

CORPORATE COVER THAT DOES MORE FOR OUR MEMBERS

MARCH 2018



NOT FOR PROFIT MEANS INVESTING IN YOU, NOT SHAREHOLDERS

As Australia's largest not-for-profit health fund, we're continually putting our members at the centre of what we do and empowering you to better manage your health, your way.

Easy ways to contact us:







^{бо то} hcf.com.au

An award-winning local call centre, 50+ branches nationwide and great online resources.

NOT FOR PROFIT MEANS PROVIDING REAL VALUE TO OUR MEMBERS

WE GIVE YOU MORE BACK

or every dollar our nembers pay in remiums, we've paid ut more benefits than ne industry average ver the last 5 years.

FIND A PARTICIPATING NO-GAP DOCTOR

We're the first private health insurer to partner with Healthshare to help you and your GP find a specialist that will charge no-gap or a reduced gap.

REDUCE OUT-OF-POCKET HOSPITAL COSTS

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Our large participating hospital network means that the majority of members going to hospital will experience either no-gap, or minimise their costs significantly compared to going to a non-participating hospital.

100% BACK

Receive 1 or 2 no-gap dental check-ups and claim 100% back on an initial consult with a physio, chiro or osteo when you use our network of over 10,000 participating providers. Subject to your cover and annual limits.

Exclusions and conditions apply, see pages 10-11 for more information.

^{OVER} 35,000

SPECIALIST DOCTORS

participate in the HCF medical gap cover scheme, helping you to pay less.

GREAT VALUE FOR FAMILIES

Don't pay an excess on kids no matter how many times they go to hospital. And whether you have 1 or more children, the cost of your family cover remains the same.

Excludes Accident Only cover.

FREE HEART HEALTH CHECKS

Members aged 18 and over with extras can access free heart health checks through our partnership with the Victor Chang Cardiac Research Institute.



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HCF THANK YOU

As an HCF member, you'll get access to a great range of exclusive offers and rewards. And the longer you stay with us the more ways we can say thank you.

Ambulance Only members aren't eligible. See page 13 for more.



CHOOSE THE COVER THAT'S BEST FOR YOU

You can create your own hospital and extras package by selecting one of the hospital covers below and adding your preferred extras option. Or if you only want a hospital cover or just need extras, you can do that too.



WE INCLUDE EXTRA PROTECTION FOR ACCIDENTS

Our great Accident Safeguard feature is included on the hospital covers listed in this brochure.

Accident Safeguard allows you to be treated for services that are included on our top hospital cover (even if the services are Excluded Services or Minimum Benefit Services on your current level of cover), when your treatment is directly the result of an Accident that occurs after joining.

There are some rules though - you need to attend a hospital department within 24 hours of your Accident and either be immediately treated, or re-admitted to hospital within 90 days of the Accident. Other conditions apply.

To find out more visit hcf.com.au/accident-safeguard

CORPORATE BASIC	CORPORATE MID	EXECUTIVE	ULTIMATE
 Basic hospital cover designed for the healthy and budget conscious No excess for kids No excess for Accident related treatment Joint investigations and reconstructions Cancer related services and more Free access to a great range of health and wellbeing programs. 	 Affordable hospital cover for some common procedures No excess for kids No excess for Accident related treatment Heart surgery Joint investigations and reconstructions Cancer related services and more Free access to a great range of health and wellbeing programs. 	Comprehensive hospital cover for those not requiring cover for pregnancy • No excess for kids • No excess for Accident related treatment • Heart surgery • Joint replacements • Spinal surgery • Cancer related services and more • Free access to a great range of health and wellbeing programs.	Our top level of hospital cover for peace of mind No excess for kids No excess for Accident related treatment No excess for same day admissions Pregnancy Heart surgery Joint replacements Spinal surgery Care involving dialysis for chronic renal failure and more Free access to a great range of health and wellbeing programs.

CHOOSE YOUR HOSPITAL COVER

See pages 8-9 for a detailed list of what's covered.

& OR CHOOSE YOUR EXTRAS COVER

BASIC	LIFESTYLE ESSENTIALS	ACTIVE LIFESTYLE	LIFESTYLE PLUS	ULTIMATE
Cost effective, entry-level extras cover for dental, optical and selected therapies 100% back [#] on: • 1 dental check per year • Certain prescription glasses [°] and FREE digital retinal imaging with your eye test.	 Basic extras cover for dental, optical and selected therapies 100% back[#] on: 2 dental checks per year Certain prescription glasses[^] and FREE digital retinal imaging with your eye test. 	Affordable mid-level extras cover for a range of services and therapies 100% back [#] on: • 2 dental checks per year • Certain prescription glasses^ and FREE digital retinal imaging with your eye test • An initial physio, chiro, osteo and podiatry consult*.	Quality extras cover for a wide range of services and therapies 100% back [#] on: • 2 dental checks per year • Certain prescription glasses^ and FREE digital retinal imaging with your eye test • An initial physio, chiro, osteo and podiatry consult*.	 Top level extras with the highest coverage for therapies and services 100% back[#] on: 2 dental checks per year Certain prescription glasses[^] and FREE digital retinal imaging with your eye test An initial physio, chiro, osteo and podiatry consult[*].

