

Say hello to HCF Corporate

February 2015



WHY HAVING HEALTH COVER MAKES GOOD SENSE

HCF members have peace of mind knowing you:

- can choose your own doctor
- get money back on extras, including dental
- avoid public hospital waiting lists for elective surgery
- have access to emergency ambulance cover if you need it.

When you're with HCF, it's all about you

As Australia's largest not-for-profit health fund, everything we do is focused on your needs. We take pride in delivering high quality service, having won major customer service awards.

And we're careful with your money. In 2014, we returned 93 cents in every dollar back to our members (against the industry average of 87 cents).



Value for money

No matter what you pay, you'll get better value with HCF. All our hospital and extras products are specially designed to give you great cover at a reasonable price, whatever your needs.



Pay nothing on a range of extras

HCF includes 100% back on certain claims on selected extras at participating providers (and subject to your limits). The higher your extras cover, the more services you can claim 100% back on.



Create your own cover

You should be able to decide the best cover for your needs, so with HCF you can create a customised hospital and extras package. If you only want hospital cover, or just need an HCF extras product, you can do that too.



Make extras claims the easy way online

We've taken the hassle out of claiming - just send us a photo of your receipt using the HCF app. You can also submit your extras claims online. No more waiting in queues - you can claim wherever you are, whenever you want. It's that easy.



Manage your health cover online

At hcf.com.au you can get fast, convenient access to a range of member services and easily manage your health cover. If you need information for something we haven't covered in this brochure, you can contact us through the email service.



Free health and wellbeing programs

HCF knows how important your health and wellbeing is, so we provide a range of quality health programs to you at no extra cost. See page 14 for more details.



HCF's 30 Day Guarantee

We want you to be happy with your health cover and the choice you've made. So we'll give you a 100% refund up to 30 days after you've joined, as long as you haven't made a claim in that period.

Create the cover that's right for you

Because different people have different health cover needs, we've made it easy to get the health cover you want. Just choose one of the four hospital products below and your preferred extras option.

CHOOSE YOUR HOSPITAL COVER

Corporate Basic	Corporate Mid	Executive	Ultimate
<p>Basic hospital cover designed for the healthy & budget conscious.</p> <ul style="list-style-type: none"> Emergency ambulance No excess for kids Joint investigations & more. 	<p>Affordable hospital cover for some common procedures.</p> <ul style="list-style-type: none"> Emergency ambulance No excess for kids Heart surgery, joint investigations & more Free access to a great range of health and wellbeing programs. 	<p>Comprehensive hospital cover for healthy singles & couples not requiring cover for pregnancy.</p> <ul style="list-style-type: none"> Emergency ambulance Heart surgery, joint replacement surgery & more Free access to a great range of health and wellbeing programs. 	<p>Premium hospital cover for those who prefer complete peace of mind.</p> <ul style="list-style-type: none"> Emergency ambulance No excess for kids No excess for same day hospital admissions Pregnancy, heart surgery, joint replacement surgery & more Free access to a great range of health and wellbeing programs.



CHOOSE YOUR EXTRAS COVER

& OR		Active Lifestyle	Lifestyle Plus	Ultimate
Basic	Lifestyle Essentials	<p>Affordable mid level extras cover for a range of services and therapies.</p> <ul style="list-style-type: none"> 100% back on up to 2 dental checks per year.* No gap eyewear and free digital retinal imaging eye check at participating More for Eyes optical providers.* 	<p>Quality extras cover for a wide range of services and therapies.</p> <ul style="list-style-type: none"> 100% back on up to 2 dental checks per year* 100% back on initial physio, chiro, osteo, podiatry consult* No gap eyewear and free digital retinal imaging eye check at participating More for Eyes optical providers.* 	<p>Top level extras with the highest coverage for therapies and services.</p> <ul style="list-style-type: none"> 100% back on up to 2 dental checks per year* 100% back on initial physio, chiro, osteo, podiatry consult* No gap eyewear and free digital retinal imaging eye check at participating More for Eyes optical providers.*

*at participating providers and subject to your annual limits.

100% BACK
HCF EXTRAS COVER

HCF lets you claim back up to 100% of the cost of certain services at participating **More for You** providers (depending on which cover you take out).

HCF has a level of cover for all life stages

What life stage are you at?

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 covered on the membership.



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 total peace of mind.



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.



STAND ALONE COVER

Only need a particular hospital or extras cover? You can choose any one of our hospital or extras. And it's easy to add other covers if you need to.



NO KIDS, NO WORRIES

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 total peace of mind.



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.



ALREADY PREGNANT

We want to help you have the best possible pregnancy and birth, so feel free to speak to us about the options available to you on your level of cover.



Private hospital services

Private hospital services

	Budget friendly	Mid- range	Highest cover	
	Corporate Basic	Corporate Mid	Executive	Ultimate
Excess (per person per calendar year)	\$250, \$500	Nil, \$250, \$500	Nil, \$250, \$500	Nil, \$250, \$500
No excess for kids	✓	✓	✓	✓
Excess waiver for same day hospital admissions	x	x	x	✓
Available as hospital cover only (without extras)	Yes	Yes	Yes	Yes
Examples of what's covered Includes accommodation, operating theatre, intensive care, Government approved prostheses, pharmaceuticals# and physiotherapy as part of your covered admission at a participating private hospital				
Emergency ambulance	✓	✓	✓	✓
Accident related treatment after joining	✓	✓	✓	✓
Removal of tonsils, adenoids, appendix	✓	✓	✓	✓
Surgical treatment of a hernia	✓	✓	✓	✓
Removal of kidney stones & gall stones	✓	✓	✓	✓
Digestive disorder procedures (e.g. bowel surgery)	✓	✓	✓	✓
Cancer related services (e.g. chemotherapy)	✓	✓	✓	✓
Heart surgery, including diagnostic & therapeutic cardiac procedures	x	✓	✓	✓
Spinal surgery (other than surgery related to spinal scoliosis)	x	x	✓	✓
Surgery related to spinal scoliosis	x	x	x	✓
Cochlear implant surgery & bone anchored hearing devices*	x	x	x	✓
Insulin pump treatments†	x	x	x	✓
Care involving dialysis for chronic renal failure	x	x	x	✓
Rehabilitation services	⚠	⚠	⚠	✓
Psychiatric services	⚠	⚠	⚠	✓
Gastric banding & obesity surgery	x	x	x	✓
Assisted reproductive services (e.g. IVF, GIFT)	x	x	x	✓
Pregnancy & birth related services	x	⚠	⚠	✓
Joint investigations & reconstructions	✓	✓	✓	✓
Joint replacements (e.g. hip replacements, knee replacements)	x	⚠	✓	✓
Cataract and other lens related surgery	x	✓	✓	✓
Sterilisation	x	✓	✓	✓
Elective cosmetic surgery	x	x	x	x
Podiatric surgery by an accredited podiatrist	x	x	⚠	⚠
All other in-hospital services where a Medicare benefit is payable	✓	✓	✓	✓

[#] Excluding experimental and high cost non-PBS drugs. See page 23 for details.

