



Number of Subscribers	50 – 100	
GeroCare Home Doctor Service	₦ 60,000.00	1 Visit per month of 12 visits in total as needed and 24 teleconsultations
	₦ 30,000.00	1 visit every 2 months or 6 visits in total as needed and 12 teleconsultations
	₦ 15,000.00	1 visit every 3 months or 4 visits in total as needed and 8 teleconsultations
Annual payment plan for GeroCare Home Doctor Service and Inpatient Care (In Partnership with HYGEIA)	₦ 210,000.00	1 Visit per month of 12 visits in total as needed and 24 teleconsultations in addition to in-patient (admission) Services.
	₦ 180,000.00	1 visit every 2 months or 6 visits in total as needed and 12 teleconsultations in addition to in-patient (admission) Services.
	₦ 165,000.00	1 visit every 3 months or 4 visits in total as needed and 8 teleconsultations in addition to in-patient (admission) Services.
Annual payment plan for GeroCare Full HMO Plan (In Partnership with HYGEIA)	₦ 391,400	1 Visit a month or 12 in total as needed, 24 teleconsultations and Premium HMO Plan with and inpatient limit of N 1,600,000 and outpatient limit of N 700,000 a numerous other benefits (details Pg. 6)
	₦ 750,000	1 Visit a month or 12 in total as needed, 24 teleconsultations and Premium Plus HMO Plan with and inpatient limit of N 3,350,000 and outpatient limit of N 1,350,000 a numerous other benefits (details Pg. 6)

Terms: For rates to apply payments are made annually for a minimum of 100 subscribers. Every extra visit above-entitled number of visits would attract a charge of N 6,300 per visit.

## **GeroCare Doctor Home Visit Basic Plan**

GeroCare makes it easy for Nigerians within and outside Nigeria provide for regular doctor home visits and home medical care for their parents in any city in Nigeria. Individuals can do register patient details and make payments through the GeroCare application. Patients are immediately matched with a doctor who is in proximity and monthly medical visits begin. The family is updated with regular information as to the health status of the patient. In addition, the family can pay for any required tests and drugs via the app for direct delivery.

### **Benefit Plan**

#### *Access to Gerocare Platform*

- Multiple online accounts
- Visit reports.
- Online medical records
- Access to GeroCare partner services
- Real time health care tracking
- Real time health expenses tracking
- Access to GeroCare mobile application
- Teleconsultations

#### *Monthly Home Consultation and Review*

- General Consultation
- Physical Examination - General Examination, Examination of the Central Nervous System, Examination of the Cardiovascular System, Examination of the Abdomen and Genito-urinary examination. (including check of vital signs including Blood pressure)
- Request for Laboratory Investigations (If necessary)

- Prescription (if necessary)
- Provision of prescribed medication
- Health Education and Counselling
- Nutrition advice
- Health Status Report/Feedback
- Referrals to Hospital (if need be)

*Optional Benefits (added costs)*

- Procurement and home delivery of prescribed medication
- Dedicated Nursing Services / Caregiver Services
- Laboratory Investigations (excluding radiological services) - Home Service
- Additional Home Visits (N6,300 per extra visit)
- Home visits to rural areas

## **GeroCare Partial HMO Plan**

This is a combination of GeroCare home doctor Basic Plan and Inpatient (Admission) Services in partnership with Hygeia. The GeroCare partial HMO plans provides some assurance for those on the GeroCare Basic plan in the event they need hospital care strictly by referral by their GeroCare Home doctor. This partial HMO plan covers such patients care during admission in the hospital such that relations do not need to begin scampering around for fund.

## Benefits Plan

- A. Gerocare Doctor Home Service Basic Plan (Waiting Period – 3 Working Days)
- B. Inpatient Services (waiting period - 2 weeks)

Plans	GeroCare Inpatient Plan
Region of Cover	Domestic
Hospital Category	B – D
<b>Inpatient Limit (₹)</b>	<b>850,000</b>
Accidents & Emergencies: Resuscitative or lifesaving initial treatment	√ (Up to Inpatient Limit)
Accommodation (including feeding)	Private Ward (30 Days/Annum)
Day case procedures & minor surgeries	₹200,000 Limit
Intermediate surgeries	
Major Surgeries	
Basic Laboratory services based on the clinician's judgment ( <i>WHO list of essential in-vitro diagnostics</i> )	₹100,000 Limit
Basic X-Rays and Diagnostic Tests	₹50,000 Limit
General Consultations (Initial and Follow-up)	√ (Up to Inpatient Limit)
Specialist Consultations (Initial and Follow-up)	√ (Up to Inpatient Limit)
Inpatient Non-Chronic Prescription Medicines	₹100,000 Limit

### EXCLUSIONS:

The following are excluded from this plan: -

1. All Outpatient care - Covered by GeroCare Basic Plan
2. Consultations with unrecognized consultants, hospitals, family doctors, therapists, dental practitioners, or complementary medicines practitioners
3. Herbal drugs, non-prescription drugs, food supplements and experimental drugs and treatment
4. Joint replacements and prosthetic limbs
5. Overseas treatment and transplant surgery
6. Plastic/cosmetic surgeries
7. Self-inflicted injuries
8. Treatment of obesity
9. Virility enhancing drugs.
10. Any other treatment, service, procedure, or investigation not listed in the schedule of covered medical services.

