

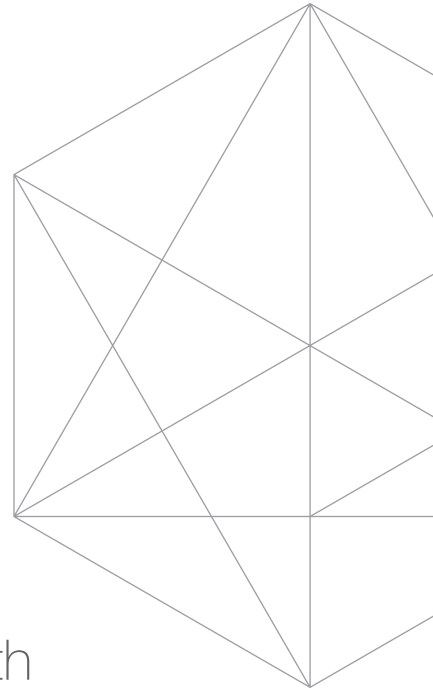
YOUR Cover Guide

WELCOME TO THE
Adobe Health Plan
for Overseas Visitors



This booklet should be read carefully along with ***Your Membership Guidelines*** and retained for future reference.

You can view Your Membership Guidelines at any time at guhealth.com.au/membership-guidelines



Like you, we understand the importance of health and wellbeing so we're pleased to be able to offer you this specialised health insurance package, designed with you in mind.

Who is **GU Health?**

GU Health specialises in corporate health insurance. We understand the importance of health and security. That's why we're focused solely on providing innovative tailored health insurance products and services to businesses and communities, offering high-quality health covers that enable our members to live well.

Most of our members get back a percentage of what they pay regardless of the registered service provider they choose to visit. That's because, unlike some other health funds, we don't restrict our members to a preferred provider list.

We also negotiate great deals through our extensive network of partner private hospitals. This means our members have the option of being treated by a registered doctor or specialist of their choice, while keeping their hospital expenses to a minimum.

Adobe Health Plan is effective from 1 October 2016

The enclosed information is current from 1 April 2019

WHAT YOU CAN EXPECT as a GU Health member

FLEXIBILITY & FREEDOM

You have the freedom to use a provider of your choice.

At GU Health, we know that good health isn't just about getting the right treatment when you're sick or injured. Whatever your needs or stage of life, we're dedicated to helping you to be as well as possible.

EASY CLAIMING

Our three-step online claiming systems means your claims are paid faster.

Our integrated approach to your health and wellbeing is reflected in our extras cover. You can expect generous benefits on extras services, and many of our extras products give you access to a great range of therapies, wellness appliances and preventative health services.

HOSPITAL COVER

A broad network of partner private hospitals and a range of treatment options.

We offer you a range of services to help prevent illness and empower you to live a happy and healthy lifestyle. You'll have access to an online health hub packed with information and resources.

Based on your claims data, we may also determine that you're eligible to participate in one of our targeted chronic disease programs. If you have the appropriate level of cover you may be able to work with a specialist provider enabling you to access an at-home support service that will assist you to recover in your own home.

TSS* VISA

Compliant covers that suit overseas visitor visa and RHCA requirements.

*Temporary Skills Shortage

In Online Member Services you can manage your membership with ease, and claiming and receiving benefits is simple and fuss-free. What's more, we have a dedicated Member Relations Team to answer any questions or enquiries you may have about your cover.



The Essentials

With your health and wellbeing in mind, Adobe has partnered with GU Health to provide you with access to a tailored health plan with extensive benefits.

Take a look at the details of your Adobe Health Plan, which includes cover on a range of healthcare treatments.



YOUR PLAN	Optimum Silver Plus Hospital with Medical	Added Value Benefits
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GU Health is dedicated to supporting you to live as well as you possibly can.

Non-RHCA countries do not have a Reciprocal Health Care Agreement (RHCA) with Australia. Non-RHCA countries include all **countries not** on this list: Belgium, Finland, Italy, Malta, The Netherlands, New Zealand, Norway, The Republic of Ireland, Slovenia, Sweden and the United Kingdom.

