

# NIGERIA | Liberty Health Cover corporate and SME benefit table 2023

This table will give you an overall summary of the benefits we offer. Please read this summary together with the Liberty Health Cover Policy Conditions, which provides more detailed information. The annual benefit limits per insured person for the year are in Nigerian Naira (NGN).

Benefit plan	Global Elite	Plus Africa	Classic Critical Care	Classic	Lite
<b>Region of cover</b>	Worldwide (excluding North America) Evacuation and critical care: Africa and India	Africa, India, U.A.E. and Lebanon	In-country only Evacuation and critical care: Africa and India	In-country only	In-country only
<b>Network providers paid at Liberty Tariffs</b>	Premier Network	Premier Network	Enhanced Network	Enhanced Network	Standard Network (no payment for providers outside this network)
<b>Overall limit</b>	415 000 000	210 000 000	45 000 000	45 000 000	8 300 000
<b>Day-to-day benefits (for conditions that generally appear suddenly, progress rapidly and are relatively short in duration)</b>					
GP consultations: unlimited GP consultations at accredited network of general practitioners at the negotiated Liberty Tariff	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
<ul style="list-style-type: none"> <li>Non-network GP and specialist consultations</li> <li>1 x eye test per insured person per year</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>	1 040 000	845 000	560 000	560 000	435 000
<b>Optical benefits</b>					
Frames and lenses (including contact lenses) once every 2 years	145 000	106 000	68 500	68 500	50 000
<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	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
<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.	735 000	605 000	380 000	380 000	240 000
<b>Psychological wellbeing benefits</b>					
<b>Psychologist/social worker consultations and prescribed acute medication</b>	Subject to day-to-day benefits limit	Subject to day-to-day benefits limit	Subject to day-to-day benefits limit	Subject to day-to-day benefits limit	Subject to day-to-day benefits limit
<b>Ongoing psychiatric consultations and associated chronic medication</b>	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit
<b>Hospital benefits (subject to pre-authorization and pre-clinical funding protocols)</b>	25 days per annum	20 days per annum	15 days per annum	15 days per annum	10 days per annum
<b>Maternity benefits (subject to pre-authorization and clinical funding protocols)</b>					
<b>Infertility - consultations and diagnostic tests only</b>	Consultations and appropriate tests	Consultations and appropriate tests	x	x	x
<b>Maternity within the Nigeria provider network, subject to registration on the Liberty Health Cover Maternity Programme</b> Outpatient consultations, ultrasounds, pathology tests, natural childbirth and non-elective c-section delivery, pre- and post-natal care, and high-risk pregnancies and complications	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
<b>Neonatal care - incubator, phototherapy, congenital conditions, prematurity</b>	37 500 000	27 500 000	7 500 000	7 500 000	2 000 000
<b>Postnatal depression - medication, consultations, pathology</b>	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to day-to-day benefits limit
<b>All maternity outside region of cover (refund to member only) or outside Nigeria provider network</b> Outpatient consultations, ultrasounds, pathology tests, natural childbirth and non-elective c-section delivery, pre- and post-natal care, and high-risk pregnancies and complications	Normal delivery (including pre- and post-natal care and childbirth) up to a maximum of 275 000. Childbirth by c-section (where medically necessary and subject to pre-authorization) up to a maximum of 760 000.	Normal delivery (including pre- and post-natal care and childbirth) up to a maximum of 225 000. Childbirth by c-section (where medically necessary and subject to pre-authorization) up to a maximum of 450 000.	Normal delivery (including pre- and post-natal care and childbirth) up to a maximum of 225 000. Childbirth by c-section (where medically necessary and subject to pre-authorization) up to a maximum of 300 000.	Normal delivery (including pre- and post-natal care and childbirth) up to a maximum of 225 000. Childbirth by c-section (where medically necessary and subject to pre-authorization) up to a maximum of 300 000.	x
<b>Chronic conditions benefits (subject to pre-authorization and clinical funding protocols for conditions that require medication and treatment for more than three continuous months)</b>					
<b>GP and specialist consultations, prescribed medication, radiology and pathology (e.g. blood tests)</b>	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
<b>Hospital benefits (subject to pre-authorization 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	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
<b>Intensive care</b>	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
<b>Rehabilitation, Private nursing and Hospice care</b>	1 000 000 up to a maximum of 30 days	900 000 up to a maximum of 30 days	775 000 up to a maximum of 30 days	775 000 up to a maximum of 30 days	515 000 up to a maximum of 30 days
<b>Specialised radiology - combined limit in and out of hospital</b>	1 294 000	1 072 000	633 000	633 000	330 000
<b>Prosthesis and devices - per prosthesis/device</b>	2 000 000	1 500 000	1 200 000	1 200 000	600 000
<b>External medical appliances</b>	375 000	200 000	99 500	99 500	75 000
<b>Ambulance benefits (within region of cover)</b>					
<b>Emergency road ambulance services</b>	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
<b>Non-emergency road ambulance, cross-border ambulance (subject to pre-authorization)</b>	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
<b>Major diseases benefits (subject to pre-authorization and clinical funding protocols)</b>					
<b>Major diseases benefits limit</b>	37 500 000	27 500 000	7 500 000	7 500 000	3 750 000
<b>Provision of treatment (subject to the major diseases benefits limit)</b>	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis
<b>International benefits (subject to pre-authorization 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	Subject to the overall limit and appropriate sublimits. Africa and India only.	Subject to the overall limit and appropriate sublimits. Africa and India only.	US\$200 000 Africa and India only.	x	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	Subject to the overall limit and appropriate sublimits. Africa and India only.	Subject to the overall limit and appropriate sublimits. Africa and India only.	Subject to the overall limit and appropriate sublimits. Africa and India only.	x	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	Return economy class ticket and accommodation up to a maximum of 14 days. US\$300 per day for sundry costs (max 14 days).	Return economy class ticket and accommodation up to a maximum of 14 days. US\$250 per day for sundry costs (max 14 days).	Return economy class ticket and accommodation up to a maximum of 14 days. US\$200 per day for sundry costs (max 14 days).	x	x
<b>Repatriation of mortal remains</b> Applicable to international emergency medical evacuations and critical care cases only	3 750 000	1 200 000	1 200 000	x	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.	Subject to the overall limit and appropriate sublimits	Subject to the overall limit and appropriate sublimits	x	x	x
<b>LIBERTY WELLBEING AND DIGITAL TOOLS</b>					
Available to all beneficiaries. Access to the Liberty Wellbeing online platform for self-completion of health assessments and easy, 24-hour access to clinically approved health promotion material. Access to digital tools including a unique customer profile via desktop login or the Liberty Health Mobile App (iOS and Android).					

**Note:** If the start date of your health cover is after the start date of your employer's Liberty 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 Liberty 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 Liberty Health Cover Policy Conditions, the Policy Conditions will prevail. E&OE



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