



Select - April 2020

	Select 1		Select 2		Select 3		Select 4		Benefit Requires	WAITING
Annual Global Limit	ZWL	100,500	ZWL	134,000	ZWL	234,500	ZWL	502,500	Pre-Authorisation	PERIOD
A&E, 24 HR Clinics and Casualty	ZWL	1,340	ZWL	1,675	ZWL	2,010	ZWL	3,350	✓	
Air Ambulance Services	ZWL	-	ZWL	-	ZWL	53,600	ZWL	134,000	✓	
Ambulance Services	ZWL	6,700	ZWL	8,040	ZWL	13,400	ZWL	33,500	✓	
Appliances and Equipment	ZWL	2,010	ZWL	2,680	ZWL	4,690	ZWL	6,700	✓	12 Months
Auto-immune Health	ZWL	6,700	ZWL	13,400	ZWL	26,800	ZWL	53,600	✓	3 Months
Consultations	ZWL	5,025	ZWL	6,700	ZWL	11,725	ZWL	25,125		3 Months
Dental & Orthodontics	ZWL	4,020	ZWL	5,360	ZWL	9,380	ZWL	13,400		Refer to T's & C's
Dialysis	ZWL	33,500	ZWL	44,667	ZWL	78,167	ZWL	167,500	✓	3 Months
→ Foreign Treatment*	ZWL	-	ZWL	-	ZWL	134,000	ZWL	234,500	✓	Refer to T's & C's
Hospital and Surgery	ZWL	50,250	ZWL	67,000	ZWL	117,250	ZWL	251,250	✓	3 Months
Imaging - MRI, CT & PET	ZWL	6,700	ZWL	10,050	ZWL	16,750	ZWL	33,500	✓	6 Months
Imaging - Radiology and Ultrasounds	ZWL	2,010	ZWL	2,680	ZWL	4,690	ZWL	10,050		3 Months
Maternity	ZWL	10,050	ZWL	13,400	ZWL	20,100	ZWL	26,800	✓	12 Months
Nursing and Hospice	ZWL	10,050	ZWL	13,400	ZWL	20,100	ZWL	50,250	✓	3 Months
Oncology	ZWL	50,250	ZWL	67,000	ZWL	117,250	ZWL	251,250	✓	3 Months
Optical	ZWL	1,005	ZWL	1,340	ZWL	2,345	ZWL	5,025	✓	9 Months
Other Outpatient Services	ZWL	3,350	ZWL	4,355	ZWL	5,695	ZWL	6,700		3 Months
Pathology	ZWL	2,680	ZWL	3,350	ZWL	4,690	ZWL	6,030		3 Months
Prescribed Medication	ZWL	3,350	ZWL	4,467	ZWL	7,817	ZWL	16,750		3 Months
Prosthetics	ZWL	13,400	ZWL	20,100	ZWL	33,500	ZWL	56,950	✓	Refer to T's & C's
Reproductive Health & Wellness	ZWL	1,005	ZWL	1,340	ZWL	2,345	ZWL	5,025		9 Months
Therapy	ZWL	2,010	ZWL	2,680	ZWL	4,690	ZWL	10,050	✓	12 Months
Territory of benefits use =	Zimbabwe		Zimbabwe		ZW + South Africa		ZW + South Africa			
→ *THIS IS A BENEFIT CEILING, NOT AN ADDITIONAL BENEFIT										

Claims Payment Terms	AHFoZ Tariffs (member pays shortfall)	AHFoZ Tariffs (company pays shortfall)	AHFoZ PLUS*	AHFoZ PLUS*
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*Up to 200% of AHFoZ

Alliance Options Select Contribution Rates for Group Employees							
Monthly Premiums - GROUPS	SELECT 1		SELECT 2		SELECT 3		SELECT 4
ADULT	ZWL	326	ZWL	507	ZWL	714	ZWL 949
CHILD	ZWL	235	ZWL	354	ZWL	469	ZWL 714

NB:
Benefits may be used for pre-existing conditions, subject to the underwriting of applications, for GROUP members only. Contributions will be loaded. Contributions may be loaded at renewal for serious pre-existing conditions or ongoing chronic conditions. Completed application forms are required two weeks before enrolment

Minimum group size is 20 employees

Alliance Options Select Contribution Rates for Individuals							
Monthly Premiums	SELECT 1		SELECT 2		SELECT 3		SELECT 4
ADULT	ZWL	415	ZWL	796	ZWL	932	ZWL 1,238
CHILD	ZWL	279	ZWL	469	ZWL	615	ZWL 904

Individual applicants over the age of 54 cannot be accepted