

# CORPORATE BENEFITS GUIDE

VIC 2011



# ANNUAL MAXIMUMS

Services	Corporate Advantage	Corporate Classic	Corporate Essentials
<b>General Dental</b>	Unlimited	Yr 1 - \$400 Yr 2 - \$480 Yr 3 - \$560 Yr 4 - \$640 Yr 5 - \$720 Yr 6 - \$800	\$350
<b>Major Dental*</b>	\$800	Yr 1 - \$400 Yr 2 - \$480 Yr 3 - \$560 Yr 4 - \$640 Yr 5 - \$720 Yr 6 - \$800	
<b>Orthodontics*</b>	\$1,200 per person \$2,400 lifetime limit	\$1,600 lifetime limit for orthodontics	X
<b>Optical</b>	\$250	\$225	\$175
<b>Pharmacy</b>	Yr 1 - \$300 Yr 2 - \$360 Yr 3 - \$420 Yr 4 - \$480 Yr 5 - \$540 Yr 6 - \$600	Yr 1 - \$150 Yr 2 - \$180 Yr 3 - \$210 Yr 4 - \$240 Yr 5 - \$270 Yr 6 - \$300	\$150
<b>Physiotherapy</b>	Yr 1 - \$300 Yr 2 - \$360 Yr 3 - \$420 Yr 4 - \$480 Yr 5 - \$540 Yr 6 - \$600	Yr 1 - \$150 Yr 2 - \$180 Yr 3 - \$210 Yr 4 - \$240 Yr 5 - \$270 Yr 6 - \$300	\$150
<b>Chiropractic and Osteopathy</b>	\$600 per person \$1,200 per policy	\$500 per person \$1,000 per policy	
<b>Natural Therapies</b> Includes acupuncture, Alexander Technique, Chinese herbalism, exercise physiology, Feldenkrais, homeopathy, iridology, naturopathy and Western herbalism. Massage includes aromatherapy, Bowen Technique, kinesiology, reflexology, shiatsu, and therapeutic massage.	Yr 1 - \$175 Yr 2 - \$210 Yr 3 - \$245 Yr 4 - \$280 Yr 5 - \$315 Yr 6 - \$350	Yr 1 - \$300 Yr 2 - \$360 Yr 3 - \$420 Yr 4 - \$480 Yr 5 - \$540 Yr 6 - \$600	

● = Loyalty Maximums. \*Benefits for major dental and orthodontics begin after the first year of membership.

## ANNUAL MAXIMUMS

Annual Maximums are the maximum amounts you can claim in a service category per person, per calendar year unless otherwise stated and when provided anywhere in Australia by a recognised provider. Increased optical Annual Maximums only apply when optical products are purchased from a network provider. Set Benefits apply for individual services see pages 3-10 for benefit examples.

Services	Corporate Advantage	Corporate Classic	Corporate Essentials
<b>Psychology</b>	\$500 per person \$1,000 per policy	Combined limit with Natural Therapies	X
<b>Podiatry Dietary Speech Therapy Eye Therapy Occupational Therapy</b>	Yr 1 – \$300 Yr 2 – \$360 Yr 3 – \$420 Yr 4 – \$480 Yr 5 – \$540 Yr 6 – \$600		X
<b>Health Aids and Appliances</b> Includes Hire, Repair, and Maintenance of Health Appliances	<b>\$850</b> <i>Sub limits apply as follows:</i> Asthma Pumps - \$300 one claim every 3 years Blood Glucose monitor /INR device - \$500 one claim per year Defined Appliances ^- \$500 per calendar year Surgical Stockings - \$100 per calendar year CPAP devices #- \$750 one claim every 2 years Hearing Aids - \$850 one claim every 3 years TENS Machine - \$175 per calendar year Blood Pressure Monitor - \$175 per calendar year Hire, repair and maintenance of Health Aids/Appliances - \$100 per calendar year	<i>Includes sublimits for health appliances:</i> Asthma Pumps - one claim every 3 years Blood Glucose monitor /INR device - one claim per year Surgical Stockings - \$100 per calendar year CPAP devices - one claim every 2 years Hearing Aids - one claim every 3 years TENS Machine - \$175 per calendar year Blood Pressure Monitor - \$175 per calendar year Hire, repair and maintenance of Health Aids/Appliances - \$100 per calendar year	X
<b>Home Nursing</b>	\$350	\$350	X
<b>Living Well</b>	\$100	\$100	\$100
<b>Travel and Accommodation</b> For essential medical treatment only	Accommodation: \$150 Travel: \$100	Accommodation: \$150 Travel: \$100	X
<b>Accident Benefit</b>	\$2,000 per person, \$4,000 per policy	\$2,000 per person, \$4,000 per policy	X

^Defined Appliances includes insoles, orthopaedic and corrective footwear, pressure garments, braces and artificial limbs. Limits apply per item. #Subject to eligibility. Call us for details.