See pages 10-11 for a detailed list of what's covered.

[#] At participating providers and subject to your annual limits.

^ Excludes add-ons such as high index material, coatings and tinting.

* One initial consult for a new health condition or flare up where no treatment has been provided in the previous 3 months.

COVER FOR ALL LIFE STAGES

WHICH LIFE STAGE MATCHES YOUR NEEDS?

When choosing your level of cover, we recommend you consider a range of factors including your family's medical history, any pre-existing conditions and the hospital and extras cover needs of each person to be covered on the membership.



YOUNG SINGLES & COUPLES

You're a young, active single or couple not planning a family and looking for basic, affordable hospital and extras cover for the things you need.

PLANNING A FAMILY

You're a single, couple or family looking for value for money hospital and extras cover, offering the ideal pregnancy package to see you through the birth of your children.

TOP COVER

You're looking for peace of mind by having our best level of health cover. Get higher hospital and extras benefits and limits than our other covers and more choice.

JUST HOSPITAL OR EXTRAS COVER

Choose hospital or extras cover on its own.

And if you take out hospital cover only and want to add extras later (or vice versa) it's easy to add it on when you're ready. Waiting periods may apply.

FAMILY WITH KIDS

You have a maturing family or are looking for the maximum protection and flexibility in your hospital cover, with the choice of adding extras cover for peace of mind.

NO PREGNANCY

You have a maturing family or are looking for the maximum protection and flexibility in your hospital cover, with the choice of adding extras cover for peace of mind.

Talk to us about which cover is best for you:





_{бото} hcf.com.au

An award-winning local call centre, 50+ branches nationwide and great online resources.

HOSPITAL BENEFITS SUMMARY

	CORPORATE BASIC	CORPORATE MID	EXECUTIVE	ULTIMATE
Choose your excess (per person per calendar year)	\$250 or \$500	Nil or \$250 or \$500	Nil or \$250 or \$500	Nil or \$250 or \$500
No excess for kids	1	~	✓	×
No excess for Accident related treatment	1	~	1	✓
No excess for same day admissions	×	×	×	 Image: A second s
Available as hospital cover only (without extras)	Yes	Yes	Yes	Yes
Examples of what's covered Includes accommodation, operating theatre, intensive care, Government appr	oved Prostheses, pharmaceutica	ls [#] and physiotherapy as part of	your covered admission at a par	ticipating private hospital
Emergency ambulance	 Image: A second s	×	 Image: A second s	 Image: A set of the set of the
Accident related treatment after joining (Accident Safeguard – Excluded Services or Minimum Benefit services listed in this table will be treated as Covered Services in the event of an Accident. Excludes podiatric surgery by an accredited podiatrist. Conditions apply. Visit hcf.com.au/accident-safeguard)	~	~	~	~
Removal of tonsils, adenoids, appendix	1	×	1	✓
Surgical treatment of a hernia	 Image: A second s	~	 Image: A second s	 Image: A second s
Removal of kidney stones and gall stones	×	×	×	 Image: A second s
Digestive disorder procedures (e.g. bowel surgery)	 Image: A second s	~	✓	 Image: A set of the set of the
Cancer related services (e.g. chemotherapy)	×	×	✓	✓
Heart surgery, including diagnostic and therapeutic cardiac procedures	×	~	✓	✓
Spinal surgery	×	MB	✓	✓
Cochlear implant surgery and bone anchored hearing devices*	×	×	×	~
Insulin pump treatments	×	×	×	0
Care involving dialysis for chronic renal failure	×	×	✓	✓
Rehabilitation services	MB	MB	✓	✓
Psychiatric treatment	MB	MB	MB	~
Gastric banding and obesity surgery	×	×	×	×
Assisted reproductive services (e.g. IVF, GIFT)	×	×	×	 Image: A set of the set of the
Pregnancy and birth related services	×	MB	MB	✓
Joint investigations and reconstructions	 Image: A second s	~	 Image: A second s	✓
Joint replacements (e.g. hip replacements, knee replacements)	×	MB	×	 Image: A second s
Cataract and other lens related surgery	×	~	×	×
Sterilisation and sterilisation reversals	1	~	1	✓
Podiatric surgery by an accredited podiatrist	×	×	MB	MB
All other in-hospital services where a Medicare benefit is payable (other than the services excluded in this table or on pages 20 - 21)	~	~	~	×

Covered Services

Excluding experimental and high cost non-PBS drugs. See page 20 for details.

Minimum Benefits

* Includes associated speech and sound processors (including upgrades).

× Excluded Services () Ce

Certified Type C procedures and certified overnight Type C procedures for the treatment of diabetes. Reduced or no benefits may apply. See hcf.com.au/insulinpumps to find out if you're covered.

