

			PREMIER CARE	PREMIER CARE	PREMIER CARE	PREMIER CARE	PREMIER CARE	PREMIER CARE
		Plan Size	Individual	Principal + 1	Principal + 2	Principal + 3	Principal + 4	Principal + 5
		Number of Lives covered	1	2	3	4	5	6
Parent Group	Benefit Group	Benefit	Area of cover: GHANA	Area of cover: GHANA	Area of cover: GHANA	Area of cover: GHANA	Area of cover: GHANA	Area of cover: GHANA
Day Cover Benefit	Outpatient Procedures		GHC 1,750	GHC 2,000	GHC 2,500	GHC 3,000	GHC 3,500	GHC 4,000
		Outpatient Procedures	Covered within Day Cover Limit	Covered within Day Cover Limit	Covered within Day Cover Limit	Covered within Day Cover Limit	Covered within Day Cover Limit	Covered within Day Cover Limit
		Detention	Covered within Day Cover Limit	Covered within Day Cover Limit	Covered within Day Cover Limit	Covered within Day Cover Limit	Covered within Day Cover Limit	Covered within Day Cover Limit
Medical Consultation Benefit			GHC 1,500	GHC 2,000	GHC 2,500	GHC 3,000	GHC 3,500	GHC 4,000
		GP Consultation	GP consultation	Covered within Medical Consultations Limit	Covered within Medical Consultations Limit	Covered within Medical Consultations Limit	Covered within Medical Consultations Limit	Covered within Medical Consultations Limit
		specialist consultation	All Specialist Consultations	Covered within Medical Consultations Limit	Covered within Medical Consultations Limit	Covered within Medical Consultations Limit	Covered within Medical Consultations Limit	Covered within Medical Consultations Limit
Investigations Benefit			GHC 2,500	GHC 3,250	GHC 4,000	GHC 5,000	GHC 5,500	GHC 6,000
		Basic laboratory investigations	basic laboratory investigations	Covered within Investigations limit	Covered within Investigations limit	Covered within Investigations limit	Covered within Investigations limit	Covered within Investigations limit
		Advanced laboratory investigation	advanced laboratory investigation	Covered within Investigations limit	Covered within Investigations limit	Covered within Investigations limit	Covered within Investigations limit	Covered within Investigations limit
		Basic Medical Imaging	basic medical imaging [x-ray, ultrasound, ECG, endoscopy]	Covered within Investigations limit	Covered within Investigations limit	Covered within Investigations limit	Covered within Investigations limit	Covered within Investigations limit
		Advance Medical Imaging	advanced medical imaging [MRI, CT, EEG, Echo] requested by specialists only	Covered within Investigations limit	Covered within Investigations limit	Covered within Investigations limit	Covered within Investigations limit	Covered within Investigations limit
Medications and Medical Consumables Benefit	Medications		GHC 2,500	GHC 4,000	GHC 5,000	GHC 6,000	GHC 6,500	GHC 7,000
		prescribed medication for acute conditions		Covered within Medications Limit	Covered within Medications Limit	Covered within Medications Limit	Covered within Medications Limit	Covered within Medications Limit
		prescribed medication for chronic conditions		Covered within Medications Limit	Covered within Medications Limit	Covered within Medications Limit	Covered within Medications Limit	Covered within Medications Limit
		Herbal medications		Covered within Medications Limit	Covered within Medications Limit	Covered within Medications Limit	Covered within Medications Limit	Covered within Medications Limit
	Medical Consumables	infusions[in hospital use only]		Covered within Medical Consumables Limit	Covered within Medical Consumables Limit	Covered within Medical Consumables Limit	Covered within Medical Consumables Limit	Covered within Medical Consumables Limit
		materials for dressing, sutures, bandages [in hospital use only]		Covered within Medical Consumables Limit	Covered within Medical Consumables Limit	Covered within Medical Consumables Limit	Covered within Medical Consumables Limit	Covered within Medical Consumables Limit
		syringes, catheters, giving sets, cannulae [in hospital use only]		Covered within Medical Consumables Limit	Covered within Medical Consumables Limit	Covered within Medical Consumables Limit	Covered within Medical Consumables Limit	Covered within Medical Consumables Limit
			GHC 7,500	GHC 9,000	GHC 10,000	GHC 11,000	GHC 12,000	GHC 13,500



