



RUBY

ProHealth HMO Limited Health Plan



ProHealth's **RUBY** Health Plan Benefits 2019

Out-patient Services

- a. General Consultation
- b. Specialist consultation
- c. Supply of prescribed drugs & medications
- d. Physiotherapy (8 sessions)
- e. Management of Chronic Conditions
- f. *Hypertension*
- g. *Diabetes*
- h. *Sickle cell Anemia*
- i. *Asthma*

- j. Ambulance services
- k. Between hospitals
- l. From road side to hospitals
- m. Management of the following chronic conditions;

Laboratory & Diagnostic Services

HAEMATOLOGY

Basic/Primary investigations

- a. Haemoglobin (Hb)
- b. Packed Cell Volume (PCV)
- c. White Blood Cell (Total & differential)
- d. Red Blood Cell Count (RBC)
- e. Full Blood Count
- f. Blood group
- g. Genotype
- h. Malaria parasite
- i. Platelet count
- j. Erythrocyte Sedimentation rate (ESR)
- k. Cross Matching

Secondary Investigations

- a. Direct Coomb's test
- b. Indirect Coomb's test
- c. Bleeding time
- d. Clotting time
- e. Prothrombin time
- f. Reticulocytes
- g. Mean Corpuscular Haemoglobin concentration (MCHC)
- h. Mean Corpuscular volume (MCV)
- i. Mean Corpuscular Haemoglobin (MCH)
- j. Sickling test

CLINICAL CHEMISTRY

Basic/Primary investigations

- a. Fasting blood sugar
- b. Random blood sugar
- c. Electrolyte, Urea & Creatinine (Emerald & Above)
- d. Calcium

- e. Phosphorus

Secondary Investigation

- a. Prostatic Acid Phosphatase
- b. Total acid phosphatase
- c. Amylase
- d. Cholesterol
- e. Tryglyceride
- f. HDL / LDL
- g. Liver function test
- h. Alkaline Phosphatase
- i. CK Amylase
- j. Oral Glucose Tolerance Test
- k. Protein electrophoresis
- l. 2hrs Post prandial test
- m. Glycated/Glycosylated Haemoglobin (HbA1c)
- n. Total Bilirubin
- o. Direct Bilirubin
- p. Indirect Bilirubin
- q. SGOT & SGPT
- r. Total protein
- s. Albumin
- t. Creatinine clearance
- u. Uric acid
- v. CSF glucose
- w. CSF protein

MICROBIOLOGY

Basic/primary investigations

- a. Urinalysis
- b. Urine m/c/s
- c. Stool m/c/s
- d. HVS m/c/s
- e. Sputum m/c/s

- f. Urethral & wound m/c/s
- g. Stool occult blood
- h. Pregnancy test

Secondary Investigation

- a. Microfilaria
- b. Mantoux / Heaf test
- c. Semen culture & sensitivity
- d. Semen analysis
- e. Skin scrapping for fungal examination
- f. Sputum AAFB for Tuberculosis
- g. H. Pylori assay
- h. Skin snip
- i. CSF m/c/s
- j. Blood culture

SEROLOGY

Basic/Primary Investigation

- a. Widal test
- b. VDRL
- c. Pregnancy test (Blood)
- d. Hepatitis B surface antigen
- e. HIV 1 & 2 screening

Secondary investigations

- a. Rheumatoid factor
- b. ASO titre
- c. Chlamydia screening
- d. Confirmatory test for HIV 1 & 2

IMMUNOLOGY

Secondary investigations

- a. Cortisol
- b. Follicle Stimulating Hormone
- c. Growth Hormone (HGH)
- d. HCG level (Molar Pregnancy)
- e. HCG level (Pregnancy Test)
- f. Insulin
- g. Luteinizing Hormone (HTSH)
- h. Oestriol
- i. Oestradiol
- j. Prolactin
- k. Progesterone
- l. Testosterone
- m. Thyroid Screen
- n. Thyrotrophin

Other Investigations

- a. Pap smear
- b. Prostatic Specific Assay (PSA)

RADIOLOGICAL INVESTIGATIONS

- a. Secondary investigations
- b. Chest x-ray & extremities
- c. Upper Limb
- d. Lower Limb
- e. Thorax (chest)
- f. Vertebrae
- g. Skull
- h. Abdomen

Ultrasound Scan:

- a. Obstetrics
- b. Abdominal scan
- c. Abdominopelvic
- d. Pelvic
- e. Breast
- f. Prostate
- g. Scrotum
- h. Testes
- i. Thyroid
- j. Transfrontanellar
- k. Transvaginal
- l. Follicular tracking
- m. Tissue

OTHER INVESTIGATIONS

Secondary investigations

E.C.G (Resting) Emerald & Above

ECG (Pre & Post exercise/stress)

Echocardiography

Special Radiological Investigations e.g

- Barium meal
- Barium swallow
- HSG.
- MCUG,
- RCUG,
- Myelogram,
- Intravenous Urography (IVU)
- Mammogram
- ECG
- Echocardiography
- C.T. Scan

In-Patient Services

- a. Hospitalization could be in general ward, semi-private room or a Private ward
- b. Skilled nursing care
- c. Inpatient medical services

