

GREAT HEALTH INSURANCE THAT WORKS FOR YOU

**CORPORATE HEALTH
COVER BROCHURE
15 NOVEMBER 2023**



WHY PRIVATE HEALTH INSURANCE MAKES COMMON SENSE

Everyone has their own reasons for choosing private health insurance. It could be for peace of mind or it might make financial sense. Here are some of the benefits of having private health insurance.



CHOOSE YOUR HOSPITAL AND SPECIALIST

You decide who treats you and where.



ENJOY BETTER WELLBEING WITH EXTRAS COVER

Depending on which extras cover you choose, you can claim on a range of services like dental, optical, physio, weight management programs and more.



SKIP THE PUBLIC HOSPITAL WAITING LIST

Cut down the time you need to wait for surgery.



GET AHEAD ON GOVERNMENT INCENTIVES

- Reduce your premiums with the Australian Government Rebate on private health insurance.
- You could avoid the Medicare Levy Surcharge.
- Avoid the Lifetime Health Cover loading if you take out hospital cover before your 31st birthday, and maintain it.



BETTER ACCESS TO A PRIVATE ROOM

In a private hospital you're more likely to have a private room, so you can recover in the peace and privacy of your own space. They're allocated on patient need so we can't guarantee one.



RIDE EASIER IN AN EMERGENCY

Medicare doesn't cover ambulance services and these can be costly (if you're not covered by a state-based ambulance scheme). Depending on which cover you choose, you could be covered for ambulance costs in an emergency (see page 25 for more details).

UNCOMMON CARE WHEN YOU NEED IT MOST

Matthew and Nadine's world turned upside down with Matthew's cancer diagnosis. Luckily he had access to HCF's treatment at home program, which meant he didn't have to go to hospital and instead was treated from the comfort of his lounge.

Find out more at hcf.com.au/home-treatment

"We just assumed that he'd have to have chemo somewhere and have to travel... then HCF said that they were going to do it at home and it was just such a relief."

Nadine
HCF member

WE'RE ALL ABOUT UNCOMMON CARE HERE'S HOW

Our strong commitment to protecting Australians' health hasn't changed for 90 years — we think that's pretty uncommon. We're proud to put the health of our members before profit, from giving more back in benefits to improving their health and wellbeing through industry-leading health programs.

PEOPLE BEFORE PROFIT

Because we're Australia's largest not-for-profit health fund, our members are at the heart of everything we do. And, we put the health and wellbeing of the 1.9 million Aussies we cover before anything else.



100% BACK ON POPULAR EXTRAS

Pay \$0 on 1 or 2 dental check-ups a year and a first visit to a physio, chiro or osteo with over 16,000 extras providers who participate in our No-Gap network*.



MORE MONEY BACK

For every dollar our members paid in premiums, we've paid out more benefits than the industry average over the last 10 years*.



WE'RE HERE FOR YOU

Proudly owned and run by Aussies, we're here to help you with award-winning local call centres and branches across the country.



KIDS GO FREE

If you add your kids to your HCF family cover, the cost of that cover stays the same. You also pay \$0 excess for kids aged under 25, no matter how many times they go to hospital. Excludes Corporate Accident Only Basic cover.



LOYALTY REWARDS

You don't have to be unwell to get great value from your cover with our range of exclusive loyalty offers and rewards. We can help you save money on essentials like groceries or on well-deserved treats and experiences*.



* 100% back through More for You providers in our No-Gap network is available on selected covers. Waiting periods, and annual and service limits apply. Providers are subject to change. We recommend that you confirm the provider prior to your appointment. See hcf.com.au/100back

^ 89.2% compared to 85.6% across the industry. Calculated based on the average of the past 10 years, sourced from APRA Statistics: Private Health Insurance Operations Reports 2014-23.

+ Eligibility criteria applies. You can access HCF Thank You offers after you've been a member for a week, and if your premiums are up to date. Excludes Ambulance Only and Overseas Visitors Health Cover. Offers and partners are subject to change without advance notice. See the HCF Thank You Terms available at hcf.com.au

LET US HELP YOU CHOOSE THE COVER THAT'S RIGHT FOR YOU

We've got a range of health cover options to suit your needs. You might already know what you're after, or maybe you'd like guidance based on where you're at in life. This quick reference guide will make choosing easy.



Not sure and need help?

LET'S GET STARTED

NEED SOME HELP CHOOSING?



OR

ALREADY KNOW WHAT YOU WANT?



PAGES 10 & 11

OR

JUST WANT AMBULANCE COVER?



hcf.com.au/ambulance

PAGES 6 & 7

SUGGESTIONS FOR YOUR LIFE STAGE



PAGES 8 & 9

PICK A PACKAGE



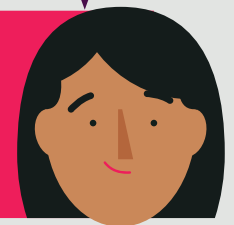
OR

CHOOSE YOUR HOSPITAL AND/OR EXTRAS



PAGES 12-15

NEED OTHER PROTECTION?



RECOVER COVER

Our range of unique insurance products to help with the unexpected costs of recovery.

PAGES 16 & 17



PET INSURANCE

We can help with the cost of your cat or dog's eligible vet bills (paying up to 80% back).

PAGE 20



TRAVEL INSURANCE

Whether you're travelling near or far, often, or just taking a single trip we can help get you covered.

PAGE 20



FLIP

On-demand cover that pays cash if you're injured in an accident.

PAGE 20



CHOOSE YOUR COVER

COVER THAT'S MADE FOR MEMBERS





In our experience when it comes to choosing health cover, it helps to start by considering where you're at in life. While this doesn't include all possibilities, it's a good way to see what you're likely to need from your cover.

HOSPITAL COVER CATEGORIES

All hospital cover is categorised as either Gold, Silver, Bronze or Basic. The government sets out which treatments and services each category needs to include (as a minimum). On our hospital products we've chosen to cover additional services, above the minimum requirement, and that's why the products include 'Plus' in the name.

The ranking makes it easier to compare different policies, so you can confidently choose the cover that's right for you. The table below shows which category each of our suggested hospital covers fall into.



HOW WOULD YOU DESCRIBE YOURSELF?	HOSPITAL CATEGORY	WHAT TYPE OF COVER IS IMPORTANT TO YOU?	SUGGESTED HOSPITAL & EXTRAS
 <p>YOUNG SINGLES & COUPLES Not planning a family</p>	Gold	Top cover for peace of mind	Corporate Premium Gold and Advanced Extras
	Silver Plus	Mid level cover	Corporate Standard Silver Plus and Active Extras
	Bronze Plus	Budget conscious	Corporate Bronze Plus and Corporate Flex My Extras
	Basic Plus	Budget conscious	Future Care Basic Plus packages
 <p>PLANNING KIDS A single or couple starting or growing a family</p>	Gold	Top cover for peace of mind	Corporate Premium Gold and Ultimate Extras
	Silver Plus	Mid level cover	Family Care Advanced Silver Plus package
	Silver Plus	Budget conscious	Family Care Silver Plus package
 <p>FAMILY WITH KIDS With no plans to have more kids</p>	Gold	Top cover for peace of mind	Corporate Premium Gold and Ultimate Extras
	Silver Plus	Mid level cover	Family Care Advanced Silver Plus package
	Bronze Plus	Budget conscious	Corporate Bronze Plus and Active Extras
	Basic Plus	Budget conscious	Future Care Basic Plus packages
 <p>SINGLES & COUPLES No kids, not planning a family or kids have left home</p>	Gold	Top cover for peace of mind	Corporate Premium Gold and Ultimate Extras
	Silver Plus	Mid level cover	Corporate Silver Plus and Advanced Extras
	Silver Plus	Mid level cover	Corporate Standard Silver Plus and Active Extras
	Bronze Plus	Budget conscious	Corporate Bronze Plus and Lifestyle Extras

EASY TO CHOOSE PACKAGES

On pages 12-15 you'll find a detailed list of hospital and extras benefits.

YOUNG SINGLES AND COUPLES

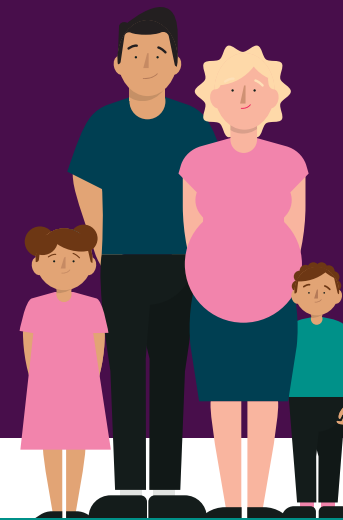
Future Care Basic Plus packages are designed for the lifestyle and budgets of young, healthy people. They're a combo of budget hospital cover and a flexible extras limit to give you the freedom to choose how you use your extras.