WAITING PERIODS

HOSPITAL	
Palliative care	
Psychiatric treatment	2 months
Rehabilitation services	
Pre-existing ailments or conditions	12 months
Pregnancy & birth related services	12 11011115
All other hospital services including	2 months
Accident related treatment	
AMBULANCE	
Emergency ambulance	1 day
(where not for pre-existing ailments)	Tudy
Pre-existing ailments	12 months

Waiting periods vary according to the type of treatment or service. From 1 April 2018, members who have held a hospital cover for at least 2 months and upgrade to Ultimate Hospital to receive psychiatric treatment as a Covered Service may not be required to serve the waiting period for psychiatric treatment. This exemption can only be accessed once in a member's lifetime. Go to **hcf.com.au** for more information.

MINIMUM BENEFITS

If you choose a hospital cover where Minimum Benefits apply to some procedures then HCF will pay the rate set out by the Commonwealth Minister for Health, from time to time, as the Minimum Benefit paid for a shared room and benefits for Government approved Prostheses List items. When Accident Safeguard applies, you will receive the same Benefits as those for Covered Services.

Minimum Benefits in a private hospital: These benefits wouldn't cover all the hospital costs and there could be significant out-of-pocket expenses for you to pay.

Minimum Benefits in a public hospital: If you elect to be a private patient in a public hospital, you may have to pay outof-pocket expenses if these benefits are less than what your chosen public hospital charges or do not cover all hospital costs.

× EXCLUDED SERVICES

If you choose a hospital cover where some procedures are excluded then nil benefits apply for the episode of care, except when Accident Safeguard applies. If multiple procedures are provided in a single episode of care and one procedure is excluded then nil benefits apply for the entire episode of care.

Excluded Services in a private hospital: You are responsible for all hospital charges and could have significant out-of-pocket expenses.

Excluded Services in a public hospital: If you elect to be a private patient in a public hospital, you are responsible for all hospital charges and could have significant out-of-pocket expenses.

Please also refer to pages 20 - 21 for information on services that are not covered under HCF hospital products.

EXTRAS LIMITS SUMMARY

E>	(TRAS LIN	ITS SUMMARY		BASIC	LIFESTYLE	ACTIVE	LIFESTYLE	ULTIMATE			
				¥0	ESSENTIALS	LIFESTYLE	PLUS ♥⊙ 📩 Ì ~↗	♥⊙ ♣ १~↗	1000/ provide	icipating ers, subject to	
	c .		Waiting		limits, per person	per calendar vear.	unless otherwise s		BACK ON limits. E	ver and annual Exclusions apply.	
	Category	Service	Periods		(set bene	fits apply per servi	ce or item)			out more, visit n.au/100back	
-		Examinations	2 months		\$650	Year 1 \$850 Year 2 \$950 Year 3+ \$1,050 Max. 2 check ups, 2 scale and clean,	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,			
GENERAL DENTAL	Diagnostic &	Removal of plaque/calculus		2 months \$450 Max. 1 check-up, 1 scale and clean,				2 scale and clean, and 1 fluoride treatment per person, per year			
DE	Preventative	Application of fluoride							Dental check-ups th	rough HCF's	
Z		Single film x-rays – initial/subsequent (on same day)							More for Teeth providers		
N	Tooth extractions	Simple extractions	1								
B	Fillings - direct	Direct fillings (1-2 surfaces)	-	and 1 fluoride	Max. 2 check ups, 2 scale and clean,				Prescription glasses retinal imaging with		
		Direct fillings (3 or more surfaces)		treatment per person,	and 1 fluoride				retinal imaging with through HCF's More		
	Fillings - indirect	Indirect fillings		per year	treatment	and 1 fluoride				for group for a city	
	Oral surgery	Surgical extractions			per person, per year	treatment per person,	\$1,100	\$1,300	An initial physio, chir		
-	Periodontics	Treatment of tissue surrounding teeth		nonths ×		per year	φι,ιου	<i><i><i>ϕ</i></i> 1,0000</i>	consult through HCF's More for Muscles and More for Backs providers'		
Ě	Endodontics	Treatment of root canals									
E E	Crowns and bridges	Placing of crowns and bridges							providere		
MAJOR DENTAL	Dentures	Dentures and/or components (partial and complete). Limits renew every 3 years	12 months						An initial podiatry co through HCF's <i>More</i>		
MA	Orthodontics	Correction of teeth and jaws by an orthodontist or other dentist			×	\$600 (\$300 for other dentists) Lifetime limit \$1,800 or \$900 for other dentists	\$800 (\$400 for other dentists) Lifetime limit \$2,400 or \$1,200 for other dentists	\$800 (\$400 for other dentists) Lifetime limit \$2,400 or \$1,200 for other dentists	 providers' Use your 'Limit Boos' your optical and/or d limit pack ware 		
-		Spectacle frames							limit each year		
<u></u>	Glasses and	Spectacle lenses – pair*	2 months	\$150	\$200	\$225	\$250	\$300	^ Excludes add-ons such as high	index material	
OPTICAL	contact lenses	· · ·	2 11011113	\$150	\$200	<i>ΦΖΖ</i> Ο	\$Z50	\$300	coatings and tinting.		
0		Contact lenses - pair Physiotherapy (group and/or classes covered under Health		\$250	\$350	Year 1 \$400 Year 2 \$450 Year 3+ \$500	\$600	\$750	* One initial consult for a new he flare up where no treatment ha		
		Management)	_						in the previous 3 months.	is seen provided	
		Exercise physiology (group and/or classes covered under Health Management)							× Not covered		
10		Occupational therapy			× \$150 ×	Year 1 \$400 Year 2 \$450 Year 3+ \$500	\$600	\$750			
THERAPIES		Psychology (after Medicare entitlement used up)	2 months	×							
₹	Initial/Subsequent	Chiropractic/Osteopathy	(12 months for foot	\$120 ×		\$300			WAITING PERIODS	WAITING PERIODS	
Ŧ		Remedial massage and/or Myotherapy	orthotics)			\$300 Sub-limit \$200 per therapy service type Year 1 \$200 Year 2 \$225 Year 3+ \$250	5350 Sub-limit \$250 per therapy service type \$300	\$450 Sub-limit \$250 per therapy service type \$450	EXTRAS		
- H		Acupuncture and/or Chinese herbal medicine consultation									
		Naturopathy and/or Nutrition consultation							Artificial appliances (e.g. low vision aids,		
		Podiatry (including foot orthotics) Note: foot orthotics annual limit							blood glucose monitors)		
		is capped at Year 1	-						Major dental		
	HCF approved vaccines and	Dietetics/Audiology/Speech pathology After PBS equivalent co-payment subtracted	2 months		\$100	\$180	\$280	\$280	Foot orthotics	12 months	
	Immunisations			2 months		<i></i>			Hearing aids		
	Artificial aids	HCF approved (e.g. low vision aids, blood glucose monitors)	12 months		×××	Max. \$150 per policy	Max. \$200 per policy	Max. \$250 per policy	Orthodontics		
OTHER	Hearing aids	Benefits accrue over time and renew every 3 years from the date you received them	12 months			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	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	Pre-existing ailments and conditions School Accident Benefit All other extras services	2 - 12 months 2 months	
	Health Management Programs	HCF approved (e.g. exercise classes, weight management)	2 months	\$50 per person Max. \$100 per policy	\$50 per person Max. \$100 per policy	\$75 per person Max. \$150 per policy	\$100 per person Max \$200 per policy	\$150 per person Max. \$300 per policy			
	School Accident Benefit	Helps pay out-of-pocket expenses for extras in your cover. See hcf.com.au/school-accident	2 - 12 months		×	\$125 per eligible child	\$175 per eligible child	\$225 per eligible child		_	
							1				