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

[†] 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 or page 15 of the Member Guide for details.

Hospital waiting periods	
Palliative care	2 months
Psychiatric services	
Rehabilitation services	
Pre-existing ailments or conditions	12 months
Pregnancy & birth related services	
All other hospital services	2 months
Extras waiting periods	
Health Management Programs	6 months
Artificial appliances (e.g. low vision aids, blood glucose monitors)	12 months
Foot orthotics	
Pre-existing ailments & conditions	
Dental bleaching	
Bridges	
Crowns	
Dentures	
Endodontics	
Occlusal therapy	
Oral surgery	
Orthodontics	
Periodontics	
Prosthodontics	
Veneers	
Hearing aids	24 months
All other extras services	2 months
Ambulance waiting periods	
Emergency ambulance (where not for pre-existing ailments)	1 day
Pre-existing ailments	12 months

✓ Covered ⚠ Minimum Benefits x Exclusions

For more information on Minimum Benefits and Exclusions, see page 22. Waiting periods vary according to the type of treatment or service. See page 20 of the Member Guide for more information.

Extras benefits & limits

		Basic	Lifestyle Essentials	Active Lifestyle	Lifestyle Plus	Ultimate
100% BACK HCF EXTRAS COVER At participating providers, subject to your cover and annual limits To find out more, visit hcf.com.au/100back	No gap dental check through HCF's <i>More for Teeth</i> provider network (not available in NT & Tas)	✗	✗	2 check-ups per year	2 check-ups per year	2 check-ups per year
	No gap eyewear and free digital retinal imaging eye check through HCF's <i>More for Eyes</i> provider network	✓	✓	✓	✓	✓
	No gap for your initial physiotherapy, podiatry, chiropractic and osteopathy consultation through HCF's <i>More for Muscles</i> , <i>More for Feet</i> and <i>More for Backs</i> provider network	✗	✗	✓	✓	✓
LIMIT BOOST	Use your 'Limit Boost' to top up your optical and/or dental annual limit each year. See page 13 for details	✗	✗	✓	✓	✓

Services	Details	Waiting Periods	Annual limits, per person per calendar year, unless otherwise specified (set benefits apply per service or item)				
General Dental	Diagnostic & preventative dental (service limits apply e.g. maximum 1 or 2 scale & clean per person per year)	2 months	\$450			No annual limit (service limits apply)	No annual limit (service limits apply)
	Simple fillings (1-2 surfaces)					\$950	\$1,150
	Extractions						
Major Dental	Oral surgery (including wisdom tooth removal)	12 months	✗	\$500	Year 1 \$700 Year 2 \$750 Year 3 \$800	\$950	\$1,150
	Complex fillings (3 or more surfaces)						
	Periodontics, Endodontics						
	Implants, Veneers, Crowns, Bridges		✗				
	Dentures		✗				
	Orthodontics - Specialist dentist / General dentist		✗	✗	\$600/\$300 max. per year \$1,800/\$900 lifetime limit	\$800/\$400 max. per year \$2,400/\$1,200 lifetime limit	\$800/\$400 max. per year \$2,400/\$1,200 lifetime limit
Optical	Optical	2 months	\$150	\$180	\$200	\$210	\$250
Therapies	Physiotherapy (group & classes covered under Health Management)	2 months (12 months for foot orthotics)	\$200	\$250	Year 1 \$400 Year 2 \$450 Year 3 \$500	\$550	\$750
	Exercise physiology (group & classes covered under Health Management)		✗				
	Occupational therapy		✗	✗			
	Psychology (after Medicare entitlement exhausted)		✗	✗			
	Chiropractic		\$120	\$150	\$300 (\$200 max. per therapy except for Chiro & Osteo)	\$350 (\$250 max. per therapy except for Chiro & Osteo)	\$450 (\$250 max. per therapy except for Chiro & Osteo)
	Osteopathy						
	Remedial massage						
	Myotherapy						
	Acupuncture, Chinese herbal medicine						
	Naturopathy / Nutrition consultation						
	Alexander technique						
	Podiatry services (including foot orthotics)						
	Dietetics		✗	✗	Year 1 \$200 Year 2 \$225 Year 3 \$250	\$300	\$450
	Audiology		✗	✗			
	Speech pathology		✗	✗			
Other	Travel & accommodation (200km round trip)	2 months	✗	✗	\$200	\$250	\$250
	HCF approved pharmacy after PBS equivalent co-pay	2 months	✗	✗	\$180	\$280	\$280
	Vaccines & immunisations	2 months	✗	\$100			
	Artificial aids	12 months	✗	✗	\$150	\$200	\$250
	Hearing aids	24 months	✗	✗	\$600 up to \$1,600	\$800 up to \$1,800	\$800 up to \$1,800
	Health Management Programs (e.g. exercise classes, weight management)	6 months	\$50 per person \$100 per policy	\$50 per person \$100 per policy	\$75 per person \$150 per policy	\$100 per person \$200 per policy	\$150 per person \$300 per policy
	Emergency ambulance (see page 24 for details and limits)	NSW/ACT	1 day	No annual limit	No annual limit	No annual limit	No annual limit
		VIC/NT/WA/SA	1 day	1 per person 2 per policy	1 per person 2 per policy	1 per person 2 per policy	1 per person 2 per policy



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 with extras cover at HCF branches in NSW, Vic, Qld, ACT & SA.

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.

To find out more, see hcf.com.au/victorchang or call 13 13 34.

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 Years of Membership	Active Lifestyle		Lifestyle Plus		Ultimate Extras	
	Single	Couple/Family	Single	Couple/Family	Single	Couple/Family
Year 1	N/A	N/A	N/A	N/A	N/A	N/A
Year 2	\$50	\$100	\$75	\$150	\$100	\$175
Year 3	\$75	\$125	\$100	\$175	\$125	\$200
Year 4	\$100	\$150	\$125	\$200	\$150	\$225
Year 5	\$125	\$175	\$150	\$225	\$175	\$250
6 years or more	\$150	\$200	\$175	\$250	\$200	\$275

The above table shows the **Limit Boost** that applies to each level of cover, per year, for Single or Couple/Family membership. Your limit boost renews annually, but any unused limit boost cannot be carried into the following year (only available when extras are taken together with hospital cover).



