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# What you're covered for and how it works – *explained*

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Health cover  
for transport  
& electricity  
industry *people.*



**rt health**  
FUND

# Surely they don't expect me to read this whole thing, *do they?*

Would you be surprised to know that a large number of people who pick up a health fund brochure never get around to reading it, let alone actually joining the fund? Apparently it has something to do with it all being so mind-boggling. True.

If you're feeling stumped, you're in good company, so bear with it a little. **Health insurance is complicated, but it's also important, and never more so than the day you need to use it.** We want to help make sure that when that day comes you aren't one of those people who thought about it, but never got around to it ... and now really regret it.

Whether you choose to read a little, just look at the pictures or make a cup of tea and enjoy a cover-to-cover read, whenever you have a question, let us help. Don't give up on it just because it seems complex. **The benefits of having private health cover could quite literally save your life.** Surely that's worth spending a bit of time on.

Here's what we're going to cover in this brochure. If you're new to private health insurance, you might want to start at the beginning, but if you're pretty familiar, you might jump straight to our cover choices to see what we have on offer.

- **Are you convinced you need private health insurance?**
- **5 great reasons to choose rt health fund**
- **Ok, so how does it all work?**
- **Government programs you should know a little about**
- **Things you'll be interested in if you're thinking of switching from another health fund**
- **Making your health cover choice**

*We'd love to welcome you and your family* on board as new members of rt health fund and we'll make it as simple as we can for you. Our team does this all day, every day. They're experts in how it all works and they have absolutely nothing else to do other than wait for your calls and questions, so feel free to keep them as busy as you can.

*Can we help you?*  
Call 1300 886 123 or email  
[help@rthealthfund.com.au](mailto:help@rthealthfund.com.au)

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This is Dorothy,  
she's one  
of our team on  
the phones.



# Are you *convinced* you need private health insurance?

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People fall into one of three camps when it comes to private health insurance: 1) wouldn't be caught without it 2) can't see the point of it, and 3) kinda think it seems like a good thing to have, but not completely convinced.

The reason we can be comfortable not having private health insurance in Australia is because we have a very good public health system, and as Australian residents we all get to use as much of it as we need, basically for free.

**Under Medicare, you can be treated in a public hospital by hospital-appointed doctors for free. It's very, very good. But it does have its limitations.**

*The top ten reasons people choose to have private health insurance.*

## These are the top ten reasons why people choose to have private health insurance.

If any of these mean a lot to you, it might be time you joined us.

### #1 Security

Like other types of insurance, **health insurance gives you peace of mind.** If the unexpected happens, you're covered. You have choices, options, control. If you sleep better at night knowing you've taken care of 'just in case', then this is for you.

### #3 Choice

It's funny, a lot of people wouldn't dream of taking their car to any old mechanic, or even going to a hairdresser they don't know – and yet they'd accept any doctor that's appointed to them as a public patient. **If you're a bit fussy about who you'd want operating on you, private health insurance gives you the ability to make that choice.**

### #2 Access

While we may be entitled to go to a public hospital under Medicare, what we can't control is the timing. **As a privately insured patient you get into hospital faster.** The latest research shows that public patients wait an average of 103 days for admission to hospital; privately insured people are admitted within the month\*. If you want some control over how long you'll be waiting if you need to go to hospital, then this is for you.

### #4 Facilities

Have you ever visited someone in a public hospital? You're sitting in a room full of strangers, all with their own serious health issues and only a thin blue curtain giving you any privacy. Being in hospital can be distressing enough without the added pressure of having to share your bed space with people you don't know – and all their visitors – while you're trying to recuperate. **If you'd prefer the privacy of your own room, private hospital cover can give you that option.**

\* Health Care & Insurance, 2009, Ipsos Australia.



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## #5 Tax

Cold hard cash. If you earn over a certain amount each year, and you don't have private hospital cover, you have to pay more tax. If you want to avoid paying more tax – take out hospital cover. Read more about it on page 10.

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## #6 Lifetime Health Cover

A lot of young people say they plan to take out hospital cover when they're older, and more likely to need it. There are two problems with this, 1) it's not just older people that get unexpectedly sick, or have an injury that requires hospital treatment, and 2) if you don't have private hospital cover by the 30th of June following your 31st birthday, you'll get stuck with a loading that you'll have to pay for the next ten years. If you want to lock in the best price you can for hospital cover, join when you're younger and you'll be paying less for it when you're older. Read more about it on page 11.

