

MEDICALCARE PLAN

FOR COMPANY SCHEMES

It's the security of knowing we're there.

PLEASE NOTE:

All benefits in all sections apply to each person on the policy unless otherwise stated.

All benefits included in this brochure are net of any Social Security refund and include GST charged by providers of service.

MEDICALCARE BASE PLAN

PRIVATE HOSPITALISATION SURGICAL BENEFITS

The following section refunds 100% of the usual and customary charges, limited to the benefit maximums for any admission.

THE FOLLOWING SECTION REFUNDS 100% OF THE USUAL AND CUSTOMARY CHARGES LIMITED TO THE BENEFIT MAXIMUMS FOR ANY ADMISSION.

Surgery

An admission for Non Acute Qualifying "Surgical Procedure(s)", together with that procedure's associated recovery time, performed by a Registered Medical Specialist in a Licensed Private Surgical Hospital.

Per Admn Per Year

No limit on

number of

admissions

per year

100% of

actual costs

subject to

usual and

customary

charges

- Surgeon's fee
- · Anaesthetist's fee
- Hospital fees, in a Licensed Private Hospital or Private Facility approved by UniMed for:
- Accommodation
- Theatre fees and Anaesthetic supplies
- PerfusionistIntensive Care and special in-Hospital Nursing
- Recovery Nurse
- X-Ray examination, ECG
- Intravenous Fluids, Irrigating Solutions, Dressings
- Prescriptions and Antibiotics
- Post Operative Physiotherapy fees from a Registered Physiotherapist
- Emergency Ambulance for Hospital admission
- Surgically implanted Prostheses
- Laparoscopic Disposables

Laparoscopic Surgery

Performed by a Registered Medical Specialist in Private Hospital. Benefits as per Surgery section.

Cardiac Surgery

Performed by a Registered Medical Specialist in Private Hospital. Benefits as per Surgery section.

Oral Surgery

All Oral Surgery performed by a Registered Oral Surgeon excluding, under all benefit categories, extraction or surgical removal of teeth, implantation of teeth or costs of titanium implants. Benefit as per Surgery section.

Wisdom Tooth Extraction

Removal of un-erupted or impacted wisdom teeth, including all associated costs

2,400.00 2,400.00

In-Patient Non-PHARMAC Subsidised Pharmaceuticals

Pharmaceuticals prescribed by a Consulting Physician, Paediatrician or Specialist Registered Medical Practitioner which have been approved by Medsafe and are not fully or partly subsidised by PHARMAC through the New Zealand Pharmaceutical Schedule.

2,000.00

2,000.00

Surgical Tests & Investigations	Per Admn	Per Year
Gastroscopy	1,800.00	No Max
Colonoscopy	2,500.00	No Max
Surveillance Colonoscopy or Gastroscopy Payable where no signs or symptoms are present, reimbursement of 50% of actual costs up to limit.	Per Admn	Per 24 Months
Limit of one procedure every 24 months.		
Gastroscopy	900.00	900.00
Colonoscopy	1,250.00	1,250.00
Angiograms	Per Admn	Per Year
Angiograms, Angioplasty Including Hospitalisation, Specialist & Ancillary fees.		
• Angiogram	Unlimited	No Max
• Angioplasty	Unlimited	No Max
Lithotripsy		
Performed by a Registered Medical Practitioner. Special conditions apply, refer to full conditions of membership.	Unlimited	No Max

Breast Reconstruction

Breast reconstruction performed by a Registered Medical Practitioner in Private Practice.

For all stages of breast reconstruction performed under the same anaesthetic as the initial mastectomy: benefits as per Private Hospitalisation Surgical Benefits section.

For all stages of breast reconstruction performed after the initial mastectomy or not under the same anaesthetic as the initial mastectomy, an amount (payable once only) being the lesser of either the total cost of the reconstruction (including nipple reconstruction and tattooing); or \$15,000. For the avoidance of doubt, this benefit section excludes surgery to the breasts to achieve the correct symmetry and/or look and/or feel of the breasts. This benefit is only available for surgery following first diagnosis of breast cancer on or after 1 May 2005 and no benefit will be paid under this section unless UniMed has paid for the initial mastectomy.