FUTURE CARE 250/500/750 BASIC PLUS PACKAGES

We offer a choice of 3 packages, each with a different hospital excess and extras services and limits, so you can pick what's best for you.

- ✓ Choose from a \$250, \$500 or \$750 excess.
- ✓ A flexible extras limit so you can pick the services you claim most.
- ✓ An additional optical limit with Future Care 250 & 500.
- ✓ Claim on teeth whitening provided by your dentist*.
- ✓ 100% back[^] through our No-Gap network on:
 - a dental check-up
 - a pair of prescription glasses from a selected range* and free digital retinal imaging with your eye test (excluding Future Care 750)
 - a first visit to a physio.
- ✓ Accident Safeguard – get the benefits of our top hospital cover for 90 days if you're in an accident and go to an emergency department within 24 hours[#].
- ✓ Ambulance cover in emergencies.



FAMILY CARE SILVER PLUS

This package is ideal if you're planning a family, it covers you for pregnancy and birth (after a 12 month waiting period), as well as dental, optical and popular therapies.

- ✓ Private hospital cover for pregnancy and birth (after a 12 month waiting period).
- ✓ Hospital and extras package with antenatal and postnatal support, including childbirth education classes and breastfeeding support services provided by the Australian Breastfeeding Association**.
- ✓ Accident Safeguard – get the benefits of our top hospital cover for 90 days if you're in an accident and go to an emergency department within 24 hours[#].
- ✓ No excess for kids aged under 25 or for accident-related treatment (for services included in your cover).
- ✓ Flexible extras limit so you can claim the included services you need most, with an additional optical limit.
- ✓ HCF-approved learn to swim and weight management programs for eligible members**.
- ✓ 100% back[^] through our No-Gap network on:
 - up to 2 dental check-ups
 - a pair of prescription glasses from a selected range* and free digital retinal imaging with your eye test.

PLANNING A FAMILY

If you're planning to have kids, or adding to a growing family, and don't need IVF treatment, HCF's Family Care Silver Plus or Family Care Advanced Silver Plus packages have you covered. We offer a wide range of services and treatments for before, during and after your pregnancy.

FAMILY CARE ADVANCED SILVER PLUS

All of Family Care Silver Plus with these added benefits:

- ✓ 100% back[^] on a first visit to a physio, chiro, osteo and podiatrist in our No-Gap network.
- ✓ added family-friendly extras services including orthodontics, speech therapy, podiatry and foot orthotics*, School Accident Benefit^{^^} and occupational therapy.

* Service limits and 12 month waiting period applies.

[^] 100% back through *More for You* providers in our No-Gap network is available on selected covers. Waiting periods, and annual and service limits apply. Providers are subject to change. We recommend that you confirm the provider prior to your appointment. See hcf.com.au/100back

⁺ Up to your annual limits. Excludes add-ons like high index material, coatings and tinting.

[#] To be eligible, you must go to a hospital emergency department within 24 hours. Benefits are not payable for expenses incurred in relation to an injury where compensation, damages or benefits may be claimed from another source. Other conditions apply. See hcf.com.au/accident-safeguard


^{**} Annual limits and waiting periods apply.

^{^^} Applies to children attending school, up to and including year 12. Subject to waiting periods, annual limits and other conditions. See hcf.com.au/school-accident

BUILD YOUR OWN COVER

Create your own package by mixing and matching covers to get the one that's right for you. Ask yourself — do I want to combine hospital and extras covers? Or do I only need hospital? Or just extras? You have the flexibility to pick what works for you.


To help you design what's right for you, outlined below are the key features of each cover, from the basic options all the way to the most comprehensive.

	HOSPITAL			
	CORPORATE PREMIUM GOLD	CORPORATE SILVER PLUS	CORPORATE STANDARD SILVER PLUS	CORPORATE BRONZE PLUS
 <p>Want our top level of cover for peace of mind? Corporate Premium Gold hospital has you covered.</p> <p>Not planning a baby, but want comprehensive cover? Choose our Silver Plus option.</p> <p>Think you may need a common procedure? Our Standard Silver Plus cover is an affordable option.</p> <p>Budget conscious and healthy? Corporate Bronze Plus hospital cover is for you.</p>				
FEATURES				
<ul style="list-style-type: none"> Choice of \$250, \$500 or \$750 excess Treatments like joint investigations, digestive system procedures, sleep studies, removal of tonsils or appendix No excess for kids aged under 25 or accident-related treatment (for services included in your cover) Free access to a great range of health and wellbeing programs for eligible members 	✓	✓	✓	✓
<ul style="list-style-type: none"> Heart and vascular system Back, neck and spine Rehab 	✓	✓	✓	
<ul style="list-style-type: none"> Joint replacements Dialysis for chronic kidney failure Cataracts 	✓	✓		
<ul style="list-style-type: none"> No excess for same day admissions Pregnancy and birth Assisted reproductive services e.g. IVF 	✓			

CREATE THE RIGHT COVER FOR YOU



On pages 12-15 you'll see a detailed list of what's covered.

	EXTRAS					
	ULTIMATE	ADVANCED	ACTIVE	LIFESTYLE	CORPORATE FLEX MY EXTRAS	ESSENTIAL
 <p>Our premium extras option, Ultimate provides the highest limits and benefits for all included extras services.</p> <p>Want higher limits than Active Extras? Choose Advanced Extras.</p> <p>Think you might need major dental, orthodontics and a wider range of treatments and services than Lifestyle Extras? Consider Active Extras.</p> <p>Want to step up your dental, optical and selected therapies from Essential Extras? Get higher limits, and crowns and dentures, with Lifestyle Extras.</p> <p>Want affordable extras with a flexible single limit plus optical limit? Corporate Flex My Extras has you covered.</p> <p>Want general dental, optical and selected therapies at a budget-friendly, entry-level rate? Try Essential Extras.</p>						
FEATURES						
	Use Limit Boost to top up your dental and optical limit. See page 21.					
<ul style="list-style-type: none"> 100% back* on: <ul style="list-style-type: none"> 1 dental check per year certain glasses and lenses* Free digital retinal imaging with your eye test 	✓	✓	✓	✓	✓	✓
<ul style="list-style-type: none"> 100% back* on: <ul style="list-style-type: none"> an additional dental check (up to 2 per year) 	✓	✓	✓	✓		
<ul style="list-style-type: none"> 100% back* on: <ul style="list-style-type: none"> a first visit to a physio, chiro, osteo and podiatrist^ 	✓	✓	✓			
<ul style="list-style-type: none"> Higher benefits so you can claim more on your dental, optical and therapies 	✓	✓				
<ul style="list-style-type: none"> Our highest limits and benefits 	✓					
					Includes Gap Bonus. See page 15.	

* 100% back through *More for You* providers in our No-Gap network is available on selected covers. Waiting periods, and annual and service limits apply. Providers are subject to change. We recommend that you confirm the provider prior to your appointment. See hcf.com.au/100back

† Up to your annual limits. Excludes add-ons like high index material, coatings and tinting.

‡ The first visit received for a new health condition or flare up where no treatment has been provided in the previous 3 months.