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## #7 Reality

Some people say they prefer to self-insure by putting money aside for health expenses, and that sounds like a pretty good plan. The problem is, people generally have no idea what the costs of hospital procedures are. For example, did you know a caesarean birth in a private hospital would set you back \$12-15,000; or that a knee operation averages around \$25,000? When you get to the really big procedures, like heart bypass operations, you're getting close to the \$70,000 mark. Our single largest claim in the past year was \$250,000. Can you really afford to self-insure?

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## #8 Extras

Apart from a very small number of services, there is no Medicare or other coverage for things like dental, optical, physio, chiro, podiatry, pharmaceuticals and the dozens of other things you're covered for with extras. If you'd like some assistance with those types of healthcare costs, private health cover is the only way to go.

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## #9 Lifestyle

While there are a lot of services around to help people when they're unwell, there's not much out there designed to help us live a healthy lifestyle. With extras cover, you're supported with great rebates on a big range of preventative and natural therapies, to help you take good care of your health. If you'd like a bit of help paying for things like massage, acupuncture, naturopathy, exercise physiology and many, many more treatment types designed to keep you in good health, this is for you.

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## #10 Control

Here's the bottom line. With private health insurance you have options that give you control over what's happening to you. Even if you think the public health system is great, and will suit you perfectly, private health cover is an ace in your pocket. If you choose to go public but you aren't happy with the hospital, with the doctor, with the length of time you'll have to wait – you've always got your health cover to call on. If you like the idea of being in control when it comes to your health, this is for you.



# 5 reasons to choose rt health fund

There are a lot of health funds to choose from, so why join rt?  
We reckon these are five pretty good reasons.

#1

## We're the health fund for transport and electricity industry people

– you may not have even realised that there is an industry fund for transport and electricity people. Like a lot of smaller, industry-based health funds, we're a pretty well-kept secret and rely a lot on word-of-mouth and member referrals. You won't see us on tv or read about us in the paper, **you have to be in the industry, or have a family member who is, to be eligible to join.**

#2

## We've been doing this since 1889

– we were **founded at the Eveleigh Locomotive Workshops in Sydney by a group of rail and tramway workers more than 120 years ago**, and went on to become the first registered health fund in Australia. It's a history of which we are incredibly proud.

#3

## We're a mutual, not-for-profit fund

– being a mutual means we are owned by our members, and being not-for-profit means we are all about value for our members. **There are no corporate profits or shareholder dividends driving our business** – just the single-minded goal of delivering value and service to our members.

#4

## We have a simple range of great value health covers, which for the past three years have been named among the best in the country by the Australian Financial Review's *Smart Investor* magazine (2008, 2009, 2010)

– keeping it simple is a big part of what we do, no tricky fine print, no insurance double-talk. **Simple and straightforward is what we aim for.** And we stick to our knitting – we're a health insurance fund, and we focus on being great at that rather than getting distracted by all kinds of unrelated add-ons and extra services.

#5

## We're here to help

– we have no reason for being other than to provide **great value health cover and amazing service to our members. It's all that we do.** Our members tell us we do it pretty well through our annual member feedback survey, but we also listen hard and take action when they tell us there are things we need to improve, too.

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# Ok, so how does it all *work*?

When you join rt, you can take hospital cover, extras cover, or both. A majority of people choose to take both. Here's what they cover you for.

## Hospital cover

When you go to hospital there are **four different types of fees you can be charged**. Here's what they are and how we cover them:

### #1 Hospital fees

When you go to hospital, **you are charged for the use of the hospital's facilities. We cover you (in most cases) for 100% of the hospital's costs** (your accommodation, meals, the use of the operating theatre and other specialised wards, medical machinery and technology, and so on).

### #2 Doctors' fees

The doctors who treat you in hospital **will each bill you for their services**, and here's where it can get complicated. Every type of treatment you could possibly imagine has what's called an 'item number' associated with it. The government has specified what it thinks is an appropriate fee for each item in a huge list called the Medicare Benefits Schedule (MBS) of fees. **Medicare covers 75% of the MBS fee for each 'item' and your hospital cover is only allowed to pay the remaining 25%**. But doctors are not limited to only charging the MBS fee, they can charge any amount they want – and that's why people can have out-of-pocket costs, even with top hospital cover. It's not that the health fund is being stingy, it's because the law prevents funds from paying more than 25% of the MBS fee.

There's one exception to this, and that's **where your doctors agree to a different plan before you go into hospital**. Under a special program called Access Gap Cover (which you can use as part of any rt hospital cover), you can ask your doctors to charge a set fee (based on a different fee schedule), which is more than the MBS fee but probably not as much as they might otherwise charge, and if the doctor agrees, you can lock in that set amount. By doing this you can either reduce or completely eliminate your out-of-pocket costs. This is confusing territory, so if you want to know more, please call us to talk about how it works.

