



FREQUENTLY ASKED QUESTIONS

1. Can I insure my child alone?

Yes. In special cases where a parent/guardian is covered

in a medical policy/scheme that does not cover dependents.

However, note that the contract will be between the parents. Guardian and the insurer.

2. Who is a dependant?

A spouse, own and/or legally adopted children. Parents, Brothers and other relatives are not dependent in terms of medical cover.

3. What happens if I do not exhaust my limit? Do I get cash back or do I roll to the next year?

This being an annual contract, unutilized benefits cannot be rolled over to the next policy period.

4. Can I seek medical treatment anywhere with the card?

No. The card is only accepted at the appointed health providers.

5. How are the benefits of the policy shared?

Any of the named beneficiaries can utilize the benefits purchased.

6. Do I still need an SHA/ SHIF card?

It is necessary to purchase it, if you are a member. It helps safeguard your inpatient benefit limits.

7. Can I pay my premiums in installments?

Yes. You can pay your insurance premium loan in four installments, payable in 3 months.

8. What happens if I visit a non-panel provider?

If you visit a non-panel provider, you will be required to **pay for the services in cash and later apply for reimbursement.**

Reimbursements are paid **up to 80% of the reasonable and customary rates**, in line with your policy terms and limit

9. What if the provider cannot issue ETIMS-compliant receipts?

Claims submitted **without ETIMS-compliant receipts or invoices will not be reimbursed.**

10. What are the requirements for reimbursement?

A. Outpatient Claims

Please submit the following documents:

- Completed and signed **Claim Form**
- **Cash sale / payment receipt**
- **Itemized invoice or bill**
- **ETIMS invoice** (if the receipt provided is not ETR-compliant)

B. Inpatient Claims

Please submit the following documents:

- Completed and signed **Inpatient Claim Form**
- **Individual Data Form** (including the principal member's banking details)
- **Payment / cash receipt**
- **Itemized final invoice**
- **ETIMS invoice** (if applicable)
- **Discharge summary or medical report**

11. What are the claim settlement timelines?

- **Outpatient claims:** Processed within **10 working days** after submission of **complete documentation**.
- **Inpatient claims:** Processed within **10 working days** after receiving **all required documents**.

12. What is the claim submission window?

All reimbursement claims must be submitted **within 60 days from the date of treatment**.

Claims submitted after this period will be considered **stale and will not be reimbursed**

13. What are the requirements for empanelment?

Providers interested in empanelment should submit an **Expression of Interest** to:

providerrelations@kcbgroup.com

Attach the following documents:

- Hospital profile
- Price list / tariff schedule
- Valid **KMPDC License**
- **KRA PIN certificate**