

# HOSPITAL SELECT SURGICAL BASE PLAN

It's the security of knowing we're there.

**PLEASE NOTE:** All benefits in all sections apply to each person on the policy unless otherwise stated.

**Voluntary Excess Option: Any voluntary excess option selected applies per claim. All benefits where an Excess applies are indicated within this brochure.**

All benefits included in this brochure are net of any social security refund and include GST charged by providers of service.

## HOSPITAL SELECT BASE PLAN

### PRIVATE HOSPITALISATION SURGICAL BENEFITS

THE FOLLOWING SECTION REFUNDS 100% OF THE USUAL AND CUSTOMARY CHARGES, LIMITED TO THE BENEFIT MAXIMUMS FOR ANY ADMISSION.

#### Surgery

An admission for Non Acute Qualifying "Surgical Procedure(s)", together with that procedure's associated recovery time, performed by a Registered Medical Specialist in a Licensed Private Surgical Hospital

- Surgeon's fee
- Anaesthetist's fee
- Hospital fees, in a Licensed Private Hospital or Private Facility approved by UniMed for:-
- Accommodation
- Theatre fees and Anaesthetic Supplies
- Perfusionist
- Intensive Care and special In-Hospital Nursing
- Recovery Nurse
- X-Ray examination, ECG
- Intravenous Fluids, Irrigating Solutions, Dressings, Prescriptions and Antibiotics
- Post Operative Physiotherapy fees from a Registered Physiotherapist
- Emergency Ambulance for hospital admission
- Surgically Implanted Prostheses
- Laparoscopic Disposables

Per Admn

Per Year

Excess  
Applies



300,000

300,000



#### Post-operative Occupational Therapy

Treatment by a Registered Occupational Therapist.

Per Visit

3 Visits

100

persurgical  
admission

#### Surgical Tests & Investigations

Gastroscopy and/or Colonoscopy

Per Admn

Per Year

5,000

5,000

#### Surveillance Colonoscopy or Gastroscopy

Payable where no signs or symptoms are present, reimbursement of 50% of actual costs up to limit. Limit of one procedure every 24 months.


Gastroscopy and/or Colonoscopy

Per Admn

Per 24  
Months

2,500

2,500

 **Please note:** if the procedure extends to a polypectomy, the claim will be considered under the Private Hospitalisation Surgical Admission benefit and, if applicable, the policy excess applies.

