



MANJE AHOMKA HEALTH PLAN



MANJE AHOMKA HEALTH PLAN INTRODUCTION

The Manje AHOMKA Health Plan, is a comprehensive insurance plan that affords the Ghanaian in the diaspora the opportunity to insure themselves and their loved ones in Ghana. The plan provides a comprehensive health insurance plan as well as a life insurance cover for the insured lives.

Objective of the plan

The objective of the plan is simplifying access to quality healthcare in Ghana using technology to help the Ghanaian home and, in the diaspora, connect with hospitals across the country in just minutes, saving customers time and money and potentially saving lives.

It is a one year renewable plan designed specifically for any Ghanaian living abroad (herein referred to as the policy owner) to enable them to insure their nominated loved ones back home in Ghana.

The plan aims to cater for the health insurance needs of the policy owner as well as provide for death and permanent disability cover for the policy owner and any of the policy owner's nominated family members (herein referred to as insured members) who are resident in Ghana.

The plan pays for medical expenses of the insured lives at any designated hospital in Ghana as well as payout lump sum benefit in the unfortunate event of death or permanent disability of an insured life.



TERMS OF COVERAGE & RENEWAL CONDITIONS

This is a one (1) year plan renewable annually. The total duration of cover is for a maximum of one year renewable, starting from the date of enrolment until the policy anniversary, provided all successive premiums are paid by the policy owner.

ELIGIBILITY

Policy Owner

- Must be over 18 years of age.
- Must be Ghanaian.
- Must be resident abroad.
- In the event that the policy owner wishes to be covered, cover becomes active only in Ghana.

Insured Members

- Principal life assured Must be between the ages of 18 and 80 years of age.
- Additional insured lives must be between the ages of one month and above.
- Must have any of the following relationship with the policy owner:

Relation	Insured Members	Maximum Limit
Spouse	Husband	1
	Wife	
Child	Son	4
	Daughter	
Parents	Father	2
	Mother	
Siblings	Brother	2
	Sister	
Extended	Grannies	2
	Uncles	
	Aunties	
	Cousins	

All insured members must be in good health at the time of enrolment and must be resident in Ghana.

For health insurance, there is no limit to number of beneficiaries as long as corresponding premiums are paid. The stated limits in the table cover life insurance.

PRODUCT PACKAGES & PREMIUM



Executor

At inception of the policy, the policy owner shall nominate an executor to whom life insurance benefits under the policy shall be paid to.

Waiting period

There shall be a waiting period of three (3) months for the health insurance and six (6) months for the life insurance cover except death arising out of accident where waiting period will not apply.

Product Packages and Premium
Per each insured member, the following packages are available with corresponding Benefits and Premium.

Packages	Health Cover Limit	Life Insurance Benefit	Permanent Disability Benefit	Total Benefit	Total Annual Premium
<i>Bronze</i>	GH¢ 9,000	GH¢ 5,000	GH¢ 5,000	GH¢ 19,000	GH¢ 570
	€ 556	€ 309	€ 309	€ 1,173	€ 35
<i>Silver</i>	GH¢ 18,000	GH¢10,000	GH¢10,000	GH¢ 38,000	GH¢ 1,170
	€ 1,111	€ 617	€ 617	€ 2,346	€ 72
<i>Gold</i>	GH¢ 30,000	GH¢20,000	GH¢20,000	GH¢ 70,000	GH¢ 1,715
	€ 1,852	€ 1,235	€ 1,235	€ 4,322	€ 106
<i>Diamond</i>	GH¢ 60,000	GH¢30,000	GH¢30,000	GH¢ 120,000	GH¢ 3,820
	€ 3,705	€ 1,852	€ 1,852	€ 7,410	€ 236
<i>Platinum</i>	GH¢ 95,000	GH¢ 40,000	GH¢ 40,000	GH¢ 175,000	GH¢ 7,180
	€ 5,866	€ 2,470	€ 2,470	€ 10,806	€ 443
<i>Sapphire</i>	GH¢ 190,000	GH¢50,000	GH¢50,000	GH¢290,000	GH¢ 13,660
	€ 11,732	€ 3,087	€ 3,087	€ 17,907	€ 843

HEALTH & LIFE BENEFITS

LIFE

100% of the amount insured will be paid to a named executor upon the death of the insured member.

