



Company Profile

About us

Medical Administrators (K) Limited (MAKL) was founded in 2018 to fill the gap in Health Insurance Administration in Kenya, with a client-focused approach. Our objective is to enhance customer experience, bring in greater efficiency in health insurance administration and claim processing. We believe this will help curb or reduce medical billing related fraud even as we bridge direct relationships amongst insurance providers, healthcare providers and scheme members.

MAKL is growing out of Medical Insurance Administration and has expanded to the administration of our healthcare client's domestic networks and ultimately aims to grow into one of the largest and most flexible Digital Third-Party Administrators in Eastern Africa.

We bring creative solutions to Health Care Systems, Customer Care Services, Insurance Carriers and specialize in customized health care benefits administration. We thrive on finding solutions that fit our client's unique business requirements, demographics, and strategies.

While these would be "one-off" requirements for traditional carriers, they are what makes our customers the trailblazers. We provide out-of-the-box solutions to meet our customer's needs.

MAKL is currently handling medical administration function for the biggest health insurance schemes in Kenya covering over 4 Million+ lives for Inpatient, Outpatient, Maternity, Dental and Optical healthcare service as well as international treatment. and we are regulated by Insurance Regulatory Authority (IRA) as a claim's settlement agent.

Member verification, claims and preauthorization management are completely paperless as all documents are available on the system. This reduces the need of storage space and enables the claims and pre-authorization to be processed faster and can be accessed from anywhere by authorized representatives.

We have partnered with more than 800+ healthcare service providers within Kenya and East African countries, ranging from Government, Mission and Private; Level II to level VI. All registered by Kenya Medical Practitioners and Dentist Council (KMPDC).

We have a team of qualified medical personnel working 24X7 processing preauthorization requests and claims. Monthly we are managing an average of 400,000+ claims.

Our 24x7 professionally managed Call Center ensures all clients and members never lack support for any of their requirements or needs.



Our Core Business

Handling medical administration function for health insurance schemes benefits for Inpatient, Outpatient, Maternity, Dental Optical, International treatment, air ambulance and road ambulance evacuations. healthcare service. Registered and regulated by Insurance Regulatory Authority (IRA) as a claim's settlement agent. And fully compliant with the data protection act of Kenya.

Our Mission

We strive to be a successfully client driven, result oriented one stop; Insurance and healthcare administration consultancy of international repute for mutual benefits to all our stakeholders.

Our Vision

To be the leading third-party insurance administrator in Eastern Africa.

Core Values

- **Honest:** - Always demonstrate integrity by being honest and doing the right thing
- **Excellence:** - Be committed to deliver quality services and customer delight
- **Accountability:** - Take responsibility for all our actions.
- **Respect:** - We embrace and respect the diversity of our clients, employees and communities
- **Teamwork:** - We achieve quality through teamwork and encourage collaboration

Our Services

Medical Administrators Kenya Limited is set up with the aim of providing sustainable solutions to challenges faced by hospitals in handling the Health Insurance and Health Schemes that sponsor a section of the population taking treatment without upfront payment.

When setting up a comprehensive medical scheme, you need professional help to get it done right. Medical Administrators (K) Ltd is equally equipped to guide and provide the below services:

- Complimentary professional advice
- Cashless health insurance policies
- An open panel of medical service providers
- Outpatient services
- Inpatient services
- Maternity services



- Dental services
- Optical services
- Air ambulance evacuations
- Road ambulance evacuations
- Chronic Disease management programs
- International Treatment
- Wellness Clinic
- Customer Service (24/7 assistance)
- ICare program
- Dedicated and real-time interactive social media platforms.
- Mobile Applications e.g. WalimuCare App
- Care Management
- Claims Management
- Professional health talks to staff

Why Choose MAKL

1. Health Insurance Administration

MAKL offers end-to-end health insurance administration services, including policy management, claims processing, member enrollment, and premium collection. We work closely with insurance providers to streamline operations, reduce administrative burden, and enhance customer satisfaction

2. Partnerships

We forge strategic partnerships with leading insurance companies, and healthcare organizations to leverage synergies and deliver innovative solutions. These collaborations enable us to incorporate cutting-edge technologies and stay at the forefront of healthcare administration

3. Provider Network Management

We collaborate with healthcare providers to establish and manage robust networks of hospitals, clinics, and specialized medical practitioners. MAKL negotiates favorable contracts, conducts credentialing and quality assessments, and handles network performance monitoring to ensure optimal service delivery.

