QUESTION: WHAT IS THE MAIN PURPOSE OF THE BENEVOLENT FUND?

ANSWER: The fund provides several critical benefits to active members, including insurance coverage for loans, doubling of deposits for nominees, and coverage for permanent disability, critical illness, and last expenses.

QUESTION: WHAT HAPPENS TO MY LOANS IF I PASS AWAY OR AM RETIRED BY MY EMPLOYER ON MEDICAL GROUNDS DUE TO PERMANENT DISABILITY?

ANSWER: The fund is designed to offset your outstanding loan balances on a reducing balance basis. Please note that this does not cover arrears or interest on arrears, nor does it apply to self-inflicted injuries within the first three months of coverage.

QUESTION: HOW DOES THE DEPOSIT INSURANCE BENEFIT WORK?

ANSWER: In the event of a member's death or permanent total disability, the fund doubles the accrued deposits. These funds are subsequently paid to the member's appointed nominee (next of kin).

QUESTION: WHAT IS COVERED UNDER "CRITICAL ILLNESS"?

ANSWER: Members aged 18 to 65 can receive a benefit of 30% of the death benefit (up to Kshs 3,000,000) for a first diagnosis of conditions such as Heart Attack, Cancer, Stroke, or Kidney Failure. Pre-existing conditions are excluded from this cover.

QUESTION: WHAT DOCUMENTATION IS NEEDED FOR CRITICAL ILLNESS CLAIMS?

ANSWER:

a) The primary requirement for a critical illness claim is that the illness was a critically assessed and first diagnosed within the year of insurance cover, i.e., 1st August to 31st July of the following year.

The conditions eligible for this benefit include:

i. Heart Attack.
ii. Coronary Artery Bypass Surgery.
iii. Cancer.
iv. Stroke.
v. Kidney Failure.
vi. Paraplegia.
vii. Major plant organ.

b) Duly Completed Claim Form:
c) Age Verification: The member must be between the minimum age of 18 and the maximum entry age of 64, as coverage for this benefit ceases at age 65.
d) Prompt Notification: The Sacco must be notified of the event in writing no later than 9 months from the date it occurred

QUESTION: WHAT ARE THE "LAST EXPENSE" BENEFITS FOR MY FAMILY?

ANSWER: The fund provides immediate financial support for funeral expenses:

a) **Member:** Kshs 100,000.
b) **Spouse:** Kshs 60,000.
c) **Child:** Kshs 30,000 (for up to 4 children aged 1 month to 25 years)

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QUESTION: HOW DO I ENSURE MY SPOUSE AND CHILDREN ARE COVERED?

ANSWER: Members must declare their spouse and children in writing before any occurrence. Only one spouse can be declared at a time, and undeclared dependants are not eligible for benefits.

QUESTION: WHAT HAPPENS IF A MEMBER REMARRIES AFTER A SPOUSE'S DEATH?

ANSWER: In the event that a member's declared spouse passes away and the member remarries, the new spouse is only admissible for coverage in the next coverage period.

Important to note:

a) **One Spouse Policy:** Only one spouse is eligible and admissible for declaration by a member at any given time.
b) **Mandatory Written Declaration:** For a spouse to be eligible for benefits, the member must have declared them in writing as a spouse or dependant before any occurrence.
c) **Age Requirements:** An eligible spouse must be between 18 and 80 years of age.

NB: The Society provides spouse/child declaration forms at all its outlets and on its website to facilitate this process

QUESTION: HOW MANY CHILDREN CAN BE COVERED UNDER THE LAST EXPENSE?

ANSWER: Only four children of a member are admissible for the Last Expense benefit at any one period of the scheme.

For a child to be eligible, they must meet the following criteria:

- **Age:** They must be between 1 month and 25 years old.
- **Dependency:** Children between the ages of 18 and 25 are only covered upon providing proof of continued dependency.
- **Declaration:** The member must have declared the child in writing as a dependant before their death

QUESTION: WHAT HAPPENS IF NO NOMINEE IS LISTED FOR DEPOSIT REFUNDS?

ANSWER: If a member has not nominated a next of kin (nominee) for their deposit refunds, the Society follows a specific legal process to ensure the funds reach the rightful dependants or family members:

- For amounts below Kshs 100,000: The member's deposits are paid to the Public Trustee or Deputy County Commissioners. These authorities then handle the onward transmission of the funds to the deceased member's dependants.
- Letters of Administration: Alternatively, the family may be granted time to process a Letter of Administration, which is a legal document that allows them to claim and manage the deceased member's estate.

In contrast, if a nominee is successfully listed, the Sacco writes the refund cheques directly to the appointed individual(s) according to the member's specific instructions. If those nominated beneficiaries are minors, the funds are held by the Sacco until they reach 18 years of age and obtain a national ID

QUESTION : WHAT IS THE SPECIFIC DOCUMENTATION REQUIRED TO PROCESS CLAIMS

ANSWER: To process claims under the Apstar Sacco Member's Benevolent Fund, specific documentation must be submitted based on the nature of the claim. All claims generally require a duly completed Claim form, which is available at Sacco branches or on their website.

1. Offsetting of Loans and Deposit Refunds
To process the offsetting of a deceased member's outstanding loans or the refund of their deposits, the following are required:

a) **Deceased Member's ID copy:** Must be the front and back of a new-generation ID.
b) **Original Death Certificate:** This must be duly stamped and signed by the issuing facility, accompanied by a copy.
c) **Chief's Letter:** A letter from the local Chief where the member either resided or was buried.

