# MATERNITY PLANS

## A. INTRODUCTION

HyMat is a maternity care package offered by Hygeia HMO, designed specifically for expectant mothers. This plan provides affordable maternity cover from antenatal to delivery and includes baby care for the first year of life.

The Mother is allowed to choose from Hygeia HMO's network standard and well-equipped hospital to serve as a primary healthcare provider during the period of antenatal. Specific terms and conditions apply.

Premium is payable once in advance and will vary based on the selected hospital as well as the level of cover.

## B. COVERED SERVICES

| | HyMat Standard | HyMat Plus |
|---|---|---|
| **Benefits** | | |
| Registration | √ | √ |
| **Antenatal Care**[1] | | |
| Consultations (GP and Obstetric) | √ (Limited to Provider's ANC Package) | √ (Limited to Provider's ANC Package) |
| Routine Tests carried out during Antenatal Care | √ (Limited to Provider's ANC Package) | √ (Limited to Provider's ANC Package) |
| Supply of drugs & medication – drugs recommended during Ante-Natal Care | √ (Limited to Provider's ANC Package) | √ (Limited to Provider's ANC Package) |
| Advanced Investigations | Limited to Pelvimetry Only | Limited to Pelvimetry Only |
| **Delivery Services** | | |
| Spontaneous Vaginal Delivery | √ | √ |
| Spontaneous Vaginal Delivery (Twin) [2] | √ | √ |
| Caesarean Delivery | - | √ |
| Episiotomy Repair | √ | √[3] |
| Evacuation | √ | √ |
| Blood Transfusion | - | √ (Limited to One Pint Only) |
| Accommodation including Feeding[4] | Private Ward (3 Days/Annum) | Private Ward (5 Days/Annum) |
| Postnatal Care | | |
| 6-week Post-natal Check[5] | √ | √ |
| Others | | |
| Treatment of Complications in Pregnancy/Delivery[6] | √ | √ |
| Telemedicine | Unlimited 24x7 | Unlimited 24x7 |
| Baby Care[7] | √ | √ |

***NOTE:***

| | |
|---|---|
| 1 | *Services will vary based on the Antenatal Care Package at Selected Provider. Refer to NOTES section for more information* |
| 2 | *Refer to Pricing Table for Premiums* |
| 3 | *Only in the event of a Vaginal Delivery* |
| 4 | *After Delivery, Subject to availability at the Provider* |
| 5 | *Only Postnatal Consultation covered at the 6-week check* |
| 6 | *Refer to Pricing Table for Applicable Limits per Provider* |

| | |
|---|---|
| 7 | *Cover for Baby in its first year of Life. Please see more details below* |

## C. EXCLUSIONS

The following are excluded from the **HyMat Plans:**

1. Cervical Cerclage
2. Epidural Services
3. Antenatal care outside the enrollee's selected hospital
4. Routine inpatient and outpatient treatment including but not limited to other specialist consultations, the supply of medication, investigations other than what is covered under the Antenatal care at the preferred provider.
5. Family Planning services
6. Any other treatment, service, procedure, or investigation not listed in the schedule of covered medical services

## D. NOTE

**1. Waiting Period:**

a. There will be a waiting period of **7 days** after registration. Plan purchased becomes active **7 days** after the purchase date.

**2. Ante-Natal Care:**

a. Ante-natal care for a normal pregnancy typically begins between 10 to 12 weeks from the last menstrual period
b. The enrollee will have a total of 12 ante-natal visits, with at least 3 consultations with a obstetrician
c. Enrollee will have regular physical exams, including blood pressure monitoring, routine urinalysis, HBSAG, HIV, Hepatitis C, Blood group and Genotype as necessary each visit.
d. A minimum of 3 obstetric ultrasounds and Administration of Tetanus Toxoid, with at least two doses during pregnancy
e. Participation in ante-natal classes.

