



YOUNGat**HEART**

Healthy cover
made for over 55s

it's worth it

nib



It's easy to find the right cover for you

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Note: Before joining any nib Young at Heart health cover, read this guide carefully to choose which cover is most appropriate for your needs. The information contained in this brochure is current as at 1 April 2012 and should be read in conjunction with the nib Guide to your Health Cover. Please read this guide and keep it handy to refer to in the future.

Rules and benefit levels may change from time to time. If you would like to know more contact us on **13 14 63** or visit **nib.com.au**. The prices displayed in this brochure are intended as a guide only, see inside back cover for details on quoted prices.

The prices displayed in this brochure are intended as a guide only. They are based on a NSW customer with an excess of \$500 per admission, and include a discount of up to 4% for direct debit from a cheque or savings account, the Federal Government 30% Rebate on Private Health Insurance, and exclude Lifetime Health Cover loading. Your actual premium may vary.



nib proudly supports and complies with The Private Health Insurance Code of Conduct. A copy of the Code is available at privatehealth.com.au/codeofconduct

Cover designed with you in mind



Have you noticed how most private health cover is designed for young singles or young families? So if you're over 55 you could easily pay for services you'll never use.

That's where **nib Young at Heart** is different.

It's cover made for singles and couples who are over 55. There's no cover for pregnancy or birth related services, no cover for fertility treatment and no cover for children. Put simply, you can stop paying for cover that's no longer relevant.

Instead you get cover on services you're more likely to need. You get cover for hospital services like hip replacements and cataract surgery. Plus generous annual limits on Extras like optical and dental.

nib Young at Heart is high quality, great value cover, **it's worth it.**

You can't put a price on your health

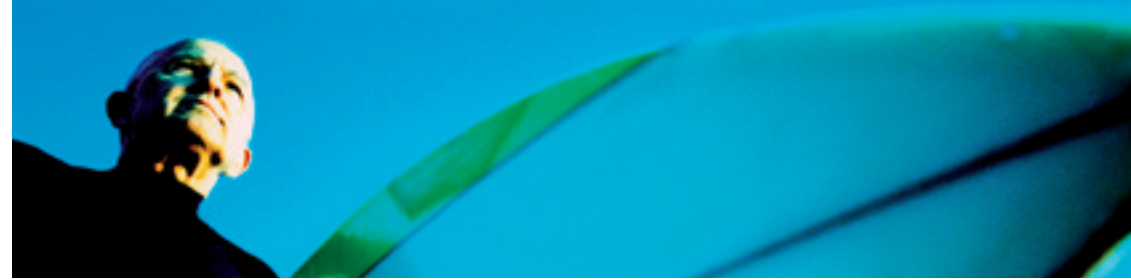
When you're looking at private health cover the temptation is to look for the lowest price. At nib, we have a reputation for providing great value health cover. With nib Young at Heart we also want to make sure you're getting the best possible cover for your needs.

Hospital cover tailored for your time of life

When you're over 55 there are some features you'll want from your health cover, and some you won't. With nib Young at Heart, we've carefully chosen what is included and excluded. So knee replacements and heart surgery are included, pregnancy services and fertility treatment are not. The level of hospital cover you choose determines the types of procedures and services you're covered for. Check pages 8-12 for full details.





Everyday Extras cover for the services you use

Extras cover is for services you can use everyday to stay healthy – like going to the dentist, a visit to the physio, or a new pair of glasses. Most of these services Medicare doesn't cover adequately, so we help you pay for them. nib pays benefits as a percentage of the cost to you – so you know what you get back every time. Even better, the higher your cover, the more services you're covered for and the more you get back. For more detail on Extras see page 13.



How to choose the right cover for you

Because everyone's health cover needs are slightly different we've developed two levels of cover for nib Young at Heart. To decide which is right for you just ask yourself one simple question – “What level of cover do you need for Hospital and Extras?” Use this simple guide.

