

HCF HOSPITAL OPTIMAL GOLD PRODUCT SUMMARY

Our highest level of hospital cover, combined with your choice of extras, for peace of mind.

FEATURES

<p>HEALTH PROGRAMS TO SUPPORT YOUR FAMILY</p> <p>Access a range of resources to help you keep your health and your family's health in check.</p> 	<p>NO EXCESS FOR KIDS AGED UNDER 25 OR ACCIDENT-RELATED TREATMENT</p> 	<p>HOSPITAL COVER FOR PREGNANCY AND BIRTH</p> 	<p>TRAVEL AND ACCOMMODATION BENEFITS FOR YOUR HOSPITAL STAY*</p> 
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INCLUDES

- ✓ \$750 excess
- ✓ Pregnancy, birth and assisted reproductive services
- ✓ Ambulance cover in emergencies*

* When you travel at least a 200km round trip. Other terms and conditions apply. See [hcf.com.au/travel-accommodation](https://www.hcf.com.au/travel-accommodation)

* Cover is limited to emergency transport to the nearest hospital by a State or Territory government ambulance provider (excludes transport from another hospital or medical facility). Benefits are not payable for ambulance services covered by a State or Territory government scheme.

HCF HOSPITAL OPTIMAL GOLD

KEY FEATURES	
Excess options (per person per calendar year)	\$750
No excess for kids aged under 25	✓
No excess for Accident-related treatment	✓
Travel and accommodation benefit*	✓
Available without extras cover	No

THIS POLICY INCLUDES COVER FOR:
Emergency ambulance**
Rehabilitation
Hospital psychiatric services
Palliative care
Brain and nervous system e.g. stroke, brain or spinal cord tumours
Eye (not cataracts) e.g. retinal detachment, tear duct conditions, eye infections and medically managed trauma to the eye
Ear, nose and throat e.g. damaged ear drum, sinus surgery, removal of foreign bodies, stapedectomy and throat cancer
Tonsils, adenoids and grommets e.g. hospital treatment of the tonsils, adenoids and insertion or removal of grommets
Bone, joint and muscle e.g. carpal tunnel, fractures, hand surgery, joint fusion, bone spurs, osteomyelitis and surgery for bone cancer
Joint reconstructions e.g. torn tendons, rotator cuff tears and damaged ligaments
Kidney and bladder e.g. kidney stones, adrenal gland tumour and incontinence
Male reproductive system e.g. male sterilisation, circumcision and prostate cancer
Digestive system e.g. oesophageal cancer, irritable bowel syndrome, gall stones and haemorrhoids
Hernia and appendix e.g. hernia operations and appendicitis
Gastrointestinal endoscopy e.g. colonoscopy and gastroscopy
Gynaecology e.g. endometriosis, polycystic ovaries, female sterilisation and cervical cancer
Miscarriage and termination of pregnancy
Chemotherapy, radiotherapy and immunotherapy for cancer
Pain management e.g. treatment of nerve pain and chest pain due to cancer by injection of a nerve block
Skin e.g. surgery to remove melanoma, minor wound repair and abscesses
Breast surgery (medically necessary) e.g. breast lesions, breast tumours, asymmetry due to breast cancer surgery and gynecomastia
Diabetes management (excluding insulin pumps) e.g. stabilisation of hypo- or hyper-glycaemia, contour problems due to insulin injections
Heart and vascular system e.g. heart failure and heart attack, monitoring of heart conditions, varicose veins and removal of plaque from arterial walls
Lung and chest e.g. lung cancer, respiratory disorders such as asthma, pneumonia and treatment of trauma to the chest
Blood e.g. blood clotting disorders and bone marrow transplants
Back, neck and spine e.g. sciatica, prolapsed or herniated disc, and spine curvature disorders such as scoliosis
Plastic and reconstructive surgery (medically necessary) e.g. burns requiring a graft, cleft palate, club foot and angioma
Dental surgery e.g. surgery to remove wisdom teeth and dental implant surgery Things like operating theatre and hospital accommodation fees. Members must hold eligible extras cover to claim dentist or dental surgeon fees.
Podiatric surgery (provided by a registered podiatric surgeon - Limited Benefits)^
Implantation of hearing devices*
Cataracts
Joint replacements
Dialysis for chronic kidney failure
Pregnancy and birth

THIS POLICY INCLUDES COVER FOR (CONT.):
Assisted reproductive services
Weight loss surgery
Insulin pumps ⓘ
Pain management with device e.g. treatment of nerve pain, back pain and pain caused by coronary heart disease with a device
Sleep studies e.g. sleep apnoea and snoring

THIS POLICY DOES NOT INCLUDE COVER FOR:
Elective cosmetic surgery

This product includes cover for accommodation, operating theatre, intensive care, government-approved prostheses, pharmaceuticals (excluding experimental and high cost non-PBS drugs) as part of your covered admission at an HCF participating hospital.

