

CLASSIC GOLD

BENEFITS

HOSPITAL TREATMENT

Effective 1st January 2012

Private Hospitals

Westfund has agreements with numerous private hospitals throughout Australia covering theatre fees and hospital accommodation costs for most procedures. Hospital policies do not provide cover for treatment for which Medicare pays no benefit eg. Non-Therapeutic Cosmetic Surgery, or if required by the Private Health Insurance Act 2007.

Where no contract exists with a private hospital, benefits are payable at a minimum rate determined by the Government. In these cases, out of pocket expenses may be incurred.

We recommend that members check with us prior to admission to hospital to ensure they are covered. Hospitals which have agreements with Westfund are listed at www.westfund.com.au or details can be obtained from any of our branches.

Public Hospitals

In a public hospital, you will receive cover for accommodation and your choice of doctor.

Medical Expenses

Westfund pays benefits to cover the fees charged by a doctor, surgeon, anaesthetist or other specialist whilst you're in hospital. Medicare pays 75% of the Commonwealth Medical Benefits Schedule (CMBS) fee and Westfund pays the additional 25% up to the CMBS fee. Where the fees charged exceed the CMBS fee, Westfund will pay an additional benefit to reduce or eliminate out of pocket expenses where the doctor or specialist has participated in our Access Gap scheme. Please see our website or contact any of our branches for further information on Access Gap. We encourage members to contact us before their scheduled appointment to any referred medical specialist.

Exclusions

Gastric banding, lipectomy and other obesity surgery

Benefits for hospital treatment and other services in connection with gastric banding, lipectomy, and other obesity surgery are **excluded** under this policy.

Additional Benefits**Accident**

An Accident Benefit is payable where a member is admitted to hospital as the result of an accident. The member must be hospitalised within 7 days of the accident. The benefit payable is **\$100 per night of continuous hospitalisation for a maximum 12 months**. The Accident Benefit is not payable for rehabilitation.

Accommodation

An Accommodation Benefit is payable for costs incurred as the result of boarding at a hospital or nearby motel of one member covered by the same Westfund Policy as the patient where such accommodation is necessary for the well being of the patient. Benefits are paid for the night before admission, for the nights during hospitalisation and the night of discharge. The benefit payable is **\$100 per day to a maximum of \$400 per policy per calendar year**.

Advanced Surgery

An Advanced Surgery Benefit is payable where a member undergoes a procedure classified as Advanced Surgical in the Commonwealth Medical Benefits Schedule (CMBS), for the treatment of heart disease, stroke or cancer. The benefit payable is **\$200 per night up to a maximum of \$2,400 per hospitalisation**, and is in addition to hospital and medical benefit entitlements. 12 month waiting period applies. *Please check with Westfund regarding eligibility.*

Additional Benefits cont..

Ambulance

Westfund fully covers the cost of medically necessary ambulance transport in Australia either through covering the cost of State government levies or by covering the account.

GENERAL TREATMENT BENEFITS

General Treatment benefits cover costs associated with dental, optical, physiotherapy, chiropractic, and other services. Benefits under this cover include:

Dental

General Dental

General dental benefits are paid at set item rebates with no upper benefit limit on these services. Benefits for some of the common general dental services are:

- Consultation up to \$30 per service.
- Simple extractions up to \$80 per service.
- Removal of plaque up to \$25 per service.
- Removal of calculus up to \$55 per service.
- Fillings - small up to \$48, medium up to \$59, large up to \$91.50 per service.
- X-ray up to \$18 per service.
- Mouthguard up to \$75 per person per calendar year.

Major Dental

Crowns, bridges, implants and veneers are paid at set item rebates subject to a rolling limit which accrues at the rate of \$650 per member per policy year to a maximum of \$2,600 per member.

Dentures and denture repairs are paid at set item rebates with no annual or lifetime limit.

Orthodontia

Benefits for services provided by a registered orthodontist are paid progressively subject to a lifetime limit which accrues at the rate of \$500 per member per policy year to a lifetime limit of \$2,500 per member.

Westfund Dental Centre

Many general dental services provided at Westfund's dental centre are provided at low or no out of pocket cost.