### #3 Prostheses and pharmaceuticals

This includes any medical devices that you might have implanted in hospital, such as a cardiac defibrillator, artificial hip, knee and the like, plus, the medication you're given in relation to your treatment in hospital. In most ordinary cases, these things are all fully covered.

### #4 Ambulance service

You're also covered for emergency ambulance attendance and transport. **This includes when you call an ambulance and they take care of you on-site, without transporting you to hospital, as well as when you are taken to hospital in an emergency situation**. If you don't plan on having hospital cover, you can get separate ambulance cover.



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## Extras cover

This is intended to assist with the costs of health services **that aren't provided by a doctor in hospital – that's your dental, optical, physio, chiro, podiatry, speech therapy, audiology, natural therapies, artificial health aids, vaccines, pharmaceuticals and so on**. It's not intended to give you a 100% rebate, but to help you with these costs by paying a benefit back each time you have a consultation or purchase certain items. The amount you'll get back is specified in advance, so it's pretty easy to know what you can expect each time you make a claim.

### Here are a few other things you should know:

- Everyone pays the same price as everyone else. Regardless of how old you are, how healthy you are, or anything else to do with your background or personal circumstances, we all pay the same base rate for our health cover (some people have a Lifetime Health Cover Loading, read more about that over the page).
- Health funds offer guaranteed renewability, what that means is once you're a member you don't need to re-apply or be re-accepted. Once you're in, you're in.
- With rt health fund, once you're a member you can remain a member for life, even if you lose your links with the transport and electricity industries.

# Government programs you should know a *little* about

Healthcare is an expensive business, and to help pay for it the government tries to encourage people to have at least some form of private health insurance through **three key programs**. It's worthwhile having at least a basic understanding of how these work. **One will save you money, and two could cost you money** – three good reasons to spend a few minutes reading up about them.

## *The 30% rebate. This is the good news.*

Because the government believes that private health insurance is so good for you, it's prepared to pick up some of the tab!

- If you are under 65, the government will pay 30% of the cost of your health cover.
- If you are between 65 and 69, it'll pay 35%.
- And if you are over 70, it'll pay 40%.

**Everyone who is a Medicare cardholder and a member of a registered private health fund in Australia receives the rebate**, no matter how much they earn or what type of cover they have (hospital, extras or ambulance). The best part about it is that you can receive the rebate immediately as a reduction in the amount you pay. So, you only ever have to pay 70% of the cost of your cover. You don't have to do anything to receive the rebate, we'll ask you for all the information we need when you join.

## *The Medicare Levy Surcharge*

Most of us pay a Medicare Levy through our income tax, it's 1.5% and it's automatically deducted from our pay packets. It helps to fund the public health system. People who earn over certain amounts, and who don't have private hospital cover (extras cover doesn't count) have to pay an additional 1%, which is called the Medicare Levy Surcharge. Currently, if you earn more than \$77,000 as a single person or over \$154,000 as a couple or family, and you don't have private hospital cover, you'll probably have to pay the surcharge. There are some special conditions that apply, including whether you have kids and how many you have, which can change the income thresholds.

## *Lifetime Health Cover*

Lifetime Health Cover is designed to encourage people to take out private hospital cover early in life and to keep it. Basically, if you join private hospital cover by the 30th of June following your 31st birthday, then you pay the 'base rate' that the health fund you join offers. For every year you are over 31 when you join, you add a 2% loading to the base rate. The loading only applies to hospital cover, not extras or ambulance cover. If you do get stuck with a loading, it'll be yours for the next ten years. After ten continuous years of cover, you are rewarded by having the loading removed.

This is summary information only. If you have specific questions about any of these programs, please give us a call. You can also read much more on the Department of Health and Ageing website, [www.health.gov.au](http://www.health.gov.au) or the Australian Tax Office website, [www.ato.gov.au](http://www.ato.gov.au).



# Are you already with *another* health fund?

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Does your fund offer a discount when you have hospital and extras cover together? We do, **rt members save around 5%** when they take either our Private Hospital or Basic Hospital Cover with Extras.

