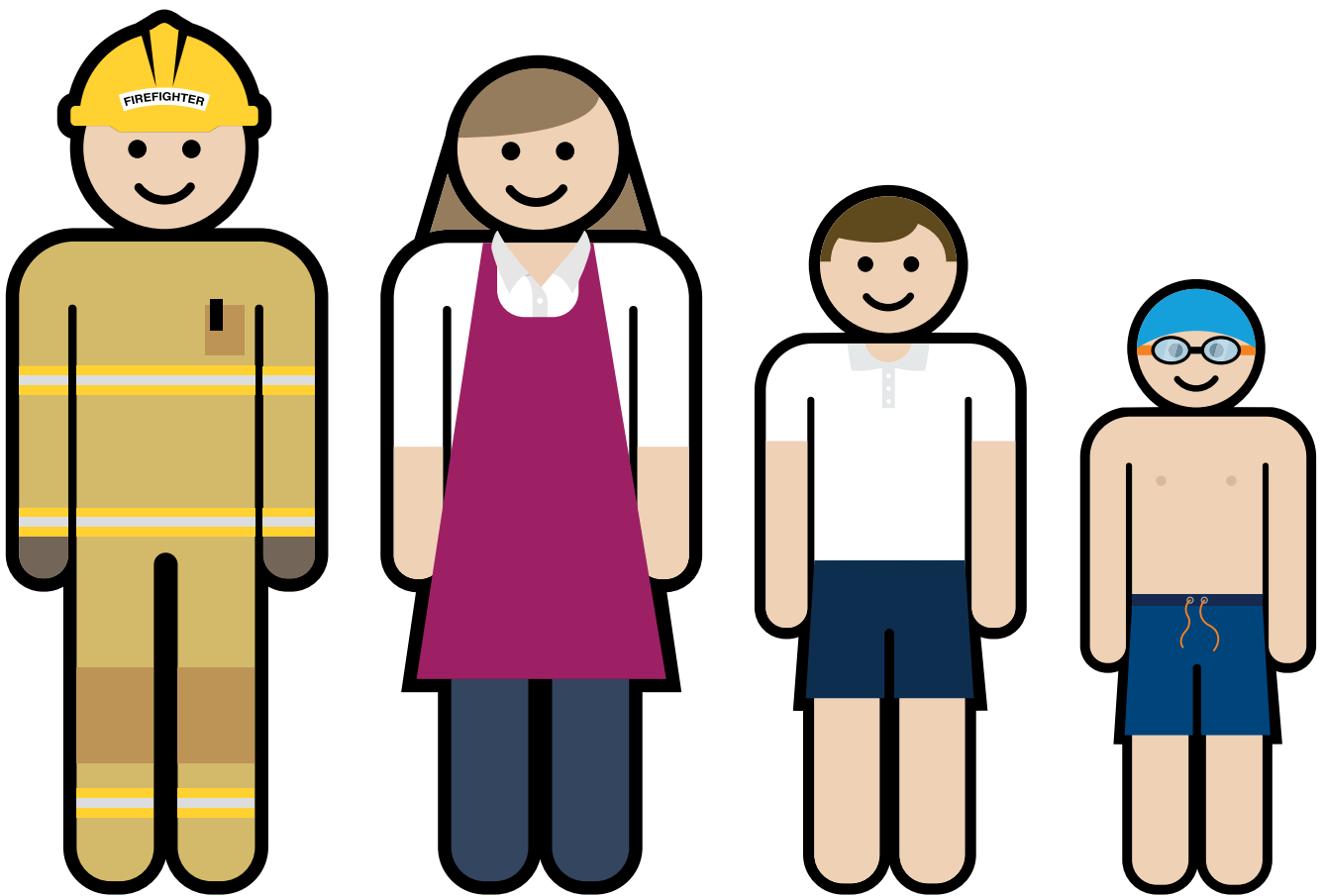


Easy Choice Packaged Cover



Effective 1 January 2018

Please carefully read and retain this brochure.
Please read in conjunction with the Important Information Guide.
Information in this brochure is correct at time of printing, and may be subject to change.

