



WHY PRIVATE HEALTH INSURANCE MAKES COMMON SENSE

Everyone has their own reasons for choosing private health insurance. It could be for peace of mind or it might make financial sense. Here are some of the benefits of having private health insurance.



CHOOSE YOUR HOSPITAL AND SPECIALIST

You decide who treats you and where.



SKIP THE PUBLIC HOSPITAL WAITING LIST

Cut down the time you need to wait for elective surgery.



BETTER ACCESS TO A PRIVATE ROOM

In a private hospital you're more likely to have a private room, so you can recover in the peace and privacy of your own space. They're allocated on patient need so we can't guarantee one.



RIDE EASIER IN AN EMERGENCY

Medicare doesn't cover ambulance services and these can be costly (if you're not covered by a state-based ambulance scheme).

Depending on which cover you choose, you could be covered for ambulance costs in an emergency (see page 27 for more details).



CLAIM ON A RANGE OF SERVICES WITH EXTRAS COVER

Depending on which extras cover you choose, you can claim on a range of services like dental, optical, physio, health management programs and more.

SUPPORT YOUR WELLBEING WITH OUR HEALTH PROGRAMS

We understand your health journey is unique. That's why you can access our range of health programs, supporting you wherever you're at in your life. See pages 20-21 for more details.

GET AHEAD ON GOVERNMENT INCENTIVES

- You could reduce your premiums with the Australian Government Rebate on private health insurance.
- You could avoid the Medicare Levy Surcharge.
- Avoid the Lifetime Health Cover loading if you take out hospital cover before
 1 July following your 31st birthday, and maintain it.

UNCOMMON CARE WHEN YOU NEED IT MOST

Matthew and Nadine's world turned upside down with Matthew's cancer diagnosis. Luckily he had access to HCF's treatment at home program, which meant he didn't have to go to hospital and instead was treated from the comfort of his lounge.

Find out more at hcf.com.au/home-treatment

"We just assumed that he'd have to have chemo somewhere and have to travel... then HCF said that they were going to do it at home and it was just such a relief."

Nadine HCF member

WE'RE ALL ABOUT UNCOMMON CARE HERE'S HOW

At HCF, we put our money where our members are. Unlike the for-profit insurers, our focus is where it should be – on providing award-winning value products, service and support to our members, not profits to shareholders.

AUSTRALIA'S LARGEST NOT-FOR-PROFIT HEALTH FUND

We're Australia's largest not-for-profit health fund, trusted by over 2 million members to be there when it matters most.



100% BACK ON POPULAR EXTRAS

Pay \$0 on 1 or 2 dental check-ups a year and a first visit to a physio, chiro or osteo with over 16,000 extras providers who participate in our No-Gap network*.

MORE MONEY BACK

For every dollar our members paid in premiums, we've paid out more benefits than the industry average over the last 10 years[^].



WE'RE HERE FOR YOU

Proudly owned and run by Aussies, we're here to help you with award-winning local call centres and branches across the country.



KIDS GO FREE

If you add your kids under 22 to your HCF family cover (on a single parent or two-parent family policy), the cost of that cover stays the same. You also pay \$0 excess for kids aged under 25, no matter how many times they go to hospital. Excludes Corporate Accident Only Basic cover.

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 e-Gift cards for groceries or on well-deserved treats and experiences⁺.



- * 100% back at More for You program providers in our No-Gap network is available on selected covers. Waiting periods and annual limits apply. Our No-Gap network of healthcare providers changes often. Please check that your provider is part of our No-Gap before you book or attend an appointment. See hcf.com.au/100back
- 88.8% compared to 85.3% across the industry. Calculated based on the average of the past 10 years, sourced from APRA Statistics: Operations of Private Health Insurers Annual Report data 2014–23 and Quarterly private health insurance statistics July 2023–March 2024.
- + 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. Excludes Ambulance Only and Overseas Visitors Health Cover. Offers and partners are subject to change without advance notice. See the HCF Thank You Terms available at hcf.com.au

LET US HELP YOU CHOOSE

We've got a range of health cover options to suit your needs. You might already know what you're after, or maybe you'd like guidance based on where you're at in life. This quick reference guide will make choosing easy.



Not sure and need help?

1800 880 049



Visit a branch

NEED SOME HELP CHOOSING?

ALREADY KNOW WHAT YOU WANT?



PAGES 12 & 13

OR

JUST WANT AMBULANCE COVER?



hcf.com.au/ambulance

PAGES 6 & 7

SUGGESTIONS FOR YOUR LIFE STAGE



PAGES 10 & 11

PICK A PACKAGE



OR

CHOOSE YOUR HOSPITAL AND/OR **EXTRAS**





PAGES 14-17

NEED OTHER PROTECTION?



LIFE AND RECOVER COVER

We've got a range of protection options to suit your lifestyle and budget needs.

PAGES 18 & 19

CAR

INSURANCE

Cover your vehicle with comprehensive or third party insurance options.

PAGE 23



HOME AND CONTENTS

LET'S GET STARTED

INSURANCE

Cover your home inside and out with a range of home and contents insurance.

PAGE 23

PET **INSURANCE**

We can help with the cost of your cat or dog's eligible vet bills (paying up to

80% back).

PAGE 22

TRAVEL INSURANCE

Whether you're travelling near or far, often, or just taking a single trip we can help

get you covered.

PAGE 22

FLIP INSURANCE

On-demand cover that pays cash if you're injured in an accident.

PAGE 22



In our experience when it comes to choosing health cover, it helps to start by considering where you're at in life. While this doesn't include all possibilities, it's a good way to see what you're likely to need from your cover.

HOSPITAL COVER CATEGORIES

All hospital cover is categorised as either Gold, Silver, Bronze or Basic. The government sets out which treatments and services each category needs to include (as a minimum). On our hospital products we've chosen to cover additional services, above the minimum requirement, and that's why the products include 'Plus' in the name.

The ranking makes it easier to compare different policies, so you can confidently choose the cover that's right for you. The table below shows which category each of our suggested hospital covers fall into.



HOW WOULD YOU DESCRIBE YOURSELF?		HOSPITAL CATEGORY	WHAT TYPE OF COVER IS IMPORTANT TO YOU?	SUGGESTED HOSPITAL & EXTRAS
		Gold	Top level hospital for peace of mind and comprehensive extras	Corporate Premium Gold and Active Extras
	YOUNG SINGLES	+ Silver Plus	Affordable hospital cover for common procedures and flexible extras that lets you choose what you're covered for	Corporate Standard Silver Plus and Corporate Choose My Extras
	& COUPLES Not planning a family	Bronze Plus	Affordable hospital cover designed for the fit and healthy and flexible extras	Corporate Bronze Plus and Corporate Flex My Extras
	Not planning a family	* Basic Plus	Budget hospital cover and commonly used extras for the young and healthy	Corporate Basic Plus and Essential Extras
		Gold	Top level hospital and extras cover for peace of mind	Corporate Premium Gold and Ultimate Extras
	PLANNING KIDS A single or couple starting or growing a family	+ Silver Plus	Packaged hospital and extras cover including pregnancy and a wide range of extras services	Family Care Advanced Silver Plus package
		+ Silver Plus	Packaged hospital and extras cover including pregnancy and flexible extras	Family Care Silver Plus package
0.0	FAMILY WITH	Gold	Comprehensive hospital cover and top level extras for the whole family	Corporate Silver Plus and Ultimate Extras
.2.	KIDS With no plans to have more kids	+ Silver Plus	Affordable hospital cover for common procedures and flexible extras that lets you choose what you're covered for	Corporate Standard Silver Plus and Corporate Choose My Extras
		* Bronze Plus	Affordable hospital cover designed for the fit and healthy and mid level extras	Corporate Bronze Plus and Lifestyle Extras
	CINICI EC C	Gold	Top level hospital for peace of mind and comprehensive extras	Corporate Premium Gold and Advanced Extras
	SINGLES & COUPLES No kids, not planning a family or kids have left home	+ Silver Plus	Comprehensive hospital cover and extras cover for a wide range of services	Corporate Silver Plus and Active Extras
		+ Silver Plus	Affordable hospital cover for common procedures and flexible extras that lets you choose what you're covered for	Corporate Standard Silver Plus and Corporate Choose My Extras
		+ Bronze Plus	Affordable hospital cover designed for the fit and healthy and mid level extras	Corporate Bronze Plus and Lifestyle Extras

(2)

FLEXIBLE EXTRAS

Find more information on our extras cover options and benefits on pages 16-17.

CORPORATE CHOOSE MY EXTRAS

Our most flexible corporate extras cover for singles, couples and families. Select and swap* your unused extras services as your needs change, so you only pay for what you intend to use.

LIFE CHANGES - NOW YOUR EXTRAS CAN TOO

- Choose 4 extras services from the categories listed on this page and get 65% back on most services up to the annual limit.
- Swap unused extras services at any time, as long as no one on the policy has claimed on them during the calendar year.
- Get 100% back[^] on some extras through our extensive No-Gap network, up to your annual limit.
- Enjoy an annual limit increase on most extras services the longer you're with us (up to a maximum limit)*.