HOSPITAL BENEFITS SUMMARY

	HOSPITAL AND EXTRAS PACKAGES		HOSPITAL ONLY COVERS			
	FAMILY CARE ADVANCED SILVER PLUS/FAMILY CARE SILVER PLUS	FUTURE CARE 250/500/750 BASIC PLUS <small>Singles & couples only</small>	CORPORATE PREMIUM GOLD	CORPORATE SILVER PLUS	CORPORATE STANDARD SILVER PLUS	CORPORATE BRONZE PLUS
Choose your excess (per person per calendar year)	\$250, \$500 or \$750	\$250, \$500 or \$750	\$250, \$500 or \$750	Nil, \$250, \$500 or \$750	Nil, \$250, \$500 or \$750	\$250, \$500 or \$750
No excess for kids aged under 25	✓	N/A	✓	✓	✓	✓
No excess for accident-related treatment (for services included in your cover)	✓	✓	✓	✓	✓	✓
No excess for same-day treatment	✗	✗	✓	✗	✗	✗
Travel & accommodation benefit[^]	✓	✓	✓	✓	✓	✓
Examples of what's covered <small>Includes accommodation, operating theatre, intensive care, government-approved Prostheses, pharmaceuticals[#] and physiotherapy, as part of your covered admission at a participating private hospital</small>						
Emergency ambulance <small>(service limits of 1 per person, 2 per policy may apply)</small>	✓	✓	✓	✓	✓	✓
Accident Safeguard - Services Not Included or Restricted Services listed in this table will be treated as covered on an unrestricted basis in the event of an Accident that occurs after joining. Does not include podiatric surgery by a registered podiatric surgeon. Conditions apply. hcf.com.au/accident-safeguard	✓	✓	✓	✓	✓	✓
Rehabilitation	✓	Ⓡ	✓	✓	✓	Ⓡ
Hospital psychiatric services	Ⓡ	Ⓡ	✓	Ⓡ	Ⓡ	Ⓡ
Palliative care	✓	Ⓡ	✓	✓	✓	✓
Brain and nervous system e.g. stroke, brain or spinal cord tumours	✓	✗	✓	✓	✓	✓
Eye (not cataracts) e.g. retinal detachment, tear duct conditions, eye infections and medically managed trauma to the eye	✓	✗	✓	✓	✓	✓
Ear, nose and throat e.g. damaged ear drum, sinus surgery, removal of foreign bodies, stapedectomy and throat cancer	✓	✓	✓	✓	✓	✓
Tonsils, adenoids and grommets e.g. hospital treatment of the tonsils, adenoids and insertion or removal of grommets	✓	✓	✓	✓	✓	✓
Bone, joint and muscle e.g. carpal tunnel, fractures, hand surgery, joint fusion, bone spurs, osteomyelitis and surgery for bone cancer	✓	✓	✓	✓	✓	✓
Joint reconstructions e.g. torn tendons, rotator cuff tears and damaged ligaments	✓	✓	✓	✓	✓	✓
Kidney and bladder e.g. kidney stones, adrenal gland tumour and incontinence	✓	✗	✓	✓	✓	✓
Male reproductive system e.g. male sterilisation, circumcision and prostate cancer	✓	✗	✓	✓	✓	✓
Digestive system e.g. oesophageal cancer, irritable bowel syndrome, gall stones and haemorrhoids	✓	✗	✓	✓	✓	✓
Hernia and appendix e.g. hernia operations and appendicitis	✓	✓	✓	✓	✓	✓
Gastrointestinal endoscopy e.g. colonoscopy and gastroscopy	✓	✗	✓	✓	✓	✓
Gynaecology e.g. endometriosis, polycystic ovaries, female sterilisation and cervical cancer	✓	✓	✓	✓	✓	✓
Miscarriage and termination of pregnancy	✓	✓	✓	✓	✓	✓
Chemotherapy, radiotherapy and immunotherapy for cancer	✓	✗	✓	✓	✓	✓
Pain management e.g. treatment of nerve pain and chest pain due to cancer by injection of a nerve block	✓	✗	✓	✓	✓	✓
Skin e.g. surgery to remove melanoma, minor wound repair and abscesses	✓	✓	✓	✓	✓	✓
Breast surgery (medically necessary) e.g. breast lesions, breast tumours, asymmetry due to breast cancer surgery and gynecomastia	✓	✗	✓	✓	✓	✓
Diabetes management (excluding insulin pumps) e.g. stabilisation of hypo- or hyper-glycaemia, contour problems due to insulin injections	✓	✗	✓	✓	✓	✓
Heart and vascular system e.g. heart failure and heart attack, monitoring of heart conditions, varicose veins and removal of plaque from arterial walls	✓	✗	✓	✓	✓	✗
Lung and chest e.g. lung cancer, respiratory disorders such as asthma, pneumonia and treatment of trauma to the chest	✓	✗	✓	✓	✓	✓
Blood e.g. blood clotting disorders and bone marrow transplants	✓	✗	✓	✓	✓	✓
Back, neck and spine e.g. sciatica, prolapsed or herniated disc, and spine curvature disorders such as scoliosis	✓	✗	✓	✓	✓	✗
Plastic and reconstructive surgery (medically necessary) e.g. burns requiring a graft, cleft palate, club foot and angioma	✓	✗	✓	✓	✓	✓
Dental surgery⁺ e.g. surgery to remove wisdom teeth and dental implant surgery	✓	✓	✓	✓	✓	✓
Podiatric surgery (provided by a registered podiatric surgeon)	Ⓟ	✗	Ⓟ	Ⓟ	Ⓟ	Ⓟ
Implantation of hearing devices*	✓	✗	✓	✓	✓	✗
Cataracts	✗	✗	✓	✓	✗	✗
Joint replacements	✗	✗	✓	✓	✗	✗
Dialysis for chronic kidney failure	✗	✗	✓	✓	✗	✗
Pregnancy and birth	✓	✗	✓	✗	✗	✗
Assisted reproductive services	✗	✗	✓	✗	✗	✗
Weight loss surgery	✗	✗	✓	✗	✗	✗
Insulin pumps	✗	✗	ⓘ	✗	✗	✗
Pain management with device e.g. treatment of nerve pain, back pain and pain caused by coronary heart disease with a device	✗	✗	✓	✓	✗	✗
Sleep studies e.g. sleep apnoea and snoring	✓	✓	✓	✓	✓	✓

[^] When you travel at least 200km round trip. Other terms and conditions apply. Go to hcf.com.au/travel-accommodation to find out more.
[#] Excluding experimental and high-cost non-PBS drugs. This condition applies for all clinical categories including chemotherapy, radiotherapy and immunotherapy for cancer. See page 25 for more information.

* Includes associated speech and sound processors (including upgrades).
⁺ Members must hold eligible extras cover if they want to claim benefits for eligible dental services performed in a hospital.



CHOOSE YOUR COVER

WAITING PERIODS

HOSPITAL	
Palliative care Hospital psychiatric services Rehabilitation	2 months
Pre-existing ailments or conditions Pregnancy and birth	12 months
All other hospital services including treatments under Accident Safeguard	2 months
AMBULANCE	
Emergency ambulance	1 day

Waiting periods vary according to the type of treatment or service. Members who have held a hospital cover for at least 2 months and upgrade to receive hospital benefits (or a higher level of hospital benefits) for hospital psychiatric services may elect to be exempted from the 2 month waiting period for hospital psychiatric services. **This exemption or reduction can only be accessed once in a member's lifetime.**

NO EXCESS FOR SAME-DAY TREATMENT

HCF will waive any applicable excess for same-day treatment for members who have held HCF Corporate Premium Gold for at least 12 months.

Ⓡ RESTRICTED COVER

Restricted Cover is where certain services are specified as being Restricted Services under a hospital product and where Minimum Benefits are applicable. From time to time, the Australian Minister for Health sets out a rate for Minimum Benefits. These Minimum Benefits apply to Restricted Services under some of our hospital covers. If you have Restricted Services under your cover, HCF will pay the Minimum Benefit for a shared room and benefits for government-approved Prescribed List of Medical Devices and Human Tissue Products items and medical services for these Restricted Services. This means that you may have to pay significant out-of-pocket expenses in a private hospital. In a public hospital, if you elect to be a private patient, you may also have to pay significant out-of-pocket expenses.

See page 24 for further details.

✗ SERVICES NOT INCLUDED

If you choose a hospital cover where some treatments are not included in your cover then no benefits are payable for those treatments and all services associated with those treatments e.g. prosthesis, medical, diagnostics, except in the case of Accident Safeguard.

See page 24 for further details.

Please note: Other service exclusions apply. For more information on excluded services read page 24.

- ✓ Service covered on an unrestricted basis at participating hospitals.
- Ⓟ Limited benefits apply. Minimum benefit level payable by HCF for hospital accommodation as determined under the *Private Health Insurance Act* and the cost of prosthesis (as listed on the Prescribed List of Medical Devices and Human Tissue Products). No benefit is payable for podiatric surgeon fees. Ensure you have Informed Financial Consent prior to your treatment, for any out-of-pocket expenses.
- ⓘ Cover is subject to conditions (e.g. provision of a Type C certificate if an insulin pump is provided in hospital with a Type C procedure). For insulin pumps provided as an outpatient, limitations apply to benefits for replacement insulin pumps. See hcf.com.au/insulinpumps to find out if you're covered.

