

Need help?

Sales: 13 50 50
Go to apia.com.au

Claims and service: 1800 274 213
Email: apiahealth@nib.com.au

Mon to Fri: 8am - 8.30pm
Sat: 8am - 1pm (AEST)



This product information brochure is issued by nib health funds limited ABN 83 000 124 381. The information contained in this brochure is current as at 1 July 2017. This document should be read in conjunction with the Policy Booklet. Rules and benefits may change from time to time. This health insurance is issued by nib health funds limited ABN 83 000 124 381 (nib) a registered private health insurer and is arranged by Australian Pensioners Insurance Agency Pty Ltd (Apia) ABN 14 099 650 996 as an authorised agent of nib for which it receives a commission. In this document, "we", "us" and "our" means nib. XXXXXXXXXX

Health Insurance

Product Information Brochure



Rewarding experience



Health insurance for the over 50s.

Apia health insurance is specifically designed for the over 50s, so you don't pay for the services you're unlikely to use. With our hospital covers, you're covered for important things like heart surgery and joint replacement. And our Extras bundles give you access to services you're most likely to use, like dental, optical and physio.

Importantly, waiting periods already served with your current fund will be recognised, so you can claim straight away.*

*Waiting periods apply for services not currently covered. Any benefit limits already used with your current fund will apply to your Apia health insurance policy.

Contents

Hospital cover	4
Extras cover	8
How you can save	10
Manage your policy online	14
How to choose	15
Using your cover	26

This product information brochure is issued by nib health funds limited ABN 83 000 124 381. The information contained in this brochure is current as at 1 July 2017. This document should be read in conjunction with the Policy Booklet. Rules and benefits may change from time to time. This health insurance is issued by nib health funds limited ABN 83 000 124 381 (nib) a registered private health insurer and is arranged by Australian Pensioners Insurance Agency Pty Ltd (Apia) ABN 14 099 650 996 as an authorised agent of nib for which it receives a commission. In this brochure "we," "us" and "our" means nib.



Hospital cover

Avoid public hospital waiting lists and reduce the expensive costs of private hospital treatment with Apia health insurance.



Here are a few examples of the average wait times for treatment in a public hospital under Medicare*

13 days
for coronary bypass surgery

114 days
for hip replacement surgery

188 days
for knee replacement surgery

50% of people on the list waited longer than this

*Source: Australian Institute of Health and Welfare, Australian hospital statistics 2015-16: elective surgery waiting times. Waiting times at the 50th percentile. Report dated December 2016.

A few examples of what private hospital procedures could cost you without health insurance*.

\$45,037
for coronary bypass surgery

\$25,499
for hip replacement surgery

\$22,553
for knee replacement surgery



*Average charge to customers for procedures in a private hospital (rounded to the nearest \$1), in 2016. Correct as at December 2016. Average costs include all charges for the total hospital procedure (including and not limited to, medical, hospital, prostheses, surgeons' and specialists' charges).

Along with avoiding public hospital waiting lists, Apia health insurance helps you pay for private hospital benefits so you can afford the treatment you want[^], allowing you to:

- ✓ Choose the specialists who treat you
- ✓ Choose one of our Agreement Private Hospitals
- ✓ Decide with your doctor when you'll be treated
- ✓ Stay in a private room

Waiting periods may apply before you can claim for hospital treatment. Refer to your product information and the Policy Booklet.

[^]Subject to availability.

Why Apia hospital cover?



Approximately 480 nib Agreement Private Hospital and day facilities to help you save money.

We have agreements with more than 75% of Australia's private hospitals. These agreements help us lower hospital costs and keep your premiums down.

They also mean we reduce or eliminate out-of-pocket expenses when you need treatment.

Refer to the Policy Booklet for more information.

Accidental Injury Benefit.

We offer you more protection against the unexpected with the Accidental Injury Benefit.

Seek treatment within 24 hours after an accident at a hospital Emergency Department and receive benefits in line with our best level of hospital cover for the next 90 days (excludes consult at an Emergency Department).