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# DENTAL BENEFITS

Services	Corporate Advantage
<b>General Dental</b>	
Comprehensive oral exam	\$47.70
Scale and Clean	\$81.90
Fluoride Treatment	\$36.00
Mouthguard	\$151.65
<b>Major Dental</b>	
Full Crown - Veneered	Set benefits apply per item
Complete Denture	





## DID YOU KNOW?

You can also find a provider by downloading our iPhone application from iTunes.

iPhones, iPod touch, iTunes and App Store are a trademark of Apple Inc.

## BENEFITS

A benefit is the amount you receive from us when you claim on an eligible service. Benefits are paid by item and a set benefit amount applies to each item. Annual Maximums and sometimes sub-limits apply to services; see pages 1 and 2 for details.

Corporate Classic	Corporate Essentials
\$42.40	\$37.10
\$72.80	\$63.70
\$32.00	\$28.00
\$134.80	\$117.95
100% of cost to annual maximum	Set benefits apply per item
\$680.40	

## GAP FREE DENTAL FOR KIDS

Only we cover all the cost of your kids' dental up until they turn 25. This means you'll benefit from no out-of-pocket costs on most dental services like check-ups, teeth cleaning, fillings, x-rays and more.\*

\*Available only for treatment provided by a network Members First or MBF MemberCare dentist, on benefits payable. Available on Family hospital covers with extras. Child dependents only. Excludes orthodontics and hospital treatments.

# OPTICAL BENEFITS

Services	Corporate Advantage	
<b>Frames</b>		
Spectacle Frames	\$216.80	
<b>Lenses</b>		
Single Vision Lenses	\$103.50	
Bi-focal lenses	\$139.50	
Tri-focal/progressive lenses	\$190.80	
<b>Contact Lenses</b>		
Disposable (3 month supply)	100% of cost to annual limit	
Non Disposable	Set benefits apply per item	
<b>Gap Free Optical</b>	<b>Network provider<sup>~</sup></b>	<b>Optical Partners<sup>~</sup></b>
Kids glasses with safety lens plus any frame up to \$249	✓	✗
Glasses with single vision lens <sup>^</sup>	✓	✓
Glasses with single vision grind lens <sup>^</sup>	✓	✓
Glasses with bi-focal lens <sup>^</sup>	✓	✓
Glasses with tri-focal lens <sup>^</sup>	✗	✓
Glasses with progressive lens <sup>^</sup>	✗	✓
Two pair of glasses with single vision lens <sup>^</sup>	✗	✓
Two pair of glasses with single vision grind lens <sup>^</sup>	✗	✓
Optical add on services covering tinting, coatings and UV protection (subject to your remaining annual maximums)	✓	✓
Prescription Disposable Contact Lenses 12 months supply - purchased in store	✓	✓
Prescription Disposable Contact Lenses 12 months supply - purchased online	✓	✓

<sup>^</sup>Includes any frames valued up to \$199.

<sup>~</sup>For a list of Network optical providers/Optical partners, see box below or visit our website.

## NETWORK OPTICAL PROVIDERS

Through visiting one of our network optical providers, you will be able to receive access to our Gap-free optical feature, which means more savings for you. The optical providers where you can get this great value are Blink Optical, Kevin Paisley Fashion Eyewear, National Pharmacies Optical, Prevue Eyewear, Stacey and Stacey Optometrists and selected independents.

## NON-NETWORK OPTICAL PARTNERS

Members have access to our Optical Partner Specsavers, who can provide choice of frames and lenses packages that are at fixed prices. The benefits of not having to pay any additional cost on your purchases through our Optical Partner is dependent on your type of glasses purchased, level of cover, annual maximums and waiting periods.

