

Effective 1 April 2025



Welcome to UniHealth

Congratulations on a great decision and welcome to the UniHealth family!

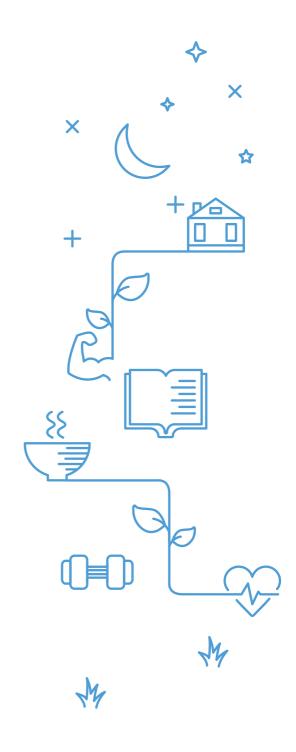
Whether you've got Hospital or Extras cover (or both), this guide will help you get the most from your membership.

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

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

For more detailed info on using your cover and managing your membership, check out our frequently asked questions: unihealthinsurance.com.au/fags

- 4 We're for the educators
- 6 Hospital cover
- 10 Extras cover
- **14** Emergency ambulance cover
- 15 Updating your details
- 16 Essential legal stuff
- 18 Member benefits





We're for the educators

UniHealth is health insurance for the education community and their families.

We know working in higher education is both demanding and rewarding – between teaching and researching, you're helping your students to learn and grow.

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

That's where we come in.

As a not-for-profit, we focus on what matters most – supporting the health and wellbeing of our members, not delivering pay-outs to shareholders.

Read on to find out how.





Hospital cover

Why it matters

Hospital stays can be expensive. First, you've got the accommodation charge which includes your bed, room, and food. Then, you've got theatre fees which cover things like the operating theatre, nurses, machines and equipment. And there's your medical costs 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 UniHealth Hospital covers come in, giving you peace of mind, freedom and control over your health.

What's covered

These are brief summaries of our Hospital cover options. It's really important you know what you're paying for so, for more detail visit unihealthinsurance.com.au/hospitals

Top Hospital GOLD



Top Hospital (Gold) is (unsurprisingly) our highest level of Hospital cover. It includes big ticket items like pregnancy and birth, heart procedures and hip or knee joint replacements - with no exclusions or restrictions (except for services not covered by Medicare). The excess options are: \$0, \$300 or \$500.

Mid Classic SILVER PLUS



Mid Classic (Silver Plus) includes many of the services available on Top Hospital (Gold). To lower the cost there are a few things that can't be claimed for, like pregnancy and birth, joint replacements, and weight loss surgery. The excess options are \$300 or \$500.

Mid Hospital BASIC PLUS





Mid Hospital (Basic Plus) doesn't exclude any services (except for those not covered by Medicare) - instead it provides restricted (or limited) cover for expensive things like pregnancy and birth and joint replacements. The excess options are \$300 or \$500.

Basic Hospital BASIC PLUS



Basic Hospital (Basic Plus) is designed for those looking for a more affordable option, but want to be able to choose their doctor. It provides access to a private hospital for a few services, and a public hospital for many more (on restricted cover). The Basic Hospital excess is \$300.

StarterPak (Hospital) (BASIC PLUS)





StarterPak (Basic Plus) is our entrylevel Hospital cover that provides choice of doctor, a few services in a private hospital and many more in a public hospital (on restricted cover). There are a few services that aren't covered. There's no excess for a hospital admission on StarterPak.

StarterPak also includes the most commonly used Extras to help you proactively manage your health.

Hospital cover

How it works Here are some key terms:

Product tiers

The terms Gold, Silver, Bronze and Basic tell you which Hospital insurance tier the cover sits in. The tiers were introduced by the government to make it easier to compare cover. If we've added a 'Plus' the cover includes more than the minimum services that have to be in that tier - sometimes a lot more, so don't be put off by the fact there are a few Basic Plus options.

Clinical categories

Your Hospital Product Sheet lists all the categories (groups of hospital treatments) that health funds can include in their Hospital cover. Look at the 'Hospital Services' table to see which categories you're covered for.

You can access this info online anutime via

unihealthinsurance.com.au/hospital

Medical (specialist doctor) costs

Medicare sets fees for in-hospital (inpatient) hospital treatment on the Medicare Benefits Schedule (MBS). Together with Medicare, we cover the MBS fee. If a doctor charges you more than the MBS fee, you'll have out-of-pocket costs or a 'gap'.

