

LIBERTY MEDICAL SCHEME
TRADITIONAL ULTIMATE 2016



TRADITIONAL Ultimate is the ideal option choice for executives seeking premier cover and additional service offerings.

This option choice offers members peace of mind through comprehensive cover on all major medical and day-to-day benefits, minimising any potential self-payment gaps. Members have total freedom of choice when it comes to healthcare providers and certain benefits are paid at up to 300% of the LMS Rate.

We've increased the Day-to-Day Benefit to R23 000 per beneficiary and added the following benefits to TRADITIONAL Ultimate for 2016:

- Four post-natal midwife consultations, and
- An additional ultrasound during pregnancy, giving you up to three ultrasounds and one 3D scan per pregnancy

You can find further details on all the 2016 TRADITIONAL Ultimate benefits in the details below.

What TRADITIONAL Ultimate offers

Level of cover for Specialists	Up to 300% of LMS Rate
Level of cover for GPs	Up to 200% of LMS Rate
Hospital choice	Any
Chronic conditions covered	69 conditions including 27 Prescribed Minimum Benefit (PMB) conditions
Day-to-day expenses	Overall Annual Limit (OAL)

Major Medical Benefits (MMBs)	Extender Benefits paid from MMBs	Day-to-Day Benefits
a. Hospitalisation b. Oncology and Dialysis c. Disease Management d. Chronic Disease Benefit (incl HIV/Aids) e. Maternity Benefit	a. Crime Trauma Benefit b. Preventative Care Benefit (PCB) c. MRI/CT Scans (out-of-hospital)	R23 000 per beneficiary Sub-limits apply to certain benefits a. Casualty Benefit

Prescribed Minimum Benefits (PMBs)

PMBs were introduced into the Medical Schemes Act to ensure that members of medical schemes would not run out of benefits for the treatment of certain conditions. PMBs therefore ensure continued quality care when you need it most.

As a result, monetary limits or benefit exclusions according to the TRADITIONAL Ultimate benefit schedule will not apply, provided the provisions of the Rules relating to the treatment of a PMB condition are met. In addition, any benefits that qualify as a PMB benefit will first be off-set against any applicable benefit limit set in terms of the Scheme Rules.

Major Medical Benefits (MMBs)

a. Hospitalisation

The Hospital Benefit covers the cost of **admissions to private hospitals**, including the hospital and associated costs, e.g., consultations, pathology and radiology. You can choose **any hospital and any GP or Specialist**. Consultations and procedures will be covered at 200% of the LMS Rate for GPs and 300% of the LMS Rate for Specialists. These are funded from the unlimited Major Medical Benefit (MMB). Some doctors may charge more than this, so we encourage you to negotiate with your chosen doctor to ensure that you are informed beforehand of the rates that will be charged.

We ensure comfort for our TRADITIONAL Ultimate members by offering you the luxury of a **private ward** during your admission, subject to a limit of R1 900 per day. LMS also provides cover for **alternatives to hospitalisation**, e.g., if you are in need of terminal care or rehabilitation after an accident. Refer to the benefits for Physical Rehabilitation and Private Nursing as well as Hospice Services on page 6. Although TRADITIONAL Ultimate **doesn't have an Overall Annual Limit (OAL)**, certain in-hospital benefits (e.g., psychiatry and dentistry) are subject to a sub-limit.

There are **no co-payments** for the procedures listed on page 5.

Payment for **internal prostheses** (e.g., stents, pacemakers and hip replacements) is subject to pre-authorisation, clinical protocols and sub-limits per prosthesis that apply. Refer to page 5 for more detail.

Note ▶ Pre-authorisation must be obtained at least 48 hours prior to a planned hospital admission. If pre-authorisation is not obtained, claims will not be paid.

In the case of an emergency hospital admission, you should ask a friend or family member to call within two business days of admission to ensure that your claims are paid. Benefits for day procedures done in or out of hospital require pre-authorisation and are subject to the relevant managed healthcare programme. Contact the TRADITIONAL Ultimate Service Centre on 0860 690 900.

b. Oncology and Dialysis

The oncology and dialysis services are subject to pre-authorisation. Please contact the TRADITIONAL Ultimate Service Centre on 0860 690 900 for pre-authorisation.

c. Disease Management

This benefit includes programmes for diseases such as asthma, cancer, diabetes, epilepsy, HIV/Aids, etc. Members receive education, advice and support from registered healthcare professionals, and a review of the chronic medication currently being used.

d. Chronic Disease Benefit (including HIV/Aids)

Chronic conditions are often life-threatening and should be treated by a team of dedicated healthcare professionals. The Medical Schemes Act also specifies a list of PMBs that must be covered without any limit by all medical schemes. This list is referred to as the Chronic Disease List (CDL) and includes 27 PMB conditions (see page 7). Legislation allows medical schemes to use medicine formularies, designated or preferred service providers and specific treatment protocols to manage CDL conditions.