MORE FOR OUR MEMBERS

As an HCF member you'll have access to a great range of additional benefits, rewards and offers.

INVOLUNTARY UNEMPLOYMENT ASSISTANCE

We'll pay your HCF health insurance premiums if you become involuntarily unemployed. Available to eligible Policyholders with hospital cover, up to a maximum period of 183 days.

Excludes extras only, Ambulance Only and Overseas Visitors Health Cover. Conditions and waiting periods apply.

To find out more go to hcf.com.au/unemployment-assistance

LIMIT BOOST

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

LOYALTY REWARDS	ACTIVE LIF	ESTYLE	LIFESTYLE	PLUS	ULTIMATE EXTRAS	
Years of Membership	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	\$50	\$100	\$75	\$150	\$100	\$200
Year 3	\$75	\$150	\$100	\$200	\$125	\$250
Year 4	\$100	\$200	\$125	\$250	\$150	\$300
Year 5	\$125	\$250	\$150	\$300	\$175	\$350
6 years or more	\$150	\$300	\$175	\$350	\$200	\$400

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.

GREAT OFFERS AND REWARDS WITH HCF THANK YOU

We know that choosing a health fund is a big commitment so to recognise your loyalty you'll get access to a great range of exclusive offers and rewards. And the longer you stay with us, the more ways we can say thank you.

A TASTE OF MEMBER OFFERS



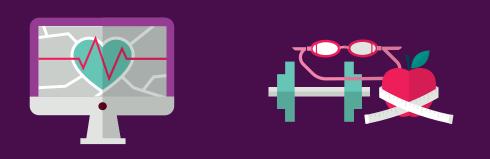
HCF Thank You offers are valid as at February 2018. We reserve the right to remove or amend partners and offers without providing prior written notice. Terms and conditions apply, not all HCF members are eligible for HCF Thank You.

Please note that HCF Pet Insurance is general insurance issued by The Hollard Insurance Company Pty Ltd AFSL 241436, and is not part of The Hospitals Contribution Fund of Australia Limited's (HCF) health insurance business. Please read the PDS and do not assume that pet insurance and health insurance are similar. Pet insurance is distributed and promoted by HCF AFSL 241414 and administered by Petsure (Australia) Pty Ltd AFSL 420183. Any advice here does not take into account your objectives, financial situation or needs. Consider the PDS at **hcf.com.au/petinsurance** and **hcf.com.au/travel** before making any decisions about this product. Terms and conditions apply.



