



ahm's number one focus is helping over 370,000 members make the most of their cover, by taking a no-nonsense approach to health insurance, cutting out unnecessary costs and offering more choice. ahm is underwritten by Medibank Private Limited.



More than 3.4 million Australians have chosen to be with Bupa and it's easy to see why. Bupa exists to help its members live longer, healthier, happier lives. No matter what stage of life you're at, Bupa offers a range of carefully tailored plans to help suit your needs.



Since 1951 CBHS has provided ultimate peace of mind to its members and is Australia's 3rd largest restricted Private Health Insurer covering over 180,000 people. CBHS is underwritten by CBHS Health Fund Limited.



GMF Health offers simple, straightforward health cover options, so you know exactly what you're covered for. GMF are a not-for-profit fund and have been helping members in Australia for 60 years. GMF is underwritten by HealthGuard Health Benefits Fund Ltd.



With over 80 years experience, HCF is Australia's largest not-for-profit health fund, so members get more, not shareholders. And, unlike some major funds, they remain fully Australian owned. HCF is underwritten by The Hospitals Contribution Fund of Australia Limited.

Not all funds may be available at all times and not all insurance products offered by the participating health insurance providers are compared. The Participating Health Products can vary from time to time and when we provide you with a comparison, we are only comparing those Participating Health Products which may suit your needs.



### **Qualities unique to ahm Health Insurance and main distinguishing points**

- Security and backing of a trusted national brand – Medibank
- We're the only brand that has a range of smart covers with no individual limits on Extras helping you claim more and waste less
- Mix and match different levels of hospital and extras cover to best suit your needs
- With us there's no waiting to claim on most extras
- Highly trained in-house customer service team to look after your needs

### **Service Statement**

ahm's number one focus is helping over 370,000 members make the most of their cover, by taking a no-nonsense approach to health insurance, cutting out unnecessary costs and offering more choice.

They do this through their:

- highly trained in-house customer service team who are focused on looking after your needs and helping you use your cover as much as you can.
- Online Member Services where you can check your claims history, your claiming limits, search for a doctor or provider and pay your premiums.

And by the way ahm love the environment and hate waste. So, that's why in the future they're planning to go paperless.

### **Claiming Options**

ahm Health Insurance offers the following convenient options for claiming extras benefits:

- Simply swipe your card at HICAPS participating providers for on the spot claiming
- Claim over the phone

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- Claim via Online Member Services
- Post your claim

Hospitals usually send their invoices directly to ahm Health Insurance for payment.

### **Benefits of choosing ahm Health Insurance**

- Security and backing of a trusted national brand – Medibank
- We're the only brand that has a range of smart covers with no individual limits on Extras helping you claim more and waste less
- Mix and match different levels of hospital and extras cover to best suit your needs
- With us there's no waiting to claim on most extras

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## **Bupa at a Glance**

What makes Bupa different?

- Bupa exists to help its members live longer, healthier, happier lives.
- You can be confident you're getting great value with the winner of a 2012 and 2013 Canstar Award for Outstanding Value Health Insurance Australia.
- Bupa's focus is you. They know that everybody's needs are different and that life doesn't just stand still, so they have specially designed their covers to suit a variety of lifestages and budgets.
- Managing your health is easier with Bupa's first-class health information, tools, apps and health programs.

## **About Bupa**

Bupa is a healthcare leader with health cover at its core, but it's Bupa's purpose that makes them different. They want their members to live longer, healthier, happier lives. Today more than 3.4 million Australians trust Bupa to provide them with affordable, high-quality health cover and it's easy to see why. No matter what stage of life you're at, Bupa offers a wide range of carefully tailored plans to help suit your needs.

## **Claiming Options:**

It's easy to use your extras cover with Bupa. You can claim:

- On the spot by swiping your Bupa card (where available)
- Online with myBupa, your member self-service area
- Using the Bupa app on your smartphone

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- By post
- At your local Bupa centre

For hospital claims, most hospitals send their bill directly to Bupa for payment. If you receive a hospital bill you can lodge your claim by post or at your local Bupa centre.

### **Why Choose Bupa?**

- > With Bupa's extensive Members First network of general dental, physio, optical and chiro providers you can look after your health and feel certain about how much money you'll keep in your pocket.
- > See clearly with a wide range of no gap glasses and contact lenses from Bupa Optical.
- > Choose Budget Family or Growing Family cover to get no out-of-pocket-expenses for kids until they're 25 on most general dental and physio services at Members First providers.\*
- > Request a private room 24 hours before your overnight stay and get \$50 back if one is unavailable at Members First hospitals.\*
- > Live well with great member discounts including up to 20% off gym memberships, 70% off vitamins and 25% off movie vouchers.

\*Conditions apply.

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#### **CBHS at a Glance:**

- 2012 Private Health Insurer of the Year – Roy Morgan Research
- CBHS is not-for-profit, they return as much premiums as commercially possible back to members by way of better benefits, lower costs and personalised member service.
- CBHS is Australia's 3rd largest restricted private health insurer.
- Today, CBHS covers more than 180,000 people Australia wide.