TRADITIONAL Ultimate covers 69 chronic conditions, which include the 27 PMBs.

Note ▶ Your prescribing doctor must call the TRADITIONAL Ultimate Service Centre on 0860 690 900 to register you for the Chronic Disease Programme.

e. Maternity Benefit

TRADITIONAL Ultimate offers:

- Three ultrasound scans and one 3D scan per pregnancy
- Six ante-natal classes per pregnancy
- Private wards for maternity admissions: The luxury of a private ward is subject to a limit of R1 900 per day, during your maternity admission

Other maternity benefits include:

- Delivery by a GP or medical specialist
- Services of the attendant paediatrician and/or anaesthetist
- Post-natal care by a GP and medical specialist, up to and including the six-week, post-natal consultation
- Waterbirth in lieu of hospitalisation
- Delivery by a midwife in lieu of hospitalisation, and up to four post-natal consultations (paid from the Day-to Day Benefit).

Extender Benefits paid from MMBs

a. Crime Trauma Benefit

Medical expenses incurred as a result of the following events will be covered from this benefit:

- Hijacking and attempted hijacking
- Assault or attempted assault, including sexual assault
- Robbery (including armed robbery) or attempted robbery
- Attempted murder
- Rape or attempted rape

The Crime Trauma Benefit must be accessed within a 12-month period from the date of the event. Such crime must have been carried out on or witnessed by the beneficiary.

Note ▶ To qualify for this benefit, the crime must have been reported at a police station. Contact the TRADITIONAL Ultimate Service Centre on 0860 690 900 with the name of the police station and the case number to activate this benefit. This benefit is subject to pre-authorisation and the relevant managed healthcare programme.

b. Preventative Care Benefit (PCB)

This benefit focuses on the early detection of serious medical conditions. Everyone wants to stay healthy, and TRADITIONAL Ultimate assists by paying for a variety of preventative annual screening and diagnostic tests, procedures and specific vaccines, e.g., mammogram, cholesterol test, prostate test, flu vaccination and immunisations for babies and toddlers.

c. MRI/CT Scans (out-of-hospital)

TRADITIONAL Ultimate offers superior MRI and CT scan benefits by funding them from the MMB. No co-payments apply. However, these may only be requested by a referring specialist and are always subject to pre-authorisation whether done in or out of hospital.

Day-to-day benefits

This benefit provides R23 000 per beneficiary, per year for visits to your GP or Specialist, routine medication, dentistry, optometry, X-rays, blood tests, etc. Sub-limits apply to certain benefits (see page 8).

a. Casualty Benefit

This benefit covers the facility fee, consultations, medications, radiology and pathology associated with admissions into the emergency room, casualty ward of a registered casualty facility or treatment in a doctor's surgery. This is for *bona fide* emergencies and physical injuries or wounds resulting from external force requiring immediate treatment.

There are two components to this benefit:

1. Treatment in casualty after hours and away from home (subject to the Day-to-Day benefit)
2. Treatment in casualty for physical injury (paid from the unlimited Overall Annual Limit)

Treatment in an emergency room or casualty ward that leads to pre-authorised hospitalisation will be covered from your Hospitalisation benefit.

Note ▶ Remember to call the TRADITIONAL Ultimate Service Centre on 0860 690 900 for pre-authorisation within 48 working hours of admission or, if it is a weekend or public holiday, on the next working day.

Emergency Transport Services

Emergency transport services are provided within the borders of South Africa by the Scheme's Designated Service Provider (DSP), **ER24**: Tel 084 124 or 0860 00 HELP / 4357.

International Care Programme

Please note as a member of TRADITIONAL Ultimate, you qualify for the International Care Programme.

To activate your cover, please contact the TRADITIONAL Ultimate Service Centre on 0860 690 900 before you travel.

Note ▶ Please visit our website, www.libmed.co.za for more information. Remember to call the TRADITIONAL Ultimate Service Centre on 0860 690 900 to activate your cover before traveling abroad.



