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# THANKS FOR COMPARING HEALTH INSURANCE

It's a good idea to read through the following pages to learn more about this policy. If you have any questions or need more information, chat with one of our health insurance specialists by calling **1800 46 29 55**.

**On the other hand, if you're ready to buy, here's what you need to do:**

1. Review the enclosed policy brochure to ensure it meets your health insurance needs
2. Buy direct at **comparethemarket.com.au**; or
3. Call **1800 46 29 55** to speak to one of our Health Insurance Specialists

Thank you for not  
getting muddle with  
**comparethameerkat.com.au**  
It is much appreciate!



Need assistance?  
Call **1800 46 29 55**

# Lifestyle Extras



ahm Lifestyle Extras is a great choice if you want basic cover with a bit more thrown in, like higher benefits, complex and major dental, laser eye surgery and alternative therapies.

This brochure is just a summary of Lifestyle Extras. For more details about how our health insurance works you should download and read our *Member Guide* at [ahm.com.au/pages/downloads](http://ahm.com.au/pages/downloads)

The information contained in this document is current at the time of issue (January 2015).

## What's covered, how much and when

These benefits and limits are effective from 1 July 2014.

Service	Item No	Benefit	Annual Limits		Waiting Period
Routine Dental (most common shown)			Per person combined	Family	
Diagnostic			\$500	\$1,000	None
Comprehensive examination <sup>1</sup>	011	\$36.70			
Periodic examination <sup>1</sup>	012	\$34.65			
Emergency examination <sup>2</sup>	013	\$32.60			
X-ray (one film)	022	\$25.50			
Preventive					
Clean and polish <sup>3</sup>	111	\$34.65			
Scale and clean <sup>3</sup>	114	\$74.45			
Topical fluoride application <sup>2</sup>	121	\$25.50			
Mouth guard - custom made <sup>2</sup>	151	\$83.60			
Extractions			\$500	\$1,000	None
Non-surgical extraction	311	\$66.30			
Surgical extraction	324	\$161.15			
Direct Restorations					
Metallic restoration 1 surface/3 surfaces	511 / 513	\$58.10/\$76.50			
Adhesive filling 1 surface/3 surfaces (front)	521 / 523	\$59.15/\$81.60			
Adhesive filling 1 surface/3 surfaces (back)	531 / 533	\$61.20/\$94.85			

1. Maximum two services per year combined

2. Maximum two services per year

3. Maximum three services per year combined

### Did you know?

#### No waiting on most extras

Claim straight away on our most popular extras services like routine dental, optical, remedial massage and physio! You may have to wait before claiming on other extras.

#### Great news if you switch

If you switch to us from another private health insurer, we'll generally recognise any waiting periods you've already served for comparable benefits.

#### Claim for extras on the spot

Use an ahm member card to claim benefits on the spot at any service provider that has the HICAPS claiming service.

#### Manage your health insurance online

Check your claims history, check your benefit limits, search for a provider and pay your premiums online - do all this and more when you sign up for our Online Member Services.

#### Cover for the things that matter to you

Contact us if you would like to review your cover to see if it's still the best fit for your needs and budget.

#### Rely on 40 years of experience

Australians have relied on us for their health insurance for more than 40 years and we're backed by Medibank, Australia's largest health insurer.