**3. Change of Provider:**

a. The enrollee is not allowed to change providers for Ante-natal Care after being checked in at the selected Provider
b. Where enrollee decides to change providers for delivery after Antenatal Care has commenced, Hygeia will only pay for the delivery costs and subsequent postnatal and baby care costs and will not be liable to pay for any other antenatal care at the new provider

**4. Upgrades:**

a. Where a twin delivery is expected the enrollee will pay a top-up to upgrade the plan to twin delivery Otherwise, Hygeia will only pay for one delivery and the enrollee pays the difference at the hospital.
b. The enrollee is allowed to upgrade her plan at least One (1) month to her delivery date. After that, no upgrade is allowed
c. An enrollee who pays for Normal Vaginal Delivery will not be able to top up to Caesarean session delivery later than 30 days to delivery date even in an emergency

**5. Refunds**

The HyMat plan is non-refundable except in the following circumstances.

a. The enrollee is entitled to a refund of 40% of the premium paid if delivery happens at another provider on an emergency basis. All other benefits still apply
b. The enrollee is entitled to a refund of 30% of the premium paid in the event of Vaginal Delivery where the HyMat Plus Plan was purchased.
c. The enrollee is entitled to a refund of 20% of the premium paid in the event of a Single Delivery where the HyMat Twin Delivery Plan was purchased.

**6. Miscarriages and Still-Births**

a. Where a miscarriage occurs and the enrollee requires an evacuation, this will be covered under the plan. The enrollee will only be entitled to a refund of 50% of the premium paid.
b. Where a still-birth occurs, the enrollee will still be managed on the plan and eligible for post-natal care. The enrollee will not be entitled to any refund.

## BABY CARE BENEFITS

### A. COVERED SERVICES

| | Baby Care |
|---|---|
| **Region of Cover** | Nigeria |
| **Hospital Category** | Hospital of Birth |
| **Inpatient Limit (₦)** | **850,000** |
| Accidents & Emergencies: Resuscitative or lifesaving initial treatment | √ (Up to Inpatient Limit) |
| Accommodation with accompanying Carer (including feeding) | General Ward (10 Days/Annum) |
| Inpatient medication, medical & surgical consumables | √ (Up to Inpatient Limit) |
| Neonatal Care Services (Treatment of mild or moderate neonatal sepsis, Incubator Care and Special Care Baby Unit) | ₦200,000 |
| **Outpatient Limit (₦)** | **350,000** |
| **Consultations** | |
| General Consultations (Initial and Follow-up) | √ (Up to Outpatient Limit) |
| Pediatric Consultations (Initial and Follow-up) | √ (Up to Outpatient Limit) |
| Telemedicine | Unlimited 24/7 |
| **Medications** | |
| Outpatient Prescription Medicines | ₦80,000 |
| **Tests & Investigations** | |
| X-Rays and Basic Diagnostic Tests | √ (Up to Outpatient Limit) |
| Laboratory tests (***WHO list of essential in-vitro diagnostics***) | √ (Up to Outpatient Limit) |
| **Neonatal Care** | |
| Neonatal Care Services (Male circumcision, Ear piercing, Phototherapy,) | √ (Up to Outpatient Limit) |
| **Immunizations** | |
| NPI Immunizations | BCG, Measles, DPT, Oral polio, IPV, Vitamin A supplementation, Pentavalent vaccine |
| Additional Immunizations | Hepatitis A, Hepatitis B, Hib, Chicken Pox, MMR, Pneumococcal, Rotavirus, Meningitis, Yellow Fever, Typhoid Fever |

### B. EXCLUSION

The following are excluded from the **Baby Care** benefits**: -**

1. All surgeries
2. Overseas treatment and Transplant surgery
3. Herbal drugs, non-prescription drugs, food supplements, branded supplements, and experimental drugs and treatment
4. Other laboratory investigations not listed in the schedule of covered services
5. Other immunizations not listed in the schedule of covered services
6. Neonatal care not listed under neonatal services
7. All COVID-19 testing and treatment
8. All treatments for Speech disorders
9. Room upgrades beyond what is specified in the plan benefits
10. Treatments of Congenital Abnormalities
11. Management of severe burns (burns covering more than 10% body surface area)
12. Learning difficulties, behavioral and developmental problems
13. Consultations with unrecognized consultants, hospitals, family doctors, therapists, dental practitioners, or complementary medicines practitioners
14. Treatment of ailments or injuries arising from pandemics, epidemics, riots, civil unrest, and wars.
15. Any other treatment, service, procedure, or investigation not listed in the schedule of covered medical services

## C. NOTE

1. The benefit is only available in the baby's first year of life. Upon the expiration of the plan, the mother must purchase one of the eligible Standard Hygeia HMO retail plans for the Baby to continue having access to care.
2. All benefits are subject to their respective sectional limits, which are described as the **Inpatient Limit** and the **Outpatient Limit**. However, within the respective sectional limit, there are specific benefit limits. 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 which the specific benefit limit has been exhausted.