MAKE YOUR EXTRAS EXTRA PERSONAL

Select 4 extras services from the following categories:

- 1 Optical
- 2 General dental##
- 3 Major dental##
- 4 Orthodontics##
- 5 Physiotherapy and exercise physiology
- 6 Chiropractic and osteopathy
- 7 Podiatry##

- 8 Speech pathology and occupational therapy
- 9 Dietician
- Mental health services
- 11 Natural therapies
- 12 Vaccines
- 13 Health management programs

CORPORATE FLEX MY EXTRAS

Want to spend your limit your way?
Corporate Flex My Extras is our affordable
extras cover for singles and couples that flexes
to suit your needs. Get 65% back on a flexible
\$650 single limit to use on selected extras like physio, chiro or dental - plus a separate
\$175 optical limit and \$100 remedial massage
and myotherapy limit.

- **Optical**
- Natural therapiesDietician
- General dental

Physiotherapy

- **✓** Vaccines
- Exercise physiology
- Online mental health support

FEATURES

- 100% back on 1 dental check-up, scale and clean and fluoride treatment per person, per year
- Gap bonus, to reduce or eliminate out-of-pocket costs for included extras by topping up the benefit we pay the longer you're with us (kicks in after 12 months).
- Teeth whitening with a dentist^^^
- Mental health support with online support programs from This Way Up**
- HCF-approved vaccinations

✓ ✓ ✓

- * The policyholder can swap out a service for another service at any time provided that no one on the policy has claimed on that service during the calendar year. If you swap in teeth whitening, major dental, orthodontics or minor podiatric procedures, a 12 month waiting period will apply from the date of the swap.
- 100% back at More for You program providers in our No-Gap network is available on selected covers. Waiting periods and annual limits apply. Our No-Gap network of healthcare providers changes often. Please check that your provider is part of our No-Gap network before you book or attend an appointment. See hcf.com.au/100back
- ⁺ Annual limits increase on some services in year 2 and 3. See extras table on pages 16-17 for details.
- # 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. Excludes Ambulance Only and Overseas Visitors Health Cover. Offers and partners are subject to change without advance notice. See the HCF Thank You terms available at hcf.com.au/thankyou
- ** Available at participating optical providers. 100% back for prescription glasses and sunglasses excludes add-ons like high index material, coatings and tinting.
- A first visit means an initial consultation for an eligible health condition that is new or flare up where no treatment has been provided in the last 3 months.
- ** \$400 per person per calendar year to top up your annual limit for accident-related services. Can be used for 2 years after the accident provided you make the first extras claim within 6 months of the accident.
- Teeth whitening, major dental, orthodontics and minor podiatric procedures have a 12 month waiting period from the date of the swap.

 Teach 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.
- Limit of I take-home kit or in-chair treatment (max. 8 teeth/session) applies every 36 months. A 12 month waiting period applies.

 This service is not affiliated or associated with HCF in any way. You should make your own enquiries to determine whether this
- service is suitable for you. If you decide to use this service, it'll be on the basis that HCF won't be responsible, and you won't hold HCF responsible, for any liability that may arise from that use.

FEATURES

- 100% back^ on 1 dental check-up, scale and clean and fluoride treatment per person, per year
- 100% back^ on a pair of prescription glasses** from a selected range plus free digital retinal imaging with your eye test
- 100% back on a first visit to a physio, chiro, osteo and podiatrist 1
- Higher annual limits which increase the longer you're with us, up to a maximum amount⁺
- Accident Benefit, which provides you with additional limits when claiming as a result of an accident on your selected services, once your current annual limit is used up⁺⁺





EASY TO CHOOSE PACKAGES

On pages 14-17 you'll find a detailed list of hospital and extras benefits.



Future Care Basic Plus packages are designed for the lifestyle and budgets of young, healthy people. They're a combo of budget hospital cover and a flexible extras limit to give you the freedom to choose how you use your extras.



FUTURE CARE 250/500/750 BASIC PLUS PACKAGES



We offer a choice of 3 packages, each with a different hospital excess and extras services and limits, so you can pick what's best for you.

- Choose from a \$250, \$500 or \$750 excess.
- ✓ A flexible extras limit so you can pick the services you claim most.
- An additional optical limit with Future Care 250 & 500.
- Claim on teeth whitening provided by your dentist*.
- ✓ 100% back^{*} through our No-Gap network on:
 - a dental check-up
 - a pair of prescription glasses from a selected range⁺ and free digital retinal imaging with your eye test (excluding Future Care 750)
 - a first visit** to a physio.
- Accident Safeguard get the benefits of our top hospital cover for 90 days if you're in an accident and go to an emergency department within 24 hours#.
- Ambulance cover in emergencies.

FAMILY CARE SILVER PLUS



This package is ideal if you're planning a family, it covers you for pregnancy and birth (after a 12 month waiting period), as well as dental, optical and popular therapies.

- Private hospital cover for pregnancy and birth (after a 12 month waiting period).
- Hospital and extras package with antenatal and postnatal support, including childbirth education classes and breastfeeding support services provided by the Australian Breastfeeding Association**.
- Accident Safeguard get the benefits of our top hospital cover for 90 days if you're in an accident and go to an emergency department within 24 hours#.
- No excess for kids aged under 25 or for accident-related treatment (for services included in your cover).
- Flexible extras limit so you can claim the included services you need most, with an additional optical limit.
- HCF-approved learn to swim and weight management programs for eligible members**.
- 100% back^ through our No-Gap network on:
 - up to 2 dental check-ups
 - a pair of prescription glasses from a selected range⁺ and free digital retinal imaging with your eye test.

PLANNING A FAMILY

If you're planning to have kids, or adding to a growing family, and don't need IVF treatment, HCF's Family Care Silver Plus or Family Care Advanced Silver Plus packages have you covered. We offer a wide range of services and treatments for before, during and after your pregnancy.

FAMILY CARE ADVANCED SILVER PLUS



All of Family Care Silver Plus with these added benefits:

- ✓ 100% back[^] on a first visit⁺⁺ to a physio, chiro, osteo and podiatrist in our No-Gap network.
- added family-friendly extras services including orthodontics, speech therapy, podiatry and foot orthotics*, School Accident Benefit^^ and occupational therapy.
- * Service limits and 12 month waiting period applies.
- 100% back at More for You program providers in our No-Gap network is available on selected covers. Waiting periods and annual limits apply. Our No-Gap network of healthcare providers changes often. Please check that your provider is part of our No-Gap network
- before you book or attend an appointment. See hcf.com.au/100back
 Up to your annual limits. Excludes add-ons like high index material, coatings and tinting.
- To be eligible, you must go to a hospital emergency department within 24 hours. Benefits are not payable for expenses incurred in relation to an injury where compensation, damages or benefits may be claimed from another source. Other conditions apply. See hcf.com.au/accident-safeguard
- ** Annual limits and waiting periods apply.
- Annual littles and waiting periods apply.

 Applies to children attending school, up to and including year 12.
 Subject to waiting periods, annual limits and other conditions.
 See hcf.com.au/school-accident
- ++ The first visit for a new health condition or flare up where no treatment has been provided in the previous 3 months.

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BUILD YOUR OWN COVER

Create your own package by mixing and matching covers to get the one that's right for you. Ask yourself — do I want to combine hospital and extras covers? Or do I only need hospital? Or just extras? You have the flexibility to pick what works for you.

To help you design what's right for you, outlined below are the key features of each cover, from the basic options all the way to the most comprehensive.

CREATE THE RIGHT COVER FOR YOU



and benefits

HOSPITAL ONLY

OR



On pages 14-17 you'll see a detailed list of what's covered.

	HOSPITAL				
FEATURES	CORPORATE PREMIUM GOLD Want our top level of cover for peace of mind? Corporate Premium Gold hospital has you covered.	CORPORATE SILVER PLUS Not planning a baby, but want comprehensive cover? Choose our Silver Plus option.	CORPORATE STANDARD SILVER PLUS Think you may need a common procedure? Our Standard Silver Plus cover is an affordable option.	CORPORATE BRONZE PLUS Budget conscious and healthy? Corporate Bronze Plus hospital cover is for you.	CORPORATE BASIC PLUS Young and healthy, and looking for affordable hospital cover? Get Corporate Basic Plus.
Choice of excess No excess for kids aged under 25 or accident-related treatment (for services included in your cover) Free access to a great range of health and wellbeing programs for eligible members Treatments like joint investigations, removal of tonsils or appendix	✓	✓	✓	✓	✓
Treatments like digestive system procedures or sleep studies	~	~	~	~	
Heart and vascular systemBack, neck and spineRehab	✓	~	~		
 Joint replacements Dialysis for chronic kidney failure Cataracts 	/	/			
No excess for same day admissions Pregnancy and birth Assisted reproductive services e.g. IVF	✓				

