



**LIBERTY**

## **LIBERTY HEALTH COVER**

Corporate and SME Benefit Table  
2020/2021  
Lesotho

### **LESOTHO**

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[claims@libertyhealth.net](mailto:claims@libertyhealth.net)

# LESOTHO | Liberty Health Cover corporate and SME benefit table 2021



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This table will give you an overall summary of the benefits we offer. Please read this summary together with the Liberty Health Cover Policy Conditions, which provides more detailed information. The annual benefit limits per insured person for the year are in Lesotho Loti (LSL)

Benefit plan	Plus Africa	Classic	Traditional	Essence	Core Care
<b>Region of cover</b>	Lesotho, Africa and India	Lesotho and South Africa	Lesotho and South Africa	Lesotho and South Africa	Lesotho, Africa and India
<b>Network providers paid at Liberty Tariffs</b>	Premier Network	Premier Network	Enhanced Network	Enhanced Network	Enhanced Network
<b>Overall limit</b>	Unlimited	1 700 000	850 000	480 000	850 000
<b>Day-to-day benefits (for conditions that generally appear suddenly, progress rapidly and are relatively short in duration)</b>					
<b>GP and Specialist consultations</b>	12 per annum	10 per annum	8 per annum	6 per annum	
<b>Out-of-hospital non-surgical procedures, such as applying plaster of paris and stitches</b>	33 100	16 400	8 200	5 500	
<b>Prescribed acute medication including vaccinations</b>	10 230 OTC sub-limit of 810 per annum, maximum of 350 per claim	8 650 OTC sub-limit of 670 per annum, maximum of 270 per claim	6 060 OTC sub-limit of 540 per annum, maximum of 200 per claim	4 270 OTC sub-limit of 540 per annum, maximum of 150 per claim	x
<b>Basic radiology (e.g. basic x-rays) and pathology (e.g. blood tests) requested by a doctor</b>	19 100	8 650	6 060	4 270	
<b>Auxiliary services such as physiotherapy, chiropractics and speech therapy</b>	3 590	2 360	1 690	1 570	
<b>Extender Benefit</b>	2 360 per family per annum	2 020 per family per annum	1 550 per family per annum	1 070 per family per annum	
<b>Optical benefits</b>					
1 x eye test per insured person per year Frames and lenses (including contact lenses) every 2 years and, Refractive surgery	4 270	3 930	3 600	2 530	x
<b>Dental benefits (subject to clinical funding protocols)</b>					
<b>Basic dentistry</b> Dental consultations, basic dental procedures including removal of teeth, fillings, preventative treatment, scaling and polishing and X-rays	3 490	2 530			
<b>Specialised dentistry</b> Root canal treatment, dentures, inlays, crowns, bridges, periodontal treatment, orthodontic treatment and procedures in rooms. Orthodontic treatment will be restricted to members up to and including the age of 21 years	7 190	3 590	2 770	2 630	x
<b>Psychological wellbeing benefits</b>					
<b>Psychologist/social worker consultations and prescribed acute medication</b>	Subject to day-to-day benefits limit	Subject to day-to-day benefits limit	Subject to day-to-day benefits limit	Subject to day-to-day benefits limit	x
<b>Ongoing psychiatric consultations and associated chronic medication</b>	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	x
<b>Psychiatric hospitalisation</b>	20 days per annum	14 days per annum	14 days per annum	5 days per annum	14 days per annum
<b>Maternity benefits (subject to pre-authorisation and clinical funding protocols)</b>					
<b>Out-patient maternity care</b> Antenatal consultations, ultrasounds and pathology services, including amniocentesis, are paid from this benefit Any additional maternity claims will be paid from the available day-to-day benefits	<ul style="list-style-type: none"> <li>Consultations x 12</li> <li>Ultrasound scans x 3</li> <li>Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorisation)</li> </ul>	<ul style="list-style-type: none"> <li>Consultations x 12</li> <li>Ultrasound scans x 3</li> <li>Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorisation)</li> </ul>	8 990	7 190	x
<b>Out-patient high-risk pregnancies</b> Subject to enrolment for case management	Additional consultations and ultrasound scans	Additional consultations and ultrasound scans			
<b>In-patient maternity - childbirth and management of high-risk pregnancies</b>	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
<b>Neonatal care - incubator, phototherapy, congenital conditions, prematurity</b>	720 000	420 000	290 000	210 000	290 000
<b>Postnatal depression - medication, consultations, pathology</b>	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	x
<b>Chronic conditions benefits (subject to pre-authorisation and clinical funding protocols for conditions that require medication and treatment for more than three continuous months)</b>					