HYGEIA HMO

# HYMAT PRICELIST

| | Category | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Plan Name | A | B | C | D | E | F | G | H | I |
| HyMat Plus | 800,000 | 850,000 | 900,000 | 1,000,000 | 1,200,000 | 1,500,000 | 2,000,000 | 2,500,000 | 3,000,000 |
| HyMat Standard | 400,000 | 450,000 | 550,000 | 650,000 | 750,000 | 900,000 | 1,300,000 | | |
| HyMat Standard Twin Delivery | 550,000 | 600,000 | 650,000 | 750,000 | 1,200,000 | 1,500,000 | 2,000,000 | | |

| | | Category | | | | | | |
|---|---|---|---|---|---|---|---|---|
| S/N | Provider Name | State | City | Treatment of Complication Applicable Limit | HyMat Standard | HyMat Standard (Twin Delivery) | HyMat Plus | HyMat Plus (Twin Delivery) |
| 1 | Abitop Medical Centre | Osun | IfeEast | ₦70,000 | A | A | B | - |
| 2 | Adebayo Specialist Hospital | Lagos | Alimosho | ₦70,000 | A | A | C | - |
| 3 | Adia Hospital | Lagos | Ikorodu | ₦70,000 | B | A | B | - |
| 4 | Agape Medical Centre | Lagos | Alimosho | ₦70,000 | A | B | B | - |
| 5 | All Souls Infirmary Hospital | Lagos | Agege | ₦70,000 | A | A | B | - |
| 6 | Al-Sadiq Hospital | Lagos | Kosofe | ₦70,000 | A | A | B | - |
| 7 | Angel And Eagle Specialist Hospital | Ogun | AbeokutaSouth | ₦70,000 | B | A | D | - |
| 8 | Aniyun Hospital Ltd | Lagos | Shomolu | ₦70,000 | B | A | D | - |
| 9 | Barbinton Medical Centre Ketu | Lagos | Ikeja | ₦70,000 | A | A | B | - |
| 10 | Base Specialist Hospital | Lagos | Lagos | ₦70,000 | A | A | C | - |
| 11 | Beachland Specialist Hospital, Arepo | Ogun | Ifo | ₦70,000 | B | A | D | - |
| 12 | Bee Hess Hospital | Lagos | Alimosho | ₦70,000 | A | B | B | - |
| 13 | Blue Cross Hospital | Lagos | Ikeja | ₦70,000 | B | A | D | - |
| 14 | Bonne Sante Hospital | Lagos | Ojo | ₦70,000 | A | B | B | - |
| 15 | Bosun Clinic & Maternity Home | Lagos | Alimosho | ₦70,000 | A | A | C | - |
| 16 | Broad Hospital | Lagos | Alimosho | ₦70,000 | A | A | C | - |
| 17 | Calabar Women And Children Hospital | Cross River | CalabarMunicipality | ₦70,000 | A | A | B | - |
| 18 | Carepoint Clinic Egbeda Limited | Lagos | Alimosho | ₦70,000 | A | A | C | - |
| 19 | Crest Hospital | Lagos | Epe | ₦70,000 | A | A | C | - |
| 20 | Crystal Specialist Hospital | Lagos | Alimosho | ₦70,000 | A | A | B | - |
| 21 | Deo-Newday Integrated Medical Services | Ondo | AkureSouth | ₦100,000 | E | E | F | - |
| 22 | Dolu Hospital | Lagos | Oshodi-Isolo | ₦70,000 | B | A | A | - |