±	EXTRAS						
	Our premium extras option, Ultimate provides the highest limits and benefits for all included extras services.	ADVANCED Want higher limits than Active Extras? Choose Advanced Extras.	ACTIVE Think you might need major dental, orthodontics and cover for a wide range of extras services? Consider Active Extras.	CORPORATE CHOOSE MY EXTRAS Our most flexible extras cover. Select and swap" your extras services, so you only pay for what you intend to use. (See pages 8-9)	Want to step up your dental? Get cover for crowns, bridges and dentures with Lifestyle Extras.	CORPORATE FLEX MY EXTRAS Want affordable extras with a flexible single limit plus additional limits for optical and remedial massage? Get Corporate Flex My Extras.	Want general dental, optical and selected therapies at a budget-friendly, entry-level rate? Try Essential Extras.
FEATURES	Use Limit Boo optical limit. S	ost to top up your o See page 17.	dental and			Includes Gap Bonus. See page 17.	
100% back* on: 1 dental check per year certain glasses and lenses* Free digital retinal imaging with your eye test	✓	✓	/	(if selected)	~	~	~
Cover for optical	✓	✓	✓	(if selected)	/	providers in our l is available on se	lected covers.
• 100% back* on an additional dental check (up to 2 per year)	✓	~	~	×	✓	apply. Our No-G healthcare provid Please check tha part of our No-G	ders changes often. t your provider is ap network before and an appointment.
100% back* on a first visit^ to a physio, chiro, osteo and podiatrist	/	/	/	(if selected)			s like high index is and tinting. eived for a new or flare up where s been provided in
 Increasing limits the longer you're with us on some services, up to a maximum amount 	×	×	/	(if selected)		# The policyholder service for anoth provided that no has claimed on the the calendar year	can swap out a er service at any tim one on the policy nat service during r. If you swap in teet dental, orthodontic
Our highest limits						12 month waiting	period will apply

HOSPITAL BENEFITS		HOSPITAL AND EXTRAS PACKAGES		HOSPITAL ONLY COVERS			
SUMMARY	FAMILY CARE ADVANCED SILVER PLUS/FAMILY CARE SILVER PLUS	FUTURE CARE 250/500/750 BASIC PLUS Singles & couples only	CORPORATE PREMIUM GOLD	CORPORATE SILVER PLUS	CORPORATE STANDARD SILVER PLUS	CORPORATE BRONZE PLUS	CORPORATI BASIC PLUS
Choose your excess (per person per calendar year)	\$500 or \$750 Family Care Advanced, \$750 Family Care	\$250, \$500 or \$750	\$250,\$500 or\$750	Nil,\$250,\$500 or\$750	Nil,\$250,\$500 or\$750	\$250, \$500 or \$750	\$500 or \$75
No excess for kids aged under 25	✓	N/A	/	/	/	/	
No excess for accident-related treatment (for services included in your cover)	✓	✓	✓	/	/	/	
No excess for same-day treatment	×	×	✓	×	×	×	×
Travel & accommodation benefit ^	✓	✓	✓	/	/	/	
Involuntary Unemployment Assistance (see page 22)	✓		/	/	/	/	
Examples of what's covered Includes accommodation, operating theatre, intensive care, government-approved Prostheses, pharmaceuticals# and	physiotherapy, as p	art of your covered admis	sion at a participatir	ng private hospital			
Emergency ambulance	/	/	/	/	/	/	
Accident Safeguard - Services Not Included or Restricted Services listed in this table will be treated as covered on an unrestricted basis in the event of an Accident that occurs after joining. Does not include podiatric surgery by a registered podiatric surgeon. Conditions apply. hcf.com.au/accident-safeguard	✓	/	/	/	~	✓	✓
Rehabilitation		R				ß	R
Hospital psychiatric services	®	B		B	®	B	B
Palliative care		B					B
Brain and nervous system e.g. stroke, brain or spinal cord tumours		×				<u> </u>	×
Eye (not cataracts) e.g. retinal detachment, tear duct conditions, eye infections and medically managed trauma to the eye		×					X
Ear, nose and throat e.g. damaged ear drum, sinus surgery, removal of foreign bodies, stapedectomy and throat cancer		<u> </u>	<u> </u>				×
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		<u> </u>					×
Joint reconstructions e.g. torn tendons, rotator cuff tears and damaged ligaments		<u> </u>					
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		<u> </u>					
Gastrointestinal endoscopy e.g. colonoscopy and gastroscopy		×					<u> </u>
Gynaecology e.g. endometriosis, polycystic ovaries, female sterilisation and cervical cancer		<u> </u>					
Miscarriage and termination of pregnancy		<u> </u>					
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		<u> </u>					×
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	✓	×	<u> </u>	*	*	×	×
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	/	✓	/	/	/	/	
Podiatric surgery provided by a registered podiatric surgeon. Limited benefits apply.	•	×	P	P	•	P	×
Implantation of hearing devices*	/	×	✓	/	/	×	×
Cataracts	×	×	/	1	×	×	×
Joint replacements	×	×	/	/	×	×	×
Dialysis for chronic kidney failure	×	×	/	/	×	×	×
Pregnancy and birth	/	×	/	×	×	×	×
Assisted reproductive services	×	×	/	×	×	×	×
Weight loss surgery	×	×	/	×	×	×	×
Insulin pumps	×	×	0	×	×	×	×
Pain management with device e.g. treatment of nerve pain, back pain and pain caused by coronary heart disease with a device	×	×			×	×	×
- Management and wester e.g. a countries of their or pain, back paint and paint caused by coronary mean auditation of wester auditations.	~	^	*		^	^	

WAITING PERIODS

HOSPITAL	
Palliative care Hospital psychiatric services Rehabilitation	2 months
Pre-existing ailments or conditions (see page 24) Pregnancy and birth	12 months
All other hospital services including treatments under Accident Safeguard	2 months
AMBULANCE	
Emergency ambulance	1 day

Waiting periods vary according to the type of treatment or service. Members who have held a hospital cover for at least 2 months and upgrade to receive hospital benefits (or a higher level of hospital benefits) for hospital psychiatric services may elect to be exempted from the 2 month waiting period for hospital psychiatric services. This exemption or reduction can only be accessed once in a member's lifetime.

NO EXCESS FOR SAME-DAY TREATMENT

HCF will waive any applicable excess for same-day treatment for members who have held HCF Corporate Premium Gold for at least 12 months.

® RESTRICTED COVER

Restricted Cover is where certain services are specified as being Restricted Services under a hospital product and where Minimum Benefits are applicable. From time to time, the Australian Minister for Health sets out a rate for Minimum Benefits. These Minimum Benefits apply to Restricted Services under some of our hospital covers. If you have Restricted Services under your cover, HCF will pay the Minimum Benefit for a shared room and benefits for government-approved Prescribed List of Medical Devices and Human Tissue Products items and medical services for these Restricted Services. This means that you may have to pay significant out-of-pocket expenses in a private hospital. In a public hospital, if you elect to be a private patient, you may also have to pay significant out-of-pocket expenses.

See page 24 for further details.

× SERVICES NOT INCLUDED

If you choose a hospital cover where some treatments are not included in your cover then no benefits are payable for those treatments and all services associated with those treatments e.g. prosthesis, medical, diagnostics, except in the case of Accident Safeguard.

See page 24 for further details.

Please note: Other service exclusions apply. For more information on excluded services read page 24.

- Service covered on an unrestricted basis at participating hospitals.
- 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.
- Over is subject to conditions (e.g. provision of a Type C certificate if an insulin pump is provided in hospital with a Type C procedure). For insulin pumps provided as an outpatient, limitations apply to benefits for replacement insulin pumps. See **hcf.com.au/insulinpumps** to find out if you're covered.

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 don't hold eligible extras cover.



Sleep studies e.g. sleep apnoea and snoring

^{*} Includes associated speech and sound processors (including upgrades).

When you travel at least 200km round trip. Other terms and conditions apply. Go to hcf.com.au/travel-accommodation to find out more.

00% BACK ON POPULAR EXTRAS
get 100% back* at More for You providers who partici
ng on your cover, and annual and service limits, includ

dependi 1 or 2 dental check-ups a year

a pair of prescription glasses from a selected

To find a participating provider go to hcf.com.au/findaprovider

a first visit to a podiatrist#

range^{*} and free digital retinal imaging with your eye test

GET

You can

a first visit to a physio+

each year (see below for details)

* 100% back at More for You program providers in our No-Gap network is available on selected covers. Waiting periods

is part of our No-Gap network before you book or attend an appointment. See hcf.com.au/100back At participating providers. Up to your annual limits. Excludes add-ons like high index material, coatings and tinting. 100% back is only available on selected covers. A first visit is the first service received for a new health condition or

and annual limits apply. Our No-Gap network of healthcare providers changes often. Please check that your provider

- flare up where no treatment has been provided in the previous 3 months. * Service limits may apply for foot orthotics.
- X Services Not Included

ANNUAL LIMITS

HCF pays a set amount of benefits for each service or good included in your cover. This may not cover the full

charge and you'll need to pay any gaps. Annual limits are the maximum amount of benefits that HCF will pay for the service or good in a calendar year. They apply per person, per calendar year unless stated otherwise. LIMIT BOOST

Limit Boost lets you top up your annual limit on general dental and optical. The limit boost kicks in after 12 months an usual.

in after 12 months on your extras cover and grows every year, up to year 6.

