

UGANDA | AAR Blue Health Cover benefit table 2025

This table will give you an overall summary of the benefits we offer. Please read this summary together with the AAR Blue Health Cover Policy Conditions, which provides more detailed information. The annual benefit limits per insured person for the year are in Ugandan shillings (UGX).



Insurance

Benefit plan	Core Plus
Region of cover	In-country only
Network providers paid at AAR Blue Tariffs	Essential network
Overall limit	31 000 000
Day-to-day benefits (for conditions that generally appear suddenly, progress rapidly and are relatively short in duration)	
<ul style="list-style-type: none"> GP and specialist consultations Diagnostic tests Pathology & Basic Radiology with formulary Non-surgical procedures Annual medical examination Acute Medication with formulary 	3 100 000
Optical benefits	
1 x eye test per insured person per year Frames and lenses (including contact lenses) every 2 years	410 000
Dental benefits (subject to clinical funding protocols)	
Basic dentistry Dental consultations, basic dental procedures including removal of teeth, fillings, preventative treatment, scaling and polishing, x-rays and root canals	310 000
Specialised dentistry	x
Chronic conditions benefits (conditions that require medication and treatment for more than three continuous months)	
Prescribed medication for chronic conditions on the specified list	720 000
Maternity benefits (subject to pre-authorization and clinical funding protocols)	
Out-patient maternity care Antenatal consultations, ultrasounds and pathology services, including amniocentesis, are paid from this benefit	Subject to day-to-day benefits limit
Out-patient high-risk pregnancies Subject to enrolment for case management	Subject to day-to-day benefits limit
In-patient maternity – childbirth and management of high-risk pregnancies	Subject to overall limit
Neonatal care – incubator, phototherapy, congenital conditions, prematurity	10 500 000
Postnatal depression – medication, consultations, pathology	Subject to day-to-day benefits limit
Hospital benefits (subject to pre-authorization and clinical funding protocols)	
Accommodation	260 000
Specialists, theatre, ward, radiology, pathology, dialysis, medicine	Subject to overall limit
Intensive care	Subject to overall limit
Psychiatric hospitalization	10 days
Rehabilitation, Private nursing and Hospice care	1 550 000
Specialized radiology – combined limit in and out of hospital	1 850 000
Prosthesis and devices – per prosthesis/device	3 100 000
External medical appliances	730 000
Ambulance benefits	
Emergency road ambulance services	Subject to overall limit
Non-emergency road ambulance	Subject to overall limit
Major diseases benefits (subject to pre-authorization and clinical funding protocols)	
Major diseases benefits limit	20 500 000
Oncology	Subject to the major diseases benefit limit
Organ transplants	x
Renal dialysis	Subject to the major diseases benefit limit
FUNERAL BENEFIT The funeral benefit pays out a lump sum in the event of the death of the member, spouse, children or extended family members (if applicable)	3 000 000

Note: If the start date of your health cover is after the start date of your employer's AAR Blue Health Cover Policy, your day-to-day benefits will be available to you on a pro-rata basis.
Disclaimer: The benefits described in the table above are subject to the Policy Conditions in the AAR Blue Health Cover Policy Document. Every attempt has been made to ensure complete accuracy of this document. However, in the event of a conflict between this document and the AAR Blue Health Cover Policy Conditions, the Policy Conditions will prevail. E&OE