Accidental Injury Benefit criteria must be met for approval. The initial admission must be covered by the Accidental Injury Benefit for any follow up admissions (within 90 days) to be covered as well.

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.



Emergency Ambulance Cover.

For many Australians, ambulance transportation isn't covered by the Government or Medicare.

With Apia health insurance there's no need to be caught out by the cost of an expensive ride.

We provide cover for emergency ambulance transportation by state ambulance in most

circumstances (refer to Policy Booklet for exclusions).

Emergency ambulance costs are covered by the state government for residents of QLD and TAS.

Refer to the Policy Booklet for more information.

Call us for a chat before you head to hospital.

Before you're off to hospital, give Apia health insurance a call. We'll chat through the whole process, check your cover, and show you how to keep out-of-pocket expenses to a minimum. Call us on **1800 274 213**.

Extras cover

Stay healthy and active with Extras.

Private health insurance can help you cover the cost of the everyday services you use to stay healthy – like dental treatment, a new pair of glasses, remedial massage, or a visit to the physio. We call them 'Extras'.



Tailor your Apia Extras to suit your needs.

We've created Extras covers based on services you are most likely to use. Start with one of our Essential Extras packages, which include dental, optical and physio. If you're looking for more cover you can add Apia Advanced Extras.

If you'd like the peace of mind of our best level of Extras cover, you can choose Apia Premium Extras.

Waiting periods may apply before you can claim for Extras. Refer to your product information and the Policy Booklet.

**60%
BACK**

**75%
BACK**

With our range of Extras covers you'll be able to claim 60% of the cost of service every time you claim for Extras (up to your annual limit).

Or if you decide to take Apia Premium Extras you'll receive up to 75% back (up to the annual limit).

You choose the provider you'd like to see.

Apia health insurance customers have the choice to use any provider with professional qualifications recognised by us. We have thousands of recognised providers for Extras, so there's bound to be one near you.

Refer to the Policy Booklet for more information.

Claiming made easy.

We offer you many convenient ways to claim on Extras:

- Using your customer card on-the-spot at your provider
- By mailing your claim to us
- Using Apia Health Online Services



Whitecoat: search and compare healthcare providers.

Whitecoat is a directory which allows you to search and compare a range of healthcare providers such as dentists, physios and massage therapists.

Use Whitecoat to:

- ✓ See if there's an Extras provider at a location convenient to you
- ✓ Read reviews from other patients about the provider you'd like to see

To find a new Extras provider, or to check out your current provider, visit whitecoat.com.au



How you can save

Apia health insurance lets you tailor the covers you want without paying for things you don't.

We've created a range of options that allow you to tailor your health cover just the way you want it. With the choice of hospital cover you need and extras cover you'd like, you won't be paying for things you're unlikely to use.



Other ways to save on your premiums.

✓ Increase your hospital excess to reduce your premiums

A hospital excess is the amount you pay towards the cost of a hospital stay before any benefits are payable by us. Selecting a higher excess means your premiums will be lower.

✓ Discount for paying by direct debit

Receive a discount on your premiums when you pay by automatic direct debit from a bank, building society cheque or savings account.

We can help you with these when you join.

Grown-up kids can stay covered up until they turn 25.

Unmarried adult children aged 21-25 can stay on the family cover:

- For no extra charge if they are in full-time study (Student Dependants Cover), or
- For an extra charge on your premium if they are not studying (Extended Family Cover - only available on selected health covers).

Refer to the Policy Booklet for more information.

The Medicare Levy Surcharge and how you could avoid paying extra tax.

If your taxable income is above \$90,000 (\$180,000 for couples), and you don't have an appropriate level of private hospital cover, you may have to pay the Medicare Levy Surcharge. This is an additional 1% to 1.5% in tax (on top of the Medicare Levy we all have to pay).