More ways we can help

Your HCF membership gives you access to a wide range of health services and options to protect and support you and your family.

HELPING YOU LEAD A HEALTHIER AND HAPPY LIFE

*My*Health Guardian®

Our unique program, *My Health Guardian*, helps you create an easy and effective wellbeing plan. Whether you want to lose weight, have more energy or just feel healthier, this innovative service helps you take the necessary steps towards a healthy, happy life.

My Health Guardian is provided at no cost to members aged 18 years and over with hospital or extras cover.

Getting started?

We recommend you see how you or a family member can benefit.

To find out what *My Health Guardian* can do for you, take the virtual tour at hcf.com.au/mhg

HCF reserves the right to revise, alter, adapt or withdraw any of our Health and Wellbeing programs from time to time. Please consult our website for the most up to date information about these programs.

WELL-BEING PLUS MOBILE APP

To help keep you motivated and on target to achieve your health goals, you can track your health and wellbeing wherever you are with the *My Health Guardian* mobile app, 'Well-being Plus'.



Visit hcf.com.au/mobile-apps for information on how to use the app. Available for iPhone and Android.

HAVE A DOCTOR COME TO YOU

*My*Home Doctor™

My Home Doctor is a convenient, non-emergency, after-hours home doctor service for eligible members in selected areas. Rather than wait to see a doctor in a hospital, *My Home Doctor* brings medical expertise directly to you.

This service is provided at no cost if you have HCF hospital cover.

To see if your area is covered, contact us or visit hcf.com.au/mhd



GET MEDICAL ADVICE FROM WORLD-LEADING SPECIALISTS

*My*Global Specialist®

If you or someone on your family membership had a serious illness, wouldn't it be reassuring knowing you could access a world-leading medical expert to review your case? *My Global Specialist* is an innovative medical information service available to members with Corporate Mid Hospital, Executive Hospital and Ultimate Hospital, when taken in combination with extras cover.

You'll have access to a global network of 50,000 medical experts to review your medical records and report on your diagnosis and treatment plan and answer any questions you have. This service is available through Best Doctors, the world's leading resource for specialist medical advice, founded by doctors from the Harvard Medical School.

Please visit hcf.com.au/mgs or contact us for more information.

HEALTHY WEIGHT FOR LIFE

HCF believes healthy living starts with awareness and education. Our Healthy Weight For Life programs are designed to promote and teach skills to achieve and maintain a healthy weight, for eligible members with Type 2 Diabetes, Cardiovascular conditions and Osteoarthritis.

The programs have shown positive results, including major improvements to the health and wellbeing of participants.

Visit hcf.com.au/hwfl for more information.



Other insurance options

Your HCF membership gives you a 10% discount on Pet and Travel Insurance.



Travel Insurance

10% discount for members

When you travel overseas, Australian health cover doesn't protect you.

HCF travel insurance provides:

- Worldwide emergency assistance
- A range of benefits for overseas medical and hospital expenses
- Legal assistance
- Compensation for journey delays or lost luggage
- Plus more.

Visit hcf.com.au/travel for more information.

We recommend that you read the Travel Insurance Product Disclosure Statement and Financial Services Guide which is available by calling **13 13 34** or visiting hcf.com.au/travel before deciding to buy or continue to hold this product.

The HCF Travel Insurance Policy is issued by QBE Insurance (Australia) Limited ABN 78 003 191 035, AFSL 239 545.



Pet Insurance

10% discount for members

If your dog or cat is suddenly or unexpectedly injured or becomes ill, pet insurance can help pay for veterinary expenses.

- Choice of two comprehensive covers
- Up to 80% of covered veterinary expenses (less an annual excess that you choose).

Visit hcf.com.au/petinsurance for more information.

We recommend that you consider the Pet Insurance Product Disclosure Statement and Financial Services Guide which is available by calling **1800 630 681** or visiting hcf.com.au/petinsurance before deciding to buy or continue to hold this product.

HCF Pet Insurance is issued by The Hollard Insurance Company Pty Ltd, ABN 78 090 584 473, AFSL 241 436.

Sometimes in life, a little help is all you need



More at Home
Community Care

More at Home is a community care service, providing quality home support to those who need a helping hand. Everyone has different needs, which is why our services are tailored to your personal needs and preferences, ensuring we provide you with the perfect 'fit'.

We'll give you access to a compassionate professional who can assist you with domestic and/or personal care. We'll help with housework, shopping, meal preparation, getting you ready in the morning and providing transport - if needed. Our nursing services may also assist you with your medical needs following surgery and are available on a continuous basis.

A new HCF service, More at Home is currently available in Northern and Western Sydney and anticipated to be available in other areas in the future. This paid service is managed by Manchester Unity, a HCF subsidiary with 65 years of experience providing high quality aged care services for Australians. To find out more, visit moreathome.com.au or call **1300 550 124**.



Cash Assist Covers

For that extra peace of mind, HCF offers a range of low cost options that provide cash assistance to help you recover from those unexpected accidents and illnesses.



Kids' Accident Cover

- Up to \$100,000 cover
- Only 90 cents per week per child

Affordable cover which pays up to \$100,000 if your child (under 17) is accidentally injured.

- Specified sum paid for injuries
- Cover against accidents
- Cover 24 hours a day anywhere in Australia
- Paid regardless of any other benefits



Smart Term Insurance

- Up to \$500,000 cover
- From \$3.45 per week

Pays cash in the event of death or terminal illness.

- Nine benefit levels to choose from, ranging from \$100,000 to \$500,000
- Benefit doubled if death is caused by an accident
- Early payment of \$10,000 to cover funeral expenses (applies to death by accident in the first 3 years and thereafter for all conditions)
- Easy to apply - no blood tests or medicals



Personal Accident Insurance

- Up to \$50,000 cover
- From \$3.15 per week

Designed for those aged 55 and over, this cover pays a specific cash benefit if you suffer one of the listed injuries such as burns, fractures and dislocations.

- Choice of \$25,000 or \$50,000 cover
- Lump sum cash benefit
- No pre-existing conditions exclusions
- Pays a benefit in the event of accidental death



Permanent Disability Benefit Plus

- Up to \$100,000 cover
- \$1 per week for singles
- \$2 per week for families

Low cost cover which provides up to \$100,000 protection in the event you are permanently disabled due to an accident.