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Corporate Classic		Corporate Essentials	
\$192.70		\$168.60	
\$92.00		\$80.50	
\$124.00		\$108.50	
\$169.60		\$148.40	
100% of cost to annual limit		100% of cost to annual limit	
Set benefits apply per item		Set benefits apply per item	
Network provider <sup>~</sup>	Optical Partners <sup>~</sup>	Network provider <sup>~</sup>	Optical Partners <sup>~</sup>
X	X	X	X
✓	✓	X	✓
✓	✓	X	✓
✓	✓	X	X
X	✓	X	X
X	✓	X	X
X	✓	X	X
X	✓	X	X
✓	✓	X	X
✓	✓	X	X
✓	✓	X	X



# PHYSIOTHERAPY, CHIROPRACTIC AND OSTEOPATHY BENEFITS

Services	Corporate Advantage
<b>Physiotherapy</b>	
Initial attendance	\$62.10
Subsequent attendance	\$49.50
Group attendance	\$19.80
<b>Chiropractic</b>	
Initial attendance	\$66.15
Subsequent attendance	\$42.75
<b>Osteopathy</b>	
Initial attendance	\$66.15
Subsequent attendance	\$42.75



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Corporate Classic	Corporate Essentials
\$55.20	\$48.30
\$44.00	\$38.50
\$17.60	\$15.40
\$58.80	\$51.45
\$38.00	\$33.25
\$58.80	\$51.45
\$38.00	\$33.25

### BOWEL CANCER SCREENING KITS

Bowel cancer can be treated successfully if detected in its early stages. We will pay a benefit towards selected bowel cancer screening kits. Contact us for details.

# OTHER BENEFITS

Services	Corporate Advantage
<b>Natural Therapies</b>	
Acupuncture - initial attendance	\$27.00
Acupuncture - subsequent attendance	\$27.00
Naturopathy - initial attendance	\$27.00
Naturopathy - subsequent attendance	\$27.00
Massage attendance	\$22.50
<b>Pharmacy</b>	90% of cost*
<b>Dietary</b>	
Initial attendance	\$27.00
Subsequent attendance	\$14.65
<b>Psychology</b>	
Initial consultation	\$67.50
Subsequent consultation	\$50.65
Family consultation	\$28.15
<b>Podiatry</b>	
Initial attendance	\$36.00
Subsequent attendance	\$29.25
<b>Speech Therapy</b>	
Initial attendance	\$67.50
Subsequent attendance	\$45.00
<b>Eye Therapy</b>	
Initial attendance	\$36.00
Subsequent attendance	\$24.75
<b>Occupational Therapy</b>	
Initial attendance	\$36.00
Subsequent attendance	\$24.75
<b>Home Nursing - per visit</b>	\$35.00
<b>Living Well (see above)</b>	50% of cost
<b>Health aids and appliances</b>	90% of cost to annual limit
Asthma Pumps	One claim every 3 years
Blood Glucose Monitors or INR blood testing devices (Coagucheck)	One claim per year
Defined Appliances <sup>^</sup>	\$500 per calendar year
Surgical Stockings	\$100 per calendar year
CPAP Devices <sup>#</sup>	One claim every 2 years
Hearing Aids	One claim every 3 years
TENS machine	\$175 per calendar year
Blood pressure monitors	\$175 per calendar year
Hire, repair and maintenance of health aids and appliances	\$100 per calendar year
<b>Travel and Accommodation</b>	\$40 per night for accommoda

\*Benefits for prescription items that are non-PBS, TGA approved for the use of that condition and not appearing on our exclusions list. <sup>^</sup>Defined Appliances includes insoles, orthopaedic and corrective footwear, pressure garments, braces and artificial limbs. Limits apply per item. <sup>#</sup>Subject to eligibility. Call us for details.

## WHAT IS LIVING WELL?

Living Well programs provide cover for courses and treatments which can help you to live a healthier lifestyle including Gym memberships, Nicotine replacement therapy, yoga and pilates courses, weight management programs and first aid courses. Your doctor will need to complete the Living Well form to confirm the program is medically necessary for your health.

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Corporate Classic	Corporate Essentials
\$24.00	\$21.00
\$24.00	\$21.00
\$24.00	\$21.00
\$24.00	\$21.00
\$20.00	\$17.50
80% of cost	70% of cost
\$24.00	X
\$13.00	X
\$60.00	X
\$45.00	X
\$25.00	X
\$32.00	X
\$26.00	X
\$60.00	X
\$40.00	X
\$32.00	X
\$22.00	X
\$32.00	X
\$22.00	X
\$35.00	X
50% of cost	50% of cost
80% of cost to annual limit	X
One claim every 3 years	
One claim per year	
\$500 per calender year	
\$100 per calender year	
One claim every 2 years	
One claim every 3 years	X
\$175 per calender year	
\$175 per calender year	
\$100 per calender year	
ation 100% of cost for travel	