ULTIMATE EXTRAS ADVANCED EXTRAS ACTIVE EXTRAS

LOYALTY REWARDS	OLI IIIIAT E EXTRAS		7.0 (7.11.0)	.D LATINA	ACTIVEENTIA		
years of membership	Single	Couple/family	Single	Couple/family	Single	Couple/family	
Year 1	N/A	N/A	N/A	N/A	N/A	N/A	
Year 2	\$100	\$200	\$75	\$150	\$50	\$100	
Year 3	\$125	\$250	\$100	\$200	\$75	\$150	
Year 4	\$150	\$300	\$125	\$250	\$100	\$200	
Year 5	\$175	\$350	\$150	\$300	\$125	\$250	
6 years or more	\$200	\$400	\$175	\$350	\$150	\$300	

apply per policy and renews on your policy anniversary date. Any unused **Limit Boost** cannot be carried into the following year. Your Limit Boost amount is transferable between eligible extras covers.

GAP BONUS FOR CORPORATE FLEX MY EXTRAS

services included in your Corporate Flex My Extras cover. Gap Bonus kicks in after 12 months. If you transfer from a product with Limit Boost, you'll receive continuity for Gap Bonus

YEARS OF COVER ON CORPORATE FLEX MY EXTRAS	GAP BONUS AMOUNTS PER PERSON
Year 1	N/A
Year 2	\$50
Calendar year 3	\$75
Calendar year 4 or more	\$100

EXTRAS LIMITS SUMMARY

xaminations Single film X-rays – initial/subsequent (on same day) Diagnostic & preventative Removal of plaque/calculu oplication of fluoride **Teeth Whitening** -chair treatment service limits apply)

12 months n-chair treatment - max 8 teeth/ session, or 1 take home kit. Applies every 36 months.) 2 months

WAITING PERIODS

2 months

2 months

12 months

2 months

minor podiatric procedures)

2 months for foot orthotics and

\$1,700 combined limit per person, per year \$2,100 lifetime limit for orthodontics with a sub-limit of \$1,050 for other dentists (Excludes occlusal therapy)

With combined limit

With combined limit

With combined limit

(Note that set benefits

and service limits

may still apply)

FAMILY CARE

ADVANCED SILVER PLUS

WO 3 1

\$300

\$1.150 combined limit per person, per vear (Excludes occlusal therapy)

With combined limit

With combined limit

(Note that set benefits

and service limits

may still apply)

FAMILY CARE

SILVER PLUS

M O

\$250

\$900 combined limit per person, per year (Excludes occlusal therapy)

With combined limit

101

\$180

per person, per year (Excludes occlusal therapy)

With combined limit

1103

\$600 combined limit pe person, per year (Excludes occlusal therapy)

With combined limit

With combined limit

X

W A

\$1,300

\$800 (\$400 for other

\$2,400 for orthodontist

with \$1,200 sub-limit for

\$900

\$450

\$500 Sub-limit \$300

per therapy service

\$280

Max \$250 per policy

Under 1 year NIL

Up to 5 years \$800

6-9 years \$1,100

10-14 years \$1.400

15+ years \$1,800

Max \$250 per policy

\$150 per person

Max \$300 per policy

other dentists

ULTIMATE EXTRAS

NO DETA

\$300

No annual limit

Max 2 check ups.

2 scale and clean, and

1 fluoride treatment

per person, per year

ANNUAL LIMIT (PER PERSON PER CALENDAR YEAR UNLESS STATED OTHERWISE). HCF PAYS A SET AMOUNT OF BENEFITS OR A PERCENTAGE BACK WHICH MAY NOT COVER THE FULL CHARGE. To see the benefit amount payable for each service, please refer to the Product Summary available at

\$800 (\$400 for other

entists) Lifetime limit

\$2,400 for orthodontist

with \$1,200 sub-limit for

\$700

\$350

\$400

\$450

Sub-limit \$300

per therapy service

\$280

Max \$200 per policy

Under1vear NIL

Up to 5 years \$800

6-9 years \$1,100

10-14 years \$1.400

15+ years \$1,800

Max \$250 per policy

\$100 per person

Max \$200 per policy

other dentist

ADVANCED EXTRAS

NO DETA

\$250

No annual limit

Max 2 check ups,

2 scale and clean and

1 fluoride treatment

per person, per year

\$1,150

\$600 (\$300 for other dentist Lifetime limit \$1,800 for orthodontist with \$900 sub-limit for other dentists

NO DE

\$225

Year1\$850

Year 2 \$950

Year 3+ \$1,050

Max 2 check ups,

2 scale and clean,

and 1 fluoride treatment

per person, per vear

(Excludes occlusal

therapy)

Year 1\$400

Year 2 \$450

Year 3+ \$500

\$300

Year 1 \$200

Year 2 \$225

Sub-limit \$200

per therapy service

\$180

Max \$150 per policy

Under 1 year NIL

Up to 5 years \$600

6-9 years \$800

10-14 years \$1,000

15-19 years \$1,200

20+ years \$1,600

Max \$200 per policy

\$75 per person

Max \$150 per policy

Year 3+ \$250

odontist: \$450-\$650 Lifetime limit \$1,950 ther dentist: \$225-\$325, Lifetime limit \$975 Year 1 \$350 Year 2 \$425 Year 3+ \$500

CORPORATE CHOOSE MYEXTRAS

WO DET A

\$225

Max 1 check up,

cale and clean and

uoride treatmen

er person, per year

Year1\$350

Year 2 \$400

Year 3+ \$450

Year 1 \$500

Year 2 \$600

therapy)

Year 2 \$300

Year 3+ \$400

Year 1 \$200

Year 2 \$300

Year 3+ \$400

Year 1 \$300

Year 2 \$400

Year 3+ \$500

Year 1 \$ 200

Year 2 \$300

Year 3+ \$400

hotics excluded)

Year 3+ \$700

xcludes occlusal

X \$350

\$150

\$200

\$700

Max 2 check ups,

2 scale and clean.

and 1 fluoride

treatment per

person, per year

Excludes occlusal

therapy)

With combined

×

With combined

limit

(Online Cognitive

Behavioural

Therapy only)

\$250 \$120

X

\$120

(Online Cognitive

Behavioural

Therapy only)

Combined with

Chiro and Osteo limit

\$50 per person

Max \$100 per policy

\$150

\$450

Max 1 check up.

1 scale and clean.

and 1 fluoride

treatment per

person, per year

Excludes occlusal

therapy)

\$175

No annual limit

Max1check up,

1 scale and clean and

1 fluoride treatment

\$650

combined limit

per person, per year

With combined limit

years of membership
Year 1
Year 2
Year 3
Year 4
Year 5

Gap Bonus helps reduce or eliminate out-of-pocket costs by topping up the benefit we pay on

TEARS OF COVER ON CORPORATE FLEX IVIT EXTRAS	GAP BONOS AMOUNTS PER PERSON
Year1	N/A
Year 2	\$50
Calendar year 3	\$75
Calendar year 4 or more	\$100

Can't be rolled over into the following calendar year.

Iome application (service limits apply) rect fillings (1-2 surfaces) Fillings - direct rect fillings (3 or more surfaces) Tooth extractions Simple extractions Fillings - indirect direct fillings Oral surgery urgical extractions Occlusal therapy Freatment to improve bite Periodontics Freatment of tissue surrounding teeth Endodontics Freatment of root canals

Placing of crowns and bridges

Spectacle frames

ectacle lenses - pair

ontact lenses – pair

the date you received them (excluding HCF Family Care Silver Plus and HCF Family Care Correction of teeth and jaws by an orthodontist or other dentist Physiotherapy (includes group/class consultations for Corporate Flex My Extras only)

Exercise physiology (includes group/class consultations for Corporate

Dentures and/or components (partial and complete), Limits renew every 3 years from

Flex My Extras only) Chiropractic Osteopathy Podiatry (including 1 pair of foot orthotics per person per year) Note: foot orthotics annual limit on Active Extras is capped at Year 1# Orthotist/Prosthetist and Pedorthist consultations

ludiology Speech pathology

Dietetics

Occupational therapy Online Cognitive Behavioural Therapy courses

Psychology, counselling & accredited mental health social worker and HCF-approved

emedial massage and myotherapy cupuncture and Chinese herbal medicine consultations

HCF-approved (e.g. low vision aids, blood glucose monitors, orthoses)

cluding childbirth education classes and breastfeeding consultations

Additional HCF-approved antenatal/postnatal services -

HCF approved e.g. Boostrix, Shingrix, Vivaxim and more

After PBS equivalent co-payment subtracted

Benefits accrue over time and renew every 3 years from the date you received them

200km return trip for a consulting medical specialist and/or hospital admission.

Pregnancy compression garments, breastfeeding support services provided by the Australian Breastfeeding Association with a lactation consultant

HCF-approved programs e.g. exercise classes, group physiotherapy and group exercise

ysiology classes, weight management, learn to swim and antenatal/postnatal services

2 months

12 months

With combined limit

With combined limit With combined limit

With combined limit

With combined limit

With combined limit

\$900

\$700

Year 1 \$ 400 Year 2 \$450 Year 3+ \$500 \$300

Combined with beech Pathology

Year 1 \$300 Year 2 \$375 Year 3+ \$425 Year 1 \$200 Year 2 \$250 Year 3+ \$300

\$180

Max \$200 per policy

\$125

Psychology) Combined with Chiro and Osteo limit

\$50 per person

Max \$100 per policy

\$100 With combined limit

\$100 With combined limit

X

Gap Bonus must be used during the relevant calendar year and is not transferable between members.

