



Essential Health

Medical Insurance cover for HIV/AIDS related treatment
(Employer Groups only)

Underwritten by



2026

083 2999 000
www.prosperitylifeafrica.com



Prosperity Lifecare Insurance terms and conditions apply.

www.prosperitylifeafrica.com

Prosperity Connect Mobile App for your benefits & claims.

Benefits

The program offers in & out of hospital benefits for the treatment of HIV/ AIDS:

Cover	Annual Limit : N\$ 100,000 per person
Hospital Treatment	Part of the Sum Insured
HIV/AIDS Consultations (Including first investigative consultation)	N\$ 3,200
HIV/AIDS Pathology	N\$ 12,000
HIV/AIDS Medication	N\$ 33,000
HIV/AIDS Counselling	N\$ 4,600
Funeral Cover	N\$ 10,000

Hospital insured cover

- Provides cover for In-Hospital & Treatment including treatment for all HIV related conditions once a Policyholder is registered on the program for example Tuberculosis (TB), Pneumocystis pneumonia (PCP), Cryptococcal meningitis (etc.), pathology, medication as well as doctor costs.
- Employees can be admitted into State facilities and Private hospitals for treatment.
- Cover only pays for HIV/AIDS related Hospital Admissions.
- The plan will only cover for treatment up to the annual sum insured, in the event that a Policyholder exceeds the annual sum insured, such a Policyholder may be transferred to a state facility, where he/she will continue receiving treatment.
- Employees should obtain validation for all planned treatment prior to admittance.

Doctor Consultations up to N\$ 3,200

- Provides cover for consultations with Medical Practitioners or Specialists.
- The consultation with the Doctor will only be paid if the treatment is for HIV/AIDS (but will cover the first investigative consultation).
- Consultations with Specialists can only be done if a Policyholder has been referred by a General Practitioner.
- Consultations with doctors for treatment other than HIV/AIDS will be not covered unless it relates to the first consultation for investigation of HIV/AIDS.

Pathology (Blood Tests) cover up to N\$ 12,000

- Provides cover for pathology/blood tests.
- Only tests that are included in the pre-determined pathology formulary are paid from the insured cover.

Medication up to N\$ 33,000

- Cover includes ARVs, prescribed vitamins, preventative flu & TB vaccinations, MTC (mother to child transmission) and PEP (post exposure prophylaxis) medication up to 100% of PRP.
- Any other medication is excluded.

Counselling up to N\$ 4,600

- Provides cover for HIV/AIDS counselling at Medical Practitioners, Psychologists or Social Workers.
- Service may only be obtained from registered health professionals.

Pathology formulary

Pathology code	Name	Explanation
3816	B-Cells - EAC Markers	Monitor infection progress
4429	Qualitative PCR	Determine type of infection
4765	Blood Genotype	Determine blood group
4766	Resistance Test	Determine medication effectiveness
3974	Polymerase chain- Viral Load	Determine viral load
3932	Elisa Test	HIV Test
3755	Full Blood Count	Determine infection of blood group
4131	Alanine Aminotransferase	Determine levels of liver injury
4032	Creatinine	Determine infection progress on liver & kidneys
3797	Platelet Count	Determine blood for clotting factor

Treatment NOT covered

Please note: The Essential Health cover is not a comprehensive medical insurance, and employees cannot use it to cover their primary health care needs such as Dentists, Optometrists, Physiotherapy ect. Should they require such services, they are advised to use their comprehensive medical insurance or meidical aid fund benefits or go to State Health facilities.

What you should know

How the Essential Health authorisation process works:

About the Program

- The Essential Health Insurance Program provides cover for HIV/AIDS treatment.
- The plan is available to all permanent employees, regardless of whether they are medical aid members or not.
- The full cost of the contribution is covered by the employer, therefore the plan is offered to employees at no cost.
- The cover is only available to employees, and does not include dependants.
- All permanent employees should complete a registration form through their Human Resources Department.
- Once registered, a Policyholder card is issued to all employees.
- If an employee resigns from the company, the insured cover is also terminated.
- Any services received after an employee has resigned from the company will not be covered.
- The cards issued ONLY confirm insured cover to the program.
- The Policyholder card is used to obtain treatment at medical practitioners and pharmacies upon completion of the validation process.

How to access cover (Registration Process)

Step 1: Go to a health facility or consult a doctor of your choice and get tested.

Step 2: Once you are tested positive, your doctor will complete the registration form and register you directly on the program.

Step 3: Your doctor will work out and prescribe a treatment program.

Step 4: Adhere to the prescribed program and lead a healthy lifestyle.

Claim information

- All claims for services rendered to employees should be submitted within six (6) months from the date of treatment.
- Employees should ensure their claims have been submitted for payment.
- Any claims submitted later than the claims period will not be covered.
- Once a claim has been paid, a sms notification will be sent to the Policyholder to confirm proof of payment.

Monthly Premium

Per Employee
N\$ 61

* Maximum charge for six beneficiaries e.g. Policyholder + 5 dependants

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 & Conditions, 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 25 years, 5 - The Insurer shall not be liable for the failure of a Intermediary to adequately explain the Terms and Conditions of the policy, 6 - The territory as defined will include Namibia, South African, Lesotho, Swaziland, Mozambique, Botswana, Zimbabwe and Angola, 7 - 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.





Essential Health

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