- Single and family cover options
- Up to \$10,000 is paid for each of your children
- Pays your HCF Health Insurance premium if on claim (up to \$1,000 for singles, \$2,000 for families)
- Cover against accidents
- Specified sum paid for injuries



Cash Back Cover

- \$5,000 Benefit
- \$2 per week for singles
- \$4 per week for families

Pays \$5,000 if you suffer an accident requiring surgery within 6 months or suffer a listed serious medical condition.

- Cover for illnesses such as heart attack, cancer and stroke
- Single and family cover options
- Make multiple claims up to a total of \$20,000 for singles and \$40,000 for families



Medical Trauma

- Up to \$50,000 cover
- From \$2.50 per week

Pays cash if you suffer one of over 40 listed serious medical conditions.

- Choice of \$25,000 or \$50,000 cover
- Lump sum cash benefit
- Cover for serious illnesses such as heart attack, cancer and stroke (90 day waiting period applies)
- Single and family cover options



Income Assist Insurance

- Up to \$6,000 per month
- From \$1.65 per week

Pays 75% of your monthly income (up to a max. \$6,000) for 12 months if you are unable to work for more than 30 days.

- Cover against accident and illness
- Additional benefits paid for child care expenses and bed confinement
- Premiums may be tax deductible
- Protection for your biggest asset - your income

For more information on Cash Assist Covers, visit

hcf.com.au/cashassist

The Product Disclosure Statement and Financial Services Guide for Cash Back Cover, Kids' Accident Cover and Permanent Disability Benefit Plus is available on pages 26-29. For more information on Smart Term Insurance, Income Assist Insurance, Medical Trauma and Personal Accident Insurance, please visit hcf.com.au, call **13 13 34**, or visit your local branch. Cooling off period applies.

The Fine Print

Important things you need to know when deciding on private health insurance.

REBATES, SURCHARGES AND INCENTIVES

Changes to private health legislation can affect your choice of health cover, so it's important to understand how to maximise your 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 also your age.

You can elect to take the rebate either as:

- A reduced premium
- OR
- A tax offset credit in your annual tax return.

You can use the table on page 21 as a guide to nominating your rebate tier.

When calculating your income you need to include taxable income, fringe benefits, reportable superannuation contributions, net financial investment losses and more.

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

See table opposite 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 take responsibility for their health care. It applies to people earning a taxable income of \$90,001 or more per year for singles and \$180,001 and over for couples and families where they don't have eligible private hospital cover.

You can avoid having to pay this simply by having eligible HCF hospital cover. If you don't have eligible private hospital cover and you fall into these income thresholds then you will be charged up to an additional 1.5% surcharge on your Medicare levy when your tax return is assessed. Please refer to the 'Medicare Levy Surcharge' section of the table below to see what your surcharge may be.

Lifetime Health Cover

Lifetime Health Cover (LHC) is a Government initiative designed to encourage 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 do not have a product that includes 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 will pay a 2% loading on top of your premium for every year you are aged over 30.

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

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

The Australian Government Rebate does not apply to the LHC component of private health insurance. This means if you are eligible to receive the rebate and also have a LHC loading, the rebate will not apply to the LHC portion of your health insurance.

You can use the Lifetime Health Cover calculators to find out if you need to pay the LHC loading by visiting privatehealth.gov.au and looking for Lifetime Health Cover.

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

Income thresholds for the 2014/15 income tax year

Income				
Type of member	No Tier	Tier 1	Tier 2	Tier 3
Singles	≤ \$90,000	\$90,001 - 105,000	\$105,001 - 140,000	≥ \$140,001
Families*	≤ \$180,000	\$180,001 - 210,000	\$210,001 - 280,000	≥ \$280,001
Rebate				
< Age 65	29.040%	19.360%	9.680%	0%
Age 65-69	33.880%	24.200%	14.520%	0%
Age 70+	38.720%	29.040%	19.360%	0%
Medicare Levy Surcharge				
All ages	0.0%	1.0%	1.25%	1.5%

Thresholds effective from 1 July 2014. Rebate amounts listed are effective from 1 April 2014 to 31 March 2015, and are indexed to the Consumer Price Index (CPI) each year.

***Note:** Single parents and couples (including de facto couples) are subject to the family tiers. For families with children, the thresholds are increased by \$1,500 for each child after the first.

THINGS YOU NEED TO KNOW

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, a medical practitioner appointed by HCF will examine information provided by your doctor, together with other relevant claim details.

Hospital cover 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.

HCF has agreements with over 440 private hospitals around the country. For a full list of participating private hospitals, visit hcf.com.au/participatinghospitals

Minimum Benefits

Some procedures are paid at Minimum Benefits, depending on the hospital cover you select. Minimum Benefits is the rate set out by the Commonwealth Minister for Health as the minimum benefit for a shared room and benefits for Government approved Prostheses List items.

In a private hospital: These benefits would not be adequate to cover all hospital costs and are likely to result in significant out-of-pocket expenses.

In a public hospital: As a private patient in a public hospital, in the event these benefits are less than what your chosen public hospital charges, you may have out-of-pocket expenses to pay.

What happens if I choose to be a private patient in a public hospital?

We pay Commonwealth Minimum Benefit for a shared room and a higher rate for a single private room. You will need to confirm with the hospital if they will be charging you any out-of-pocket expenses. The hospital has the responsibility to explain to you any out-of-pocket expenses and obtain written informed financial consent (IFC), prior to admission.

What happens if I choose to go to a non-participating private hospital?

We pay Commonwealth Minimum Benefit towards accommodation and prostheses. Out-of-pocket expenses may apply to accommodation, theatre and labour ward fees. You need to obtain a quote from the hospital. The hospital has the responsibility to explain to you any out-of-pocket expenses and obtain written informed financial consent (IFC), prior to admission.

What is informed financial consent (IFC)?

IFC is the provision of cost information to patients, including notification of likely out-of-pocket expenses (gaps), by all relevant service providers, in writing, prior to admission to hospital or treatment.

Who can be covered?

Prior to taking out health insurance, we encourage you to understand who can be covered under your policy. Our staff will be happy to explain who can be covered and answer any questions you have.

Alternatively, you can read more about who can be covered in the HCF Member Guide or by visiting hcf.com.au/faqs and looking under 'Who does my membership cover?'

Cover for your dependants

If you're pregnant and on a single or couple membership, make sure you upgrade to a family membership at least two months prior to the birth of your child (ideally, as soon as pregnancy is confirmed) to ensure your child is covered. If your child is born prematurely and you have not held family scale membership for at least two months, your child will not be covered until the two months wait period has been served.

Your children are covered under your family cover until the day before they turn 22, provided they aren't married or in a de-facto relationship.

