered
Prescribed physiotherapy	Covered	Covered	Covered
Reimbursements	100%	100%	100%
Diagnostic Laboratory and Radiology services	Covered	Covered	Covered
Consultation Limit	General practitioners Ksh. 3,000 Specialist- Kshs. 4,000	General practitioners Ksh. 3,000 Specialist- Kshs. 4,000	General practitioners Ksh. 3,000 Specialist- Kshs. 4,000
Co-pay	Nil	Nil	Nil

DENTAL

DENTAL BENEFIT (STAND ALONE)	
Cover Type	Per Family
Annual Benefit Limit	**20,000**
Benefit Description	Dental consultations, gum disease treatment, Extractions, Fillings (except precious metals), Scaling, Dental X-Rays and Dental Prescriptions.
Exclusions	Crowns, Caps, Bridges, Orthodontics, Dentures, Self- prescribed scaling

OPTICAL

OPTICAL BENEFIT (STAND ALONE)	
Cover Type	Per Family
Annual Benefit Limit	**20,000**
Benefit Description	Eyeglasses, Prescription of frames, Routine optical consultations, optometrist consultations and eye examinations, Prescribed lenses, Optical Prescriptions will be covered within the Optical benefit
Frames capping (Frames limited to one pair for every two years)	Up to 50% of the Optical Limit
Exclusions	Laser correction of eyesight, Antiglare & photochromatic lenses, Blue block and plano lenses

MATERNITY

MATERNITY BENEFIT (STANDALONE)			
Cover Type	Option 1: Per family (principal/spouse only)	Option 2: Per family (principal/spouse only)	Option 3: Per family (principal/spouse only)
Annual Benefit Limit	500,000	500,000	150,000
Normal deliveries including related complications	500,000	500,000	150,000
All Caesarean delivery including related complications	500,000	500,000	150,000

COVID-19

COVID-19 BENEFIT	
Overall Annual Group Limit	**2,000,000**
Inpatient Hospitalization Limit per family (within Inpatient)	500,000 or the IP limit, whichever is lower.
Testing within Outpatient	Covered up to Kes 15,000 in OP
Treatment within Outpatient (Including Supplements)	Covered up to full outpatient limit

EXCLUSIONS

EXCLUSIONS	DESCRIPTION
1	Intentional self-injury, suicide or attempted suicide, intoxication, drunkenness.
2	Expenses recoverable under any other insurance.
3	Cosmetic surgery, massage or beauty treatment.
4	Naval, Military and Air force operations.
5	Riding or driving in any kind of race.
6	Participation in extreme sports.
7	Stays at sanatoria, old age homes, places of rest etc.
8	Injury sustained while in a state of insanity.
9	Chiropractors, acupuncturists or herbalist's treatment.
10	STD's.
11	Unrecognized medical practitioner, provider or facility.
12	Family planning and fertility treatment i.e., costs of treatment related to infertility and impotence.
13	War, invasion, civil war, riots or acts of terrorism.

Value Adds

WELLNESS PROGRAMS

Drug Delivery Program and Telemedicine e.g. Sasa Doctor

Members can receive drugs at their home/office at a subsidized cost. This ensures a timely refilling for chronic drugs limits the time spent out of work & in hospital queues.

Annual Medical Checkups

Kenbright can engage a provider to carry out employees annual check which will enable them to have a complete picture of their health. Prevention is better than cure

Chronic Disease/Lifestyle Management Programs

Standard treatment plans and interventions with Identified providers under the Provider Panel & Reminders on the next appointment

Mental Wellness

We partner with industry experts to promote mental health awareness in order to reduce the stigma associated with mental illness and to create a community where mental health is valued. We have toll free numbers for various facilities Like chiromo - 0800 220 000

Provider Network

A strong provider network with express clinics at AKUH and Nairobi Hospital and in-house clinics. In East Africa you can access treatment in Kenya , Tanzania ,Uganda and Burundi

TALK TO US

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