How much you could be required to pay in extra tax depends on your income (or combined income for couples and families):

	Base Tier	Tier 1	Tier 2	Tier 3
Singles	\$90,000 or less	\$90,001 - \$105,000	\$105,001 - \$140,000	\$140,001+
Couples	\$180,000 or less	\$180,001 - \$210,000	\$210,001 - \$280,000	\$280,001+
Medicare Levy Surcharge				
	0.0%	1.0%	1.25%	1.5%

You can avoid the Medicare Levy Surcharge (and pay less tax) by joining any Apia hospital cover and maintaining it for the full financial year. If you take out hospital cover part-way through the financial year, you will only avoid the surcharge for the period you held suitable hospital cover.

Source: Australian Tax Office. These thresholds apply for the 2017/2018 financial year. For families, and single parent families, the threshold increases by \$1,500 for each dependant child after the first. There are specific rules for calculating income for Medicare Levy Surcharge purposes. For more information go to ato.gov.au



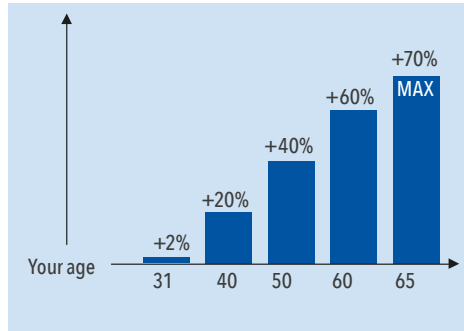
Want more info?

Ask us, or visit the Australian Taxation Office at ato.gov.au

Lifetime Health Cover.

Under Lifetime Health Cover (LHC) if you don't have hospital cover by 1 July after your 31st birthday, you'll pay a 2% loading on top of the normal premiums for each year you don't have hospital cover. The loading applies for 10 years of continuous hospital cover.

This isn't just with Apia health insurance, but every health fund.



The Australian Government Rebate on private health insurance.

The Private Health Insurance Rebate offers a saving on the cost of private health cover funded by the Federal Government.

The level of Rebate you could be entitled to

receive is based on the age of the oldest person on the policy and your taxable income (or combined family income for couples and families).

The table below will help you determine which rebate level you could be entitled to. The Rebate percentages are set annually by the Australian Government.

	Base Tier	Tier 1	Tier 2	Tier 3
Singles	\$90,000 or less	\$90,001 - \$105,000	\$105,001 - \$140,000	\$140,001+
Couples	\$180,000 or less	\$180,001 - \$210,000	\$210,001 - \$280,000	\$280,001+
Private Health Insurance Rebate - from 1 April 2017 to 31 March 2018				
Under 65	25.934%	17.289%	8.644%	0.00%
65-69	30.256%	21.612%	12.966%	0.00%
70+	34.579%	25.934%	17.289%	0.00%

Source: Australian Tax Office. These thresholds apply for the 2017/2018 financial year. For families the thresholds increase by \$1,500 for each dependant child after the first. All customers on the policy must be eligible to claim the Rebate. There are specific rules for calculating income for Australian Government Rebate purposes. For more information go to www.ato.gov.au



If you have a Lifetime Health Cover loading, the Rebate is not claimable on the LHC loading component of your premium.

Go online for almost anything

Manage your policy at home or work. You can register for Apia Health Online Services at apia.com.au/health

- ✓ View your health cover
- ✓ Claim on selected Extras
- ✓ Check your Extras usage
- ✓ Update your details
- ✓ Check your claims history
- ✓ Set up direct debit payments
- ✓ Order claims and payment statements



How to choose

01

Start with hospital cover.

Apia Premium Hospital Cover is our best cover, giving you more peace of mind. If you're looking to save money, Apia Essential Hospital Cover gives you great value cover including many commonly claimed services.

02

Tailor your Extras.

We've created Extras covers based on services you're most likely to use. Start with one of our Essential Extras packages, which include dental, optical and physio. If you're looking for more cover to suit an active lifestyle, add Apia Advanced Extras.

For our best level of Extras cover, we recommend Apia Premium Extras.

30 day cooling off.

If you aren't happy with your cover we'll refund your premiums if you contact us to cancel within the first 30 days (providing you haven't made a claim).

Get your personalised quote today.
Call **13 50 50**.