To enhance service delivery and ease of access, MAKL has accredited over 800+ healthcare providers across the country and within Eastern Africa. The provider network comprises of County and National Government, Faith based and Private health facilities.



4. Customer Support and Engagement

MAKL places great emphasis on providing exceptional customer support and engagement services. We have dedicated helplines, online portals, and mobile applications to assist members, healthcare providers, and insurance partners with inquiries, issue resolution, and information dissemination.

The below initiatives are what makes our contact center outstanding by having a real-time member engagement through:

- Inbound and Outbound calls management.
- Toll free numbers: Member are able to reach out through the toll-free number.
- WalimuCare mobile application: members with smart-phone can be able to monitor their benefit and track utilization through the mobile app.
- SMS prompts for members seeking services: members receive real-time SMS prompt when a request has been processed through the PSMS system giving instant feedback to the member.
- Automated call backs for admitted clients. Members receiving services under inpatient care receives automated calls on their treatment progress.
- Feedback prompts from members seeking services: Members receives SMS prompts to rate services of the medical service provider as well as rating their experience.
- Dedicated and real-time interactive social media platforms. -with active member presence on Facebook, Instagram, Twitter and WhatsApp account.
- Routine customer satisfaction surveys

5. Claims Management

We offer robust health information management solutions, including electronic medical record (EMR) systems, data analytics, and secure health information exchange. Our technology platform enables healthcare providers to store, access, and analyze patient data efficiently, leading to improved decision-making and better patient outcomes

MAKL manages medical schemes on a paperless mode through an online Medical Claims Management System for preauthorization, claiming and payment of claims. The web-based Patient Service Management System is used for:

- ✓ Verification of the member through use of the members' fingerprints
- ✓ Medical scheme benefits cover verification before servicing
- ✓ Capture of medical expenses incurred
- ✓ Submission of claims
- ✓ Reconciliation of the accounts and payment
- ✓ Submission of necessary supporting documents such as APDK Disability Card, Proof of Schooling, Claim and Preauth forms.



6. Compassionate and professional medical team

Our expert team efficiently handles claims processing and adjudication, ensuring accuracy, transparency, and timely approvals. We utilize advanced technologies and stringent quality controls to minimize errors and streamline the claims settlement process

our culture is key and our team is paramount to creating it. Our team is made up of innovative and imaginative employees that work together to break the mold. We also know that happy employees translate to happy client.

For efficiency and optimization of productivity, the team is grouped according to the below departments:

I. Outpatient team

They handle outpatient, optical dental and maternity. They do online approval of preauthorization requests sent from these departments and also issue offline approval via email where there is a system challenge.

II. Inpatient team

They issue preauthorization approval for medical and surgical cases for patient seeking hospitalization. The team is further grouped into:

- Admission Team- handling admission requests and providing adequate response in line with the request.
- Discharge team – they handle the request to discharge patient who are on discharge.
- Extension team- Handling request for patients still admitted and require further treatment.
- Escalation team- Handling all enquiries requests coming through emails and coordinating timely response.

7. Quality Assurance

At MAKL, we are committed to maintaining the highest standards of quality in all our services. We adhere to internationally recognized healthcare regulations and industry best practices. Our team undergoes continuous training and professional development to stay updated with the latest advancements in healthcare administration.



Our Clients



**COUNTY GOVERNMENT
OF NANDI**
SOURCE OF CHAMPIONS



Our Partners



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