	YOUNGatHEART Mid Cover
	<ul style="list-style-type: none"><input type="checkbox"/> I am over 55<input type="checkbox"/> I have no children I need to cover<input type="checkbox"/> I don't need pregnancy cover<input type="checkbox"/> I'd like MEDIUM optical and dental cover<input type="checkbox"/> I'd like MEDIUM level hospital cover for services relevant to me<input type="checkbox"/> I'd like 65% back on Extras every time I claim (up to my annual limit)
	from \$27.92[^] a week for singles (NSW) varies state to state
	VISIT PAGE 4
	YOUNGatHEART Top Cover
	<ul style="list-style-type: none"><input type="checkbox"/> I am over 55<input type="checkbox"/> I have no children I need to cover<input type="checkbox"/> I don't need pregnancy cover<input type="checkbox"/> I'd like HIGHER optical and dental cover<input type="checkbox"/> I'd like HIGH level hospital cover for services relevant to me<input type="checkbox"/> I'd like 75% back on Extras every time I claim (up to my annual limit)
	from \$34.02[^] a week for singles (NSW) varies state to state
	VISIT PAGE 6

[^]NSW price (varies by state), includes discount of up to 4% for direct debit from cheque or savings account, Federal Government 30% Rebate on Private Health Insurance, an excess of \$500 per calendar year but excludes the Lifetime Health Cover Loading.

from
\$27.92[^]
 a week
 for singles
 (NSW)
 Varies from state to state



Get
65%

back on Extras up to
 your annual limit

Choose nib Young at Heart **Mid** Cover if you want a medium level of cover, tailored for you at your time of life and with 65% of the cost of Extras services back (up to your annual limit).

Hospital Cover

Inclusions

examples of services covered

- ✓ Immediate treatment after an accident (see page 30 for more details)
- ✓ Heart surgery*
e.g. stents, open heart surgery
- ✓ Major joint replacement*
e.g. artificial knee/hip
- ✓ Knee, hip and shoulder investigations
- ✓ Knee and shoulder surgery
e.g. cartilage repair
- ✓ Major eye surgery*
e.g. cataracts
- ✓ Minor eye surgery
e.g. squints, pterygiums
- ✓ Hernia surgery
- ✓ Back surgery e.g. slipped disc
- ✓ Digestive disorders
e.g. stomach ulcers
- ✓ Colonoscopies and bowel surgery
- ✓ Kidney stone and gall stone removal
- ✓ Removal of teeth
e.g. wisdom teeth
- ✓ Ambulance cover
- Refer page 8 under 'Ambulance Cover'

Exclusions

the services not covered



- ✗ Pregnancy and birth related services
- ✗ Infertility investigations
- ✗ Assisted reproductive services e.g. IVF
- ✗ Gastric banding and obesity surgery
- ✗ Renal dialysis
- ✗ Procedures not covered by Medicare

Restrictions apply

The following services are limited to Public Hospital Benefits (for details see page 11 and 12).

- ✗ Rehabilitation programs
- ✗ Psychiatric conditions
e.g. depression, eating disorders, alcohol and drug rehabilitation

Choose your hospital excess:

-  \$250 per admission (capped at \$500 for singles/\$1000 for couples, per calendar year)
-  \$500 per admission (capped at \$500 for singles/\$1000 for couples, per calendar year)

important information Please be aware that waiting periods may apply for hospital and Extras services for this cover – even if you are an existing nib customer or transferring from another fund. For more information on hospital cover and waiting periods see pages 8-12. *** Services are subject to 'Benefit Limitation Periods' please read page 8 section titled 'Benefit Limitations apply if you currently do not have Private Health Insurance'.**

Extras Cover

Service

Annual Limit
 (per person per calendar year)

Waiting Period

General Dental e.g. oral examination, scale and clean, fillings, basic extractions.

\$500

2 months

Major Dental e.g. root canal therapy, gum disease, crowns, bridges, implants, dentures, oral surgery.

\$700

12 months

Optical e.g. frames, lenses, contact lenses.

\$250

6 months

Physiotherapy/Chiropractic/Exercise Physiology/Osteopathy

\$300

2 months

Pharmaceutical Prescriptions Benefits paid once the maximum PBS charge has been deducted. Benefits do not apply to prescriptions dispensed to hospital in-patients.

\$400

2 months

Hearing Aids/Artificial Aids/Orthotics Ask nib for details of specific restrictions and replacements.

\$400

2-36 months
 Waiting periods determined by type of aid.

Other Therapies speech therapy, podiatry consultations, orthoptics (eye therapy), dietetics, home nursing, occupational therapy.

