

Mitera Health Limited was borne out of the need to provide specific community health systems that catered to individuals and families on stringent budgets. The vision is to create an enabling environment where all persons would have equal access to quality and affordable healthcare services.

We are set to achieve this through the introduction of a flexible and convenient savings options via mobile money payment and a debit prepaid card system towards healthcare costs.

Here are our competitive advantages:

- Mitera Maternity Savings Card, Health Savings Card & Mapp (Which enables savings for medical emergencies with Accruable loyalty points).
- Convenient/flexible payment plans.
- Wider enrolee age range cover.
- Extensive hospital coverage.
- Health and wellness programmes. - Pre-booking and consultation services.
- Tele-medicine.
- 24/7 multi-lingual contact centre.
- Mobile App and Digital/online platforms.



Alpha Plan



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Services	Benefits
SCIVICCS	Delients
Emergency services	Ambulance services.StabilizationEmergency drug and investigations.
Outpatient services	 General consultation Specialist consultation (3 times a year) Routine Laboratory tests Prescribed drugs Physiotherapy (3 sessions)
In - patient services	 AVAILABLE 4 MONTHS AFTER SIGN UP General ward General / specialist doctor's review Routine Laboratory Investigations Max admission days: 15 DAYS
Reproductive health services	 Family planning Services (Oral Contraceptives, IUCDs, Depo, Bilateral Tubal Ligation, Vasectomy)- All except Norplant are covered
Child health Services	 Routine NPI Immunization: BCG, Poliomyelitis, Measels, Yellow fever, Diphtheria, Pertussis, Tetanus, Hepatitis B
Surgical Services	• \\$250, 000 limit per annum
4TH QUATER AVAILABILITY	 Minor procedures covered Intermediate covered Major procedures covered
Radiological Services	 X-rays & Ultrasound Scans Electrocardiogram and Electroencephalogram covered
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Eye Care services	• Overall amount limit - \\10,000
4TH QUATER AVAILABILITY	 Primary Eye care - Covered Optical Limit {Frames & Lens} - \(\frac{4}{6}\),500
Dental Care Services	• Overall amount limit - \\20,000

Dental Care Services

4TH QUATER AVAILABILITY

· Overall amount limit - ₩20,000 Routine examination covered

 Treatment of infection covered · Simple extraction covered Amalgam dental fillings

- Composite dental fillings Scaling & Polishing

Complementary Services

Mental Health Services

- Counselling covered Outpatient consultation & treatment - (Up to
- 8 weeks)

Newsletters (covered quaterly) • Pharmacy Benefit Program (Hypertension, Diabetes, Asthma, etc)

• Health talk, Health Seminars, E-

BAND D

• Lifestyle and Weight Management

HOSPITAL ACCESS

PREMIUM PRICING (₦)

INDIVIDUAL (<60yrs)

Annual Plan ₩42,000.00

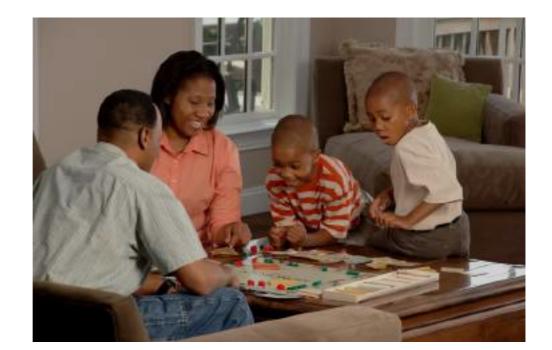
NOTE:

The above **retail plan** does not cover Maternity or Treatment of Chronic diseases. For more info on maternity plans, please see our maternity plan brochure.



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Plan



Emergency services

- Ambulance services.
- Stabilization
- Emergency drug and investigations.

Outpatient services

- General consultation
- Specialist consultation (5 times a year)
- Routine Laboratory tests
- Prescribed drugs
- Physiotherapy (5 sessions)

In - patient services

AVAILABLE 4 MONTHS AFTER SIGN UP

- Semi private ward
- General / specialist doctor's review
- Routine Laboratory Investigations
- Max admission days: 20 DAYS

Reproductive health services

Family planning Services (Oral Contraceptives, IUCDs, Depo, Norplant Bilateral Tubal Ligation, Vasectomy)- All covered

Child health Services

Routine NPI Immunization: BCG, Poliomyelitis, Measels, Yellow fever, Diphtheria, Pertussis, Tetanus, Hepatitis

