UNCOMMON CARE IS PUTTING PEOPLE BEFORE PROFIT

HEALTH COVER BROCHURE DECEMBER 2021

OUTSTANDING VALUE

CANSTAR
2016 - 2021
OUTSTANDING HEALTH INSURANCE
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.

ENJOY BETTER WELLBEING WITH EXTRAS COVER
Depending on which extras cover you choose, you can claim on a range of services like dental, optical, physio, weight loss programs and more.

SKIP THE PUBLIC HOSPITAL WAITING LIST
Cut down the time you need to wait for surgery.

GET AHEAD ON GOVERNMENT INCENTIVES
Save money on:
- The Australian Government Rebate on private health insurance
- Medicare Levy Surcharge
- The Lifetime Health Cover loading if you take out hospital cover before your 31st birthday, and maintain it.

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). Take the worry out in knowing your ambulance costs are covered in an emergency.

OUTSTANDING VALUE COVER
We’ve been awarded Outstanding Value Health Insurance by Canstar 6 years in a row.

MORE MONEY BACK
For every dollar our members pay in premiums, we’ve paid out more benefits than the industry average over the last 5 years*.

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 16,000 extras providers who participate in our No-Gap network*.

KIDS GO FREE
If you have 1 child or many, the cost of your family cover with HCF stays the same. You also pay $0 excess for kids, no matter how many times they go to hospital. Excludes 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 groceries or on well-deserved treats and experiences+.

WE’RE ALL ABOUT UNCOMMON CARE
HERE’S HOW

We’re Australia’s largest not-for-profit health fund with more than 1.7 million people who choose us as their trusted health partner.

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.

“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 (Matthew’s wife)
HCF members
LET US HELP YOU CHOOSE THE COVER THAT’S RIGHT FOR YOU

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.

**Let's Get Started**

- **Need Some Help Choosing?**
  - Pages 6 & 7
- **Suggestions for Your Life Stage**
  - Pages 8 & 9
- **Pick a Package**
  - Pages 10 & 11
- **Choose Your Hospital and/or Extras**
  - Pages 12-15
- **Considered Adding Recover Cover?**
  - Pages 16 & 17

**Already Know What You Want?**

**Just Want Ambulance Cover?**

hcf.com.au/ambulance

**Not sure and need help?**

- 13 13 34
- Visit a branch
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.

**HOW WOULD YOU DESCRIBE YOURSELF?**

**YOUNG SINGLES & COUPLES**
Not planning a family
- **Gold** Top cover for peace of mind
- **Silver Plus** Mid level cover
- **Bronze Plus** Budget conscious
- **Basic Plus** Budget conscious

**PLANNING KIDS**
A single or couple starting or growing a family
- **Gold** Top cover for peace of mind
- **Silver Plus** Mid level cover
- **Silver Plus** Budget conscious

**FAMILY WITH KIDS**
With no plans to have more kids
- **Gold** Top cover for peace of mind
- **Silver Plus** Mid level cover
- **Bronze Plus** Budget conscious

**SINGLES & COUPLES**
No kids, not planning a family or kids have left home
- **Gold** Top cover for peace of mind
- **Silver Plus** Mid level cover
- **Silver Plus** Mid level cover
- **Bronze Plus** Budget conscious

**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.
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

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 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^ on:

• up to 2 dental check-ups through our No-Gap network

• a pair of prescription glasses from a selected range† and free digital retinal imaging with your eye test through our No-Gap network.

MY FAMILY SILVER PLUS

If you’re planning to have kids, or adding to a growing family, HCF’s My Family Silver Plus or My Family Advanced Silver Plus packages have you covered for the journey ahead. We offer a wide range of services and treatments for before, during and after your pregnancy.

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.

MY FAMILY ADVANCED SILVER PLUS

All of My Family 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 from providers in our No-Gap network is available on selected covers. Waiting periods and annual limits apply. 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

** 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
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**

**HOSPITAL**

- **GOLD**
  - Want our top level of cover for peace of mind? Gold has you covered.

- **SILVER PLUS**
  - Not planning a baby, but want comprehensive cover? Choose our Silver Plus option.

- **STANDARD SILVER PLUS**
  - Think you may need a common treatment? Our Standard Silver Plus cover is an affordable option.

- **BRONZE PLUS**
  - Budget conscious and healthy? Bronze Plus hospital cover is for you.

