

Manchester Unity Product Comparison

Hospital cover

Private hospital cover gives you the freedom to choose from the best hospital care available, when and where you need it. This table provides a summary of private hospital services available on Top Hospital, Healthmate Ultimate, Healthmate Advanced and Healthmate Essentials.

Apart from the services listed below as Minimum Benefits, you are covered for all other conditions or surgical procedures provided you have served the required waiting periods.

Having restricted services reduces the cost of hospital cover, but you should carefully consider your current and future health needs when selecting your level of cover. For example, you are required to serve waiting periods if you upgrade to a level of cover where the service is not restricted.

For further information on our health cover options call our health cover advisers on **1800 622 559**.

Private Hospital Services	Top Hospital	Healthmate Ultimate	Healthmate Advanced	Healthmate Essentials
	Can be taken with extras	Package	Package	Package
Excess	\$250 per person to a maximum of \$500 per family policy.	\$250 per person to a maximum of \$500 per family policy.	\$250 per person to a maximum of \$500 per family policy.	\$250 per person to a maximum of \$500 per couple.
Accommodation	✓	✓	✓	✓
Operating theatre	✓	✓	✓	✓
Intensive care	✓	✓	✓	✓
Coronary care	✓	✓	✓	✓
Prostheses	✓	✓	✓	✓
Physiotherapy	✓	✓	✓	✓
Pharmaceuticals	✓	✓	✓	✓
Gastric banding and obesity surgery	✓	✓	✓	Minimum Benefits
Pregnancy and birth related services	✓	✓	Minimum Benefits	Minimum Benefits
Psychiatric services	✓	✓	Minimum Benefits	Minimum Benefits
Assisted reproductive services (e.g. IVF, GIFT, etc)	✓	✓	Minimum Benefits	Minimum Benefits
Total and partial hip and knee joint replacement surgery	✓	Minimum Benefits	Minimum Benefits	Minimum Benefits
Cataract and other lens related surgery	✓	Minimum Benefits	Minimum Benefits	Minimum Benefits
Dialysis for chronic renal failure	✓	Minimum Benefits	Minimum Benefits	Minimum Benefits
Elective cosmetic surgery	Reduced Benefits [†]	Minimum Benefits [†]	Minimum Benefits [†]	Minimum Benefits [†]
Surgery by accredited podiatrist	Reduced Benefits	Minimum Benefits	Minimum Benefits	Minimum Benefits
Emergency ambulance	✓	✓	✓	✓

Key

Minimum Benefit = Fully covers shared ward accommodation costs in a public hospital. These benefits are not sufficient to cover all procedures in a private hospital or private day hospital. If you choose to use a private hospital or private room in a public hospital this will leave you with considerable out-of-pocket costs for those services. We recommend that you contact us to review your cover, if you think you will require one of these services.

✓ = Covered.

[†] Services for elective cosmetic surgical procedures for which there is no allocated Commonwealth Medicare Benefits Schedule (CMBS) item or for which Medicare does not provide benefits. No medical benefits (doctor's charges) are provided by Manchester Unity.

Extras benefits & limits

Many extras services can be costly and are not covered by Medicare. The following table shows you the annual limits per person of selected extras services and some member benefits that you will receive on Healthcover Plus Extras, Healthmate Ultimate, Healthmate Advanced and Healthmate Essentials. All services are subject to individual item benefit limits

Note: Where initial consultations are shown, lower benefits apply for subsequent consultations. Service limits apply. For further information on our health cover options call our health cover advisers on **1800 622 559**.

