



Mitera HMO **Elderly Plans**



Consultations

Hospital based consultations with General practice doctors and medical officers	Covered
Hospital based Consultations with specialists	Covered
Telemedicine	Unlimited 24/7
Doctor Home Visits	Covered

Medications

Chronic Disease Medication	Covered
Outpatient Prescription Medicines	Covered

Diagnostics

Basic Diagnostic Tests	Covered
Advanced & Complex Investigations (limited To Doppler scan, CT scan, MRI Scan and echocardiograph)	C.T/M.R.I Scan Only (4sessions)

Kidney Dialysis	-
Optical Care - Treatment of Acute and Chronic Eye Diseases	₦50,000
Optical Care - Supply of Frames, Lenses & Contact Lenses	Lenses, Frames & Contact Lenses ₦30,000/Annum
Optical Care - Eye Surgeries	Covered up to Surgery Limit
Physiotherapy	₦45,000

Premium	450,340
Hospital Category	B-D
Inpatient Limit (₦)	₦1,200,000
Accidents & Emergencies: Resuscitative or lifesaving initial treatment	Covered
Accommodation (including feeding)	Semi Private (30 Days/Annum)
Accidents & Emergencies: Resuscitative or lifesaving initial treatment	Covered
Intensive Care Unit (ICU) & High Dependency Unit (HDU)	-
Surgeries 2	₦500,000
Outpatient Limit (₦)	400,000

Ambulance Evacuation Services

Hospital to Hospital	Covered
Home/Road Side to Hospital	✓ (3 Times Per Annum)

Other Benefits

Cancer Care	Covered
Death and Funeral Expenses 5	₦100,000
Dental Care (relief of pain, fillings, nonsurgical, extractions, preventive care, scaling and polishing, Dental Surgical Extraction & Root Canal Therapy, Dental Prosthetics)	₦50,000
Ear, Nose and Throat care (Treatment of Acute and Chronic Diseases Only)	Covered
ENT Care - ENT Surgeries	Covered up to Surgery Limit
Health Checks	Limited to: Basic (Physical, BP, Urinalysis), Blood Sugar, HIV, ECG, PCV, Lipid Profile and Pap's Smear, Prostate Specific, Liver function Test, Antigen, Mammography

NOTE:

- 15% Discount on monthly premiums for Annual Payment, See section C for Annual Rates
- "This benefit includes all surgical costs relating to day case procedures, Minor, Intermediate, Major Surgeries, Endoscopic Procedures (Therapeutic and Diagnostic)"
- ONLY available on Telemedicine Platform as advised by Mitera
- This includes X-Rays, Ultrasounds, and Laboratory tests (WHO list of essential in-vitro diagnostics)
- "Enrollee is covered for a payment up to the stated limit in the event of Death (Natural, Accidental). The age limit for this benefit is 80 years. Other terms and conditions apply."
- Health checks can only be done at any of our designated hospitals/diagnostic centers. Health checks are otherwise non-refundable

- a. Only persons between the ages of 51 - 85 years are eligible for this plan.
- b. There will be a waiting period of 2 weeks after registration. Plans purchased become active 4 weeks after purchase date.
- c. All benefits are subject to their respective sectional limits which are described as Inpatient Limit and Outpatient Limit. However, within the respective sectional limit, there are specific benefit limits as well. Consequently, in the event that any specific benefit limit under the sectional limit is exhausted,the remaining limit in that section will only cover other benefits within the section apart from the one that the specific benefit limit has been exhausted."
- d. The following benefits will not be covered or provided in the first 2 months of the commencement of the scheme: Chronic Disease Medication
- e. The following benefits will not be covered or provided in the first 3 months of the commencement of the scheme: Optical Care, Dental Care.
- f. The following benefits will not be covered or provided in the first 6 months of the commencement of the scheme: Death and Funeral Expenses.
- g. The following benefits will not be covered or provided in the first year of the commencement of the scheme: Surgeries, Cancer Care, and Intensive Care Services. This period otherwise known as the waiting period shall commence on the date of entry to the date of renewal. On renewal, this benefit will be accessible provided the enrollee has been enrolled for one year with the HMO.