**EXTRAS**

- **TOP**
  - Our premium option, providing the highest limits and benefits for all included extras services.

- **VITAL**
  - Want quality comprehensive extras? Vital includes orthodontics, Health Management Programs, School Accident Benefit* and more.

- **MID**
  - Think you might need major dental, and higher limits on a wider range of treatments and services than Starter covers? Consider Mid Extras.

- **STARTER (WITH OPTICAL)**
  - Want to step up from entry level on your general dental and selected therapies? Starter (with Optical) has optical cover and higher limits than Starter.

**FEATURES**

- **HOSPITAL**
  - Choice of $250, $500 or $750 excess
  - Treatments like joint investigations, digestive system procedures, sleep studies, removal of tonsils or appendix
  - No excess for kids or accident-related treatment (for services included in your cover)
  - Free access to a great range of health and wellbeing programs
  - Heart and vascular system
  - Back, neck and spine
  - Physiotherapy
  - Joint replacements
  - Dialysis for chronic kidney failure
  - Cataracts
  - Choice of Nil excess
  - No excess for same day admissions
  - Pregnancy and birth
  - Assisted reproductive services e.g., IVF

- **EXTRAS**
  - Choice of $250, $500 or $750 excess
  - Treatments like joint investigations, digestive system procedures, sleep studies, removal of tonsils or appendix
  - No excess for kids or accident-related treatment (for services included in your cover)
  - Free access to a great range of health and wellbeing programs

- **GOLD**
  - 100% back* on 1 dental check per year
  - Cover for optical
  - 100% back* on:
    - an additional dental check (up to 2 per year)
    - prescription glasses*
  - Free digital retinal imaging with your eye test
  - 100% back* on:
    - an additional dental check (up to 2 per year)
    - prescription glasses*
  - Free digital retinal imaging with your eye test
  - 100% back* on:
    - an additional dental check (up to 2 per year)
    - prescription glasses*
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  - Want to step up from entry level on your general dental and selected therapies? Starter (with Optical) has optical cover and higher limits than Starter.

**NOTICE**

- 100% back from providers in our No-Gap network is available on selected covers. Waiting periods and annual limits apply. See hcf.com.au/100back
- Up to your annual limits. Excludes add-ons like high index material, coatings and tinting.
- One initial consult for a new health condition or flare up where no treatment has been provided in the previous 90 days.
- 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

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On pages 12-15 you'll see a detailed list of what’s covered.
### HOSPITAL BENEFITS SUMMARY

#### HOSPITAL AND EXTRAS PACKAGES

<table>
<thead>
<tr>
<th>Hospital and Extras Packages</th>
<th>Hospital Only Covers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BASIC</strong></td>
<td>□</td>
</tr>
<tr>
<td><strong>BASIC PLUS</strong></td>
<td>□</td>
</tr>
<tr>
<td><strong>STANDARD</strong></td>
<td>□</td>
</tr>
<tr>
<td><strong>GOLD</strong></td>
<td>□</td>
</tr>
<tr>
<td><strong>SILVER PLUS</strong></td>
<td>□</td>
</tr>
<tr>
<td><strong>ADVANCED</strong></td>
<td>□</td>
</tr>
</tbody>
</table>

#### CHOOSE YOUR COVER

- **HOSPITAL**
  - Diabetes care
  - Pregnancy and birth

- **AMBULANCE**
  - Emergency ambulance

- **PRE-EXISTING ALIENATIONS OR CONDITIONS**
  - Pregnancy and birth
  - All other hospital services including treatments under Accident Safeguard

#### WAITING PERIODS

<table>
<thead>
<tr>
<th>Treatments</th>
<th>Waiting Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital</td>
<td>2 months</td>
</tr>
<tr>
<td>Physician</td>
<td>12 months</td>
</tr>
</tbody>
</table>

#### SERVICES NOT INCLUDED

- Exclusions and exclusions apply. For more information on exclusions, see page 24.