Surgical Services

4TH QUATER AVAILABILITY

- **\#350, 000** limit per annum
- Minor procedures covered
- Intermediate covered Major procedures covered

Radiological Services

- X-rays & Ultrasound Scans
- Electrocardiogram and Electroencephalogram
 - covered

Eye Care services

4TH QUATER AVAILABILIT

- Overall amount limit ₦15,000
- Primary Eye care Covered
- Optical Limit {Frames & Lens} \(\mathbf{\pm}10,000\)

Dental Care Services

4TH QUATER AVAILABILITY

- · Overall amount limit ₦30,000
- Routine examination covered
- · Treatment of infection covered Simple extraction covered
- Amalgam dental fillings
- Composite dental fillings Scaling & Polishing
- Surgical Extraction Root canal treatment

Mental Health Services

- Counselling covered
- Outpatient consultation & treatment (Up to 8 weeks)

Complementary Services

- Health talk, Health Seminars, E-**Newsletters** (covered quaterly) • Pharmacy Benefit Program (Hypertension,
- Diabetes, Asthma, etc) Lifestyle and Weight Management

HOSPITAL ACCESS

BAND A & B

INDIVIDUAL (<60yrs)

PREMIUM PRICING (₦)

Annually ₩72,000.00

NOTE:

The above **retail plan** does not cover Maternity or Treatment of Chronic diseases. For more info on maternity plans, please see our maternity plan brochure.



Exclusion List

Medical examinations, services and supplies.	 Medical examinations for the purposes of obtaining and maintaining employment. Medical examinations for the purposes of admission into schools, as a fulfillment of obligation required by schools from time to time, licensing and/or insurance. Including, but not limited to provision of hearing aids.
Advanced Surgeries	 Including, but not limited to Fetal surgeries, Neuro surgeries, surgeries of the heart and/ or liver, Organ transplant (including bone marrow transplant), shunt operations and cardiothoracic surgeries
Cosmetic Services	 Including, but not limited to cosmetic surgery dentures, advanced conservative restorations, orthodontic and associated treatment. Provision of artificial limbs.
Custodial Care	• Home Care
Dental Care	 Including, but not limited to dental appliances, implants and supplies arising from procedures like surgeries.
Experimental, unorthodox or trado-medical care	 Including, but not limited to treatment of bone fractures in traditional bone setting homes. Any treatment that is not officially recognized
Eye Treatment	 Treatment of glaucoma, retinal detachment, cataract extraction or any treatment not specifically mentioned in the benefit cover. Laser Eye surgeries.
Force majeure	 Including, but not limited to Conditions relating to epidemics, Injuries arising from participating in wars, riots, strike and/or civil strife.
Professional sports and high risk sports	 Bodily injuries arising from partaking in professional sports, including, but not limited to mountaineering where ropes and glides are used, aviation (except when patient is travelling solely as a passenger), Hand gliding and parachuting, horse racing, car and motorbike racing.
Illnesses of unknown cause	 All diseases arising from unknown causes are excluded.
Injuries related to intoxication or fights and physical brawls.	 Injuries while under the influence of or disablement due wholly or partly to the effect of intoxicating liquor or drugs other than those prescribed by a medical practitioner Treatment of drug addiction, attempted
Obstetrics	 suicide and/or willfully inflicted injuries. We do not cover this at all on our retail plans
Overseas treatment	All medical expenses incurred outside
Force majeure	 Nigeria. This applies even if they are prescribed, recommended, or approved by the person's
	 In order for a treatment, service or supply to be considered Medically necessary, the service or supply must: be care or treatment which is likely to produce a significant positive outcome as and no more likely to produce a negative outcome than any alternative service or supply both as to the Sickness or Injury involved and the person's overall health condition be a diagnostic procedure which is indicated by the health status of the person and be as likely to result in information that could affect the course of treatment as and no more likely to produce a negative outcome than any alternative service or supply both as to the sickness or injury involved and the person's overall health condition; and as to diagnosis, care and treatment, be not costlier (taking into account all health expenses incurred in connection with the treatment, service or supply), than any alternative service or supply to meet the above tests. In determining if a service or supply is appropriate under the circumstances, Mitera Health will take into consideration: information relating to the affected person's health status; reports in peer reviewed medical literature; reports and guidelines published by nationally recognized health care organizations that include supporting scientific data; the opinion of health professionals in the generally recognized
	health specialty involved; and any other relevant information brought to Mitera Health's attention. In no event will the following services or supplies be considered to be Medically Necessary: those that do not require the technical skills of a medical, a mental health, or a dental professional; or those furnished mainly for the personal comfort or convenience of the person, any person who cares for him or her, or any persons who is part of his or her family, any healthcare provider, or healthcare facility; or those furnished solely because the person is an inpatient on any day on which the person's Sickness or Injury could safely, and adequately, be diagnosed or treated while no confined; or those furnished solely because of the setting, if the service or supply could safely and adequately be furnished in a Physician's or a dentist's office or other less costly setting.
Work-related accidents	• According to the prescribed law.
Search and rescue	 MITERAHEALTH shall not cover or pay for search and rescue operations if an enrollee is lost in a remote area.
Treatment of newborns not registered	MITERAHEALTH shall not cover or pay for any treatment incurred by or for any newborn that is not registered on any of our plans.
	MITERAHEALTH shall not pay for