All together better.

For cost-effective cover when you need it, you're on to a winner with **Easy Choice**. This cover gives you the convenience of top hospital cover and a great range of extras with generous limits.

Waiting periods

Waiting periods apply if you are new to private health insurance, if you have not had cover for more than 60 days or if you are upgrading to a higher level of cover. If you have transferred from another health fund on a comparable level of cover and have served waiting periods you will be able to claim straight away.

Immediate cover

- Accidents

2 Months

- All hospital and extras services (unless specified otherwise)
- Palliative care
- Rehabilitation
- Home care programs¹
- Psychiatric services (BLP applies)

6 Months

- Active Health Bonus
- Disease management programs

12 Months

- Obstetrics (pregnancy and birth related treatment)
- Pre-existing conditions (excluding palliative care, psychiatric services and rehabilitation)
- Major dental
- Orthodontia
- Prostheses (non implanted)
- Mechanical/health appliances
- Hearing aids
- Orthotics

Hospital cover

Easy Choice Hospital with an excess gives you peace of mind at a competitive price. Easy Choice Hospital provides hospital benefits at the contracted rate, for medically necessary treatments, that are eligible for Medicare benefits.

Includes:

- Private room (when available) or shared overnight accommodation
- Intensive care
- Theatre fees
- Same day accommodation
- Coronary care
- Surgically implanted prostheses (industry approved)
- Hospital medication charges as per the hospital contract
- Pharmaceutical Benefit Scheme (PBS) co-payment where a hospital medication is related to your hospital treatment
- No exclusions on conditions eligible for Medicare benefits
- Your choice of doctor or specialist
- Medical Gap Cover (for inpatient medical services)
- Access Gap²

For hospitals TUH does not have a contract with, default benefits as determined by the Government will apply.

No benefit is payable for hospital procedures that are not listed in the Medicare Benefit Schedule and/or do not meet the eligibility criteria for the payment of Medicare benefits.³

Any excess applicable to your cover will be charged even where a default benefit only is paid.

TUH may also provide benefits for alternatives to hospital treatment (see home care programs on tuh.com.au for details).

Please refer to the Important Information Guide for more information.

Excess

\$300 excess per adult on the policy

Paying an excess towards the cost of your in-patient hospital services reduces the amount of premium you pay.

The excess is paid on admission into hospital, and only applies once per adult on the policy in any calendar year, regardless of how many times they are admitted into hospital or a day facility.

The excess does not apply to dependent children, including full-time students and extended dependants.

Extended dependant cover

Young adults, who are single, not covered as a student dependant and earning less than \$50,000 (taxable income) a year, can remain on their parents' policy until the age of 25 for a premium loading of approximately 30%.

Benefit Limitation Period (BLP)

A benefit limitation period of the first 24 months of membership applies for members who are new to private health insurance and those upgrading from a hospital cover which excludes or restricts benefits related to these services:

- Psychiatric services
- Gastric banding and bariatric/obesity surgery, including reversal

During the BLP, we pay the public hospital default benefits as per the law, which means you may have significant out-of-pocket costs to pay for the treatment. Waiting periods still apply for services with a BLP. For example, after serving the 2 months waiting period, your psychiatric benefit will be limited to a default benefit for the following 22 months. After 24 months you are entitled to the full benefit claimable for the treatment.

1. Visit tuh.com.au for more information.

2. Access gap is an agreement between you and your doctor where you may have no or reduced out-of-pocket to pay for your medical service.

3. Subject to TUH paying benefits as required by legislation.

Extras cover

Limits are per person per calendar year (1 January to 31 December) unless otherwise stated.

