



Southern Cross  
Health Society



## HealthEssentials

Details for advisers

February 2014

## Contents

HealthEssentials plan details	3
Payment methods and premium rates	5
Pre-existing conditions (PECs)	6
How do clients sign up?	7
Downgrading, upgrading or adding HealthEssentials	9
How do members claim?	10

## HealthEssentials plan details

HealthEssentials provides a claim refund of 75 per cent per claim up to policy limits for a variety of day-to-day healthcare services.

Stand down periods apply to dental and optical services.

The stand down period begins when a member signs up for HealthEssentials. Time on a previous health insurance policy doesn't contribute towards HealthEssentials stand down periods.

HEALTHCARE SERVICE	ANNUAL LIMITS	STAND DOWN PERIOD	OTHER TERMS AND CONDITIONS
GP consultations	\$100 per <b>claims year</b>	Nil	
Dental consultations and treatment	\$500 per <b>claims year</b>	3 months	Including teeth extraction (other than wisdom teeth), dentures, and endodontic, periodontic and orthodontic treatment
Optometrist consultations	\$100 per <b>claims year</b>	3 months	
Glasses and contact lenses	\$250 per <b>claims year</b>	3 months	Including prescription glasses (frames and lenses) and contact lenses for change of vision, and replacement for loss or breakage
Self care - Physiotherapy - Osteopathy - Chiropractic - Massage therapy - Acupuncture - Dietitian	\$250 per <b>claims year</b>	Nil	Excludes the cost of medication Excludes the cost of medication  Excludes the cost of food and food substitutes

### Where does HealthEssentials fit in the product hierarchy?

HealthEssentials is an entry level product and is our lowest health cover plan.

This means if your client wants to move to VIP 1 in the future they will be fully underwritten at that time and existing conditions will be excluded.

#### Product code

The product code is HE.

#### Communications

HealthEssentials has been developed for the online experience and the majority of communications will be delivered through My Southern Cross.

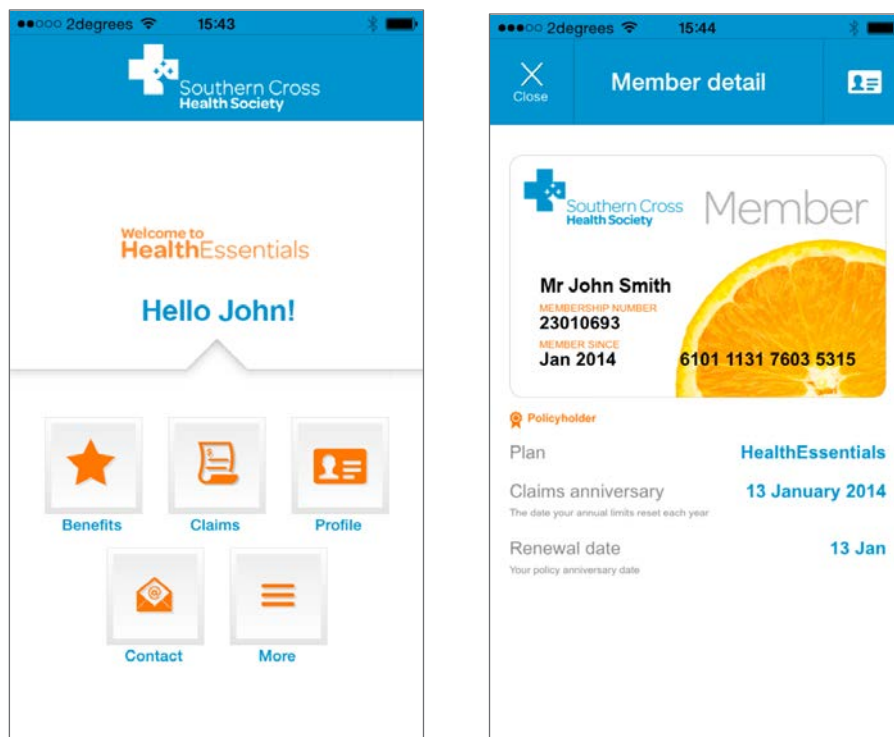
Once registered, members will receive information from us regarding their HealthEssentials policy through My Southern Cross. As members of the Health Society, HealthEssentials members will be eligible to vote in the AGM. A communication regarding this is sent prior to one being held.

#### Member card

Members will continue to be posted a physical card. But those who register with My Southern Cross and download the My Southern Cross mobile app will also have an electronic member card on their mobile.

## My Southern Cross mobile app

Members can manage some parts of their HealthEssentials policy on their smartphone. They can download the My Southern Cross mobile app from the Apple App Store or Google Play to keep track of their benefits, update contact details, set up email or text message alerts, claim online and more.



## Multiple policies

In some cases members will hold more than one policy. For example VIP 1 and HealthEssentials.

At this stage a HealthEssentials member cannot hold a Critical Illness policy without also holding another health insurance policy. They can however, hold more than one HealthEssentials policy.