2. Last Expense Claims

The Sacco settles Last Expense claims within 48 hours of receiving full documentation. The requirements vary by the deceased:

a) **For a Member:** A new-generation ID copy and the original burial permit notification (stamped, signed, and a copy).
b) **For a Spouse:** The spouse's new-generation ID copy and the original burial permit notification (stamped, signed, and a copy). The spouse must have been declared in writing prior to the death.
c) **For a Child:** The original burial permit notification (stamped, signed, and a copy) and either the claimant's ID copy (if over 18) or a Birth certificate/birth notification if the child was a minor. The child must have been declared in writing, and for those aged 18–25, proof of continued dependency is required.

3. Permanent Total Disability (PTD)

To claim benefits for permanent disability, a member must provide:

a) **Physician Statement of Disability:** Executed by the attending physician.
b) **Medical Reports:** Comprehensive reports from the treating doctors.
c) **Retirement Documentation:** A retirement letter on medical grounds from the employer and a doctor's recommendation letter for such retirement.

4. Critical Deadlines and Conditions

a) **Notification Period:** The Society must be notified of any claim event promptly in writing, and no later than 9 months from the date of the event.
b) **Account Closure:** Upon notification of a member's death, their account is closed immediately to prevent further transactions until deposits are processed for the nominee.
c) **Prior Declaration:** Benefits for spouses and children are only admissible if they were declared in writing by the member before the occurrence. Only one spouse can be admissible at any one time

QUESTION: HOW LONG DOES IT TAKE TO SETTLE A CLAIM?

ANSWER :
a) **Last Expense:** 48 hours after full documentation is submitted.
b) **Loans, Deposits, and Permanent Total Disability (PTD):** 7 days after submission and receipt of funds from the insurer.

QUESTION: WHAT IS THE DEADLINE FOR NOTIFYING THE SACCO OF A CLAIM?

ANSWER: You or your dependants must notify the Society in writing promptly, and no later than 9 months from the date of the event.

QUESTION: WHAT ARE THE EXCLUSIONS FOR CLAIMS AGAINST THE APSTAR SACCO MEMBER'S BENEVOLENT FUND? THE FOLLOWING ARE INCLUDED:

ANSWER:
1) **Self-Inflicted Harm:** The fund does not cover self-inflicted death or permanent total disability that occurs within the first three months from the effective date of a loan's coverage or from when a member joins the society.
2) **Arrears and Default:** Loan balances arising from defaults or arrears, as well as any interest on those arrears, are excluded from the insurance cover meant to offset outstanding loans. Members'
3) **Criminal Acts:** Any death or injury resulting from the member's participation in a criminal act is not admissible for a claim.
4) **Undeclared Dependants:** Benefits for spouses and children are only available if they were declared in writing by the member before the occurrence of the event. For spouses, only one can be admissible at any given time.
5) **Pre-existing Conditions:** The critical illness benefit specifically exclude any pre-existing conditions.
6) **Age Limits:**
   a. **Permanent Disability:** Coverage ceases once a member reaches 75 years of age.
   b. **Critical Illness:** Coverage for this benefit ceases at 65 years of age.
   c. **Children:** Dependency benefits for children aged 18 to 25 are excluded unless there is proof of continued dependency.
7) **Late Notification:** Claims are not admissible if the Society is notified later than 9 months from the date of the event.

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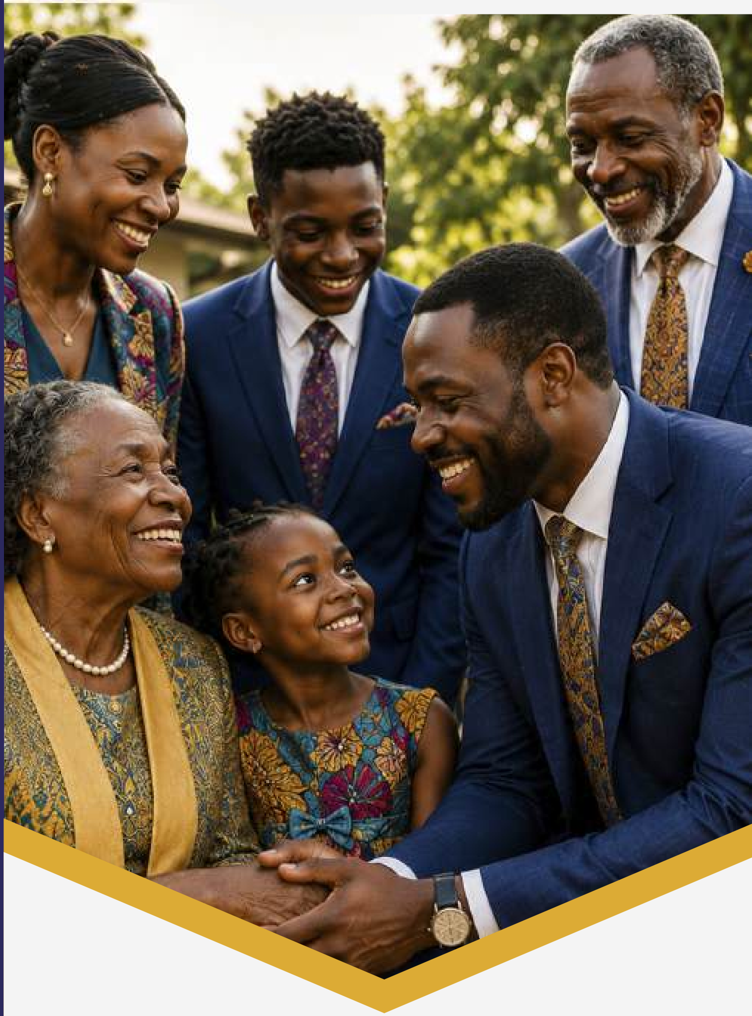

MEMBER'S BENEVOLENT FUND (BF)

FREQUENTLY ASKED QUESTIONS

WWW.APSTARSACCO.COOP