#### HEADS UP

- **Emergency ambulance**
  - Access to limitedServices Listed in the table will be covered on an unrestricted basis if the member has a cover for Emergency Group (accident or car accident).
  - Does not include prostate surgery by a registered prolactin surgeon. For advice, see hcf.com.au/accident-safeguard

#### Emergency Psychiatric Services

- **Emergency psychiatric services**
  - Hospital treatment of the tonsils, adenoids and insertion or removal of grommets
  - Treatment of nerve pain and chest pain due to cancer by injection of a nerve block
  - Treatment of nerve pain and chest pain due to cancer by injection of a nerve block
  - Prosthetic and reconstructive surgery
  - Ultrasound-guided prostate biopsy

#### Restrictions

- **Restrictions**
  - Pregnancy and birth
  - All other hospital services including treatments under Accident Safeguard

#### Waiting periods

- **Waiting periods**
  - Treatments that are covered by 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 Removed Services under your cover, HCF will pay the Minimum Benefit for a shared room and benefits for government-supported Prostheses List items for these Restricted Services. This means that you may have to pay significant out-of-pocket expenses in a private hospital. If you have a hospital cover and you elect to be a private patient, you may also have to pay significant out-of-pocket expenses.

- **See page 24 for further details.**

#### Your cover

- **Your cover**
  - Service covered on an unrestricted basis at participating hospitals.
  - **Limited benefits apply.** Minimum benefit level payable by HCF for hospital accommodation and associated costs associated with those treatments (e.g. prosthetic, medical, diagnostic, except in the case of Accident Safeguard).
  - **See page 24 for further details.**

#### Note:

- **Note**
  - All hospital products have been enhanced and certain services are now covered on an unrestricted basis at participating hospitals.
## EXTRAS LIMITS SUMMARY

### OPTICAL

<table>
<thead>
<tr>
<th>SERVICE</th>
<th>ANNUAL LIMIT (PER PERSON UNLESS STATED OTHERWISE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Glasses &amp; contact lenses</td>
<td>$275 $250 $200 $100 per person</td>
</tr>
</tbody>
</table>

### DENTAL

- **HCF-approved services**: $1,000 combined limit per person, per year, for all services covered.
- **HCF-approved services**: $700 combined limit per person, per year, for all services covered except optical.
- **HCF-approved services**: $400 combined limit per person, per year, for all services covered.

### MAJOR DENTAL

- **Dentures**: $2,100 with sub-limit of $1,050 for other dentists. Lifetime limit (Note that additional benefit is payable for dental-cause severe tooth decay).
- **Orthodontics**: Lifetime limit $200 $150 per policy.

### THERAPIES

- **Chiropractic/osteopathy**: Year 1 $300 2 months 2 months $280 $180
- **Speech pathology**: Year 1 $450 Year 2 $250 Year 3+ $500
- **Dietetics**: Year 1 $600 Year 2 $750 Year 3+ $1,100
- **Audiology**: Year 1 $400 Year 2 $450 Year 3+ $500
- **Remedial massage and myotherapy**: Year 1 $200 Year 2 $250 Year 3+ $300

### OTHER

- **Orthodontics**: Uniforms for non-participating dentists and non-HCF dentists for Foot orthotics (Note that an additional benefit is payable).
- **Foot orthotics**: 2 months

### SCHOOL ACCIDENT BENEFIT

- **School Accident Benefit**: Helps pay out-of-pocket expenses for certain non-reimbursable school-related accidents.

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## GET 100% BACK ON POPULAR EXTRAS

You can get 100% back on extras in our No-Gap network, depending on your cover and annual limits1. Including:

- 1 or 2 dental check-ups a year
- A pair of prescription glasses from a selected range*
- Foot digital retinal imaging with your eye test
- A visit to a physio*
- A visit to a chiro and osteo*
- A visit to a podiatrist*

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

*100% back from providers in our No-Gap network is available on selected covers. Waiting periods and annual limits apply. See hcf.com.au/100back

**All participating providers. Up to your annual limits. Excludes add-ons like high index material, coatings and tinting.

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## ANNUAL LIMITS

Annual limits are per person, per calendar year unless stated otherwise. Set benefits apply per service item.

## WAITING PERIODS

### EXTRAS

- **Artificial aids and appliances (e.g. hearing aids, blood glucose monitors)**: Major dental
- **Foot orthotics**: Hearing aids
- **Orthodontics**: Pre-existing ailments and conditions
- **School Accident Benefit**: 2–12 months

- **All other extras services**: 2 months
The road to recovery is different for everyone. That’s why our unique range of 7 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?