Benefit Schedule

Major Medical Benefits (MMBs)	
Benefit	TRADITIONAL Ultimate
Overall Annual Limit (OAL)	Unless indicated otherwise, no limits apply
Hospitalisation*	<p>100% of LMS Rate subject to the following:</p> <p>Pre-authorisation No benefits are payable in respect of admissions or treatments unless pre-authorised and subject to the relevant managed healthcare programme, treatment protocols or medicine formularies</p> <p>Private ward accommodation Limited to R1 900 per day</p> <p>Day procedures No benefit for day procedures performed in hospital unless pre-authorised and subject to the relevant managed healthcare programme</p> <p>No co-payments for:</p> <ul style="list-style-type: none"> • Colonoscopy, sigmoidoscopy, proctoscopy, gastroscopy, diagnostic cystoscopy • Removal of wisdom teeth, conservative spinal treatment, needle aspiration of joint, bursa or ganglion • Arthroscopy, laparoscopy, hysteroscopy and endometrial ablation • Functional nasal procedures, hysterectomy (non-cancer related) • Joint replacements • Spinal surgery • Nissen fundoplication (reflux surgery) • Trauma-related surgery
GPs (in-hospital)	200% of LMS Rate
Specialists (in-hospital)	300% of LMS Rate
Physiotherapist, Clinical Technologist, Occupational Therapist, Audiologist, Dietician and Speech Therapist	200% of LMS Rate Physiotherapy is excluded in respect of psychiatric admissions
Pathology*	100% of LMS Rate Subject to pre-authorisation and the relevant managed healthcare programme
Internal Prosthesis* Annual sub-limits apply per prosthetic type.	100% of LMS Rate subject to the sub-limits below Subject to pre-authorisation and the relevant managed healthcare programme
Cardiac system	Cardiac pacemakers: R47 000 Cardiac stents (including the carrier): R40 300 Cardiac valves: R37 200
Central nervous system	Neuro-stimulation/ablation devices for Parkinson's: R44 600 Vagal stimulator for intractable epilepsy: R37 200
Endovascular devices	Aorta stent grafts: R47 000 Embolic protection devices: R20 100 Carotid stents: R17 800 Detachable platinum coils: R44 600 Intracranial stents: R22 200 Peripheral arterial stent grafts: R33 200
Orthopaedic devices	Ankle replacement: R33 500 Bone-lengthening devices: R39 500 Elbow replacement: R39 500 Hip replacement: R39 500 Knee replacement: R39 500 Shoulder replacement: R39 500
Spinal devices	Approved spinal implantable devices and inter-vertebral discs: R39 500 Spinal plates and screws: R39 500
Ophthalmic system	Intraocular lens per eye (post-cataract removal): R2 410
Cochlear and auditory brain implants	R140 000 for children born into the Scheme
Internal nerve stimulators	R110 000 per beneficiary per annum
Unlisted internal prostheses	R29 900
External Prosthesis* Annual sub-limits apply per prosthetic type.	100% of LMS Rate Subject to pre-authorisation and funding guidelines
Artificial limbs	R45 000 per beneficiary
Breast prosthesis	R3 000 per beneficiary every 2 years. The 2-year cycle applies from the last claim date and not the beginning of the financial year
Artificial eyes	R15 000 per beneficiary
Other	Limited to the Day-to-day Benefit