HEALTH INSURANCE

This would cater for the varied health requirements of insured members with designated payouts for both In-Patient and Out-Patient services across the country. The service providers encompass hospitals, clinics, medical facilities and pharmacies of private health institutions, public health facilities, laboratories and Christian Health Association of Ghana (CHAG) facilities.

Premiums Grace Period

Premiums are paid annually upon registering for this plan.



LIFE & HEALTH INSURANCE CLAIMS

HEALTH

INSURANCE CLAIMS

All claims for health insurance services shall be submitted by the service provider and payment made by the insurer to them within one day upon successful vetting of the claims.

LIFE

INSURANCE CLAIMS

- In the event of life insurance claims, the policy owner must notify SIC Life of claims immediately they occur, through the mobile app/website.
- SIC Life shall commence claims investigation after it has received the necessary documentation (i.e., Death Certificate or Medical Certificate of cause of Death, Police Report in case of death through accident etc.) from the Executor.
- SIC Life will make payment within 5 working days after the following:

-Receipt of all requested documents.

-Identification of executor.

-Satisfactory conclusion of claim investigation.

EXCLUSIONS HEALTH INSURANCE

Health Insurance.

The Scheme shall not be liable for costs arising from hospitalisation, bodily injury, sickness or disease directly or indirectly caused by, related to or in consequence of:

1.All costs incurred within the Waiting Period as specified in the Summary of the Policy;

2.Any ailment, disease, disorder, condition or disability which existed at the admission date on which the beneficiary should have disclosed to the Policy when making application for admission or registration as a beneficiary;

3.Any treatment or condition which may be determined from time to time by the scheme which will be duly notified to the principal insured person at the expiration of the Policy and prior to the renewal date;

4.Nuclear weapons or nuclear material or by ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exception combustion shall include any self-sustaining process of nuclear fission;

5.Investigations, treatment, surgery for obesity and its sequellae;

6.All cosmetic surgeries;

7.Treatment for infertility including but not limited to artificial insemination and invitro fertilisation; hormone replacement treatment;

8.Any procedure of a purely diagnostic nature or any examination where there are no objective indications of impairment in normal health;

9.Attempted suicide or intentional self-injury;

10.Conditions resulting from the taking of any drug or narcotic substance that was not prescribed by and / or not taken in accordance with the instructions of a registered medical practitioner;

EXCLUSIONS HEALTH INSURANCE

11. Conditions resulting from substance abuse including drug addiction;

12. An event attributable to the beneficiary having an alcohol content exceeding eighty milligrams per one hundred millilitres of blood or an event attributable to the beneficiary suffering from alcoholism;

13. Participation in:

a. Active military duty, police duty, police reservist duty, military reservist duty, civil commotion labour, disturbances, riot strike or the activities of locked out workers;

b. Aviation other than as a passenger or member of a crew on a scheduled commercial flight;

c. Any form of race or speed contest (other than on foot or involving any non-mechanically propelled vehicle);

d. Excluded activities, including but not limited to paragliding, hiking, canoeing, water rafting, water skiing, boxing, wrestling, polo, etc...;

e. Professional Sports;

f. Any other activity where the beneficiary deliberately exposes himself or herself to danger;

14. Purchase or hire of external /internal medical appliances except for crutches, braces and / or elastic stockings provided on discharge from hospital;

15. Holidays for recuperative purposes, whether deemed medically necessary or not;

16. Services by persons not registered as medical personnel with the relevant medical authorities within the country of treatment, except when specifically provided for as a benefit in the Policy;

