



MBF HealthSmart

TASMANIA EFFECTIVE 1 APRIL 2010

Hospital Cover

MBF HealthSmart helps pay for all in-patient hospital-related treatments (other than Excluded Services and those listed as not covered below) at MBF Network hospitals and public hospitals where Medicare pays a benefit, provided the standard membership conditions, including waiting periods, are met. If you upgrade to any other level of MBF Hospital Cover, which includes services not covered under MBF HealthSmart, waiting periods must be served for any additional Benefits.

What's covered

Hospital charges

- ✓ Shared accommodation (single room if available)
 - ✓ Same-day admission (day surgery)
 - ✓ Operating theatre
 - ✓ Intensive care
 - ✓ Most pharmaceuticals directly associated with the reason for your admission
 - ✓ 100% cover for most government-approved surgically implanted prostheses. A limited number of government-approved surgically implanted prostheses will attract a gap which you will be required to pay
 - ✓ Certain therapies such as physiotherapy, occupational therapy and speech therapy when provided by the hospital
 - ✓ MBF's Gap Cover Scheme where available
 - ✓ Radiology/pathology in-patient services only where MBF has an agreement with the practitioner
 - ✓ Emergency Ambulance Transport services where provided by an MBF Recognised Provider
 - ✓ Hospital charges for surgical podiatry by an accredited podiatric surgeon
- ❗ At MBF Network hospitals and public hospitals, 100% of the charges above are covered. For all charges incurred in Non-Agreement hospitals you will pay the difference between the amount the hospital charges and the Benefit paid by MBF which may be substantial.

What's not covered

No level of MBF Hospital Cover will pay for:

- ✗ Services received during the applicable waiting period
- ✗ Treatments where Medicare does not pay a benefit
- ✗ Charges above the Commonwealth Medicare Benefits Schedule Fee and where your doctor chooses not to opt-in to the MBF Gap Cover Scheme
- ✗ Experimental treatment, compound items and some very high cost drugs
- ✗ Personal and take-home items, eg newspapers, toiletries and crutches
- ✗ Services not invoiced by the hospital (ie invoiced by a third party), eg a manicure and hairdressing
- ✗ Nursing Home Type Patient contribution
- ✗ Out-patient treatment other than MBF approved programs
- ✗ Services not clinically necessary, eg cosmetic surgery and respite care
- ✗ Exclusions
- ✗ Emergency room treatment
- ✗ All doctors' charges for surgical podiatry for in-patient surgical podiatry by an accredited podiatric surgeon, this includes the podiatrist's fees
- ✗ Any service not part of a course of treatment recognised by MBF, eg treatment unrelated to a diagnosed medical illness or condition
- ✗ The patient contribution on PBS drugs that are not intrinsic to your hospital treatment

Exclusions

MBF HealthSmart is only available for singles and couples and therefore the following services are excluded from this level of cover. If you need treatment for these services no Benefits are payable by MBF for any of the hospital or doctors' charges associated with that admission.

Pregnancy related services (including childbirth) and assisted reproductive services

(Please note that most fertility treatments are Out-patient Services and therefore are not covered on any level of MBF Hospital Cover.)

Examples of treatments include:

- labour and delivery (including Caesarean)
- assisted reproductive services (such as in vitro fertilisation, gamete intrafallopian transfer or similar procedures)
- complications of pregnancy
- ante natal attendance, etc.

Excess

An excess is an amount you agree to pay should you need to go to hospital. You only pay it once per person in a calendar year, to a maximum of twice per membership, no matter how many family members go to hospital that year.

Remember

If you are going to hospital, you should ask your doctor for the applicable Medicare item number and then call MBF on 131 137 to confirm your treatment is covered and find out your likely hospital charges and Benefits.

Extras Cover

Following is a range of extras services that MBF HealthSmart provides Benefits for, including the maximum Set Benefits that are available to you when you have these services within Tasmania. The Limits that are quoted are per person, per calendar year unless otherwise stated and when provided anywhere in Australia by an MBF Recognised Provider. **The extras services below are not a complete list of all the Benefits available and should be read in conjunction with the important information.** All examples below, of dental Benefits are for services performed by a registered dentist only. For more details on restrictions and service Limits, see MBF Dental Guidelines available in MBF Centres.

MBF MemberCare - get more back from our network of MBF MemberCare Providers

MBF MemberCare is a network of providers covering dental, physiotherapy, optical and chiropractic services. With MBF MemberCare you can enjoy higher Set Benefits on selected services with the certainty of receiving at least 70% of the charge back, up to the Limits of your cover.

Dental Rolling Limit* (see major dental Limit below)

We want you to go to the dentist for annual check-ups - and we'll increase your major dental cover if you do. If you keep up the preventative check-ups, we'll increase your major dental Limits by \$100 a year in the first three years, then by \$200 a year in the following years, to a maximum Limit of \$1,500. But if you make no claims for preventative check-ups in a two-year period, your major dental Limit will reduce to \$200.