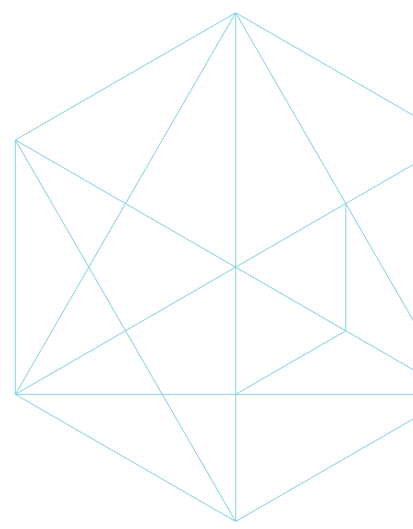
Members covered under **non-RHCA plans will not** receive a Tax Statement and **are not eligible** to apply for the Australian Government Rebate on Private Insurance through GU Health.

Your hospital plan



ACCOMMODATION, INTENSIVE CARE & THEATRE FEES FOR IN-HOSPITAL TREATMENTS LISTED BELOW.		OPTIMUM SILVER PLUS HOSPITAL WITH MEDICAL
		All public & partner private hospitals
Head & Spine	Brain & nervous system	✓
	Eye (not cataracts)	✓
	Cataracts	✓
	Ear, nose & throat	✓
	Implantation of hearing devices	✓
	Tonsils, adenoids & grommets	✓
	Dental surgery (excludes dental item fees)	✓
	Back, neck & spine	✓
Chest & Organs	Heart & vascular system	✓
	Lung & chest	✓
	Breast surgery (medically necessary)	✓
	Skin	✓
	Blood	✓
Kidney & Digestive	Kidney & bladder	✓
	Dialysis for chronic kidney failure	✓
	Digestive system	✓
	Hernia & appendix	✓
	Gastrointestinal endoscopy	✓
	Weight loss surgery	✓
Reproductive	Male reproductive system	✓
	Gynaecology	✓
	Miscarriage & termination of pregnancy	✓
	Pregnancy & birth	✓
	Assisted reproductive services	✗

COVERED
 RESTRICTED
 EXCLUDED



Please note: In addition to the services covered on your plan, you are covered for the following treatments.

Common and Support treatments: When you have a hospital admission, you may receive additional treatments that are associated with the in-hospital services listed above on your plan. We call these common treatments or support treatments and they are items listed within the Medical Benefits Schedule (MBS). Benefits for both common and support treatments are paid according to the level of cover you will receive for your principle hospitalisation.

Associated treatment for complications and unplanned treatments: If a medical complication occurs during your hospital admission that requires further treatment we refer to this as associated treatment for complications. Associated unplanned treatment is unplanned procedures you may need to have during your planned hospitalisation because your medical practitioner considers the treatment medically necessary and urgent. Both these types of associated treatments will be eligible for benefits at the same level of cover you'll receive for your principle hospitalisation. Refer to **Your Membership Guidelines** for more information.

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Your hospital plan



ACCOMMODATION, INTENSIVE CARE & THEATRE FEES FOR IN-HOSPITAL TREATMENTS LISTED BELOW.		OPTIMUM SILVER PLUS HOSPITAL WITH MEDICAL
		All public & partner private hospitals
Joint & Bone	Bone, joint & muscle	✓
	Joint reconstructions	✓
	Joint replacements	✓
	Pain management	✓
	Pain management with device	✓
Services & Treatments	Chemotherapy, radiotherapy & immunotherapy for cancer	✓
	Diabetes management (excluding insulin pumps)	✓
	Insulin pumps	✓
	Sleep studies	✓
	Plastic & reconstructive surgery (medically necessary)	✓
	Rehabilitation	✓
	Hospital psychiatric services	✓
	Palliative care	✓
	Surgically-implanted prostheses (minimum cost of government-approved appliances)	✓
Medical Services	Hospital inpatient doctors' & medical specialists' fees	Up to 150% of MBS
	Outpatient doctors' & medical specialists' fees incl. hospital emergency rooms	Up to 150% of MBS
Additional included services (not recognised by Medicare for a benefit)	Podiatric surgery (Hospital accommodation costs when provided by a registered podiatric surgeon)	✓
	Elective plastic & cosmetic surgery (Hospital only benefits)	✗
	Ambulance	✓
	Inpatient pharmaceuticals ⁺	✓
	Prescription pharmaceuticals	100% up to \$500~
	In-hospital Carer Benefit	Up to \$1,000 limits apply [^]
	Home support services & programs	✓
Repatriation benefit	100% of cost up to \$20,000 one service per membership	