If your children are full-time students aged between 22-24, aren't married or in a de-facto relationship and are primarily reliant on you for maintenance and support, you can register them as student dependants, and they will continue to be covered for no extra cost until the day before they turn 25.

If your children aren't full-time students, you can also continue to cover them until they turn 25 with extended family cover, provided they aren't married or in a de-facto relationship.

You can take out this cover for a surcharge on top of your existing premium if you have Corporate Basic, Corporate Mid or Ultimate.

Insulin Pumps

For information about insulin pump initialisation, replacement pumps and your benefit entitlement, please refer to the Member Guide or hcf.com.au/insulinpumps

Exclusions

If you need treatment for any procedures listed as an Exclusion in your hospital cover, you won't receive any benefits from us and you may have significant out-of-pocket expenses. Make sure you have reviewed the excluded services on your selected hospital cover to ensure this cover is appropriate for your needs.

What's not covered

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

- Where there are Exclusions on your policy
- Claims made two years or more after the date of service
- When you or your dependants have the right to recover the costs from a third party other than us, including an authority, another insurer (like motor vehicle or workers compensation), or under an employee benefit scheme
- Treatment for pre-existing ailments or conditions within waiting periods
- Goods and services received during any period where your payment is in arrears, your membership is suspended or you're within waiting periods
- Treatment that we deem inappropriate or not reasonable, after receiving independent medical or clinical advice
- Experimental treatments
- Any service where the treatment does not meet the standards in the Private Health Insurance Accreditation Rules 2011 or as amended
- Services that aren't delivered face to face, like online or telephone consultations, unless you're participating in one of our chronic disease management or health improvement programs like *My Health Guardian*
- Goods or services supplied by a provider not recognised by us
- Goods or services provided outside Australia, which don't meet the requirements under the Private Health Insurance Act (2007)
- Claims that don't meet our criteria.

In addition, our hospital cover doesn't include:

- Medical and associated hospital benefits for which there is no Commonwealth Medical Benefits Schedule item number or when the medical services are not approved for payment by Medicare
- Private room accommodation for same-day procedures
- Experimental and high cost non-PBS drugs
- Procedures normally performed in the doctor's surgery or as an outpatient
- Private hospital emergency room fees
- Respite care
- Nursing home-type patients are limited to benefits set by the Commonwealth Department of Health
- Special nursing, like your own private nurse
- Luxury room surcharge
- Donated blood and blood products and donated blood collection and storage
- PBS pharmaceutical benefits in non-participating private hospitals
- Pharmaceuticals (including PBS pharmaceuticals benefits) and other sundry supplies not directly associated with the reason for admission
- Take home items e.g. crutches, toothbrushes and drugs
- Personal convenience items e.g. phone calls, newspapers, magazines and beauty salon services
- Massage and aromatherapy services

- Some services provided while in hospital by non-hospital providers
- Where a service is not covered for the payment of benefits in a hospital, any associated items (e.g. medical gap, prosthesis, pharmacy) are also not covered
- The gap on government approved prostheses in non-participating private hospitals
- The gap on government approved gap-permitted prostheses items.

In addition, our extras cover doesn't include:

- Psychological and developmental assessments. Where psychology is included in your cover, psychology treatment is only payable when your GP has prescribed a mental health plan under Medicare and your psychology entitlements from Medicare for that year are exhausted
- Goods and services while a hospital patient, except for eligible oral surgery
- Pharmacy items that aren't on our approved pharmacy list e.g. items listed on the PBS, items prescribed without an illness, items that are available without a prescription, items for reproductive medicine, sexual performance, items for weight loss, or items that are not TGA approved
- Goods or services that had not been provided at time of claim e.g. pre-payment
- Fees for completing claim forms and/or reports
- Goods and/or 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
- Co-payments and gaps for Government funded health services e.g. the co-payment for PBS items, or services where you receive a rebate from Medicare such as the Child Dental Benefit Schedule, or Chronic Disease Management - Individual Allied Health Services
- Where a provider is not in an independent private practice

- More than one of the following therapies received on the same day (physiotherapy, chiropractic and osteopathy).

Emergency ambulance (extras only)

For residents of NSW & ACT, you are covered for State Government emergency ambulance services in NSW and ACT where you require treatment for an emergency. In all other states, we cover you for one State Government provided emergency ambulance service per person (and two per policy) per year, except where you are otherwise covered e.g. through your State Ambulance arrangements. No benefits are claimable for residents of Queensland and Tasmania.

Please Note

This is not a comprehensive list of items not 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 on the HCF website or at HCF branches.

Changes to products and pricing

Please read and retain this brochure for future reference. We however, reserve the right to make changes to prices, product specifications and other conditions relating to the products contained in this brochure. Please contact us prior to purchasing any products to make sure that you have the latest information available.

HOW YOUR RIGHTS ARE PROTECTED

Private Health Insurance Code of Conduct

We support the Private Health Insurance Code of Conduct by ensuring:

- You receive correct information about private health insurance
- You're aware of the internal and external dispute resolution procedures
- You can make an informed decision about your purchase through informative policy documentation
- You're protected in accordance with the privacy principles.

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



Private Patients Hospital Charter

We also support the Private Patients Hospital Charter, which outlines what members can expect from doctors, hospitals and their health fund.

For a copy, call **13 13 34** or visit the Private Health Insurance section for consumers at health.gov.au

Have a complaint?

If there's a problem with your membership, contact HCF directly so we can assist in resolving it as quickly as possible. If necessary, an Internal Dispute Resolution Officer (IDR) will be appointed to independently review the issue.

Private Health Insurance Ombudsman

If your complaint isn't dealt with satisfactorily, you can also contact the Private Health Insurance Ombudsman, an independent body formed to help resolve complaints and provide advice and information.

To contact the Ombudsman:

Call: 1800 640 695

Visit: phio.org.au

Write: Private Health Insurance Ombudsman Suite 2, Level 22, 580 George St Sydney NSW 2000

OUR PRIVACY STATEMENT

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.

The types of organisations and individuals we disclose personal information to include:

- Third party organisations who deliver services on our behalf or to us, some of whom may be located overseas
- Health service providers, to improve their ability to provide you with health services
- Research companies contracted to us to ask your opinion on improving our service, benefits or product offerings
- Other insurers or reinsurers, including other health insurers if you have moved your insurance to or from HCF
- Government, including law enforcement agencies
- Related HCF companies
- The named Policyholder who has your authority
- Any other authorised individual.

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 emailing service@hcf.com.au or calling **13 13 34**.

