



Mammoth
HEALTH

2023 BENEFIT GUIDE

Healthcare benefits for your life

A photograph of a woman with long dark hair hugging a young girl with braids. The woman is wearing a light-colored, textured dress. The girl is wearing a white shirt and has a joyful expression. The background shows window blinds.

HEALTH OPTIONS 2023

Primary

The Primary option is an affordable plan that enables young, healthier, first-time medical aid buyers cover without any financial strain on their day-to-day lives. This cover offers a bouquet of In-Hospital and Out-of-Hospital benefits with the added benefit of unlimited Specialist Consultations.

Standard

The Standard option provides small to medium sized families and professional individuals with unlimited Specialist visits, while still offering both In-Hospital and Out-of-Hospital cover, and the freedom to manage their daily healthcare expenses through Over-the-Counter medication and Major Disease Benefits.

Standard Plus

The Standard Plus option is the best option for individuals who have hospitalization history. The benefits are comprehensive for all chronic condition treatments for In-Hospital and Out-of-Hospital cover.

Elite

The Elite option is most suitable for highly active professionals and more mature individuals who are living with multiple chronic conditions or age-related ailments. All benefits are comprehensive and adequate to cover in and out of hospital healthcare needs.

Elite Magenta

The Elite Magenta option offers an unlimited overall annual limit which is the perfect solution for executives on the move, and for top professionals with busy schedules. This is the most extensive cover on the Scheme and comes highly sought after by CEO's and other C-Suite executives.

Members between 0-64 years of age are legible for new membership.

HEALTHCARE OPTION BENEFITS

Mamoth Health provides health options that are as unique as you are. Seamless, personalised, connected health cover to protect you and those that you care for most, at every stage of your life.

Hospitalisation

	Primary	Standard	Standard Plus	Elite	Elite Magenta
Overall Annual Limit (OAL)	842 400	1 053 000	1 579 500	2 632 500	Unlimited
Hospitalisation	Subject to OAL	Subject to OAL	Subject to OAL	Subject to OAL	Unlimited
Medical Rehabilitation	19 250	24 750	32 990	48 120	52 930
Emergency (Ambulance) Services	Subject to OAL	Subject to OAL	Subject to OAL	Subject to OAL	Unlimited
Blood Transfusion	24 750	37 440	64 620	81 110	89 220
Maternity	Subject to OAL	Subject to OAL	Subject to OAL	Subject to OAL	Unlimited
Face, Jaw, and Mouth Surgery (Non optional)	Subject to OAL	Subject to OAL	Subject to OAL	Subject to OAL	Unlimited
Mental Health (In-Hospital)	22 280	33 420	41 780	50 130	55 150
Specialised Radiology (MRI scan and CT scan)	13 370	22 280	33 420	55 700	61 270

Hospital Authorisation: A medical aid member should obtain authorization from the Case & Healthcare Management Team by phone or email.

In emergency cases, please notify the the team or office within 24 hours after admission.

	Primary	Standard	Standard Plus	Elite	Elite Magenta
MAJOR DISEASE BENEFIT LIMIT	401 070	501 330	668 430	941 490	1 035 660
Cancer Treatment	133 690	167 110	222 810	313 830	345 220
Organ Transplant	133 690	167 110	222 810	313 830	345 220
Kidney Failure Treatment	133 690	167 110	222 810	313 830	345 220
Internal Devices	33 420	50 130	60 160	77 680	85 410

PROSTHESIS BENEFIT

Internal or External Devices / Appliances	8 360	11 140	15 600	31 190	34 310
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Day-to-Day Benefits

	Primary	Standard	Standard Plus	Elite	Elite Magenta
General Practitioner Consultation (GP) - No. of Visits	6	8	10	12	12
Specialist Consultation (Only by Referral)	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Prescribed Medication	2 950	3 370	3 790	4 210	5 050
Supplements	740	840	950	1 050	1 580
Over the Counter Medication (OTC)	790	1 055	1 316	1 580	1 816
Supplements Per Visit	170	170	170	170	170
Over the Counter Medication (OTC) Per Visit	170	170	170	170	170

Day-to-Day Chronic Benefits

If you have a condition that requires ongoing medication (minimum of three (3) months), please ensure that you complete a chronic form and submit it to our office. The purpose of Chronic Registration is to ensure that members receive sustainable funding for cost-effective treatment. It also helps in ensuring that the chronic condition is well monitored and the member adheres to treatment hence preventing the occurrence of complications.