01 Start with hospital cover

Apia hospital covers pay benefits toward the cost of treatment in one of our Agreement Private Hospitals or any public hospital. Apia Premium Hospital Cover is our best cover, whilst Apia Essential Hospital Cover is a good choice if you're looking to save money.

What's covered: In hospital.

Depending on your level of cover, our hospital covers pay benefits **towards** the cost of the following things when provided to an admitted private patient in any of our Agreement Private Hospitals or public hospitals. These things are only covered for procedures included in your health cover and out-of-pocket expenses may apply:

- ✓ Medical treatments not requiring surgery, investigative procedures and surgeries
- ✓ Day surgery
- ✓ Overnight accommodation (private room where available)
- ✓ Special care unit accommodation (e.g. intensive care)
- ✓ Operating theatre fees
- ✓ Doctors' surgical fees and in-hospital consultations
- ✓ Government approved prosthetic devices
- ✓ Allied health services (e.g. physiotherapy, occupational therapy)
- ✓ Prescription medication required for specific treatment when in hospital
- ✓ Ward-drugs and sundry medical supplies (e.g. bandages, painkillers)
- ✓ Nursing care
- ✓ Patient meals

We pay benefits toward these for Included Services on your chosen health cover. Out-of-pocket expenses may apply to these services.

Standard waiting periods.

- Pre-existing conditions (where the symptoms were evident at any time during the 6 months immediately prior to joining as determined by our Medical Practitioner) except psychiatric, rehabilitation or palliative care services **12 months**
- Psychiatric, rehabilitation or palliative care services (whether pre-existing or not) **2 months**
- Any other conditions requiring hospitalisation that aren't pre-existing **2 months**
- Accidental injury **1 day**
- Ambulance services **1 day**

Not all of these services are included on each health cover. Waiting periods apply to customers not currently covered for these services.

Switching from another health fund?

We'll recognise waiting periods already served with your current health fund for the same services with equivalent level of cover, so you can claim straight away*.

*Waiting periods apply for services not currently covered. Any benefit limits already used with current fund will apply to your Apia health insurance policy.

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

Our hospital covers at a glance.

Premium Hospital Cover.

The best Apia hospital cover.

- ✓ You want comprehensive cover but don't need pregnancy and infertility related services
- ✓ Ideal for peace of mind

Essential Hospital Cover.

Great value cover including many commonly claimed services.

- ✓ Excludes some hospital procedures you're less likely to need
- ✓ Ideal if you're healthy and on a budget

Key features.

- ✓ Accidental Injury Benefit
- ✓ Emergency Ambulance Cover
- ✓ No excess for dependant children under 21 years of age
- ✓ Eligible for the Australian Government Rebate
- ✓ Can help you to avoid the Medicare Levy Surcharge if you have a taxable income above \$90,000 (\$180,000 for couples)
- ✓ Hospital excess capped at once per person, per calendar year

Hospital excess options to help you save money.

A hospital excess is the amount you pay towards the cost of a hospital stay before any benefits are payable by us. Selecting a higher excess means your premiums will be lower.

You only pay an excess if you or someone (other than a dependant child under 21 years of age) on your policy goes to hospital. The excess applies once per person per calendar year and is payable directly to the hospital prior to your admission.

\$250

per person per calendar year

\$500

per person per calendar year

Great value for you and your family.

- ✓ No hospital excess for dependant children under 21 years of age
- ✓ The excess for families is capped at twice your chosen level of excess (e.g. a \$250 excess is capped at \$500 per calendar year)
- ✓ Each adult on the policy will only pay one excess per calendar year if they go to hospital, no matter how many admissions they may need

If you've recently switched hospital covers, your previous level of excess may apply for up to 12 months for pre-existing conditions.

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

In-hospital treatments and surgery

Heading to hospital? Talk to us first.

It's always important to call Apia Health Insurance Team first when you learn you need to go to hospital. We can let you know the best ways to avoid potential out-of-pocket expenses. Call us on **1800 274 213**.

Included and excluded services by hospital cover

	Premium Hospital Cover		Essential Hospital Cover	
	\$250 per person per calendar year	\$500 per person per calendar year	\$250 per person per calendar year	\$500 per person per calendar year
Accidental Injury Benefit (waiting period 1 day)		✓		✓
Emergency Ambulance (waiting period 1 day)		✓		✓

Other included services.