Service	Item No	Benefit	Annual Limits		Waiting Period
Complex Dental			Per person combined	Family	
Periodontics			\$600	\$1,200	12 months
Non-surgical periodontic treatment	281	\$163.20			
Endodontics (Root canal therapy)					
Preparation of one root canal	415	\$132.60			
Major Dental (excludes dentures)			Per person combined	Family	
Indirect restorations			\$750	\$1,500	12 months
Tooth coloured filling 1 surface	551	\$204			
Crowns/bridges/implants					
Fully veneered crown	615	\$510			
Orthodontics			Per person	Lifetime limit per person	
Up to your yearly limit for GP & specialist services		100%	\$600	\$1,800	12 months
Optical			Per person combined	Family	
Frames, single lenses (pair), bi-focal (pair), multi-focal (pair), contact lenses, repair of frames or lenses (for scripted sight correcting products only)		\$200	\$200	\$400	None
Refractive sight correcting laser eye surgery		\$600 per eye	Lifetime limit \$1,200 per person/ \$2,400 per family		2 years
Therapies			Per person per therapy	Family per therapy	
Physiotherapy			\$350	\$875	None
Initial consultation / subsequent consultation <sup>1</sup>		\$42 / \$32			
Per class (group hydrotherapy, Pilates, antenatal exercises, rehabilitation – all classes must be provided by an ahm recognised Physiotherapist)		\$16			
Chiropractic & Osteopathy					
Initial consultation / subsequent consultation <sup>1</sup>		\$42 / \$32			

1. Benefits are payable for one initial consultation per therapy per person each financial year

Service	Item No	Benefit	Annual Limits		Waiting Period
<b>Complementary &amp; Alternative Therapies</b>			Per person combined	Family	
Remedial Massage		\$31			
Acupuncture, Alexander Technique, Aromatherapy, Biochemistry, Bowen Therapy, Exercise Physiology, Feldenkrais, Herbalism, Homeopathy, Kinesiology, Myotherapy, Naturopathy, Reflexology, Rolfing, Shiatsu, Chinese Medicine (consultations only)		\$26	\$400	\$800	None
<b>Pharmacy</b>			Per person combined	Family	
General items (excludes PBS scripts, over-the-counter medicines, vitamin & herbal medicines), Hormonal implants, Contraceptives for medical reasons, Preventive/travel vaccines		Up to \$50 each item above the general patient PBS amount	\$350	\$700	None
<b>Health Improvement Benefits - See <i>More details</i></b>			Per person combined	Family	
<b>Quit smoking</b>					
Per course		\$105			
Per item (nicotine replacement therapy ie. patches, gum, lozenges, inhalers)		\$50			
<b>Disease management association fees</b>					
Per association (Asthma, Diabetes, Heart, Arthritis, Colitis, Coeliac, Ostomy, Crohn's Disease)		\$50			
<b>Cancer Council UV products</b>					
Per item (sunscreen, swimwear, hats, sunglasses)		\$50			
<b>Stress management courses</b>			\$250	\$500	None
Per course		\$100			
<b>Preventive tests, scans &amp; screenings</b>					
Per test (mammograms, skin cancer screenings, bowel cancer tests and scans, bone mineral density tests)		Up to \$65			
<b>Health checks</b>					
Per check (doctor's health checks, Healthy Heart checks)		\$50			
<b>Exercise classes – see <i>More details</i> page 4</b>					
Per class/course		\$15 / \$250			

## More details

**Quit smoking** – you can claim towards laser therapy, hypnotherapy and nicotine replacement therapy (patches, gum, lozenges and inhalers) where such services aren't claimable under the PBS to assist in quitting or reducing smoking with the aim to help improve or prevent an associated health condition.

**Disease management association fees** – you can claim towards association fees of 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.

**Cancer Council UV products** – you can claim towards 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.

**Stress management courses** – you can claim towards courses to manage and prevent health conditions associated with high levels of stress. The courses must be provided by a recognised Psychologist.

**Preventive tests, scans & screenings** – you can claim towards 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.

**Health checks** – you can claim towards doctor's health checks and Healthy Heart 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 pre-employment health checks) or when you can claim it through a third party insurer. Benefits are payable for one check per person per financial year.