Parent AccommodationPer NightPer YearIn the event of a policyholder's insured child having surgery in a private hospital for which cover is available, a benefit for
parent accommodation in the hospital is payable200.00600.00

Accident Surgery

Before Qualifying "Surgical Procedures" are undertaken UniMed must receive written confirmation from the "ACC" regarding their decision to either accept or decline your claim for surgery. Qualifying Injury Claim(s) that the "ACC" agree to accept will also be accepted by UniMed for "top-up" coverage to the benefit levels applicable to the "Private Hospital Surgical Benefits" section. If "ACC" decline your claim UniMed will, at its sole discretion either assist with the total cost of surgery or pay the difference between the actual cost of surgery and what the "ACC" would have contributed had your claim been accepted by them to the levels applicable to the "Private Hospital Surgical Benefits" section. No cover is provided for workplace/employment related injuries/conditions first occurring on or after 1 July 1999.

THE FOLLOWING BENEFITS REFUND 100% OF ACTUAL MEDICAL COSTS TO THE SPECIFIED MAXIMUMS.

PUBLIC HOSPITAL BENEFITS

PUBLIC HOSPITAL CASH GRANT

Medical/Surgical AdmissionsPer NightPer YearWhen admitted to Public Hospital for a full 24 hours or more.125.001,500.00(Child benefit - 50% of above. All injury admissions are excluded.)

LOYALTY BENEFITS

THESE BENEFITS RECOGNISE LONG TERM CONTINUOUS MEMBERSHIP.

Existing Conditions

As negotiated with your place of employment and detailed within the "Special Joining Concessions".

Sterilisation procedures

Sterilisation procedures are covered for males and females after three years' continuous membership in the MedicalCare Plan. Benefits as per Surgery section.

Obesity Surgery

Benefits apply after five years' continuous membership in this plan. A one time grant is payable of 50% of actual costs up to the benefit limit.

Per Lifetime 8,000.00

Overseas Treatment

Benefits apply after five years' continuous membership in this plan. A grant is payable of 75% of usual and customary charge for the identical procedure in New Zealand. The procedure must be available in New Zealand but the member prefers to be treated overseas. The procedure must be performed by a medical practitioner who is registered to carry out the procedure in the country where the procedure is taking place. A referral for the procedure from a New Zealand Registered Medical Practitioner will be required. Reimbursement of travel or accommodation costs is excluded. Benefit payable as reimbursement on production of invoices and Prior Approval is required for the treatment to be eligible.

PRIVATE HOSPITALISATION MEDICAL BENEFITS

Non Acute Medical Hospitalisation	Per Admn	Per Year
(Excludes Psychiatric/Geriatric) in a Licensed Private Hospital, on admission and under the care of a Registered Medical Practitioner.		
Refund of Hospital Accommodation Fees.	10,000.00	10,000.00
 Intravenous Fluids, Irrigating Solutions, Dressings, Prescriptions and Antibiotics. 	500.00	500.00