\$200

2 months

That's a total of \$2,750 in Extras per year

[^] NSW price (varies by state), includes discount of up to 4% for direct debit from cheque or savings account, Federal Government 30% Rebate on Private Health Insurance, an excess of \$500 per calendar year but excludes the Lifetime Health Cover Loading.

nib **YOUNG**at**HEART** Top Cover

from
\$34.02[^]
a week
for singles
(NSW)
Varies from state to state



Get
75%
back on Extras up to
your annual limit

If you'd like a higher level of cover choose nib Young at Heart **Top** Cover. Compared to nib Young at Heart Mid Cover it has more hospital services because of less exclusions and no restrictions. Plus, instead of 65%, you'll get 75% back on the cost of Extras (up to your annual limit).

Hospital Cover

Inclusions

examples of services covered

- ✓ Immediate treatment after an accident (see page 30 for more details)
- ✓ Heart surgery e.g. stents, open heart surgery
- ✓ Major joint replacement e.g. artificial knee/hip
- ✓ Knee, hip and shoulder investigations
- ✓ Knee and shoulder surgery e.g. cartilage repair
- ✓ All eye surgery e.g. cataracts
- ✓ Hernia surgery
- ✓ Back surgery e.g. slipped disc
- ✓ Digestive disorders e.g. stomach ulcers
- ✓ Colonoscopies and bowel surgery
- ✓ Kidney stone and gall stone removal
- ✓ Rehabilitation programs
- ✓ Renal dialysis
- ✓ Psychiatric conditions e.g. depression, eating disorders, alcohol and drug rehabilitation
- ✓ Gastric banding and obesity surgery
- ✓ Removal of teeth e.g. wisdom teeth
- ✓ Ambulance cover
- Refer page 8 under 'Ambulance Cover'

Exclusions

the services not covered

- ✗ Pregnancy and birth related services
- ✗ Infertility investigations
- ✗ Assisted reproductive services e.g. IVF
- ✗ Procedures not covered by Medicare

Choose your hospital excess:

- Nil Xs** Nil excess
- \$250 Xs** \$250 per admission (capped at \$500 for singles/\$1000 for couples, per calendar year)
- \$500 Xs** \$500 per admission (capped at \$500 for singles/\$1000 for couples, per calendar year)

important information Please be aware that waiting periods may apply for hospital and Extras services for this cover – even if you are an existing nib customer or transferring from another fund. For more information on hospital cover and waiting periods see pages 8-12.

Extras Cover

Service	Annual Limit (per person per calendar year)	Waiting Period
General Dental e.g. oral examination, scale and clean, fillings, basic extractions.	\$700	2 months
Major Dental e.g. root canal therapy, gum disease, crowns, bridges, implants, dentures, oral surgery.	\$1,200	12 months
Optical e.g. frames, lenses, contact lenses.	\$350	6 months
Physiotherapy/Chiropractic/Exercise Physiology/Osteopathy	\$500	2 months
Natural Therapies acupuncture, herbalism, naturopathy, homeopathy, nutrition, remedial massage, myotherapy, bowen therapy, shiatsu.	\$250	2 months
Pharmaceutical Prescriptions Benefits paid once the maximum PBS charge has been deducted. Benefits do not apply to prescriptions dispensed to hospital in-patients.	\$600	2 months
Hearing Aids/Artificial Aids/Orthotics Ask nib for details of specific restrictions and replacements.	\$1,000	2-36 months Waiting periods determined by type of aid.
Healthier Lifestyle nib approved weight management, quit smoking and health management programs, first aid courses, preventative health tests.	\$150	6 months
Other Therapies speech therapy, podiatry consultations, orthoptics (eye therapy), dietetics, home nursing, occupational therapy.	\$400	2 months
That's a total of \$5,150		in Extras per year

[^] NSW price (varies by state), includes discount of up to 4% for direct debit from cheque or savings account, Federal Government 30% Rebate on Private Health Insurance, an excess of \$500 per calendar year but excludes the Lifetime Health Cover Loading.



important information

Hospital Services

The hospital services shown are examples only and intended to be used as a guide. Please be aware that some procedures may not be covered. You should **always** check with nib before you go to hospital to find out if you are covered. In some cases there may also be some drugs and surgical items which your cover will not pay benefits for.

