

Super Extras

ahm Super Extras is our highest level of cover and ideal for those who want higher limits.

For Super Extras we pay a set benefit for services up to the annual limit, as listed below.

This document is a summary only. For more information please refer to our Extras policy document and benefit chart, which are available on our website at ahm.com.au/download-form

Why choose ahm Health Insurance?

You don't have to wait

We don't have any 2 or 6 month waiting periods on popular extras services like Physiotherapy, Optical and Routine Dental.*

Cover that fits like a glove

From time to time our Cover Specialists contact members to review whether the cover they have now, is the cover they need now.

Talk about responsive!

When you call us, you'll get individual advice and assistance when you need it. Your needs are important to us.

Solid as a rock

We've been looking after the health insurance of Australians for more than 40 years, so why not let us look after yours?

Manage your health insurance 24/7

You can claim for most paid ahm extras, pay your premiums, check your benefit limits and more using our online member services.

Learn, take action, live well

Maintain a healthy lifestyle with our range of health management tools and programs, available at no extra cost for eligible members.

* Other waiting periods apply.

		Total amour	nt voll cap
What's covered?		Total amount you can claim each year (limit)	
		Per person combined	Family
Routine dental		No limit	No limit
Complex dental* > Periodontics > Endodontics		\$1,000	\$2,500
Major dental (including dentures)*		\$1,100	\$2,750
Orthodontics* (Lifetime limit – \$2,400 per person)		\$800	_
 Optical Frames, lenses and repairs Refractive sight correcting laser eye surgery* (Lifetime limit on laser eye surgery – \$1,200 per person) 		\$250 \$600 per eye	No limit –
		Per person per therapy	Family
Therapies Physiotherapy Chiropractic Osteopathy		\$300	\$750
		Per person combined	Family
Complementary and altern Remedial massage Naturopathy Homeopathy Acupuncture Herbalism Exercise physiology Reflexology Feldenkrais Rolfing	 ative therapies Bowen therapy Alexander technique Kinesiology Biochemistry Traditional Chinese medicine Shiatsu Myotherapy Aromatherapy 	\$400	\$800

What's covered?	Total amount you can claim each year (limit)	
	Per person combined	Family
Pharmacy General items Hormonal implants Contraceptives (for medical reasons) Preventive/travel vaccines	\$500	\$1,000
 Health improvement benefits# Quit smoking benefits Cancer Council UV products Preventive tests Health checks Stress management courses Swimming lessons and training (0-17 years) Disease management association fees Exercise classes Exercise classes at a gym or with a personal trainer Yoga Pilates Exercise physiology 	\$250	\$625
 Diet and nutrition Dietitian and nutritionist consultations Weight loss classes# 	\$400	\$1,000
	Per person per therapy	Family
Other therapies > Psychology and hypnotherapy > Speech > Occupational > Eye > Podiatry* > Audiology	\$300	\$750
	Per person combined	Family
Orthotics and orthopaedic shoes*	\$200	\$400
Hearing aids* > Hearing aids > Repairs	\$1,600 (every 3 years)	_
Pre and post natal services and birthing courses*	\$300 (per rolling year)	_
Medical gases*	\$1,200	_
Joint fluid replacement injections*	\$640 (per rolling year)	-
Travel and accommodation	\$300	\$600
Emergency Ambulance No limit		mit

^{*} Other waiting periods apply.

a healthy me

ahm Super Extras includes other services to help you achieve and maintain a healthy lifestyle.

Health checks

For each person covered, we'll pay a benefit towards one doctor's health check or Healthy Heart check each financial year where a benefit is not claimable through Medicare, your employer or another third party.

ahm Health Hub

The ahm Health Hub provides a range of online health tools and resources, including a wellbeing assessment, health action plans, a recipe library and health risk calculators.^

For more information visit ahm.com.au/healthhub

ahm Health Coaching

If you want to improve your health or prevent chronic disease, a Health Consultant can help you devise a personalised action plan and motivate you to achieve your goals over a six month period.^

For more information visit ahm.com.au/health-coaching

[#] Special conditions apply. See the nitty gritty on page 5 for more details.

[^] These services are only available to members who are at least 18 years of age. Enrolment in some programs is also subject to your doctor's approval and other health criteria.