Always check with your doctor to see if there'll be any additional charges before you receive treatment.

Access Gap Cover

Access Gap is a billing scheme that can help you minimise, or avoid, out-of-pocket costs for in-hospital (inpatient) specialist treatment.

It's available to members who are planning treatment that's 'covered' or 'restricted' on their Hospital Product Sheet.

For more info or to check which specialists have treated other patients under the Access Gap scheme, visit unihealthinsurance.com.au/agc

Covered services

We pay - accommodation, operating theatre and medical costs up to the MBS fee (see Medical (specialist doctor) costs).

You pay - any excess on your cover and any charges above the MBS fee.

Restricted services

In a public hospital:

- We pay accommodation (up to the government fee for a shared room).
- You pay any excess on your cover and the balance of your accommodation costs.

In a private hospital:

- We pay accommodation (up to the government fee for a shared room).
- You pau any excess on your cover, the balance of your accommodation costs, and any other costs involved in your hospital stay.

For more on this, go to

unihealthinsurance.com.au/restricted

Excluded services

- We pay nothing.
- You pay the whole cost.

Agreement Private Hospitals

An agreement hospital is a private hospital that we have a contract with. These agreements ensure your inpatient hospital charges are covered (depending on your level of cover).

If a hospital doesn't have an agreement with us. you may have significant out-of-pocket costs. Search agreement hospitals at

unihealthinsurance.com.au/hospitals

No Gap Services

We also have No Gap arrangements in place for certain treatments and procedures at select hospitals. These agreements help eligible members avoid out-of-pocket costs for services like maternity care and joint replacement surgery. To learn more, visit

unihealthinsurance.com.au/no-gapprograms

Hospital cover

How it works

Waiting periods

To keep health insurance fair for everyone, you may need to wait for a while before you can claim. Waiting periods may apply if you're new to private health insurance, or if you upgrade to a higher level of cover (with us or when you switch from another fund).

If you leave another health fund, you need to join us within 60 days to avoid re-serving any applicable waiting periods.

Waiting periods won't apply if you switch from another fund to the same (or a lower) level of cover with us, and you've already served the waiting periods at your previous funds.

Hospital waiting periods

Pre-existing conditions	12 months
Pregnancy and birth	9 months
Hospital psychiatric services, Rehabilitation, Palliative care	2 months
All other hospital services	2 months
Emergency ambulance transport	1day
Non-emergency ambulance transport	1day

Pre-existing conditions

A pre-existing condition is an illness, ailment or condition where the signs or symptoms existed at any time during the six months before you got your Hospital cover or transferred to a higher level of cover.

Where relevant, we appoint a medical practitioner to determine whether you have a pre-existing condition, based on information provided by your treating doctor and specialist. If you claim within the 12-month waiting period and your condition is deemed pre-existing, it may affect whether you're covered. For more info see

unihealthinsurance.com.au/pec

Accidents

Under StarterPak (Basic Plus), accidents (unintentional injuries) may be covered if the injury:

- · Occurs after joining UniHealth
- Occurs in Australia
- Requires treatment by a recognised medical practitioner or dentist within 7 days of the accident.

If you meet these criteria, you may be able to claim for initial in-patient hospital treatment for the injury, and ongoing treatment within 180 days of the accident.

Excess

The excess (see below) is an agreed amount you pay directly to the hospital when you're admitted. The excess is payable once per person, per calendar year (if you claim for a hospital admission that year). Choosing a higher excess can keep your membership costs down.

The excess doesn't apply for public hospital admissions or for your dependants.

TOP HOSPITAL (GOLD)	No excess	
TOP HOSPITAL 300 (GOLD)	\$300	
TOP HOSPITAL 500 (GOLD)	\$500	
MID CLASSIC 300 (SILVER PLUS)	\$300	
MID CLASSIC 500 (SILVER PLUS)	\$500	
MID HOSPITAL 300 (BASIC PLUS)	\$300	
MID HOSPITAL 500 (BASIC PLUS)	\$500	
BASIC HOSPITAL (BASIC PLUS)	\$300	
STARTERPAK (BASIC PLUS)	No excess	

Ambulance

All UniHealth Hospital and/or Extras cover includes emergency ambulance transport provided by a state government service (including state government air ambulance). For more on what's covered, see Emergency ambulance cover (p.14).

Hospital claim

Hospital bills

Your hospital bill should come straight to us. If it comes to you instead, please submit the bill to us via:

- **App:** unihealthinsurance.com.au/app
- Email: submitclaim@unihealthinsurance. com.au
- Post: GPO Box 9812, Sydney NSW 2001

We'll then contact the hospital to sort out the claim. Please note that you may need to sign a claim form from the hospital as part of this process.



