



**LIBERTY**

## **LIBERTY HEALTH COVER**

Corporate and SME Benefit Table  
2018/19  
Malawi



**LIBERTY**

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**ADVICE INSURE INVEST HEALTH**

# MALAWI | LIBERTY HEALTH COVER CORPORATE AND SME 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.

Annual benefits limit per insured person per year in MWK.



LIBERTY

PRODUCT OPTION	Lite	Classic	Classic Roaming	Plus	Elite
Region of cover	In-country only	Malawi and India	Out-patient care: Malawi and India In-Patient care: Africa and India	Africa and India	Worldwide (excluding North America)
Network Providers paid at Liberty Tariffs	Restricted Network of providers only No payment for services outside Network	Standard Network	Enhanced Network	Enhanced Network	Enhanced Network
Overall limit	15 000 000	65 000 000	350 000 000	350 000 000	700 000 000

HOSPITAL BENEFITS (In-patient) Subject to pre-authorisation and clinical treatment protocols					
In-hospital accommodation, specialists, theatre, ward, acute dialysis and medicine costs (Subject to overall limit)	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Emergency ambulance services (Subject to overall limit)	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Intensive care (Subject to overall limit)	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Specialised radiology (combined limit in-hospital and out-of-hospital)	520 000	1 100 000	1 760 000	1 760 000	2 200 000
In-patient maternity (childbirth) (Subject to overall limit)	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Neonatal care (incubator, phototherapy, congenital conditions, prematurity)	3 850 000	13 750 000	55 000 000	55 000 000	66 000 000
Psychiatric hospitalisation	5 days per annum	10 days per annum	14 days per annum	14 days per annum	20 days per annum
Prosthesis (per prosthesis)	1 100 000	2 200 000	2 750 000	2 750 000	3 600 000
External medical appliances	138 000	176 000	330 000	330 000	660 000

MAJOR DISEASE BENEFITS Subject to pre-authorisation and clinical treatment protocols					
Overall limit	7 200 000	14 000 000	55 000 000	55 000 000	70 000 000
Cancer treatment	✓	✓	✓	✓	✓
Organ transplants	x	✓	✓	✓	✓
Kidney dialysis	x	✓	✓	✓	✓

INTERNATIONAL EMERGENCY EVACUATION BENEFITS Subject to pre-authorisation and clinical treatment protocols					
International emergency evacuation and repatriation	x	x	Subject to overall limit	Subject to overall limit	Subject to overall limit
Compassionate travel for one person accompanying an evacuated person	x	x	Return economy class ticket and accommodation up to a maximum of 14 days. US\$250 per day for sundry costs (max 14 days)	Return economy class ticket and accommodation up to a maximum of 14 days. US\$250 per day for sundry costs (max 14 days)	Return economy class ticket and accommodation up to a maximum of 14 days. US\$300 per day for sundry costs (max 14 days)
Repatriation of mortal remains following an international emergency evacuation	x	x	2 200 000	2 200 000	7 200 000

DAY-TO-DAY BENEFITS (Out-patient)					
<b>Acute Conditions Benefit</b> (conditions that generally appear suddenly, progress rapidly and are relatively short in duration) <ul style="list-style-type: none"> <li>• Consultations (GP and specialist)</li> <li>• Prescribed medication</li> <li>• Diagnostic tests</li> <li>• Pathology, i.e., blood tests requested by a doctor during the course of your consultations</li> <li>• Basic radiology, i.e., out-of-hospital basic x-rays</li> <li>• Out-of-hospital non-surgical procedures, such as applying plaster of paris and stitches</li> <li>• Auxillary services such as physiotherapy, chiropractics and speech therapy</li> <li>• Annual medical examination pre-authorised at designated centres</li> </ul>	350 000 Sub limit for acute medication 140 000	530 000 Sub limit for acute medication 175 000	530 000 Sub limit for acute medication 175 000	1 050 000 Sub limit for acute medication 350 000	1 750 000 Sub limit for acute medication 725 000
<b>Chronic Conditions Benefit</b> (conditions that require medication and treatment for more than three continuous months) <ul style="list-style-type: none"> <li>• Consultations (GP and specialist)</li> <li>• Prescribed chronic medication</li> <li>• Pathology, i.e., blood tests requested by a doctor in the course of your consultations</li> <li>• Basic radiology</li> </ul> Subject to pre-authorisation, clinical treatment protocols and overall limit	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
<b>Out-patient maternity care</b> Note: If this benefit is depleted, then claims will be paid from the available Day-to-Day Benefits	275 000	350 000	350 000	530 000	715 000
<b>Dentistry</b>	140 000 Basic dentistry only	Unlimited Sub limit for specialised dentistry 350 000	Unlimited Sub limit for specialised dentistry 350 000	Unlimited Sub limit for specialised dentistry 530 000	Unlimited Sub limit for specialised dentistry 715 000
<b>Optical benefits</b> <ul style="list-style-type: none"> <li>• 1 x eye test per insured person per year</li> <li>• Frames and lenses (including contact lenses) every 2 years</li> </ul>	85 000	140 000	140 000	225 000	300 000
<b>Specialised radiology</b> (combined limit in and out of hospital)	✓	✓	✓	✓	✓

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 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