Service	Benefit up to	Annual limit	Waiting periods
Active Health Bonus This is a reward we give you when one adult member actively participates in Health-e-Profile (online health assessment)			6 months
single	\$75 per year		
single parent/family	\$150 per year		
Alternative therapies		\$500 overall	
Acupuncture		\$400	2 months
Initial consultation—one per year	\$34		
Subsequent consultations	\$29		
Osteopathy		\$400	2 months
Initial consultation—one per year	\$34		
Subsequent consultations	\$29		
X-rays—one per year	\$63		
Natural therapies¹ —aromatherapy, Bowen therapy, homeopathy, massage therapy, myotherapy, naturopathy	\$35	\$400 combined limit per person \$800 combined limit capped per single parent/couple/family membership	2 months
Ambulance emergency transport	Refer to the Important Information Guide for details		
Audiology		\$200	2 months
Initial consultation—one per year	\$60		
Subsequent consultations	\$50		
Chiropractic		\$400	2 months
Initial consultation—one per year	\$35		
Subsequent consultations	\$31		
X-rays—one per year	\$63		
Dental² —Must be provided by registered dentists or dental prosthetists in private practice			
Preventive dental eg. examinations, x-rays, scale/cleaning	Set dental benefits depend on item number ⁴	No limits apply	2 months
General dental ³		\$1000	2 months
Major dental^{2,3} —Limits depend on years of membership		\$2000 overall	12 months
Dentures	Set dental benefits depend on item number ⁴	\$600-800 ⁵	
Crowns and bridges		\$670-850 ⁵	
Inlays, onlays, facings		\$350-700 ⁵	
Dental implants		\$350-700 ⁵	
Endodontia		\$350-700 ⁵	
Periodontia		\$350-700 ⁵	
Orthodontia—lifetime limit applies (refer to information on page 7)		\$880	
Anti snore device (replacement every 3 years from date of previous supply)		\$300	

Service	Benefit up to	Annual limit	Waiting periods
Health and Wellness (refer to page 7)		\$240	2 months
Hearing aids (replacement every 3 years from date of previous supply)	\$900 per ear	\$1800	12 months
Mechanical/health appliances —Must be ordered by a medical practitioner (the written order must be provided to TUH)		\$620 overall	12 months
Blood glucose/blood pressure monitors/nebuliser	85% of cost	\$400 combined limit	
Mechanical health appliances—sub limit \$200 (included in the combined limit)	85% of cost		
Health aids ⁶ —sub limit \$120 (included in the combined limit)	85% of cost		
CPAP/APAP/BiPAP machine (replacement every 3 years from date of previous supply)	85% of cost	\$620	
CPAP accessories (e.g. mask/tubing/chin strap/repairs, included in the overall mechanical health appliances limit)	85% of cost	\$100	
Prostheses—custom made—one per year For non implanted TUH approved prosthetic appliances when ordered by a medical practitioner	85% of cost	\$500	
Optical	Set benefits apply	\$230	2 months
Frames only	\$92		
Single vision lenses ⁷	\$123		
Bi-focal lenses ⁷	\$117		
Tri-focal lenses ⁷	\$100		
Graduated/progressive lenses ⁷	\$138		
Complete glasses ⁷	\$230		
Contact lenses—hard/soft toric	\$167		
Contact lenses—hard/soft spherical	\$126		
Repairs to frames	\$60		
Disposable contact lenses (single/pair)	\$27/\$54		
Other therapies		\$1000 overall	
Dietetics		\$400	2 months
Initial consultation (dietetics)—one per year	\$41		
Subsequent consultations (dietetics)	\$22		
Occupational therapy		\$400	2 months
Initial consultation—one per year	\$47		
Subsequent consultations	\$33		
Group consultations	\$22.50		
Orthoptics —eye therapy		\$400	2 months
Initial consultation—one per year	\$32		
Subsequent consultations	\$25		
Podiatry		\$400	2 months
Initial consultation—one per year	\$40		
Subsequent consultations	\$34		
Podiatric surgery (outpatient) ⁸	85% of cost		