Type of Service	Annual limit per person				Waiting Periods
	Healthcover Plus Extras	Healthmate Ultimate	Healthmate Advanced	Healthmate Essentials*	
	Can be taken with hospital	Package	Package	Package	
Optical	\$210	\$200	\$180	\$180	6 months
e.g. Single sighted glasses (frames and lenses)	\$170	\$155	\$150	\$131	
Preventative Dental	No annual limit (1)	No annual limit (1)	No annual limit (1)	No annual limit (1)	2 months
e.g. Scale, clean and plaque removal (2 services per person per year)	\$47	\$44	\$42	\$42	
e.g. Fluoride treatment (2 services per person per year)	\$22	\$22	\$22	\$20	
General Dental	\$400	\$400	\$400	\$400	2 months
e.g. Fillings: Metallic, 3 surfaces	\$82	\$70	\$68	\$65	
Adhesive restoration, 3 surfaces	\$90	\$85	\$80	\$80	
Major Dental					12 months
Crowns, Bridges, Indirect Restorations (2)	\$750/\$1,000 (3)	\$700	\$600	X	
e.g. Full crown: Non-Metallic	\$625	\$600	\$600	X	
e.g. Bridge Pontic: Indirect	\$570	\$570	\$570	X	
Periodontics, Endodontics, Oral Surgery	\$500	\$400	\$400	\$300(8)	
Orthodontic (4)					
After 12 months (specialist/non specialist) we pay up to	\$400/\$300	\$400/\$300	\$400/\$300	X	
After 5 years (specialist/non specialist) we pay up to	\$2,200/\$1,800	\$1,800/\$1,500	\$1,200/\$900	X	
Orthopaedic Shoes & Foot Orthotics (2)	\$185	\$120	\$100	X	6 months
e.g. Orthopaedic shoes	\$185	X	X	X	
e.g. Foot Orthotics	\$120	\$120	X	X	
e.g. Sport Orthotics	\$120(5)	\$120(5)	\$100	X	
Physiotherapy (6)	\$750	\$700	\$600	\$350(9)	2 months
Initial consultation (first 2 visits)	\$40	\$35	\$35	\$32	
Subsequent Consultations (3 - 12 visits)	\$29	\$28	\$27	\$25	
Subsequent Consultations (after 12 visits)	\$22	\$22	\$22	\$10	
Occupational Therapy (6)	\$750	\$700	\$600	X	2 months
Initial consultation	\$49	\$44	\$41	X	
Dietetics (6)	\$750	\$700	\$600	X	2 months
Initial consultation	\$45	\$40	\$35	X	
Speech Therapy (6)	\$750	\$700	\$600	X	2 months
Initial consultation	\$49	\$45	\$42	X	

Type of Service	Annual limit per person				Waiting Periods
	Healthcover Plus Extras	Healthmate Ultimate	Healthmate Advanced	Healthmate Essentials*	
	Can be taken with hospital	Package	Package	Package	
Chiropractic (7)	\$350	\$350	\$350	\$350(9)	2 months
Initial consultation (first 4 visits)	\$35	\$35	\$35	\$30	
Subsequent consultation	\$24	\$22	\$22	\$20	
Osteopathy (7)	\$350	\$350	\$350	\$350(9)	2 months
Initial consultation (first 2 visits)	\$42	\$40	\$37	\$30	
Subsequent consultation	\$34	\$32	\$30	\$20	
Natural therapies (2): Acupuncture, Remedial Massage, Naturopathy and more	\$300	\$300	\$250	\$150(12)	2 months
Initial consultation	\$35	\$35	\$35	\$30	
Subsequent consultation	\$20	\$20	\$20	\$20	
Pharmaceutical Prescriptions (10)	\$700	\$600	\$600	\$300	2 months
Maternity and Home Nursing (11)	\$750	\$600	\$600	X	12 months
Visits up to 4 hours	\$20	\$18	\$18	X	
Visits over 4 hours	\$90	\$80	\$80	X	
KeepFit	✓	✓	✓	X	6 months
Quit Smoking	\$200	\$150	\$125	X	2 months

* Limits are payable per person for singles and couples. Cover is not available on family memberships.

(1) Service limits apply to preventative dental services.

(2) Limit shown is the overall limit for all services in this group.

(3) A \$1,000 limit applies after 5 years of membership.

(4) All limits shown include benefits paid in previous years from any extras cover. The limit shown after 5 years of membership is also the lifetime limit.

(5) Limit shown is a combined limit for Foot Orthotics and Sport Orthotics.

(6) Limit shown is a combined limit for all Physiotherapy, Ante-natal, Occupational Therapy, Dietetics, Speech Therapy, Myotherapy and Orthoptic Therapy services. Ante-natal services are covered only under Healthmate Ultimate and Healthcover Plus Extras. Myotherapy is included under Natural Therapies for Healthmate Essentials.

(7) The limit shown is a combined limit for Chiropractic and Osteopathy services.

(8) \$300 limit is for oral surgery only. Other services not covered under this product.

(9) Limit shown is a combined limit for Physiotherapy, Chiropractic and Osteopathy.

(10) A benefit of up to \$50 per item is claimable where a prescription is required (excluding contraceptives). Benefits are excluded for any item listed in any strength or form under the Pharmaceutical Benefits Scheme (PBS). A co-payment equivalent to the PBS prescription charge for general patients is deducted before benefits are calculated.

(11) Maternity nursing is not available on Healthmate Advanced. Other Home Nursing is a 2 month waiting period.

(12) Limited range of therapies are covered on Healthmate Essentials. Myotherapy is included in this limit.