Allied health THERAPI

Mental health services

CATEGORY

OPTICAL

DENTA

Glasses &

contact lenses

Crowns & bridges

Dentures

Orthodontics

Natural therapies **HCF-approved** pharmacy Vaccines Artificial aids

& appliances Hearing aids OTHER

RECOVER COVER THAT'S UNCOMMON CARE

The road to recovery is different for everyone. That's why our unique range of flexible insurance products give you cash — so you can get back to your best at your own pace. We call it Recover Cover.



WHICH RECOVER COVER IS RIGHT FOR YOU?

CASH BACK COVER

Apply if you're aged 16-60. Expires at 65.

Get \$5,000 for accidents needing surgery, or for a number of serious illnesses*. Use your cash to help with the costs of recovery: taxis to the doctor, extra rehab, hospital parking, babysitters, or help if you need time off work.

CRITICAL ILLNESS COVER



Apply if you're aged 18-54.

Get up to \$50,000°, depending on your level of cover, for serious illnesses like specified heart attacks, cancers or strokes*. A fast payment can ease the unexpected financial strain of serious illness and you choose how you use it.

INCOME PROTECT INSURANCE



Apply if you're aged 18-60. Expires at 65.

Get up to 70% of your income+ (up to \$10,000 per month for up to 12 months) if you can't work for more than 30 days because of an illness or injury*. We'll help you stay afloat while you take the time you need to recover.

Please note this information is a summary only. Read the PDS and Policy Document for full details of cover, limitations, exclusions and definitions.

LIFE PROTECT INSURANCE



Apply if you're aged 18-65. Expires at 99.

Get up to \$1.5 million, depending on your age and cover level, if you're diagnosed with a terminal illness or pass away*. It's quick financial support to help cover the costs that come at this difficult time, like your mortgage, school fees or day-to-day living expenses.

KIDS' ACCIDENT COVER



Apply for kids under 17. Expires when they turn 22.

Get handy cash# to help your child recover from a range of common injuries* if they have an accident in Australia. Quick help with the costs of splints, treatments, therapies, or just to keep the house running while your child gets better.

PERSONAL ACCIDENT INSURANCE



Apply if you're aged 55-74. Expires at 85.

Get cash for particular injuries, including certain fractures and burns, if you have an accident in Australia and depending on your level of cover, up to \$50,000° for accidental death*. Provides financial help to recover from accidents big and small.



* Subject to exclusions, limitations and definitions - please refer to the PDS and the Policy Document for further information.

Please consider each Combined Product Disclosure Statement (PDS), Policy Document and Financial Services Guide available by calling 13 13 34 or visiting hcf.com.au/lifeinfo, and consider your financial situation, objectives, and needs before deciding on these products as any advice provided does not take these into account. In addition to these documents, you should also read the Target Market Determination (TMD) for the product, which is available at hcf.com.au/lifeinfo. These covers are issued by our own HCF Life Insurance Company Pty Ltd. ABN 37 001831250, AFSL 236 806 (HCF Life). HCF Life is a wholly owned subsidiary of The Hospitals Contribution Fund of Australia Ltd ABN 68 000 026 746, AFSL 241 414 (HCF). The premiums for the life insurance products are paid to HCF Life. HCF receives commission from HCF Life for their sale of up to 40% of the first year's premium plus an additional commission of 80% of HCF Life's underwriting profit each year calculated as premiums less claims and expenses. HCF's staff may receive an incentive depending on the annual premium of these products which they sell. This will not exceed 15% of the first year's premium.

We'll help you find the right Recover Cover



1800 560 855



Visit a branch



hcf.com.au/recover-cover

Sub-limits apply. Please read the PDS.

^{*} Payment is subject to offsets including any amounts payable from your employer or superannuation fund.

[#] Get your cash payment when your claim is approved.

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ACCESS TO HEALTH PROGRAMS

We have a range of evidence-based health programs to support you in your wellbeing journey. Find out more about our full range of health programs at hcf.com.au/health-programs



HOSPITAL TREATMENTS AT HOME

We offer a wide range of treatment options in the comfort, convenience and security of your own home such as chemo, rehab after knee or hip surgery, IV antibiotics and complex wound care, for eligible members*. So you can get quality care at home, when you need it.





FREE SECOND OPINION SERVICE

Lean on our network of Aussie-based medical specialists to get a free second opinion on a health condition you're worried about. You must have had HCF hospital cover for 12 months and a specialist consultation to use this service. Excludes Accident Only Basic cover, Ambulance Only cover and Overseas Visitors Health Cover. Conditions apply.

hcf.com.au/secondopinion



HEART HEALTH

Eligible members can access a range of preventative and management programs^^, including phone coaching for heart conditions and diabetes with The COACH Program®, heart support from home with Cardihab and a free HCF Heart and Diabetes Health Check at selected locations and dates.

hcf.com.au/heart-health-programs



HCF HEALTHFUL APP

The HCF Healthful app gives eligible members access to a personalised Health Score, evidence-based health programs, real-time health and wellbeing tracking, goal setting and a 24/7 digital coach^^^.

hcf.com.au/healthful



WEIGHT MANAGEMENT

Eligible members can get free access or save on the evidence-based CSIRO Total Wellbeing Diet⁺⁺. Created by Australia's national science agency, it combines a higher protein, low-GI eating plan with exercise and proven weight management tools to help improve habits and create lifelong positive behaviours.

hcf.com.au/csiro-total-wellbeing-diet



HEALTHY EATING FOR FAMILIES

Our educational resources offer support for eligible members with kids aged 0 to 17 to develop healthy eating habits and reduce the risk of chronic conditions in the future**.

hcf.com.au/healthyfamilies



JOINT HEALTH

We offer a range of joint health programs*** to help eligible members reduce and manage pain with our Knee Osteoarthritis Program, strengthen and improve mobility with the Osteoarthritis Healthy Weight for Life program and reduce out-of-pocket costs with our No-Gap Joints program.

hcf.com.au/joint-health-programs

- * Available with HCF contracted providers, subject to member location and hospital cover. Waiting periods apply. You must have a suitable home to be treated in.
- Eligibility criteria apply. For more information see **hcf.com.au/sleepfit**
- * Eligibility criteria apply. For more information see hcf.com.au/healthyfamilies
- ^ Eligibility criteria apply. For more information see **hcf.com.au/heart-health-programs**
- + Eligibility criteria apply, see hcf.com.au/csiro-total-wellbeing-diet
- ^^^ Eligibility criteria apply. For more information see hcf.com.au/healthful
- Eligibility criteria apply. For more information see hcf.com.au/mental-support
- ## Eligibility criteria apply. For more information see hcf.com.au/calmkids
 +++ Eligibility criteria apply. For more information see hcf.com.au/joint-health-programs



SLEEP SUPPORT

Thanks to our partnership with Sleepfit Solutions, eligible HCF members⁺ can get a free 12-month subscription to the Sleepfit app designed to improve sleep and overall wellbeing.

hcf.com.au/sleepfit



HEALTH MANAGEMENT PROGRAMS

Our Health Management Programs are created with your needs in mind. Depending on your limits, level of cover and eligibility, you can claim for:

- bowel cancer screening
- weight management programs
- exercise classes and gym memberships if this is part of a health management plan.

hcf.com.au/hmp



ANTENATAL AND POSTNATAL SUPPORT

Claim on a range of programs and services for support through pregnancy and after birth, including childbirth education classes (including access to Birth Beat's online courses), breastfeeding consultations, and antenatal and postnatal group physio. You might also be able to claim on pregnancy compression garments and breastfeeding support from the Australian Breastfeeding Association.

hcf.com.au/hmp

MENTAL WELLBEING SUPPORT



FREE MENTAL WELLBEING CHECK-IN

To provide you with fast and easy access to care when it suits you, eligible members aged 12 and older can get a free annual HealthyMinds Check-in with a psychologist from the comfort of your home, with appointments available from early morning to late in the evening.



ONLINE MENTAL HEALTH SUPPORT

Access a range of evidence-based online programs through This Way Up, a mental health service developed by psychiatrists and psychologists. The programs are designed to help you understand and improve challenges like stress, insomnia, general and perinatal depression, anxiety and chronic pain ...



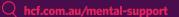
MENTAL WELLBEING SUPPORT FOR KIDS

Eligible members have free access to Calm Kid Central^{##}, an interactive online program to support parents, caregivers and kids aged 4 to 11 to act bravely and manage tough life situations.



ONLINE GP CONSULTATIONS

Our partnership with GP2U, an online video GP service, makes it easier for eligible members to access telehealth services. GP2U allows you to book a convenient and private online GP consultation to access a range of services including general medical advice, referrals, prescriptions and medical certificates. Rural and remote members**## can access a free annual 15-minute online GP consult.



