

## LIBERTY HEALTH COVER

Corporate and SME Benefit Table 2018/19 Lesotho

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ADVICE INSURE INVEST HEALTH

## LESOTHO | LIBERTY HEALTH COVER CORPORATE BENEFIT TABLE 2018/19

This table will give you an overall summary of the benefits we offer. Please read this summary together with the Liberty Health Cover Policy Document, which provides more detailed information.

pecialised radiology (combined limit in-hospital and out-of-hospital)	Ø	Ø	Ø		X
ptical benefits (the following optical benefits are covered on an out-patient basis) 1 × eye test per insured person per year Frames and lenses (including contact lenses) every 2 years Refractive Surgery	2 250	3 200	3 500	3 800	x
ecialised dentistry ecialised dentistry including root canal treatment, dentures, inlays, crowns, bridges, periodontal treatment, hodontic treatment and procedures in rooms. Orthodontic treatment will be restricted to members under age of 21 (twenty-one) years inclusive.	x	x	3 200	6 400	x
ic dentistry	1800	1900	2 250	3100	Х
patient maternity care e: If this benefit is depleted, then claims will pay from the available day-to-day benefits	6 400	8 000	9 500	12 700	X
Ilary Services	1400	1500	2100	3 200	X
ology and Pathology	3800	5400	7700	17 000	X
In Conditions Benefit (conditions that require medication and treatment for more than three continuous months) nsultations (GP and Specialist) scribed chronic medication thology, i.e., blood tests requested by a doctor in the course of your consultations sic radiology If this benefit is depleted, then claims will pay from the available day-to-day benefits	3 800	5 300	8 000	18 600	x
te medication	3 800 OTC sub-limit of 480 per annum, maximum of 130 per claim	5 400 OTC sub-limit of 480 per annum, maximum of 180 per claim	7 700 OTC sub-limit of 590 per annum, maximum of 240 per claim	9 100 OTC sub-limit of 720 per annum, maximum of 310 per claim	X
cedures	4 900	7 300	14 600	29 400	X
sultations (GP and Specialist)	6 per annum	8 per annum	10 per annum	12 per annum	X
ender Benefit (General Saver)	950 per family per annum	1 380 per family per annum	1800 per family per annum	2 100 per family per annum	X
AY-TO-DAY BENEFITS (Out-patient)					
atriation of mortal remains following an international emergency evacuation	12 700	12 700	12 700	12 700	12 700
ommodation for one person accompanying an evacuated person	3 nights accommodation	3 nights accommodation	3 nights accommodation	3 nights accommodation	3 nights accommodation
rnational emergency evacuation and repatriation	Subject to overall limit	Subject to overall limit			
<b>TERNATIONAL EMERGENCY EVACUATION BENEFITS</b> Subject to pre-auth					
ey dialysis	Subject to major disease limit	Subject to major disease limit			
er treatment n transplants	Subject to major disease limit	Subject to major disease limit			
	420 000 Subject to major disease limit	480 000 Subject to major disease limit	Subject to major disease limit	Subject to major disease limit	480 000 Subject to major disease limit
JOR DISEASE BENEFITS Subject to pre-authorisation and clinical treatment protocols all limit	420 000	480 000	640 000	950 000	480 000
incision	1900	2500	3 300	3800	2500
ttient maternity (childbirth) (Subject to overall limit)	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
at and maxilloracial surgery (Subject to overall limit) ate nursing/Step down or Hospice	6 400	7 400	15 000	37 000	7 400
rnal medical appliances al and maxillofacial surgery (Subject to overall limit)	3 800 Unlimited	4 500 Unlimited	6 400 Unlimited	13 000 Unlimited	4 500 Unlimited
thesis (per prosthesis)	38 000	45 000	51000	64 000	45 000
hiatric hospitalisation	5 days per annum	14 days per annum	14 days per annum	20 days per annum	14 days per annum
natal care (incubator, phototherapy, congenital conditions, prematurity)	190 00	250 000	380 000	640 000	250 000
cialised radiology (combined limit in and out of hospital)	19 000	23 000	32 000	38 000	23 000
ergency ambulance services (Subject to overall limit)	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
nospital accommodation, specialists, theatre, ward, acute dialysis, basic radiology, hology, physiotherapy, procedures and medicine costs (Subject to overall limit)	Unlimited	Unlimited	Unlimited	Unlimited (private ward limit of 2 500 per day)	Unlimited
OSPITAL BENEFITS (In-patient) Subject to pre-authorisation and clinical treatment pro	tocols				
rall limit (per beneficiary per annum)	420 000	770 000	1500 000	Unlimited	770 000
vork Providers paid at Liberty Tariffs	Standard Network	Standard Network	Enhanced Network	Enhanced Network	Standard Network
on of cover	Lesotho and South Africa	Lesotho and South Africa	Lesotho and South Africa	Lesotho, Africa and India	Lesotho, Africa and India
	Essence	Traditional	Classic	Plus	Core Care

Note: If the start date of your health cover is after the start date of your employer's Liberty Health Cover Policy, your Day-to-day Benefits (Out-patient) will be available to you on a pro-rata basis.

Disclaimer: The benefits described in the table above are subject to the Policy Conditions in the Liberty Health Cover Policy Conditions will prevail. E&OE