DENTAL SURGERY

Unlike other services, in-patient dental surgery can be claimed under both your hospital cover (for things like accommodation and operating theatre fees) as well as under your extras cover (your dental surgeon's bill). You must hold eligible extras cover if you want to claim benefits for dentist or dental surgeon's fees for surgery performed in a hospital. Depending on your annual limit, you may still experience out-of-pocket costs, however these costs will be higher if you do not hold eligible extras cover.

EXCESS

An excess is a non-refundable amount of money you agree to pay towards the cost of your hospital treatment before we pay benefits to you.

When you take out hospital cover, you'll select an excess amount. Your choice of excess will affect the cost of your premiums. The higher your excess is, the lower your premiums will be. If you reduce the excess amount on your policy or you move to another policy where the excess amount is lower, you will have to pay the old excess during the waiting period for the treatment.

You only need to pay one excess per person per calendar year if you claim on your hospital cover. Subsequent hospital claims in the same calendar year won't incur another excess payment.

OUT-OF-POCKET COSTS AND HOSPITAL AGREEMENTS

Under this policy, you may have to pay out-of-pocket costs above what you get from Medicare or your private health insurer. Before you go to hospital, you should ask your doctors, hospital and health insurer about any out-of-pocket costs that may apply to you.

The benefits paid for hospital treatment will depend on the type of cover you purchase and whether your fund has an agreement in place with the hospital in which you are treated. See 'Agreement Hospitals' on privatehealth.gov.au for which hospitals have arrangements with your insurer.

PREGNANCY AND BIRTH

To be covered for pregnancy and birth in hospital, make sure your cover includes full benefits for these services. If not, you may wish to upgrade to a cover that includes pregnancy and birth 12 months before the date of birth of your child to minimise your out-of-pocket expenses. If you're expecting, make sure you transfer to a family membership within 2 months of the birth of your child to ensure your baby is covered.

SERVICES NOT INCLUDED

These services are not included in your cover. No benefits are payable for any treatment related to these services. Always check with us to see if you're covered before going to hospital.

* When you travel at least a 200km round trip. Other terms and conditions apply. See hcf.com.au/travel-accommodation

^ Limited benefits apply. Minimum Benefit level payable by HCF for Hospital Accommodation as determined under the Private Health Insurance Act and the cost of prosthesis (as listed on the Prescribed List of Medical Devices and Human Tissue Products). No benefit is payable for podiatric surgeon fees. Ensure you have Informed Financial Consent prior to your treatment, for any out-of-pocket expenses.

+ Includes associated speech and sound processors including upgrades.

** Cover is limited to emergency transport to the nearest hospital by a State or Territory government ambulance provider (excludes transport from another hospital or medical facility). Benefits are not payable for ambulance services covered by a State or Territory government scheme.

ⓘ Cover for insulin pumps is subject to conditions set out in the Private Health Insurance Act.

THINGS YOU NEED TO KNOW

The following waiting periods apply where these services are covered under your policy:

HOSPITAL WAITING PERIODS	
1 DAY	Emergency ambulance.
2 MONTHS	Hospital psychiatric services, rehabilitation and palliative care. Members who have held a hospital cover for at least 2 months and upgrade to receive hospital psychiatric services as covered services may not be required to serve the waiting period for hospital psychiatric services. This exemption can only be accessed once in a member's lifetime.
12 MONTHS	Pregnancy and birth. Pre-existing conditions (excluding hospital psychiatric services, rehabilitation and palliative care).
2 MONTHS	All other hospital services, including accident-related treatment (for services included in your cover).

WHAT'S NOT COVERED?

