Welcome to Teachers Health

Congratulations on a great decision and welcome to the Teachers Health family!

At Teachers Health, we’ve got your back. We’ve created this Membership Guide to help you get the most out of your membership with Teachers Health and importantly, your health.

How to use this guide

Whether you’ve got Hospital or Extras cover (or both), this Membership Guide will help you with the ins and outs of your Teachers Health membership.

It provides an overview of what’s covered, how your cover works, how to claim, how to update your membership, the important legal stuff and the additional perks of being a Teachers Health member.

Read this guide in conjunction with your Product Sheet(s), which provides specific information about your level of cover, and keep it all handy for future reference.

Remember, we’re only a call – or a few clicks – away if you have any questions. Call us on 1300 728 188 or visit teachershealth.com.au
We’re for Teachers

We get what it means to work in education. You’re super busy. You’re positively shaping lives. And you’re doing it for the love of the job.

So, it’s more important than ever that your health insurance works hard to look after you.

We started over 60 years ago. Today, we’ve got the backs of over 320,000 teachers, education staff and their families around Australia.

And because we’re a not-for-profit, it means we can focus on the good stuff – like sponsorships, scholarships, and making sure our members get the best possible value – instead of payouts for shareholders.

We’re proud to be:

• Growing at 6.4% per year (one of the best in the industry)
• Not-for-profit
• Australia’s largest industry-based health fund
• A part of Members Own Health Funds
• An Employer of Choice for Gender Equality for seven years in a row
• Private Health Insurer of the Year 2015, 2013*

*Roy Morgan Research Customer Satisfaction Awards

The Teachers Health Foundation was established by Teachers Health in 2014 as a way to give back to members and the wider education community.

The Foundation funds evidence-based research that supports the health and wellbeing of the education community.
Hospital stays can be expensive. First, you’ve got accommodation fees for things like your bed, room, and food. Next, you’ve got theatre fees. These include the operating theatre, any nurses, machines and equipment. And finally, you’ve got medical fees to pay for doctors and anaesthetists. Without Hospital cover, these fees can run into tens of thousands of dollars (and few of us have that sort of money handy).

That’s where Teachers Health Hospital covers come in, giving you peace of mind, freedom and control over your health.

What’s covered

In a nutshell...

Top Hospital

Top of the range, and the best of the bunch. This is our best cover and has no exclusions or restrictions, except for services not covered by Medicare. You can also choose an excess to make it even more affordable.

Mid Hospital

A step down from Top Hospital, it’s still a fantastic option to get great cover for everyday health needs, but not expensive big-ticket services. We offer excess options here too.

Basic Hospital

You get treated by your own doctor in a public hospital (with a few services covered in a private hospital). This cover also includes a $300 excess.

StarterPak (Hospital)

Aimed at the young and active who may have no real need for some big-ticket items, but want something just in case they snap an ACL playing sport (sounds extreme but it happens more than you think).

And because it’s a combined cover, benefits are also available for Extras services (see the Extras section for more information).

It’s really important you know exactly what you’re paying for, so if you have any questions, just get in touch.
How it works

First, let’s talk concepts
Here are the Private Health Insurance specific terms we use for different situations:

Covered services
- We pay – accommodation, operating theatre and medical costs.
- You pay – any excess (if you’ve chosen to have one) and any charges above the Medicare Schedule Fee.

Restricted services
In a public hospital:
- We pay – accommodation in a shared room (as long as the hospital doesn’t charge above the default rate set out by the Federal Government), and medical costs.
- You pay – any excess (if applicable), and any gap if your hospital charges above the default rate.

In a private hospital:
- We pay – the same amount we would pay if you went to a public hospital.
- You pay – any excess and the balance of accommodation costs, plus any theatre costs. This could be costly, so make sure you give us a call so we can help work out the best option for you.

Excluded services
- We pay – nothing.
- You pay – the whole cost.

Agreement Private Hospitals
We hold agreements with most Australian private and day hospitals. These agreements ensure that hospital charges (accommodation, theatre fees, etc.) are covered when a member is admitted to hospital (depending on their level of cover). It’s really important that you call us to check if your hospital has an agreement, because if it doesn’t you may have significant out-of-pocket costs.