HCF

THANK







HEALTH AND WELLBEING PROGRAMS

FIND A PARTICIPATING NO-GAP DOCTOR

We are the first private health insurer to partner with Healthshare to help you and your GP find a specialist that will charge no-gap or a reduced gap.

The tool is available free to all Australian GPs and offers you the right information at the right time to make a better-informed health decision and minimise your out-of-pocket costs.

To find out more go to hcf.com.au/findaprovider

PREPARING FOR HOSPITAL ONLINE TOOL

If you need to go to hospital, understanding more about your procedure can provide welcome peace of mind.

Our online resource will help you understand how it works, how to prepare, what to expect in hospital, what aftercare you may need and get an idea of average cost using our cost indicator tool.

It features videos of HCF members talking about their experiences as well as 3D animations of the procedures.

Visit hcf.com.au/preparing-for-hospital for more.

HEALTH MANAGEMENT PROGRAMS

On eligible extras covers, you can claim on a range of HCF approved Health Management Programs to help you lead a fit and healthy life.

Programs include:

- Weight management
- Exercise classes with a physiotherapist or exercise physiologist, and gym membership fees for specific health conditions (doctor's referral required)
- Childbirth education
- Lactation consultant
- Learn to swim.

A 2 month waiting period and conditions apply to claims for Health Management Programs.

Visit hcf.com.au/healthmanagement for more.

WEIGHT MANAGEMENT FOR CHRONIC CONDITIONS

Our *Healthy Weight For Life* programs help improve your quality of life if you have Type 2 Diabetes, Cardiovascular conditions or Osteoarthritis.

For more information visit hcf.com.au/hwfl

SUPPORTING YOU TO HAVE A HEALTHIER AND HAPPIER LIFE

My Health Guardian features online tools that help you manage your diet, health and fitness. It is provided at no cost to members 18 years and over with hospital or extras cover.

Take the virtual tour at hcf.com.au/mhg

My Health Guardian is also available for members with a hospital cover and with a range of chronic conditions to help improve your general health and wellbeing. The program provides telephone based support from registered nurses and works with your current GP treatment plan.

For more details and to see if you're eligible visit **hcf.com.au/chronic**

You can also use the Well-Being Plus app as part of the *My Health Guardian* program, to track your progress and set goals. Available for Apple and Android. Download at **hcf.com.au/mobile-apps**

GET FREE VICTOR CHANG HEART HEALTH CHECKS

As an ambassador of the Victor Chang Cardiac Research Institute, HCF has been helping Australians look after their heart health since 2012.

The Victor Chang Cardiac Research Institute conducts free heart health checks for HCF members aged 18 and over with extras cover at HCF branches in NSW, Vic, Qld, ACT, SA & WA.

The heart health check uses three simple tests, carried out by a registered nurse:

- blood pressure
- total cholesterol
- blood sugar.

It only takes ten minutes and the results are available immediately.

Visit hcf.com.au/victorchang for more.

FREE SUBSCRIPTION TO HEALTH AGENDA MAGAZINE

Our *Health Agenda* magazine empowers readers to make healthier choices. It's filled with insightful pieces on nutrition, fitness, technology and physical and mental health.

Members can subscribe to receive our free quarterly magazine by post at **hcf.com.au/subscribe**



CASH ASSISTANCE FOR THE UNEXPECTED

A range of low-cost life insurance products that help pay for the things that your health insurance may not.

FOR KIDS

KIDS ACCIDENT COVER

Pays a lump sum if your insured child gets accidentally injured[#]

- Available for children aged 0 17
- Pays a benefit of up to \$100,000
- Covers many common fractures and breaks
- Easy to apply no medical questions or examinations
- No waiting periods
- Make multiple claims up to a maximum of \$100,000 per child
- Costs only 90 cents per week per child.

FOR UNDER 30s

BOUNCEBACK COVER

Protection for young people against common accidents and illnesses

- You can apply if you're aged 16 30
- Pays a benefit of up to \$100,000
- Easy to apply no medical questions or examinations
- Covers surgery for illnesses like tonsillitis and appendicitis
- Covers many common fractures and breaks
- Make multiple claims up to a maximum of \$100,000
- Costs \$7 per week[^]
- Waiting period: 90 days for all covered cancers and heart conditions.



INCOME ASSIST INSURANCE

Pays you a monthly benefit if you can't work due to sickness or injury

- You can apply if you're aged 18 54
- Pays up to 75% of your average monthly income (maximum of \$6,000 per month)
- Pays a monthly income for up to 12 months
 Available to those working 21 hours or
- Available to those working 21 hours or more per week⁺
- Additional benefits for expenses incurred on child care and care during bed confinement
- Cost depends on age, gender and occupation
- Waiting period: First 30 days of each period you are unable to work.

FOR OVER 55s

PERSONAL ACCIDENT INSURANCE

Covers over 55s for specified injuries or death as a result of an accident

- You can apply if you're aged 55 74
- Choice of \$25,000 and \$50,000 levels of cover*
- Easy to apply no medical questions or examinations
- Covers a range of specified fractures, dislocations and burns
- Costs from only \$3.20 per week for singles and \$6.40 per week for couples.

