

TOP VISITOR COVER (360 PLAN)

SCHEDULE OF BENEFITS

Sections 1 – 9 (all Sections)

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This Schedule of Benefits needs to be read in conjunction with the Policy Document.

Effective 13 February 2012

SECTION 1.1 PUBLIC AND PRIVATE HOSPITAL COVER FOR SICKNESS AND INJURY **100% of the cost for Hospital and In-patient Medical**

In-Hospital (In-patient) Expenses incurred as a result of sustaining Injury or Sickness and paid by you or on your behalf to a Medical Practitioner, registered nurse or registered physiotherapist or hospital for medical, surgical, x-ray, hospital, nursing or other medical treatment as shown below. Including prescribed medicines, drugs and medical supplies within Australia.

- Private accommodation
 - Shared private Ward
 - General ward
 - Theatre fees
 - Intensive care
 - Procedure room
 - Anaesthetic services
 - Same day surgery
 - Specialist medical care in hospital
 - Prostheses (surgically implanted)
 - Special surgical dressings, supplies and procedures
 - Physiotherapy in hospital
 - Drugs and medicines in hospital
 - Specialist nursing
 - X-rays
 - Pathology
 - Medical and surgical supplies
 - Blood transfusions
 - Parent hospital accommodation charges
- All medical, surgical and extras services and other in-hospital services approved by IMAN

SECTION 1.2 PUBLIC AND PRIVATE HOSPITAL COVER FOR REHABILITATION PROGRAMMES following Hospitalisation **100% of the cost for Hospital and In-patient Medical**

SECTION 1.3 OUT-PATIENT CONTINUING TREATMENT following Hospitalisation **100% of the cost**

SECTION 1.4 PUBLIC HOSPITAL COVER FOR PREGNANCY AND BIRTH RELATED SERVICES, PSYCHIATRIC TREATMENT AND PALLIATIVE CARE

Public Hospital Accommodation – 100% of the rates raised by the public hospital

If you choose to be treated in a private hospital you'll receive minimum benefits only, this is equivalent to the public hospital benefit for admitted patients' that is equal to the State and Territory gazetted rates for ineligible patients. This may result in large out-of-pocket expenses.

In-patient Medical – 100% of the MBS fee for In-patient medical provided in a hospital including doctors, specialists, pathology and radiology.

Pregnancy and birth related services are payable after 12 months Waiting Period has been served.

Note: Comprehensive private hospital cover for pregnancy and birth related services is provided under Section 9 of the Plan (Couple and Family plans only.)

SECTION 2 OUT- PATIENT MEDICAL COVER FOR INJURY AND SICKNESS 100% of cost of service

Primary and Specialist Medical Practitioner Outpatient Medical Care for Injury and Sickness

Medical Practitioner visits to office, hotel or residence
Visits to Medical Practitioners - general Medical Practitioners and specialist Medical Practitioners
Sports medicine
Pathology for Injury and Sickness
Diagnostic testing
Tests and procedures
Pathology tests
Laboratory tests
Blood tests
Hospital Emergency Room Visits

Exclusions:

Psychology out-patient services
Psychiatric out-patient services. Refer Section 4 of Plan for psychiatric out-patient cover.
Antenatal and postnatal out-patient services. Refer Section 9 of Plan for antenatal and post-natal out-patient cover.

Medical Practitioner-ordered Out-patient Medical Services for Injury and Sickness

- Plastic surgery (reconstruction after accident)
- Chemotherapy
- Radiation therapy
- X-rays
- Lithotripsy
- Artificial aids
- Blood glucose meter
- Nebuliser
- Other medical tests, operations, treatments and specialist procedures as approved by IMAN.

SECTION 3 HOSPITAL COVER FOR ELECTIVE SURGERY

100% of the cost for Public and Private Hospital and In-patient Medical:

- Terminations where not medically necessary
- Circumcision
- Tongue Tie
- Sterilisation and reversal of sterilisation
- Sleep apnoea testing

Lower benefits* are payable for:

- Gastric banding and obesity surgery
- Infertility treatment including IVF – 12 month waiting period

***Public Hospital Cover** - equivalent to the Public Hospital benefit for admitted patients that is equal to the State and Territory gazetted rates for ineligible patients. (If the public hospital charges more than this rate you'll be required to pay any difference between this benefit and the hospital charge). If you choose to be treated in a private hospital, you'll receive a minimum benefit only, which may result in large out-of-pocket expenses.

***In-patient Medical** – 100% of the MBS fee for In-patient medical provided in a hospital including doctors, specialists, pathology and radiology.

SECTION 4 OUT-PATIENT PSYCHIATRIC SERVICES

100% of cost of service

Up to a maximum of \$A2000 per Plan per Membership Year.