| 23 | Dorcas Hospital Nigeria Ltd | Lagos | Lagos | ₦70,000 | A | A | C | - |
| 24 | Dunia Hospital | Lagos | Agege | ₦70,000 | A | B | B | - |
| 25 | Efeturi'S Lifeline Hospital, Osogbo | Osun | Osogbo | ₦70,000 | A | A | B | - |
| 26 | Emmanuel Medical Centre | Osun | Osogbo | ₦70,000 | A | A | B | - |
| 27 | First U-Turn Hospital | Lagos | Alimosho | ₦70,000 | A | A | C | - |
| 28 | Foundation Memorial Hospital | Benue | Makurdi | ₦70,000 | A | A | C | - |
| 29 | George'S Memorial Medical Centre | Lagos | Ibeju/Lekki | ₦100,000 | G | F | G | - |
| 30 | God'S Knot Hospital | Oyo | IbadanCentral | ₦70,000 | B | A | C | - |
| 31 | Greenlife Hospital Limited, Ilupeju | Lagos | LagosMainland | ₦70,000 | C | A | B | - |
| 32 | Greenville Olive Specialist Hospital | Federal Capital Territory | Abuja Municipal | ₦70,000 | A | A | B | - |
| 33 | Hamkad Hospital Nigeria Ltd. | Lagos | Abule - Egba | ₦70,000 | A | A | B | - |
| 34 | Harmony Hospital Limited - Kaduna | Kaduna | KadunaNorth | ₦100,000 | D | E | E | F |
| 35 | Havilah Specialist Clinic & Consulting Ltd | Federal Capital Territory | Federal Capital Territory | ₦70,000 | A | B | B | - |
| 36 | Hayy'S Haven Hospital | Lagos | Kosofe | ₦70,000 | A | A | C | - |
| 37 | Ihunanya Specialist Hospital | Abia | AbaNorth | ₦70,000 | A | B | B | - |
| 38 | Janik Specialist Hospital | Plateau | Plateau | ₦70,000 | A | A | B | - |
| 39 | Jefis Specialist Hospital Ltd | Lagos | Agege | ₦70,000 | A | A | C | - |
| 40 | Jethrone Hospital And Diagnostic Centre | Federal Capital Territory | Kubwa | ₦70,000 | A | A | C | - |
| 41 | Jubilee Hospital - Ibadan | Oyo | Ibadan | ₦70,000 | A | A | B | - |
| 42 | Kingtrust Medical Center | Lagos | Surulere | ₦70,000 | B | A | C | - |
| 43 | Lad Medical Centre | Oyo | IbadanCentral | ₦70,000 | B | A | C | - |
| 44 | Life Forte Specialist Hospital | Rivers | Port-Harcourt | ₦70,000 | A | B | B | - |
| 45 | Lifeshade Hospital And Medical Facilities Ltd | Lagos | Ikorodu | ₦70,000 | A | A | C | - |
| 46 | Light Shade Hospital | Lagos | Alimosho | ₦70,000 | A | B | B | - |
| 47 | Livia Shammah Hospitals Limited | Nasarawa | Karu | ₦70,000 | A | A | C | - |
| 48 | Livingston Specialist Hospital | Enugu | EnuguSouth | ₦70,000 | A | A | C | - |
| 49 | Lota Medical Centre | Lagos | Alimosho | ₦70,000 | A | A | B | - |
| 50 | Macedonia Specialist Hospital | Lagos | Ikeja | ₦70,000 | A | A | B | - |