EXTRAS LIMITS SUMMARY



CATEGORY	SERVICE	WAITING PERIODS	ANNUAL LIMIT (PER PERSON PER CALENDAR YEAR UNLESS STATED OTHERWISE) HCF PAYS A SET AMOUNT OF BENEFITS WHICH MAY NOT COVER THE FULL CHARGE											
OPTICAL	Glasses & contact lenses	Spectacle frames	\$300	\$250	\$180	\$180	X	\$300	\$250	\$225	\$200	\$175	\$150	
		Spectacle lenses – pair [^]												
		Contact lenses – pair												
GENERAL DENTAL	Diagnostic & preventative	Examinations	\$1,700 combined limit per person, per year	\$1,150 combined limit per person, per year (Excludes occlusal therapy)	\$900 combined limit per person, per year (Excludes occlusal therapy)	\$750 combined limit per person, per year (Excludes occlusal therapy)	\$600 combined limit per person, per year (Excludes occlusal therapy)	No annual limit Max 2 check ups, 2 scale and clean, and 1 fluoride treatment per person, per year	No annual limit Max 2 check ups, 2 scale and clean, and 1 fluoride treatment per person, per year	Year 1 \$850 Year 2 \$950 Year 3+ \$1,050	\$650	Max 2 check ups, 2 scale and clean, and 1 fluoride treatment per person, per year (Excludes occlusal therapy)	No annual limit Max 1 check up, 1 scale and clean and 1 fluoride treatment	\$450
		Single film X-rays – initial/subsequent (on same day)												
		Removal of plaque/calculus												
		Application of fluoride												
GENERAL DENTAL	Teeth Whitening (provided by a dentist including home application kits)	In-chair treatment service limits apply)	\$1,700 combined limit per person, per year	\$1,150 combined limit per person, per year (Excludes occlusal therapy)	\$900 combined limit per person, per year (Excludes occlusal therapy)	\$750 combined limit per person, per year (Excludes occlusal therapy)	\$600 combined limit per person, per year (Excludes occlusal therapy)	No annual limit Max 2 check ups, 2 scale and clean, and 1 fluoride treatment per person, per year	No annual limit Max 2 check ups, 2 scale and clean, and 1 fluoride treatment per person, per year	Year 1 \$850 Year 2 \$950 Year 3+ \$1,050	\$650	Max 2 check ups, 2 scale and clean, and 1 fluoride treatment per person, per year (Excludes occlusal therapy)	No annual limit Max 1 check up, 1 scale and clean and 1 fluoride treatment	\$450
		Home application (service limits apply)												
MAJOR DENTAL	Fillings - direct	Direct fillings (1-2 surfaces)	\$1,700 combined limit per person, per year	\$1,150 combined limit per person, per year (Excludes occlusal therapy)	\$900 combined limit per person, per year (Excludes occlusal therapy)	\$750 combined limit per person, per year (Excludes occlusal therapy)	\$600 combined limit per person, per year (Excludes occlusal therapy)	\$1,300	\$1,100	Max 2 check ups, 2 scale and clean, and 1 fluoride treatment per person, per year (Excludes occlusal therapy)	\$650	Max 2 check ups, 2 scale and clean, and 1 fluoride treatment per person, per year (Excludes occlusal therapy)	No annual limit Max 1 check up, 1 scale and clean and 1 fluoride treatment	\$450
		Direct fillings (3 or more surfaces)												
	Tooth extractions													
	Fillings - indirect													
	Oral surgery													
	Occlusal therapy													
	Periodontics													
	Endodontics													
	Crowns & bridges													
	Dentures													
MAJOR DENTAL	Orthodontics	Correction of teeth and jaws by an orthodontist or other dentist	\$1,700 combined limit per person, per year	\$1,150 combined limit per person, per year (Excludes occlusal therapy)	\$900 combined limit per person, per year (Excludes occlusal therapy)	\$750 combined limit per person, per year (Excludes occlusal therapy)	\$600 combined limit per person, per year (Excludes occlusal therapy)	\$800 (\$400 for other dentists) Lifetime limit \$2,400 for orthodontist with \$1,200 sub-limit for other dentists	\$800 (\$400 for other dentists) Lifetime limit \$2,400 for orthodontist with \$1,200 sub-limit for other dentists	\$600 (\$300 for other dentists) Lifetime limit \$1,800 for orthodontist with \$900 sub-limit for other dentists	\$650	Max 2 check ups, 2 scale and clean, and 1 fluoride treatment per person, per year (Excludes occlusal therapy)	No annual limit Max 1 check up, 1 scale and clean and 1 fluoride treatment	\$450
THERAPIES	Allied health	Physiotherapy (includes group/class consultations for Corporate Flex My Extras only)	With combined limit	With combined limit	With combined limit	With combined limit	With combined limit	\$750	\$600	Year 1 \$400 Year 2 \$450 Year 3+ \$500	\$350	With combined limit	\$250	
		Exercise physiology (includes group/class consultations for Corporate Flex My Extras only)												
		Chiropractic/osteopathy												
		Osteopathy												
		Podiatry (including 1 pair of foot orthotics per person per year) Note: foot orthotics annual limit on Active Extras is capped at Year 1 [#]												
		Orthotist/Prothesist and Pedorthist												
		Audiology												
		Speech pathology												
		Dietetics												
		Occupational therapy												
THERAPIES	Mental health services	Psychology, counselling & accredited mental health social worker and HCF-approved Online Cognitive Behavioural Therapy courses	With combined limit	With combined limit	With combined limit	With combined limit	With combined limit	\$750	\$600	Year 1 \$400 Year 2 \$450 Year 3+ \$500	\$350	With combined limit (Online Cognitive Behavioural Therapy only)	\$250	
THERAPIES	Natural therapies	Remedial massage and myotherapy	With combined limit	With combined limit	With combined limit	With combined limit	With combined limit	\$450 Sub-limit \$300 per therapy service	\$350 Sub-limit \$300 per therapy service	\$300 Sub-limit \$200 per therapy service	Combined with Chiro and Osteo limit	X	Combined with Chiro and Osteo limit	
		Acupuncture and Chinese herbal medicine consultation												
OTHER	HCF-approved pharmacy	After PBS equivalent co-payment subtracted	With combined limit	With combined limit	With combined limit	With combined limit	With combined limit	\$280	\$280	\$180	X	X	With combined limit	
		Vaccines												
OTHER	Artificial aids & appliances	HCF approved (e.g. low vision aids, blood glucose monitors, orthoses)	With combined limit	With combined limit	With combined limit	With combined limit	With combined limit	Max \$250 per policy	Max \$200 per policy	Max \$150 per policy	X	X	With combined limit	
OTHER	Hearing aids	Benefits accrue over time and renew every 3 years from the date you received them	X	X	X	X	X	Under 1 year NIL Up to 5 years \$800 6-9 years \$1,100 10-14 years \$1,400 15+ years \$1,800	Under 1 year NIL Up to 5 years \$800 6-9 years \$1,100 10-14 years \$1,400 15+ years \$1,800	Under 1 year NIL Up to 5 years \$600 6-9 years \$800 10-14 years \$1,000 15-19 years \$1,200 20+ years \$1,600	X	X	X	
OTHER	Travel & accommodation	200km return trip for a consulting medical specialist and/or hospital admission. hcf.com.au/travel-accommodation	With combined limit	With combined limit	With combined limit	With combined limit	With combined limit	Max \$250 per policy	Max \$250 per policy	Max \$200 per policy	X	X	X	
OTHER	Health Management Programs	HCF-approved for members with health management plan (e.g. exercise classes, group physiotherapy and group exercise physiology classes, weight management, learn to swim) and antenatal/postnatal services including childbirth education classes and breastfeeding consultations	With combined limit (Note that set benefits and service limits may still apply)	With combined limit (Note that set benefits and service limits may still apply)	With combined limit (Note that set benefits and service limits may still apply)	With combined limit (Note that set benefits and service limits may still apply)	With combined limit (Note that set benefits and service limits may still apply)	\$150 per person Max \$300 per policy	\$100 per person Max \$200 per policy	\$75 per person Max \$150 per policy	\$50 per person Max \$100 per policy	X	\$50 per person Max \$100 per policy	
		Additional HCF-approved antenatal/postnatal services - Pregnancy compression garments, breastfeeding support services provided by the Australian Breastfeeding Association												
OTHER	School Accident Benefit	Helps pay out-of-pocket extras expenses for extras in your cover (per eligible child attending school, up to and including year 12). See hcf.com.au/school-accident	X	X	X	X	\$225 per eligible child	\$175 per eligible child	\$125 per eligible child	X	X	X	X	

GET 100% BACK ON POPULAR EXTRAS

You can get 100% back* at *More for You* providers who participate in our No-Gap network, depending on your cover, and annual and service limits, including:

- 1 or 2 dental check-ups a year
- a pair of prescription glasses from a selected range[^] and free digital retinal imaging with your eye test
- a first visit to a physio⁺
- a first visit to a chiro and osteo⁺
- a first visit to a podiatrist⁺
- use your Limit Boost to top up your optical and/or dental annual limit each year (see page 21 for details)

To find a participating provider go to hcf.com.au/findaprovider

* 100% back through *More for You* providers in our No-Gap network is available on selected covers. Waiting periods, and annual and service limits apply. Providers are subject to change. We recommend that you confirm the provider prior to your appointment. See hcf.com.au/100back

[^] At participating providers. Up to your annual limits. Excludes add-ons like high index material, coatings and tinting.

⁺ 100% back is only available on selected covers. A first visit is the first service received for a new health condition or flare up where no treatment has been provided in the previous 3 months.

[#] Service limits may apply for foot orthotics.

X Services Not Included

ANNUAL LIMITS

HCF pays a set amount of benefits for each service or good included in your cover. This may not cover the full charge and you'll need to pay any gaps. Annual limits are the maximum amount of benefits that HCF will pay for the service or good in a calendar year. They apply per person, per calendar year unless stated otherwise.