The table below highlights a selection of improved benefits you can receive through MBF MemberCare. For a list of your nearest MBF MemberCare providers, and for a full list of MBF MemberCare benefits please visit mbf.com.au

Extras services

■ Increased MBF MemberCare Set Benefits from 1 April 2010

Extras Cover	MBF MemberCare Set Benefits	Non MBF MemberCare Set Benefits	Limit per calendar year
Preventive dental ✓ MBF MemberCare at least 70% back			
Eg fluoride application, scale and clean and sports mouthguard. <i>Waiting period 2 months.</i>			
Topical fluoride application	■ \$18.90	\$15.60	<ul style="list-style-type: none"> • No annual Limit • For certain services, Limits also apply on the number of times that Benefits are payable for the same service • One sports mouthguard per person
Periodic examination	■ \$30.10	\$22.40	
Scaling and cleaning	■ \$62.30	\$46.40	
Mouthguard (1 arch) requiring models	■ \$87.50	\$60.50	
General dental ✓ MBF MemberCare at least 70% back			
Eg fillings, extractions. <i>Waiting period 2 months.</i>			
Simple extraction	■ \$92.75	\$67.20	<ul style="list-style-type: none"> • \$300 per person • For certain services, Limits also apply on the number of times that Benefits are payable for the same service
Metallic filling, 1 surface	■ \$96.95	\$56.00	
Major dental			
Eg crowns and bridges, inlays, onlays, facings, some periodontics, endodontics and dentures. <i>Waiting period 12 months.</i>			
Endodontic - preparation of root canal	n/a	\$93.15	<ul style="list-style-type: none"> • \$200 per person. Rising to \$1,500 with continued preventative treatment (*see above) • Orthodontic treatment not covered
Full crown - non-metallic indirect		\$200.00 (subject to Limit)	
Optical ✓ MBF MemberCare at least 70% back			
Includes prescribed optical appliances including frames, lenses and contact lenses. MBF MemberCare provides a range of fixed price packages on glasses and contact lenses, up to \$100 off a wide range of fashion frames and 20% off non-standard contact lenses. MBF MemberCare 70% guarantee only applies to the following standard or polycarbonate prescription lenses: single vision, bifocal and multifocal. Please note: lens hardening, hard coat and frame repairs are not covered under optical Limit. <i>Waiting period 2 months.</i>			
Single vision lenses (pair)	■ \$80.50	\$62.30	<ul style="list-style-type: none"> • MBF MemberCare Limit \$215 per person • Non MemberCare Limit \$185 per person Limit one set frames every 2 years
Frames	■ \$100.00	\$95.20	

MBF MemberCare no-gap optical packages

- ✓ Glasses with single vision lens[†]
- ✓ Disposable contacts - selected 12 months' supply purchased in-store
- ✓ Disposable contacts - selected 12 months' supply purchased over the internet
- ✓ Tinting, coatings and UV protection

[†] Includes any frames valued up to \$199

Extras Cover		MBF MemberCare Set Benefits	Non MBF MemberCare Set Benefits	Limit per calendar year
Physiotherapy and other therapies ✓ MBF MemberCare at least 70% back				
Includes physiotherapy, chiropractic, osteopathy, occupational therapy, podiatry, psychology and dietetics. MBF MemberCare only applies to physiotherapy and chiropractic services. <i>Waiting period 2 months.</i>				
Physiotherapy	initial attendance	■ \$44.45	\$32.00	• \$350 per person for all therapy claims, limited to \$200 per therapy per person
	subsequent attendance	■ \$38.15	\$25.20	
Chiropractic	initial attendance	■ \$48.65	\$33.00	
	subsequent attendance	■ \$33.60	\$23.00	
Psychology	initial attendance	n/a	\$65.00	
	subsequent attendance	n/a	\$60.00	
Pharmaceutical				
Preventive travel-related pharmacy only (eg anti-malarial drugs and vaccinations due to overseas travel and available by prescription only, which are not covered by the Government's Pharmaceutical Benefits Scheme). <i>Waiting period 2 months.</i>		100% of charge after PBS contribution is deducted up to a maximum of \$50 per script/item		• \$50 per prescription to a maximum of \$225 per person
Natural therapies				
Acupuncture, Alexander Technique, aromatherapy, Bowen Therapy, exercise physiology, Feldenkrais, herbalism, homoeopathy, iridology, kinesiology, naturopathy, reflexology, remedial massage and Shiatsu. <i>Waiting period 2 months.</i>				
Acupuncture	initial attendance	n/a	\$30.00	• \$450 per person for all natural therapy claims, limited to \$150 per therapy per person
	subsequent attendance		\$27.15	
Naturopathy	initial attendance	n/a	\$26.25	
	subsequent attendance		\$22.50	
Remedial massage	initial attendance	n/a	\$30.00	
	subsequent attendance		\$26.25	
Health management aids and appliances				
For MBF-approved non-surgically implanted prostheses, or other health management aids, eg purchase of blood glucose monitor or oxygen concentrator. For approved items contact MBF. <i>Waiting period 12 months.</i>				
Blood glucose monitor		n/a	\$115.20	• \$750 per person • Restricted range only • No orthotics
Hire, repair and maintenance of health aids and appliances. <i>Waiting period 6 months.</i>		60% of actual charge		• \$100 per person
MBF Living Well Programs ✓ MBF MemberCare at least 70% back				
MBF MemberCare only applies to gym membership fees at Fitness First outlets. To help cover selected Fund-approved health management programs including first aid courses, nicotine replacement therapy, weight loss programs, certain yoga, Pilates and gym membership fees and some weight loss drugs (restrictions apply). <i>Waiting period 6 months.</i>		50% of actual charge		• \$100 per person
Accident Benefit				
When an Accident requires urgent hospital treatment, Accident Benefit pays for your MBF hospital excess or co-payment and can boost Limits on your MBF Extras Cover. <i>No waiting period.</i>				• \$2,000 per person, \$4,000 per membership • Maximum of \$2,000 per Accident per person, \$4,000 per Accident per membership
Emergency Ambulance Transport services				
When provided by MBF Recognised Providers. <i>No waiting period.</i>		100% of actual charge		• No annual Limit

This product summary does not contain all the important terms of your cover and should be read in conjunction with the important information. If you need further information, please call MBF on 131 137 or, if you are a corporate customer, call 1300 653 525.