Benefits - Key Facts Sheet





This cover is a medical evacuation only insurance plan. The cover provides protection to members for expenses related to health events, within the terms of the benefit limits provided.

This document is not a contract and does not include full details about your cover. Please refer to the Benefits Schedule for full cover limits.

If you are unclear about anything, please contact your HR representative or your SES Account Manager.

SES is a registered Health and Life Insurer in Zambia with the Pensions and Insurance Authority of Zambia: Registration Number 2023/LT/02

Cnr Kafue Road and Mahogany Road, Lilayi, Lusaka, Zambia.

Unisure Limited is registered with the Financial Conduct Authority in the UK: Registration Number 719400.

40 Gracechurch Street, London, England, EC3V OBT, United Kingdom.



IMPORTANT CONTACT DETAILS

International (Emergencies Only) +27 87 238 2600 Authorisations authorisations@ses-unisure.com

Contact number +260 962 740 300 Assistance assist@ses-unisure.com



WhatsApp (Pre-Auth only) +260 969 416 388

Claims payandclaim@ses-unisure.com

BRONZE Benefits - Key Facts Sheet

Key Benefits	Benefit Amount	Terms and Conditions			
Overall Limit	USD 100,000	Overall limit of medical cover, per health event.			
Area of Cover	Emergency evacuation to South Africa only	Evacuation only applies to acute life and limb-threatening health events, and is to the nearest and most appropriate centre of medical excellence in South Africa.			
In-patient	There are no in-patient benefits on Bronze Cover				
Major Medical	There are no Major Medical benefits on the Bronze cover				
Out-patient	There are no Out-patient benefits on the Bronze cover				
Maternity	There are no Maternity benefits on the Bronze cover				
Optical	There are no Optical benefits on the Bronze cover				
Dental	There are no Dental benefits on the Bronze cover				
Wellness	There are no Wellness benefits on the Bronze cover				

What are some of the important Terms and Conditions?						
Retail Members (1-9 members)	Group Members (10 or more members)	Corporate Members (10 or more employees)				
Cover is subject to a completed application form.	Cover is subject to a completed application form.	Cover is subject to a completed application form.				
The policy will not accept new members over the age of 69. Applicants over the age of 60 will need to complete an onboarding medical.	The policy will not accept new members over the age of 69. Applicants over the age of 60 will need to complete an onboarding medical.	The policy will not accept new members over the age of 69. Applicants over the age of 60 will need to complete an onboarding medical.				
Dependants are defined as immediate blood relatives (son or daughter, aged between 0-17).	Dependants are defined as immediate blood relatives (son or daughter, aged between 0-17).	Dependants are defined as immediate blood relatives (son or daughter, aged between 0-17). Adult dependants are defined as immediate blood relatives (son or daughter, father or mother, aged between 18-69).				
Pre-existing chronic conditions are subject to a policy exclusion, based on medical underwriting.	Pre-existing chronic conditions are subject to a policy exclusion, based on medical underwriting.	Pre-existing chronic conditions may be covered, however, all members must be underwritten.				
All new joiners will have pro-rated benefits in line with the end-date of the Principal Member's policy.	All new joiners will have pro-rated benefits in line with the end-date of the Principal Member's policy.	All new joiners will have pro-rated benefits in line with the end-date of the Principal Member's policy.				
Policy upgrades and downgrades are only accepted at annual renewal.	Policy upgrades and downgrades are only accepted at annual renewal.	Policy upgrades and downgrades are only accepted at annual renewal.				

How do I access my medical benefits?

SES has a 24/7 call centre which can be reached via phone, WhatsApp or email.

The important contact details have been shared above. Please take note of these.

All benefits require pre-authorisation.

In the case of an emergency, you may proceed to the nearest facility to assist you and your loved ones, but you are encouraged to contact SES as soon as possible so that we may take over the management and payments for the case at hand.

When might this policy not cover me (exclusions)?

This policy does not cover chronic conditions if they are not declared in the application form before enrolment, such as HIV/AIDS, diabetes, or high blood pressure, for example, subject to underwriting for retail and group members.

This policy does not cover emergency stabilisation expenses outside of Zambia

This policy will not extend cover if benefit limits have been exceeded.

If pre-authorisation $\,$ was not obtained prior to seeking medical assistance, claims may be rejected.

Who do I contact if I have a claim to make on my policy?

You may call the call centre and ask to be transferred to the Claims Department. Alternatively, you may complete a claim form and contact us on payandclaim@ses-unisure.com.

Claims must be submitted within 90 days. Claims submitted after the 90-day threshold will not be processed.

How can I make a complaint?

You may email us on our compliments and complaints address: cc@ses-unisure.com.

If you are not satisfied with the level of response received, you may contact our regulator, the Pensions and Insurance Authority on pia@pia.org.zm.

Member/ Administrator Name	Signature:	Date:	