Service	Item No	Benefit	Annual Limits		Waiting Period
Diet & Nutrition			Per person combined	Family	
Dietitian & Nutritionist			\$400	\$800	None
Initial consultation / subsequent consultation <sup>1</sup>		\$45 / \$30			
Weight loss - See <i>More details</i>					
Per class/course		\$10 / \$100			
Other Therapies			Per person per therapy	Family per therapy	
Psychology & Hypnotherapy (service must be provided by an ahm recognised Psychologist)			\$250	\$500	None
Initial consultation / subsequent consultation <sup>1</sup>		\$71 / \$45			
Group consultation		\$24			
Ambulance			Per person		
Emergency ambulance (excludes ambulance subscriptions and non-emergency transport eg. transfers between hospitals)		100%	No limit		1 day

1. Benefits are payable for one initial consultation per therapy per person each financial year

## More details continued...

**Exercise classes** – types of exercises classes include gym classes or courses (membership), personal trainer, yoga, pilates and exercise physiology. A Health Improvement Benefit Approval Form or letter completed by your health practitioner, must be provided specifying the condition being managed and dated prior to the date of service of any claim. You can download a copy of the Health Improvement Benefit Approval Form at

**ahm.com.au/pages/downloads**

**Weight loss** – you can claim towards classes and courses provided by ahm recognised providers Weight Watchers®, Jenny Craig® or Fernwood®. You'll 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 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 certificate/letter prior to claiming benefits.

# Get more the longer you stay with us

Your annual claiming limit for some services will increase after you've been with us for over 5, 10 and 20 continuous financial years.

These loyalty limits are effective from 1 July 2013.

	< 5 years	5+ years	10+ years	20+ years
<b>Complex Dental</b>				
Per person limit combined	\$600	\$700	\$800	\$900
Family limit	\$1,200	\$1,400	\$1,600	\$1,800
<b>Major Dental</b>				
Per person limit combined	\$750	\$900	\$1,100	\$1,300
Family limit	\$1,500	\$1,800	\$2,200	\$2,600
<b>Physiotherapy, Osteopathy and Chiropractic</b>				
Per person limit per therapy	\$350	\$400	\$450	\$500
Family limit per therapy	\$875	\$1,000	\$1,125	\$1,250
<b>Psychology and Hypnotherapy</b>				
Per person limit combined	\$250	\$275	\$300	\$325
Family limit	\$500	\$550	\$600	\$650
<b>Pharmacy</b>				
Per person limit combined	\$350	\$400	\$450	\$500
Family limit	\$700	\$800	\$900	\$1,000

## 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	\$600	\$700	\$800
Lifetime limit per person	\$1,800		

# Important information

## Frequently asked questions

Here are some common health insurance terms. For more details read our *Member Guide*.

**Q. What is a benefit?**

**A.** This is the amount you get back from us to help with the cost of your treatment.

**Q. What is a waiting period?**

**A.** This is a set amount of time you must wait before you can claim any money back for a service included on your cover. All health insurers have waiting periods, which apply when you first join (or rejoin after some time without health insurance) or when you change to a higher level of cover or one with additional services.

**Q. What is an annual limit?**

**A.** Benefits are subject to annual limits.

An annual limit is the maximum amount of benefits payable towards services, items or groups of services and/or items within a financial year (1 July to 30 June).

Benefits that have been paid under your previous cover will be taken into account in determining the benefits payable under your ahm cover.

Some services also have a lifetime limit. Once you've reached this limit you can no longer claim that benefit in any future year of membership, even if you change your cover.

**Q. What is an ahm recognised provider?**

**A.** It's important that we recognise service providers so that you receive quality health care from the provider 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/find-a-provider](http://ahm.com.au/find-a-provider)

**Q. What is the Pharmaceutical Benefits Scheme (PBS)?**

**A.** This is a Government scheme that subsidises the cost of prescription medicine.

## Please note

### Cooling off period

If you cancel your cover 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 (January 2015). 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 *Member Guide*. 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 cover, 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'll 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](mailto:info@phio.org.au)

**Address:** Suite 2,  
Level 22, 580 George Street  
Sydney NSW 2000

**Website:** [phio.org.au](http://phio.org.au)

### Privacy Policy

To obtain a copy of our Privacy Policy go to [ahm.com.au](http://ahm.com.au), email [info@ahm.com.au](mailto: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](http://ahm.com.au)





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