ZAMBIA | Liberty Health Cover micro enterprises (ME) benefit table 2024



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 Zambian Kwacha (ZMW).

Benefit plan	Global Elite	Plus Africa	Classic Critical Care	Classic
Region of cover	Worldwide (excluding North America) Evacuation and critical care: Africa and India	Africa and India and U.A.E	In-country only Evacuation and critical care: Africa and India	In-country only
Network providers paid at Liberty Tariffs Overall limit	Premier Network 18 500 000	Premier Network 9 250 000	Enhanced Network 1 850 000	Enhanced Network 1 850 000
Day-to-day benefits (for conditions that generally appear suddenly, progres	s rapidly and are relatively short in du	ration)		
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 Auxillary services such as physiotherapy, chiropractics and speech therapy Annual medical examination Chronic Conditions Benefit (conditions that require medication and treatment for more	46 500 Sub-limit for prescribed acute medication 18 500	28 000 Sub-limit for prescribed acute medication 9 250	14 000 Sub-limit for prescribed acute medication 4 650	14 000 Sub-limit for prescribed acute medication 4 650
than three continuous months) Consultations (GP and specialist) Prescribed chronic medication Pathology, i.e., blood tests requested by a doctor during the course of your consultations Basic radiology Subject to pre-authorisation, clinical treatment protocols and 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
Optical benefits				
1 x eye test per insured person per year Frames and lenses (including contact lenses) every 2 years	7500	5 800	3700	3700
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 Specialised dentistry	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
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.	18 500	14 000	9 250	9 250
Psychological wellbeing benefits	Subject to day to day	Subject to day to day	Subject to day to day	Subject to day to day
Psychologist/social worker consultations and prescribed acute medication	Subject to day-to-day benefits limit Subject to chronic conditions	Subject to day-to-day benefits limit Subject to chronic conditions	Subject to day-to-day benefits limit Subject to chronic conditions	Subject to day-to-day benefits limit Subject to chronic conditions
Ongoing psychiatric consultations and associated chronic medication	benefits limit	benefits limit	benefits limit	benefits limit
Hospital benefits (subject to pre-authorisation and clinical funding protocols) Maternity benefits (subject to pre-authorisation and clinical funding protocol)	25 days per annum	20 days per annum	15 days per annum	15 days per annum
Out-patient maternity care Antenatal consultations, ultrasounds and pathology services, including amniocentisis, are paid from this benefit Any additional maternity claims will be paid from the available day-to-day benefits	Consultations x 12 Ultrasound scans x 3 Laboratory tests such as rhesus blood group and amniocentesis	Consultations x 12 Ultrasound scans x 3 Laboratory tests such as rhesus blood group and amniocentesis	Consultations x 12 Ultrasound scans x 3 Laboratory tests such as rhesus blood group and amniocentesis	Consultations x 12 Ultrasound scans x 3 Laboratory tests such as rhesus blood group and amniocentesis
Out-patient high-risk pregnancies Subject to enrolment for case management	(subject to pre-authorisation) Additional consultations and ultrasound scans	(subject to pre-authorisation) Additional consultations and ultrasound scans	(subject to pre-authorisation) Additional consultations and ultrasound scans	(subject to pre-authorisation) Additional consultations and ultrasound scans
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
Neonatal care – incubator, phototherapy, congenital conditions, prematurity	1850 000	1400 000	370 000	370 000
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
Hospital benefits (subject to pre-authorisation and clinical funding protocols				
In-hospital accommodation, specialists, theatre, ward, radiology, pathology, acute dialysis and medicine costs	Paid in full Subject to overall limit Standard private ward	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
Rehabilitation, Private nursing and Hospice care	47 000 up to a maximum of 30 days	41 500 up to a maximum of 30 days	35 000 up to a maximum of 30 days	35 000 up to a maximum of 30 days
Specialised radiology - combined limit in and out of hospital	61000	52 000	31500	31500
Prosthesis and devices - per prosthesis/device	680 000 for Cochlear implants 85 000 for all other prosthesis	530 000 for Cochlear implants 66 500 for all other prosthesis	380 000 for Cochlear implants 55 500 for all other prosthesis	380 000 for Cochlear implants 55 500 for all other prosthesis
External medical appliances	360 000 for Hearing Aids 34 000 for Other appliances	185 000 for Hearing Aids 17 000 for Other appliances	92 500 for Hearing Aids 9 250 for Other appliances	92 500 for Hearing Aids 9 250 for Other appliances
Ambulance benefits (within region of cover) Emergency in-country ambulance services	Paid in full	Paid in full	Paid in full	Paid in full
(mode determined by logistics) Non-emergency ambulance and cross-border ambulance	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
(mode to be determined by logistics, subject to pre-authorisation)	Subject to overall limit	Subject to overall limit	Subject to overall limit	Subject to overall limit
Major diseases benefits (subject to pre-authorisation and clinical funding p Major diseases benefits limit	rotocols) 1850 000	1400 000	370 000	370 000
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
Donor matching (limited to immediate family members on the policy)	Paid subject to the major diseases benefit limit	Paid subject to the major diseases benefit limit	Paid subject to the major diseases benefit limit	Paid subject to the major diseases benefit limit
International benefits (subject to pre-authorisation and clinical funding pro	tocols)			
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.	х
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: travel/accommodation and 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.	х
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
Repatriation of mortal remains Applicable to international emergency medical evacuations and critical care cases only	170 000	47 500	47 500	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	х	х
FUNERAL BENEFIT The funeral benefit pays out a lump sum in the event of the death of the member, spouse, children or extended family members (if applicable)	20 000	20 000	20 000	20 000
LIBERTY WELLBEING AND DIGITAL TOOLS	Available to all beneficiaries. Access to the l promotion material. Access to digital tools	Liberty Wellbeing online platform for self-comp ncluding a unique customer profile via desktop	eletion of health assessments and easy, 24-hou login or the Liberty Health Mobile App (iOS ar	r access to clinically approved health and Android).

Note: If the start date of your health cover is after the start date of your memployer'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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