	Primary	Standard	Standard Plus	Elite	Elite Magenta
Chronic Medication	3 340	6 210	8 910	18 740	20 830
Immune Deficiency (Incl. HIV)	8 250	11 000	12 370	17 140	19 050
Basic Dentistry	1 620	2 310	2 790	3 040	3 380
Advanced Dentistry	N/A	N/A	N/A	6 900	7 200
Optometry (Every 2 Years)	2 140	3 200	3 440	3 760	4 180
Frame	1 190	1 540	1 900	2 350	2 610
Prescribed Lens (Subject to Optometry Benefit upto 100%)	2 140	3 200	3 440	3 760	4 180
Laboratory Tests, Physiotherapy & Xrays	3 900	5 570	7 800	15 430	17 160
Mental Health (Out-of-Hospital)	1 670	2 230	2 790	3 310	3 680

Voluntary Monthly Savings Account (MSA)

A member can contribute voluntary savings from a minimum of M50.00 per month. Savings are used for medical expenses only and can be claimed in the current December benefit year, to be paid out at the beginning of April of the following medical aid year.

Contribution Waiver Benefit

Contribution waiver is a benefit wherein the contributions are not paid for twelve (12) months by the dependents, in the case of death and permanent total disability of the Main Member.

Waiver Duration (Death & Disability)	Twelve (12) Months Contributions	
	Waiting Period	Cover Termination
Death	No waiting period	65 Years
Permanent & Total Disability	3 Months	65 Years

Wills for Members

We offer free Wills to members above the age of 50 years of age, while members below the age of 50 will pay 50% of the market rate.

Gym Benefit

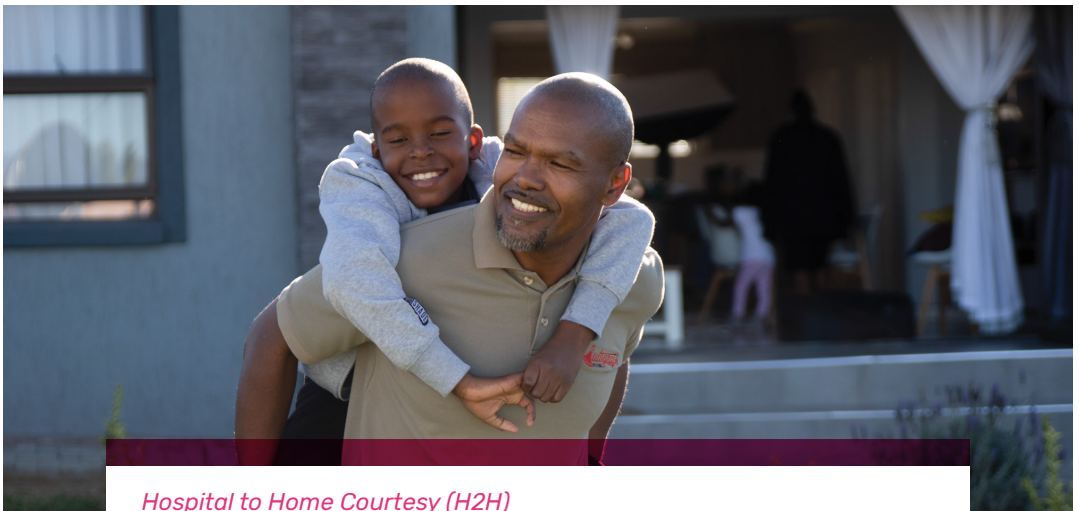
Our members can subscribe to any gymnasium registered with us, and get 40% cash back of up to M192.00 on the monthly subscription if they attend gym 12 times or more in a month. T's & C's apply.

Cash Back Benefit

Offered to members who have not utilised their non-prescribed supplements and over-the-counter medicines in the current medical aid year, and it pays up to a maximum of 15% of the aforementioned benefit lines per member.

Parent Accommodation for Pediatric Admissions (PAPA)

On admission of a child who is 0-12 years, the medical aid will cover lodging for the parent for three (3) nights in Lesotho and RSA to the value of M550 per night.



Hospital to Home Courtesy (H2H)

As part of a comprehensive approach to patient care, hospital discharge transportation will be provided by Mammoth Health to all members hospitalized within the Scheme rules and observation of authorized and approved cases. H2H is extended to members hospitalized in Lesotho and within the Free State Province in South Africa.

Death Compensation

In fulfilling our mandate of taking care of our clients from the Cradle to the Grave, Mamoth Health members are automatically legible for funeral benefits under their selected option. Immediately upon death, the medical aid makes all arrangements in support of the bereaved family, unless the family opts for other arrangements.