Please note: Expenses for counselling, testing, and any other services provided by psychologists and other persons who are not registered psychiatrists are NOT payable. Benefits are only payable for one on one consultations – group sessions are excluded.

SECTION 5 OUT-PATIENT PHARMACEUTICAL - MEDICAL PRACTITIONER- PRESCRIBED DRUGS AND MEDICINES

Benefits apply after a 2 month Waiting Period has been served, and are subject to specified Annual Limits:

- Single up to a maximum of \$A1000 per Membership Year in total
- Family/Couple up to a maximum of \$A2000 per Membership Year in total

Medical Practitioner-prescribed drugs and medicines, as listed under the Australian Government's Pharmaceutical Benefits Scheme, due to Injury or Sickness whilst in Australia. No Benefits are payable for Medicines which are not listed on the Australian Government's Pharmaceutical Benefits Scheme. Benefits are accrued each 3 monthly period, to the maximum as specified above, each membership year. Benefits are on a pro-rata basis for membership periods of less than 12 months.

SECTION 6 PHYSIOTHERAPY, OSTEOPATHY AND CHIROPRACTIC SERVICES

Benefits apply after a 2 month Waiting Period has been served, and are subject to specified Annual Limits:

- Single up to a maximum of \$A1000 per Membership Year Family/Couple up to a maximum of \$A2000 per Membership Year

Treatment by a registered physiotherapist, osteopath or chiropractor, due to Injury or Sickness whilst in Australia. Benefits are accrued each 3 monthly period, to the maximum as specified above, each membership year. Benefits are on a pro-rata basis for membership periods of less than 12 months. Benefits are only payable for one on one consultations – group sessions are excluded.

SECTION 7 AMBULANCE COVER, MEDICAL REPATRIATION TO HOME COUNTRY, FUNERAL EXPENSES

Coverage is provided for **ambulance services** within Australia that is:

- 1) provided by a State or Territory Ambulance Service (and not already covered by a State Ambulance Scheme); and
- 2) defined by the relevant service provider as emergency ambulance transport; or
- 3) where an ambulance is called to attend an emergency but on arriving is no longer required this charge will also be covered; or
- 4) defined by a treating doctor as medically necessary transport.

Medical repatriation to home country when this is deemed medically necessary by a Medical Practitioner appointed by us. Medical repatriation includes the cost of air fares, on-board stretcher, accompanying aero-medical specialists and nursing staff, and ambulance transport in your home country.

Funeral Expenses in Australia or the cost of returning your body or ashes to your home country.

SECTION 8 EXTRAS COVER

Benefits apply after Waiting Periods as listed below have been served, and are subject to specified Annual Limits:

- Single up to a maximum combined limit of \$A1000 per Membership Year
- Family/Couple up to a maximum combined limit of \$A2000 per Membership Year in total

Benefits are accrued each 3 monthly period, to the maximum as specified above, each membership year.

Benefits are on a pro-rata basis for membership periods of less than 12 months.

2 Month Waiting Period

Acupuncture

General Dental - consultation, x-rays, scaling and cleaning, removal of plaque, application of fluoride, composite fillings, extractions, and general periodontic - services provided by a Dentist, as approved by IMAN. Please note: benefits for teeth whitening/bleaching are NOT payable.

Dietetics

Elective pathology and preventative care - including diagnostic pathology and radiology

Home nursing and home care

Immunisations and Inoculations including hepatitis, pathology and blood tests including tropical screening

Occupational therapy

Optical, including eye examinations by an optometrist, prescribed lenses. Please note: benefits for eyeglass frames, and sunglass lenses and frames are NOT payable.

Periodic health check-ups and inoculations including cardiology stress testing

Podiatry

Radiology including CT and MRI scans, but excluding CT full body scans

Speech therapy

Traditional Chinese or alternative medical therapy

X-rays and laboratory examinations ordered by providers of extras medical services

6 Month Waiting Period

Hearing aids

Major Dental - consultation, x-rays, dentures, crowns, bridgework, oral surgery, wisdom teeth removal, endodontic and periodontic - services provided by a Dentist and/or Specialist, as approved by IMAN.

Orthodontics

12 Month Waiting Period

Laser eye surgery

SECTION 9 OBSTETRICS AND NEWBORN INFANTS EXPENSES

Hospital, In-patient Medical and Out-patient Medical

This Section of the Plan is not available on Single Plans. Benefits apply after 12 months continuous membership under a Family/Couple Plan (i.e. no claims are payable in the first 12 months of membership).

100% of MBS Fees for medical services (In-patient and Out-patient) provided by a Medical Practitioner or specialist for Obstetrics and newborn infant related expenses, including prenatal, radiology, pathology, childbirth or the complications thereof.

100% of cost for related in-hospital services, including accommodation, theatre fees, intensive care fees and extras medical expenses.