17. The purchase of:

a. Medicines other than those prescribed by a registered qualified medical practitioner;

b. Bandages, aids, syringes and instruments other than for in-hospital use or during an evacuation;

c. Patent foods such as baby foods; tonics, slimming preparations, appetite suppressants and stop-smoking aids;

d.domestic and herbal remedies, homeopathic remedies, except when specifically provided for as a benefit in the Policy;

e.vitamins, tonics and mineral supplements, except when specifically provided for as a benefit in the Policy;

f.contraceptives and sexual enhancers;

18.Medical examinations for insurance, school camp, visa, employment, annual medical checks or similar services;

19.Admission and/or treatment in convalescent or old age homes or similar institutions catering for the aged or chronically ill including private nursing costs; as well as rehabilitation facilities, nursing homes, hospice, private nursing and similar facilities, unless approved by the Scheme as an alternative to hospitalisation;

20.Any treatment or advise for services rendered in respect of a condition that in the opinion of the Scheme, is directly attributable to irregular behaviour, activities involving an unacceptable risk of injury or of a particular hazardous nature, negligence or contributory negligence, breach of the law or failure to carry out the instructions of the Medical Practitioner;

21. Martial law or state of siege or any event or cause which determines the proclamation and enforcement of martial law or state of siege;

22. Dental and ear treatments that include but are not limited to:

a.the provision of false teeth or dentures; orthodontics; advanced and specialised dentistry except when specifically provided for as a benefit in the Policy;

b.the provision of hearing aids, except when specifically provided for as a benefit in the Policy;

23.Confinements other than routine confinements and medically necessary caesarean sections. Included in the exclusion are treatment relating to birth defects and congenital illnesses as well as foetal treatment. All abortions are also excluded from the benefit except where there is an immediate threat to the life of the mother;

24. Voluntary caesarean section costs;

25. Congenital abnormalities;

26. Mental health and/or psychiatric conditions, except when specifically provided for as a benefit in the Policy;

27.All treatments of hepatitis with the exception of surface antigen screening, except when specifically provided for as a benefit in the Policy;

28. Renal dialysis other than short-term acute dialysis for reversible renal conditions as specified in the benefit schedule;

29. Organ transplants and organ donation;

30. Brain surgeries, cardiovascular surgeries unless as a result of accidents occurring within the currency of the Policy year;

31.Auxiliary services and preparations provided by and including but not limited to psychologists, paediatrists, chiropodists, chiropractors, homeopaths, naturopaths, osteopaths, acupuncturists, speech therapists; herbalists, spiritualists; traditional medicines and occupational therapists, except when specifically provided for as a benefit in the Policy;

32. All costs relating to treatment covered by any other insurance policy;

33. Treatment by a Medical Practitioner who is a relative of the Insured, except in emergency cases or life threatening situations;

34. Costs either indirectly or directly relating to a sex change;

35. Costs relating to corrective treatments for medical procedures that are not covered by the Policy;

36. Cryopreservation, implantation or re-implantation of living cells or living tissue;

37. Any claims in excess of the benefit limits indicated in the Benefit Schedule;

38. All costs relating to treatment of cancer of any kind, except when specifically provided for as a benefit in the Policy;

39.Cost relating to neuro surgeries, cardio thoracic surgeries and colorectal surgeries, except when specifically provided for as a benefit in the Policy.

EXCLUSIONS LIFE INSURANCE

Life Insurance.

No benefit will be payable if death occurs either directly or indirectly as a result of any of the following causes:

1. War, invasion, act of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, mutiny, civil commotions assuming the proportions of or amounting to a popular rising, military rising, insurrection, rebellion, military or usurped power or any act of any person acting on behalf of or in connection with any organisation actively directed towards the overthrow by force of any Government or to the influencing of it by terrorism or violence.

