

UNICARE PLUS PLAN

Effective 1 August 2020

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.

Excess Option: Any voluntary excess option selected applies per claim and will be additional to any other deductibles applying to this plan. All benefits included in this brochure are inclusive of GST charged by providers of service.

PRIVATE HOSPITALISATION SURGICAL BENEFITS

Payments under this section are limited to the lesser of either 100% of the 'Usual and Customary' costs of the procedure or the specific benefit entitlement(s) stated below. Please note: "Policy Excess" applies to either settlement method.

Policy Excess

The first \$100.00 of the TOTAL refundable costs per admission under the Private Hospital Surgical Benefits section are payable by the patient/member.

Surgery

	Per Admn	Per Year
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	2,420.00	
• Anaesthetist's fee	1,210.00	
• Hospital fees, in a Licensed Private Hospital or Private Facility approved by UniMed for:		
• Accommodation	6,600.00	
• Theatre fees and Anaesthetic supplies	1,100.00	
• Perfusionist	990.00	
• Intensive Care Nursing	1,210.00	No limit per year
• Recovery nurse	85.00	
• X-Ray Examination, ECG	725.00	
• Intravenous Fluids, Irrigating Solutions, Dressings, Prescriptions and Antibiotics	440.00	
• Pre op consultation	110.00	
• Post Operative Physiotherapy fees from a Registered Physiotherapist	480.00	
• Emergency Ambulance for Hospital admission	165.00	
• Surgically Implanted Prostheses (50% of costs)	3,600.00	
• Laparoscopic Disposables	1,210.00	

Post-operative Occupational Therapy

Treatment by a Registered Occupational Therapist.	Per Visit 100.00	3 Visits per surgical admission
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In-Patient Non-PHARMAC Subsidised Pharmaceuticals

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.		330.00
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Laparoscopic Surgery

Performed by a Registered Medical Specialist in a Licensed Private Hospital. Benefits and limits as per Surgery section.

Cardiac Surgery

Performed by a Registered Medical Specialist in a Licensed Private Hospital. Benefits and limits as per Surgery section.

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 Private Hospitalisation Surgical Benefits 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.

This benefit is only available for surgery following first diagnosis of breast cancer on or after 01 May 2005 and no benefit will be paid under this section unless UniMed has paid for the initial mastectomy.

