


 **hospicash** 
PRIVATE HOSPITAL FINANCE PLAN
FOR PSEMAS MEMBERS



2021

Underwritten by  PROSPERITY
LIFE

083 2999 543
www.prosperitylifeafrica.com

Prosperity Lifecare Insurance Limited rules apply as registered with Namfisa.

 Prosperity Life

Prosperity Health Policyholder Mobile
App for your cover & claims.

What is HospiCash

Being hospitalised can be a stressful experience that often leads to unforeseen non-medical costs. The HospiCash benefit provides you with an additional cash payout while hospitalised.

HospiCash can be taken as a top-up benefit to your existing medical aid fund or medical insurance cover.

HOSPICASH BENEFIT	
Overall Annual Sum Insured	N\$ 100 000 per person
The benefit pays out to the policyholder in the event that the principal insured or registered beneficiary is hospitalised for three or more continuous days. Each separate hospital admission is classified as a separate event.	A fix amount is payable to the policyholder after the 3rd full day of hospitalization calculated from the 1st day of admission in a private hospital.
N\$ 2,250 Per day in ICU WARD - From the 3rd full day in Hospital	Maximum of N\$ 30,000 per event
N\$ 1,500 Per day in HIGHCARE WARD From the 3rd full day in Hospital	
N\$ 750 Per day in GENERAL WARD from the 3rd full day in Hospital	

RESCUE ME STANDARD PLAN	
Benefit	Cover
Road ambulance evacuation services within Namibia	Unlimited

FUNERAL PLAN	
Sum Insured	Cover
Policyholder	N\$ 10,000
Spouse and adult beneficiary	N\$ 10,000
Beneficiary (14 - 21 years)	N\$ 10,000
Beneficiary (stillborn - 13 years)	N\$ 5,000

COMPLIMED PSEMAS MEMBERS - MONTHLY PREMIUM							
Age Category	Main	Adult Dependand	Child Dependants	Age Category	Main	Adult Dependand	Child Dependants
0-25	80	44	25	46-50	160	88	25
26-30	90	50	25	51-55	180	99	25
31-35	100	55	25	56-60	200	110	25
36-40	120	66	25	60+	220	121	25
41-45	140	77	25				

NOTE: Risk rating may apply based on utilisation and clinical guidelines / * Maximum charge for six beneficiaries e.g. Policyholder + 5 dependants

NONE COMPLIMED PSEMAS MEMBERS - MONTHLY PREMIUM							
Age Category	Main	Adult Dependand	Child Dependants	Age Category	Main	Adult Dependand	Child Dependants
0-25	100	65	35	46-50	180	117	35
26-30	110	72	35	51-55	200	130	35
31-35	120	78	35	56-60	220	143	35
36-40	140	91	35	60+	240	156	35
41-45	160	104	35				

NOTE: Risk rating may apply based on utilisation and clinical guidelines / * Maximum charge for six beneficiaries e.g. Policyholder + 5 dependants

Hospicash Terms and Conditions

- Hospicash will only be applicable to admissions in Private Hospital.
- 6 month waiting period will apply for planned hospital admissions.
- 12 month waiting period will apply for maternity and Confinement (including Neo Natal Care)
- Funeral standard terms and conditions will apply

Disclaimer: Prosperity Lifecare Insurance is a Long-Term Insurer duly registered with Namfisa. This guide is an extract from the terms and conditions of this insurance policy. Should there be any discrepancies, misprint and/or misinterpretation thereof, the terms and condition of the insurance policy will prevail.

Terms & Conditions (summary) - The head notes and the clauses of this brochure are for reference purposes only and shall in no way govern or affect the interpretation nor modify, nor amplify the Terms and Conditions of the policy agreement nor any clause thereof: 1 - Pre-existing conditions will be excluded for a period as determined by the Insurer, 2 - The Insurer's liability is conditional on the insured claiming the benefit and keeping to the policy Terms and Conditions, 3 - The Insurer reserves the right to alter the terms, premiums and provisions of this policy with one month notice to the insured, 4 - Maximum entry age on this policy for Policyholder and his/her spouse is 60 years; child dependants qualify for coverage up to the age of 21 years, 5 - The Insurer shall not be liable for the failure of a broker or agent to adequately explain the Terms and Conditions of the policy, 6 - In terms of a Namfisa directive, insurers should avoid over and/or under insurance. The Insurer herewith notifies the Policyholder to declare any over and/or under insurance immediately to the Insurer and to declare any change in status of health of the Policyholder or any of the beneficiaries, which occurs prior to the acceptance of this policy.