Service	Benefit up to	Annual limit	Waiting periods
Orthotics ⁹ —custom made	85% of cost	\$250 (included in podiatry limit)	12 months
Orthotics ⁹ —customised/moulded	85% of cost	\$200 (included in orthotics limit)	12 months
Orthotics repair	85% of cost	\$100 (included in orthotics limit)	2 months
Speech therapy		\$400	2 months
Initial consultation—one per year	\$60		
Subsequent consultations	\$34		
Paediatric assessment—one per year	\$80		
Family/group consultations	\$17		
Pharmaceutical For prescriptions minus the current PBS co-payment. Benefit excludes medicines or medications which are: <ul style="list-style-type: none"> • Prescriptions less than PBS co-payment • Available without a medical practitioner's prescription • Not approved by the Therapeutic Goods Administration • Prescribed for contraceptive purposes 	\$50	\$500	2 months
Physiotherapy		\$700 overall	2 months
Initial consultation—one per year	\$48		
Subsequent consultations	\$37		
Exercise physiology	\$26	\$140	
Group physiotherapy ¹⁰ /exercise physiology ¹⁰ (includes Pilates/hydrotherapy)	\$20	\$190	
Antenatal/postnatal	\$17	\$125	
Psychology/hypnotherapy¹¹		\$400	2 months
Initial consultation—one per year	\$80		
Subsequent consultations	\$70		
Group consultations (psychology only)	\$35		
Remote travel and accommodation¹²		\$100	2 months
Accommodation	Up to \$45 per night		
Travel: 150 kilometres directly from the home address			
Return distance—kilometres:			
300 - 399 kilometres	\$40		
400 - 499 kilometres	\$50		
500 - 599 kilometres	\$60		
600 - 699 kilometres	\$70		
700 - 799 kilometres	\$80		
800 - 899 kilometres	\$90		
> 900 kilometres	\$100		

Service	Benefit up to	Annual limit	Waiting periods
School accident cover Covers your dependent child for accidents occurring while attending, or travelling to or from school or an organised school activity. Benefit is limited to single parent and family cover only.		\$400 overall combined limit per person \$800 overall combined limit capped per single parent/family membership	2 months
Travel ¹² —Round trip directly from the home address		\$100	
Up to 299 kilometres	\$25		
300 – 399 kilometres	\$40		
400 – 499 kilometres	\$50		
500 – 599 kilometres	\$60		
600 – 699 kilometres	\$70		
700 – 799 kilometres	\$80		
800 – 899 kilometres	\$90		
> 900 kilometres	\$100		
Parking expenses	100% of cost	\$100	
Physiotherapy ¹³	85% of cost	\$60	

Conditions and limits

- Benefits cannot exceed the amount incurred.
- Replacement and other assessment rules can apply to some services.
- Benefits are paid for treatment by registered practitioners or recognised natural therapists approved by TUH.
- An individual within a family or couple cover can claim up to the per person limit, provided the applicable membership limit has not been exceeded. This also applies to a single parent cover.

Notes

1. Provider must be a registered natural therapist approved by TUH.
2. Dental items as defined by the Australian Dental Association (ADA) schedule and at TUH's discretion.
3. General dental includes the surgical removal of teeth (including wisdom teeth). Major dental includes dental services relating to dentures, crowns, bridges, inlays, onlays, facings, dental implants, periodontia, endodontia, anti snore devices and orthodontia.
4. Contact TUH when you have obtained an itemised treatment plan from your dentist for information on actual benefits payable.
5. Annual limits increase with years of membership. See table on page 7.
6. Must be custom made or customised and prescribed and fitted by a qualified health professional (doctor, nurse, physiotherapist or pharmacist).
7. No benefit for additional lens treatments eg. tinting/hardcoating/transitional.
8. Payable when performed in rooms. Item numbers 429-475 and 541-562.
9. When recommended by an approved health professional.
10. Must be provided by a physiotherapist/exercise physiologist as part of a treatment plan.
11. No benefit paid for counsellors. Benefit only paid for registered psychologists.
12. Benefits are payable towards the cost of travel and/or accommodation for the provision of hospital, medical and extras that cannot be obtained within 150 kilometres directly from the home address. Accommodation: a benefit is payable towards accommodation for the person requiring medical treatment or, in the case of hospitalisation, the accompanying person who must also be covered under the membership. Benefit is only payable where a tariff is charged by a registered accommodation facility and valid receipts will be required.
13. Benefit is additional to other physiotherapy benefit entitlements.