**Please note that the list is subject to change as more providers are onboarded**

| | | | | Category | | | | |
|---|---|---|---|---|---|---|---|---|
| S/N | Provider Name | State | City | Treatment of Complication Applicable Limit | HyMat Standard | HyMat Standard (Twin Delivery) | HyMat Plus | HyMat Plus (Twin Delivery) |
| 51 | Masaka Central Hospital And Maternity | Nasarawa | Karu | ₦70,000 | A | B | B | - |
| 52 | Medicplus Hospitals | Ogun | Mowe | ₦70,000 | A | A | B | - |
| 53 | Med-In Specialist Hospital | Lagos | Ajeromi-Ifelodun | ₦70,000 | A | A | C | - |
| 54 | Mercy Thomas Oredugba Medical And Dental Centre | Lagos | Surulere | ₦70,000 | A | A | C | - |
| 55 | Meridian Hospitals | Rivers | Port-Harcourt | ₦70,000 | A | A | C | - |
| 56 | Micel Hospital | Lagos | Shomolu | ₦70,000 | B | A | C | - |
| 57 | Mobonike T Medical Centre | Lagos | Agege | ₦70,000 | A | A | C | - |
| 58 | Motayo Hospital | Lagos | Ikeja | ₦70,000 | B | A | D | - |
| 59 | Nasara Hospital & Maternity - Keffi | Nasarawa | Keffi | ₦70,000 | A | B | B | - |
| 60 | Newage Specialist Medical Centre | Kano | KanoMunicipal | ₦70,000 | A | B | B | - |
| 61 | Oak Hospitals | Lagos | Ikorodu | ₦70,000 | A | A | C | - |
| 62 | Occupational Health Prime Hospital | Lagos | Ibeju/Lekki | ₦70,000 | A | A | B | - |
| 63 | Orient Hospital And Maternity | Nasarawa | Nasarawa | ₦70,000 | A | B | B | - |
| 64 | Osogbo Central Hospital | Osun | Osogbo | ₦70,000 | A | B | B | - |
| 65 | Oyomesi Specialist Hospital | Oyo | IbadanNorthWest | ₦100,000 | B | A | B | - |
| 66 | Patfare Clinic | Rivers | Port-Harcourt | ₦70,000 | E | E | F | - |
| 67 | Patricare Hospital Limited | Rivers | Rivers | ₦70,000 | A | A | C | - |
| 68 | Peak Health Hospital | Lagos | Surulere | ₦70,000 | A | A | C | - |
| 69 | Redeemer'S Health Centre - Camp Ground | Ogun | Ogun | ₦70,000 | B | - | D | - |
| 70 | Redeemer'S Health Centre- Awolowo | Oyo | IbadanCentral | ₦70,000 | A | A | C | - |
| 71 | Regis And Reina Hospital Limited | Lagos | LagosMainland | ₦70,000 | B | B | E | - |
| 72 | Rolayo Medical Centre - Benson Ikorodu | Lagos | Ikorodu | ₦70,000 | B | A | B | - |
| 73 | Rolayo Medical Centre - Odogunyan Ikorodu | Lagos | Ikorodu | ₦70,000 | B | A | B | - |
| 74 | Simeone Hospital | Abia | AbaSouth | ₦70,000 | B | A | D | - |
| 75 | Sodipo Medical Centre | Ogun | Ipokia | ₦70,000 | B | A | C | - |
| 76 | Springsworth Specialist Hospital | Lagos | Ikeja | ₦70,000 | A | A | C | - |
| 77 | St Everest Hospital | Lagos | Ikorodu | ₦70,000 | A | A | C | - |
| 78 | St. Catherine'S Specialist Hospital - Abuja | Federal Capital Territory | Abuja Municipal | ₦70,000 | D | D | F | F |
| 79 | St. Catherine'S Specialist Hospital - Port Harcourt | Rivers | Port-Harcourt | ₦70,000 | C | C | E | E |
| 80 | St. Ives Specialist Hospital - Akowonjo Egbeda | Lagos | Alimosho | ₦100,000 | D | - | E | - |
| 81 | St. Ives Specialist Hospital - Ikeja | Lagos | Ikeja | ₦100,000 | F | - | F | - |
| 82 | St. Ives Specialist Hospital - Ikoyi | Lagos | Eti-Osa | ₦70,000 | F | - | F | - |
| 83 | St. Louis Catholic Hospital, Owo | Ondo | Owo | ₦70,000 | A | A | B | - |
| 84 | St. Margt Clinical Services | Rivers | Port-Harcourt | ₦70,000 | A | A | C | - |
| 85 | St. Martins Hospital | Rivers | Port-Harcourt | ₦70,000 | A | A | C | - |
| 86 | St. Mary'S Specialist Hospital, Ojodu | Lagos | Ojodu | ₦70,000 | C | - | E | - |
| 87 | Standard Care Health Solution Ltd | Rivers | Port-Harcourt | ₦70,000 | A | A | B | - |
| 88 | Stevans Hospital | Lagos | Ikorodu | ₦70,000 | A | A | C | - |
| 89 | Tobi Medical Centre Ltd | Oyo | Ibadan | ₦70,000 | A | A | B | - |
| 90 | Tola Crescent Medical Centre | Lagos | Shomolu | ₦70,000 | A | A | C | - |
| 91 | Victory Life Specialist Hospital | Lagos | Ikorodu | ₦100,000 | B | A | C | - |
| 92 | Vigor Hospital | Lagos | Ibeju/Lekki | ₦70,000 | G | - | G | - |
| 93 | Vine Branch Medical Centre | Oyo | Ibadan | ₦70,000 | C | - | E | - |

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