#### **About The Health Fund**

CBHS is the 2012 Private Health Insurer of the Year (Roy Morgan Research). Since 1951 CBHS has provided ultimate peace of mind to its members and is Australia's 3rd largest restricted Private Health Insurer covering over 180,000 people. It is an exclusive private health insurer for current and former employees of the Commonwealth Bank Group (Commonwealth Bank of Australia, Commsec, Commisure, the Colonial Group of companies and Bankwest) and their eligible family members (partner, parents, siblings, children and grandchildren). They deliver on their Value Promise; Greater Benefits, Lower Costs, Member Focused.

#### **Claiming Options:**

CBHS has made claiming Extras benefits quick and easy by providing you with many options for claiming your benefit.

Claim options include:

- Swipe your CBHS membership card at participating providers to claim your benefit at point of service.
- Claim online through the CBHS Member Services centre
- Post, fax or email your claim form and receipts to CBHS

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For hospital claims, the hospital usually sends the bill directly to CBHS for payment.

For in hospital medical services, most doctors bill CBHS directly, if not, claim from CBHS and we'll do the Medicare claiming legwork for you.

### **Why choose CBHS:**

Three reasons for choosing CBHS:

1. As a not-for-profit mutual, CBHS is a member-centric organisation, which means they aspire to delivering service that's the envy of the industry.
2. They have a broad range of highly competitive Hospital and Extras covers to choose from to suit your needs and budget.
3. CBHS' top cover (CBHS Prestige) allows you to keep a non-student dependant on your cover up to the age of 25 and gives you access to Best Doctors (a global network of medical specialists providing people with diagnosis and treatment plans for their medical conditions).

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### **GMF Health at a glance**

GMF Health have been helping members across Australia for more than 50 years.

- GMF Health is a not-for-profit organisation, committed to providing members with excellent customer service and quality health insurance at a reasonable price.
- GMF Health offers simple, straightforward health insurance with easy to understand cover options.
- With no shareholders to worry about, member premiums at GMF Health are used to pay claims and cover administrative expenses. This means GMF Health focus on providing quality health cover, not on making money.

### **About GMF Health**

GMF Health, a not-for-profit health insurer, have been helping Australians for over 50 years. Over that time, they've grown in size and strength and now cover over 60,000 members throughout all States in Australia.

GMF Health offer simple, straightforward health insurance, making it easy for customers to join or switch.

To keep health insurance simple, they offer 3 Hospital, 3 Extras and 3 Excess options, tailored to their members' needs and offer flexibility depending on what life stage they're in.

Their contact centre is located in Australia so if you have a query, you'll receive personalised, friendly service. You can claim on-the-spot at participating extras providers or send through your claim via email, fax or mail.

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### **Claiming Options:**

GMF Health provide the following claiming options for extras benefits:

- Swipe your membership card to claim on the spot at participating providers. You receive your benefit on the same day as your consultation and just need to pay any out-of-pocket costs.
- Email through your claim.
- Post in your claim form. If you've paid the account in full, you can use EasyClaim to have your benefit paid directly into your bank account (but not into your credit card account).

For hospital claims, the hospital usually sends the bill to GMF Health for payment.

### **Why choose GMF?**

GMF Health is a not-for-profit organisation committed to providing members with excellent customer service and quality health insurance at a reasonable price.

They have been helping members across Australia for more than 50 years and offer simple, straightforward health insurance, making it easy for customers to join or switch. To keep health insurance simple, they offer 3 Hospital, 3 Extras and 3 Excess options, tailored to meet your needs and offer flexibility depending on what life stage you're in.

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### **HCF Health at a glance**

- With over 80 year's experience, HCF is Australia's largest not-for-profit health fund.
- HCF has no hospital excess for accident-related surgery or for dependent children. And, only one hospital excess applies per person per calendar year.
- HCF's free My Health Guardian online program makes it easier for you to look after your health and well-being

### **About HCF Health**

They're not-for-profit, so members get more, not shareholders. And, unlike some major funds, they remain fully Australian owned. One more reason you'll be happier with HCF.

### **Claiming Options:**

HCF Health Insurance provides the following claiming options for extras benefits:

- Swipe your membership card to claim on the spot at participating extras providers. This is called the Health Industry Claims and Payment Service (HICAPS).
- Claim in person at any HCF branch.
- Claim by mail.

For hospital claims, the hospital usually sends the bill to HCF for payment. Your account can also be taken to medicare where you just need to complete a two way claim form.

### **Why choose HCF?**

Hospital policies also include a range of excesses that you can choose from. An excess is an amount that you agree to pay towards the cost of hospital treatment, in exchange for lower premiums. HCF excesses are only paid once per person per calendar year, regardless of how many times you go to hospital, and no excess is charged for accidents or kids.

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