GAP BONUS FOR CORPORATE FLEX MY EXTRAS

Gap Bonus[™] helps reduce or eliminate out-of-pocket costs by topping up the benefit we pay on services included in your Corporate Flex My Extras cover.

Gap Bonus kicks in after 12 months. If you transfer from a product with Limit Boost, you'll receive continuity for Gap Bonus.

YEARS OF COVER ON CORPORATE FLEX MY EXTRAS	GAP BONUS AMOUNTS PER PERSON
Year 1	N/A
Year 2	\$50
Calendar year 3	\$75
Calendar year 4 or more	\$100

[™] Gap Bonus must be used during the relevant calendar year and is not transferable between members. Can't be rolled over into the following calendar year.




CHOOSE YOUR COVER

RECOVER COVER THAT'S UNCOMMON CARE




The road to recovery is different for everyone. That's why our unique range of flexible insurance products give you cash — so you can get back to your best at your own pace. We call it Recover Cover.



WHICH RECOVER COVER IS RIGHT FOR YOU?

<p>CASH BACK COVER</p>  <p>Apply if you're aged 16–60. Expires at 65.</p>	<p>CRITICAL ILLNESS COVER</p>  <p>Apply if you're aged 18–54. Expires at 65.</p>	<p>INCOME PROTECT INSURANCE</p>  <p>Apply if you're aged 18–60. Expires at 65.</p>
<p>Get \$5,000 for accidents needing surgery, or for a number of serious illnesses*. Use your cash to help with the costs of recovery: taxis to the doctor, extra rehab, hospital parking, babysitters, or help if you need time off work.</p>	<p>Get up to \$50,000*, depending on your level of cover, for serious illnesses like specified heart attacks, cancers or strokes*. A fast payment can ease the unexpected financial strain of serious illness – and you choose how you use it.</p>	<p>Get up to 70% of your income* (up to \$7,500 per month for up to 12 months) if you can't work for more than 30 days because of an illness or injury*. We'll help you stay afloat while you take the time you need to recover.</p>

Please note this information is a summary only. Read the PDS and Policy Document for full details of cover, limitations, exclusions and definitions.

<p>LIFE PROTECT INSURANCE</p>  <p>Apply if you're aged 18–65. Expires at 99.</p>	<p>KIDS' ACCIDENT INSURANCE COVER</p>  <p>Apply for kids under 17. Expires when they turn 22.</p>	<p>PERSONAL ACCIDENT INSURANCE</p>  <p>Apply if you're aged 55–74. Expires at 85.</p>
<p>Get up to \$1.5 million, depending on your age and cover level, if you're diagnosed with a terminal illness or pass away*. It's quick financial support to help cover the costs that come at this difficult time, like your mortgage, school fees or day-to-day living expenses.</p>	<p>Get handy cash* to help your child recover from a range of common injuries* if they have an accident in Australia. Quick help with the costs of splints, treatments, therapies, or just to keep the house running while your child gets better.</p>	<p>Get cash for particular injuries, including certain fractures and burns, if you have an accident in Australia and depending on your level of cover, up to \$50,000* for accidental death*. Provides financial help to recover from accidents big and small.</p>



* Subject to exclusions, limitations and definitions - please refer to the PDS and the Policy Document for further information.
 - Sub-limits apply. Please read the PDS.
 + Payment is subject to offsets including any amounts payable from your employer or superannuation fund.
 # Get your cash payment when your claim is approved.

Please consider each Combined Product Disclosure Statement (PDS), Policy Document and Financial Services Guide available by calling **13 13 34** or visiting hcf.com.au/lifeinfo, and consider your financial situation, objectives, and needs before deciding on these products as any advice provided does not take these into account. In addition to these documents, you should also read the Target Market Determination (TMD) for the product, which is available at hcf.com.au/lifeinfo. These covers are issued by our own HCF Life Insurance Company Pty Ltd. ABN 37 001 831 250, AFSL 236 806 (HCF Life). HCF Life is a wholly owned subsidiary of The Hospitals Contribution Fund of Australia Ltd ABN 68 000 026 746, AFSL 241 414 (HCF). The premiums for the life insurance products are paid to HCF Life. HCF receives commission from HCF Life for their sale of up to 40% of the first year's premium plus an additional commission of 80% of HCF Life's underwriting profit each year calculated as premiums less claims and expenses. HCF's staff may receive an incentive depending on the annual premium of these products which they sell. This will not exceed 15% of the first year's premium.

We'll help you find the right Recover Cover

-  **1800 560 855**
-  **Visit a branch**
-  **hcf.com.au/recover-cover**

ACCESS TO HEALTH PROGRAMS

We've developed a range of health programs to support you in your journey to wellness.



HOSPITAL TREATMENTS AT HOME

We offer a wide range of treatment options in the comfort, convenience and security of your own home such as chemo, rehab after knee or hip surgery, IV antibiotics and complex wound care, for eligible members*. So you can get quality care at home, when you need it.

hcf.com.au/home-treatment



FREE SECOND OPINION SERVICE

Lean on our network of Aussie-based medical specialists to get a free second opinion on a health condition you're worried about. You must have had HCF hospital cover for 12 months and a specialist consultation to use this service. Excludes Accident Only Basic cover, conditions apply.

hcf.com.au/secondopinion



HEART HEALTH AND DIABETES SUPPORT

The COACH Program® is a telephone support program provided at no extra cost for eligible members^^ with heart conditions or diabetes. You'll be teamed with one of our qualified coaches who are dietitians, pharmacists or nurses to help you improve your health.

hcf.com.au/coach



WEIGHT MANAGEMENT

Develop healthier habits, lose weight and prevent the onset of various chronic conditions with our evidence-based programs. Eligible members can work with a team of dietitians to help achieve your goals with the Healthy Weight for Life Essentials program^, or lose weight and keep it off with the CSIRO Total Wellbeing Diet.

hcf.com.au/hwfl
hcf.com.au/csiro-total-wellbeing-diet



HEALTHY EATING FOR FAMILIES

We've partnered with Ethos Health to bring our members Healthy Families for Life and Healthy Teens for Life, which are resources to support kids, from birth to teens, to develop positive nutritional habits for growth and development and reduce the risk of chronic conditions in their future. Eligibility criteria apply**.

hcf.com.au/healthyfamilies



SLEEP SUPPORT

Thanks to our partnership with Sleepfit Solutions, eligible HCF members* can get a 20% discount on a 12 month subscription to the Sleepfit app designed to improve sleep and overall wellbeing.

hcf.com.au/sleepfit



JOINT HEALTH

The Healthy Weight for Life Osteoarthritis program supports eligible members# to reduce pain in their joints, improve mobility or prepare for hip or knee surgery.

hcf.com.au/hwfl



HEALTH MANAGEMENT PROGRAMS™

Our Health Management Programs are created with your needs in mind. Depending on your limits, level of cover and eligibility, you can claim for:

- bowel cancer screening
- weight management programs
- exercise classes and gym memberships if this is part of a health management plan.

hcf.com.au/hmp



ANTENATAL AND POSTNATAL SUPPORT™

Claim on a range of programs and services for support through pregnancy and after birth, including childbirth education classes (including access to Birth Beat's online courses), breastfeeding consultations, and antenatal and postnatal group physio. You might also be able to claim on pregnancy compression garments and breastfeeding support from the Australian Breastfeeding Association.

hcf.com.au/hmp

LEADING THE WAY IN MENTAL HEALTH CARE

Our mental health programs give you quick and easy access to a range of options so you can choose which is right for you and your family.

hcf.com.au/mental-support



FREE MENTAL WELLBEING CHECK-IN

To support eligible members with faster, easier access to qualified mental health professionals, you can book a free telehealth HealthyMinds Check-in with a PSYCH2U psychologist[°].



MENTAL WELLBEING SUPPORT FOR KIDS

HCF members who have hospital or extras cover can access Calm Kid Central^{###}, an online educational and support program helping kids aged 4-11 manage their big feelings and emotional challenges.



ONLINE MENTAL HEALTH PROGRAMS

You can access a range of online programs through This Way Up, a not-for-profit online hub developed by experienced psychiatrists and clinical psychologists, to help you understand and improve mental challenges like stress, insomnia, worry, anxiety and depression^{***}.



ONLINE GP CONSULTATIONS

With GP2U, you can book an online GP consultation for a range of services including getting sick notes, referrals and prescription medications, to help you get access to care when you need it.