Does your hospital cover give you access to a 'gap' cover scheme? All of ours do. With any rt hospital cover **you can call on Access Gap Cover to help you reduce or eliminate your out-of-pocket costs for doctors' fees.**

Does your hospital cover give you a range of added benefits, designed to help you manage your health and give you more options when it comes to choosing the best type of care? Ours do. **We offer three programs: hospital substitution, for home-based care options; chronic disease management to help prevent or manage chronic health conditions; and pregnancy support for expectant parents.** All at no extra cost.

Does your top hospital cover have a range of things it excludes, or restricted benefits? Ours doesn't. Whether you take our Private Hospital Cover with or without a \$250 excess, **you get the same top-level cover – no exclusions, no restrictions, no exceptions.**

If health insurance isn't new to you, but you're looking for something different from your current fund, here are some quick questions that'll help you give your health cover a health check.

Does your fund charge an excess on day surgery? Our top cover doesn't. If you choose the **optional \$250 excess** with our Private Hospital Cover, you pay it once per year for a single, twice per year for a couple or family, **and not at all for day surgery or if the person going to hospital is under the age of 16.**

Have you hit the annual limits on a lot of your extras benefits? **We offer very generous annual limits on all our extras benefits,** especially when it comes to things like optical and orthodontic, plus we give you additional optical benefits when you've had rt extras cover for 5+ years.

*You don't lose any time 'built up'* with your current fund when you switch. In Australia, health fund members are protected by legislation when it comes to changing health funds. Provided you join us within two months of leaving your current fund, you can bring all the waiting periods you've already served with you. So you won't skip a beat.



# Making your health cover *choice*

There are a number of things to bear in mind when choosing the right health cover for you and your family.

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## Who do you want to cover?

### Just you (girls)

One of the main differences between health cover choices for men and women is the question of whether you want to be covered for pregnancy. While it might not be a top priority right now, it's never a bad idea to think about whether you might want to be covered sometime in the future.

With Private Hospital Cover, you're covered for pregnancy in the hospital of your choice with the doctor of your choice. If you start with a lower level of hospital cover you can always upgrade, but remember, a 12-month waiting period will apply from the time you upgrade, so you won't be covered for pregnancy immediately.



## Singles



### Just you (guys)

Key things for you to think about include your age, how healthy you are, whether you have any specific health concerns or family history, and if you want cover for things like physio, optical, dental, massage, vaccines and so on.

If you're a younger guy, or someone who's a bit older but still ten-foot tall and bulletproof, you might be interested in our Fit & Healthy Cover. This is a great 'entry level' cover and we keep the price down for you by excluding some things you might not need.



Think of these as 'conversation starters' to help you make the right choice, or to help our team help you.

## Couples

### Both of you (opposite sex or same sex)

Take a look at all of the considerations for singles on the previous page, because they're probably relevant for you, too.

If you're planning a family, choosing a cover that includes pregnancy means you can easily transfer to a family membership that will cover any new arrivals at no extra cost ... no matter how many you add to your brood!



### All of you (two adults and any number of kids)

Most families know all too well about the costs associated with dentist appointments, braces, glasses, prescriptions, a trip to the hospital every now and then – and the occasional remedial massage to iron out all the kinks. If you're considering anything less than our Private Hospital + Extras, be careful to note the exclusions and lower benefits that apply to other covers before making your final choice.

## Families

### You and the kids (one adult and any number of kids)

All of the above applies to you, too. The difference is that our Private and Basic Hospital Covers offer a price break to sole-parent families, whether the kids live with you full-time or not. Since there's only one adult, it's a little less expensive than a family cover for two adults. Not many health funds offer a special category of cover for sole-parent families, but we're all about real-life health cover to suit real-life families.



### Cover for an additional contribution that's only a fraction of what they'd pay for their own individual health cover

(not available with Basic or Fit & Healthy Hospital Covers).

Once they're 25, it's time for the kids to get their own cover. Thanks to your rt membership, they'll not only be automatically eligible to join, but if they transfer to their own membership within two months of leaving yours they can join with no waiting periods to serve.

### Health cover for your kids

Your children are covered by your family or sole-parent family membership until their 21st birthday. After that, there are a couple of options for you to keep them covered up to their 25th birthday, provided they are not married or living in a de facto relationship:

- #1 **If they are studying full-time they can remain on your membership at no additional cost.**
- #2 **If they are working, they can remain covered if you have our Private Hospital**

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### What do you want to be covered for?