Medical costs
Medicare sets a fee for all services called the Medicare Benefits Schedule (MBS). Together with Medicare, we’ll cover you for the MBS fee. Doctors can sometimes charge above the MBS fee, and that’s when you’ll have out-of-pocket costs – this is commonly known as the ‘gap’. It’s always good to check with your doctor first to see if there’ll be any additional charges before you receive treatment.

Access Gap Cover
This is an agreement between us and some doctors to limit the gap you pay for their services. If your doctor agrees to participate in Access Gap, there will be less for you to pay, and in some cases, nothing at all. Go to teachershealth.com.au/access-gap for a list of doctors who have participated in Access Gap previously. You’ll need to ask your doctor whether they are willing to participate in Access Gap, and they must provide written informed consent if there are any out-of-pocket expenses.

Excess
Choosing an excess is a good way to keep your membership costs down. It’s an agreed amount that you choose to pay only if you claim. You pay this amount directly to the hospital on your admission, and you’ll only pay the total excess once per year, per person. The excess is waived for child dependants up to the age of 21 on most of our covers, with the exception of Basic Hospital.

<table>
<thead>
<tr>
<th>Hospital Level</th>
<th>Excess Amount</th>
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<tbody>
<tr>
<td>TOP HOSPITAL</td>
<td>No excess</td>
</tr>
<tr>
<td>TOP HOSPITAL 300</td>
<td>$300 per person/calendar year</td>
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<tr>
<td>TOP HOSPITAL 500</td>
<td>$500 per person/calendar year</td>
</tr>
<tr>
<td>MID HOSPITAL 300</td>
<td>$300 per person/calendar year</td>
</tr>
<tr>
<td>MID HOSPITAL 500</td>
<td>$500 per person/calendar year</td>
</tr>
<tr>
<td>BASIC HOSPITAL</td>
<td>$300 per person/calendar year</td>
</tr>
</tbody>
</table>
Hospital cover
How it works

Waiting periods
To keep health insurance fair for everyone, you’ll sometimes need to wait for a period of time before you can claim. Before you take any health cover, you should know exactly what these waiting periods are (if you have Hospital cover, check the Product Sheet included in your welcome pack for detailed information).

<table>
<thead>
<tr>
<th></th>
<th>Time Period</th>
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<tbody>
<tr>
<td>Pre-existing conditions</td>
<td>12 months</td>
</tr>
<tr>
<td>Pregnancy and birth-related services</td>
<td>9 months</td>
</tr>
<tr>
<td>Psychiatric, rehabilitation and palliative care</td>
<td>2 months</td>
</tr>
<tr>
<td>All other hospital services</td>
<td>2 months</td>
</tr>
<tr>
<td>Emergency ambulance transport</td>
<td>1 day</td>
</tr>
<tr>
<td>Non-emergency ambulance transport</td>
<td>1 day</td>
</tr>
</tbody>
</table>

Ambulance
Our Hospital products already build in cover for emergency ambulance with state government services (including air ambulance) and non-emergency ambulance with state government ambulance service, or a private ambulance service that we approve.

Keep in mind that this doesn’t include transport to a hospital for management of an ongoing health condition, transport between hospitals, transport for patients requiring day treatment, and transport to and from nursing homes and specialist/diagnostic centres.

You don’t have to wait again if you switch from another fund to the same or lower cover with us, and you’ve served your waiting periods. If you reduce your level of excess, the higher excess will apply for the time periods listed above, including 12 months for any pre-existing conditions.

Pre-existing conditions
A pre-existing condition is an ailment, illness or condition where the signs or symptoms existed during the six months before you joined Teachers Health or upgraded to a higher level of cover (even though a diagnosis may not have been made). Our Fund Medical Advisor will determine if a condition is classed as pre-existing, and if it is, you’ll need to wait 12 months before your cover kicks in.
What we won’t pay

We won’t pay for things like:

• Services not covered by Medicare
• Medical procedures in a doctor’s room
• Specialist appointments (including scans, blood tests)
• Prostheses in excess of approved benefits in the Government’s Prosthesis List
• Non-medical items such as TV hire, telephone, parking etc.
• Discharge medication
• Services received during any period which your membership is unfinancial or suspended
• Services not included in your cover or for which you are serving waiting periods
• Hospital treatment received overseas.