* Available with HCF contracted providers, subject to member location and hospital cover. Waiting periods apply. You must have a suitable home to be treated in.
 † Eligible HCF members with hospital or extras cover. Excludes Overseas Visitors Health Cover. The cost is \$23.90 for 12 months for HCF members (RRP is \$29.90).
 ‡ Must have held hospital cover that covers joint replacement surgery for 2 months, have knee or hip osteoarthritis and a Body Mass Index of 28 and above. Clinical eligibility criteria applies, see hcf.com.au/hwfl
 ^ Must have hospital cover, multiple lifestyle risk factors (e.g. smoking, physical inactivity, poor nutrition) and a Body Mass Index of 28 and above. Clinical eligibility criteria applies, see hcf.com.au/hwfl
 ** Service is available to all HCF members with any HCF health insurance product (excluding Overseas Visitors Health Cover), see hcf.com.au/healthyfamilies
 ^^ Members must have a heart-related condition or diabetes and must have held hospital cover that includes heart conditions and vascular system for at least 12 months. Excludes Ambulance Only, Accident Only Basic cover and Overseas Visitors Health Cover. Clinical eligibility applies.
 ° 1 HealthyMinds Check-in available per member per calendar year. Service is available free to all members with hospital cover. Excludes extras only cover, Ambulance Only, Accident Only Basic and Overseas Visitors Health Cover.
 ### Excludes Accident Only Basic cover and Overseas Visitors Health Cover.

*** This service is not affiliated or associated with HCF in any way. You should make your own enquiries to determine whether this service is suitable for you. If you decide to use this service, it'll be on the basis that HCF won't be responsible, and you won't hold HCF responsible, for any liability that may arise from that use.
 ° Before you start any Health Management Program, check you're on eligible cover and the provider of the program is recognised by us by calling 13 13 34 or visiting a branch. To claim you'll need to submit a claim form and provide supporting documents. Unless otherwise stated, all programs have a 2 month waiting period and depend on cover eligibility and annual limits.

ACCESS ADDED VALUE & REWARDS

Our Uncommon Care means more than great value health cover. Make the most of these member perks and added protection.

ON-DEMAND INJURY COVER

Flip is our on-demand accidental injury cover that can work in addition to your health cover, or as standalone cover for those who might not otherwise be insured. You can get a single day of cover or a weekly subscription you can cancel anytime*.

getflip.com.au



PLANNING YOUR NEXT HOLIDAY?

HCF members can save 25% on travel insurance* when you use our discount code*.

Go to hcf.com.au/travel to log in and get your discount code.



INVOLUNTARY UNEMPLOYMENT ASSISTANCE

If you become involuntarily unemployed, we'll pay your HCF health insurance premiums for up to 6 months (183 days). Conditions and waiting periods apply*.

hcf.com.au/unemployment-assistance



MEMBERS CAN SAVE UP TO 15% ON PET INSURANCE

HCF pet insurance can reimburse you up to 80% on eligible vet bills for your dog or cat, with a range of excess options to choose from**.

hcf.com.au/petinsurance



LOYALTY REWARDS

Get more from your cover through HCF Thank You, available after you've been a member for a week**. The longer you're with us, the more ways we say thank you.

Log in to hcf.com.au/members to save.



MEMBER PERKS

YOU COULD SAVE ON AVERAGE OVER \$1,000 A YEAR**

CLOTHING & FOOTWEAR

4% or more discount on e-Gift cards at Target, Big W, Kmart, Myer, Footlocker, Nine West and more

ENTERTAINMENT

Up to 50% off Event and Village Cinemas. 4% discount on e-Gift cards at JB Hi-Fi, Amazon and more

PETROL

2% discount on Caltex e-Gift cards

GROCERIES

Save on Woolworths and Coles e-Gift cards



LIMIT BOOST

Limit Boost lets you top up your annual limit on general dental (excluding orthodontic) and optical. The limit boost kicks in after 12 months on your extras cover and grows every year, up to year 6.

LOYALTY REWARDS years of membership	ULTIMATE EXTRAS		ADVANCED EXTRAS		ACTIVE EXTRAS	
	Single	Couple/family	Single	Couple/family	Single	Couple/family
Year 1	N/A	N/A	N/A	N/A	N/A	N/A
Year 2	\$100	\$200	\$75	\$150	\$50	\$100
Year 3	\$125	\$250	\$100	\$200	\$75	\$150
Year 4	\$150	\$300	\$125	\$250	\$100	\$200
Year 5	\$175	\$350	\$150	\$300	\$125	\$250
6 years or more	\$200	\$400	\$175	\$350	\$150	\$300

The above table shows the **Limit Boost** that applies to eligible extras covers when taken together with hospital cover. **Limit Boost** amounts apply per policy and renews on your policy anniversary date. Any unused **Limit Boost** cannot be carried into the following year. Your Limit Boost amount is transferable between eligible extras covers.

* Available to all members who've had hospital cover for at least 12 months. Excludes extras only, Ambulance Only and Overseas Visitors Health Cover.

** HCF Pet Insurance is issued by The Holland Insurance Company Pty Ltd. Consider the PDS and TMD at hcf.com.au/petinsurance. All HCF members are eligible for a member discount of at least 10% on HCF Pet Insurance. HCF Ruby and Diamond members get a 15% discount. Existing Manchester Unity Pet Insurance policies are not eligible for discounts under HCF Thank You. Visit the HCF Thank You page for further information. Where relevant, increased discount will be applied automatically at first renewal after advancement in HCF Thank You tier.

** Eligibility criteria applies. You can access HCF Thank You offers after you've been a member for a week, and if your premiums are up to date. Excludes Ambulance Only and Overseas Visitors Health Cover. Offers and partners are subject to change without advance notice. See the HCF Thank You Terms available at hcf.com.au

**+ Based on average household spend according to the ABS (2017) Household Expenditure Survey using discounted e-Gift cards.

* Flip advice is general in nature. We don't take into account your personal circumstances, so please consider how appropriate it is for you before purchasing. Read our PDS, FSG and TMD available at getflip.com.au before purchasing, too. HCF Life Insurance Company Pty Ltd (HCF Life) is the issuer of Flip Insurance. Flip Insurance Pty Ltd (Flip Insurance) is a wholly owned subsidiary and authorised representative of HCF Life. HCF Life is a wholly owned subsidiary of The Hospitals Contribution Fund of Australia Ltd (HCF), and acts on its own behalf. Premiums for Flip cover are paid to HCF Life. HCF receives commission of 80% of HCF Life's underwriting profit each year calculated as premiums less claims and expenses. Flip Insurance may receive remuneration from HCF Life for the financial services it provides in relation to Flip cover. Flip Insurance and HCF Life employees receive a salary, paid by HCF Life, for the financial services they provide in relation to Flip cover. In addition, HCF, HCF Life and Flip Insurance employees may also receive an incentive depending on the total revenue and profitability of Flip products, and for meeting their compliance obligations. This remuneration is provided on a discretionary basis and may vary from time to time.

** The Hospitals Contribution Fund of Australia Ltd ABN 68 000 026 746 AFSL 241414 (HCF) arranges this insurance as agent for the insurer Allianz Australia Insurance Limited ABN 15 000 122 850 AFSL 234708 (Allianz). Travel insurance is issued and managed by AWP Australia Pty Ltd ABN 52 097 227 177 AFSL 245631 trading as Allianz Global Assistance (AGA) for the insurer Allianz. Terms, conditions, limits and exclusions apply. HCF, Allianz and AGA do not provide any advice on this insurance based on any consideration of your objectives, financial situation or needs. Because of that, you should consider whether the advice is appropriate for you. Read our PDS, FSG and TMD before purchasing, available at hcf.com.au/travel. If you purchase a policy, HCF and AGA receive a commission which is a percentage of your premium - ask us for more details before we provide you with services.

**+ 25% discount is the total discount on offer for the product, based on standard premium rates. It applies automatically upon successful input of the discount code to premiums for all plans, including policy add-ons. Cannot be used in conjunction with, or in addition to any other discounts. No additional discounts will be provided to members who already receive a member discount. Please contact us for more information.

GOOD TO KNOW

Get the lowdown on your cover and steer clear of unexpected costs. Always contact us before going to hospital.

REBATES, SURCHARGES AND INCENTIVES

The Australian Government has a few private health insurance initiatives worth knowing about. If you need more information, visit hcf.com.au or call us on **13 13 34**.

AUSTRALIAN GOVERNMENT REBATE ON PRIVATE HEALTH INSURANCE

To help make private health cover more affordable, the Australian Government gives a rebate on your health insurance premium. The rebate is available to people with hospital, extras or ambulance cover, and who are registered with Medicare. The rebate is income tested, so your entitlement may change depending on your income and your age.

You can take the rebate as:

- a reduced premium
- a tax offset credit in your annual tax return.

When calculating your income be sure to include all taxable income, otherwise you may have to pay additional tax if you nominate an incorrect rebate tier.

We can give you general information on these thresholds, however for personal advice specific to your circumstances you should speak with your accountant, financial advisor or the ATO at ato.gov.au or **13 28 65**.