(Services covered unless related to an excluded service. Standard waiting periods apply)

Back surgery		✓		✓
Brain surgery		✓		✓
Cancer treatment (approved under the Pharmaceutical Benefits Scheme)		✓		✓
Colonoscopies		✓		✓
Dental Surgery		✓		✓
Gastroscopies		✓		✓
Gynaecological services		✓		✓
Heart related procedures & surgery		✓		✓
Hernia repair		✓		✓
Joint investigations		✓		✓
Joint reconstructions		✓		✓
Joint replacements		✓		✓
Palliative care		✓		✓
Rehabilitation		✓		✓
Stroke treatments		✓		✓
All Medicare recognised services that are not listed as exclusions		✓		✓
Eye treatment & surgery		✓		x
Obesity / weight loss surgery		✓		x
Psychiatric treatment		✓		minimum benefits payable*
Renal Dialysis		✓		x
Assisted reproductive services		x		x
Infertility investigations		x		x
Pregnancy & birth related services		x		x
Cosmetic surgery		x		x
Procedures not covered by Medicare		x		x

*Minimum Benefits Payable (MBP) means that we will pay the minimum amount of benefits that we are required to pay under the Private Health Insurance Act, to or on behalf of a customer for hospital treatment under a Hospital cover. If you're attending a Private Hospital for these services, there will be significant out-of-pocket costs. If a treatment important to you is listed as MBP, we recommend you consider a higher level of cover.

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

02 Tailor your Extras

Extras cover is for services you can use every day to stay healthy, like going to the dentist, a visit to the physio or a new pair of glasses.

What's covered: Extras.

Extras are services usually provided outside a hospital. Medicare does not generally cover these services so we help you pay for them.

We'll help cover you at our recognised providers for:

- ✓ The cost of the consultations listed
- ✓ The cost of health appliances listed (ask us about specific restrictions and replacements)

How much you'll get back each time you claim, and how much you can claim each year, depends on the cover/s you choose.

How to choose.

You can tailor your Extras cover to suit your needs and budget.

Essential Extras

Cover for the Extras people use most, with 60% back of the cost to you, up to your annual limit.

Essential Plus Extras

Enjoy higher annual limits for the Extras people use most.

Plus, you can add

Advanced Extras

Additional Extras like chiropractic and osteopathy to suit an active lifestyle.

OR

Apia Premium Extras

The best level of Apia Extras cover with 75% back of the cost to you, up to your annual limit.

Apia Essential Extras. The Extras that people use most.

60% BACK

of the cost to you up to your annual limit

Extras covered	Annual Limit (maximum amount claimable per person in a calendar year)	Waiting Period (applies if you are new to health insurance or if you have recently increased your level of Extras cover)
Preventative dental treatment Includes selected examinations, scale & cleans and fluoride treatments	No limit	2 months
General dental treatment e.g. fillings, basic extractions, x-rays	\$600	2 months
Major dental treatment Includes root canal therapy, crowns, bridges, dentures, oral surgery	\$600	12 months
Optical appliances e.g. prescription glasses and contact lenses	\$250	6 months
Physiotherapy	\$350	2 months
Ambulance Emergency ambulance transport paid at 100% of the cost	No limit	1 day

Apia Essential Plus Extras.

The Extras that people use most, with higher annual limits.

60% BACK

of the cost to you up to your annual limit

Extras covered	Annual Limit (maximum amount claimable per person in a calendar year)	Waiting Period (applies if you are new to health insurance or if you have recently increased your level of Extras cover)
Preventative dental treatment Includes selected examinations, scale & cleans and fluoride treatments	No limit	2 months
General dental treatment e.g. fillings, basic extractions, x-rays	\$700	2 months
Major dental treatment Includes root canal therapy, crowns, bridges, dentures, oral surgery	\$1,300	12 months
Optical appliances e.g. prescription glasses and contact lenses	\$300	6 months
Physiotherapy	\$450	2 months
Ambulance Emergency ambulance transport paid at 100% of the cost	No limit	1 day

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

Now that you've chosen either Apia Essential Extras or Apia Essential Plus Extras, add on Apia Advanced Extras.