Ready to claim?

Hospital bills
Hospitals will usually bill us directly and we’ll take care of it for you. Just one less thing to worry about.

Doctor and specialist bills

Are you being charged under Access Gap?
The doctor will send the bill directly to us and we’ll pay the Access Gap agreement amount. The only time you’ll see a bill is if there is a ‘known gap’ – that is when you need to pay a small gap that your doctor is required to tell you about before your procedure. If the doctor sends you the bill first, just send it to us (not Medicare).

Not being charged under Access Gap?
If your doctor isn’t participating in Access Gap, you’ll need to go to Medicare first and fill out a two-way claim form. Just ask them and they’ll help you if you get stuck. Medicare will forward it to us once they’ve processed it.

Before going to hospital
Before you pack your nightie or PJs and your overnight bag, the first step is to call us so we can confirm what you’re covered for, and any potential out-of-pocket charges for your procedure.
Extras cover

Why it matters

Do you go to the dentist? Wear glasses? See a physio or chiro? Do you enjoy a remedial massage, or even have a child that might need orthodontic help?

These are just some of the things you can get with our Extras cover – those little extra things that support you to stay happy and well. We offer different kinds of Extras cover, so here’s a quick overview of each.

What’s covered?

In a nutshell...

Top Extras

Top Extras might cost a bit more, but you get a lot more as a result. It covers everything you get with Essential Extras (see below) like dental check-ups, glasses and physio. But you’ll also get additional things like psychology, hearing aids and speech therapy.

Essential Extras

Essential Extras doesn’t cover everything, but it does cover the things you’ll likely need the most – such as dental check-ups, glasses and physio.

StarterPak (Extras)

Not only does it provide you with basic Hospital cover, StarterPak also has some great benefits for those everyday Extras services that help keep your smile sparkly and your eyes sharp (among other things, of course!).

It’s really important you know exactly what you’re paying for, so if you have any questions, just get in touch.
Extras cover

How it works

Recognised provider
We can only pay for services from professional medical providers who are qualified and registered (Tip: you’d probably want to avoid anyone else). The good news is that most providers are, but it’s still up to you to check with them before your appointment.

Pharmaceuticals
Pharmaceutical Benefits Scheme (PBS) medications are subsidised by Medicare and by law aren’t eligible for health fund benefits. We can pay benefits towards non-PBS medication supplied to treat a medical condition, though. Please note that members have to pay a co-payment, equivalent to the amount set by Medicare. Ask us about this.

Ambulance
Our Extras products provide cover for Emergency Ambulance with state government services (including air ambulance). This does not include transport to a hospital for management of an ongoing health condition or transport between hospitals.

Waiting periods
To keep health insurance fair for everyone, you’ll sometimes need to wait for a period of time before you can claim. Before you take any health cover, you should know exactly what these waiting periods are (check your Extras Product Sheet for detailed information).

<table>
<thead>
<tr>
<th>Service</th>
<th>Waiting Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orthodontia</td>
<td>24 months</td>
</tr>
<tr>
<td>Wheelchair purchase</td>
<td>24 months</td>
</tr>
<tr>
<td>Major dental, medical appliances</td>
<td>12 months</td>
</tr>
<tr>
<td>Optical, healthy lifestyle</td>
<td>6 months</td>
</tr>
<tr>
<td>All other services</td>
<td>2 months</td>
</tr>
<tr>
<td>Emergency ambulance transport</td>
<td>1 day</td>
</tr>
</tbody>
</table>

You may have to wait if...

- You’re new to private health insurance
- You change your cover to:
  - Include things that weren’t covered before
  - Increase your benefit limits
- You switch health funds:
  - And increase your cover to include things that weren’t covered before
  - And increase your benefit limits

You don’t have to wait again if you switch from another fund to the same or lower cover with us, and you’ve served your waiting periods.
What we won’t pay

Just like in the classroom, we need to set some rules. So, it’s worth knowing upfront what we won’t pay for:

• Two different services from the same provider on the same day
• Services provided by immediate family
• Claims more than two years old
• Claims where no charge has been raised
• Services received during any period which your membership is unfinancial or suspended
• Services not included in your cover or for which you are serving waiting periods
• Services from an unrecognised provider
• Claims without official receipts
• Services or goods received overseas.

