

Benefit plan	Global Elite	Plus Africa	Classic Critical Care	Classic	Essential Plus	Prime	Essential
Region of cover	Worldwide (excluding North America) Evacuation and critical care: Africa and India	Africa, India and U.A.E.	East Africa Evacuation and critical care: Africa and India	East Africa	In-country only	In-country only	In-country only
Network providers paid at Liberty Tariffs	Premier Network	Premier Network	Premier Network	Premier Network	Enhanced Network (no payment for providers outside this network)	Enhanced Network (no payment for providers outside this network)	Standard Network (no payment for providers outside this network)
Overall limit	3 950 000 000	2 050 000 000	395 000 000	395 000 000	130 000 000	80 500 000	80 500 000
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 consultationsPrescribed acute medication including vaccinationsDiagnostic testsPathology, i.e. blood tests requested by a doctor in the course of your consultationsBasic radiology, i.e. out-of-hospital basic x-raysOut-of-hospital non-surgical procedures such as applying plaster of paris and stitchesAuxillary services such as physiotherapy, chiropractics and speech therapyAnnual medical examination	9 850 000 Sub-limit for prescribed acute medication 3 950 000	5 900 000 Sub-limit for prescribed acute medication 2 000 000	3 050 000 Sub-limit for prescribed acute medication 1 100 000	3 050 000 Sub-limit for prescribed acute medication 1 100 000	2 600 000 Sub-limit for prescribed acute medication 960 000	2 150 000	1 850 000 Sub-limit for prescribed acute medication 960 000
Chronic Conditions Benefit (conditions that require medication and treatment for more than three continuous months) <ul style="list-style-type: none">Consultations (GP and specialist)Prescribed chronic medicationPathology, i.e., blood tests requested by a doctor during the course of your consultationsBasic 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	Paid in full Subject to overall limit	4 500 000	3 950 000
Optical benefits							
1 x eye test per insured person per year Frames and lenses (including contact lenses) every 2 years	1 850 000	1 300 000	915 000	915 000	675 000	560 000	560 000
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	1 450 000	1 020 000	1 020 000
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.	3 950 000	3 000 000	2 000 000	2 000 000			
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	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	Subject to chronic conditions benefits limit	Subject to chronic conditions benefits limit
Hospital benefits (subject to pre-authorisation and clinical funding protocols)	25 days per annum	20 days per annum	15 days per annum	15 days per annum	10 days per annum	10 days per annum	10 days per annum
Maternity benefits (subject to pre-authorisation 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 12Ultrasound scans x 3Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorisation)	<ul style="list-style-type: none">Consultations x 12Ultrasound scans x 3Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorisation)	<ul style="list-style-type: none">Consultations x 12Ultrasound scans x 3Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorisation)	<ul style="list-style-type: none">Consultations x 12Ultrasound scans x 3Laboratory tests such as rhesus blood group and amniocentesis (subject to pre-authorisation)	2 000 000	4 500 000	1 500 000
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		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	Paid in full Subject to overall limit	Paid in full Subject to overall limit
Neonatal care – incubator, phototherapy, congenital conditions, prematurity	395 000 000	300 000 000	78 500 000	78 500 000	32 500 000	18 500 000	18 500 000
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 chronic conditions benefits limit	Subject to day-to-day benefits limit	Subject to day-to-day 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 Standard private ward	Paid in full Subject to overall limit Standard private ward	Paid in full Subject to overall limit Standard private ward	Paid in full Subject to overall limit Standard private ward	Paid in full Subject to overall limit Standard private ward	Paid in full Subject to overall limit Standard private ward
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	Paid in full Subject to overall limit	Paid in full Subject to overall limit
Rehabilitation, Private nursing and Hospice care	10 000 000 up to a maximum of 30 days	8 750 000 up to a maximum of 30 days	7 500 000 up to a maximum of 30 days	7 500 000 up to a maximum of 30 days	6 250 000 up to a maximum of 30 days	5 000 000 up to a maximum of 30 days	5 000 000 up to a maximum of 30 days
Specialised radiology – combined limit in and out of hospital	13 000 000	11 000 000	6 550 000	6 550 000	5 800 000	3 850 000	3 850 000
Prosthesis and devices – per prosthesis/device	135 000 000 for Cochlear implants 20 000 000 for all other prosthesis	110 000 000 for Cochlear implants 16 500 000 for all other prosthesis	79 500 000 for Cochlear implants 12 000 000 for all other prosthesis	79 500 000 for Cochlear implants 12 000 000 for all other prosthesis	53 500 000 for Cochlear implants 7 850 000 for all other prosthesis	38 000 000 for Cochlear implants 5 650 000 for all other prosthesis	38 000 000 for Cochlear implants 5 650 000 for all other prosthesis
External medical appliances	72 500 000 for Hearing Aids 8 050 000 for Other appliances	36 000 000 for Hearing Aids 3 950 000 for Other appliances	18 000 000 for Hearing Aids 1 950 000 for Other appliances	18 000 000 for Hearing Aids 1 950 000 for Other appliances	18 000 000 for Hearing Aids 1 950 000 for Other appliances	8 600 000 for Hearing Aids 1 550 000 for Other appliances	8 600 000 for Hearing Aids 1 500 000 for Other appliances
Ambulance benefits (within region of cover)							
Emergency in-country ambulance services (mode determined by logistics)	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	Paid in full Subject to overall limit	Paid in full Subject to overall limit
Non-emergency ambulance and cross-border ambulance (mode to be determined by logistics, subject to pre-authorisation)	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	Paid in full Subject to overall limit	Paid in full Subject to overall limit
Major diseases benefits (subject to pre-authorisation and clinical funding protocols)							
Major diseases benefits limit	395 000 000	295 000 000	78 000 000	78 000 000	59 500 000	39 500 000	39 500 000
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, 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	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 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.	Subject to the overall limit and appropriate sublimits. East Africa only.	x	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	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).	Return economy class ticket and accommodation up to a maximum of 14 days. US\$150 per day for sundry costs (max 14 days).	x	x	x
Repatriation of mortal remains Applicable to international emergency medical evacuations and critical care cases only	39 500 000	13 000 000	13 000 000	4 600 000	x	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	Subject to the overall limit and appropriate sublimits	Subject to the overall limit and appropriate sublimits	x	x	x
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)	3 000 000	3 000 000	3 000 000	3 000 000	3 000 000	3 000 000	3 000 000
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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