



## TERMS & CONDITIONS

### B-HEALTH SINGLE AND JOINT

#### *WHO IS COVERED?*

Single Life Cover – Policyholder Joint Life Cover – Policyholder & an insured relative All lives must be 'named' on a policy to receive cover. 'Named' lives may be changed on a policy at any time, but all new 'named' lives will be subject to waiting periods as if the policy was first registered.

#### *AGE:*

The minimum age of entry for the policyholder is 18 years and a maximum of 69 years. The insured family member can be from birth and a maximum age of 69 years at time of registration. \*When the maximum age for cover is reached, the cover will terminate for the respective lives.

#### *WAITING PERIOD:*

Access to the BIMA Doctor Service and Hospital cover starts immediately after registration and payment of premium. Maternity cover starts 1 year after first premium payment.

#### *ANNUAL LIMITS:*

- Hospital cash cover: 30 nights/year (Single), 50 nights/year (Joint)
- Maternity Hospital cover: 10 nights/year (Single and Joint) BIMA DOCTOR:
- Membership covers you, your spouse and your children under 24 years.
- Manages minor illnesses, provides guidance on your existing and/or chronic medical conditions as well as general health advice.
- Does not cover medical emergencies. In case of an emergency, we advise you go to the nearest hospital.

#### *EXCLUSIONS:*

- Self-inflicted injuries
- War
- Abuse of alcohol and illegal narcotics
- Childbirth within 12 months of policy registration date
- Cosmetic Elective surgery.

#### *CANCELLATION:*

Dial \*714\*99# to cancel. There is no refund of premium or medication support in case of cancellation.

#### *MEDICATION SUPPORT:*

Dependent on your policy level, you will receive a monthly contribution that may be used if you have been prescribed medicine, referred to a laboratory or referred to a hospital by a BIMA Doctor upon medical consultation. Minimum amount transferrable is equivalent to 3 monthly contributions (e.g. Silver policy: 3 x GHc4 = GHc12).