Ready to claim?

On the spot
Your membership card can be swiped at participating providers and the claim will be processed automatically.

Member app
The Teachers Health member app (for Apple and Android) allows you to make a claim, as well as view your claims history, cover details and annual limits.

All you need to do is take a photo of your receipt to submit your claim (be sure to keep your original receipts for two years). Download the app via the iTunes Store or Google Play.

Or the old school way...
Prefer to fill in a claim form with your receipts attached? You can submit a claim via mail, email or drop it into a Teachers Health Centre – just keep in mind that it may take a little longer to process.
Just Ambulance cover

Why it matters
During an emergency you just want to focus on getting it sorted, not checking your bank balance to see if you can cover the ambulance trip!

This cover is ideal for those who don’t have Hospital or Extras cover with us, but want to be covered for emergency ambulance transport.

That’s why we offer a standalone Emergency Ambulance product that covers you for emergency ambulance with state government services. It’s worth noting, this doesn’t include transport to a hospital for the routine management of an ongoing condition or transport between hospitals.

Note: QLD and TAS residents are covered under their state scheme.

A waiting period of one day applies to our Emergency Ambulance cover

<table>
<thead>
<tr>
<th>Cover type</th>
<th>Yearly limit per person</th>
<th>Yearly limit per family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency ambulance transport</td>
<td>$6,000</td>
<td>$12,000</td>
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Donna, Teachers Health member
We love our members!

Here’s the section with all you need to know about keeping your membership up-to-date and other important private health insurance info.

Remember, we’re here for you. So, if you’ve got any questions, just get in touch.

Membership changes

Had a baby? Child finishing uni? Moved house? Changed your email address?

Life being what it is, it rarely stays the same. So it’s important to keep your membership up-to-date with any changes in your life. Here’s a quick overview.

**Family Cover**
If you have a family, read on. You might need to know some of this stuff.

**New baby**
A new addition? Let us know about your bundle of joy within two months of their birth so they don’t have to wait to claim (at no additional cost).

**Children under 21**
Once you add your kids to your policy, they’re covered until their 21st birthday.

**Children 21–25 and not married or in a de-facto relationship?**
Still studying? They can be covered under your family cover at no additional cost. But you have to tell us whether they’re still a student every year (we’ll remind you to do this).

**Children 21–25 and not studying?**
They can be covered under your family cover at an additional cost. Contact us to discuss Extended Family cover.

**Single parent?**
We understand it’s not always easy to be a single parent, that’s why we have single parent pricing. Call us for more information.

**Partner authority**
Share the load with your partner. Let us know if you want them to manage the membership with you (it’s worth knowing that they can’t remove you from the cover or cancel it, only you can do that).

**Change of contact details**
Don’t forget to let us know if or when you move house, change your phone number, email address and so on – otherwise you might miss out on some important info.

**How to make changes**
Simply log into Online Member Services and update your details. Go to [online.teachershealth.com.au](http://online.teachershealth.com.au)

Or just give us a call on **1300 728 188** and one of our team will help you.
We love our members!

The important legal stuff

Cooling off period
Changed your mind within the first 30 days of joining? Not a problem. We will simply cancel your membership and provide a full refund (provided no claims have been paid during this period). The cooling off period only applies to our Health Insurance products.

Privacy notice
Your privacy is important to us. We collect personal information including sensitive information directly from you and from others (as listed in our Privacy Policy) so we can provide you with products and services, such as private health insurance and eyecare and dental services.

We disclose your personal information to entities (listed in our Privacy Policy) such as hospitals and medical providers for eligibility checks. Our Privacy Policy provides more information about how we collect, use, disclose and store your personal information. It also gives you information about how you can access or correct your personal information or how to make a complaint about a breach of your privacy if you feel we have done that.

To get a copy of our Privacy Policy you can go online at teachershealth.com.au/privacy or call us on 1300 728 188.

