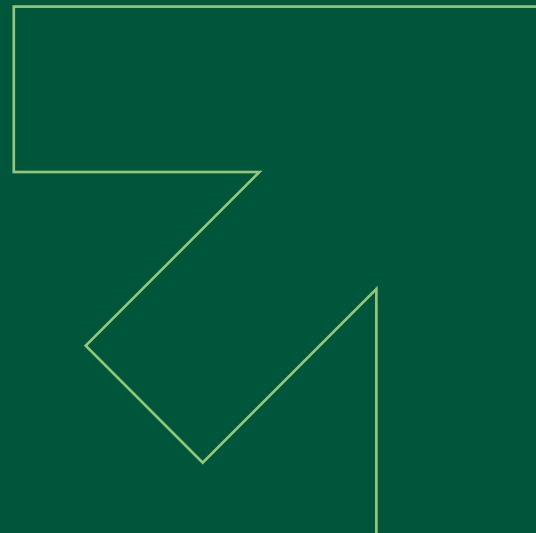


What's changing on your Easy Health policy



This document is a summary of the changes to the cover provided by your policy. It should be read together with your new policy document.

Some exclusions have been rewritten as part of this review, and we've grouped them by category to make them easier to understand. Where we've added new exclusions or made material changes to exclusions that could impact your claims, those changes will be outlined in this summary.

All changes in cover are subject to the terms, benefit limits and exclusions in your policy document.



BASE COVER

Benefit	Current Cover	New Cover	What it means
Surgical Benefit (previously called Hospital – Surgical Benefit)	Tooth extractions are covered if performed by an oral surgeon or registered dentist.	Tooth extractions are now covered if performed by an oral surgeon, maxillo-facial surgeon or dental practitioner.	Improved cover
	The 12-month waiting period only <i>applies to the removal of wisdom teeth.</i>	The 12-month waiting period <i>applies to the extraction of unerupted or impacted teeth.</i>	The waiting period will also apply to unerupted or impacted teeth for new people added to your policy
Hospital Diagnostic Tests Benefit (previously called Hospital Related Diagnostics Benefit)	You can claim up to six months before you're admitted to hospital, and up to six months after you're discharged.	You can claim up to six months before and after you're admitted to hospital.	Change in cover
Hospital Specialist Consultations Benefit (previously called Specialist Consultations Benefit)	You can claim up to six months before you're admitted to hospital, and up to six months after you're discharged.	You can claim up to six months before and after you're admitted to hospital.	Change in cover
Skin Lesion Surgery Benefit (Previously called Specialist Skin Lesion Surgery Benefit)	You're covered for one consultation after your surgery.	Your cover includes one consultation, which you can have before or after your surgery.	Improved cover
	There is no specific exclusion for laser therapy, but no cover is provided as it is not surgery.	An exclusion for laser therapy is now specified.	Clarifying your cover
GP Surgery Benefit (Previously called GP Minor Surgery Benefit)	There is no specific exclusion for biopsies, but no cover is provided as this is not surgery.	An exclusion for biopsies is now specified.	Clarifying your cover
High-Risk Pregnancy Benefit (previously called Obstetrics Benefit)	You're covered for treatment related to a condition that affects or may affect your pregnancy.	You're now covered for treatment by an obstetrician for recognised risk factors, for example gestational diabetes, preeclampsia and anaemia.	Change in cover

Benefit	Current Cover	New Cover	What it means
Loyalty – Sterilisation Benefit (previously called Loyalty Benefit – Sterilisation)	If your policy is suspended, the <i>suspended period still counts</i> towards your waiting period under this benefit.	If your policy is suspended, the <i>suspended period will not count</i> towards your waiting period under this benefit.	Reduced cover
Travel and Accommodation Benefit	For travel and accommodation related to hospitalisation or chemotherapy, your benefit limit is: <ul style="list-style-type: none"> • \$3,000 per insured person per hospitalisation for travel • \$200 per night, up to \$5,000 for accommodation per hospitalisation or chemotherapy cycle 	For travel and accommodation related to surgery or medical treatment, your benefit limit is: <ul style="list-style-type: none"> • \$3,000 per insured person every policy year for travel • \$300 per night, up to your balance remaining that policy year on your Surgical or Non-Surgical Benefit for accommodation 	Overall reduced cover, although this will depend on how many times you have cancer treatment in a year
	For travel and accommodation related to radiotherapy, your benefit limit is \$200 per night for accommodation, up to \$8,000 per insured person per cycle of treatment for travel and accommodation.	For travel and accommodation related to cancer treatment, your benefit limit is: <ul style="list-style-type: none"> • \$300 per night for accommodation • up to the balance remaining that policy year on your Surgical Benefit or Non-Surgical Benefit for travel. 	Overall increased cover, although this will depend on how many times you have cancer treatment in a year
Ambulance Transfer Benefit	You're covered for transfers from your closest private hospital to another private hospital only.	You're now covered between any private hospitals and also for transfers from a public hospital to a private hospital.	Clarifying your cover
	Your ambulance transfer can be to any approved private hospital in New Zealand.	Your ambulance transfer must be to the closest private hospital.	Reduced cover