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.

CASH ASSIST

Combined Product Disclosure Statement and Financial Services Guide

PRODUCT DISCLOSURE STATEMENT

This is a Product Disclosure Statement for Cash Assist insurance products sold by HCF and issued by HCF Life Insurance Company Pty Limited.

Cash Assist options are available to permanent Australian residents aged between 16-60, with the exception of Kids' Accident Cover which is available for children under 17.

Cash Back Cover

Only \$8.65 per month for singles or \$17.30 per month for families.

Pays you \$5,000 if you or any person covered by your membership suffers an accident that requires surgery in an operating theatre within six months of the date of the accident.

You also receive \$5,000 for malignant cancer, chronic kidney failure, heart disease requiring bypass surgery, heart attack, stroke, or any disease requiring a major organ transplant.

A maximum of \$20,000 is payable for single cover and \$40,000 for family cover if you or your family have a number of accidents or illnesses during the life of the policy.

Kids' Accident Cover

Only \$3.90 per child per month.

Pays up to \$100,000 if your child (under 17) is accidentally injured, 24 hours a day, anywhere in Australia, provided the accident results in impairment immediately or permanent disability within six months. The sum is paid regardless of any liability or damages claimed and covers impairments detailed in the table opposite and on page 28.

Kids' Accident Cover Benefits

Impairments	Benefits \$100,000 Maximum
Broken or fractured bones	
Skull	
• Compound or depressed fracture	\$2,000
• Hairline fracture	\$1,000
Spine	
• Fractured vertebrae	\$2,000
• Chipped vertebrae	\$400
Neck	\$2,000
Hip, pelvis or jaw	\$1,500
Leg, ankle or knee	
• Compound (open)	\$1,000
• Simple (closed)	\$500
Shoulder or cheekbone	\$600
Arm, elbow or wrist	
• Compound (open)	\$500
• Simple (closed)	\$250
Ribs	\$500
Nose or collarbone	\$400
Foot (other than toe)	\$200
Hand (other than finger or thumb)	\$200
Burns	
• Second degree	\$400
• Third degree	\$650
Wounds (requiring more than 3 stitches)	
• Per stitch	\$10
Internal injuries	
• Rupture of internal chest or abdominal organ	\$500
Permanent disabilities	
• Total & permanent paralysis of all limbs	\$100,000
• Total & permanent paralysis of both legs & the lower part of the body	\$50,000
• Permanent loss of all sight in both eyes	\$50,000
• Permanent loss of all sight in one eye	\$3,000
• Permanent & total loss of use of both hands or both feet	\$30,000
• Permanent & total loss of use of one hand or one foot	\$3,000
• Permanent loss of all hearing in both ears	\$50,000
• Permanent loss of all hearing in one ear	\$3,000
• Permanent & total loss of use of one thumb of either hand	\$500

Permanent Disability Benefit Plus

Only \$4.30 for singles or \$8.65 for families per month.

Pays you up to \$100,000 in the event that you or any person covered by your membership has an accident which results in one of the disablements listed in the below table.

Up to \$100,000 is paid for you and your spouse, and up to \$10,000 is paid for each of your children. A maximum of \$100,000 for singles and \$200,000 for families is payable during the life of the policy.

The disablement must occur within six months of the date of the accident.

Plus, your HCF contributions will be paid up to \$1,000 for singles and \$2,000 for families if you are unable to work due to accident, sickness or involuntary unemployment.

When cover ceases

Cash Assist policies expire when the total amount payable has been paid or when your premiums fall two months in arrears. With the exception of Kids' Accident Cover, where benefits expire at age 17, all Cash Assist policies cover up to age 65.

30 Day Guarantee

When you receive your policy document from us, you have 30 days to check whether the policy meets your needs. Within this time, you may cancel your policy in writing and receive a full refund of any money paid, provided you have not made a claim.

Permanent Disability Benefit Plus Benefits

Disablement	Benefit	
	Contributor Or Spouse	Other Persons
• Total & permanent paralysis of all limbs	\$100,000	\$10,000
• Total & permanent paralysis of both legs & the lower part of the body	\$100,000	\$10,000
• Permanent loss of all sight in both eyes	\$100,000	\$10,000
• Permanent loss of all sight in one eye	\$50,000	\$5,000
• Permanent & total loss of use of both hands or both feet	\$100,000	\$10,000
• Permanent & total loss of use of one hand or one foot	\$50,000	\$5,000
• Permanent loss of all hearing in both ears	\$100,000	\$10,000
• Permanent loss of all hearing in one ear	\$50,000	\$5,000
• Permanent & total loss of use of one thumb of either hand	\$40,000	\$4,000

Premiums

Premiums may only increase if this applies to all Policyholders for the product, and we will provide one month's notice to you.

Your premium will also include any stamp duty charged by your State Government, as well as any taxes that may be levied by State and Federal Governments.

Additional information

Select any of these options on your HCF application and you will promptly receive a policy document with full details on your benefits.

A copy is available upon request. Your cover is automatic once we receive your application and payment instructions.

Taxation

Usually, premiums aren't tax deductible and benefits are paid free of personal tax. This is a general statement based on present laws and their interpretation. Individual circumstances may vary and you should consult a professional tax advisor in relation to your individual circumstances.

Exclusions

For all these Cash Assist covers, benefits are not paid for:

- Pre-existing conditions
- Events on or before the first day of cover
- Events that occur outside Australia
- Professional sport, military service, racing or private aviation
- War, hostility, civil commotion, terrorism or insurrection
- Events resulting from intentional self-injury, illegal acts and drugs or alcohol.

For each of these products, benefits are not paid for certain additional events. These events are marked with a cross in the table on the below.

In addition to these exclusions, the contributions component of the Permanent Disability Benefit Plus benefits is not paid for:

- The first 30 days you're not working
- Pregnancy, childbirth, infertility, contraceptive procedures and related conditions
- AIDS
- Events resulting from intentional self-injury, illegal acts and drugs or alcohol
- Events that occur outside Australia or within the first two months of cover
- Pre-existing conditions in the first 12 months of cover
- Unemployment in the first 12 months with your employer.

Event/Reason For Claim	Kids' Accident Cover	Cash Back Cover	Permanent Disability Benefit Plus
Condition within first two months of cover		x	
Conditions covered by workers compensation, third party insurance or social security benefits		x	x
Surgery for diagnostic purposes or not in an operating theatre		x	
AIDS	x	x	
Intentional act by adult person living with child	x		
Event resulting in death within seven days	x		x

Protecting your rights

If you have a complaint about your policy, please contact our Policy Service Team on **13 13 34** and we will attempt to resolve it promptly. If you are dissatisfied with our response, you can contact the Financial Ombudsman Service. This is an independent body that is available to you free of charge.