Which one of these sounds like you?	Our best pick
Want to make sure you have all your bases covered, no matter what comes your way, including cover for all the biggies: pregnancy, cardiothoracic procedures, joint replacements and reconstructions, plus your choice of either a public or private hospital and the doctor you want?	<b>Private Hospital Cover</b> with or without a \$250 excess.
Looking for all this, but there's no private hospital in your area?	<b>Basic Hospital Cover</b> gives you everything our Private Hospital Cover does, but only when you are treated in a public hospital.
Looking for generous rebates to help you pay for things like prescription glasses and contact lenses, dental and orthodontic, physio, chiro, podiatry, alternative therapies, pharmaceuticals, vaccines, health aids and much more?	<b>Extras Cover</b> offers very generous benefits on a huge range of treatments, services and products to help you look after your health and wellbeing.  Take Extras with either Private or Basic Hospital Cover and save around 5%.  Take Extras without hospital cover, and you have a couple of restrictions on the benefits you can claim.
Looking for a great but 'lite' health cover package?	<b>Fit &amp; Healthy</b> is a combined hospital and extras cover. It doesn't cover you for some things, like pregnancy and joint replacements; and it pays for some things in a private hospital and some in a public hospital. Plus, it offers a good package of extras. It's a good cover for young, fit and healthy people, but make sure you fully understand the limitations.
Interested in making sure you don't have to pay the Medicare Levy Surcharge or get stuck with a Lifetime Health Cover Loading?	Any of our hospital cover options will get you off the hook as far as both these things are concerned.

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# Choosing a *hospital* cover

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## **How do I know what I'm covered for?**

It's easier than it seems. First, you must be admitted to a hospital or day surgery as an inpatient before you can use your hospital cover. Second, if Medicare pays a benefit for the treatment, service or procedure, then you're eligible to be covered for it. Third, check the type of cover available – some cover you in a private hospital, some in a public hospital, and some have restrictions or exclusions. We recommend you talk to us about your needs before you make your cover choice.

## **Our hospital covers can even help keep you out of hospital.**

Our hospital at home program can help you to get home from hospital faster, or avoid a hospitalisation altogether, by providing you with hospital-equivalent treatment and follow-up care in your own home. The program is available for all kinds of treatments and post-procedure support.

## **If it is possible to provide the treatments you need in your home, and if you, your doctor and the hospital agree that it is appropriate for you, then we can help.**

The objective is to bring the hospital to you, so you can concentrate on your recovery. Hospital at home is available with all rt hospital covers.

## **If I switch to rt will I lose the time I've built up with my current health fund?**

When you transfer from another health fund, **we recognise all waiting periods you've already served on equivalent or higher levels of cover, provided you join rt within two months of leaving your previous fund. Waiting periods will only apply if your rt cover is a higher level than the one you had with your previous fund.** In this case, you'll be covered to the same level as your previous cover, until you've served the waiting period for higher benefits. Moving from a cover with a higher excess to a lower excess (for example, a \$500 excess to a \$250 excess) counts as an upgrade in your cover. In this case, you may also have to pay your previous higher level of excess while serving waiting periods for the higher level of cover.

## **Is more information available?**

This is summary information only. Our detailed cover guides list everything you're covered for. Visit [www.rthealthfund.com.au](http://www.rthealthfund.com.au) or give our team a call and we'll email or post one to you.

Type of cover	Private Hospital Cover	Basic Hospital Cover	Fit & Healthy Hospital Cover
	Our top level of cover in a private or public hospital.	The same as our top level of cover but only applies in public hospitals.	Good hospital cover with some restrictions and exclusions, part of a combined hospital and extras cover.
Excess	Take this with or without an excess. The excess is not payable on day surgery or for children under the age of 16. \$250 for single membership – payable once in any 12-month period. \$250 for couple, family or sole-parent family membership – payable twice in any 12-month period.	No excess available.	Automatic excess on hospital cover keeps the price down. Excess is not payable for children under the age of 16. \$250 for single membership – payable twice in any 12-month period. \$250 for couple, family or sole-parent family membership – payable four times in any 12-month period (maximum of twice if it is for the same person).
Exclusions	No exclusions. If Medicare pays a benefit on the treatment, service or procedure you're having, then it's covered by your Private Hospital Cover.	No exclusions. If Medicare pays a benefit on the treatment, service or procedure you're having, then it's covered by your Basic Hospital Cover. You are only fully covered for treatment in a public hospital. Admission to a private hospital will leave you with substantial out-of-pocket costs. This cover does not enable you to bypass public hospital waiting lists. Your treatment will be subject to the individual hospital's bed availability.	Obstetric procedures; IVF, GIFT and other artificial fertilisation/insemination procedures; sterilisation and reversal of sterilisation procedures; joint replacement procedures and their revisions; major eye surgery (glaucoma, cataracts, cornea and sclera transplants); any elective cosmetic surgery.
Restrictions	No restrictions.	No restrictions.	Psychiatric treatment, cardiothoracic procedures, rehabilitation, plastic and reconstructive surgery.
Waiting periods – accidents	1 day	1 day	1 day
– general services	2 months	2 months	2 months
– pre-existing conditions	12 months	12 months	12 months
– obstetrics/pregnancy-related services	12 months	12 months	Not covered
Benefit limitation period	Default benefits apply during the benefit limitation period. This is not applicable if you're transferring to it from an equivalent or higher level of cover with another health fund, and have already served waiting periods.		
– elective surgery	12 months	12 months	12 months
– wisdom tooth extraction	12 months	12 months	12 months
Additional benefits available at no extra cost	Emergency ambulance attendance and transportation (see page 24 for more information). Access Gap Cover – helps reduce your medical out-of-pocket costs (see page 8 for more information).		Ask us for more information about enrolling in these programs.
	Hospital at home – offers an alternative to a hospital admission or enables you to leave hospital early and receive treatment in your own home.		
	Health4life – helps people self-manage existing or potential chronic diseases (including asthma, diabetes, arthritis, heart disease and others). Pregnancy, birth + beyond – provides support from the time of conception until baby's first birthday, includes unlimited telephone and email access to midwives, pregnancy website and a gift on the birth of your baby (only available with Private Hospital Cover).		