Breast Symmetry, Post Mastectomy

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.		Per Lifetime 6,500.00
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Surgical Tests and Investigations	Per Admn	Per Year
Gastroscopy	1,800.00	No Max
Colonoscopy	2,500.00	No Max
Surveillance Colonoscopy or Gastroscopy		Per 24 Months
Payable where no signs or symptoms are present, reimbursement of 50% of actual costs up to limit.		900.00
Limit of one procedure every 24 months.	Per Admn	900.00
Gastroscopy	900.00	900.00
Colonoscopy	1,250.00	1,250.00
* 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.		
Angiography	Per Admn	Per Year
Angiograms, Angioplasty including Hospitalisation, Specialist and Ancillary fees.		
Angiogram	3,000.00	3,000.00
Angioplasty (Grant)	8,800.00	8,800.00
Lithotripsy		
Performed by a Specialist Urologist.	Lithotripter	3,800.00
Special conditions apply, refer to full Conditions of Membership.	Urologist	720.00
	Anaesthetist	430.00
	Hospital	420.00
		5,370.00
		5,370.00
Overseas Transplant		
In the event of Heart, Lung, or Liver transplant surgery being required outside New Zealand, UniMed will assist with a once only grant of \$4,000.00.		
Accident Surgery		
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.		
Parent Accommodation	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:	100.00	500.00
ALL BENEFIT SECTIONS FROM THIS POINT FORWARD REFUND 100% OF ACTUAL MEDICAL COSTS TO THE SPECIFIED MAXIMUMS.		
"PUBLIC HOSPITAL" BENEFITS		
"PUBLIC HOSPITAL" CASH GRANT	Per Day	Per Year
Surgical and Medical Admissions		
When Admitted to Public Hospital for a full 24 hours or more.	150.00	1,680.00
(Child Benefit - 50% of above. All injury admissions are excluded).		
PRIVATE HOSPITALISATION MEDICAL BENEFITS		
Cover is provided for Non Acute Medical Hospitalisation (includes Geriatric) in a Licensed Private Hospital, on admission and under the care of a Registered Medical Practitioner.	Per Admn	Per Year
Intravenous Fluids, Irrigating Solutions, Dressings, Prescriptions and Antibiotics.	2,500.00	2,500.00
	220.00	220.00
Psychiatric Hospitalisation		
In a Licensed Private Hospital on admission and under the care of a Specialist Psychiatrist.	2,500.00	2,500.00
Intravenous Fluids, Irrigating Solutions, Dressings, Prescriptions and Antibiotics.	220.00	220.00
ACUTE PRIVATE HOSPITALISATION MEDICAL/SURGICAL GRANT		
An admission for an "Acute" Qualifying Medical Condition or "Surgical Procedure" under the care of a Registered Medical Practitioner in a Licensed Private Hospital.	2,500.00	2,500.00
MINOR SURGERY		
Registered Medical Practitioner		
Not requiring a general anaesthetic and including the preceding consultation.	400.00	No Max
Minor Skin Lesions Removed by a GP		
Performed by a Registered Medical Practitioner in General Practice. Note that Prior Approval must be sought for this benefit.	550.00	550.00
Registered Medical Specialist		
Not requiring general anaesthetic, including the preceding consultation and performed in specialist rooms.	1,210.00	1,210.00
ORAL SURGERY		
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.		
In Professional Rooms		
Oral Surgeon's fees including consultation and post op care.	720.00	No Max
Anaesthetist including anaesthetic supplies.	360.00	No Max
In Private Hospital		
Oral Surgeon's fees including consultation and post op care.	720.00	No Max
Anaesthetist including anaesthetic supplies.	360.00	No Max
Operating Theatre fee, all Medication, Dressings etc whilst in Hospital.	2,000.00	No Max
Accommodation	6,400.00	No Max

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 \$8,500 per annum.		Per Year 55,000.00
SURVEILLANCE FOLLOWING CANCER TREATMENT		
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.		
RADIATION ONCOLOGY		
Limited to Planning, Shielding and Accessories, Field Setup and XRT Simulation and performed in an approved Private Hospital facility.		Per Year 22,000.00
GENERAL MEDICAL EXPENSES		
THIS BENEFIT SECTION REFUNDS 100% OF ACTUAL MEDICAL COSTS TO THE SPECIFIED MAXIMUMS.		
General Practitioners	Per Visit	Per Year
Treatment and consultation by a Registered Medical Practitioner, including Dressings, Acupuncture, ECG.	45.00	No Max
GP After Hours		
Home Visits.	50.00	100.00
Registered Practice Nurse		
Treatment and consultation by a Practice Nurse holding NZRN qualifications.	30.00	No Max
Prescriptions		
User part charges for Prescription items on the New Zealand Pharmaceutical schedule and prescribed by a Registered Medical Practitioner. Psychiatric medications prescribed by a Registered Medical Practitioner are now included in this benefit. (Note: Maximum of 20 items per policy)	20.00	150.00
Non-PHARMAC Subsidised Pharmaceuticals		
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.		330.00
Laboratory Tests		
The cost of Laboratory charges for occult blood or Glucose tests, requested by a Registered Medical Practitioner.	80.00	80.00
Independent Nurse Practitioner		
Treatment/consultation.	35.00	175.00
Chiropodist/Podiatrist		
Consultation and treatment by a Registered Practitioner.	220.00	220.00
Osteopath		
Consultation and treatment provided by an Osteopath with NZ Registration.	170.00	340.00
Physiotherapist		
Treatment by a Registered Physiotherapist.	30.00	300.00
Audiology		
Consultations and audiology testing fees by a Registered Audiologist.	80.00	240.00
Audiometric Tests: For Puretone, Audiometry, Impedance, Tympanometry, Brain-stem evoked response.	240.00	240.00
Ambulance		
Emergency transportation for Public Hospital Inpatient admissions.	160.00	160.00
SPECIALISTS		
Consulting Physician/Paediatrician		
Consultations following referral from a Registered Medical Practitioner.		
First claim in an insurance year	300.00	300.00
Subsequent claims in an insurance year	175.00	No Max
Specialist including Surgeon		
Consultations with a Specialist Registered Medical Practitioner.		
First claim in an insurance year	110.00	110.00
Subsequent claims in an insurance year	100.00	No Max
Specialist Oncologist		
Consultations following referral from a Medical Practitioner with an Oncologist who is a Specialist Registered Medical Practitioner.		
First claim in an insurance year	180.00	180.00
Subsequent claims in an insurance year	100.00	No Max
Oral Surgeon		
Consultation (not treatment) by a Registered Oral Surgeon.		
First claim in an insurance year	110.00	110.00
Subsequent claims in an insurance year	100.00	No Max
Imaging		
Treatment provided by a Registered Medical Practitioner in Private Practice.		
• Bone Density Scan	250.00	250.00
• X-Rays and Image Intensifiers	500.00	} 500.00
• Ultrasound	500.00	
• Mammography	500.00	
• Scintigraphy	2,000.00	
• CT Scan	900.00	1,800.00
• MRI Scan	1,000.00	1,000.00
• PET Scan	1,100.00	1,100.00