Major Medical Benefits (MMBs) (continued)	
Benefit	TRADITIONAL Ultimate
Radiology***	100% of LMS Rate limited for specialised radiology including MRI and CT scans to R51 700 per family
	<p>Subject to the relevant managed healthcare programme. Specific pre-authorisations are also required in addition to any pre-authorisation obtained for hospitalisation, for each of the following:</p> <ul style="list-style-type: none"> • Angiography • CT Cardiac Arteriography • MRI Scans • CT Colonography • Muga Scans • Radio Isotope Studies <p>MRI or CT scans performed out of hospital, but which lead to a pre-authorised hospital admission are included in this benefit</p> <p>Bone density scans are limited to one per beneficiary per annum, in or out of hospital</p>
Dentistry*	200% of LMS Rate limited to R41 000 per beneficiary inclusive of any hospital account and day-to-day benefit
	<ul style="list-style-type: none"> • Subject to pre-authorisation and the relevant managed healthcare programme • The benefit applies in respect of elective procedures where general anaesthesia is required for extensive dentistry (more than 2 fillings) on children < 8 years (limited to one admission per annum, the removal of impacted wisdom teeth, apicectomies, or exposure of teeth for orthodontic reasons) • No limit applies to dentistry required as a result of trauma • All costs relating to hospitalisation, anaesthetist, and the procedural costs are subject to the limits given above
Maxillofacial Surgery*	300% of LMS Rate
	<ul style="list-style-type: none"> • Subject to pre-authorisation and the relevant managed healthcare programme • Maxillofacial surgery required as a result of facial fractures, surgical removal of tumours and neoplasms and the surgical treatment of sepsis and congenital abnormalities in the case of children born into the Scheme
Psychiatric Admissions*	300% of LMS Rate for Psychiatrists and 200% of the LMS Rate for GPs limited to 21 days per annum per beneficiary
	<ul style="list-style-type: none"> • Benefits are subject to pre-authorisation and the relevant managed healthcare programme • Limited to a maximum of three days per admission for beneficiaries admitted by a GP • Psychiatric admissions include admissions for drug and alcohol rehabilitation • Psychiatric admissions do not include physiotherapy
Maternity Admissions*	300% of LMS Rate for Specialists and 200% of LMS Rate for GPs
Pregnancy ultrasound scans	100% of LMS Rate limited to 3 ultrasound scans and one 3D scan per pregnancy
Antenatal classes	Limited to 6 classes per pregnancy
	<ul style="list-style-type: none"> • Subject to pre-authorisation and the relevant managed healthcare programme • Delivery by a GP or medical specialists and the services of the attendant paediatrician and/or anaesthetists are included • Included in global obstetric fee is post-natal care by a GP or medical specialist up to and including the six-week, post-natal consultation • Benefits are limited to one admission per year and only in the event of an actual delivery • No benefit in respect of false labour • Where applicable, this benefit shall include the cost of the water birth including the cost of hire of the birth bath, oxygen, medicine, dressings and materials supplied by a midwife. This benefit is applicable to delivery by a midwife <i>in lieu</i> of hospitalisation
Blood, Blood Equivalents and Blood Products*	100% of LMS Rate
	Benefits for blood equivalents are subject to pre-authorisation
Take-out Medication	100% of Generic Reference Price (GRP) limited to R10 100 per beneficiary and R20 400 per family inclusive of day-to-day acute medication
Alternatives to hospitalisation	
Sub Acute and Physical Rehabilitation Facilities and Private Nursing*	100% of LMS Rate limited to R38 500 per family
	<ul style="list-style-type: none"> • Subject to pre-authorisation and the relevant managed healthcare programme • Benefits for clinical procedures and treatment during a stay in an alternative facility will be subject to the same benefits that apply to hospitalisation • Nursing includes psychiatric nursing but not midwifery services
Hospice Services*	100% of Cost
	<ul style="list-style-type: none"> • Benefits only for qualifying PMB treatment • Subject to pre-authorisation and the relevant managed healthcare programme • Benefits for clinical procedures and treatment during a stay in an alternative facility will be subject to the same benefits that apply to hospitalisation • Hospice services include accommodation, medicine and consultations
Day Procedures*	300% of LMS Rate for Specialists and 200% of LMS Rate for GPs. Subject to pre-authorisation

* Subject to pre-authorisation and/or case management

*** Subject to disease management pre-authorisation

Chronic Disease Benefits (continued)	
Benefit	TRADITIONAL Ultimate
PMB Solid Organ and Bone Marrow Transplants (including immuno-suppressants)*	100% of Cost if obtained from a DSP
	Work-up and transplant subject to pre-authorization and the relevant managed healthcare programme Live donor costs other than in respect of a donor who is a beneficiary of the Scheme are limited to treatment costs incurred during the first week following the donation Haemopoietic stem cell transplants are limited to allogenic grafts and autologous grafts derived from the South African Bone Marrow Registry
Organ Transplants other than PMB Transplants (including immuno- suppressants)*	200% of LMS Rate
	Work-up and transplant subject to pre-authorization and relevant managed healthcare programme Benefits apply only in respect of organ donor procedures and searches conducted in South Africa provided that imported corneas will be funded to a maximum of R30 000 Organ donor procedure is covered only if both the recipient and donor are beneficiaries of the Scheme. Haemopoietic stem cell transplants are limited to allogenic grafts and autologous grafts derived from the South African Bone Marrow Registry
Chronic and Peritoneal Dialysis*	300% of LMS Rate for Specialists and 200% of LMS Rate for GPs Subject to pre-authorization and the relevant managed healthcare programme

* Subject to pre-authorization and/or case management.