The Service's address is:

**The Financial Ombudsman Service,
GPO Box 3, Melbourne VIC 3001.
Telephone: 1300 780 808.**

HCF Life Insurance Company Pty Limited

ABN 37 001 831 250, AFSL 236 806
403 George Street, Sydney NSW 2000
Telephone: **13 13 34** Dated: 8 January 2015

FINANCIAL SERVICES GUIDE

This Financial Services Guide (FSG) relates to the services provided by HCF (we, us or our) in relation to the Cash Assist options issued by HCF Life Insurance Company Pty Limited (HCF Life).

This guide is designed to assist you in deciding whether to use any of the services offered by us relating to the HCF Life products as set out in this FSG. It contains information about remuneration paid to us and our staff for the services offered and how complaints against us in relation to these services are dealt with. If we offer or arrange to issue you with any of these products, we will provide you with a Product Disclosure Statement (PDS) relating to that product. This sets out the significant features of the product and will assist you in comparing and making informed decisions about the product.

We provide general advice about the suitability of these products for the needs of members. This means we don't take into account individual objectives, financial situations or needs. You should, before acting on that advice, consider the appropriateness of the advice, having regard to your objectives, financial situation or needs. Please read the PDS before deciding to purchase any of these products.

We are licensed to provide general advice about, and arrange the issue of, life and general insurance products. HCF Life is a wholly owned subsidiary of ours. When we issue you with a policy for a Cash Assist option, we do so under a binder that authorises us to enter into that contract of insurance on behalf of HCF Life.

HCF Life receives the premiums paid for the Cash Assist options. We receive monthly commissions from HCF Life in relation to the Cash Assist options: 40% of the first year's premium, plus an additional commission of 80% of HCF Life's underwriting profit each financial year, calculated as premiums less claims and expenses.

Our staff members receive an incentive, depending on the number of Cash Assist option policies they sell. This will not exceed 20% of the first year's premium.

Both HCF and HCF Life are each responsible for the entire contents of this combined Financial Services Guide (FSG) and Product Disclosure Statement.

We hold Professional Indemnity insurance that complies with the compensation requirements of section 912B of the Corporations Act. This includes cover for claims in relation to the conduct of representatives and employees who no longer work for us, but who did at the time of the relevant conduct.

Should you have a complaint about any of the services we offer in relation to the HCF Life products in this FSG, or a complaint about a product itself, please contact us on **13 13 34** or **service@hcf.com.au** and we will endeavour to resolve it as quickly as possible. If we have not resolved your complaint within 45 days or you're not satisfied with our response, you can contact the Financial Ombudsman Service on **1300 780 808** or by post at GPO Box 3, Melbourne VIC 3001. This is an independent body available to you free of charge.

The Hospitals Contribution Fund of Australia Limited

ABN 68 000 026 746, AFSL 241 414
403 George Street, Sydney NSW 2000
Telephone: **13 13 34** Dated: 8 January 2015



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Get the most from your corporate health cover. Join HCF today.



Go to hcf.com.au/corporate-plans



Visit one of our many branches

Find your closest branch at hcf.com.au/branches



Email corporatesales@hcf.com.au

Ask one of our sales representatives to come to your workplace



Claim extras using our app

Available for iPhone and Android



Call 13 13 34

8am to 8pm Monday to Friday
9am to 5pm on weekends (AEST)

**Get health cover that puts you first.
Switch to HCF. Making the move couldn't be simpler.**

We'll contact your former health fund for you so you can start enjoying the benefits of HCF cover with no additional waiting periods for equivalent levels of cover (excludes hearing aids).

Just call **13 13 34** to find out how.





Corporate application for health insurance

(Please mark 'X')

Join HCF health fund - new to private health insurance (complete sections 1-8, excluding 7) ☐

Transfer to HCF health fund from another fund (complete sections 1-8) ☐

Add people to my membership (complete sections 1a, 2 and 8) ☐

Change my level of cover (complete sections 1a, 3 and 8) ☐

Change my payment details (complete sections 1a, 6 and 8) ☐

Office Use Only

Feb 15

Corp Source code

Deal code

Rate code

Sales Source code

HCF Membership No.

1 a) Your personal details (PLEASE USE CAPITAL LETTERS AND A BLACK PEN)

To be completed by the Policyholder - see section 8 for definition

Title	First name	Middle initial
<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname		Sex (Please mark 'X')
<input type="text"/>		M <input type="checkbox"/> F <input type="checkbox"/>
Home address:		
Unit No.	Street No.	Street name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb		State
<input type="text"/>		<input type="text"/>
Postcode		
<input type="text"/>		
Phone - home	Phone - work	Mobile
<input type="text"/>	<input type="text"/>	<input type="text"/>
Postal address (if different from your home address)		
<input type="text"/>		
Suburb		State
<input type="text"/>		<input type="text"/>
Postcode		
<input type="text"/>		
Email		
<input type="text"/> @ <input type="text"/> . <input type="text"/> . <input type="text"/>		
Date of birth (DD MM YYYY)	Date you wish your membership to commence (DD MM YYYY)	
<input type="text"/>	<input type="text"/>	

b) Choose your cover requirement (Please mark 'X')

Single (go to Section 3) ☐

Couple/Family (go to Section 2) ☐

Single Parent Family (go to Section 2) ☐

Extended Family Cover (go to Section 2) ☐

Retain my existing products ☐

2 Other persons to be covered (Use another form if space is insufficient)

If you are unsure of who can be covered on your membership, refer to the HCF Corporate Products Brochure

First name	First name
<input type="text"/>	<input type="text"/>
Surname	Surname
<input type="text"/>	<input type="text"/>
Date of birth (DD MM YYYY)	Date of birth (DD MM YYYY)
<input type="text"/>	<input type="text"/>
Sex (Please mark 'X')	Sex (Please mark 'X')
M <input type="checkbox"/> F <input type="checkbox"/>	M <input type="checkbox"/> F <input type="checkbox"/>
Relationship	Relationship
<input type="text"/>	<input type="text"/>

Office Use Only

First name

Surname

Date of birth (DD MM YYYY)

Sex (Please mark 'X')

M

F

Relationship

First name

Surname

Date of birth (DD MM YYYY)

Sex (Please mark 'X')