- d. Supply of drugs and infusions
- e. Dressing
- f. Medical & surgical consumables
- g. Covered diagnosis laboratory and X-ray

Maternity Services (Family Plan only)

- a. Antenatal Services including consultation, examinations and supply of drugs for all antenatal visits
- b. Normal delivery
- c. Induction of labour/assisted delivery
- d. Caesarean section delivery (Emergency & Medically indicated)
- e. Delivery Room services (consumables)
- f. Management of labour
- g. Laboratory tests limited to haemoglobin estimation or packed cell volume evaluation, HIV 1 & 2 evaluation, blood group and genotype evaluation, Hepatitis B surface antigen, ultrasound scan examination, during the pregnancy period.
- h. Post-natal care: Babies delivered into the scheme should be enrolled as dependents by the fourth week of life. However health care services will be rendered within the first four (4) weeks and will be limited to routine primary health care, circumcision, treatment of minor infections and NPI immunization.
- i. Puerperal infection
- j. Hyper emesis gravid arum
- k. Pre-eclampsia
- l. Hospitalization & skilled nursing in connection with childbirth for the mother or new born child of a vaginal or caesarean delivery

Child Health Services (Family Plan only)

PAEDIATRICS & CHILD WELFARE

- Out-patient & in-patient consultation & treatment for enrollees
- Specialist consultation & treatment when recommended
- Circumcision & Ear piercing

Immunization services covering the following:

ROUTINE IMMUNIZATIONS (UNDER 5 YEARS)

Enrollees of the PHL scheme are covered for the following immunizations, as contained in the Federal Government National Programme on Immunization schedule.

- i. BCG

- ii. Oral Polio
- iii. DPT
- iv. Hepatitis B
- v. Yellow fever
- vi. Pentavalent
- vii. Haemophilus Influenza B (HiB)
- viii. Vitamin A supplementation - (All Plans)

OTHERS

- i. Pneumococcal
- ii. Varicella
- iii. Chicken pox
- iv. MMR
- v. Rotavirus

Family Planning Services (Family Plan only)

- a. Counselling
- b. IUCDs

- c. Injectable
- d. Oral Contraception

Surgical Procedures - Minor, intermediate, Major

MINOR SURGERIES

- i. The following minor surgeries are covered
- ii. Circumcision of male infants
- iii. Ear piercing

- iv. Excision of breast lump
- v. Ganglionectomy
- vi. Lumpectomy
- vii. Marsupialization (Bartholin's cyst)
- viii. Surgical drainage of abscess

- ix. Uterine evacuation of incomplete abortion
- x. Removal of In-growing toenail
- xi. minor wound debridement
- xii. evacuation of impacted faeces
- xiii. drainage of paronychia
- xiv. suturing of minor lacerations
- xv. chest tube insertion

INTERMEDIATE SURGERIES

The following intermediate surgeries are covered

- i. Appendectomy
- ii. Endoscopies
- iii. Excision of intrascrotal mass
- iv. Hemorrhoidectomy
- v. Herniorrhaphies
- vi. Herniotomy
- vii. Hydrocelectomy
- viii. Low fistulectomy
- ix. Varicolectomy,

- x. Bougienage
- xi. Haemorrhoidectomy (excluding 3rd degree hemorrhoids)
- xii. Cervical cerclage
- xiii. Manual removal of placenta,

MAJOR SURGERIES

The following major surgeries are covered

- i. Adenoidectomy
- ii. Tonsillectomy
- iii. Laparotomy for;
- iv. Ruptured ectopic gestation
- v. Ovarian cyst
- vi. Ruptured Appendix
- vii. Myomectomy
- viii. Hysterectomy
- ix. Prostatectomy
- x. Cholecystectomy

Emergency Services

- a. Medical Emergencies
- b. Intensive care/stabilization
- c. Blood Transfusion

- d. Local Evacuation to Hospital
- e. Accident & Emergency

Eye Care

- a. Consultation & Refraction, visual acuity
- b. Routine examination
- c. Treatment of simple infections
- d. Provision of lenses; plain, bifocals & varifocal lenses subject to limit of coverage
- e. Intraocular pressure test

Dental Services

- a. Consultation
- b. Treatment of simple infections
- c. Dental X-ray
- d. Pain therapy

- e. Simple Extraction
- f. Scaling & Polishing
- g. Amalgam filing
- h. Surgical Extraction

HIV/AIDS Support Services

- a. Education & VCT
- b. ARV treatment referral to diagnostic treatment

Additional Services

- a. Cancer screening & Investigation
- b. Fertility Treatment; basic investigation, non-hormonal drug treatment
- c. Annual Basic medical examination
- d. Comprehensive examination (Medically indicated)
- e. Kidney dialysis

Mental Health Services

- Initial Psychiatric Evaluation



FIRST FLOOR, BASSAN PLAZA, 759 10TH STREET, OFF INDEPENDENCE AVENUE, CBD, ABUJA.

WEBSITE: prohealthhmo.com

EMAIL: info@prohealthhmo.com

FACEBOOK: ProHealth HMO Ltd

TWITTER: @prohealthhmo

INSTAGRAM: prohealth_hmo

Call Center: 0700 PROHEALTH, 0700 776 432 584

Call Center (Text and WhatsApp only): 0705 425 6183