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Optical

Benefits per member per calendar year are :

- Limit of up to \$200 for Multifocals (complete set or lenses only) or Contact Lenses.
Plus an additional 2 year bonus benefit of \$75 *.

OR

- Limit of up to \$150 for Single Vision or Bifocals (frame and/or lenses.)
Plus an additional 2 year bonus benefit of \$50 *.

***The bonus benefit is available to members who have not claimed any optical benefits in the preceding calendar year and use only a Westfund Classic Eyewear Centre.**

Benefits are only available for sight correction. Single Vision, Bifocals and Multifocals can only be claimed once per calendar year. Benefits for contact lenses accumulate until the limit is reached.

Sunglasses

A benefit of \$50 per member per calendar year is provided for sunglasses purchased through any Westfund Classic Eyewear Centre.

Classic Eyewear Centres

Westfund Classic Eyewear Centres provide a full range of quality benefits including eye tests and a large selection of modern lenses and frames for both spectacles and sunglasses at member prices. Bulk billing of eye examinations is also available.

Other Benefits

	Benefit per Service	Limits per Policy	
		Single	Family
Complementary Therapies			
Acupuncture	\$25	\$150 per year	\$300 per year
Bowen Therapy	\$25	\$150 per year	\$300 per year
Chiropractic / Chiropractic X-Ray	\$25 / \$35	\$150 per year	\$300 per year
Dietician	\$25	\$150 per year	\$300 per year
Home Nursing - up to 6 hours	\$12	\$150 per year	\$300 per year
Home Nursing - over 6 hours	\$48	\$150 per year	\$300 per year
Naturopathy	\$25	\$150 per year	\$300 per year
Occupational Therapy	\$25	\$150 per year	\$300 per year
Orthoptics	\$25	\$150 per year	\$300 per year
Physiotherapy	\$25	\$150 per year	\$300 per year
Podiatry	\$25	\$150 per year	\$300 per year
Remedial Massage / Therapy	\$25	\$150 per year	\$300 per year
Speech Therapy - Initial / Subsequent	\$48 / \$36	\$300 per year	\$588 per year
Overall limit for General Services listed above		\$500 per year	\$1,000 per year
Psychology (Clinical)	\$30	\$60 per year	\$120 per year

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Other Benefits

	Benefit per Service	Limits per Policy
Single and Family		
Prevention Health Management		
Fitness Centre, Yoga, Vitamins and Weight Loss Programs	-	\$75 per year per Single \$150 per year per Family
Antenatal Classes	-	\$120 lifetime limit
	Benefit per Service	Limits per Member
Hypnotherapy for Smoking Cessation	-	\$250 lifetime limit
Mole Scanning	-	\$30 per calendar year
Hearing Aids		
	-	One claim per member every 5 years accumulates as follows: - \$800 after 5 years membership - \$1300 after 10 years membership - to a maximum of \$1800 after 15 years of membership
Medically Recommended Aids		
Blood Glucose Monitor	-	\$100 per year
Blood Pressure Monitor	-	\$150 per year
Burns Suit	-	\$800 per year
CPap (sleep apnoea) Machine or Oral Appliance for diagnosed Snoring	-	\$500 every 3 years
Mammary Prosthesis	-	\$225 per year
Nebuliser	-	\$110 per year
Orthopaedic Boots	-	\$200 per year
Orthotics	-	\$200 per year
Peak Flow Meter	-	\$35 per year
Surgical Stockings	-	\$120 per year
Tens Machine	-	\$150 every 3 years
Wigs (chemotherapy / medical)	-	\$150 per year
Prescriptions		
	\$50	\$400 per year
Travel (Specialist medical appointments)		
	12c/km	Capped at \$150 per trip to a maximum of \$300 per year

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Loyalty Bonus

Benefit per Service	Limits per Policy
Single and Family	
Your loyalty bonus is an amount credited to this policy which can be used as a benefit toward general treatment services which are not otherwise covered by Westfund.	Rolling Limits

Services which can be claimed

Alexander Technique for Chronic Back Pain	-	Single: \$50 credited each calendar year to a maximum of \$150 Family: \$100 credited each calendar year to a maximum of \$300
Audiology Tests	-	
Bone Density Tests	-	
Bowel Testing Kit	-	
Braces for Knees, Neck or Back	-	
Clinical Psychology	-	
First Aid Classes	-	
Masks for use with CPap Machine	-	
Surgical Treatments by a Podiatrist	-	
ISC Compression Calf Garment#	\$20	
Diabetic Retinopathy#	\$20	

WAITING PERIODS AND CONDITIONS

Waiting Periods

Benefits are not payable in respect of services provided during a waiting period.