Doctor and specialist bills

This one depends whether you were treated under the Access Gap Cover scheme:

Access Gap

The big bill(s) should come to us. If you get any, forward them to us at: GPO Box 9812, Sydney NSW 2001. If you have a known gap with a specialist, they'll bill you directly for that part.

No Access Gap?

Complete and submit a two-way claim form to Medicare. Once they've processed it, they'll send it to us so we can do our bit. Download the form via unihealthinsurance.com.gu/forms

Going to hospital?

Before signing any paperwork, be sure to call us on 1300 367 906 so we can confirm what you're covered for, and alert you to any potential out-of-pocket charges for your procedure. For detailed info on preparing for a hospital admission, visit unihealthinsurance.com.au/going-to-hospital



Things you can't claim for include:

- Services not covered by Medicare (e.g. cosmetic or laser eye surgery)
- Treatment in a doctor's room (i.e. outpatient services)
- Specialist appointments (including scans and, blood tests)
- Prostheses in excess of approved benefits in the government's Prostheses List
- Non-medical items (e.g. wifi/internet, parking etc.)
- · Discharge medication
- Services received while your membership is suspended or not paid up-to-date
- Services for which you can claim from a third party (i.e. compensation)
- Overseas hospital treatment
- · Services not included on your cover.

The above list isn't exhaustive, so be sure to call us before you go to hospital (see Going to hospital?).

Extras cover

Why it matters

Extras cover is designed to help with the cost of everyday healthcare. Dental is a big one, given Medicare doesn't generally cover routine care/checks let alone more extensive treatment. Optical is similar – while eye tests are routinely bulk-billed, alasses or contact lenses aren't.

Other key Extras benefits can help you take care of body (think physio, chiro and remedial massage) and mind (e.g. psychology).

What's covered?

These are brief summaries. For more detail, visit unihealthinsurance.com.au/extras

Top Extras



Top Extras is our top level of Extras cover. That means higher benefits and/or limits on things our members use the most, like dental, optical and physio. Your limits for major dental treatment will even go up for the first 6 years you stay with us (provided you maintain continuous Top Extras cover).

Mid Extras



Mid Extras covers things UniHealth members use the most, like dental, optical and physio, plus a range of other services, including psychology and podiatry.

Basic Extras



Get a flexible yearly limit on popular services like physio, remedial massage and psychology, plus additional limits for gym memberships, optical and dental.

StarterPak



Not only does it provide basic Hospital cover, StarterPak includes the most commonly used Extras to help you proactively manage your health.





Extras cover

How it works

limits

A limit is the amount you can claim over a set period of time, per person or per family. Most, but not all, Extras services have annual limits (per calendar year). Some Extras also have sub-limits within the annual limit (i.e. the maximum you can claim per year for a specific sub-category of that service). You can check your remaining limits anytime via the member app or Online Member Services.

Recognised providers

We can only pay for services from professional medical providers who are qualified and registered. Thankfully most providers are, but do check with them before making an appointment. To use our provider search tool, go to

unihealthinsurance.com.au/extras-providers

Pharmaceuticals

You may be able to claim towards medication that's prescribed by a doctor but isn't already subsidised by the government's Pharmaceutical Benefit Scheme. The medication must be approved by the Therapeutic Goods Association though.

Healthy Lifestyle

This benefit can help members with health conditions access programs and services to help them manage or improve their condition. To claim, you may need to submit a form (signed by a relevant health practitioner). See more at unihealthinsurance.com.au/healthy-lifestyle

Waiting periods

To keep health insurance fair for everyone, you may need to wait for a while before you can claim. Waiting periods may apply if you're new to private health insurance, or if you upgrade to a higher level of cover (with us or when you switch from another fund)

If you leave another health fund, you need to join us within 60 days to avoid re-serving any applicable waiting periods.

Waiting periods won't apply if you switch from another fund to the same (or a lower) level of cover with us, and you've already served the waiting periods at your previous fund.

Extras waiting periods

Wheelchair purchase	24 months
Major dental, Orthodontia, Aids & appliances	12 months
Optical, Healthy lifestyle	6 months
All other services	2 months
Emergency ambulance transport	1 day

Aids and appliances

Our Artificial Aids & Appliances benefit covers items that give your health a helping hand, like hearing aids, CPAP machines, breast pumps, and compression garments.