Important stuff

Your waiting periods

1 day	Emergency ambulanceahm Health Management Programs
12 months	 Major dental Complex dental Orthodontics Podiatric surgery Orthotics and orthopaedic shoes Hearing aids Pre and post natal services Medical gases Joint fluid replacement injections
2 years	Refractive sight correcting laser eye surgery

What does this mean?

A waiting period is a set amount of time you must serve before being eligible to claim for benefits on your policy.

Waiting periods apply when you first join, if you rejoin after not having had health insurance for some time, or if you change to a level of cover that has additional services or higher benefits on services where waiting periods apply.

If you're switching from another private health insurer, we'll recognise the waiting periods you've already served for comparable benefits.

Limits

Per person limits	Each person on a policy can claim up to the 'per person' limit for the claiming period except where the family limit has already been reached by other members on the policy.
Family limit	Benefits are payable up to the family limit indicated in the benefits table for the claiming period.
Lifetime limit per person	A benefit with a lifetime limit means that once you reach the limit, you can no longer claim that benefit in any future year of membership, even if you change your cover.

What does this mean?

A limit is the total amount you can claim towards that service in a specific period of time. In most cases this is a financial year (1 July – 30 June).

Some of our benefits for Super Extras have a rolling year, which begins on the date a service was first provided with the limit applying to that 12 month period following the date of the first service.

ahm recognised providers

It is important that we recognise service providers so that you receive quality health care from the providers you choose.

Recognising a provider means we get specific details and credentials from them to make sure they meet both legislative and our criteria for benefit payment. All service providers must be recognised by ahm Health Insurance before we can pay benefits.

To find out if your service provider is recognised by us call 134 246 or use the online provider search tool at ahm.com.au

Your loyalty is rewarded

ahm Super Extras includes loyalty limits which are based on the number of financial years you've been a member of ahm Health Insurance.

This means your annual claiming limit for some of our most popular extras benefits will increase after you've been with us for over 5, 10 and 20 years.

	< 5 years	5+ years	10+ years	20+ years	
Complex Dental					
Per person limit combined	\$1,000	\$1,100	\$1,200	\$1,300	
Family limit	\$2,500	\$2,750	\$3,000	\$3,250	
Major Dental	Major Dental				
Per person limit combined	\$1,100	\$1,300	\$1,500	\$1,700	
Family limit	\$2,750	\$3,250	\$3,750	\$4,250	
Physiotherapy, Osteopathy and Chiropractic					
Per person limit per therapy	\$300	\$350	\$400	\$450	
Family limit per therapy	\$750	\$875	\$1,000	\$1,125	
Psychology and hypnotherapy, speech therapy, occupational therapy, eye therapy, podiatry and audiology					
Per person limit per therapy	\$300	\$350	\$400	\$450	
Family limit per therapy	\$750	\$875	\$1,000	\$1,125	
Optical – frames, single lens, bi-focal, multi-focal, contact lenses, repair to frames or lenses					
Per person limit per therapy	\$250	\$275	\$300	\$325	
Family limit per therapy	No limit	No limit	No limit	No limit	
Pharmacy					
Per person limit combined	\$500	\$550	\$600	\$650	
Family limit	\$1,000	\$1,100	\$1,200	\$1,300	

Orthodontics

Orthodontic benefits increase after you've been with us after 3 and 5 years

	< 3 years	3-4 years	5+ years
Per person limit	\$800	\$1,000	\$1,200

The nitty gritty

Health improvement benefits

In most cases we're only able to pay benefits if proof is provided that the service is to help manage a health condition and that it isn't claimable under the Pharmaceutical Benefits Scheme (PBS), Medicare, an employer or any other party.

Exercise classes – you can claim exercises classes provided at a gym or by a personal trainer, yoga, pilates and exercise physiology. A Health Improvement Benefit Approval Form or letter completed by your health practitioner, or evidence of participation in ahm Health Coaching, must be provided specifying the condition being managed and dated prior to the date of service of any claim. Exercise classes must be provided by a Fitness Australia accredited gym or personal trainer. You can download a copy of the Health Improvement Benefit Approval Form at ahm.com.au/downloads

Cancer Council UV products — you can claim approved Cancer Council UV sun protection from the sunscreen, hats, swimwear and sunglasses range. Items from the cosmetics (including facial sunscreens), clothing, shade or accessories range aren't covered. Your receipt must identify the item as Cancer Council approved.