FOR ADULTS AND FAMILIES

CASH BACK COVER

Pays a lump sum if insured person suffers from any of the 6 major illnesses or an accident that needs surgery in an operating theatre

- You can apply if you're aged 16 60
- Pays a \$5,000 lump sum for covered accidents and illnesses
- Covers illnesses such as heart attack, stroke and certain cancers
- Easy to apply no medical questions or examinations
- Make multiple claims up to \$20,000 for singles and \$40,000 for families
- \$2 per week for singles and \$4 per week for families
- Waiting period: 2 months for all covered illnesses.

FOR ADULTS AND FAMILIES

CRITICAL ILLNESS COVER

Pays a lump sum if you're diagnosed with specified illnesses

- You can apply if you're aged 18-54
- Choice of \$25,000 and \$50,000 levels
 of cover
- Includes cover for illnesses such as heart attack, stroke and certain cancers
- Easy to apply no medical questions or examinations
- Costs from \$2.30 per week for singles and \$4.60 per week for families
- Waiting period: 90 days for all covered illnesses.

SMART TERM INSURANCE

Pays a lump sum to your loved ones to help them with the financial costs if you were to suffer a terminal illness or were no longer around

- You can apply if you're aged 18 54
- Choose up to \$500,000 cover
- Early payment if you're diagnosed with a terminal illness
- Advance payment of \$10,000 to cover funeral expenses⁻
- Easy to apply no medical questions or examinations
- Cost depends on age, gender, smoking status and choice of benefit amount.

For more information on these products, visit hcf.com.au/life-insurance or call 13 13 34.

Please note: all covers exclude pre-existing conditions.

- [#] Accident should result in immediate impairment or permanent disability within 6 months.
- ^ Premium will be \$1 per day until you reach the age of 35, after which premiums will be based on your age.
- ⁺ Should have been employed for the last 12 months with the same employer or in the same occupation.
- * Level of cover and benefit payable for each specified injury and accidental death will be halved for accidents occurring after you reach age 80.
- Funeral advancement benefit is only payable on accidental death for the first 3 years and for death from any cause after 3 years.

Please consider each Product Disclosure Statement and Financial Services Guide available by calling **1313 34** or visiting **hcf.com.au/life-insurance**, and consider your financial situation, objectives, and needs before deciding on these products as any advice provided does not take these into account. 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 Limited 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 40% of the first year's premium plus an additional commission of 80% of HCF Life. HCF receives an incentive depending on the annual premium of these products which they sell. This will not exceed 20% of the first year's premium.

IMPORTANT THINGS YOU NEED TO KNOW ABOUT HEALTH COVER

Information to help you make the right choice, pay lower premiums and avoid unnecessary costs.

REBATES, SURCHARGES AND INCENTIVES

Private health legislation can affect your choice of health cover, so here's some useful information on how to get your maximum entitlements and avoid unnecessary expenses.

AUSTRALIAN GOVERNMENT REBATE ON PRIVATE HEALTH INSURANCE

To help make private health cover more affordable, the Australian Government provides 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
- OR
- A tax offset credit in your annual tax return.

When calculating your income be sure to include taxable income, fringe benefits, reportable superannuation contributions, net financial investment losses and more. You may have to pay additional tax if you nominate an incorrect rebate tier.

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

See **privatehealth.gov.au/healthinsurance/ incentivessurcharges** for the list of rebate percentages.

MEDICARE LEVY SURCHARGE

The Medicare Levy Surcharge is an Australian Government initiative designed to encourage high-income earners to be responsible for their health care. It only applies if you will earn above this year's income threshold and don't have eligible private hospital cover.

You can 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'll be charged an additional surcharge on your Medicare levy when your tax return is assessed.

To view this year's income thresholds and Medicare Levy Surcharge information, go to **privatehealth.gov.au/healthinsurance/** incentivessurcharges

LIFETIME HEALTH COVER

Lifetime Health Cover (LHC) is a Government initiative that encourages people to take out hospital insurance earlier in life, and maintain their cover.

In some cases, you may be exempt or fit into a special circumstances category. 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 could pay a 2% loading on top of your premium, for every year you are aged over 30.

The maximum loading is 70%. Once you have paid a LHC loading for 10 continuous years, the loading is removed.

For members who have 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 are 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** (and search for Lifetime Health Cover).

For more information, visit **hcf.com.au** or call us on **13 13 34**.

THINGS YOU NEED TO KNOW ABOUT HEALTH COVER

PRE-EXISTING AILMENTS OR CONDITIONS

A pre-existing ailment, illness or condition is one where the signs or symptoms existed during the six months before joining HCF (or upgrading to a higher level of cover), even though a diagnosis may not have been made. If there's any doubt that an ailment or condition is pre-existing, an HCF-appointed medical practitioner will examine information provided by your doctor, and any other relevant claim details.

WHO CAN BE COVERED?

Prior to 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 does my membership cover?'