<b>In-Patient Non-PHARMAC Subsidised Pharmaceuticals</b>		Per Year	2,000	
Pharmaceuticals prescribed by a Registered Medical Practitioner which have been approved by Medsafe and are not fully or partly subsidised by PHARMAC through the New Zealand Pharmaceutical Schedule.				
<b>Oral Surgery</b>		Per Admn	Per Year	
All Oral Surgery performed by a Registered Oral Surgeon excluding, under all benefit categories, the extraction or surgical removal of teeth, implantation of teeth or costs of titanium implants.	}	300,000	300,000	<input checked="" type="checkbox"/>
Wisdom tooth extraction including the removal of un-erupted or impacted wisdom teeth, including all associated costs.				
<b>Breast Reconstruction</b>		300,000	300,000	<input checked="" type="checkbox"/>
Breast Reconstruction performed by a Registered Medical Practitioner in Private Practice. No benefit will be paid under this section unless UniMed has paid for the initial mastectomy.				
<b>Breast Symmetry, Post Mastectomy</b>			Per Lifetime	
The costs of unilateral breast reduction surgery in order to achieve breast symmetry after a mastectomy for the treatment of breast cancer. This procedure must occur within 24 months after a mastectomy approved by UniMed under this policy.			\$6,500	
<b>Angiography</b>		300,000	300,000	<input checked="" type="checkbox"/>
Angiograms & Angioplasty including hospitalisation, specialist & ancillary fees				
<b>Lithotripsy</b>		300,000	300,000	<input checked="" type="checkbox"/>
Performed by a Registered Medical Specialist Special conditions apply, refer to full conditions of membership.				
<b>Accident Surgery</b>				<input checked="" type="checkbox"/>
Before Qualifying "Surgical Procedures" are undertaken UniMed must receive written confirmation from the "ACC" regarding their decision to either accept or decline your claim for surgery. Qualifying Injury Claim(s) that the "ACC" agree to accept will also be accepted by UniMed for "top-up" coverage to the benefit levels applicable to the "Private Hospital Surgical Benefits" section. If "ACC" decline your claim UniMed will, at its sole discretion either assist with the total cost of surgery or pay the difference between the actual cost of surgery and what the "ACC" would have contributed had your claim been accepted by them to the levels applicable to the "Private Hospital Surgical Benefits" section.				
<b>Obesity Surgery</b>			Per Lifetime	
Benefits apply after five years' continuous membership in this plan. A one-time grant is payable of 50% of actual costs up to the benefit limit.			8,000	
<b>Overseas Treatment</b>		Per Admn	Per Year	
Benefits apply after five years' continuous membership in this plan. A grant is payable of 100% of usual and customary charge for the identical procedure in New Zealand. The procedure must be available in New Zealand, eligible under the terms of your policy but the member prefers to be treated overseas. The procedure must be performed by a medical practitioner who is registered to carry out the procedure in the country where the procedure is taking place. A referral for the procedure from a New Zealand Registered Medical Practitioner will be required. Reimbursement of travel or accommodation costs is excluded. Benefit payable as reimbursement on production of invoices. Prior approval is required for the treatment to be eligible.		30,000	30,000	<input checked="" type="checkbox"/>
<b>Sterilisation</b>		Per Admn	Per Year	
Sterilisation procedures are covered after three years continuous membership in this plan		5,000	5,000	
<b>Home Nursing – Following Surgery</b>		Per Day	Per Year	
Home Nursing by a Registered Nurse, following surgery in a Private Hospital on referral from a Registered Medical Practitioner		150	6,000	
<b>Speech and Language Therapy</b>		Per Visit	Per Year	
Treatment by a Registered Speech Therapist following surgery, excluding consequence of injury by accident (see separate benefits).		80	400	
<b>Ambulance</b>			Per Year	
Emergency transportation for Public Hospital inpatient admission			200	
<b>Parent Support Accommodation</b>		Per Night	Per Year	
In the event of a policyholder's insured child having surgery in a private hospital for which cover is available, a benefit for parent accommodation in the hospital is payable of:		150	600	
<b>Hospital Cash Allowance – Medical/surgical admissions</b>		Per Day	Per Year	
When admitted to Public Hospital for a full 24 hours or more. Child Benefit - 50% of above. (All injury admissions excluded)		150	1,800	
<b>IMAGING</b>			Per Year	
<ul style="list-style-type: none"> <li>• CT Scan</li> <li>• MRI Scan</li> <li>• PET Scan</li> <li>• Cardioversion</li> <li>• Myocardial Perfusion Scan</li> <li>• Scintigraphy</li> </ul>	}			Combined Maximum 300,000 Per Year