Feedback, disputes, complaints
We encourage all sorts of feedback – good and bad. If you have a complaint that you’d like to raise with Teachers Health, just contact us on 1300 728 188, email complaints@teachershealth.com.au or write to Teachers Health, GPO Box 9812, Sydney NSW 2001.

Got some positive feedback to share? We’d love to hear from you. Send us an email at info@teachershealth.com.au or drop by our Facebook page.

To view a copy of our Customer Complaints Handling Policy, visit teachershealth.com.au/complaints or contact us. All complaints will be treated in confidence and in accordance with our Privacy Policy.

Commonwealth Ombudsman
A person making a complaint has the right to lodge their complaint with the Commonwealth Ombudsman. The Commonwealth Ombudsman is an independent body formed to help resolve complaints and provide advice and information.

Contact details for the Commonwealth Ombudsman are:
• Complaints Hotline: 1300 362 072
• Fax: 02 6276 0123
• Website: www.ombudsman.gov.au and www.privatehealth.gov.au

The Private Health Insurance Code of Conduct
The Private Health Insurance Code of Conduct is a self–regulatory code aimed at promoting informed relationships between private health insurers and consumers. As a signatory of the code of conduct, Teachers Health is committed to ensuring that consumers receive the correct information in relation to their private health insurance from appropriately trained staff as well as clear and complete policy documentation, including information on internal and external dispute resolution. For more information visit privatehealth.gov.au or contact us.
Lisa, Teachers Health member
Additional benefits
More for our members

We provide more than health insurance to our members. We also offer additional programs and services to give you even more value for money.

Teachers Health Centres
Keep those eyes bright and that smile shining! We’re proud to offer our members state-of-the-art eyecare, dental, and many more health services at our dedicated Teachers Health Centres.

Members can access a range of No Gap services including preventative dental check-ups and prescription glasses, as well as additional discounts on frames, sunglasses and contact lenses.

Teachers Health Centres are located at:
• Surry Hills, NSW
• Parramatta, NSW
• Hamilton, NSW
• Richmond, VIC
• Adelaide, SA

To find out more go to teachershealth.com.au/our-health-centres

Keeping you covered at home and on the go
Did you know that we also offer travel and general insurance? We’ve partnered with some of the world’s largest insurance groups to provide our members with a comprehensive range of insurance products including:

• Travel insurance (Allianz Global Assistance)
• Motor vehicle insurance (QBE)
• Home and contents insurance (QBE)
• Landlord insurance (QBE)
• Lifestyle insurance – boat, caravan, motorcycle (QBE)

To find out more visit teachershealth.com.au/other-insurance

Member Wellbeing Network
Not near a Teachers Health Centre? Access services from providers who are a part of our Member Wellbeing Network. We have agreements with providers, giving our members special offers and discounts on dental and eyecare services. Find a provider near you at teachershealth.com.au/member-wellbeing-network
Teachers Healthcare Services

Teachers Healthcare Services is an initiative of Teachers Health, designed to support the health and wellbeing of members through quality, evidence-based health management programs and services.

Members can access support from a range of health professionals including registered nurses, dietitians and exercise physiologists.

Programs available include:
• New family program
• Weight loss/management
• Chronic disease management
• Transitioning from home to residential care
• Mental wellness
• Coach program
• **Hospital substitute services**
  • Rehabilitation at home
  • Hospital care at home

Members who have Top, Mid or Basic Hospital cover (with all waiting periods served) can access these programs. Check if you’re eligible by contacting us on info@teachershealth.com.au or call 1300 727 538.
The information contained within this brochure is current at the time of printing. Membership of Teachers Health is available to current and prior education union members and their families. Fund policyholders and those covered under a policy are subject to the rules and conditions of Teachers Health as well as applicable government legislation and laws. This brochure contains a summary of the main rules and conditions. Contribution rates and benefits are subject to change. This brochure should be read carefully in conjunction with the Product Sheet(s) and retained. Fund policyholders are encouraged to review the Teachers Health Privacy Policy, available at teachershealth.com.au/privacy. Teachers Health is a signatory to the Private Health Insurance Code of Conduct.

Teachers Federation Health Ltd ABN 86 097 030 414 trading as Teachers Health. A Registered Private Health Insurer.

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