See privatehealth.gov.au for the list of rebate percentages.

MEDICARE LEVY SURCHARGE

If you earn above a certain income, and don't have hospital cover, you might have to pay a Medicare Levy Surcharge.

You could avoid paying this by having eligible HCF hospital cover. If you don't have eligible private hospital cover and fall into these income thresholds, you may be charged an additional surcharge on your Medicare levy when your tax return is assessed.

To view the current income thresholds and Medicare Levy Surcharge information, go to privatehealth.gov.au

LIFETIME HEALTH COVER

If you don't have hospital cover with an Australian registered health fund on 1 July following your 31st birthday, and then decide to take out hospital cover later in life, you might have to pay a Lifetime Health Cover loading of 2% on top of your premium for every year you're aged over 30. Over time, this can really add up.

For example, if you take out hospital cover at age 40 you could pay 20% more than someone who first took out hospital cover at age 30.

The maximum loading is 70%. Once you have paid a LHC loading for 10 continuous years, the loading is removed as long as you retain your hospital cover.

For members who've switched from another fund, if your LHC loading differs to what was listed in the transfer certificate, your premiums may change accordingly.

The Australian Government Rebate does not apply to the LHC component of private health insurance. This means if you're eligible for the rebate and also have a LHC loading, the rebate won't apply to the LHC portion of your health insurance.

To find out if you need to pay the LHC loading, you can use the Lifetime Health Cover calculators at privatehealth.gov.au

PRE-EXISTING AILMENTS OR CONDITIONS

If you had signs or symptoms of a condition, illness or ailment during the 6 months before or on the day you joined HCF (or in the 6 months before you upgraded to a higher level of HCF cover or reduced your excess) this means the condition was pre-existing, even if no diagnosis was made before your cover started. HCF will have a medical expert look at information from your

doctor, and any other relevant claim details, to decide whether or not your condition was pre-existing. If it was, a 12 month waiting period will apply to services related to that condition. This rule applies to all new members, members upgrading their cover or reducing their excess, and to children you've added to a policy.

WHO CAN BE COVERED?

Before taking out health insurance, you should understand who can be covered under your policy. You can find out more by visiting hcf.com.au/faqs, and searching for 'Who's covered'.

UNDERSTANDING HOSPITAL COVER

If you're admitted to hospital you're considered an inpatient. The services you receive while you're an inpatient (from when you're officially admitted to when you're officially discharged) will be covered by HCF, depending on your level of cover and the hospital you're in.

HOSPITAL GAP

Private hospitals charge for accommodation (your bed), operating theatres, prostheses and other hospital-related services. If you're admitted to an HCF participating private hospital, these costs will be covered by HCF for services included in your cover.

Please note: If you're admitted to a non-participating private hospital, if you choose to be a private patient in a public hospital, or if you're being treated for a Restricted Service on your level of cover, HCF will only pay Minimum Benefits to the hospital.

Minimum Benefits are reduced benefits that we pay for Restricted Services (you don't have full cover for a hospital procedure), or when you go to a hospital that isn't in the HCF network. If Minimum Benefits are in place, you're likely to have large additional costs, known as 'gaps'. Minimum Benefits are set by the Australian Minister for Health.

If you do have Restricted Services under your cover, HCF will pay:

- the Minimum Benefit for a shared room

- Minimum Benefits for government-approved Prescribed List of Medical Devices and Human Tissue Products items for the Restricted Services.

This means you might have to pay large gaps in a private hospital or if you choose to be a private patient in a public hospital. When Accident Safeguard applies, the Benefits payable for Excluded Services or Restricted Services will be those applicable to a service covered on an unrestricted basis. Accident Safeguard excludes Elective Cosmetic Surgery and podiatric surgery by a registered podiatric surgeon.

We've got a large network of participating private hospitals and day surgeries to help you avoid or reduce any hospital gap. Find an HCF participating hospital at hcf.com.au/participatinghospitals or call us on **13 13 34**.

MEDICAL GAP

You'll be charged a fee for each medical service you get in hospital. Each fee is set by the specialist who delivers the service (e.g. your surgeon). The specialist can choose to charge you a fee known as the Medicare Benefits Schedule (MBS) fee, or a lower or higher fee for their service. It's entirely up to them.

The MBS portion of your provider's fee will be partly covered (75%) by Medicare and your HCF hospital cover will pay for the remaining 25% (for eligible services). Any fee that your specialist charges which is more than the MBS fee may not be covered by HCF. This is a medical gap you might have to pay.

HCF has arrangements with more than 51,000 specialists and doctors across Australia that help eliminate or reduce gaps for doctors' services for our members. Use our search tool to help you find the right specialist at hcf.com.au/findaprovider. We recommend that you check the provider before booking your appointment as they change from time to time.

EXTRAS GAPS

If you have extras cover, we'll pay up to a set amount for extras services (like dental or optical), depending on your annual limits. The amount we'll pay also varies depending on your level of cover. You'll need to pay the difference between what your extras provider charges and the benefits we pay: this is an extras gap.

WHAT'S NOT COVERED BY MY HEALTH INSURANCE?

There are some situations where your health insurance doesn't cover you, unless we're required to pay benefits under the *Private Health Insurance Act*.

The items listed below aren't a complete list of what isn't covered, so always call 13 13 34 to check your cover before you go to hospital or have a treatment.

Some items not covered by our hospital or extras cover include:

- Elective Cosmetic Surgery
- emergency room fees
- Ambulance Transportation between hospitals (emergency or non-emergency)
- services supplied by a provider not recognised by HCF
- claims made 2 years or more after date of service
- treatment that HCF deems to be inappropriate or not reasonable, after receiving independent medical or clinical advice (subject to HCF's obligation to pay Benefits under the *Private Health Insurance Act*)
- claims that do not meet HCF's criteria as set out in the Fund Rules
- services that are not delivered face-to-face in a clinical setting, such as online or telephone consultations, unless a member is participating in a Chronic Disease Management Program or Health Management Program, or the service is a Telehealth Extras Service
- services provided outside Australia which do not meet the requirements under the *Private Health Insurance Act*
- any Service where the treatment does not meet the standards in the Private Health Insurance (Accreditation) Rules
- when a member has the right to recover the costs from a third party other than HCF, including an authority, another insurer or under an employee benefit scheme
- services received during any period where payment is in arrears, the Policy is not financial, the Policy is suspended or within a Waiting Period
- treatment for Pre-Existing Conditions (other than for hospital psychiatric services, rehabilitation or palliative care) within the 12 month Waiting Period (the Pre-Existing Condition Waiting Period applies to new

Members and Members upgrading their Policy to any higher level Benefits or lower excess

- if a Service is listed as a Service Not Included (we define these services as Excluded Services in our Fund Rules) in the Product Information. For some Hospital Covers, a Service Not Included might not apply when a member receives treatment as the result of an Accident (see hcf.com.au/accident-safeguard). For other Hospital Covers, the Service is not included regardless of whether or not Treatment is required as a result of an Accident.

Our hospital cover doesn't include the following, unless we're required to pay benefits under the Private Health Insurance Act:

- doctors' consultations performed in a doctor's surgery, medical centre, clinic, or as an outpatient
- hospital benefits relating to procedures (and other associated goods and services) that do not require a hospital admission (except certified Type C procedures)
- private room accommodation for Same-Day procedures
- luxury room surcharge
- massage and aromatherapy services
- select Services provided while in Hospital by non-hospital providers, e.g. dental practitioner
- take home items including crutches, toothbrushes and drugs
- personal convenience items including the cost of phone calls, newspapers, magazines and beauty salon services
- respite care
- special nursing
- benefits for Nursing Home Type Patients except as required under *Private Health Insurance Act*
- hospital Benefits (including Medical Benefits) for Services in respect of which the item is not approved for payment by Medicare
- donated blood and blood products
- donated blood collection and storage
- the gap on government-approved gap-permitted Prostheses items
- pharmaceuticals (including PBS pharmaceuticals benefits) and other sundry supplies not directly associated with the reason for admission
- PBS pharmaceutical benefits in private Non-Participating Hospitals
- experimental drugs, high cost non-PBS drugs

and Therapeutic Goods Administration (TGA)-approved drugs used for a purpose other than that for which they were approved. This condition applies for all clinical categories including chemotherapy, radiotherapy and immunotherapy for cancer

- experimental treatment or other treatment that does not fall within a clinical category under the Private Health Insurance (Complying Product) Rules that is covered by the product
- benefits where a Service is a Service Not Included (we define these services as Excluded Services in our Fund Rules) for the payment of Benefits in a Hospital, and any other Services directly related to those Services, including medical, diagnostic, prosthesis and pharmacy received at the same time, except when Accident Safeguard applies
- benefits greater than Minimum Benefits if a Service is listed as Restricted Cover in the Product Information. For some Hospital Covers, Minimum Benefits might not apply when a member receives treatment as the result of an Accident (see hcf.com.au/accident-safeguard). For other Hospital Covers, Minimum Benefits apply regardless of whether or not treatment is required as a result of an Accident.