There are a number of situations where our health insurance doesn't cover you, including for example:

- claims for services by providers not recognised by HCF, and that do not meet HCF's criteria as set out in the Fund Rules
- treatment for pre-existing conditions (other than for hospital psychiatric services, rehabilitation or palliative care) within the 12-month waiting period
- experimental, high cost non-PBS drugs and TGA-approved drugs used for a purpose other than that for which they were approved.

Please refer to the HCF Member Guide or Fund Rules for a comprehensive list of exclusions.

Note:

This product summary is not a complete description of your cover. Please refer to the HCF Member Guide or Fund Rules, or call **13 13 34** to check what you're covered for before receiving treatment.

INVOLUNTARY UNEMPLOYMENT ASSISTANCE

Losing your job can be an incredibly stressful experience and you might be wondering how you're going to make ends meet. We're here for you, and we'll do what we can to help you with your health cover. If you're eligible*, we'll cover the cost of your health cover for up to 6 months.

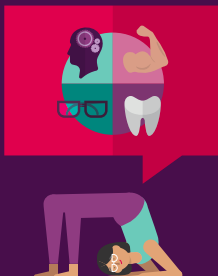



* Must have hospital cover for at least 12 months, aren't listed as a dependent and applied within 3 months of becoming unemployed. Excludes extras only, Ambulance Only and Overseas Visitors Health Cover. Other eligibility criteria apply. See hcf.com.au/unemployment-assistance



HCF FLEX MY EXTRAS PRODUCT SUMMARY

Extras cover with a flexible single limit plus additional limits for optical and remedial massage. Available only for singles and couples who want general dental, optical, physio and other therapies.

FEATURES

<p>FLEXIBLE LIMIT</p> <p>Flexible \$650 single limit plus \$175 optical and \$100 remedial massage limit</p> 	<p>GAP BONUS TOP UP</p> <p>Reduce or eliminate out-of-pocket costs*</p> 	<p>ONLINE MENTAL HEALTH COURSES</p> <p>Take charge of your mental wellbeing with online support programs</p> 	<p>BE REWARDED WITH A GREAT RANGE OF EXCLUSIVE OFFERS</p> <p>through HCF Thank You</p> 
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INCLUDES

- ✓ 60% benefit back up to the annual limit
- ✓ Flexible \$650 single limit plus \$175 for optical and \$100 for remedial massage and myotherapy
- ✓ 100% back^ on 1 dental check-up a year per person through our No-Gap network
- ✓ Gap Bonus top up*
- ✓ Teeth whitening#
- ✓ HCF-approved Online Cognitive Behavioural Therapy courses
- ✓ HCF-approved vaccinations

100% BACK ON DENTAL

Get 100% back^ on 1 dental check-up, scale and clean and fluoride treatment a year, through our No-Gap network.



* Each member listed on the policy has their own Gap Bonus entitlement. Gap Bonus is non-transferable between members and is only available for singles and couples. Gap Bonus kicks in after 12 months on your Flex My Extras cover. Gap Bonus must be used during the calendar year in which it is granted (\$50 in year 2, \$75 in year 3, \$100 in year 4 and each year after that). Gap Bonus can be used on any covered extras service. Unused Gap Bonus cannot be rolled over into the following calendar year.

Limit of one take home kit or in-chair treatment (max 8 teeth/session) applies every 36 months.

^ 100% back from providers in our No-Gap network. Waiting periods and annual limits apply. Providers are subject to change. We recommend that you confirm the provider prior to booking your appointment. See hcf.com.au/100back