2. Attempted suicide or self-inflicted injury whilst sane or insane.

3. Any breach of the law by the member or any assault provoked by him.

4. Being under the influence of alcohol or drugs other than in accordance with the directions of a registered medical practitioner.

5. Aviation, gliding or any other form of flight other than as a fare paying passenger of a recognised airline or charter service.

6. Participation in, or training for, any hazardous sport or competition or riding or driving in any form of race or competition.

7. Involvement in any underwater activity.

8. Injury caused by nuclear fission, nuclear fusion or radioactive contamination.

9. Serving in any capacity for any Navy, Army or Airforce.

10. Abortion or any complications arising therefrom.

11. Any disease or medical impairment from which the insured was suffering or had a serious past history at the commencement of the Policy or his/her date of entry if later.

MANJE AHOMKA HEALTH PLAN

What is it?

It is a Health & Life Insurance Plan designed for the diasporan Ghanaian to meet all the health and life insurance needs of themselves and their loved ones in Ghana. It is to provide you with that peace of mind that your health and life insurance needs and those of your dependents are fully secured. It provides both Outpatient and Inpatient benefits as well as death and permanent disability cover.

Who Are We?

SIC Life Insurance LTD (SIC Life), originally existed as the Life Division of the reputable multi-line insurer, the SIC Insurance Company Limited. In conformity with the provision of the Insurance Act 2006, Act 724, SIC Life was established as a fully licensed Life Insurance Company in 2007. SIC Life is fully owned by the Government of Ghana. SIC Life is financially sound and reinsured by Ghana Reinsurance and Mainstream Reinsurance Co. Ltd.

Manje Health AB, is a Sweden based company specialising in providing the digital Pan-African platform for diasporans to insure themselves and their loved ones in their home country. The objective is to help them make savings by ensuring that, they and their relatives receive the right medical care.

WHY THE MANJE AHOMKA HEALTH PLAN?

- Quality service delivery at service provider points.
- Extensive Network - health facilities across the country so insured members may access medical care anywhere within the country.
- 24/7 hotline client service – for help/queries
- Preventative Seminars (Wellness Program; Blood pressure measurement; Blood sugar measurement; HIV screening test; Cholesterol screening & Body mass index measurement)
- Cashless system (no cash payments at service points/pharmacy)
- Dependant access without principal member
- No drug list
- Refund given for covered medical expenses incurred
- Internet or online access to medical utilisation for all insured members for feedback, queries etc
- Consistent engagement with insured members & service providers
- Managed Care - HIV, Hypertension, Diabetes, Epilepsy, Asthma & any other Chronic Conditions
- Automatic life insurance covers all members.

OUR OFFERING

SIC Life with its Partner Dosh Health in collaboration with Manje Health AB, is providing a comprehensive health insurance plan for Ghanaians in the diaspora to insure themselves and their relatives in Ghana.

The insurance plan provides wide health insurance and life Insurance cover to the policy owner (the Ghanaian in the diaspora) and their relatives back in Ghana. With this plan, insured members can have access to health insurance cover to receive medical services across Ghana as well as life insurance cover for death and disability. This reduces the usual need for regular remittances to meet health insurance needs.

The plan provides Out-patient, In-patient (hospitalisation) as well as special benefits to the insured through a network of well assessed and quality service providers across the country. All healthcare and life insurance needs of their relatives in Ghana will be taken off the shoulders of the diasporan Ghanaian.



CONTACT

SIC Life Insurance LTD

No.1 Jone Close
Adabraka, Accra
Ghana - West Africa
+233 307021256
Email. info@siclife.com.gh

Dosh Health Insurance

8Sir Arku Korsah
Rd. Airport
Residential Area
Accra, Ghana
Phone: 0800-DOSH-ME (0800367463)
Fax: 0800-DOSH-ME (0800367463)

Manje Health AB

Scheeletorget 1, Medicin Village
223 81 Lund, Sweden
Phone: +46 (0) 70 360 76 23
Email: info@manjehealth.com



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