Disease management association fees

 you can claim association fees to the Arthritis Foundation, the Asthma
 Foundation, the Coeliac Society, Diabetes Australia, the Heart Foundation, the Crohn's and Colitis Association and Ostomy Associations to help manage and receive support for these diagnosed chronic conditions.

Doctor's health checks and Healthy Heart checks – you can claim for health checks to assist with early diagnosis and/ or prevent an illness or condition. The benefit isn't payable when your health check is claimable through Medicare, is related to employment (such as preemployment health checks) or when you can claim it through a third party insurer. Benefits are payable for one check per person per financial year.

Preventive tests, scans and screenings

– you can claim for some services that assist with early diagnosis and/or to prevent an illness or condition. However we can't pay a benefit if the test is claimable through Medicare.

Quit smoking – you can claim for laser therapy, hypnotherapy and nicotine

replacement therapy (patches, gum, lozenges and inhalers) where such services are not claimable under the PBS to assist in quitting or reducing smoking with the aim to help improve or prevent an associated health condition.

Stress management courses – you can claim for courses to manage and prevent health conditions associated with high levels of stress. The courses must be provided by a recognised psychologist or as part of an ahm Health Coaching program.

Weight loss classes and courses -

you can claim if the class or course is provided by ahm recognised providers Weight Watchers®, Jenny Craig® or Fernwood®. You will need to provide medical evidence of a Body Mass Index (BMI) of 26 or over. This can be in the form of a doctor's certificate, an ahm Health Improvement Benefit Approval Form, an ahm health profile (provided

Form, an ahm health profile (provided after completion of an online ahm Wellness Assessment) or a certificate from an ahm recognised weight loss provider. If the claim is for a child, evidence of an unhealthy BMI must be provided in the form of a doctor's

Swimming lessons – you can claim swimming lessons for children 0 - 17 years of age if provided by an Austswim® or Swim Australia accredited swim school if they have asthma, diabetes or an unhealthy BMI. Medical evidence of one of these conditions must be provided or a doctor's recommendation to undertake this activity due to their condition.

certificate/letter prior to claiming benefits.

Cooling off period

If you terminate your policy within 30 days of joining and haven't claimed a benefit during this period, you're entitled to a full refund.

Important information

The information contained in this document is current at the time of issue February 2013. Please ensure you read this document thoroughly and retain a copy for your reference. Membership of ahm Health Insurance is subject to our Fund Rules and policies which are summarised in our Extras policy document. Premiums, benefits, Fund Rules and policies change from time to time.

Policies of insurance issued under, or on the terms of, any products described in this

publication are referable to the Medibank Private Limited (ABN 47 080 890 259) health benefits fund.

Complaints

If you have a complaint related to your policy, please let us know straight away so that we can work to resolve matters as soon as possible. Where possible, we'll resolve your issue on the spot. However, if we're unable to resolve your issue immediately, we'll refer it to our Customer Advocacy Team who'll undertake a detailed investigation. Our Customer Advocacy Team will aim to find a solution for you by investigating your complaint and then letting you know the result.

We will do our best to resolve the issue to your satisfaction. If you're unhappy with the result, you can contact the Private Health Insurance Ombudsman (PHIO) for free independent advice.

Phone: 1800 640 695 Email: info@phio.org.au

Address: Suite 2,

Level 22 580 George Street

Sydney NSW 2000

Website: phio.org.au

Privacy Policy

To obtain a copy of the ahm Health Insurance Privacy Policy go to ahm.com.au, email info@ahm.com.au or call ahm Health Insurance on 134 246.

Private Health Insurance Code of Conduct



We adhere to the Private Health Insurance Code of Conduct. This is a self-regulatory code that

promotes informed relationships between private health insurers, consumers, agents and brokers.

Our documents display the PHI Code of Conduct logo. This shows that we comply with the Code and have been authorised by the Code Compliance Committee to use the logo. If you'd like more information about the Code — or if you'd like your own copy of the Code — call one of our friendly staff on 134 246 or go to ahm.com.au

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