Apia Advanced Extras.

Gives you access to more Extras services.

60% BACK

of the cost to you up to your annual limit

Extras covered	Annual Limit (maximum amount claimable per person in a calendar year)	Waiting Period (applies if you are new to health insurance or if you have recently increased your level of Extras cover)
Chiropractic & Osteopathy	\$300	2 months
Podiatry (consultations only) & Foot Orthotics (appliance limits apply)	\$250	2 months
Pharmaceutical prescriptions Benefits are only payable for non PBS items. Benefits do not apply to prescriptions dispensed to hospital in-patients	\$250	2 months
Health Aids (appliance limits apply) Surgical stockings, CPAP Machine, CPAP parts, pressure garment, walking frame, blood pressure monitor, hip protector, blood coagulation device, erectile dysfunction pump, low vision aid	\$300	12 months
Healthier Lifestyle benefit Approved weight management, quit smoking, first aid and health management programs (gym, personal trainers, yoga, pilates)	\$250	6 months
Preventative tests (service limits apply) Thin prep, bone density tests, bowel screening	\$200	6 months
Hearing aids (appliance limits apply)	\$800	36 months
Eye therapy (orthoptics)	\$200	2 months

Or, for our best level of Extras cover, choose Apia Premium Extras.



This product information is intended as a summary only and should be read in conjunction the Policy Booklet.

Apia Premium Extras.

The best level of Apia Extras cover.

Extras covered	Annual Limit (maximum amount claimable per person in a calendar year)	Waiting Period (applies if you are new to health insurance or if you have recently increased your level of Extras cover)
Preventative Dental treatment Includes selected examinations, scale and cleans and fluoride treatments	No Limit	2 months
General Dental E.g. fillings, basic extractions, x-rays	\$1,000	2 months
Major Dental treatment Includes root canal therapy, crowns, bridges, dentures, oral surgery	\$1,300	12 months
Orthodontia	Starting limit of \$800 (increasing by \$100 per calendar year to a lifetime limit of \$2,600)	12 months
Optical appliances E.g. prescription glasses and contact lenses	\$350	6 months
Physiotherapy	\$600	2 months
Exercise Physiology	\$300	2 months
Chiropractic & Osteopathy	\$500	2 months
Natural therapies (consultations only) Remedial massage, acupuncture, naturopathy, herbalism, myotherapy and shiatsu	\$400	2 months
Podiatry (consultations only) & Foot Orthotics (appliance limits apply)	\$400	2 months
Eye Therapy (orthoptics)	\$200	2 months
Dietary advice (consultations only)	\$600	2 months
Home nursing services	\$200	2 months
Occupational therapy	\$450	2 months
Speech pathology (speech therapy)	\$450	2 months

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

Apia Premium Extras cont.

75% BACK

of the cost to you
up to your annual limit

Extras covered	Annual Limit (maximum amount claimable per person in a calendar year)	Waiting Period (applies if you are new to health insurance or if you have recently increased your level of Extras cover)
Pharmaceutical Prescriptions Benefits only payable for non PBS items. Benefits do not apply to prescriptions dispensed to hospital in-patients	\$500	2 months
Psychology	\$500	2 months
Hearing Aids & Speech Processors (appliance limits apply)	\$1,200	36 months
Health Aids (appliance limits apply) Including Nebuliser, irlen lens, peak flow meter, spacers, surgical stockings, CPAP machine, CPAP parts, pressure garment, walking frame, blood pressure monitor, hip protector	\$500	12 months
Healthier Lifestyle benefit Approved weight management, quit smoking, first aid and health management programs (gym, personal trainers, yoga, pilates)	\$400	6 months
Preventative tests (service limits apply) Thin prep, bone density tests, bowel screening	\$200	6 months
Ambulance (emergency ambulance transport paid at 100% of the cost)	No limit	1 day

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