- *** This service is not affiliated or associated with HCF in any way. You should make your own enquiries to determine whether this service is suitable for you. If you decide to use this service, it'll be on the basis that HCF won't be responsible, and you won't hold HCF responsible, for any liability that may arise from that use.
- Before you start any Health Management Program, check you're on eligible cover and the provider of the program is recognised by us by calling 13 13 34 or visiting a branch. To claim you'll need to submit a claim form and provide supporting documents. Unless otherwise stated, all programs have a 2 month waiting period and depend on cover eligibility and annual limits.
- Available to members with HCF hospital and/or extras cover, who live in a non-metropolitan MMM2-MMM7 classified postcode. Excludes Accident Only, Ambulance Only and Overseas Visitors Health Cover. Eligible members under 16 years old may need to have a parent or guardian present. If you have any questions about this eligibility criteria, please email welbeing@hcf.com.au

ACCESS ADDED VALUE & REWARDS

Our Uncommon Care means more than great value health cover. Make the most of these member perks and added protection.



Flip is our on-demand accidental injury cover that can work in addition to your health cover, or as standalone cover for those who might not otherwise be insured. You can get a single day of cover or a weekly subscription you can cancel anytime*.

flipinsurance.com.au



PLANNING YOUR NEXT HOLIDAY?

HCF members can save 25% on travel insurance when you use our discount code.

Go to **hcf.com.au/travel** to log in and get your discount code.



INVOLUNTARY UNEMPLOYMENT ASSISTANCE

If you become involuntarily unemployed, we'll pay your HCF health insurance premiums for up to 6 months (183 days). Conditions and waiting periods apply*.

hcf.com.au/unemployment-assistance



MEMBERS CAN SAVE UP TO 15% ON PET INSURANCE

HCF pet insurance can reimburse you up to 80% on eligible vet bills for your dog or cat, with a range of excess options to choose from.

hcf.com.au/petinsurance



- * Flip advice is general in nature. We don't take into account your personal circumstances, so please consider how appropriate it is for you before purchasing, Read our PDS, FSG and TMD available at getflip.com.au before purchasing, too. HCF Life Insurance Company Pty Ltd (HCF Life) is the issuer of Flip Insurance. Flip Insurance Pty, Ltd (Flip Insurance) is a wholly owned subsidiary and authorised representative of HCF Life. HCF Life is a wholly owned subsidiary of The Hospitals Contribution Fund of Australia Ltd (HCF), and acts on its own behalf. Premiums for Flip cover are paid to HCF Life. HCF receives commission of 80% of HCF Life's underwriting profit each year calculated as premiums less claims and expenses. Flip Insurance may receive remuneration Thor HCF Life for the financial services it provides in relation to Flip cover. Flip Insurance and HCF Life employees receive a salary, paid by HCF Life, for the financial services they provide in relation to Flip cover. In addition, HCF, HCF Life and Flip Insurance employees may also receive an incentive depending on the total revenue and profitability of Flip products, and for meeting their compliance obligations. This remuneration is provided on a discretionary basis and may vary from time to time.
- The Hospitals Contribution Fund of Australia Ltd ABN 68 000 026 746 AFSL 241414 (HCF) arranges Home and Contents Insurance and Motor Insurance as agent for the insurer Allianz Australia Insurance Limited ABN 15 000 122 850 AFSL No 234708 (Allianz). HCF arranges Travel Insurance as agent for AWP Australia Pty Ltd ABN 52 097 227 177 AFSL 245631 trading as Allianz Global Assistance (AGA). AGA arranges and manages travel insurance for the insurer Allianz. HCF, Allianz and AGA (for Travel Insurance) do not provide any advice based on any consideration of your objectives, financial situation or needs. Policy terms, conditions, limits, applicable sub-limits and exclusions apply. Before making a decision: 1. in relation to Home and Contents Insurance, please consider the relevant Home and Contents Insurance. Product Disclosure Statement (PDS), any applicable supplementary PDS, the Home Buildings or Home Contents Key Fact Sheets and the Financial Services Guide, which can be accessed at hcf.com.au/home. The relevant Target Market Determination is available by calling 1300 657 046; 2. in relation to Motor Insurance, please consider the relevant Target Market Determination is available by calling 1300 657 046; 3. in relation to Travel Insurance, please consider the relevant Target Market Determination is available by calling 1300 657 046; 3. in relation to Travel Insurance, please consider the relevant Target Market Determination is available by calling 1300 657 046; 3. in relation to Travel Insurance, please consider the relevant Travel Insurance Product Disclosure Statement (PDS), any applicable supplementary PDS and the Financial Services Guide, which can be accessed at hcf.com.au/travel. The relevant Target Market Determination can be accessed at hcf.com.au/travel. The relevant Target Market Determination can be accessed at hcf.com.au/travel. The relevant Target Market Determination can be accessed at hcf.com.au/travel. The relevant Target Market Determination can be accessed at hcf.com.au/travel. The relevant Target
- + 25% discount is the total discount on offer for the product, based on standard premium rates. It applies automatically upon successful input of the discount code to premiums for all plans, including policy add-ons. Cannot be used in conjunction with, or in addition to any other discounts. No additional discounts will be provided to members who already receive a member discount. Please contact us for more information.



SAVE ON HCF HOME INSURANCE

nsure your home inside and out with HCF Home Insurance. As an HCF member, you can also save up to 5%## when you quote and buy HCF Home Insurance^ online.

hcf.com.au/home



SAVE ON HCF CAR INSURANCE

Safeguard your car, ute or SUV against the unexpected with HCF Car Insurance As an HCF member, you can also save up to 5%## when you quote and buy HCF Car Insurance^ online.

hcf.com.au/car



LOYALTY REWARDS

Get more from your cover through HCF Thank You, available after you've been a member for a week^^. The longer you're with us, the more ways we say thank you. Log in at hcf.com.au/members to save.



YOU COULD SAVE ON AVERAGE UP TO \$900 A YEAR**

CLOTHING & FOOTWEAR

Save on discounted e-Gift cards at Target, Big W, Kmart, Myer, Footlocker, Nine West and more.



Discounted movie tickets at Event and Village Cinemas. Save on discounted e-Gift cards at JB Hi-Fi. Amazon and more.



GROCERIES

Save on discounted Woolworths and Coles e-Gift cards.

- Available to all members who've had hospital cover for at least 12 months and are not listed as a dependant. Excludes extras only, Ambulance Only and Overseas Vicitors Health Cover
- HCF Pet Insurance policies entered into for the first time prior to 21 March 2024 and subsequent renewals of those policies are issued by The Hollard Insurance Company Pty Ltd ABN 78 090 584 473, AFSL 241436, arranged and administered by PetSure (Australia) Pty Ltd ABN 95 075 949 923, AFSL 420183 (PetSure) and promoted and distributed by The Hospitals Contribution Fund of Australia Ltd ABN 68 000 026 746, AFSL 241414 (HCF). HCF Pet Insurance policies entered into for the first time on or after 21 March 2024 and subsequent renewals of those policies are issued by PetSure and promoted and distributed by HCF. Any advice provided is general only and does not take into account your individual objectives, financial situation or needs. Please consider the Product Disclosure Statement (PDS) to ensure this product meets your needs before purchasing, or choosing to continue with the product. PDS and Target Market Determination available at hcf.com.au/petinsurance HCF Pet Insurance is not part of HCF's health insurance business. Please do not assume that pet insurance and health insurance are similar. HCF may receive a commission of up to 13% of the premium for promoting HCF Pet Insurance Policies. HCF sales agents are paid a salary or wages but do not receive a commission or other payments attributable to the sale of HCF Pet Insurance. HCF Ruby and Diamond members get a 15% discount. Existing Manchester Unity Pet Insurance are eligible for a member discount of at least 10% on HCF Pet Insurance. HCF Ruby and Diamond members get a 15% discount. Existing Manchester Unity Pet Insurance are leigible for a member discount of at least 10% on HCF Pet Insurance HCF Ruby and Diamond members get a 15% discount. Existing Manchester Unity Pet Insurance policies are not eligible for discounts under HCF Thank You. Visit the HCF Thank You page at Hcf.com.au/thankyou for further information.
- To access the discount, log in to the My Membership app or at hcf.com.au/member-login and go to the insurance section of the HCF Thank You page. The 5% discount applies automatically when you use the applicable link to quote and buy a new HCF Home Insurance policy and/or HCF Car Insurance policy online. The discount will be applied to standard premiums (including for optional covers except for Domestic Worker's Compensation if available and selected for HCF Home Insurance) after all other eligible discounts, to the extent that any minimum premium is not reached (noting that, if you are eligible for more than one discount, we apply each of them in a predetermined order to the premium as reduced by any prior applied discounts/entitlements). The discount does not apply to taxes and government charges. The discount will continue to apply automatically in the event the policy is renewed, while this offer continues. HCF reserves the right to change, remove or amend partners and offers without providing written notice. HCF Thank terms and conditions apply available at hcf.com.au
- 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. Excludes Ambulance Only and Overseas Visitors Health Cover. Offers and partners are subject to change without advance notice. See the HCF Thank You Terms available at hcf.com.au
- ++ Based on discounts available through HCF partners (Aug 2023) and average category spend from ABS Household Expenditure Survey, Australia (2017).

(i)

GOOD TO KNOW

Get the lowdown on your cover and steer clear of unexpected costs. Always contact us before going to hospital.