## **GEROCARE FULL HMO PLAN (Waiting Period – 2 Weeks)**

The GeroCare full HMO Plan entitles the elderly patient to the full array of services provided by an HMO. This is inclusive of doctor home consultations, hospital general consultations, drugs, and tests both while on admission and outside of admission.

It requires no additional expenditure for the rest of the year.

### **Benefits Plan**

A. Gerocare Doctor Home Service Basic Plan (Waiting Period – 3 Working Days)

B. Full HMO Plan (2 Week Waiting Period)

Plans

Senior Midi

Senior Premium

Individual Premium (₦)/Annum <sup>1</sup>	391,400	750,000
Region of Cover	Local	Local
Hospital Category	B-D	B-D <sup>2</sup>
Inpatient Limit (₦)	1,600,000	3,350,000
Accidents & Emergencies: Resuscitative or lifesaving initial treatment	₦500,000	₦1,000,000
Accommodation (including feeding)	Semiprivate (30 Days/Annum)	Private Ward (30 Days/Annum)
Inpatient medication	√ (Up to Inpatient Limit)	√ (Up to Inpatient Limit)
Intensive Care Unit (ICU) & High Dependency Unit (HDU)	-	3 Days
Surgeries <sup>3</sup>	₦500,000	₦1,000,000
Outpatient Limit (₦)	700,000	1,350,000
Consultations		
Hospital based consultations with General practice doctors and medical officers	√ (Up to Outpatient Limit)	√ (Up to Outpatient Limit)
Hospital based Consultations with specialists	√ (Up to Outpatient Limit)	√ (Up to Outpatient Limit)
Medications		
Chronic Disease Medication	₦300,000	₦1,000,000
Outpatient Prescription Medicines		
Diagnostics		
Basic Diagnostic Tests <sup>5</sup>	√ (Up to Outpatient Limit)	√ (Up to Outpatient Limit)
Advanced & Complex Investigations (limited To CT Scan, MRI Scan, and echocardiograph)	C.T/M.R. I Scan Only (4 sessions)	Covered (8 sessions)
Immunizations		
Adult Immunizations	Meningitis, Yellow Fever, Hepatitis B	Meningitis, Yellow Fever, Hepatitis B
Ambulance Evacuation Services		
Hospital to Hospital)	Covered	Covered

(Home to Hospital & Roadside to Hospital)	√ (4 Times Per Annum)	√ (4 Times Per Annum)
Other Benefits		
Cancer Care	₦500,000	₦1,000,000
Death and Funeral Expenses <sup>6</sup>	₦100,000	₦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	₦80,000
Health Checks <sup>7</sup>	Limited to: Basic (Physical, BP, Urinalysis), Blood Sugar, Genotype, Blood Group, PCV Serum, Cholesterol and Pap's Smear, Prostate	Limited to: Basic (Physical, BP, Urinalysis), Blood Sugar, Genotype, Blood Group, PCV Serum, Cholesterol and Pap's Smear, Prostate
	Specific Antigen, Mammography	Specific Antigen, Mammography
Kidney Dialysis	-	Covered - 3 Sessions
Optical Care <sup>8</sup>	₦50,000	₦80,000
	Lenses, Frames & Contact Lenses ₦30,000/Annum	Lenses, Frames & Contact Lenses ₦40,000/Annum
Physiotherapy	₦30,000	₦80,000

**NOTE:**

1. The Premiums computed are inclusive of stamp duty tax.
2. Additional Access to Lagoon Hospitals
3. This benefit includes all surgical costs relating to day case procedures, Minor, Intermediate, Major Surgeries, Endoscopic Procedures
4. (Therapeutic and Diagnostic)
5. ONLY available on Telemedicine Platform as advised by Hygeia HMO.
6. This includes X-Rays, Ultrasounds and Laboratory tests (WHO list of essential in-vitro diagnostics)

7. Enrolee is covered for a payment up to the stated limit in the event of Death (Natural, Accidental). Age limit for this benefit is 80 years.  
Other
8. terms and conditions apply.
9. Health checks can only be done at any of our designated hospitals/diagnostic centres. Health checks are otherwise non-refundable.
10. Ophthalmic Services includes Eye testing, Treatment of acute and chronic eye diseases.

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**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 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, non-prescription 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. Home care and domiciliary services
12. Joint replacements and prosthetic limbs
13. Psychiatric Illness and Treatment
14. Immunizations not listed in covered services.
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% 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.

**NOTE**

- Only persons between the ages of 51-85 years are eligible on this plan.
- There will be a waiting period of 2 weeks after registration. Plans purchased becomes active 2 weeks after purchase date.
- All benefits are subject to their respective sectional limits which is described as: Inpatient Limit and Outpatient Limit. However, within the respective sectional limit, there are specific benefit limits as well. Consequently, if 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.
- The following benefits will not be covered or provided in the first 2 months of the commencement of the scheme: Chronic Disease Medication
- The following benefits will not be covered or provided in the first 3 months of the commencement of the scheme: Optical Care, Dental Care.
- The following benefits will not be covered or provided in the first 6 months of the commencement of the scheme: Death and Funeral Expenses.
- 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 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.