

# 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).



Benefit plan	Essential Plus
<b>Region of cover</b>	In-country only
<b>Network providers paid at Liberty Tariffs</b>	Enhanced Network (no payment for providers outside this network)
<b>Overall limit</b>	135 000 000
<b>Day-to-day benefits (for conditions that generally appear suddenly, progress rapidly and are relatively short in duration)</b>	
<ul style="list-style-type: none"> <li>GP and specialist consultations</li> <li>Prescribed acute medication including vaccinations</li> <li>Diagnostic tests</li> <li>Pathology, i.e. blood tests requested by a doctor in the course of your consultations</li> <li>Basic radiology, i.e. out-of-hospital basic x-rays</li> <li>Out-of-hospital non-surgical procedures such as applying plaster of paris and stitches</li> <li>Auxillary services such as physiotherapy, chiropractics and speech therapy</li> <li>Annual medical examination</li> </ul>	2 700 000 Sub-limit for prescribed acute medication 990 000
<b>Chronic Conditions Benefit</b> (conditions that require medication and treatment for more than three continuous months) <ul style="list-style-type: none"> <li>Consultations (GP and specialist)</li> <li>Prescribed chronic medication</li> <li>Pathology, i.e., blood tests requested by a doctor during the course of your consultations</li> <li>Basic radiology</li> </ul> Subject to pre-authorisation, clinical treatment protocols and overall limit	Paid in full Subject to overall limit
<b>Optical benefits</b>	
1 x eye test per insured person per year Frames and lenses (including contact lenses) every 2 years	695 000
<b>Dental benefits (subject to clinical funding protocols)</b>	
<b>Basic dentistry</b> Dental consultations, basic dental procedures including removal of teeth, fillings, preventative treatment, scaling and polishing and x-rays	
<b>Specialised dentistry</b> Root canal treatment, dentures, inlays, crowns, bridges, periodontal treatment, orthodontic treatment and procedures in rooms. Orthodontic treatment will be restricted to members up to and including the age of 21 years.	
<b>Psychological wellbeing benefits</b>	
<b>Psychologist/social worker consultations and prescribed acute medication</b>	Subject to day-to-day benefits limit
<b>Ongoing psychiatric consultations and associated chronic medication</b>	Subject to chronic conditions benefits limit
<b>Hospital benefits (subject to pre-authorisation and clinical funding protocols)</b>	10 days per annum
<b>Maternity benefits (subject to pre-authorisation and clinical funding protocols)</b>	
<b>Out-patient maternity care</b> Antenatal consultations, ultrasounds and pathology services, including amniocentesis, are paid from this benefit. Any additional maternity claims will be paid from the available day-to-day benefits	2 050 000
<b>Out-patient high-risk pregnancies</b> Subject to enrolment for case management	Subject to day-to-day benefits limit
<b>In-patient maternity – childbirth and management of high-risk pregnancies</b>	Paid in full Subject to overall limit
<b>Neonatal care – incubator, phototherapy, congenital conditions, prematurity</b>	33 500 000
<b>Postnatal depression – medication, consultations, pathology</b>	Subject to chronic conditions benefits limit
<b>Hospital benefits (subject to pre-authorisation and clinical funding protocols)</b>	
<b>In-hospital accommodation, specialists, theatre, ward, radiology, pathology, acute dialysis and medicine costs</b>	Paid in full Subject to overall limit Standard private ward
<b>Intensive care</b>	Paid in full Subject to overall limit
<b>Rehabilitation, Private nursing and Hospice care</b>	6 450 000 up to a maximum of 30 days
<b>Specialised radiology – combined limit in and out of hospital</b>	5 950 000
<b>Prosthesis and devices – per prosthesis/device</b>	55 000 000 for Cochlear implants 8 100 000 for all other prosthesis
<b>External medical appliances</b>	18 500 000 for Hearing Aids 2 000 000 for Other appliances
<b>Ambulance benefits (within region of cover)</b>	
<b>Emergency in-country ambulance services (mode determined by logistics)</b>	Paid in full Subject to overall limit
<b>Emergency cross border ambulance services (mode to be determined by logistics, subject to pre-authorisation)</b>	Paid in full Subject to overall limit
<b>Major diseases benefits (subject to pre-authorisation and clinical funding protocols)</b>	
<b>Major diseases benefits limit</b>	61 500 000
<b>Provision of treatment (subject to the major diseases benefits limit)</b>	Oncology treatment, organ transplants and renal dialysis
<b>Donor matching (limited to immediate family members on the policy)</b>	Paid subject to the major diseases benefit limit
<b>International benefits (subject to pre-authorisation and clinical funding protocols)</b>	
<b>International emergency medical evacuations</b> In the case of a medical emergency/life-threatening condition and where treatment is not available locally, cover includes: international evacuation and foreign treatment costs	x
<b>Critical care</b> In the case of a medically necessary, non-emergency life-threatening condition, where treatment for in-patient care is not available locally, cover includes international travel/accommodation and foreign treatment costs	x
<b>Travel and accommodation costs per event</b> Applicable only to international emergency medical evacuations and critical care cases for the patient, and where applicable, one accompanying person	x
<b>Repatriation of mortal remains</b> Applicable to international emergency medical evacuations and critical care cases only	x
<b>Elective roaming</b> Applicable to beneficiaries electing to obtain medical services outside their country of residence and in line with their benefit plan region of cover. Cover includes foreign treatment cost and services but not travel.	x
<b>FUNERAL BENEFIT</b> 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
<b>AAR BLUE DIGITAL TOOLS</b>	Available to all beneficiaries. Access to the AAR Mobile App (iOS and Android for Health assessment, 24-hour access to clinically approved health promotion materials, Provider network and benefit limits and utilization. Other Digital tools include; WhatsApp Online Portal, Website and Chatbot.

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