*Benefit Limitations apply if you currently do not have Private Health Insurance

If you are considering nib Young at Heart Mid Cover, please note:

During your first 24 months of cover (but after the standard hospital waiting periods have been served) the services marked with * are subject to 'Benefit Limitations'. This means that the benefits payable on these services are limited to Public Hospital Benefits only. For more information on Public Hospital Benefits see page 12.

Ambulance Cover

Benefits are only payable for ambulance services within Australia that are:

- ✓ Provided by a State or Territory Ambulance service; and
- ✓ Defined by the relevant service provider as **emergency** ambulance transport; or
- ✓ Where an ambulance is called to attend an emergency but on arrival is no longer required; or
- ✓ Defined by a treating doctor as medically necessary transport.

IMPORTANT: Ambulance cover is not included in health cover for Queensland or Tasmanian residents as ambulance services are provided by State Government Schemes. **Please call 13 14 63 should you require more information.**



More things you need to know about hospital cover



Depending on your cover, nib Young at Heart hospital cover will help pay for:

- your hospital bed
- meals
- nurses
- operating theatre fees
- intensive care
- doctors and specialist services (including tests)
- government approved surgically implanted prostheses (e.g. artificial hip)

The ins and outs of being a patient...

In general, health funds do not cover out-patient treatment unless specified on your level of cover and we have a specific agreement with the provider for a service. nib will not cover you where Medicare covers the fee or for emergency department fees.

nib hospital cover provides benefits when you are an “admitted patient”.

This includes admission for day and overnight. As treatment at an emergency department does not require an admission, charges and fees from emergency are not payable. other services note requiring admission include visits to your GP and specialists etc.

Hospital excess, and what it means

If you have an ‘excess’ on your hospital cover, this is the minimum amount you have to pay towards your hospital stay, each time you’re admitted. This can get pricey if you go to hospital regularly, or if the unexpected happens. So, we’ve ‘capped’ your hospital excess to a maximum amount per year (this varies depending on your health cover). The good news? The higher your excess, the cheaper your cover.

Waiting Periods. Good things come to those who wait.

Before you can start claiming for hospital services, you must be in your chosen cover for a set period of time (known as a waiting period). Customers can only claim benefits after they have served their waiting periods. This is necessary to keep health cover fair. Waiting periods protect existing customers who pay premiums to a fund over time, for when they might need health cover. If we didn’t have waiting periods, people might join a fund to claim for a planned item and then leave. If you’re an existing nib customer and change your cover or if you transfer from another fund, please be aware that waiting periods may apply for hospital services.

The hospital waiting periods for nib Young at Heart are:

Accidental injury	1 day
Ambulance services	1 day
Other hospital services Except those listed	2 months
Psychiatric care, rehabilitation or palliative care services (whether or not for a pre-existing condition)	2 months
Other pre-existing ailments/conditions An illness or condition where the symptoms were evident at any time during the 6 months immediately prior to joining nib.	12 months

Restrictions: Access not all areas

nib Young at Heart Mid Cover has certain hospital services listed as ‘restrictions’. This is when the amount of benefits we pay for the service is limited to Public Hospital Benefits. There are some procedures where nib will only pay minimal benefits. In these cases, nib will contribute a minimal amount to your accommodation fees, but will not contribute anything toward theatre or surgeon’s fees. An example of this is surgery performed by a podiatrist. This means you will be significantly out of pocket for these types of procedures. You should always check with nib before you undergo a procedure to check exactly what you’re covered for.



Everyday Extras

More things you need to know about hospital cover (cont.)

Some nib covers have Benefit Limitation Periods, which require a customer to be with nib for a period of 24 months before certain hospital services are included as part of their cover. This means there is a period of time where the benefits payable on some services are restricted to Public Hospital Benefits only.

Public Hospital Benefits

Public Hospital Benefits are the level of benefit which will cover you for a stay in a shared ward of a public hospital. These “minimum benefits” are set by the government and will not go anywhere near paying for the cost for a stay in a private room in a public hospital or a stay in a private hospital. You will pay large out-of-pocket expenses to cover the difference in costs.

What are out-of-pocket expenses?

Even with our highest level of hospital cover, you may still have to pay something for going to hospital. They’re known as “out-of-pocket expenses” because they come from your pocket. This is the difference between what nib pays and the total cost of your stay in hospital.