Your clients will need to submit a separate payment authority even if they already pay by credit card or direct debit on a separate health insurance policy.

## Policy suspension and parental leave

No suspensions can be offered. This includes suspensions due to going overseas, secondment or redundancy on hold.

Parental leave is not offered to HealthEssentials members

## Other points

- Just like other health insurance members they become members of Southern Cross Medical Care Society and are given a policy number and a member card number. They are also given an ODJ (original date of joining).
- Members are not underwritten so pre-existing conditions aren't listed.
- No loyalty benefits or allowances are included. Healthy lifestyle reward, low claims reward and free child discount do not apply to HealthEssentials.

## Payment methods and premium rates

Members on HealthEssentials pay privately via direct debit or credit card. Here are the current premium rates.

	Paying by direct debit	Paying by credit card
Under 35 years	\$7.00/week \$14.00/fortnight \$30.33/month	\$31.11/month \$93.33/three-monthly \$186.67/six-monthly
35 years and over	\$10.53/week \$21.06/fortnight \$45.63/month	\$46.79/month \$140.38/three-monthly \$280.77/six-monthly

Important things to note.

- All children named on the policy are charged a premium.
- There is no discount for 100 Lives advisers.
- First deductions will be multiples.
- The policy starts on the day the applicant applies. And because health insurance is billed in advance, the first direct debit deduction will be at least a double deduction. The same applies for monthly credit card.

### Do Low Claim Rewards or Healthy Lifestyle Rewards apply on HealthEssentials?

No. These rewards do not apply on HealthEssentials.

This means should an existing member who currently has a low claims reward on VIP change to HealthEssentials they will lose this reward.

## Pre-existing conditions (PECs)

HealthEssentials covers qualifying pre-existing conditions, other than those noted in the policy exclusions list.

### Exclusions

Here is the wording which you can find on page 15 of the policy document. **Bolded words or phrases** are defined in the policy.

No reimbursement shall be made for the costs of, or payment made for, any **healthcare service** which is not specifically listed in the **coverage table**.

No reimbursement shall be made for the costs of, or payment made for, any **healthcare services** which are for or relate to any investigations or treatments related to, or any conditions which have as the underlying cause or are associated with, or are otherwise incurred in relation to, or as a consequence of, any of the following:

- **Cosmetic treatment;**
- **Drugs;**
- **Healthcare services** at a public facility directly or indirectly controlled by a **DHB** unless specifically accepted in writing by **Southern Cross** prior to treatment;
- **Healthcare services** provided by a person who is not a **Health services provider** as defined *in the policy document*, except as specifically provided in the **coverage table**;
- **Healthcare services** provided in relation to, or as a consequence of, any **accident** or **treatment injury** except as specifically provided *in the policy document*;
- **Healthcare services** provided outside New Zealand;
- Infertility or assisted reproduction;
- Injury, illness, condition or disability arising from, or caused or contributed to by, substance abuse, intoxication or drug taking whether prescribed or recreational;
- Injury or disability suffered as a result of war or any act of war, declared or undeclared, or of active duty in the military, naval or air forces of any country or international authority, or as a direct or indirect result of terrorism;
- Mental health **healthcare services** for which the public health system is responsible;
- **Mole mapping** or dermatological surveillance;
- Physical examinations for life insurance, travel insurance, driving license or any other examination or check up as required for a third party, including preparation of reports;
- Pregnancy and childbirth;
- Sterilisation or its reversal;
- Self-inflicted illness or injury;
- Termination of pregnancy;
- Treatment of any condition not **detrimental to health** or any **healthcare service** not **medically necessary**; and
- Vaccinations.

## How do clients sign up?

1. All applications are completed online using the link provided to you on accreditation.
2. Complete the application while you are talking to your client in person or on the phone.
3. Enter your Adviser sales code on each application you complete to ensure each application can be linked to you (if your sales code is not inputted correctly it will delay establishing the policy for your client).

### Application form

You can apply for HealthEssentials in five easy steps.

Eligibility > About you > Your family > Declaration > Payment

\* Indicates a required field | [More Information](#)


#### Sales information


Sales code: \*


[Cancel](#)

#### Your application

Cover  
✔ You

About you  ▼

Your family  ▼

Payment  ▼

4. Provide your client with a hard copy of their application. If you're not with your client at the time, please email them a copy.
5. If you require a copy for your records, please get your client to sign the hard copy and give this to you.

**IMPORTANT: Do not send this hard copy in to Southern Cross; it is just for your records.**

Currently we cannot provide you with a copy of the application, but in the coming months we will be enhancing our system to do so.

6. Once a policy is created an email is sent to the member asking them to register for My Southern Cross. This email will include a link which will pre-populate their member card number into the required fields (the member won't be able to see this) and request that they provide a username for future logins.

If they are an existing member and this is a second policy, they will have to create a new login as they will have different My Southern Cross logins for each policy.

The benefits of having the member register online are that they can:

- administer their policy

- submit claims online (policyholders only)
- review communications from Southern Cross.

Once the member is registered for My Southern Cross they'll be able to download the My Southern Cross mobile app for their mobile device.