Benefit	Current Cover	New Cover	What it means
Cover in Australia Benefit	You can only claim if the condition arose while you are in Australia.	You will be able to claim regardless of where the condition arose.	Improved cover
	Your cover includes ambulance costs.	Ambulance costs are now specifically excluded and are no longer covered.	Reduced cover
	You can claim on your Ambulance Transfer Benefit if having treatment in Australia.	You can no longer claim on your Ambulance Transfer Benefit if having treatment in Australia.	Reduced cover
Overseas Treatment Benefit	There is no cover for a support person.	You can now claim for a support person to accompany you.	Improved cover
	Your cover includes vaccinations.	Vaccinations are now specifically excluded and are no longer covered.	Reduced cover
	We cover your reasonable travel costs.	Your reasonable travel costs are still covered, but now specify that flights must be in economy class.	Clarifying your cover
	There is no cover for accommodation costs.	You can now claim for accommodation costs.	Improved cover
Therapeutic Care Benefit	Cover doesn't include sports physicians.	Sports physicians are now covered.	Improved cover
Home Care Benefit (previously called Home Nursing Care Benefit)	Your home care can be provided by a registered nurse or nurse practitioner.	Your home care can now also be provided by a healthcare assistant.	Improved cover
Public Hospital Payment (previously called Public Hospital Cash Grant)	You can claim on this benefit regardless of the reason you were admitted to a public hospital.	To claim on this benefit, you'll need to have been admitted to a public hospital for a condition that you're covered for under your Surgical Benefit, Non-Surgical Benefit or Cancer Treatment Benefit.	Reduced cover

Benefit	Current Cover	New Cover	What it means
Loyalty – Suspending your Cover Benefit (previously called Loyalty Benefit – Suspension of Cover)	Your cover can't be suspended due to parental leave.	You can now suspend your cover due to parental leave.	Improved cover
	If you're suspending your cover due to unemployment, this must be for at least three months.	There's no minimum period you must suspend your cover for if it's due to unemployment.	Improved cover
Loyalty – Check Up Benefit (previously called Loyalty Benefit – Wellness)	If your policy is suspended, the suspended period still counts towards your waiting period under this benefit.	If your policy is suspended, the suspended period will not count towards your waiting period under this benefit.	Reduced cover

PROACTIVE HEALTH OPTION

Benefit	Current Cover	New Cover	What it means
Loyalty – Health Check Benefit (previously called Loyalty Benefit – Health Check)	The medical exam must be done by a GP.	The medical exam can be done by a GP or nurse practitioner.	Improved cover
	If your policy is suspended, the suspended period still counts towards your waiting period under this benefit.	If your policy is suspended, the suspended period will not count towards your waiting period under this benefit.	Reduced cover

SERIOUS CONDITION LUMP SUM OPTION

Section	Current Cover	New Cover	What it means
Notifying us of your diagnosis	You must notify us of your diagnosis <i>within 90 days</i> .	You must notify us of your diagnosis <i>within 12 months</i> .	Improved cover
Stroke definition	Hypoxia and vascular disease affecting the eye, optic nerve or vestibular functions are excluded.	Hypoxia and vascular disease affecting the eye, optic nerve or vestibular functions are now covered under this serious condition.	Improved cover

EXCLUSIONS

Exclusion	Current Cover	New Cover	What it means
Sexually Transmitted Diseases	All sexually transmitted diseases are excluded.	Sexually transmitted diseases are no longer broadly excluded, however some exclusions remain for specific diseases (for example HIV).	Improved cover
Allergies	All costs related to immunology therapy are excluded.	Only costs related to allergies or allergic disorders are excluded.	Improved cover
Congenital	There's no cover for developmental medical conditions that are related to a congenital deformity.	There's no specific exclusion for developmental conditions resulting from a congenital condition, but these are always excluded due to a separate exclusion that currently exists for psychiatric, behavioural, psychological, or developmental conditions.	Clarifying your cover
Expensive Treatments	There's no cover for experimental and unorthodox treatments.	There's also no cover for treatments that are more expensive but provide a similar outcome to an alternate treatment option.	Reduced cover
Transplants	Stem cell transplants are excluded.	Stem cell transplants are now covered.	Improved cover

PRE-EXISTING CONDITION COVER

Conditions that are never covered	Current Cover	New Cover	What it means
Cardiovascular conditions – diabetes	The definition of diabetes was based on how we defined the condition when your policy was written.	We've updated the diabetes control criteria to meet current national clinical guidelines.	Clarifying your cover