HOSPITAL COVER FOR IN-PATIENT SERVICES

Hospital benefits are payable when you're admitted to hospital for treatment. These are called 'in-patient' services, and only in-patient services are covered by your hospital cover.

HOSPITAL GAP

Private hospitals charge for accommodation, operating theatres, Prostheses and other hospital related services. HCF has agreements with the majority of private hospitals and day surgeries (known as participating private hospitals) across Australia.

This means you won't pay additional costs for services covered under your policy and under our agreement with the participating private hospital (except Minimum Benefit services). This is subject to any excess you have on your policy, medical gaps (see below) and the conditions relating to your hospital cover. HCF hospital will only cover in-patient services (from when you're officially admitted to hospital to when you're officially discharged), however they don't cover outpatient services before or after your hospital admission.

If you're at a non-participating private hospital or a private patient in a public hospital or received Minimum Benefit services, Minimum Benefits will apply and you may incur significant additional expenses, in addition to your excess and medical gaps.

Minimum Benefits means the minimum default Benefit level payable by HCF for Hospital Treatment as determined under the Private Health Insurance Act and rules made under it from time to time.

To check if your planned hospital admission will be in a participating private hospital, please visit **hcf.com.au/participatinghospitals**, drop into a HCF branch or call us on **13 13 34**.

Please note: these agreements are updated from time to time and subject to change.

MEDICAL GAP

Medical services provided while you are admitted to hospital (like doctors', anaesthetists' and surgeons' fees, and diagnostic services such as x-rays, scans and blood tests) are charged separately from hospital services. Medicare covers 75% of the Medicare Benefits Schedule (MBS) fee for these charges and HCF covers the remaining 25% (for eligible services). However, many providers charge more than the MBS fee, so you may face additional out-of-pocket expenses (known as the 'medical gap'). HCF has arrangements (under our Medicover or other medical agreements) with over 35,000 doctors across Australia which help eliminate or reduce gaps for doctors' services for our members.

Please note: these agreements are updated from time to time and subject to change.

EXTRAS

Under HCF extras, we will pay a set amount of benefits for services, subject to annual limits. The amount of benefits will vary depending on your cover. You must pay the difference between what the extras provider charges and the benefits we pay.

WHAT'S NOT COVERED

There are a number of situations where our health insurance doesn't cover you:

- Elective Cosmetic Surgery;
- If a Service is listed as an exclusion in the Product Information. For some Hospital Covers, an exclusion may 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 excluded regardless of whether or not Treatment is required as a result of an Accident;
- Claims made 2 years or more after date of Service;
- 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;
- Treatment for Pre-Existing Conditions (other than for psychiatric, 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 under their New Policy);
- 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 that HCF deems to be inappropriate or not reasonable, after receiving independent medical or clinical advice;
- Any Service where the Treatment does not meet the standards in the Private Health Insurance (Accreditation) Rules;
- · Emergency room fees;
- Services that are not delivered face to face, such as online or telephone consultations, unless a Member is participating in a Chronic Disease Management Program or Health Management Program;
- Services supplied by a provider not recognised by HCF;
- Services provided outside Australia which do not meet the requirements under the *Private Health Insurance Act;*
- Ambulance transfers between hospitals, including where a Member attended an emergency department, outpatient department, urgent care centre, short stay ward or other ward or medical department at a Hospital before or after the transfer (regardless of whether formally admitted); and

• Claims that do not meet HCF's criteria as set out in the Fund Rules.

IN ADDITION, OUR HOSPITAL COVER DOESN'T INCLUDE:

- Hospital Benefits (including Medical Benefits) for Services in respect of which the claim is not approved for payment by Medicare;
- Experimental treatment;
- Experimental, high cost non-PBS Drugs and Therapeutic Goods Administration (TGA) approved Drugs used for a purpose other than that for which they were approved;
- Procedures normally performed in the doctor's surgery or as an outpatient;
- Private room accommodation for same-day procedures;
- Respite care;
- Benefits for Nursing Home Type Patients except as determined under the Minimum Benefits requirements of the Private Health Insurance Act;
- Special nursing;
- Luxury room surcharge;
- Donated blood and blood products;
- Donated blood collection and storage;
- PBS pharmaceutical benefits in private Non-Participating Hospitals;
- Pharmaceuticals (including PBS pharmaceuticals benefits) and other sundry supplies not directly associated with the reason for admission:
- Take home items including crutches, toothbrushes and drugs;
- Personal convenience items including the cost of phone calls, newspapers, magazines and beauty salon services;
- Massage and aromatherapy services;
- Select Services provided while in Hospital by non-hospital providers;
- Benefits where a Service is an Excluded Service for the payment of Benefits in a Hospital, and any other Services including medical, diagnostic, Prosthesis and pharmacy received at the same time, except when Accident Safeguard applies;
- The gap on government approved gappermitted Prostheses items; and
- Benefits greater than Minimum Benefits if a Service is listed as a Minimum Benefit Service in the Product Information. For some Hospital Covers, Minimum Benefits may 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, OUR EXTRAS COVER DOESN'T INCLUDE:

- · Psychological and developmental assessments;
- Co-payments and gaps for Government funded health services including the co-payment for PBS items;
- Psychology treatment (where included under a Policy) unless a mental health plan has been prescribed under Medicare entitlements and these entitlements have been used up for the Calendar Year;
- Services while a Hospital patient except for eligible oral surgery;
- Pharmacy items that are not on HCF's approved pharmacy list including items listed on the PBS, items prescribed without an illness, items that are available without a prescription, items supplied by a Hospital as take-home drugs, or items that are not registered with the Australian Register of Therapeutic Goods;
- Services that had not been provided at time of claim;
- Fees for completing claim forms and/or reports;
- Services received overseas or purchased from overseas including items sourced over the internet;
- Where no specific health condition is being treated or in the absence of symptoms, illness or injury;
- Routine health checks, screening and mass immunisations;
- More than one therapy Service performed by the same provider in any one day;
- Where a provider is not in an independent Private Practice; and
- Add-ons for optical such as high index material, coatings and tinting.

Please note: our list of approved pharmacy items, artificial aids and appliances, participating hospitals and no gap providers are subject to change and updated regularly. If your cover includes any of these items and you wish to make a claim, please call us on 13 13 34 to confirm your benefits.

EMERGENCY AMBULANCE (EXTRAS ONLY)

For NSW or ACT residents with standalone extras cover, there is unlimited emergency ambulance cover for transport within NSW or the ACT. For emergency transport received outside of NSW or the ACT, there is an annual limit of 1 service per person and 2 per policy.

Residents of Queensland are covered Australia-wide under their state ambulance service scheme and no Benefits for ambulance services are payable by HCF.

Residents of Tasmania are covered across Australia under their state ambulance service scheme, excluding in Queensland and South Australia. You may claim under your HCF cover for emergency ambulance services in these states, with an annual limit of 1 service per person and 2 per policy. For residents in Vic, SA, NT and WA, if you don't have an ambulance subscription with your state ambulance service, you may claim under your HCF cover for emergency ambulance with an annual limit of 1 service per person and 2 per policy.

In all instances, Benefits are only claimable from HCF when you aren't otherwise covered for emergency ambulance services e.g. through state ambulance arrangements, pensioner or social security entitlements. Services must be provided by a state Ambulance Service Provider. See the Member Guide for details. Non-emergency ambulance services are not covered.

Please note

This is not a comprehensive list of items that aren't covered under hospital or extras cover. Please call **13 13 34** to check what you're covered for prior to going to hospital or for treatment.

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. Capitalised terms in this brochure have the meaning given to them in the Member Guide or the Fund Rules.

CHANGES TO PRODUCTS AND PRICING

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.

HOW 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.

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 purchase
- you're protected in accordance with the privacy principles.

For a full copy of the code, visit **privatehealth.com.au/codeofconduct**

HAVE A COMPLAINT?

We're committed to making sure your concerns are resolved as quickly as possible. If you have a complaint about any of the services we offer, your membership or cover, please let us know so we can help.

Call: 13 13 34 Email: service@hcf.com.au Write: HCF GPO Box 4242 Sydney NSW 2001

If your **health insurance** complaint isn't resolved to your satisfaction, you can contact the Commonwealth Ombudsman by writing to **GPO Box 442, Canberra, ACT, 2600**, emailing **phio.info@ombudsman.gov.au** or you can call **1300 362 072**. Their website is **ombudsman.gov.au**. They're an independent body formed to help resolve complaints and provide advice and information. This service is available to you free of charge.



If your **life, pet or travel insurance** complaint isn't resolved to your satisfaction within 45 days, you can contact the Financial Ombudsman Service Australia (FOS) by writing to **GPO Box 3, Melbourne, VIC, 3001**, emailing **info@fos.org.au** or calling **1300 367 287**. Their website is

fos.org.au. They're an independent body formed to help resolve disputes. This service is available to you free of charge.

OUR PRIVACY STATEMENT

HCF is committed to best practice privacy protection.

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 Group's service, benefits or product offerings) and mailing houses;
- other service providers, for example, our advisors;
- 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 is 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; and
- where disclosure is otherwise authorised or required by or under an Australian law or court/tribunal order.

We do not normally give personal information about you to anyone who is not on your membership. You will need to give us written permission if you want someone who is not covered by your membership, such as a friend or carer, to deal with us on your behalf.

If you do not provide the 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 onto the member section at **hcf.com.au/members** and updating your preferences.

For more information about the personal information we collect and how we handle it, how to access and correct your information or to make a complaint and how we will respond to complaints, please read our Privacy Policy.

To view the HCF Privacy Policy:

- Visit hcf.com.au/privacy
- Visit your local branch.

All new Policyholders should ensure that all members on the policy are made aware of the HCF Privacy Policy.

GET THE MOST FROM YOUR CORPORATE HEALTH COVER JOIN HCF TODAY

во то hcf.com.au/corporate-plans



EMAIL corporatesales@hcf.com.au









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