How nib can help you with out-of-pocket expenses

The total cost of your stay in hospital depends on your choice of hospital, your doctor and your specific procedure. If you contact nib before choosing a hospital, we can explain ways you can keep costs down and even avoid out of pocket expenses by:

- checking if you have the right level of cover
- helping you cap doctors costs with nib’s MediGap Scheme
- providing you with a network of nib Agreement Private Hospitals.

nib Agreement Private Hospitals

nib provide a network of private hospitals we have agreements with to protect you from paying out of pockets expenses when you receive your hospital bill – we call these nib Agreement Private Hospitals.

There is more information about hospital and Extras cover in the nib *Using your Health Cover* which is sent when you become a nib customer. The guide is also available at nib.com.au or you can pick up a copy at an nib Retail Centre.

Extras are one of the key benefits of joining nib Young at Heart, and they can help keep you healthy. Having Extras cover will help pay for the cost of things like dental, optical, physiotherapy and more. We want you to get the greatest value from your Extras, so here’s some more things you should know.

Waiting Periods.

Good things come to those who wait.

Before you can claim for your Extras, you must be in your chosen cover for a set period of time (known as a waiting period). Waiting periods are necessary to keep health cover fair. Waiting periods protect existing customers who pay premiums to a fund over time for when they might need health cover. If we didn’t have waiting periods, people might join a fund to claim for a planned item and then leave.

If you’ve only recently joined a health fund, or taken out Extras cover for the first time, or chosen a higher level of Extras cover, it’s pretty likely waiting periods will apply to some Extras services on your cover. Make sure you check the waiting periods on your cover, as you can’t claim until a waiting period’s over.

Take it to the limit

With Extras, we put an annual limit on how much we’ll pay and/or the number of times you can claim for Extras, over a certain period of time. Most limits are for the calendar year. At the beginning of each year, your benefit limits are renewed, and you can start to claim again. A higher level of cover gives you higher benefits to claim.

Lots of ways you can save



Save up to 4% using Direct Debit

Simply by setting up a direct debit when you join nib Young at Heart you can save up to 4% on your premiums. That's from any bank, building society or credit union cheque or savings account.

Save up to 40% with the Federal Government Rebate



The Federal Government offers a rebate to help you with your premiums. You just have to be an Australian resident who is eligible for Medicare and have private health cover. You can claim the rebate upfront to reduce your premiums, claim it with your tax return or get a payment from any Medicare office.

There are different levels of rebate, depending on the age of the oldest person on your nib policy.

Age of the oldest person on your policy	Federal Government Rebate
64 or under	30%
65 to 69	35%
70 or older	40%

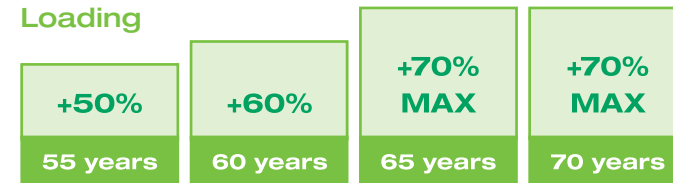
Avoid the Medicare Levy Surcharge

If you don't currently have an appropriate level of private hospital cover, and your taxable income is above the Medicare Levy Surcharge threshold, you may have to pay an additional 1% in tax. That's on top of the Medicare Levy we all pay. By joining nib Young at Heart you can avoid the Medicare Levy Surcharge.

About Lifetime Health Cover

Lifetime Health Cover (LHC) is a Federal Government initiative encouraging Australians to join private health cover earlier in life. If you do not have hospital cover on the 1st of July following your 31st birthday and then decide to take out hospital cover later in life, you will pay a 2% loading on top of your premium for every year you are aged over 30. The maximum loading is 70%. **Once you have paid an LHC loading on your private health insurance for 10 continuous years*, the loading is removed.**

Loading



Age at 1 July the year you joined first private hospital cover.



All nib hospital & combined covers meet LHC requirements, LHC does not apply to Extras cover. LHC does not apply to your health cover if you were born before 1 July 1934. Other exceptions also apply. *LHC allows for changes in your circumstances, and lets you drop your hospital cover for a cumulative total of 1094 days in your lifetime. After 1094 days absence from Hospital cover, a 2% loading will be added to your premiums for every 365 days you don't have hospital cover. If you suspend your cover, this period will not be deducted from the 1094 days.

