

# 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.  
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 net of any social security refund and include GST charged by providers of service.

## HOSPITAL SELECT SURGICAL 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	Per Admn	Per Year
<ul style="list-style-type: none"> <li>• Surgeon's fee</li> <li>• Anaesthetist's fee</li> <li>• Hospital fees, in a Licensed Private Hospital or Private Facility approved by UniMed for:-</li> <li>• Accommodation</li> <li>• Theatre fees and Anaesthetic Supplies</li> <li>• Perfusionist</li> <li>• Intensive Care and special In-Hospital Nursing</li> <li>• Recovery Nurse</li> <li>• X-Ray examination, ECG</li> <li>• Intravenous Fluids, Irrigating Solutions, Dressings, Prescriptions and Antibiotics</li> <li>• Post Operative Physiotherapy fees from a Registered Physiotherapist</li> <li>• Emergency Ambulance for hospital admission</li> <li>• Surgically Implanted Prostheses</li> <li>• Laparoscopic Disposables</li> </ul>	300,000.00	300,000.00

#### Post-operative Occupational Therapy

Treatment by a Registered Occupational Therapist.	Per Visit 100.00	3 Visits per surgical admission
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#### Surgical Tests & Investigations

Gastrosocopy	Per Admn 1,800.00	Per Year No Max
Colonoscopy	2,500.00	No Max

#### Surveillance Colonoscopy or Gastrosocopy

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

	Per Admn	Per 24 Months
Gastrosocopy	900.00	900.00
Colonoscopy	1,250.00	1,250.00

#### In-Patient Non-PHARMAC Subsidised Pharmaceuticals

Pharmaceuticals prescribed by a Consulting Physician, Paediatrician or Specialist Registered Medical Practitioner which have been approved by Medsafe and are not fully or partly subsidised by PHARMAC through the New Zealand Pharmaceutical Schedule.		Per Year 2,000.00
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<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.	} 300,000.00	300,000.00
Wisdom tooth extraction including the removal of un-erupted or impacted wisdom teeth, including all associated costs.		
<b>Breast Reconstruction</b>		
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. 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 01 May 2005 and no benefit will be paid under this section unless UniMed has paid for the initial mastectomy.		
<b>Angiography</b>		
Angiograms & Angioplasty including hospitalisation, specialist & ancillary fees	300,000.00	300,000.00
<b>Lithotripsy</b>		
Performed by a Registered Medical Specialist Special conditions apply, refer to full conditions of membership.	300,000.00	300,000.00
<b>Accident Surgery</b>		
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. No cover is provided for workplace/employment related injuries/conditions first occurring on or after 1 July 1999.		
<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.		8,000.00
<b>Overseas Treatment</b>		
Benefits apply after five years' continuous membership in this plan. A grant is payable of 75% of usual and customary charge for the identical procedure in New Zealand. 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. Prior approval is required for the treatment to be eligible.		
<b>Sterilisation</b>	Per Admn	Per Year
Sterilisation procedures are covered after three years continuous membership in this plan	5,000.00	5,000.00
<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	150.00	6,000.00
<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).	80.00	400.00
<b>Ambulance</b>		Per Year
Emergency transportation for Public Hospital inpatient admission		200.00
<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:	150.00	600.00
<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)	125.00	1500.00
<b>IMAGING</b>		Per Year
• CT Scan		3,000.00
• MRI Scan		4,000.00
• PET Scan		2,500.00
• Cardioversion		300,000.00
• Myocardial Perfusion Scan		300,000.00
• Scintigraphy		2,000.00
<b>IMAGING (six months prior and six months after surgery)</b>		Per Year
• X-rays	} 300,000.00	
• Mammography		
• Ultrasounds		
• Nuclear Scanning		

<b>SPECIALISTS (six months prior and six months after surgery)</b>		Per Year
<b>Consulting Physician/Paediatrician</b>		
Consultation following referral from a Registered Medical Practitioner		
<b>Specialist Oncologist</b>		
Consultation following referral from a Registered Medical Practitioner with an Oncologist who is a Specialist Registered Medical Practitioner		
<b>Specialist/Surgeon</b>		
Consultation following referral from a Registered Medical Practitioner		
<b>Oral Surgeon</b>		
Consultation (not treatment) by a Registered Oral Surgeon		
<b>Medical Hospitalisation</b>		Per Year
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.		65,000.00
Ancillary hospital charges		500.00
<b>Radiation Oncology</b>		
Limited to Planning, Shielding and Accessories, Field Setup and XRT Simulation and performed in an approved Private Hospital facility.		30,000.00
<b>Chemotherapy</b>		Per Treatment
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.		30,000.00
		65,000.00
<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		5,000.00
<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		2,000.00
Ancillary hospital charges		500.00
<b>MINOR SURGERY</b>		
<b>Registered Medical Specialist</b>		Per Year
Not requiring general anaesthetic, including preceding consultation and performed in specialist rooms		300,000.00
<b>Registered Medical Practitioner</b>		Per Procedure
Not requiring general anaesthetic, including preceding consultation performed in practice rooms		500.00
		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		2,000.00
		2,000.00
<b>OVERSEAS TREATMENT</b>		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		20,000.00
<b>WAIVER OF PREMIUM</b>		
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.		
<b>FUNERAL GRANT</b>		
Upon death by natural causes prior to age 65 of any person on the policy a grant towards funeral costs is available.		2,400.00
<b>"ACC" TOP UP BENEFIT</b>		
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 within this option. 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**



## 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)