*** Subject to disease management pre-authorization

Day-to-Day Benefits	
Benefit	TRADITIONAL Ultimate
Overall limit on Day-to-day benefits	R23 000 per beneficiary
Acute Medicine (Including Pharmacy-Advised Therapy and Over-the-Counter Medicine)	100% of GRP limited to R10 100 per beneficiary and R20 400 per family inclusive of take out hospital medication
Pharmacy Advised Therapy/ Over-the-Counter Medicine	Limited to R3 100 per family
Dispensing Fee	The negotiated fee or a maximum of 26% of GRP limited to R28 (excluding VAT)
	Benefits subject to the managed healthcare programme
Specialists and Non-network GPs	300% of LMS Rate for Specialists and 200% of LMS Rate for GPs
Out-Patient Services	200% of LMS Rate
Pathology	100% of LMS Rate
Radiology	100% of LMS Rate
Dentistry** (Basic and Specialised)	200% of LMS Rate limited to R41 000 per beneficiary inclusive of any in-hospital treatment and hospital account
	<ul style="list-style-type: none"> • Benefits are subject to the relevant managed healthcare programme • All general anaesthesia and conscious analgo sedation for dentistry, regardless of where they are performed, must be pre-authorized • Subject to pre-authorization and the relevant managed healthcare programme, removal of impacted wisdom teeth performed in doctors' rooms shall be paid from the Hospital Benefit dentistry limit • Orthodontic treatment is subject to pre-authorization and the relevant managed healthcare programme. Where treatment commences prior to entitlement to benefits, benefits will be calculated based on the original treatment plan and at the benefit rates applicable at that time • Advanced/specialised dentistry includes services for inlays, crowns, bridges, mounted study models, metal base partial dentures, and the treatment fees by periodontists, prosthodontists and dental technicians for all such dentistry
Optical	200% of LMS Rate limited to R5 400 per beneficiary and a frame sub-limit of R3 000 per beneficiary
Appliances	100% of LMS Rate
	<ul style="list-style-type: none"> • Subject to funding guidelines • Wheelchairs are limited to one per beneficiary every 4 years and exclude motorised wheelchairs • Hearing aids are limited to one per ear, per beneficiary every 2 years

Day-to-Day Benefits (continued)	
Benefit	TRADITIONAL Ultimate
Physiotherapist, Chiropractor, Clinical or Medical Technologist, Occupational Therapist, Chiropodist, Biokineticist, Podiatrist, Orthoptist, Speech Therapist, Audiologist, Hearing Aid Acoustician, Orthotist, Prosthotist and Dietician	200% of LMS Rate limited to R24 100 per family
Mental Health	200% of LMS Rate
Social Workers	200% of LMS Rate
Post-natal Midwife Consultations	100% of LMS Rate Limited to four consultations

* Subject to pre-authorisation and/or case management

** Subject to managed healthcare programme

Extender Benefits	
Benefit	TRADITIONAL Ultimate
MRI/CT Scans/Radio-isotope Scans*	100% of LMS Rate However, these may only be requested by a referring Specialist and are always subject to pre-authorisation whether done in or out of hospital
Casualty Benefit*	200% of LMS Rate subject to the overall Day-to-Day Benefit Unlimited for physical injury Included in MMBs only on authorisation by the relevant managed healthcare programme within 48 hours (or first working day) following treatment for bona fide emergencies and physical injuries or wounds resulting from external force requiring immediate treatment. This benefit covers the facility fee, consultations, medications, radiology and pathology associated with admissions into the emergency room, casualty ward of a registered casualty facility or treatment in a doctor's room. There are two components to this benefit: 1. Treatment in casualty after hours and away from home (subject to the limits set out above) 2. Physical injury (paid from the unlimited overall benefit) Treatment in an emergency room or casualty ward that leads to pre-authorized hospitalisation will be covered from the Hospital benefit
Preventative Care Benefits	100% LMS Rate or GRP
Medical Report	On request by the Scheme
Mammogram	1 per female beneficiary > 40 every 2 years
Pap Smear	1 per year per beneficiary, female 18 - 60 1 liquid-based pap smear every 3 years If you have a liquid-based pap smear, the Scheme will not cover a normal pap smear in the same year
Chlamydia Test	1 per female beneficiary < 25
Cholesterol Test	1 per beneficiary > 16
Blood Glucose	1 per beneficiary
TB Test	1 per beneficiary
HIV Test	1 per beneficiary
Prostate Test	1 per male beneficiary > 45 every 3 years
Bone Density Test	1 per female beneficiary > 50 every 3 years
Flu Vaccination	1 per beneficiary
Pneumococcal Vaccine	1 per beneficiary, covered for elderly beneficiaries (65 years and older) and at risk beneficiaries (younger than 65 years with co-morbidities)