EXCLUSIONS

- The following are excluded from all plans: -
1. Overseas treatment and transplant surgery
 2. All maternity, neonatal, and family planning services
 3. Plastic/cosmetic surgeries
 4. Advanced and complex investigations not stated in the schedule of covered services
 5. Investigations and treatment for problems relating to infertility e.g. hydrotubation, hysterosalpingogram, I.V.F, G.I.F.T and artificial insemination
 6. Virility enhancing drugs
 7. HIV/AIDS Care & Treatment
 8. Herbal drugs, nonprescription drugs, and experimental drugs and treatment
 9. Other laboratory investigations not listed in the schedule of covered services
 10. Dental care not listed in the schedule of covered services
 11. Homecare and domiciliary services
 12. Joint replacements and prosthetic limbs
 13. Psychiatric Illness and Treatment
 14. Immunizations
 15. Interstate referral services
 16. Comprehensive health screening/well persons check outside the scope of the benefits covered by the health checks.
 17. Self-inflicted injuries
 18. Treatment of obesity
 19. Covid-19 testing and treatment
 20. Speech disorders
 21. Room upgrades beyond that specified in the plan benefits
 22. Management of severe burns (burns covering more than 10% of body surface area)
 23. Learning difficulties, behavioral and developmental problems
 24. Consultations with unrecognized consultants, hospitals, family doctors, therapists, dental practitioners, or complementary medicines practitioners
 25. Any other treatment, service, procedure, or investigation not listed in the schedule of covered medical services"

MiSenior+

Consultations

• Premium	850,340
• Hospital Category	A-D
• Inpatient Limit (₦)	₦1,600,000
• Accidents & Emergencies: Resuscitative or lifesaving initial treatment	Covered
• Accommodation (including feeding)	Semi Private (30 Days/Annum)
• Accidents & Emergencies: Resuscitative or lifesaving initial treatment	Covered
• Intensive Care Unit (ICU) & High Dependency Unit (HDU)	-
• Surgeries 2	₦500,000
• Outpatient Limit (₦)	₦700,000

• Hospital based consultations with General practice doctors and medical officers	Covered
• Hospital based Consultations with specialists	Covered
• Telemedicine	Unlimited 24/7
• Doctor Home Visits	Covered

Medications

• Chronic Disease Medication	Covered
• Outpatient Prescription Medicines	Covered

Diagnostics

• Basic Diagnostic Tests	Covered
• Advanced & Complex Investigations (limited To Doppler scan, CT scan, MRI Scan and echocardiograph)	C.T/M.R.I Scan Only (4sessions)

Ambulance Evacuation Services

• Hospital to Hospital	Covered
• Home/Road Side to Hospital	✓ (3 Times Per Annum)

Other Benefits

• Cancer Care	Covered
• Death and Funeral Expenses 5	₦100,000
• Dental Care (relief of pain, fillings, nonsurgical, extractions, preventive care, scaling and polishing, Dental Surgical Extraction & Root Canal Therapy, Dental Prosthetics)	₦50,000
• Ear, Nose and Throat care (Treatment of Acute and Chronic Diseases Only)	Covered
• ENT Care - ENT Surgeries	Covered up to Surgery Limit
• Health Checks	Limited to: Basic (Physical, BP, Urinalysis), Blood Sugar, HIV, ECG, PCV, Lipid Profile and Pap's Smear, Prostate Specific, Liver function Test, Antigen, Mammography

• Kidney Dialysis	-
• Optical Care - Treatment of Acute and Chronic Eye Diseases	₦50,000
• Optical Care - Supply of Frames, Lenses & Contact Lenses	Lenses, Frames & Contact Lenses ₦30,000/Annum
• Optical Care - Eye Surgeries	Covered up to Surgery Limit
• Physiotherapy	₦45,000

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d. The following benefits will not be covered or provided in the first 2 months of the commencement of the scheme: Chronic Disease Medication

e. The following benefits will not be covered or provided in the first 3 months of the commencement of the scheme: Optical Care, Dental Care.

f. The following benefits will not be covered or provided in the first 6 months of the commencement of the scheme: Death and Funeral expenses.

g. The following benefits will not be covered or provided in the first year of the commencement of the scheme: Surgeries, Cancer Care, and Intensive Care Services. This period otherwise known as the waiting period shall commence on the date of entry to the date of renewal. On renewal, this benefit will be accessible provided the enrollee has been enrolled for one year with the HMO.

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