"ACC" TOP UP BENEFIT

NON HOSPITAL

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 under the General Medical Expenses and Minor Surgery benefit sections.

NB: For a claim to qualify, "ACC" must have provided financial assistance towards treatment costs.

HEALTH MAINTENANCE BENEFITS

	Per Visit	Per Year
Home Care Home Nursing by a Registered Nurse, following surgery in a Private Hospital on referral from a Registered Medical Practitioner.	120.00	720.00
Vision Care Treatment by a Registered Orthoptist.	200.00	200.00
Treatment by a Registered Ophthalmologist.		
First claim in an insurance year	110.00	110.00
Subsequent claims in an insurance year	90.00	No Max
Urodynamic Assessment Treatment by a Specialist Urologist.	900.00	900.00
Speech Therapy Treatment by a Registered Speech Therapist following surgery, excluding consequence of injury by accident.	80.00	400.00
Cardiac Diagnostic Procedures Holter Monitoring Treadmill Exercise Ambulatory BP Monitoring Cardio Vascular Ultrasound Stress Echocardiography Echocardiography Transoesophageal Echocardiography		Total 1,200.00 per annum

NON MEDICAL BENEFITS

Funeral Grant

Upon death by natural causes prior to age 65 of any person on the policy a grant of \$600.00 towards funeral costs is available.

LOYALTY BENEFITS

THESE BENEFITS RECOGNISE LONG TERM CONTINUOUS MEMBERSHIP.

Chiropractor

Benefits apply after three years' continuous membership in this plan. Cost of services from a Registered Chiropractor including X-rays. 200.00 | 200.00 |

Obstetrics

Benefits apply after three years' continuous membership in this plan. Treatment from a Registered Medical Practitioner for obstetric conditions. 300.00 | 300.00 |

Obesity Surgery

Benefits apply after five years' continuous membership in this plan. A one time grant is payable of 50% of actual costs up to benefit limit. | Per Lifetime 4,000.00 |

Overseas Treatment

Benefits apply after five years' continuous membership in this plan. A grant is payable of up to \$2,000. The procedure must be available in New Zealand 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 and prior approval is required for the treatment to be eligible.

Psychiatric Consultations

Benefits apply after five years' continuous membership in this plan.
Consultation with a psychiatrist who is vocationally registered in New Zealand. Per Visit 150.00 | Per Year Three Visits |

Need to know more before making your choice?

Phone UniMed's friendly, helpful staff now and secure your future.

If calling from Christchurch please phone 03 365 4048.

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