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# Choosing a general *treatment* cover

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You probably know this as ‘extras’ or ‘ancillary’ cover, these days the health insurance industry calls it general treatment cover. **It’s cover for the types of healthcare services that you might want to have outside of hospital.** It includes things like dental, optical, physio, podiatry, prescriptions, vaccines, massage and a huge range of other things that aren’t covered by Medicare.

## How do I know what I’m covered for?

Extras cover is designed to help you pay for a huge range of health and wellbeing products, services and treatments. It’s not like hospital cover that offers 100% back, **think of it like a subsidy to help you out each time you make a claim.** There are a few things you need to know about what you can claim, and how it works.

- Each category of benefit has an annual limit, which is the maximum amount you can claim for that particular thing within a calendar year, and a ‘per service’ limit, which is the maximum amount you can get back each time you make a claim.
- Annual benefits work on a calendar year basis. **At 31 December each year they are all reset to zero, and you start again with a full set of benefits on 1 January.**
- You’re only covered for transactions that take place in Australia, so for example, if you order a pair of prescription glasses from a company online, and the transaction takes place overseas, it’s not covered, nor are any consultations you have overseas.

- You’re only covered for services provided to you by registered providers. This helps you to know that the practitioners you’re seeing are appropriately qualified. If they’re not registered with us, we don’t pay benefits on their services. The easy way to find out if they’re registered is to ask them, or us.

## If I switch to rt will I lose the time I’ve built up with my current health fund?

When you transfer from another health fund, we recognise all waiting periods you’ve already served on equivalent or higher levels of cover, provided you join rt within two months of leaving your previous fund. Waiting periods will only apply if your rt cover is a higher level than the one you had with your previous fund. In this case, you’ll be covered to the same level as your previous cover, until you’ve served the waiting period for higher benefits. In some cases, the benefits you’ve already claimed with your previous fund will be taken into consideration, and deducted from your annual limits until the end of the calendar year, when new benefit limits are set.

## Is there more information available?

The amounts shown here are the annual limits that apply either per person or per family. This is only summary information. Our detailed cover guides list everything you’re covered for and how much you can expect to get back. Visit [www.rhealthfund.com.au](http://www.rhealthfund.com.au) or give our team a call and we’ll email or post one to you.