<table>
<thead>
<tr>
<th>CASH BACK COVER</th>
<th>CRITICAL ILLNESS COVER</th>
<th>INCOME PROTECT INSURANCE</th>
<th>SMART TERM INSURANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Apply if you’re aged 16–60. Expires at 65.</strong></td>
<td><strong>Apply if you’re aged 18–54. Expires at 65.</strong></td>
<td><strong>Apply if you’re aged 18–60. Expires at 65.</strong></td>
<td><strong>Apply if you’re aged 18–54. Expires at 70.</strong></td>
</tr>
<tr>
<td>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.</td>
<td>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.</td>
<td>Get up to 70% of your income* (up to $7,500 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.</td>
<td>Get up to $500,000, based on the level of cover you choose, if you’re diagnosed with a terminal illness or pass away, or up to $1m if you die as a result of an accident*. A fast payment that leaves one less worry for your loved ones.</td>
</tr>
<tr>
<td>$2.50 PER WEEK FOR SINGLES</td>
<td>FROM $2.30 PER WEEK for singles aged 18–34 on $25,000 cover level</td>
<td>FROM $2.65 PER WEEK for 29-34 yr old non-smoker male accountant, normal BMI, $1,000 monthly benefit</td>
<td>FROM $3.45 PER WEEK for 18–40 yr old non-smoker male on $100,000 cover level</td>
</tr>
</tbody>
</table>

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

We’ll help you find the right Recover Cover

1800 560 855
Visit a branch
hcf.com.au/recover-cover
**ACCESS TO HEALTH & WELLBEING PROGRAMS**

We want you to be your healthiest self and make the most of our health and wellbeing 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.

[Link to home treatment program](hcf.com.au/home-treatment)

**FREE SECOND OPINION SERVICE**

Lean on our network of Aussie-based medical specialists to get a free second opinion for 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, conditions apply.

[Link to second opinion service](hcf.com.au/secondopinion)

**SNUG HEALTH APP**

We’ve partnered with Snug Health to help you manage the health and wellbeing of the whole family, simply and seamlessly with access to a free customised Snug app*.

[Link to Snug Health app](hcf.com.au/snughealth)

**HEALTHY WEIGHT FOR LIFE PROGRAM**

Carrying extra weight can take its toll at any stage and age. That’s why we’ve partnered with Prima Health Solutions, to give you free access to our Healthy Weight for Life programs to help you improve your quality of life. The program is available to members who are overweight and have osteoarthritis or are at risk of developing a chronic condition. You must have had an eligible hospital product for 12 months and meet the program’s eligibility criteria.

[Link to Healthy Weight for Life program](hcf.com.au/hwfl)

**HEALTHY FAMILIES FOR LIFE PROGRAM**

In partnership with Prima Health Solutions and Ethos Health, our Healthy Families for Life program is designed to encourage kids to develop positive nutritional habits for growth and development and reduce the risk of chronic conditions in their future. Eligibility criteria apply*. (Link to Healthy Families for Life program)

[Link to Healthy families](hcf.com.au/healthyfamilies)

**HEALTH MANAGEMENT PROGRAMS**

We’re always looking for new ways to help you to be your healthiest self. Our Health Management Programs are designed to do just that and 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
- antenatal and postnatal support

[Link to Health management programs](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 compression garments and breastfeeding support from the Australian Breastfeeding Association.

[Link to antenatal support](hcf.com.au/hmp)

**HEALTHY LIVING PROGRAMS**

We’ve gone above and beyond to develop an holistic mental health and wellbeing program with quick and easy access to a range of options to suit your needs, and the freedom to choose which is right for you.

[Link to mental health support](hcf.com.au/mental-support)

**LEADING THE WAY IN MENTAL HEALTH CARE**

We’ve gone above and beyond to develop an holistic mental health and wellbeing program with quick and easy access to a range of options to suit your needs, and the freedom to choose which is right for you.

[Link to mental health support](hcf.com.au/mental-support)

**THIS WAY UP**

You can access a range of online courses through THIS WAY UP, a not-for-profit online hub developed by experienced psychiatrists and clinical psychologists, to help you understand and improve mental challenges like stress, insomnia, worry, anxiety and depression*. (Link to THIS WAY UP program)

[Link to THIS WAY UP program](hcf.com.au/thiswayup)

**WOEBOT**

You can download and access the Woebot app - a mental health chatbot developed by Stanford University psychologists to help learn about yourself, boost your mood and manage your state of mind**.

