

1. Medical Benefits Limits

The following cover limits shall apply to Principal member, Spouse & dependents (per family)

Job group and equivalent grades	In patient Annual cover limit	Outpatient annual cover limit	Maternity annual cover limit (within inpatient limits)	Dental cover annual limit	Optical cover limit	Last expense	Group life
5	10,000,000	300,000	150,000	75,000	75,000	300,000	Three times annual basic remunerative package
6	5,000,000	300,000	150,000	75,000	75,000	300,000	Three times annual basic remunerative package
7	3,000,000	250,000	150,000	50,000	50,000	300,000	Three times annual basic /retainer remunerative package
8	3,000,000	250,000	150,000	50,000	50,000	300,000	Three times annual basic remunerative package
9	3,000,000	250,000	150,000	50,000	50,000	300,000	Three times annual basic /retainer remunerative package
R-T	2,000,000	250,000	150,000	30,000	35,000	300,000	1,700,000
K-Q	1,500,000	200,000	100,000	30,000	25,000	250,000	1,300,000
G-J	1,000,000	150,000	75,000	30,000	15,000	200,000	700,000
A-F	750,000	100,000	50,000	30,000	15,000	200,000	700,000

Population for county executive									
S/NO	Job group/ grade	M	M+1	M+2	M+3	M+4	M+5	TOTAL Population	
1	5						1	1	
2	6					1		1	
3	7	1						1	
4	8	2	1	1	2	5		11	
5	9					1	1	2	
6	R-T	11	14	7	12	19	0	63	
7	K-Q	394	201	232	278	507	149	1761	
8	G-J	597	259	316	298	207	174	1851	
9	A-F	798	245	320	279	235	196	2073	
	Total No of staff	1800	719	875	867	974	520	5764	
	Total No of Beneficiaries	1800	1438	2625	3468	4870	3120	17321	

No of staff			
Staff categorisation per grading structure			
S/No	JOB GROUP		COUNT
1	A-F		2073
2	G-J		1851
3	K-Q		1761
4	R-T		63
5	7,8,9		14
6	6		1
7	5		1
	TOTAL		5764