REBATES, SURCHARGES AND INCENTIVES

The Australian Government has a few private health insurance initiatives worth knowing about. If you need more information, visit **hcf.com.au** or call us on **13 13 34**.

AUSTRALIAN GOVERNMENT REBATE ON PRIVATE HEALTH INSURANCE

To help make private health cover more affordable, the Australian Government gives a rebate on health insurance premium. You might qualify for the rebate if you have hospital, extras or ambulance cover, and are registered with Medicare. The rebate is income tested, so your entitlement may change depending on your income and your age.

You can take the rebate as:

- a reduced premium
- a tax offset credit in your annual tax return.

When calculating your income be sure to include all taxable income, otherwise you may have to pay additional tax if you nominate an incorrect rebate tier.

We can give you general information on these thresholds, however for personal advice specific to your circumstances you should speak with your accountant, financial advisor or the ATO at ato.gov.au or 13 28 65.

See **privatehealth.gov.au** for the list of rebate percentages.

MEDICARE LEVY SURCHARGE

If you earn above a certain income, and don't have hospital cover, you might have to pay a Medicare Levy Surcharge.

You could avoid paying this by having eligible HCF hospital cover. If you don't have eligible private hospital cover and fall into these income thresholds, you may be charged an additional surcharge on your Medicare levy when your tax return is assessed.

To view the current income thresholds and Medicare Levy Surcharge information, go to **privatehealth.gov.au**

LIFETIME HEALTH COVER

If you don't have hospital cover with an Australian registered health fund on 1 July following your 31st birthday, and then decide to take out hospital cover later in life, you might have to pay a Lifetime Health Cover loading of 2% on top of your premium for every year you're aged over 30. Over time, this can really add up.

For example, if you take out hospital cover at age 40 you could pay 20% more than someone who first took out hospital cover at age 30.

The maximum loading is 70%. Once you have paid a LHC loading for 10 continuous years, the loading is removed as long as you retain your hospital cover.

For members who've switched from another fund, if your LHC loading differs to what was listed in the transfer certificate, your premiums may change accordingly.

The Australian Government Rebate does not apply to the LHC component of private health insurance. This means if you're eligible for the rebate and also have a LHC loading, the rebate won't apply to the LHC portion of your health insurance.

To find out if you need to pay the LHC loading, you can use the Lifetime Health Cover calculators at **privatehealth.gov.au**

PRE-EXISTING AILMENTS OR CONDITIONS

If you had signs or symptoms of a condition, illness or ailment during the 6 months before or on the day you joined HCF (or in the 6 months before you upgraded to a higher level of HCF cover or reduced your excess) this means the condition was pre-existing, even if no diagnosis was made before your cover started. HCF will have a

medical expert look at information from your doctor, and any other relevant claim details, to decide whether or not your condition was pre-existing. If it was, a 12 month waiting period will apply to services related to that condition. This rule applies to all new members, members upgrading their cover or reducing their excess, and to children you've added to a policy.

WHO CAN BE COVERED?

Before taking out health insurance, you should understand who can be covered under your policy. You can find out more by visiting **hcf.com.au/faqs**, and searching for 'Who's covered'.

UNDERSTANDING HOSPITAL COVER

If you're admitted to hospital you're considered an inpatient. The services you receive while you're an inpatient (from when you're officially admitted to when you're officially discharged) will be covered by HCF, depending on your level of cover and the hospital you're in.

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.

HOSPITAL GAP

Private hospitals charge for accommodation (your bed), operating theatres, prostheses and other hospital-related services. If you're admitted to an HCF participating private hospital, these costs will be covered by HCF for services included in your cover.

If you do have Restricted Services under your cover, HCF will pay:

the Minimum Benefit for a shared room

Please note: If you're admitted to a non-participating private hospital, if you choose to be a private patient in a public hospital, or if you're being treated for a Restricted Service on your level of cover, HCF will only pay Minimum Benefits to the hospital.

Minimum Benefits are reduced benefits that we pay for Restricted Services (you don't have full cover for a hospital procedure), or when you go to a hospital that isn't in the HCF network. If Minimum Benefits are in place, you're likely to have large additional costs, known as 'gaps'. Minimum Benefits are set by the Australian Minister for Health.

 Minimum Benefits for government-approved Prescribed List of Medical Devices and Human Tissue Products items for the Restricted Services.

This means you might have to pay large gaps in a private hospital or if you choose to be a private patient in a public hospital. When Accident Safeguard applies, the Benefits payable for Excluded Services or Restricted Services will be those applicable to a service covered on an unrestricted basis. Accident Safeguard excludes Elective Cosmetic Surgery and podiatric surgery by a registered podiatric surgeon.

We've got a large network of participating private hospitals and day surgeries to help you avoid or reduce any hospital gap. Find an HCF participating hospital at hcf.com.au/participatinghospitals or call us on 13 13 34.

MEDICAL GAP

You'll be charged a fee for each medical service you get in hospital. Each fee is set by the specialist who delivers the service (e.g. your surgeon, anaesthetist, radiologist or pathologist). The specialist can choose to charge you a fee known as the Medicare Benefits Schedule (MBS) fee, or a lower or higher fee for their service. It's entirely up to them.

The MBS portion of your provider's fee will be partly covered (75%) by Medicare and your HCF hospital cover will pay for the remaining

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25% (for eligible services). Any fee that your specialist charges which is more than the MBS fee may not be covered by HCF. This is a medical gap you might have to pay.

HCF has arrangements with more than 45,000 specialists and doctors across Australia that help eliminate or reduce gaps for doctors' services for our members. Use our search tool to help you find the right specialist at hcf.com.au/findaprovider We recommend that you check the provider's participation before booking your appointment or procedure as that can change from time to time. Providers can participate on a member by member basis.

EXTRAS GAPS

If you have extras cover, we'll pay up to a set amount or a percentage back for extras services (like dental or optical), depending on your annual limits. The amount we'll pay also varies depending on your level of cover. You'll need to pay the difference between what your extras provider charges and the benefits we pay: this is an extras gap.

WHAT'S NOT COVERED BY MY HEALTH INSURANCE?

There are some situations where your health insurance doesn't cover you, unless we're required to pay benefits under the *Private Health Insurance Act*.

The items listed below aren't a complete list of what isn't covered, so always call 13 13 34 to check your cover before you go to hospital or have a treatment.

Some items not covered by our hospital or extras cover include:

- Elective Cosmetic Surgery
- emergency room fees
- Ambulance Transportation between hospitals or from a medical facility (emergency or non-emergency)
- services supplied by a provider not recognised by HCF
- · claims made 2 years or more after date of service
- treatment that HCF deems to be inappropriate or not reasonable, after receiving independent medical or clinical advice (subject to HCF's obligation to pay Benefits under the *Private* Health Insurance Act)
- claims that do not meet HCF's criteria as set out in the Fund Rules

- services that are not delivered face-to-face in a clinical setting, such as online or telephone consultations, unless a member is participating in a Chronic Disease Management Program or Health Management Program, or the service is a Telehealth Extras Service or an inpatient telehealth psychiatry service covered by Medicare
- services provided outside Australia which do not meet the requirements under the Private Health Insurance Act
- any Service where the treatment does not meet the standards in the Private Health Insurance (Accreditation) Rules
- when a member has the right to recover the costs from a third party other than HCF, including an authority, another insurer or under an employee benefit scheme
- services received during any period where payment is in arrears, the Policy is not financial, the Policy is suspended or within a Waiting Period
- treatment for Pre-Existing Conditions (other than for hospital psychiatric services, rehabilitation or palliative care) within the 12 month Waiting Period (the Pre-Existing Condition Waiting Period applies to new Members and Members upgrading their Policy to any higher level Benefits or lower excess (see page 25)
- if a Service is listed as a Service Not Included (we define these services as Excluded Services in our Fund Rules) in the Product Information. For some Hospital Covers, a Service Not Included might not apply when a member receives treatment as the result of an Accident (see hcf. country of the Hospital Covers, the Service is not included regardless of whether or not Treatment is required as a result of an Accident.

Our hospital cover doesn't include the following, unless we're required to pay benefits under the Private Health Insurance Act:

- doctors' consultations performed in a doctor's surgery, medical centre, clinic, or as an outpatient
- hospital benefits relating to procedures (and other associated goods and services) that do not require a hospital admission (except certified Type C procedures)
- private room accommodation for Same-Day procedures

- luxury room surcharge
- massage and aromatherapy services
- select Services provided while in Hospital by non-hospital providers, e.g. dental practitioner
- take home items including crutches, toothbrushes and drugs
- personal convenience items including the cost of phone calls, newspapers, magazines and beauty salon services
- respite care
- special nursing
- benefits for Nursing Home Type Patients except as required under *Private Health Insurance Act*
- hospital Benefits (including Medical Benefits) for Services in respect of which the item is not approved for payment by Medicare
- donated blood and blood products
- · donated blood collection and storage
- the gap on government-approved gap-permitted Prostheses items
- pharmaceuticals (including PBS pharmaceuticals benefits) and other sundry supplies not directly associated with the reason for admission
- PBS pharmaceutical benefits in private Non-Participating Hospitals
- experimental drugs, non-PBS drugs and Therapeutic Goods Administration (TGA)-approved drugs used for a purpose other than that for which they were approved. This condition applies for all clinical categories including chemotherapy, radiotherapy and immunotherapy for cancer
- experimental treatment or other treatment that does not fall within a clinical category under the Private Health Insurance (Complying Product) Rules that is covered by the product
- benefits where a Service is a Service Not Included (we define these services as Excluded Services in our Fund Rules) for the payment of Benefits in a Hospital, and any other Services directly related to those Services, including medical, diagnostic, prosthesis and pharmacy received at the same time, except when Accident Safeguard applies
- benefits greater than Minimum Benefits if a Service is listed as Restricted Cover in the Product Information. For some Hospital Covers, Minimum Benefits might not apply when a member receives treatment as the result of an Accident (see hcf.com.au/accident-safeguard). For other Hospital Covers, Minimum Benefits

apply regardless of whether or not treatment is required as a result of an Accident.