Extender Benefits (continued)		
Benefit	TRADITIONAL Ultimate	
Childhood Immunisations	At birth BCG Oral Polio Vaccine	
	6 Weeks* Oral Polio Vaccine Diphtheria, Tetanus and Whooping Cough Polio Vaccine Haemophilus Influenzae B Hepatitis B Pneumococcal Conjugated Vaccine Rotavirus Vaccine	
	10 Weeks* Diphtheria, Tetanus and Whooping Cough Polio Vaccine Haemophilus Influenzae B Hepatitis B	
	14 Weeks* Diphtheria, Tetanus and Whooping Cough Polio Vaccine Haemophilus Influenzae B Hepatitis B Pneumococcal Conjugated Vaccine Rotavirus Vaccine	
	9 Months Measles (measles or measles/mumps/rubella (MMR) vaccinations) Pneumococcal Conjugated Vaccine	
	18 Months* Measles Diphtheria, Tetanus and Whooping Cough Polio Vaccine Haemophilus Influenzae B	
	6 Years Tetanus Diphtheria, reduced strength	
	* The Diphtheria, Tetanus and Whooping Cough, Polio Vaccine, Hepatitis B and Haemophilus Influenzae B vaccines may be administered as a 6-in-1 combined preparation (e.g. Hexaxim)	
	HIV/Aids Prevention, Needlestick Injuries and Prevention of Mother-to-Child Transmission**	100% of LMS Rate unlimited subject to registration on the relevant managed healthcare programme, treatment protocols and medicine formularies
Crime Trauma Benefit*	See below for sub-categories, related Rates and limits that apply	
Psychologists, Psychiatrists and Social Workers	200% of LMS Rate limited to R6 400 per beneficiary Subject to pre-authorisation and the relevant managed healthcare programme The Crime Trauma Benefit is payable if any of the following, as defined in common law, have occurred:	
	<ul style="list-style-type: none"> • Hi-jacking or attempted hi-jacking; • Attempted murder; • Assault or attempted assault including sexual assault; • Rape or attempted rape; • Robbery (including armed robbery) or attempted robbery. <p>Such crime must have been carried out on or witnessed by the beneficiary and resulted in the need for counselling by a registered psychologist, psychiatrist or social worker due to the trauma associated with the crime. The crime must have been reported at a police station and a case number and the name of the police station must be disclosed when a claim is made</p> <p>Benefits in respect of rape or sexual assault or attempted rape are subject to the relevant managed healthcare programme</p> <p>The Crime Trauma Benefit must be accessed within a 12-month period from the date of the event</p>	
HIV prophylaxis (Rape)	100% of LMS Rate or 100% of GRP	

* Subject to pre-authorisation and/or case management

** Subject to managed healthcare programme.

Medical Rescue

Emergency Transport Services	100% of Cost No limit Emergency road and air transport within South Africa if obtained via ER24
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Monthly Contributions

	Principal Member	Adult Dependant	Child Dependant
TRADITIONAL Ultimate	R6 416	R5 650	R1 523



Contact Information

Liberty Medical Scheme

Private Bag X3
Century City
7446

TRADITIONAL Ultimate Service Centre

0860 690 900
084 124 or 0860 00 HELP / 4357 (Emergency Transport Services)
www.libmed.co.za

Contact details for the Council for Medical Schemes (CMS)

According to the Council for Medical Schemes (CMS), any complaints about your medical scheme should first be lodged with the scheme. Should all efforts fail to resolve an issue with your scheme, you can submit your complaint to the CMS Complaints Unit using the following details:

Customer Care Centre: 0861 123 267 - Fax: 012 431 0608 - E-mail: complaints@medicalschemes.com

Postal address: Private Bag X34, Hatfield, 0028 - Website: <https://www.medicalschemes.com/>

We also encourage you to seek financial advice about your healthcare cover at any time by speaking to your financial adviser.

Disclaimer

This is a marketing overview and summary of the Liberty Medical Scheme services and complementary products. Every attempt has been made to ensure complete accuracy of this brochure. However, in the event of a conflict between this brochure and the registered Rules of the Scheme, the Rules will prevail. E&OE©

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