Type of cover	Extras (when taken together with Private or Basic Hospital Cover) Our top level of cover with excellent benefits when you combine your extras with an rt hospital cover.	
<b>General dental</b>	\$2,000 max 6 extractions and 8 fillings	
<b>Major dental</b> – endodontics	\$600	
– crowns and bridges	\$1,200	
– dentures	\$800 every 2 years	
– periodontics	\$500	
– occlusal therapy	\$300	
<b>Orthodontics</b>	\$1,000 (\$3,000 lifetime limit)	
<b>Optical</b> – frames, lenses and contact lenses	\$300	
<b>Specialist therapies</b> – chiropractic/osteopathic, occupational therapy, orthoptics, physiotherapy, speech therapy	\$500 per therapy	
– psychology, hypnotherapy	\$500 combined limit	
– podiatry	\$500	
– audiology	\$160	
– dietetics	\$500	
<b>Alternative therapies</b> – acupuncture, aromatherapy, bower therapy, chinese medicine, exercise physiology, herbal medicine, homeopathy, iridology, myotherapy, naturopathy, reflexology, remedial massage, shiatsu, swedish massage	\$750 combined limit	
<b>Health services</b> – home nursing (visits)	\$700	\$1,400 combined limit
– home nursing (day care)	\$700	
– midwife (visits)	\$300	
– midwife (delivery of baby)	\$330	
– hearing aid repairs	\$100	
– school accidents	\$750	
– accommodation expenses	\$300 (\$600 family limit)	
– travel expenses	\$250 (\$500 family limit)	
– pharmaceuticals	\$600	
– vaccines	\$150	
<b>Health aids</b> – orthotics (custom made), orthopaedic shoes, artificial eyes, artificial limbs, blood glucose monitors, blood pressure monitors, braces and splints, CPAP and BPAP machines, compression garments, crutches (hire or purchase), external breast prostheses, low vision aids, nebulisers, oral appliance (dental item numbers 983 and 984), oxygen concentrators, oxygen cylinders, TENS machine, wheelchairs, wigs, repairs to health aids	\$1,600 sub-limits apply	
– hearing aids	\$600 (\$1,200 every 3 years)	

Extras Only (when not taken with either Private or Basic Hospital Cover) Excellent extras benefits but some restrictions if you don't also have one of our hospital covers.	Fit & Healthy Extras Good, basic extras benefits, part of a combined hospital and extras cover.	Waiting period
	\$500 (\$1,000 family limit)	2 months
\$625 combined limit (\$1,250 combined family limit) max 6 extractions and 8 fillings sub-limits apply for major dental	Not covered	12 months
\$1,000 (\$3,000 lifetime limit)	Not covered	12 months
\$300	\$300 (6-month waiting period applies)	3 months
\$500 combined limit (\$1,000 combined family limit), sub-limits apply	\$300 per therapy (\$600 per therapy family limit) excludes speech therapy	2 months
\$500 combined limit		
\$500	Not covered	
\$160		
\$500	\$300 (\$600 family limit)	
\$750 combined limit	acupuncture \$300 (\$600 family limit) remedial massage \$200 (\$400 family limit)	2 months
\$700	Not covered	2 months
\$700		
\$300		
\$330		
\$100		
\$750		
\$300 (\$600 family limit)		
\$250 (\$500 family limit)	\$200 (\$400 family limit)	
\$600	\$300 (\$600 family limit)	
\$150	\$75 (\$150 family limit)	
\$1,600 sub-limits apply	\$300 (\$600 family limit) excludes orthotics and orthopaedic shoes	12 months
\$600 (\$1,200 every 3 years)	Not covered	24 months

# Should you have *Ambulance* Cover?

*You're covered  
after 1 day of  
membership.*

Depending on where you live, emergency ambulance attendance and transportation is included with each of our hospital covers.

If you live in:	Any of rt's hospital covers will pay for:
NSW or ACT	<ul style="list-style-type: none"> <li>• Unlimited cover</li> <li>• Emergency and non-emergency ambulance attendance and transportation</li> <li>• Cover applies no matter where you are in Australia</li> </ul>
Vic, SA, WA and NT	<ul style="list-style-type: none"> <li>• \$5,000 per person, per year</li> <li>• Emergency ambulance attendance and transportation (no cover for non-emergency attendance or transportation)</li> <li>• Cover applies no matter where you are in Australia</li> </ul> <p>You can take out a higher level of ambulance cover, which includes non-emergency attendance and transportation with these state-based organisations:</p> <p>Victorian Ambulance Service, <a href="http://www.ambulance.vic.gov.au">www.ambulance.vic.gov.au</a>            South Australian Ambulance Service, <a href="http://www.saambulance.com.au">www.saambulance.com.au</a>            St John Ambulance Western Australia, <a href="http://www.stjohnambulance.com.au">www.stjohnambulance.com.au</a>            St John Ambulance Northern Territory, <a href="http://www.stjohnnt.org.au">www.stjohnnt.org.au</a></p>
Tas	<ul style="list-style-type: none"> <li>• \$5,000 per person, per year</li> <li>• Emergency ambulance attendance and transportation (no cover for non-emergency attendance or transportation)</li> <li>• Cover only applies when Tasmanian residents use the ambulance service while in Queensland or South Australia (there is no cover for Tasmanian residents while in Tasmania, Victoria, WA, NT, NSW or ACT)</li> </ul> <p>The Tasmanian Ambulance Service provides a free service to all Tasmanian residents while they are in Tasmania, <a href="http://www.dhhs.tas.gov.au">www.dhhs.tas.gov.au</a></p>
Qld	<p>If you're a Queensland resident, you pay a Community Ambulance Levy through your electricity bill. Your rt hospital cover therefore does NOT include cover for ambulance. For more information visit <a href="http://www.ambulance.qld.gov.au">www.ambulance.qld.gov.au</a></p>

*If you're not planning* on getting one of our hospital covers you can take a separate ambulance cover. From around \$1 per week, it's a small price to pay for a lot of peace of mind.

