

MOZAMBIQUE | Liberty Health Cover corporate and SME benefit table 2021

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 Mozambican Metical (MZN).



LIBERTY

Benefit plan	Global Elite	Plus Africa	Classic Critical Care	Classic	Lite
Region of cover	Worldwide (excluding North America) Evacuation and critical care: Africa and India	Africa and India	In-country only Evacuation and critical care: Africa and India	In-country only	In-country only
Network providers paid at Liberty Tariffs	Premier Network	Premier Network	Enhanced Network	Enhanced Network	Standard Network (no payment for providers outside this network)
Overall limit	52 000 000	26 000 000	5 200 000	5 200 000	1 050 000
Day-to-day benefits (for conditions that generally appear suddenly, progress rapidly and are relatively short in duration)					
<ul style="list-style-type: none"> GP and specialist consultations Prescribed acute medication including vaccinations Diagnostic tests Pathology, i.e. blood tests requested by a doctor in the course of your consultations Basic radiology, i.e. out-of-hospital basic x-rays Out-of-hospital non-surgical procedures such as applying plaster of paris and stitches Auxiliary services such as physiotherapy, chiropractics and speech therapy Annual medical examination pre-authorized at designated centres 	140 000 Sub-limit for prescribed acute medication 52 400	87 500 Sub-limit for prescribed acute medication 28 100	40 800 Sub-limit for prescribed acute medication 14 000	40 800 Sub-limit for prescribed acute medication 14 000	28 100 Sub-limit for prescribed acute medication 11 600
Optical benefits					
1 x eye test per insured person per year Frames and lenses (including contact lenses) every 2 years	23 300	18 600	12 800	12 800	7 600
Dental benefits (subject to clinical funding protocols)					
Basic dentistry Dental consultations, basic dental procedures including removal of teeth, fillings, preventative treatment, scaling and polishing and x-rays	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	
Specialised dentistry 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.	58 300	40 800	28 100	28 100	15 000
Psychological wellbeing benefits					
Psychologist/social worker consultations and prescribed acute medication	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	Subject to day-to-day benefits limit
Ongoing psychiatric consultations and associated chronic medication	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit
Hospital benefits (subject to pre-authorization and pre-clinical funding protocols)	20 days per annum	14 days per annum	10 days per annum	10 days per annum	5 days per annum
Maternity benefits (subject to pre-authorization and clinical funding protocols)					
Out-patient maternity care 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"> Consultations x 12 Ultrasound scans x 3 Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorization) 	<ul style="list-style-type: none"> Consultations x 12 Ultrasound scans x 3 Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorization) 	<ul style="list-style-type: none"> Consultations x 12 Ultrasound scans x 3 Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorization) 	<ul style="list-style-type: none"> Consultations x 12 Ultrasound scans x 3 Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorization) 	23 300
Out-patient high-risk pregnancies Subject to enrolment for case management	Additional consultations and ultrasound scans	Additional consultations and ultrasound scans	Additional consultations and ultrasound scans	Additional consultations and ultrasound scans	Subject to day-to-day benefits limit
In-patient maternity - childbirth and management of high-risk pregnancies	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
Neonatal care - incubator, phototherapy, congenital conditions, prematurity	5 200 000	3 700 000	990 000	990 000	260 000
Postnatal depression - medication, consultations, pathology	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit	Subject to day-to-day benefits limit
Chronic conditions benefits (subject to pre-authorization and clinical funding protocols for conditions that require medication and treatment for more than three continuous months)					
GP and specialist consultations, prescribed medication, radiology and pathology (e.g. blood tests)	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
Hospital benefits (subject to pre-authorization and clinical funding protocols)					
In-hospital accommodation, specialists, theatre, ward, acute dialysis and medicine costs	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
Intensive care	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
Specialised radiology - combined limit in and out of hospital	150 000	130 000	76 000	76 000	37 000
Prosthesis and devices - per prosthesis/device	260 000	200 000	150 000	150 000	76 500
External medical appliances	52 400	25 000	12 800	12 800	10 500
Ambulance benefits (within region of cover)					
Emergency road ambulance services	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
Non-emergency road ambulance, cross-border ambulance (subject to pre-authorization)	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
Major diseases benefits (subject to pre-authorization and clinical funding protocols)					
Major diseases benefits limit	5 200 000	3 700 000	990 000	990 000	500 000
Provision of treatment (subject to the major diseases benefits limit)	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
International benefits (subject to pre-authorization and clinical funding protocols)					
International emergency medical evacuations 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. Africa and India only.	Subject to the overall limit and appropriate sublimits. Africa and India only.	US\$200 000 Africa and India only.	x	x
Critical care In the case of a medically necessary, non-emergency life-threatening condition, where treatment for in-patient care is not available locally, cover includes: international travel/accommodation and foreign treatment costs	Subject to the overall limit and appropriate sublimits. Africa and India only.	Subject to the overall limit and appropriate sublimits. Africa and India only.	Subject to the overall limit and appropriate sublimits. Africa and India only.	x	x
Travel and accommodation costs per event Applicable only to international emergency medical evacuations and critical care cases for the patient, and where applicable, one accompanying person	Return economy class ticket and accommodation up to a maximum of 14 days. US\$300 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\$200 per day for sundry costs (max 14 days).	x	x
Repatriation of mortal remains Applicable to international emergency medical evacuations and critical care cases only	520 000	160 000	160 000	x	x
Elective roaming Applicable to beneficiaries electing to obtain medical services outside their country of residence and in line with their benefit plan region of cover. Cover includes foreign treatment cost and services but not travel.	Subject to the overall limit and appropriate sublimits	Subject to the overall limit and appropriate sublimits	x	x	x
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).				

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

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