A couple of days later a second email will be sent notifying the registered user that their Welcome Pack is available to view. If the user has not registered within seven days of the policy creation, the Welcome Pack will default back to be posted to ensure that the member has access to this information. In either situation a digital copy will be available on My Southern Cross.

### **How do I know that the application has been processed?**

You will receive a certificate approximately three days after the application has been processed. At this time the application will also be visible on Gateway.



## Downgrading, upgrading or adding HealthEssentials

### Downgrading to HealthEssentials

While HealthEssentials will provide members with an affordable option to downgrade to, there are some impacts they will need to be aware of.

- **Loss of history** – considered similar to a break in coverage; members will not retain previous loyalty or coverage for PECs.
- **Benefit stand down** – a member's time on a previous policy will not count towards the benefit stand down which applies to dental and optical services.
- **Original date of joining (ODJ)** – members will keep their ODJ as we want to recognise their tenure with us.
- **Direct debit discount** – this will apply for HealthEssentials.
- **Loss of rewards LCR/HLR** – these rewards are not available on HealthEssentials. If members had these rewards they will lose them when they change to HealthEssentials.
- **Loss of free child discount** – there is no free child discount on the HealthEssentials plan ie all children are charged.

### Upgrading from HealthEssentials

HealthEssentials is positioned on the lowest level of the plan hierarchy, so upgrades go through the underwriting process.

If a member chooses in the future to upgrade to another health insurance policy from HealthEssentials the following will apply.

- Members will be required to complete a medical declaration. The member will be underwritten – no cover for PECs or developed ECs on their upgraded plan. An exception to this would be joining a work scheme offering a concession - details on this are covered in the health insurance IBR.
- There is no coverage to the HealthEssentials level for PECs/DECs following an upgrade.
- HLR, LCR, and free child discount all start again where applicable.
- Loyalty benefits – time on HealthEssentials will not count towards loyalty. Members would need to re-earn loyalty on their upgraded policy even if both their previous and new plan have the same benefit.

### Existing health insurance members adding this plan

If an existing member talks to the Southern Cross contact centre and decides they would like HealthEssentials as well as their current plan, they will be referred back to their Adviser.

This process applies for all additions except newborns – who will be added on your behalf.

Note: all additions will be referred back to Key Advisers.

## How do members claim?

### Eligibility to claim

The requirements for claiming are the same as our other plans.

- Service performed by medical practitioner with vocational registration applicable to healthcare service or by another health service provider with registration applicable to healthcare services.
- There must be a cost incurred.
- Not otherwise excluded by the terms of the plan.

### Notable exclusion

Wisdom teeth extractions and related costs are excluded from being claimed against the dental benefit.

### How to claim

Policyholders can claim quickly and easily with their smart device through the My Southern Cross mobile app, online through My Southern Cross, or at point of sale with Easy-Claim. Or if they prefer, posted claims are also accepted.

Claims must be submitted to us within 12 months of the healthcare service taking place in order to be assessed.

### My Southern Cross online claiming

1. Policyholders can submit a completed claim through My Southern Cross at [www.mysoutherncross.co.nz](http://www.mysoutherncross.co.nz) or by downloading the 'My Southern Cross' mobile app from the Apple App Store or Google Play.
2. Clear, legible photographs or scanned copies of the original receipts for each claim must be provided (note: these receipts must be itemised and show the date that the treatment was provided). We do not accept EFTPOS or credit card receipts. Members need to hold onto their original receipts in case we request for these to be provided in order to complete the claim.
3. All mandatory fields in the online claim form must be fully completed and submitted by the policyholder.
4. The claim will be refunded to the bank account number provided with the submitted claim. If no bank account details are given then a cheque will be posted.

### Easy-claim

1. When eligible healthcare products and services are purchased from participating Southern Cross Easy-claim partners, members can claim electronically at the counter with their Southern Cross Member card.
2. If the member's policy covers the product or service, we'll reimburse the provider directly. All they need to do is pay the health services provider the contribution they are responsible for.
3. For more information or to find an Easy-claim provider, members can visit [www.southerncross.co.nz/society/easy-claim](http://www.southerncross.co.nz/society/easy-claim). Please note that not all health services providers offer Easy-claim. If Easy-claim cannot be used for any reason, the member will need to pay for their healthcare service and then submit their claim through My Southern Cross or post their claim to us.

## Posted claim

1. Our claim form is available on our website [www.southerncross.co.nz/society](http://www.southerncross.co.nz/society).
2. Members can post in a completed claim form and original receipts for each claim submitted (note: these receipts must be itemised and show the date that the treatment was provided). We do not accept EFTPOS or credit card receipts.
3. The claim form must be fully completed and signed by the policyholder.
4. The claim will be refunded to the bank account number provided with the submitted claim. If no bank account details are given then a cheque will be posted.

## Commission

Upfront commission is payable on each life. An amendment to the Agency Agreement has been forwarded to your business principal or relationship manager in larger businesses. Please refer to them for further details.