# So, what now?

*Can we help you?*  
Call 1300 886 123 or email [help@rthealthfund.com.au](mailto:help@rthealthfund.com.au)  
*Ready to join?* Do it online, [www.rthealthfund.com.au](http://www.rthealthfund.com.au)

## Let's check that you're eligible to join

There are two different types of health funds in Australia – unrestricted funds that anyone can join, and exclusive membership funds that require special eligibility to join. rt is an exclusive membership health fund. **We exist specifically to care for the health cover needs of transport and electricity industry employees and their families.**

To join, you need to be a current or former industry employee, or be closely related to someone who fits that criteria. There should be an application form tucked into the back of this brochure, it includes everything you need to know about who's eligible to join. Alternatively, give our team a call or visit our website for details.

## You've got nothing to lose with portability of cover

When you transfer from another health fund, **we recognise all waiting periods you've already served on equivalent or higher levels of cover**, provided you join rt within two months of leaving your previous fund. Waiting periods will only apply if your rt cover is a higher level than the one you had with your previous fund. In this case, you'll be covered to the same level as your previous cover, until you've served the waiting period

for higher benefits. Moving from a cover with a higher excess to a lower excess (for example, a \$500 excess to a \$250 excess) counts as an upgrade in your cover. In this case, you may also have to pay your previous higher level of excess while serving waiting periods for the higher level of cover.

## Want more detailed information on our products?

This brochure contains summary information only. Our detailed cover guides list everything you're covered for and how much you can expect to get back. Visit [www.rthealthfund.com.au](http://www.rthealthfund.com.au) or give our team a call and we'll email or post one to you.

## Ready to join, risk free?

We understand that deciding to join a health fund for the first time, or switching over from your current fund, is a big step. **We want to make it easy for you, so once you join we'll give you 30 days to try us risk free.** If you change your mind within the first 30 days, and you haven't yet made a claim, we'll refund your money.

# Ready to *join?*

*Can we help you?*  
Call 1300 886 123 or email  
[help@rthealthfund.com.au](mailto:help@rthealthfund.com.au)

*Ready to join?* Do it online,  
[www.rthealthfund.com.au](http://www.rthealthfund.com.au)

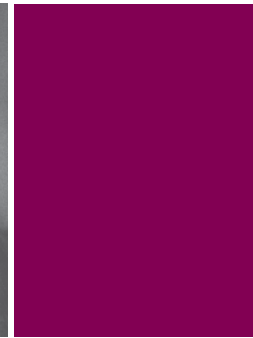


## So what do you think, would you like to join us?

We'll handle all the paperwork, and even arrange the transfer from your old fund for you. All you need to do is:

- visit our website to join online, [www.rthealthfund.com.au](http://www.rthealthfund.com.au)
- call us and we'll help you join over the phone
- complete the application form in the back of this brochure. If it's missing you can visit our website and join online or download another application form.





Meet some of the team you'll chat to when you give us a call. They love talking about health insurance, *so feel free to keep them as busy as you can.*



Opposite page: Tanya. This page, clockwise from top left: Rebecca, Craig, Trish, Kellie, Sonal, Karen, Adma, Miek, Dorothy, Rachael, Sonja, Bruce.

## *Last, but not least ...*

While you are making your decision about whether to join rt health fund, and which cover is best for you, it is important that you read (and retain for future reference) this brochure and any other materials that we might send to you or refer you to.

The information contained in this brochure is general information about rt's insurance services and products, and provides a summary of our covers. rt takes care to ensure the information found in it is complete and accurate. The information does not however represent the complete list of cover, waiting periods and benefits in relation to rt's insurance services. rt accepts no responsibility for loss or expense arising from reliance on the information found solely in this document. You should confirm any benefit, waiting period or statement within any of rt's policies and obtain advice specific to your individual circumstances by contacting rt health fund on 1300 886 123.

Effective 1 April 2011.

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*be well. get well. stay well.*