[Link to Woebot app](hcf.com.au/woebot)

**PSYCH2U VIDEO COUNSELLING**

You can access video consultations with a psychologist through our partner PSYCH2U at a discounted rate. Eligible members with HCF Hospital Gold cover for at least 12 months can also access a comprehensive mental health support program that provides customised care through online, telehealth and chronic disease management programs. Other eligibility criteria apply.

[Link to Psych2u video counselling](hcf.com.au/psych2u)

**CALM KID CENTRAL**

HCF members who’ve had hospital or extras cover for 12 months have access to Calm Kid Central**, an online educational and support program helping kids aged 4–11 manage their big feelings and emotional challenges. The program provides confidential access to an experienced child psychologist who can answer your questions within 48 hours, as well as tools and resources to help you support your child.

[Link to Calm Kid Central](hcf.com.au/calm-kid-central)

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* 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. (Ref: 36)

* All HCF members with any HCF Health insurance product (excluding Overseas Visitors Health Cover) are eligible to access the Healthy Families for Life online programs and online/phone assessment from the care support team. Other conditions apply for additional support, see [hcf.com.au/healthyfamilies](hcf.com.au/healthyfamilies)

* All HCF members above the age of 14, who hold any HCF Health insurance product (excluding Overseas Visitors Health Cover) are eligible for access to a customised Snug app at no cost until 30 June 2022. HCF may choose to continue to pay the cost after 30 June 2022, but if not your account will revert to the standard offer and charges will apply. Members can downgrade to the Snug Lite version at no charge. See [hcf.com.au/snughealth](hcf.com.au/snughealth)

* 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.

* Some members may be eligible for Medicare benefits for a telehealth consultation with GP2U, in which case GP2U will bulk bill those members. For all other members, HCF will pay the GP2U consultation fee.

** Excludes Accident Only Basic cover and Overseas Visitors Health Cover.

** Before you start any Health Management Program, check you’re on an 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.
ACCESS ADDED VALUE

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

ON-DEMAND INJURY COVER
Flip is our new, on-demand cover that works as a valuable addition to your health cover, or as standalone cover for those who wouldn’t otherwise be insured. It’s quick and simple cover that fits your lifestyle. You can get a single day of cover or a weekly subscription you can cancel anytime.

getflip.com.au

IN VOLUNTARY 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, bringing peace of mind to your whole fur-family.

hcf.com.au/petinsurance

ACCESS TO 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 to hcf.com.au/members to save.

YOU COULD SAVE ON AVERAGE OVER $1,000 A YEAR*

CLOTHING & FOOTWEAR
5% or more discount on e-Gift cards at Target, Big W, Kmart, Myer, Footlocker, Nine West and more

ENTERTAINMENT
Up to 50% off Event and Village Cinemas. 5% discount on e-Gift cards at JB Hi-Fi, Harvey Norman, Amazon and more

GROCERIES
Save on Woolworths and Coles e-Gift Cards

PETROL
5% discount on Caltex e-Gift Cards

RESTAURANTS & CAFES
10% discount on Good Food e-Gift Cards

FITNESS
20% off all 12 and 18 month gym memberships at Fitness First and Goodlife Health Clubs

*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.

* ABS data from 2015/16 based on average household spend who buys discounted e-Gift cards.

* 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 taking actions.

It’s important to read our Product Disclosure Statement, Financial Services Guide and Target Market Determination available at getflip.com.au before purchasing, too.

HCF Life Insurance Company Pty Ltd ABN 37 001 831 250, AFSL 236 806 (HCF Life) is the issuer of Flip Insurance. Flip Insurance Pty Ltd ABN 71 648 680 960, ARN 000288988 (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 Limited ABN 68 001 026 746, AFSL 241 414 (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 from HCF Life for the financial services it provides 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 the products which they sell. The portion of this attributable to Flip products will not exceed 10% of HCF Life’s premium revenue earned from Flip cover.

Accessed to all members who’ve had hospital cover for at least 12 months. Excludes extras only, Ambulance Only and Overseas Visitors Health Cover.