Miscellaneous

and/or drug where the attending physician has not deemed it appropriate to provide such. Congenital abnormalities/Birth defects

• Solicitation by enrollee of a specific treatment

appointments and treatments for sexual dysfunction, as well as virility enhancing

drugs.

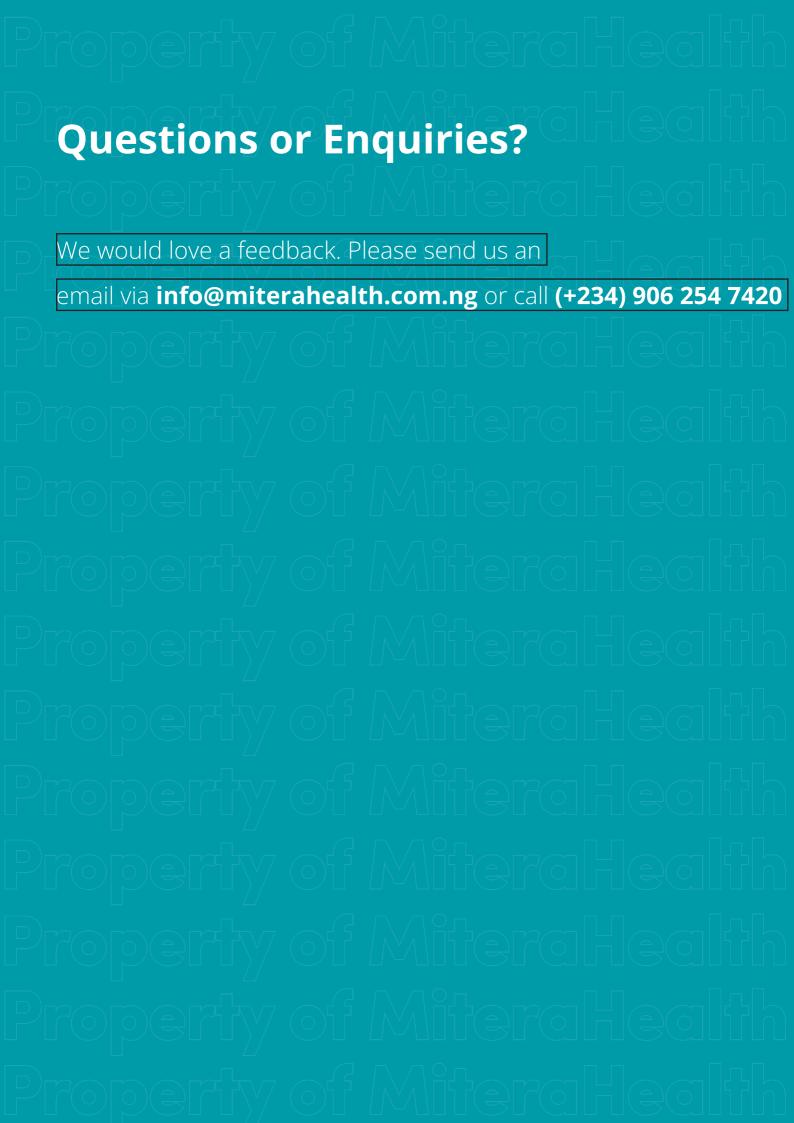
 \cdot Complications (or further treatment) arising from treatment of ailments not covered by the scheme or treatment received from hospitals not on the network where prior

emergencies.

covered services.

- authorization had not been obtained from Reliance HMO, in cases that do not qualify as
- Injuries sustained as a result of a criminal
- action.

 $\boldsymbol{\cdot}$ Any benefit not explicitly stated in the list of



Thank you for Reading