Psychiatric/geriatric Hospitalisation	Per Admn	Per Yea
n a Licensed Private Hospital, on admission and under the care of a Specialist Psychiatrist/Geriatrician.		
 Refund of Hospital Accommodation Fees. Intravenous Fluids, Irrigating Solutions, Dressings, Prescriptions and Antibiotics. 	2,000.00 500.00	2,000.0 500.0
	300.00	300.0
ACUTE PRIVATE HOSPITALISATION MEDICAL/SURGICAL GRANT		.
An admission for an "Acute" Qualifying Medical Condition or "Surgical Procedure" under the care of a Registered Medical Practitioner in a Licensed Private Hospital.	5,000.00	5,000.0
CHEMOTHERAPY TREATMENT		
Benefit payable for treatment by a Registered Oncologist in Private Practice. Benefit applies to the cost of materials, Chemotherapy drugs which are Pharmac approved, plus Hospital Accommodation together with approved ancillary hospital costs.	Per Treatment 30,000.00	Per Yea 65,000.0
RADIATION ONCOLOGY		
imited to Planning, Shielding and Accessories, Field Setup and XRT Simulation and performed in an approved Private Hospital facility		Per Yea 30,000.0
SPECIALISTS & IMAGING		
Consultant Physician/Paediatrician		
Consultations following referral from a Registered Medical Practitioner.	Per Visit	Per Yea
First claim in an insurance year	400.00	400.0
Subsequent claims in an insurance year	200.00	No Ma
Specialist Including Surgeon		
Consultations following referral from a Registered Medical Practitioner.		
• First claim in an insurance year	200.00	200.0
Subsequent claims in an insurance year	100.00	No M
Specialist Oncologist		
Consultations following referral from a Registered Medical Practitioner.	250.00	250.
 First claim in an insurance year Subsequent claims in an insurance year 	110.00	No M
	110.00	140 141
Oral Surgeons Consultations (not treatment) but a Pagistared Oral Surgeon		
Consultations (not treatment) by a Registered Oral Surgeon. First claim in an insurance year	200.00	200.0
Subsequent claims in an insurance year	100.00	No M
maging Treatment provided by a Registered Medical Practitioner in Private Practice	Per Visit	Per Ye
Bone Density Scan	250.00	250.0
X-rays and Image Intensifiers	500.00	500.
Ultrasound	500.00	500.
Mammography	500.00	500.0
Scintigraphy	500.00	500.0
• CT Scan	1,500.00	1,500.0
MRI Scan	2,000.00	2,000.0
• PET Scan	2,500.00	2,500.
MINOR SURGERY		
Registered Medical Specialist	Per Admission	Per Ye
Not requiring general anaesthetic, including preceding consultation and performed in specialist rooms	Unlimited	No M
Minor Skin Lesions Removed by a GP		
Performed by a Registered Medical Practitioner in General Practice. Note that Prior Approval must be sought	2,000.00	2,000.0
or this benefit.		
HEALTH MAINTENANCE BENEFITS		
Home Care	Per Day	Per Ye
Home nursing by a Registered Nurse, following surgery in a Private Hospital on referral from a Registered Medical Practitioner.	150.00	1,500.0
NON-MEDICAL BENEFITS		

Waiver of Premium

Upon death by natural causes prior to age 60 of any member paying the adult contribution rate the surviving spouse and/or qualifying dependents named on the policy will receive two years free coverage at the benefit levels applying at the date of death.

"ADD ON" OPTIONS (TO THE MEDICALCARE BASE PLAN)

PLEASE NOTE: MedicalCare is the base plan to which the other options may be added, individually or together, with the exception of Options 3 and 4, which cannot be added to the MedicalCare plan on their own.

THE BENEFITS IN EACH OF THE ADD-ON OPTION MODULES REFUND 100% OF ACTUAL MEDICAL COSTS TO THE SPECIFIED MAXIMUMS.

ADD-ON OPTION 1 – GP/PRESCRIPTIONS		
GENERAL MEDICAL EXPENSES		
General Practitioners	Per Visit	Per Yea
Treatment and Consultation by a Registered Medical Practitioner, Including Dressings, Acupuncture, ECG.	55.00	No Ma
After Hours Home Visits.	70.00	140.0
Registered Practice Nurse Treatment and consultation by a Practice Nurse holding NZRN qualifications.	30.00	No Ma
Prescriptions User part charges for prescription items on the New Zealand Pharmaceutical Schedule and prescribed by a Registered Medical Practitioner. (Note: Maximum of 20 items per policy)	300.00	300.0
Non-PHARMAC Subsidised Pharmaceuticals Pharmaceuticals prescribed by a Registered Medical Practitioner in General Practice which have been approved by Medsafe and are not fully or partly subsidised by PHARMAC through the New Zealand Pharmaceutical Schedule.		2,000.0
Laboratory Tests The cost of laboratory charges for occult blood or glucose tests, requested by a Registered Medical Practitioner.	75.00	75.0
Independent Nurse Practitioners Treatment/consultation.	30.00	150.0
"ACC" TOP UP BENEFIT		
The 'shortfall' between actual costs and "ACC" refunds incurred as a result of qualifying personal injury or employment related co as shown within this option. NB: For a claim to qualify, "ACC" must have provided financial assistance towards treatment costs.	nditions are covered	to the limits
MINOR SURGERY		
Performed by a Registered Medical Practitioner. Not requiring general anaesthetic, including preceding consultation.	450.00	No Ma

Psychiatric Consultations

Benefits apply after 5 years' continuous cover in this plan option.