How to join



Switch from another fund and enjoy continuity

Joining nib Young at Heart couldn't be easier. Plus when you join nib from another health fund you'll enjoy continuity of cover. You can start claiming immediately if:

- your new nib cover includes services currently available to you
- you've served all the required waiting periods with your current fund
- you haven't used all your annual benefits with your current fund.

If you have used any of your annual benefits with your current fund, nib will adjust your benefits accordingly. Your current health fund's accumulated benefits and loyalty bonuses are not transferable to nib.

To receive continuity just complete the Clearance/Cancellation Certificate Request and make sure you join nib within 59 days of cancelling your membership from another fund.

Check your Medicare card

nib policies are available to all people. If you have a Reciprocal Medicare card or do not have a Medicare Card you will not receive full hospital benefits from your nib health cover.

When you join nib please ensure your name is entered as it appears on your Medicare card. This helps avoid any problems with future claiming and applicable of your 30% rebate (if eligible).

It's easy to change from another nib cover

If you think nib Young at Heart is better suited to your needs then just call us on **13 14 63**. We'll take care of everything.

Looking for Standard Information?

nib is required by law to give you product information in a standard format – known as a Standard Information Statement. nib's Standard Information Statements are available from nib.com.au or call **13 14 63** or visit an nib Retail Centre.



nib dental care centres

News to put a smile on your face.

Get 100% of any cost back for dental check-ups*

It's easy to keep your smile in top shape. If you have nib Extras cover, you could be entitled to 100% of any cost back for dental check-ups* at nib Dental Care Centres. Each check-up includes an examination, scale, clean and fluoride treatment (worth over \$130). Limits apply so make sure you check your annual limits and service limits with nib on **13 14 63**.

Comprehensive dental care services

nib Dental Care Centres offer a full range of dental treatments at competitive prices. In addition to general dentistry for things like check-ups and fillings, other services such as cosmetic and restorative dentistry, surgical dentistry and orthodontics are also available. We also have emergency appointments for accidents and toothaches. You should always check with nib before you undergo a procedure to check exactly what you're covered for.

Call nib on **13 14 63**

Locations

If you live or work in or near Newcastle, Sydney, Wollongong or Melbourne you can visit an nib Dental Care Centre and save on dental treatments. For a list of locations visit nib.com.au or call **1300 345 300** for an appointment today.

nib Dental Care Centres welcome nib customers and the general public

Did you know that if you are an nib customer with Extras cover you can also access nib benefits on dental services at Pacific Smiles Dental Centres. For a list of locations visit pacificsmilesdental.com.au

*Refer to page 32 for terms and conditions.



nib eye care centres

Two great offers to choose from at nib Eye Care Centres

Get 100% back on complete glasses~

To help you see value from your nib Extras cover, nib has introduced a range of complete single vision prescription glasses where you can claim 100% back - that means no out of pocket expenses.

There are 3 ranges of complete single vision glasses in store where you can claim 100% back. The range you can choose from depends on your level of nib health cover. The higher the level of your cover, the wider the range of glasses you can choose from.

Or... get a 20% storewide discount†

If you are an nib policyholder with Extras cover, you are entitled to a 20% storewide discount† at any nib Eye Care Centre. The 20% discount is redeemable on all full-priced prescription glasses, contact lenses and sunglasses. That's just another way nib is helping you get value from your health cover.

nib Eye Care Centres offer bulk billed‡ eye tests by highly trained Optometrists. They also provide contact lens fitting appointments for those patients who prefer contact lenses to glasses.

You have perfect vision?

nib Eye Care Centres stock designer, sports and fashion sunglasses*. So why not come in and treat yourself to a new look.

Locations

If you live or work in or near Sydney or Newcastle, you can visit an nib Eye Care Centre and save. For a list of locations visit nib.com.au or call **1300 345 300** for an appointment today.

*~†‡ Refer to page 56 for terms and conditions.

*Prescription sunglasses are not covered by nib.



nib travel insurance

Ask for a
no obligation
quote today

Be a little bit green next time you travel.

As well as looking after your health cover needs, nib can also offer travel insurance to cover you while you're away.

nib Travel Insurance can provide you with cover for things like:

- ✓ 24/7 emergency assistance
- ✓ overseas medical and dental expenses
- ✓ some cancellation expenses
- ✓ additional travel and accommodation expenses
- ✓ travel delay expenses
- ✓ personal liability
- ✓ lost or stolen passports and travel documents.