M

F

Relationship

3 Product choices (Please mark 'X')**Hospital Cover Options**☐ Corporate Basic Hospital☐ Corporate Mid Hospital☐ Executive Hospital☐ Ultimate HospitalNil ☐Nil ☐Nil ☐**Hospital excess options**\$250 ☐ \$500 ☐\$250 ☐ \$500 ☐\$250 ☐ \$500 ☐\$250 ☐ \$500 ☐**Extras Cover Options**☐ Basic Extras☐ Lifestyle Essentials☐ Active Lifestyle☐ Lifestyle Plus☐ Ultimate Extras**Additional Cover – Cash Assist**

(See pages 36-41 of the HCF Corporate Products Brochure for further information)

☐ Cash Back Cover☐ Permanent Disability Benefit Plus*☐ Kids' Accident Cover†

*Name of person to be covered by Permanent Disability Benefit Plus

†Name/s of children to be covered by Kids' Accident Cover

(Use another form if space is insufficient)

4 Australian Government Rebate as reduced premiums

If all people on this health policy are listed on a Medicare Card or entitled to a Medicare card, you may apply for the Australian Government Rebate on private health insurance as a reduced premium. Please complete the relevant details below:

Your Medicare card number

Sex (Please mark 'X')

Date of birth (DD MM YYYY)

M ☐ F ☐

Your name as it appears in the Medicare card

First name

Surname

Nominate your rebate tier (for information, refer to page 49 of the HCF Corporate Brochure).

Age	No Tier	Tier 1	Tier 2	Tier 3
Under 65	29.040% <input type="checkbox"/>	19.360% <input type="checkbox"/>	9.680% <input type="checkbox"/>	0% <input type="checkbox"/>
65-69	33.880% <input type="checkbox"/>	24.200% <input type="checkbox"/>	14.520% <input type="checkbox"/>	0% <input type="checkbox"/>
70+	38.720% <input type="checkbox"/>	29.040% <input type="checkbox"/>	19.360% <input type="checkbox"/>	0% <input type="checkbox"/>

5 Reimbursing of claims

To have your claims paid directly into your bank account, please complete the following:

Account name

BSB No.

Account No.

6 Payment method (Please mark 'X')

HCF offers you a number of easy ways to pay your premiums. Please fill out one of the options below to pay your premiums automatically.

☐ Ezipay Direct Debit (please complete Section 6a)☐ Credit Card Authority (please complete Section 6b)☐ Group Payroll Deduction (please complete Section 6c)

a) Ezipay Direct Debit Request

I/We authorise The Hospitals Contribution Fund of Australia Limited User ID Number 245164 to arrange for funds to be debited from my/our account and as prescribed below through the Bulk Electronic Clearing System (BECS).

(Please mark 'X')

Weekly ☐ Fortnightly ☐ Monthly* ☐ Quarterly* ☐ Half yearly* ☐ Yearly* ☐

(DD MM YYYY)

Please debit on the day* of the month. First debit* to occur on
(*Please nominate a day and note that the 28,29,30 and 31 dates are only available for weekly and fortnightly debits.)

Details of account to be debited (all details must be supplied)

Name of financial institution

BSB No.

Account No.

Branch

Account holder name (first initial and surname)

This authorisation is to remain in force in accordance with the terms described in the HCF Direct Debit Customer Service Agreement.

b) Credit Card Authority

Cardholder name (exactly as it appears on your card)

Type of card (Please mark 'X')

Visa ☐ Mastercard ☐ American Express ☐

Debit frequency (Please mark 'X')

Fortnightly* ☐ Monthly* ☐ Quarterly* ☐ Half yearly* ☐ Yearly* ☐

Credit card No.

Expiry date (MM YY)

Please debit my account on the day* of the month

(*Please nominate day: **Debit dates of 28, 29, 30 and 31 are not available**)

This authorisation is to remain in force in accordance with the terms described in the HCF Direct Debit Customer Service Agreement.

c) Group Payroll Deduction Authority

Payroll deductions are available only when your employer has an arrangement with HCF.

Employer's name

Payroll or employee ID

+

I hereby authorise my employer to deduct from my wages or salary. (Please mark 'X')

Weekly ☐ Fortnightly ☐ Monthly ☐ Quarterly ☐ Half yearly ☐ Yearly ☐

Employee's details

Title

First name

Middle initial

Membership No.
(if already a member)

Surname

Date marking the end of the first
deduction pay period (DD MM YYYY)

Total contribution
deductions (if known)

Health \$

Cash Assist \$

Total \$

Other contribution details

If you wish to pay for other HCF memberships please give their details below:

Membership No.

Surname

Membership No.

Surname

7 Interfund transfer (Complete this section if you have been registered with an Australian Registered health fund at any time since 1 July 2000)

Complete the following details and we'll take care of the transfer for you.

I authorise HCF to terminate my membership with my existing health fund and obtain details concerning (Please mark 'X'):

Myself ☐ All persons covered ☐

If you have a direct debit arrangement with your existing health fund please remember to personally advise your bank or your pay office (if you pay by payroll deduction) to cancel your deductions.

Title	First name	Middle initial	Date of birth (DD MM YYYY)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname			
<input type="text"/>			
Name of existing health fund		Membership No.	
<input type="text"/>		<input type="text"/>	
Home address:			
Unit No.	Street No.	Street name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb		State	Postcode
<input type="text"/>		<input type="text"/>	<input type="text"/>
			Cancellation effective from (DD MM YYYY)
			<input type="text"/>

Please note: Due to privacy reasons, your existing health fund may send you the clearance certificate, which you will need to forward to HCF.

Existing fund policy owner signature

Signature

X

8 Declaration (Please read and sign)

I acknowledge and agree that:

- I have the authority to act on behalf of other persons to be covered under the policy, to provide their information (including sensitive information) and to receive from HCF their information for the purposes of the policy;
- I am the policyholder who is responsible for payment of the contribution rates, the ongoing maintenance of the policy, and the receipt of all policy correspondence;
- I am bound by the Health Fund rules of The Hospitals Contribution Fund of Australia Limited (available in HCF branches); and
- HCF deals with personal information of all members in accordance with the HCF Privacy Policy (available on the HCF website and from HCF branches) and I have informed them of this.

I confirm that I have read and understand:

- this declaration and the information relating to my product choice and members' privacy (including the HCF Privacy Policy at hcf.com.au and the Privacy Statement in the HCF Corporate Brochure); and
- the Product Disclosure Statement and Financial Services Guide provided to me with this application, for any Cash Assist options I have chosen.

I authorise payment by the method indicated on the form and have the authority to do so.

I agree that my insurance will commence once my application is accepted.

I declare the information provided to be true and complete.

Signature

X

Date (DD MM YYYY)