Funeral Benefits

	Primary	Standard	Standard Plus	Elite	Elite Magenta
Service Cover	20 000	30 000	40 000	50 000	50 000
Cash Compensation	6 000	8 500	10 500	15 000	17 000
Airtime	200	250	300	500	500

Health Options - Group Contributions

	Primary	Standard	Standard Plus	Elite	Elite Magenta
Main Member	1,379	1,916	2,169	3,212	3,528
Spouse	1,379	1,916	2,169	3,212	3,528
Student	842	1,316	1,453	1,759	1,927
Child	569	758	800	1,221	1,348
Adult	1,379	1,916	2,169	3,212	3,528

Individual Contribution - Low

	Primary	Standard	Standard Plus	Elite	Elite Magenta
Main Member	1,379	1,916	2,169	3,212	3,528
Spouse	1,379	1,916	2,169	3,212	3,528
Student	842	1,316	1,453	1,759	1,927
Child	569	758	800	1,221	1,348
Adult	1,379	1,916	2,169	3,212	3,528

Individual Contribution - Middle

	Primary	Standard	Standard Plus	Elite	Elite Magenta
Main Member	1,432	1,989	2,252	3,334	3,662
Spouse	1,432	1,989	2,252	3,334	3,662
Student	874	1,366	1,508	1,825	2,000
Child	590	787	831	1,268	1,399
Adult	1,432	1,989	2,252	3,334	3,662

Individual Contribution - High

	Primary	Standard	Standard Plus	Elite	Elite Magenta
Main Member	1,484	2,062	2,334	3,456	3,796
Spouse	1,484	2,062	2,334	3,456	3,796
Student	906	1,416	1,564	1,892	2,073
Child	612	816	861	1,314	1,450
Adult	1,484	2,062	2,334	3,456	3,796

*The Scheme reserves the right to assign Individual prices to existing individual members.
Terms & Conditions apply*

Healthcare services that are not covered on your plan

Medical Aid exclusions are conditions that the scheme will not pay for under any option.

This means that for any of the above conditions, members will not be covered under medical aid.

- Appliances to treat headache
- Humidifiers
- Blood pressure machines
- Postmortem
- Backrests and chair seats
- Beds and mattresses
- Enlarged male breasts due to hormonal imbalances, not cancer.
- Plastic surgery of the eyelid
- Breast enlargement and breast reduction
- Breast reconstruction unless post-cancer with the doctor's motivation
- Contact lens solutions
- The purchase of sunglasses and repairs to frames
- Contraceptives except for Tubal Ligation and Vasectomy.
- Electric toothbrushes
- Hair removal procedures
- Erectile dysfunction and loss of libido
- Erythropoietin unless pre-authorized
- Infertility treatment
- Using Oxygen therapy at home including the purchase of CPAP machines
- Keloid removal except for burns and functional impairment
- Treatment for cosmetic purposes such as lip or tongue surgery, ear surgery, nose surgery, chin surgery.
- Palate surgery EXCEPT for children 8 years and below
- All medical appliances and devices not scientifically proven
- Organ donations to anyone other than a member or dependent of the scheme.
- Orthodontic treatment such as braces, arch wires, teeth aligners, and retainers for members over 21.
- Pain relieving machines such as TENS and APS.
- Refractive surgery unless provided for
- Removal of tattoos.
- Revision of scars
- Holiday for recuperative purposes
- Travel expenses
- Telephone consultations
- Treatment of alcohol and drug abuse

Fraud, Waste and Abuse

The Mammoth Health Scheme has put appropriate systems in place in order to detect misuse or mismanagement of benefits by a member or medical practitioner. Serious legal measures will be taken against individuals found guilty of fraud, waste and abuse of the medical aid.

Member Profiling - Distinguishes and spots the members' files on irregular claiming patterns. This includes lending your medical aid card to be used by anyone who is not your registered dependant.

Provider Profiling - Monitors the providers' coding and treatment provided. If you are aware of any practitioner or member abusing or defrauding the scheme, please report it anonymously to +266 6225 4216 / +266 6232 2392

Terms & Conditions Apply

Office Physical Address | The Mamoth Citrus House, Lethole Road, Ha Hoohlo, Maseru, Lesotho

Reception: +266 2232 2383 | Contact Centre +266 2221 8300

General Enquiries: info@mamothhealth.com | Emergencies & Ambulances (24 hour contact): +266 6232 2383 / +266 5888 2383 | authorizations@mamothhealth.com



In case of emergencies, please notify the team or our office within 24 hours after admission.

Client Services: +266 6232 2312 / +266 2221 8300 | Claims & Queries: claims@mamothhealth.com & queries@mamothhealth.com

P.O. Box 12628, Maseru 100, Lesotho

This guide is for information purposes only, the Scheme rules always prevail.

Partners



Ambulances



Mamoth Health



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www.mamoth.co.ls