See if you're covered and how to claim at unihealthinsurance.com.au/aids-appliances

Ambulance

All UniHealth Hospital and/or Extras cover includes emergency ambulance transport provided by a state government service (including state aovernment air ambulance). For more on what's covered, see Emergency ambulance cover (p.14).

What we won't pay for

Things you can't claim for include:

- Two services from the same provider on the same dau
- Services provided by an immediate family member (who is on your membership)
- Services from an unrecognised provider
- Claims more than two years old
- Services you haven't been charged for (e.g. using a gift voucher for a massage)
- Claims without official receipts. For more on this, see unihealthinsurance.com.au/receipts

- Services where third party benefits are pauable (i.e. compensation)
- Services received while your membership is suspended or not paid up-to-date
- Services not included in your cover
- Services for which you're serving waiting periods
- Services or goods purchased overseas
- DIY dentistry (e.g. teeth whitening kits, orthodontic alianers and occlusal splints).

This isn't an exhaustive list and additional exclusions may apply based on the Fund Rules.

Extras claims

On the spot

Where available, your membership card can be swiped through a HICAPS machine and your claim will be processed automatically. All you have to do is pay any balance.

Member app

If you haven't already done so, download the UniHealth app from the App Store or Google Play. Then just take a photo of your receipt and submit your claim. Done!

Email or post

Prefer to fill in a claim form and attach your receipts? That's fine, but please note your claim will likely take longer to process.



Emergency Ambulance cover

Why it matters

During an emergency you don't want to be worrying about the cost of an ambulance.

If you don't already have Hospital or Extras cover with us, standalone emergency ambulance cover may be right for you.

It does cover emergency ambulance transport with state government services.

It doesn't cover transport between:

- Hospitals
- · Hospital and a nursing home
- · Hospital and specialist/diagnostic centres.

Or to/from hospital for:

Day treatment

Management of an ongoing health condition.

Note: QLD and TAS residents may be covered under their state scheme for emergency ambulance services. For more see **ambulance**.

qld.gov.au or health.tas.gov.au

Emergency Ambulance has a waiting period of one day.

Cover type	Yearly limit per person	Yearly limit per family
Emergency ambulance transport	\$6,000	\$12,000



Updating your details

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?

It's important to keep your membership up-to-date after life's inevitable changes. Here's what to do in some common scenarios:

Families

New babu

A new addition? Let us know about your bundle of joy within 12 months of their birth and we'll add them to your family cover (at no additional cost), so they don't have to wait to claim.

Children under 21

Once you add your kids to your membership, they're covered until their 21st birthday.

Children 21-31

1. Studying full-time (and single)?

If they're a full-time student (trainee, apprentice, intern or cadet) and aren't married or de-facto. they can remain on your family cover at no additional cost. We'll contact you each year (until they turn 32) to ask you to confirm their situation hasn't changed.

2. Not studying full-time (and single)?

They can be on your membership, at an additional cost, via Extended Family Cover, provided they aren't married/de-facto.

3. Coupled-up or turning 32

If they get married or have a partner, or are turning 32, it's time for your child to get their own membership. We can help them find cover that's right for them (follow the link below for more on this). unihealthinsurance.com.au/dependants

Single parent?

If you've become a single parent, we can change your membership to reflect this. Get in touch via: unihealthinsurance.com.au/contact-us

Authorising a partner/back-up person

If you'd like to enable a partner, relative or friend to manage your membership as well, all you need to do is complete and submit an Authority form. The authorised person won't be able to remove you from the membership, or cancel it, and you can withdraw their authorisation anytime. See more: unihealthinsurance.com.au/authority

Details changed?

Please update your details if you move house, change your phone number, email address or bank details.

You can do all of this through Online Member Services (and via the member app). For a step-by-step guide, go to unihealthinsurance.com.au/update-details

Essential legal stuff

Cooling-off period

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

Privacy notice

Your privacy is paramount. 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.

Find our Privacy Policy online at unihealthinsurance.com.au/privacy

Feedback, disputes, complaints

We encourage all feedback – as a UniHealth member, your opinion matters.

Positive feedback – we'd love to hear from you! Email us at **info@unihealthinsurance.com.au** or drop by our Facebook page.

Complaints – please contact us so we can look into it. You can reach us via:

Phone: 1300 367 906

 Email: complaints@unihealthinsurance. com.au

Post: GPO Box 9812, Sydney NSW 2001

Commonwealth Ombudsman

Health fund members have the right to lodge complaints with the Commonwealth Ombudsman. This is an independent body formed to help resolve complaints and provide advice and information.