Consultation with a psychiatrist who is vocationally registered in New Zealand.

150.00

Three Visits

ADD-ON OPTION 2 - HEALTH MAINTENANCE BENEFITS Chiropodist/Podiatrist Per Visit Per Year Consultation and treatment by a Registered Practitioner 220.00 220.00 Osteopath 200.00 200.00 Consultation and treatment provided by a member of the NZRO **Physiotherapist** Treatment by a Registered Physiotherapist, including acupuncture and manipulation 50.00 200.00 • Consultations & audiology testing fees by a Registered Audiologist 100.00 250.00 Audiometric Tests: For Puretone, Audiometry, Impedance, Tympanometry, Brain-stem evoked response 250.00 250.00 Dietician Consultation by a New Zealand Registered Dietician on referral from a Registered Medical Practitioner 40.00 200.00 Emergency transportation for Public Hospital inpatient admission 180.00 180.00 **Overseas Transplant** In the event of Heart, Lung or Liver transplant surgery being required outside New Zealand, UniMed will assist with a once only grant of \$12,500 **Urodynamic Assessment** Treatment by a Specialist Urologist 1,200.00 1,200.00 **Speech Therapy** Treatment by a Registered Speech Therapist following surgery, excluding consequence of injury by accident 80.00 400.00 (see separate benefits) **Cardiac Diagnostic Procedures** Holter monitoring Total Treadmill exercise 2.400.00 Ambulatory BP monitoring per annum Cardio vascular ultrasound Stress echocardiograph

ACC "TOP UP" BENEFIT

Non Hospital

The 'shortfall' between actual costs and ACC refunds for out of hospital expenses incurred as a result of qualifying personal injury or employment related conditions are covered to the limits as shown within this module.

NB: for a claim to qualify, ACC must have provided financial assistance towards treatment costs.

LOYALTY BENEFITS

These benefits recognise long-term continuous membership.

Chiropractor

Benefits apply after one year's continuous membership in this plan. Cost of services from a Registered 200.00 200.00 Chiropractor including X-rays.

Hearing Aid Grant

Benefits apply after three years' continuous membership in this plan. 200.00

Obstetrics

Benefits apply after three years continuous membership in this plan.

Treatment from a Registered Medical Practitioner for obstetric conditions.

1,000.00
1,000.00

Sterilisation procedures

Sterilisation procedures are covered for males and females after one year's continuous membership in the MedicalCare Plus Option 2 Plan.

OPTION 3 - DENTAL 100/VISION		
VISION CARE		
Optometrist David	Per Visit	Per Year
Consultation by a Registered Optometrist. NB: Vision testing only. For spectacles/lenses see below.	75.00	250.00
Ophthalmologist Treatment by a Registered Ophthalmologist.		
First claim in an insurance year	200.00	200.00
Subsequent claims in an insurance year	100.00	No Max
Orthoptist		
Treatment by a Registered Orthoptist.	300.00	300.00
Spectacles and Lenses Reimbursement of costs (excluding replacement for loss or breakage) of spectacles or contact lenses providing a change in prescription is required.	500.00	500.00
DENTAL CARE		
Dental treatment by a Registered Dental Practitioner including routine maintenance, fillings, extraction of teeth, dentures, periodontic and orthodontic treatment.	100.00	100.00

OPTION 4 - DENTAL 400/VISION

VISION CARE

The benefits as detailed in Option 3 relating to Optometrist, Ophthalmologist, Orthoptist, and Spectacles and Lenses also apply to Option 4.

DENTAL CARE

Dental treatment by a Registered Dental Practitioner including routine maintenance, fillings, extraction of teeth, dentures, periodontic and orthodontic treatment.

400.00 400.00

Note: Dental conditions or their consequence present at the commencement of cover are excluded from reimbursement under Option 4.

Need to know more before making your choice?

Phone UniMed's friendly, helpful staff now and secure your future. If calling from Christchurch please phone 03 365 4048.

TOLL FREE 0800 600 666

Head Office

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