The following waiting periods apply to benefits payable for Hospital Treatment:

Accident-related	1 day
Psychiatric, Rehabilitation & Palliative care	2 months
Obstetric-related services	12 months
Treatment of a Pre-existing Condition*	12 months
All other services	2 months

* Pre-Existing Condition

A pre-existing condition is an illness or condition, signs or symptoms of which were considered to have been in existence at any time during the 6 months preceding the day on which the member joined Westfund or upgraded to a higher level of cover.

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Waiting Periods cont...

The following waiting periods apply to benefits payable for General Treatment

General Dental	2 months
Specialist Dental, Major Dental, Orthodontia	12 months
Optical	2 months
Complementary Therapies	2 months
Fitness Centre, Yoga, Vitamins, Weight Loss Programs, Prescriptions, Travel, Hypnotherapy and Mole Scanning	2 months
Medically Recommended Aids	12 months
Hearing Aids	60 months
Loyalty Reward, Antenatal Classes and Optical Two Year Bonus	12 months

Waiting Periods on Transfer

A person transferring from another fund may be subject to a waiting period for Westfund benefits for:

- any benefits under the Westfund policy that were not provided under the previous cover
- any difference between the benefits that would have been provided under the previous cover and those payable under the new Westfund policy where benefits under the Westfund policy are higher
- the unexpired portions of any waiting periods not fully served under the previous cover
- the difference between any excess or co-payment payable under the previous policy and the new policy (where the previous policy carried a higher excess or co - payment)

Other Conditions

Physiotherapy/Chiropractic

- Benefits for physiotherapy are only payable for one on one consultations. No Benefits are payable for group consultations.

Non PBS Pharmaceuticals

- No Pharmaceutical Benefit is payable on an item that is available without a prescription.
- A Benefit is only payable on items costing over the standard Pharmaceutical Benefit Scheme (PBS) charge. This is re-set each year as from 1 January.
- Benefits for prescriptions are not payable for:
 - (1) PBS Items supplied under the PBS scheme
 - (2) medicinal preparations available without prescription
 - (3) experimental and clinical trial pharmaceuticals
 - (4) contraceptives or anabolic steroids unless prescribed specifically for the treatment of an illness
 - (5) items which have not been approved for sale in Australia by the authorities that regulate the sale of pharmaceuticals.

Orthotics

- To be eligible for an Orthotics Benefit, orthotic items must be supplied and prescribed by a podiatrist or a physiotherapist or be accompanied by a letter of recommendation by a doctor.

Medically Recommended Aids

- Benefits for Orthopaedic Boots are only payable for boots individually hand made for the Member to correct abnormality.
- Benefits for Surgical Stockings are payable for anti-embolism compression stocking/hosiery.

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Prevention Health Management (Fitness Centre, Yoga, Vitamins and Weight Loss Programs)

- Benefits for membership with a fitness centre are only payable where:
 - the membership of a fitness centre is required to enable the Member to undertake a health management program for the treatment of a specific health condition or conditions; and
 - the health management program has been recommended to the Member by a medical practitioner or other Recognised Provider who is treating the Member for the specific health conditions or conditions; and
 - all documentation required by Westfund has been provided to Westfund.
- For the purpose of the fitness centre benefit, the Recognised Provider must be a general practitioner, dietician or Westfund Accredited Fitness Centre.
- Benefits are payable for Vitamins and Minerals listed with Westfund.
- Benefit for Weight Loss Programs are payable only for joining or membership fees.

Loyalty Bonus

- The First Aid Benefit is payable for the Basic Life Support First Aid Course provided by a first aid accredited organisation.
- Clinical psychology (provider must be recognised by Medicare).

The documentation should be read carefully and retained.

Any Questions ?

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BRANCH
**call into your local
Westfund branch**