You plan the trip, we'll plant the tree

When you take up any nib Travel Insurance plan, nib will pay for a tree to be planted through Greenfleet to help offset the carbon footprint of your travels.

Call **13 14 63** or visit **nib.com.au** for a no obligation quote today.

5% discount for nib customers.

Refer to page 32 for terms and conditions.

nib travel insurance



Important Information

Privacy Policy

nib is committed to protecting the privacy and security of the personal information we collect. nib has implemented measures to comply with its obligations under the Privacy Act 1988 (Cth). This section explains how nib may use personal information.

Why does nib collect my personal information?

We collect personal information primarily to enable us to provide health benefits and related services. nib may also use this information to promote or market its current and future health and related services for any other purpose permitted under the Privacy Act 1988 (Cth). If the information provided to us is not accurate or complete, we may not be able to provide an accurate quote, or provide benefits for the requested health or related services.

What personal information does nib keep?

The personal information nib holds will depend on whether you are a customer or a provider and which services you have used. Information may include:

- name, address, contact details, date of birth
- payment History
- current or past details of private health insurance including level of cover
- claim details
- Federal Government Rebate registration details
- Medicare number
- provider Registration details
- financial Institution account details

- pension / Health Care card numbers
- employment details
- pre-existing condition information

How does nib collect your personal information?

nib may collect personal information directly (in person, by phone, electronically or online) when:

- you apply to become a nib customer or registered provider
- you request information concerning nib's services
- a claim is lodged
- you participate in a health management program.

In addition to collecting personal information directly from you, nib may collect personal information from other nib companies or health service providers, private health insurers, government agencies (such as Medicare), private and public hospitals, doctors and medical specialists, state registration boards and professional associations. nib also collects information from other companies, such as market research companies, but only where you have provided your consent to the company to be contacted by third parties.

How does nib use personal information?

nib uses personal information in accordance with the National Privacy Principles. The information we collect is used to:

- provide benefits for health and related services
- determine eligibility to provide or receive a nib health or related service
- promote and market nib's current and future health and related services

- promote and market existing and future other co-branded products and services
- conduct research (including but not limited to customer surveys) concerning nib's current and future health and related services.

If nib uses personal information for direct marketing or research purposes it will do so in accordance with the Privacy Act 1988 (Cth) and any correspondence sent to you will give you the opportunity to “opt out” of receiving any further marketing or research correspondence.

Will my personal information be given to anyone else?

In providing nib's health and related services and using personal information in accordance with this Policy, nib may be required to disclose your personal information to:

- Other nib companies.
- Health service providers including private health insurers, government agencies, private and public hospitals, doctors and medical specialists, state registration boards and professional associations.
- nib's contractors and service providers performing services including (but not limited to) marketing, market research, mail-house services, and product development services.
- nib's existing and future strategic partners in respect of co-branded products and services.

nib may also be required to disclose your personal information to other individuals on your nib policy, or to individuals to whom you have granted authority to act on your behalf. At the time of joining nib, the person

applying for the nib policy authorises nib to share information with other individuals on the policy. This means we may make the policyholder aware of, for example, the details of all benefits and services claimed on the policy.

nib will not disclose your personal information to anyone, other than as above, unless:

- you authorise nib to do so
- your safety or the safety of others in the community is at risk, or
- nib is required or permitted by law.

How do I obtain access to my personal information?

You have a right to access your personal information. nib generally makes this information available in standard formats, such as your claims or contributions statements. You can also access your personal information via nib's secure online services.

If you're a policyholder you can request details of your personal information by contacting **13 14 63**, visiting a Retail Centre or by emailing us.

If you're a provider you can request details of personal information by contacting the Provider Hotline **1800 175 377**, or by email **providers@nib.com.au**

Is my personal information accurate? Can it be corrected?

The accuracy of your personal information is important to us. nib will take reasonable steps to ensure your personal information is accurate, complete and up to date, but we rely on you to advise us of any changes to your contact details and any other personal information. If you believe that any

personal information nib holds about you is not accurate, complete or up to date, please contact us immediately.