IMAGING (six months prior and six months after surgery)		Per Year
<ul style="list-style-type: none"> <li>X-rays</li> <li>Mammography</li> <li>Ultrasounds</li> <li>Nuclear Scanning</li> </ul>		Combined Maximum 300,000 Per Year
SPECIALISTS (six months prior and six months after surgery)		Per Year
<b>Specialist/Surgeon/Consultant Physician</b>		
Consultation following referral from a Registered Medical Practitioner		300,000
<b>Medical Hospitalisation</b>		
Cover is provided for Non Acute Medical Hospitalisation (Excludes Psychiatric/Geriatric) in a Licensed Private Hospital, on admission and under the care of a Registered Medical Practitioner.		65,000
Ancillary hospital charges		500
<b>Radiation Oncology</b>		
Limited to Planning, Shielding and Accessories, Field Setup and XRT Simulation and performed in an approved Private Hospital facility.		65,000
<b>Chemotherapy</b>		
Benefit payable for treatment by a Registered Oncologist in Private Practice. Benefit applies to the cost of materials, Chemotherapy drugs per course which are PHARMAC approved, plus Hospital Accommodation together with approved ancillary hospital costs. Included in this benefit is cover for Non-PHARMAC chemotherapy drugs that are Medsafe approved for the treatment of cancer, up to a maximum of \$10,000 per annum. Included in cover is genetic/genomic testing. Testing is payable following a cancer diagnosis and referral by a Registered Oncologist.		65,000
<b>Surveillance Following Cancer Treatment</b>		
Following surgery or treatment for cancer, associated with an eligible claim under your policy, cover exists for Registered Specialist consultations and investigations related to the cancer diagnosis. The benefit applies from the end date of treatment, for a period of five consecutive years, up to a limit of \$3,000 per year.		
<b>Acute Private Hospitalisation Medical/Surgical grant</b>		
An admission for an "Acute" Qualifying Medical Condition or "Surgical Procedure" under the care of a Registered Medical Practitioner in a Licensed Private Hospital		5,000
<b>Psychiatric/Geriatric Hospitalisation</b>		
In a Licensed Private Hospital, on admission and under the care of a Specialist Psychiatrist/ Geriatrician. Refund of Hospital Accommodation fees and ancillary hospital charges.		5,000
MINOR SURGERY		Per Year
<b>Registered Medical Specialist</b>		
Not requiring general anaesthetic, including preceding consultation and performed in specialist rooms		300,000
<b>Registered Medical Practitioner</b>		Per Procedure
Not requiring general anaesthetic, including preceding consultation performed in practice rooms	500	No Max
<b>Minor Skin Lesions Removed by a GP</b>		Per Visit
Performed by a Registered Medical Practitioner in General Practice. Note: Prior Approval must be sought for this benefit	2,000	2,000
OVERSEAS TREATMENT		Per Lifetime
In the event of Heart, Lung, or Liver transplant surgery being required outside New Zealand, UniMed will assist with a once only grant		20,000
WAIVER OF PREMIUM		
Upon death by natural causes prior to age 60 of any member paying the adult contribution rate the surviving spouse and/or qualifying dependents named on the policy will receive two years free coverage at the benefit levels applying at the date of death.		
FUNERAL GRANT		
Upon death by natural or accidental causes prior to age 65 of any person on the policy a grant towards funeral costs is available.		2,400
"ACC" TOP UP BENEFIT		
The 'shortfall' between actual costs and ACC refunds for out of hospital expenses incurred as a result of qualifying personal injury or employment related conditions are covered to the limits as shown. NB: For a claim to qualify, ACC must have provided financial assistance towards treatment costs.		



## Need to know more before making your choice?

UniMed and HealthCarePlus have contracted Monument Insurance Limited, a division of Crombie Lockwood to provide financial advice in relation to HCP Hospital Select health insurance underwritten by UniMed.

## Contact the HealthCarePlus enquiry line to speak to a HealthCarePlus Representative

**0800 268 3763**



UNION MEDICAL BENEFITS SOCIETY LTD



## Get in touch

HealthCarePlus Hospital Select is administered and underwritten by Union Medical Benefits Society Ltd (UniMed). Any cover issued in response to this application is subject to the terms and conditions contained in the relevant policy documentation and UniMed/HealthCarePlus Conditions of Membership.

## For policy queries and claims contact UniMed's friendly staff on:

**0800 600 666**

### Head Office

Union Medical Benefits Society Ltd  
165 Gloucester Street,  
PO Box 1721, Christchurch 8140  
Phone: 03 365 4048 Fax: 03 365 4066

[www.unimed.co.nz](http://www.unimed.co.nz)