In addition, extras benefits are not payable for:

- add-ons for optical such as a high index material, coatings and tinting
- services received overseas or purchased from overseas including items sourced over the internet
- routine health checks, screening and mass immunisations
- where a provider is not in an independent Private Practice
- more than one therapy Service performed by the same provider in any one day
- services while a hospital patient except for eligible oral surgery
- pharmacy items that do not meet HCF's definition of a Pharmaceutical Item (see the Member Guide for definition)
- services that had not been provided at time of claim
- fees for completing claim forms and/or reports
- where no specific health condition is being treated or in the absence of symptoms, illness or injury (except some Chronic Disease Management Programs and preventative dental services)
- co-payments and gaps for governmentfunded health services including the co-payment for PBS items
- any service specifically excluded by law such as aromatherapy and homeopathy.

ABOUT AMBULANCE COVER

Medicare doesn't cover the cost of ambulance services and these can be very expensive.

HCF hospital and extras covers emergency ambulance services provided by State Government Ambulance Service Providers. Some levels of cover also include State Government non-emergency ambulance services. This is payable if your doctor requests ambulance transport because your condition requires monitoring and support in transit (up to \$5,000 per person per calendar year). You can claim ambulance benefits for emergency transport to the nearest appropriate hospital able to provide the level of care you need.

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Residents of NSW & ACT (in NSW or ACT)

Emergency ambulances aren't fully covered by the state government unless you hold certain government concession cards. HCF hospital and extras covers emergency ambulance services provided by State Government ambulance providers to the nearest hospital able to treat you.

Residents of NSW & ACT (interstate)

If you have HCF hospital cover you're entitled to fully covered State emergency ambulance transport across most of Australia under a levy arrangement. This excludes services in Qld and SA (and also WA for ACT residents) but you may be able to claim under your HCF cover. If you have standalone HCF extras cover you may be covered for unlimited emergency ambulance for transport in NSW or ACT only. On some levels of cover there's an annual limit of 1 claim per person and 2 per policy for states other than NSW and ACT.

CHANGES TO COVERS AND PRICING

All information in this brochure was correct at the time of printing.

This brochure should be read in conjunction with the HCF Member Guide, a copy of which is available at **hcf.com.au** or at HCF branches. All capitalised terms in this brochure have the same meaning as, and are defined in, the Member Guide. Please read and retain this brochure for future reference. We reserve the right to make changes to prices, product specifications and other conditions relating to the products contained in this brochure. Please contact us before purchasing any products to make sure that you have the latest information available.

Residents of Qld

Emergency ambulance services are covered by your State government Australia-wide, and non-emergency ambulance services within Qld. You may be able to claim for services not covered by your state scheme under your HCF cover (limits may apply if you have standalone extras cover).

Residents of Tas

Emergency road ambulance services are covered by your State government across Australia, with the exception of Qld and SA. You may be able to claim for services not covered by your state scheme under your HCF cover (limits may apply if you have standalone extras cover).

Residents of Vic, SA, WA & NT

You need either health cover which includes ambulance or an ambulance subscription.

See the Member Guide for more info on Ambulance Cover at hcf.com.au/forms-and-brochures

YOUR RIGHTS ARE PROTECTED

PRIVATE HEALTH INSURANCE CODE OF CONDUCT

The Private Health Insurance (PHI)
Code of Conduct's aim is to improve the standards of practice and service in the private health insurance industry.

See a full copy of the code at privatehealth.com.au/codeofconduct

For general information about private health insurance, see **privatehealth.gov.au**

PRIVATE PATIENTS HOSPITAL CHARTER

We support the Private Patients Hospital Charter, which outlines what members can expect from doctors, hospitals and their health fund. Visit the Private Health Insurance section for consumers at health.gov.au, or call the Department of Health and Aged Care on 1800 020 103 for details of the Charter.

We support this by ensuring you:

- receive correct information about private health insurance
- are aware of the internal and external dispute resolution procedures
- can make an informed decision about your cover
- are protected in accordance with the privacy principles.

HAVE A COMPLAINT?

If you have a complaint about any of the products or services we offer, your membership or cover, or if you want to know the status of an existing complaint, contact us for help.

Call: 13 13 34
Go to: hcf.com.au

Email: service@mvhcf.com.au

Write to: HCF GPO Box 4242, Sydney NSW 2001 Visit: a branch, see locations at hcf.com.au/

branches

If you aren't satisfied with the resolution of your **health insurance** complaint, you can get in touch with the Commonwealth Ombudsman. They're an independent body that helps resolve complaints and gives advice and information for free.

Call: 1300 362 072

Go to: ombudsman.gov.au

Write to: GPO Box 442, Canberra ACT 2601

If you aren't satisfied with the resolution of your complaint about **life or general insurance** (such as pet or travel) you can lodge a complaint with the Australian Financial Complaints Authority (AFCA). AFCA gives free, fair and independent financial services complaint resolution.

Call: 1800 931 678 (free call)

Go to: afca.org.au
Email: info@afca.org.au
Write to: Australian Financial
Complaints Authority,
GPO Box 3, Melbourne VIC 3001

LIFE INSURANCE CODE OF PRACTICE

HCF Life is bound by the Life Insurance Code of Practice which sets out the Australian life insurance industry's key commitments and obligations to customers. For further information, visit **fsc.org.au**



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OUR PRIVACY STATEMENT

Your privacy matters to us and we're committed to protecting your privacy.

We collect your personal information including sensitive information such as health information from you and/or the policyholder who is responsible for your policy and/or from other third parties detailed in our Privacy Policy, so we can:

- comply with applicable laws
- manage our relationship with you
- record your treatment
- provide health or other insurance-related products and services to you (including through third parties)
- manage and pay claims and benefits
- assess your insurance, health and related lifestyle needs
- investigate fraudulent or improper claims and assess risks
- research and develop products, services and benefits that may better serve your needs
- assess your possible interest in, and tell you about, such products and services
- administer our business and deal with complaints.

We may share or disclose your personal information to third parties or individuals, some of which may be located overseas, including:

- to the policyholder, if you are a dependant or another member (e.g. partner or children) on the policy, for the purposes of your HCF membership. Our contract with the policyholder requires us to have full and free communication with the policyholder on all aspects of the policy, including the benefits claimed by any member under the policy
- to organisations that deliver services on our behalf or to us, such as third parties that we contract to assess or process claims, administer programs that we develop for the benefit of members, research companies contracted by us (to ask your opinions on improving the HCF Group's service, benefits or product offerings), third party vendors who placed targeted online ads for us on their sites and mailing houses

- other service providers, for example, our advisors for the purposes of obtaining legal advice or our technology providers
- between companies within the HCF group of companies
- fraud prevention agencies, government bodies and regulators, including law enforcement bodies such as the police, professional associations and industry bodies
- health service providers (where it's used to improve their ability to provide you with health services)
- other insurers or reinsurers, including other health insurers where you have moved your insurance to or from HCF
- where disclosure is otherwise authorised or required by, or under, applicable laws or any other legal or regulatory process
- other members and the public, such as where we publish details of our analysis of claims data and charges including out-of-pocket (gap) costs charged by health service providers for different treatments (no members will be identified).

We don't normally give personal information about you to anyone who's not on your membership. You'll need to give us written permission if you want someone who's not covered by your membership, such as a friend or carer, to deal with us on your behalf.

If you don't provide personal information we request, we may not be able to provide you with our products or services, including health insurance.

You can ask us at any time to stop direct marketing to you by calling **13 13 34** or by logging in to online member services at **hcf.com.au/members** and updating your preferences.

For more about the personal information we collect and how we handle it, how to access and update your information, or how to make a complaint and how we respond to complaints, read our Privacy Policy at hcf.com.au/privacy or visit a branch.

New policyholders: make sure all members on your policy are made aware of the HCF Privacy Policy.



JOIN HCF WE PUT OUR MONEY WHERE OUR **MEMBERS ARE**

Looking to make a switch? Joining HCF is as easy as 1, 2, 3!

All you need to do is:

- 1. choose or create the HCF cover that's right for you
- 2. call **1800 880 049** or visit a branch
- 3. leave the rest to us.

The Hospitals Contribution Fund of Australia Ltd ABN 68 000 026 746 AFSL 241 414

HCF House: 403 George Street, Sydney NSW 2000 Postal Address: GPO Box 4242, Sydney NSW 2001

hcf.com.au