Is my personal information secure?

nib takes all reasonable steps to ensure your personal information is kept secure. nib only permits its authorised personnel to access your personal information, and information will only be disclosed to third parties where they have the appropriate authority.

Need more information?

For further information regarding this Privacy Policy or to raise any issues or concerns about the steps nib has taken to protect your personal information or privacy, please contact nib's Privacy Officer by calling **13 14 63** or email **PrivacyOfficer@nib.com.au**

Changes to this privacy policy nib reserves the right to change this Privacy Policy from time to time. This Privacy Policy was last updated August 2010.



The A to Z glossary

Accident and the 7 day rule Accident means an event leading to bodily injury caused solely and directly by violent, accidental, external and visible means and resulting solely, directly and independently of any other cause, unless otherwise defined in your cover. nib's accident cover is intended to cover the result of an accident. If you're in an accident, you and the attending doctor in hospital must complete an Accident Form (available from nib). For customers with Basic Saver, Family Basic Saver, Basic Plus, Family Plus, Mid Plus, Hospital Plus, Top Cover, Premier Plus, Young at Heart Mid, Young at Heart Top: o ensure that you are covered for the immediate necessary treatment required as a result of an accident, you'll be covered as long as you have documented proof that you have sought treatment at a hospital emergency department within 24 hours of the accident. If you need further treatment in hospital as an inpatient, you need to be re admitted to a hospital within 7 days of your initial visit. This could mean being admitted as an inpatient or sent home to be admitted later (for example, you may be sent home with bandaging or a half-plastered limb so that swelling can reduce before a full plaster cast is applied to the injured limb). Any additional other hospital treatment that takes place within 7 days after being discharged from the hospital will also be covered. After this 7 day period any additional hospital treatment will be paid as per the level of benefits on your cover, for example, some benefits may be excluded or restricted.

Benefit Limitation Periods The period of time during which an nib customer is entitled to restricted benefits for a particular condition or treatment

Medicare Benefits Schedule (MBS) The schedule set by the Commonwealth Government for the purpose of paying Medicare Benefits.

Home Nursing Services Provided by a registered general trained nurse in private practice for the treatment of illness, disease, incapacity or disability when the patient is totally dependant on nursing care. Does not include services such as a nurse-housekeeper during recovery after illness.

Gap The 'gap' occurs when doctors and specialists charge more than the MBS, leaving you with an out of pocket expense. If your doctor/specialist does not use

the nib MediGap Scheme, you will have to pay the amount by which your doctor's charges exceed the schedule fee (called the 'gap'). You can avoid paying a gap if your doctor agrees to treat you as an nib MediGap patient.

Pharmaceutical Benefits Scheme (PBS) Many medicines cost much more than the price you pay – but the Federal Government pays most of it for you. The Government does this through the PBS, nib does not pay for medicines on the PBS. It's available to Australian residents and eligible visitors from countries with reciprocal arrangements with Australia. For more information about the PBS visit health.gov.au

Pharmaceutical Prescriptions (relating to nib Extras benefits) nib will pay a Pharmaceutical Prescriptions benefit once the maximum PBS charge has been deducted and when the drug is: Dispensed by a registered pharmacy in private practice or a doctor • only available on prescription • listed on the Australian Register of Therapeutic Goods (ARTG), and • published within the MIMS Schedule as S4 or S8, and • not listed in the Schedule of Pharmaceutical Benefits Scheme (PBS). The amount customers will be paid will depend on their cover. For compound drugs, all components must be non-PBS and listed on the ARTG and published within the MIMS Schedule as S4 or S8 OR the Poisons Schedule. A pharmaceutical Prescriptions benefit will not be paid if the drug is • a prescription dispensed to hospital inpatients • listed as a contraceptive, or • available over the counter, even when prescribed.

Pharmaceutical Benefits Scheme (PBS) charge This is the maximum amount set by the Federal Government that a consumer pays towards the cost of a PBS drug. The PBS charge is reviewed annually by the Government.

Prostheses A prosthesis is a surgically implanted item like an artificial knee or hip joint. Some government approved, surgically implanted prosthetic items are on a 'no gap' list, while others are not fully covered and you may have an out of pocket expense. nib recommends you contact your hospital or doctor to discuss your options prior to seeking any treatment involving a prosthesis.

nib Eye Care page 20

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nib Dental Care page 18

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nib Travel Insurance page 22

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