HCF FLEX MY EXTRAS

TREATMENTS COVERED BY THIS POLICY

SERVICE CATEGORY			DESCRIPTION	INDICATIVE BENEFIT AMOUNT	WAITING PERIOD	ANNUAL OR SERVICE LIMIT PER PERSON, PER CALENDAR YEAR	
OPTICAL	Glasses and contact lenses	Spectacle frames	60%*	2 months	\$175		
		Spectacle lenses – pair					
		Contact lenses – pair					
GENERAL DENTAL	Diagnostic and preventative	Examinations	60%* (100% back from providers in our No-Gap network)	2 months	No annual limit Max 1 check up, 1 scale and clean and 1 fluoride		
		Removal of plaque/calculus					
		Application of fluoride					
		Single film X-rays (service limits apply)					
	Simple fillings	Direct fillings (1 to 2 surfaces)	60%*	2 months	\$650 combined limit (Teeth whitening has a service limit of an in-chair treatment – max 8 teeth/session – or one take home kit; applies every 36 months.)		
	Tooth extractions	Simple extractions		12 months			
	Teeth whitening (provided by a dentist)	In-chair treatment (service limits apply)					
		Home application (service limits apply)		2 months			
THERAPIES	Allied health First visit/subsequent	Dietetics		60%*		2 months	\$100
		Physiotherapy					
		Exercise physiology					
	Mental health services Group/individual	HCF-approved Online Cognitive Behavioural Therapy	With combined \$650 limit				
	Natural therapies First visit/subsequent	Remedial Massage and Myotherapy					
Acupuncture and Chinese herbal medicine consultation							
OTHER	Vaccines	HCF-approved e.g. Boostrix, Shingrix, Vivaxim and more	100%	1 day	No annual limit		
	Emergency ambulance (State govt. services)	NSW and ACT			1 service per person Max 2 services per policy		
		VIC, WA, NT, and SA					

* 60% benefit back up to the annual limit.

TREATMENTS NOT COVERED BY THIS POLICY

SERVICE CATEGORY	DESCRIPTION
MAJOR DENTAL	Direct fillings (3 surfaces or more), indirect fillings, oral surgery, occlusal therapy, periodontics, endodontics, crowns and bridges, dentures and orthodontics.
THERAPIES	Chiropractic, osteopathy, occupational therapy, all psychology services, HCF-approved counselling and accredited mental health social worker, podiatry (including foot orthotics), orthotist/prosthetist and pedorthist, audiology, speech pathology and orthoptic therapy.
OTHER	HCF-approved pharmacy, travel and accommodation, artificial aids, hearing aids, health management programs and school accident benefit.

HCF THANK YOU

LOYALTY REWARDS

You don’t have to be unwell to get great value from your cover with our range of exclusive loyalty offers and rewards. We can help you save money on essentials like groceries or on well-deserved treats and experiences^.

🔍 hcf.com.au/thankyou

^ Eligibility criteria applies. You can access HCF Thank You offers after you’ve been a member for a week, and if your premiums are up to date.



THINGS YOU NEED TO KNOW

Gap Bonus helps reduce or eliminate out-of-pocket costs for included extras by topping up the benefit we pay on services included in your Flex My Extras cover. Gap Bonus kicks in after 12 months on your Flex My Extras cover and increases each year of continuous cover up to year 4*.

GAP BONUS	
YEARS OF COVER	GAP BONUS AMOUNTS
Year 1	N/A
Year 2	\$50
Calendar Year 3	\$75
Calendar Year 4 or more	\$100

* Each member listed on the policy has their own Gap Bonus entitlement. Gap Bonus is non-transferable between members and is only available for singles and couples. Gap Bonus must be used during the calendar year in which it is granted (\$50 in year 2, \$75 in year 3, \$100 in year 4 and each year after that). Unused Gap Bonus cannot be rolled over into the following calendar year.

The following waiting periods apply where these services are covered under your policy:

EXTRAS WAITING PERIODS	
1 DAY	Emergency ambulance.
12 MONTHS	Teeth whitening (provided by a dentist).
2 MONTHS	Optical - Glasses and contact lenses, General dental - Diagnostic and preventative, Simple fillings, Tooth extractions, Dietetics, HCF-approved Online Cognitive Behavioural Therapy courses, Physiotherapy, Exercise physiology, Remedial Massage, Myotherapy, Acupuncture and Chinese herbal medicine consultation and HCF-approved vaccines.

WHAT'S NOT COVERED?

There are a number of situations where our health insurance doesn't cover you, including for example:

- claims for services by providers not recognised by HCF, and that do not meet HCF's criteria as set out in the Fund Rules
- experimental, high cost non-PBS drugs and TGA-approved drugs used for a purpose other than that for which they were approved
- claims made 2 years or more after the date of service
- more than 1 therapy service performed by the same provider in any 1 day.

Please refer to the HCF Member Guide or Fund Rules for a comprehensive list of exclusions.

Note: This product summary is not a complete description of your cover. Please refer to the HCF Member Guide or Fund Rules, or call 13 13 34 to check what you're covered for before receiving treatment.