<b>GP and specialist consultations, prescribed medication, radiology and pathology (e.g. blood tests)</b>	20 900	8 990	5 960	4 270	x
<b>Hospital benefits (subject to pre-authorisation and clinical funding protocols)</b>					
<b>In-hospital accommodation, specialists, theatre, ward, acute dialysis and medicine costs</b>	Paid in full Subject to overall limit (private ward limit of 2 810 per day)	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
<b>Specialised radiology - combined limit in and out of hospital</b>	42 700	35 900	25 900	21 300	25 900
<b>Prosthesis and devices - per prosthesis/device</b>	72 000	57 300	50 000	42 700	50 000
<b>External medical appliances</b>	14 500	7 190	5 000	4 270	5 000
<b>Private nursing/Step down or hospice</b>	41 500	16 900	8 310	7 190	8 310
<b>Ambulance benefits (within region of cover)</b>					
<b>Emergency road ambulance services</b>	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
<b>Non-emergency road ambulance, cross-border ambulance (subject to pre-authorisation)</b>	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit	Paid in full Subject to overall limit
<b>Major diseases benefits (subject to pre-authorisation and clinical funding protocols)</b>					
<b>Major diseases benefits limit</b>	1 070 000	720 000	540 000	480 000	540 000
<b>Provision of treatment (subject to the major diseases benefits limit)</b>	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis	Oncology treatment, organ transplants and renal dialysis
<b>International benefits (subject to pre-authorisation and clinical funding protocols)</b>					
<b>International emergency medical evacuations</b> In the case of a medical emergency/life-threatening condition and where treatment is not available locally, cover includes: international evacuation and foreign treatment costs	Subject to the overall limit and appropriate sublimits.	Subject to the overall limit and appropriate sublimits.	Subject to the overall limit and appropriate sublimits.	Subject to the overall limit and appropriate sublimits.	Subject to the overall limit and appropriate sublimits.
<b>Critical care</b> In the case of a medically necessary, non-emergency life-threatening condition, where treatment for inpatient care is not available locally, cover includes: international travel/accommodation and foreign treatment costs (South Africa only).	Subject to the overall limit and appropriate sublimits.	Subject to the overall limit and appropriate sublimits.	Subject to the overall limit and appropriate sublimits.	Subject to the overall limit and appropriate sublimits.	Subject to the overall limit and appropriate sublimits.
<b>Travel and accommodation costs per event</b> Accommodation cost applicable to emergency medical evacuations or where the patient is a child or unable to travel without assistance. Travel applies to emergency medical evacuations only.	Accommodation for one family member accompanying an insured person receiving care outside Lesotho. Up to a maximum of 5 nights. LSL210 per day for sundry costs (max 5 days)	Accommodation for one family member accompanying an insured person receiving care outside Lesotho. Up to a maximum of 5 nights. LSL210 per day for sundry costs (max 5 days)	Accommodation for one family member accompanying an insured person receiving care outside Lesotho. Up to a maximum of 5 nights. LSL210 per day for sundry costs (max 5 days)	Accommodation for one family member accompanying an insured person receiving care outside Lesotho. Up to a maximum of 5 nights. LSL210 per day for sundry costs (max 5 days)	Accommodation for one family member accompanying an insured person receiving care outside Lesotho. Up to a maximum of 5 nights. LSL210 per day for sundry costs (max 5 days)
<b>Repatriation of mortal remains</b> Applicable to international emergency medical evacuations and critical care cases only	14 300	14 300	14 300	14 300	14 300

**LIBERTY WELLBEING AND DIGITAL TOOLS** Available to all beneficiaries. Access to the Liberty Wellbeing online platform for self-completion of health assessments and easy, 24-hour access to clinically approved health promotion material. Access to digital tools including a unique customer profile via desktop login or the Liberty Health Mobile App (iOS and Android).

**FUNERAL BENEFIT** The Funeral benefit pays out a lump sum in the event of the death of the member, spouse, children or extended family member (if applicable).

**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 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 Document. Every attempt has been made to ensure complete accuracy of this document. However, in the event of a conflict between this document and the Liberty Health Cover Policy Conditions, the Policy Conditions will prevail. E&OE