



VIP plans

PLAN DETAILER

100% reimbursement up to policy maximums*

VIP plans reimburse up to 100% of the expenses you incur for medically necessary procedures, based on reasonable charges, up to VIP stated policy maximums, subject to any excess option you may choose. 75% reimbursement applies to the dental and optical benefits in VIP 4. Excess options available for VIP 1 and VIP 2 are: No excess, \$250, \$500, or \$1,000. Excesses are calculated per member, per claims year.



Surgical & Medical

Highlights include cover* for:

- General surgery performed in a private hospital
- Home nursing
- Cancer care
- Public hospital cash grant
- Medical hospitalisation
 Diagnostic tests,



Specialist & Tests

Highlights include cover* for:

- Specialists consultations
- Consultations relating to surgical procedures
- Imaging, eg x-rays, ultrasounds, CT and MRI scans
- Diagnostic tests, eg allergy testing, laboratory tests



General Medical

Highlights include cover* for:

- GP consultations and prescriptions
- Consultations with:
 registered osteopath,
 chiropractor,
 podiatrist and
 acupuncture
 treatment



Dental & Optical

Highlights include cover* for:

- An annual healthcheck for the policyholder
- Dental consultations and treatment
- Prescription glasses and lenses (including frames)

VIP₁



VIP 2





VIP3







VIP 4









Please note this is a summary only. For full details on the benefits and maximums for each VIP plan and any other excesses or other conditions that may apply please refer to the Schedules of Benefits and Terms and Conditions for the VIP plans.

* Cover for VIP1, 2, 3 and 4 means 100% reimbursement of expenses for medically necessary procedures based on reasonable charges, up to the policy maximums stated in the Schedule of Benefits. Cover for the Dental and Optical maximums in VIP 4 are 75% of expenses incurred up to policy maximums stated in the Schedule of Benefits.

Effective from 1 July 2008