		circumcision for male babies within the first 28 days	Covered up to GHC 300 within New Born benefit limit	Covered up to GHC 300 within New Born benefit limit	Covered up to GHC 300 within New Born benefit limit	Covered up to GHC 300 within New Born benefit limit	Covered up to GHC 300 within New Born benefit limit	Covered up to GHC 300 within New Born benefit limit
	Gynae Surgery		Covered up to GHC 4,500 within Obs & Gynae Limit	Covered up to GHC 4,500 within Obs & Gynae Limit	Covered up to GHC 4,500 within Obs & Gynae Limit	Covered up to GHC 4,500 within Obs & Gynae Limit	Covered up to GHC 4,500 within Obs & Gynae Limit	Covered up to GHC 4,500 within Obs & Gynae Limit
		Gynae Surgery (Theatre fees, surgeon fee, consumables, recovery ward, anesthesia including anesthetist fee)	Covered within Gynae Surgery limit	Covered within Gynae Surgery limit	Covered within Gynae Surgery limit	Covered within Gynae Surgery limit	Covered within Gynae Surgery limit	Covered within Gynae Surgery limit
Surgery Benefit	Surgery		GHC 7,000	GHC 10,000	GHC 12,000	GHC 13,000	GHC 14,000	GHC 15,000
		theatre fees	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit
		surgeons fee	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit
		consumables	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit
		recovery ward	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit
		anesthesia including anesthetist fees	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit	Covered within Surgery limit
Dental Benefit			GHC 800	GHC 1,200	GHC 1,500	GHC 1,750	GHC 2,000	GHC 2,500
	Basic Dentistry	basic dentistry	Covered within Dental Limit	Covered within Dental Limit	Covered within Dental Limit	Covered within Dental Limit	Covered within Dental Limit	Covered within Dental Limit
	Advanced Dentistry	advanced dentistry	Covered within Dental Limit	Covered within Dental Limit	Covered within Dental Limit	Covered within Dental Limit	Covered within Dental Limit	Covered within Dental Limit
			GHC 1,900	GHC 2,100	GHC 2,750	GHC 2,900	GHC 3,500	GHC 3,700
Eye Care Benefit	Eye surgery		Covered up to GHC 1,500 within the Eye Care Limit	Covered up to GHC 1,500 within the Eye Care Limit	Covered up to GHC 2,000 within the Eye Care Limit	Covered up to GHC 2,000 within the Eye Care Limit	Covered up to GHC 2,500 within the Eye Care Limit	Covered up to GHC 2,500 within the Eye Care Limit
		Eye Surgery	Covered within Eye Surgery limit	Covered within Eye Surgery limit	Covered within Eye Surgery limit	Covered within Eye Surgery limit	Covered within Eye Surgery limit	Covered within Eye Surgery limit
	Spectacle Limit		Covered up to GHC 400 within the Eye Care Limit	Covered up to GHC 600 within the Eye Care Limit	Covered up to GHC 750 within the Eye Care Limit	Covered up to GHC 900 within the Eye Care Limit	Covered up to GHC 1,000 within the Eye Care Limit	Covered up to GHC 1,200 within the Eye Care Limit
		Lens	Covered within Spectacle limit	Covered within Spectacle limit	Covered within Spectacle limit	Covered within Spectacle limit	Covered within Spectacle limit	Covered within Spectacle limit
		Frame	Covered within Spectacle limit	Covered within Spectacle limit	Covered within Spectacle limit	Covered within Spectacle limit	Covered within Spectacle limit	Covered within Spectacle limit
		Lens & Frame	Covered within Spectacle limit	Covered within Spectacle limit	Covered within Spectacle limit	Covered within Spectacle limit	Covered within Spectacle limit	Covered within Spectacle limit
Rehabilitation Benefit			GHC 1,000	GHC 1,000	GHC 1,500	GHC 1,500	GHC 2,000	GHC 2,000
	Physiotherapy		Covered upto GHC 1,000 the Rehabilitation limit	Covered upto GHC 1,000 the Rehabilitation limit	Covered upto GHC 1,500 the Rehabilitation limit	Covered upto GHC 1,500 the Rehabilitation limit	Covered upto GHC 2,000 the Rehabilitation limit	Covered upto GHC 2,000 the Rehabilitation limit
		Treatment and Medication	Covered up to Physiotherapyv limit	Covered up to Physiotherapyv limit	Covered up to Phvsiotherapyv limit	Covered up to Phvsiotherapyv limit	Covered up to Phvsiotherapyv limit	Covered up to Phvsiotherapyv limit

	Chiropractic	Treatment and Medication	not covered	not covered	not covered	not covered	not covered	not covered
	Mental Health	Treatment and Medication	not covered	not covered	not covered	not covered	not covered	not covered
Critical Illness Benefit			not covered	not covered	not covered	not covered	not covered	not covered
	Critical Illness	Treatment and Medication	not covered	not covered	not covered	not covered	not covered	not covered
Wellness Benefit			not covered	not covered	not covered	not covered	not covered	not covered
	Wellness	Wellness Limit	not covered	not covered	not covered	not covered	not covered	not covered