

# NIGERIA | Liberty Health Cover corporate and SME benefit table 2024

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).



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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>	475 000 000	240 000 000	51 500 000	51 500 000	9 550 000
<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>Auxiliary services such as physiotherapy, chiropractics and speech therapy</li> <li>Annual medical examination</li> </ul>	1 200 000 Multivitamin and Probiotics 37 750	970 000 Multivitamin and Probiotics 37 750	645 000 Multivitamin and Probiotics 37 750	645 000 Multivitamin and Probiotics 37 750	500 000 Multivitamin and Probiotics 37 750
<b>Chronic Conditions Benefit</b> (conditions that require medication and treatment for more than three continuous months) <ul style="list-style-type: none"> <li>Consultations (GP and specialist)</li> <li>Prescribed chronic medication</li> <li>Pathology, i.e., blood tests requested by a doctor during the course of your consultations</li> <li>Basic radiology</li> </ul> Subject to pre-authorisation, clinical treatment protocols and 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	Paid in full Subject to overall limit
<b>Optical benefits</b>					
Frames and lenses (including contact lenses) once every 2 years	165 000	120 000	79 000	79 000	57 500
<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.	845 000	695 000	435 000	435 000	275 000
<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-authorisation 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-authorisation and clinical funding protocols)</b>					
<b>Infertility</b> - consultations and diagnostic tests only	Consultations and appropriate tests	Consultations and appropriate tests	100 000	100 000	100 000
<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</b> - incubator, phototherapy, congenital conditions, prematurity	43 000 000	31 500 000	8 650 000	8 650 000	2 300 000
<b>Postnatal depression</b> - medication, consultations, pathology	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 315 000. Childbirth by c-section (where medically necessary and subject to pre-authorisation) up to a maximum of 875 000.	Normal delivery (including pre- and post-natal care and childbirth) up to a maximum of 260 000. Childbirth by c-section (where medically necessary and subject to pre-authorisation) up to a maximum of 515 000.	Normal delivery (including pre- and post-natal care and childbirth) up to a maximum of 260 000. Childbirth by c-section (where medically necessary and subject to pre-authorisation) up to a maximum of 345 000.	Normal delivery (including pre- and post-natal care and childbirth) up to a maximum of 260 000. Childbirth by c-section (where medically necessary and subject to pre-authorisation) up to a maximum of 345 000.	Normal delivery (including pre- and post-natal care and childbirth) up to a maximum of 260 000. Childbirth by c-section (where medically necessary and subject to pre-authorisation) up to a maximum of 345 000.
<b>Hospital benefits (subject to pre-authorisation 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 Standard private ward	Paid in full Subject to overall limit Standard private ward	Paid in full Subject to overall limit Standard private ward	Paid in full Subject to overall limit Standard private ward	Paid in full Subject to overall limit Standard private ward
<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>	1 150 000 up to a maximum of 30 days	1 035 000 up to a maximum of 30 days	890 000 up to a maximum of 30 days	890 000 up to a maximum of 30 days	590 000 up to a maximum of 30 days
<b>Specialised radiology</b> - combined limit in and out of hospital	1 500 000	1 250 000	730 000	730 000	380 000
<b>Prosthesis and devices</b> - per prosthesis/device	29 000 000 for Cochlear implants 2 300 000 for all other prosthesis	21 500 000 for Cochlear implants 1 700 000 for all other prosthesis	17 500 000 for Cochlear implants 1 400 000 for all other prosthesis	17 500 000 for Cochlear implants 1 400 000 for all other prosthesis	8 700 000 for Cochlear implants 690 000 for all other prosthesis
<b>External medical appliances</b>	13 500 000 for Hearing Aids 860 000 for Other appliances	7 250 000 for Hearing Aids 460 000 for Other appliances	3 600 000 for Hearing Aids 230 000 for Other appliances	3 600 000 for Hearing Aids 230 000 for Other appliances	2 750 000 for Hearing Aids 175 000 for Other appliances
<b>Ambulance benefits (within region of cover)</b>					
<b>Emergency in-country ambulance services</b> (mode determined by logistics)	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 ambulance and cross-border ambulance</b> (mode to be determined by logistics, subject to pre-authorisation)	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-authorisation and clinical funding protocols)</b>					
<b>Major diseases benefits limit</b>	43 000 000	31 500 000	8 650 000	8 650 000	4 300 000
<b>Provision of treatment</b> (subject to the major diseases benefits limit)	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>Donor matching</b> (limited to immediate family members on the policy)	Paid subject to the major diseases benefit limit	Paid subject to the major diseases benefit limit	Paid subject to the major diseases benefit limit	Paid subject to the major diseases benefit limit	Paid subject to the major diseases benefit limit
<b>International benefits (subject to pre-authorisation 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	4 300 000	1 400 000	1 400 000	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>GYM BENEFIT</b>	Covered	Covered	Covered	Covered	Covered
<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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