

Surgical MAX

YOU ARE INSURED FOR

We will pay up to \$250,000 in total for all claims relating to a single health condition after deducting the excess. A standard excess of \$500 per claim will apply to all claims except where this excess is replaced by a higher excess selected by you.

1. Medical treatment and procedure costs

You are insured for the reasonable costs of

- diagnostic procedures (tests carried out by a specialist or specialised technician using diagnostic equipment to identify the health condition to be treated, or clarify the outcome or extent of a health condition)
- pre-operative services (consultations with a specialist and diagnostic procedures undertaken in connection with subsequent eligible surgery not more than six months before the related surgery)
- non Acute Approved Surgical Procedure(s) performed in a Licensed Private Surgical Hospital which includes prosthesis, anaesthesia, accommodation and ancillary treatment charges while in hospital
- post-operative services (post-operative specialist consultations and diagnostic procedures undertaken within six months after eligible surgery, post-operative physiotherapy within two months of eligible surgery and nursing care)

for any health condition adversely affecting you that arises and is treated in New Zealand.

2. Chemotherapy

Benefit payable for treatment by a Registered Oncologist in Private Practice. Benefit applies to the cost of materials, chemotherapy drugs 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 Per Year

3. Radiation Oncology

Limited to Planning, Shielding and Accessories, Field Setup and XRT Simulation and performed in an approved Private Hospital facility. \$65,000 Per Year

4. Imaging

Treatment provided by a Registered Medical Practitioner in Private Practice

PET Scan \$15,000 Per Year

5. Transfer costs

If you require transportation by air or road ambulance, to or from private hospital in New Zealand for surgery, we will pay the reasonable costs of that transportation within New Zealand.

6. Travel and accommodation costs for support person

If

- (a) you require surgery in a hospital in New Zealand outside your district, and
 - (b) a doctor recommends that a support person travels with you and stays with you during surgery,
- we will pay your support person's reasonable travel and accommodation costs.

7. Transplant surgery costs

If

- (a) you require transplant surgery, and
 - (b) suitable surgical procedures are not available in New Zealand and
 - (c) a specialist recommends transplant surgery at an Australian hospital,
- we will pay your reasonable surgical and travel costs.

8. Public Hospital Grant

We will also pay you a Public Hospital Grant when you have a surgical procedure in a public hospital (other than for personal injury by accident or as a fee paying patient) and stay in hospital overnight. We will pay you \$200 per night for up to twenty nights during each twelve month period of insurance.

9. Breast Reconstruction

Breast Reconstruction performed by a Registered Medical Practitioner in Private Practice. For all stages of breast reconstruction performed under the same anaesthetic as the initial mastectomy: benefits as per Medical Treatment and Procedure costs section.

For all stages of breast reconstruction performed after the initial mastectomy or not under the same anaesthetic as the initial mastectomy, an amount (payable once only) being the lesser of either the total cost of the reconstruction (Including nipple reconstruction and tattooing); or \$15,000. For the avoidance of doubt, this benefit section excludes surgery to the breasts to achieve or correct the symmetry and/or look and/or feel of the breasts. This benefit is only available for surgery following first diagnosis of breast cancer on or after 1 May 2005 and no benefit will be paid under this section unless UniMed has paid for the initial mastectomy.