All HCF members are eligible for at least 10% discount on HCF Pet Insurance. HCF Ruby and Diamond members get 15% discount. Existing HCF Pet Insurance policies will have the relevant discount automatically applied at renewal. HCF Pet Insurance is issued by The Hollard Insurance Company Pty Ltd ABN 78 090 584 473, AFSL 241436, is promoted and distributed by The Hospitals Contribution Fund of Australia Limited ABN 68 000 026 746, AFSL 241414 (HCF), and arranged and administered by PetSure (Australia) Pty Ltd ABN 95 075 949 923, AFSL 420183. HCF Pet Insurance is not part of HCF’s health insurance business and do not assume that pet and health insurance are similar. 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) and Target Market Determination (TMD) to ensure this product meets your needs before purchasing. PDS and TMD available at hcf.com.au/petinsurance. HCF may receive a commission of up to 17% of the premium for promoting HCF Pet Insurance policies. This commission is used by HCF to cover costs associated with the marketing and distribution of this product to you and may include any referral fees to people or organisations that refer new customers to HCF. 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.

* 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.

* ABS data from 2015/16 based on average household spend who buys discounted e-Gift cards.

hcf.com.au/unemployment-assistance

Log in to hcf.com.au/members to save.

* ABS data from 2015/16 based on average household spend who buys discounted e-Gift cards.

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* ABS data from 2015/16 based on average household spend who buys discounted e-Gift cards.
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 it’s 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 your health insurance premium. The rebate is available to people with hospital, extras or ambulance cover, and who 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 can 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’ll 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.

HOSPITAL GAP

Private hospitals charge for accommodation (your bed), operating theatres, prosthesis 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.

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.

If you do have Restricted Services under your cover, HCF will pay:
• the Minimum Benefit for a shared room
• Minimum Benefits for government-approved
  Prostheses List 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.

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). 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 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 39,000 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

EXTRAS GAPS

If you have extras cover, we’ll pay up to a set amount 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 (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 an Extras Service and HCF has authorised the recognised Provider to deliver that Extras Service in another manner (such as online or by telephone conversation)
- 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 under their New Policy)
- 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.com.au/accident-safeguard). For other 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
- 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 benefit in private
- Non-Participating Hospitals
- experimental drugs, high cost non-PBS drugs and Therapeutic Goods Administration (TGA)-approved drugs used for a purpose other than that for which they were approved
- 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).

In addition, extras benefits are not payable for:

- psychological and developmental assessments
- psychological treatment (where included under a Policy) unless a mental health plan has been prescribed under Medicare entitlements and these entitlements have been used up for the calendar year
- 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)
- co-payments and gaps for government-funded health services including the co-payment for PBS items
- any service specifically excluded by law including Alexander Technique, Aromatherapy, Bowen Therapy, Beteyko, Feldenkrais, Western Herbalism, Homeopathy, Iridology, Kinesiology, Naturopathy, Pilates, Reflexology, Rolling, Shiatsu, Tai Chi and Yoga.

EMERGENCY AMBULANCE (EXTRAS ONLY COVER)

For all NSW or ACT residents with standalone HCF extras cover, there’s unlimited emergency ambulance cover for transport within NSW or the ACT.

For emergency transport received outside of NSW or the ACT, there is an annual limit of 1 service per person and 2 per policy for emergency ambulance services provided by state Ambulance Service Providers.

Residents of Qld are covered Australia-wide under their state ambulance service scheme and no Benefits for ambulance services are payable by HCF.

Residents of Tas are covered under their state ambulance service scheme in Tas only. In other states (excluding Qld and SA), they are covered under the state reciprocal agreements (these can change from time to time) for emergency road ambulance only. If they aren’t offered cover under any arrangement, they have an annual service limit of 1 per person and 2 per policy for emergency ambulance services provided by state Ambulance Service Providers.

For residents of Tas with standalone HCF extras, some levels of cover have an annual service limit of 1 per person and 2 per policy for emergency ambulance services.

For residents in Vic, SA, NT and WA, if you don’t have an ambulance subscription with your state ambulance service and aren’t offered cover under another arrangement, e.g. a State Government pensioner, you can claim under your HCF cover for eligible emergency ambulance services to the nearest appropriate hospital provided by your state Ambulance Service Provider.

HCF.com.au/accident-safeguard
Some levels of HCF standalone extras cover have an annual service limit of 1 per person and 2 per policy for emergency ambulance services. Non-emergency ambulance services are not covered.

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 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@myhcf.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 a member of the Financial Services Council and we’re bound by its 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

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, you 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
WHERE UNCOMMON CARE MAKES COMMON SENSE

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 13 13 34, visit a branch or go online at hcf.com.au to complete your application
3. Leave the rest to us.

The Hospitals Contribution Fund of Australia Limited
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Postal Address: GPO Box 4242, Sydney NSW 2001

hcf.com.au