In addition, extras benefits are not payable for:

- add-ons for optical such as a high index material, coatings and tinting
- services received overseas or purchased from overseas including items sourced over the internet
- routine health checks, screening and mass immunisations
- where a provider is not in an independent Private Practice
- more than one therapy Service performed by the same provider in any one day
- services while a hospital patient except for eligible oral surgery
- pharmacy items that do not meet HCF's definition of a Pharmaceutical Item (see the Member Guide for definition)
- services that had not been provided at time of claim
- fees for completing claim forms and/or reports
- where no specific health condition is being treated or in the absence of symptoms, illness or injury (except some Chronic Disease Management Programs and preventative dental services)

- co-payments and gaps for government-funded health services including the co-payment for PBS items
- any service specifically excluded by law including Alexander Technique, Aromatherapy, Bowen Therapy, Betyko, Feldenkrais, Western Herbalism, Homeopathy, Iridology, Kinesiology, Naturopathy, Pilates, Reflexology, Rolting, Shiatsu, Tai Chi and Yoga.

ABOUT AMBULANCE COVER

Medicare doesn't cover the cost of ambulance services and these can be very expensive.

HCF hospital and extras covers emergency ambulance services provided by State Government Ambulance Service Providers. Some levels of cover also include State Government non-emergency ambulance services. This is payable if your doctor requests ambulance transport because your condition requires monitoring and support in transit (up to \$5,000 per person per calendar year). You can claim ambulance benefits for emergency transport to the nearest appropriate hospital able to provide the level of care you need.

Residents of NSW & ACT (in NSW or ACT)

Emergency ambulances aren't fully covered by the state government unless you hold certain government concession cards. HCF hospital and extras covers emergency ambulance services provided by State Government ambulance providers to the nearest hospital able to treat you.

Residents of NSW & ACT (interstate)

If you have HCF hospital cover you're entitled to fully covered State emergency ambulance transport across most of Australia under a levy arrangement. This excludes services in Qld and SA (and also WA for ACT residents) but you may be able to claim under your HCF cover. If you have standalone HCF extras cover you may be covered for unlimited emergency ambulance for transport in NSW or ACT only. On some levels of cover there's an annual limit of 1 claim per person and 2 per policy for states other than NSW and ACT.

Residents of Qld

Emergency ambulance services are covered by your State government Australia-wide, and non-emergency ambulance services within Qld. You may be able to claim for services not covered by your state scheme under your HCF cover (limits may apply if you have standalone extras cover).

Residents of Tas

Emergency road ambulance services are covered by your State government across Australia, with the exception of Qld and SA. You may be able to claim for services not covered by your state scheme under your HCF cover (limits may apply if you have standalone extras cover).

Residents of Vic, SA, WA & NT

You need either health cover which includes ambulance or an ambulance subscription.

See the Member Guide for more info on Ambulance Cover at hcf.com.au/forms-and-brochures

CHANGES TO COVERS AND PRICING

All information in this brochure was correct at the time of printing.

This brochure should be read in conjunction with the HCF Member Guide, a copy of which is available at hcf.com.au or at HCF branches. All capitalised terms in this brochure have the same meaning as, and are defined in, the Member Guide. Please read and retain this brochure for future reference. We reserve the right to make changes to prices, product specifications and other conditions relating to the products contained in this brochure. Please contact us before purchasing any products to make sure that you have the latest information available.

YOUR RIGHTS ARE PROTECTED

PRIVATE HEALTH INSURANCE CODE OF CONDUCT

The Private Health Insurance (PHI) Code of Conduct's aim is to improve the standards of practice and service in the private health insurance industry.

See a full copy of the code at privatehealth.com.au/codeofconduct

For general information about private health insurance, see privatehealth.gov.au

PRIVATE PATIENTS HOSPITAL CHARTER

We support the Private Patients Hospital Charter, which outlines what members can expect from doctors, hospitals and their health fund. Visit the Private Health Insurance section for consumers at

health.gov.au, or call the Department of Health and Aged Care on **1800 020 103** for details of the Charter.

We support this by ensuring you:

- receive correct information about private health insurance
- are aware of the internal and external dispute resolution procedures
- can make an informed decision about your cover
- are protected in accordance with the privacy principles.

HAVE A COMPLAINT?

If you have a complaint about any of the products or services we offer, your membership or cover, or if you want to know the status of an existing complaint, contact us for help.

Call: 13 13 34

Go to: hcf.com.au

Email: service@myhcf.com.au

Write to: HCF GPO Box 4242, Sydney NSW 2001

Visit: a branch, see locations at hcf.com.au/branches

If you aren't satisfied with the resolution of your **health insurance** complaint, you can get in touch with the Commonwealth Ombudsman. They're an independent body that helps resolve complaints and gives advice and information for free.

Call: 1300 362 072

Go to: ombudsman.gov.au

Write to: GPO Box 442, Canberra ACT 2601

If you aren't satisfied with the resolution of your complaint about **life or general insurance (such as pet or travel)** you can lodge a complaint with the Australian Financial Complaints Authority (AFCA). AFCA gives free, fair and independent financial services complaint resolution.

Call: 1800 931 678 (free call)

Go to: afca.org.au

Email: info@afca.org.au

Write to: Australian Financial Complaints Authority, GPO Box 3, Melbourne VIC 3001

LIFE INSURANCE CODE OF PRACTICE

HCF Life is bound by the Life Insurance Code of Practice which sets out the Australian life insurance industry's key commitments and obligations to customers. For further information, visit fsc.org.au



OUR PRIVACY STATEMENT

Your privacy matters to us and we're committed to protecting your privacy.

We collect your personal information including sensitive information such as health information from you and/or the policyholder who is responsible for your policy and/or from other third parties detailed in our Privacy Policy, so we can:

- comply with applicable laws
- manage our relationship with you
- record your treatment
- provide health or other insurance-related products and services to you (including through third parties)
- manage and pay claims and benefits
- assess your insurance, health and related lifestyle needs
- investigate fraudulent or improper claims and assess risks
- research and develop products, services and benefits that may better serve your needs
- assess your possible interest in, and tell you about, such products and services
- administer our business and deal with complaints.

We may share or disclose your personal information to third parties or individuals, some of which may be located overseas, including:

- to the policyholder, if you are a dependant or another member (e.g. partner or children) on the policy, for the purposes of your HCF membership. Our contract with the policyholder requires us to have full and free communication with the policyholder on all aspects of the policy, including the benefits claimed by any member under the policy
- to organisations that deliver services on our behalf or to us, such as third parties that we contract to assess or process claims, administer programs that we develop for the benefit of members, research companies contracted by us (to ask your opinions on improving the HCF Group's service, benefits or product offerings), third party vendors who placed targeted online ads for us on their sites and mailing houses

- other service providers, for example, our advisors for the purposes of obtaining legal advice or our technology providers
- between companies within the HCF group of companies
- fraud prevention agencies, government bodies and regulators, including law enforcement bodies such as the police, professional associations and industry bodies
- health service providers (where it's used to improve their ability to provide you with health services)
- other insurers or reinsurers, including other health insurers where you have moved your insurance to or from HCF
- where disclosure is otherwise authorised or required by, or under, applicable laws or any other legal or regulatory process
- other members and the public, such as where we publish details of our analysis of claims data and charges including out-of-pocket (gap) costs charged by health service providers for different treatments (no members will be identified).

We don't normally give personal information about you to anyone who's not on your membership. **You'll need to give us written permission if you want someone who's not covered by your membership, such as a friend or carer, to deal with us on your behalf.**

If you don't provide personal information we request, we may not be able to provide you with our products or services, including health insurance.

You can ask us at any time to stop direct marketing to you by calling **13 13 34** or by logging in to online member services at hcf.com.au/members and updating your preferences.

For more about the personal information we collect and how we handle it, how to access and update your information, or how to make a complaint and how we respond to complaints, read our Privacy Policy at hcf.com.au/privacy or visit a branch.

New policyholders: make sure all members on your policy are made aware of the HCF Privacy Policy.

JOIN HCF

WE PUT OUR MONEY WHERE OUR MEMBERS ARE

Looking to make a switch?

Joining HCF is as easy as 1, 2, 3!

All you need to do is:

1. Choose or create the HCF cover that's right for you
2. Call **1800 880 049** or visit a branch
3. Leave the rest to us.

The Hospitals Contribution Fund of Australia Ltd
ABN 68 000 026 746 AFSL 241414

HCF House: 403 George Street, Sydney NSW 2000
Postal Address: GPO Box 4242, Sydney NSW 2001

hcf.com.au



1800 880 049



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Visit a branch



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