Complaints

Web: ombudsman.gov.au

Phone: 1300 362 072

General information

(To learn more about private health insurance go to **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, we're 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 unihealthinsurance.com.au/code-conduct or privatehealth.gov.au



Member benefits

More for our members

We think you deserve more, always. Visit unihealthinsurance.com.au/member-benefits for more information.



Health Centres

At our Health Centres you can access two key preventative healthcare services under one roof - dental and eyecare!

Got Extras cover? Enjoy No Gap services* such as dental check-ups and prescription glasses, plus a range of optical savings.

No Extras? No worries. As a member, you can get three exceptional eyecare deals: 50% off optical frames¹, 25% off contact lenses² and 25% off sunglasses frames².

You'll find Health Centres in:

- Surry Hills, NSW
- Parramatta, NSW
- Hamilton, NSW
- Wollongong, NSW
- Melbourne, VIC
- Adelaide, SA

See more:

healthcentres.unihealthinsurance.com.au

*Subject to your level of cover and remaining limits.

¹Up to a maximum discount of \$250 (including GST), frames must be purchased with prescription lenses.

²Up to a maximum discount of \$250 (including GST).



Healthcare Services

The Healthcare Services team is dedicated to helping eligible members* access targeted support services to manage their health and wellbeing.

Accredited and evidence-based, these services are delivered by health professionals and personalised to the needs of each member.

Theu include:

- Telehealth programs to manage and prevent chronic diseases, including heart disease, osteoarthritis, cancer, diabetes and mental health conditions.
- Treatments at home (in place of hospital), such as chemotherapy, complex wound care and rehabilitation.

All programs include health education, coaching and support to help you achieve better health for the longer term.

Wherever you're at, these warm, empathetic health professionals can point you in the right direction.

See more: unihealthinsurance.com.au/hs

*To be eligible for a program you must be a member of UniHealth and have Hospital cover with all relevant waiting periods served. Hospital cover requirements and waiting periods vary for different programs. Additional eligibility criteria may apply.



Member Rewards

Save on discounted eGift Cards and earn cashback when you shop at fantastic retailers with our Member Rewards. Exclusively available to UniHealth members, you can earn rewards shopping and save at a range of popular stores including groceries, fashion, electronics, homewares, travel, health & beautu, and much

Joining Member Rewards is free, and you earn rewards when you shop online or instore with your linked debit or credit card. You can also save on eGift Cards to use on everyday purchases.

unihealthinsurance.com.au/rewards

Ask a doctor online tool

Would you like to know more about a particular health topic? We've partnered with Healthshare to provide members with access to Ask a doctor, a website where you can search for information and even ask Australian health professionals a specific question.

unihealthinsurance.com.au/ask-a-doctor

Access Gap Cover

This scheme enables you to reduce - or eliminate out-of-pocket costs for inpatient hospital treatment if your anaesthetist, surgeon or specialist agree to charge under a certain rate.

To find out more or see which specialists have treated other patients under Access Gap cover, visit unihealthinsurance.com.au/agc

Health and fitness discounts

Member discounts are available at a range of health and fitness providers to further support your health and wellbeing, including weight loss programs, group fitness and exercise equipment.

unihealthinsurance.com.au/health-andfitness-discounts

General insurance

Whether it's home and contents, motor vehicle, landlord or lifestyle insurance you're after we've got you covered with a range of options.

unihealthinsurance.com.au/generalinsurance

Travel insurance

Get covered for those unexpected hiccups when you travel. Whether it's a delayed suitcase, cancelled flights or a medical emergency, be ready for anything.

unihealthinsurance.com.au/travel-insurance

Overseas Visitor Health Cover

Designed for overseas workers and visitors to Australia, Overseas Visitor Health cover can help with unexpected medical bills due to illness or injury.

unihealthinsurance.com.au/ovhc







unihealthinsurance.com.au

Mail:

GPO Box 9812 Sydney NSW 2001

Email:

info@unihealthinsurance.com.au

Phone:

1300 367 906 Monday – Thursday 8am – 7pm (AEST/AEDT) Friday 8am – 6pm (AEST/AEDT) Saturday 8:30am – 12:30pm (AEST/AEDT)

Overseas callers:

+61283462187

The information contained within this brochure is current at the time of printing. Membership of UniHealth 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 UniHealth as well as applicable laws. This brochure contains a summary of the main rules and conditions. Premiums 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 UniHealth Privacy Policy, available at unihealthinsurance.com.au/privacy. Teachers Federation Health Ltd t/as UniHealth is a signatory to the Private Health Insurance Code of Conduct.

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