Orthodontic benefits

Benefits are paid for active treatment and annual limits apply. The maximum lifetime benefit is \$2640. To be eligible you must submit an orthodontic treatment plan from your orthodontist at the commencement of treatment. TUH will advise the benefits available in writing, taking into account previous orthodontic benefits paid by TUH or any previous fund and length of active treatment. For more information please contact us.

Major dental annual limits

Limits are per person per calendar year (1 January to 31 December) unless otherwise stated.

Service	Years of membership							
	1	2	3	4	5	6	7	8
Dentures	\$600	\$600	\$665	\$665	\$730	\$730	\$800	\$800
Crowns and bridges	\$670	\$670	\$715	\$715	\$780	\$780	\$850	\$850
Inlays, onlays, facings	\$350	\$400	\$450	\$500	\$550	\$600	\$650	\$700
Implants	\$350	\$400	\$450	\$500	\$550	\$600	\$650	\$700
Endodontia	\$350	\$400	\$450	\$500	\$550	\$600	\$650	\$700
Periodontia	\$350	\$400	\$450	\$500	\$550	\$600	\$650	\$700

Health and Wellness

Limits are per person per calendar year (1 January to 31 December) unless otherwise stated.

Benefit category	Benefit	Overall annual limit \$240 single membership \$480 single parent/couple/family membership
Benefits are only payable if not claimable through Medicare		
Health screenings Mammogram, pap smear—Thin Prep, ambulatory blood pressure monitoring, bone density screening, coronary CT, MRI, health checks - heart health checks and medical tests prior to fitness training programs, foetal screenings	Up to 80%	Sub limit \$100 per person
Wellbeing Quit smoking programs ¹ , nicotine replacement products ² , illness related association memberships, health education classes ³ , lithotripsy, medical bracelets ³ , stress management ³ , yoga ³	Up to 80%	Sub limit \$130 per person
Weight loss and fitness³ Weight loss, exercise and health programs as recommended by your practitioner	Up to 80%	Sub limit \$140 per person
Other Childbirth education classes (one per membership) ⁴	Up to 80%	Sub limit \$180 per membership

Notes

1. Please contact us for details of approved programs.
2. Where not covered under Pharmaceutical Benefits Scheme (PBS).
3. All services are to assist people in the management of their chronic disease. Due to legislation TUH can only pay a benefit for these items when there is a health management plan recommended by your medical practitioner. Benefits are paid when TUH receives the Health Program Approval form (completed by your medical practitioner prior to commencing a program/service), along with valid receipts. Please visit our website tuh.com.au or contact us on 1300 360 701 for the form. Benefits are only payable when not claimable through another benefit category.
4. When conducted by a doctor, hospital or midwife.

Value-added services

Strive for Health programs*

- Health-e-Profile (online health assessment)
- Home care programs
- Disease-management programs—telephone counselling

Health Hub

The Brisbane Health Hub is your one-stop-shop for health services. Our modern facility is centrally located in Fortitude Valley, close to public transport and has on-site parking

- Dental
- Eyecare
- Physiotherapy
- Massage
- Podiatry
- Dietetics
- Audiology
- Pilates

For more information on our value-added services please visit our website tuh.com.au

*Waiting periods and limits may apply



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For more information about:

- Products and services
- Government initiatives
- Privacy Policy
- Complaints process
- Private Health Insurance Code of Conduct
- Fund Rules

... please visit tuh.com.au
or contact us on 1300 360 701.