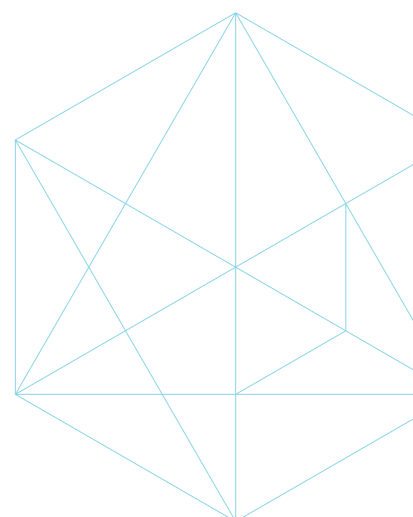
COVERED
 RESTRICTED
 EXCLUDED

⁺ Pharmaceutical Benefits Scheme (PBS) items, listed for your condition, when prescribed and administered in hospital or upon discharge.

[^] Up to \$60 per night for accommodation in hospital and \$30 per day for hospital meals per person, per calendar year.

[~] Prescription items with an official pharmacy receipt, after you pay a sum equal to the current PBS charge. Contraceptives & fertility treatment hormones not covered.

Overall limit of \$1,000,000 per person, per membership year applies for members on non-RHCA covers. Services not recognised by Medicare are not covered. This is a summary of your hospital cover. To understand the meaning of "restricted" on your plan, please see the section on Restrictions in this document. For full details of your benefits and membership entitlements, please refer to *Your Membership Guidelines*. Information is current from 1 April 2019 and may change at any time.



ADDED VALUE Benefits

SERVICES	SERVICE DETAILS	BENEFIT	MAXIMUM LIMIT
General dental	Check ups, basic fillings, x-rays, scale & clean	80%	\$1,000
Major dental	Crowns, bridges, dentures, root canal, periodontics, inlays/onlays, implants & orthodontics	80%	\$1,500
Optical	Prescription glasses & contact lenses, including repairs. Tinting, coating & hardening of lenses not covered.	80%	\$300
Physiotherapy & specialist therapies	Physiotherapy, speech pathology, antenatal, eye therapy & occupational therapy. Consultations only.	100%	\$700
Pharmaceuticals	Prescription items with an official pharmacy receipt. After you pay a sum equal to the current Pharmaceutical Benefits Scheme (PBS) charge, you're covered for the remaining amount above the PBS, up to your benefit limit. Contraceptives & fertility treatment hormones not covered.	100%	\$350
Chiropractic & osteopathy	Consultations only. Includes two chiropractic x-rays.	80%	\$400
Clinical psychology & hypnotherapy	Consultations only	80%	\$400
Therapies	Acupuncture, ayurveda, Chinese massage, Chinese herbal medicine, exercise physiology, myotherapy, nutrition, remedial massage, sports therapy & traditional Thai massage. Consultations only.		
Dietetics	Consultations only		
Podiatry	Consultations only	80%	\$250
Hearing aids	One appliance every five years	100%	\$425
Aids & appliances	CPAP machines, blood pressure monitors, custom made orthotics & more. A letter is required from your treating doctor or recognised health practitioner. Appliances must be purchased from a recognised health practitioner or organisation.	80%	\$400

WAITING PERIODS

Major dental	12 months
Hearing aids	12 months
Aids, appliances & orthotics	12 months

Unless specified otherwise, all limits are per person per membership year. This is a summary of your extras cover. For full details of your benefits and membership entitlements, please refer to *Your Membership Guidelines*.

This information is current from 1 April 2019, and subject to change.

Choosing the right hospital

Your *Hospital Plan* table on the previous page will specify if you're covered for 'All hospitals', 'All public and partner private hospitals' or 'Public hospitals only'. This can be found under the plan name in the hospital table.

To ensure you're fully covered for your hospital fees, it's important you're admitted to an appropriate type of hospital. Hospital fees include hospital accommodation, intensive care and theatre fees (less any excess you may be required to pay based on your level of cover).

'All hospitals' means you're covered for eligible treatment at any registered Australian public or private hospital. 'All public and partner private hospitals' means you can be admitted to any public or partner private hospital Australia wide and be fully covered for hospital accommodation and theatre fees for eligible services.

'Partner private hospitals' means if your level of cover provides benefits for partner private hospitals, you can choose to be treated as a private patient in a private hospital contracted with GU Health. These agreements mean that you'll be covered for inpatient accommodation and theatre fees, based on your level of cover.

In the event you're admitted to a private hospital where no agreement exists you'll only receive restricted benefits. This means the amount we pay is a set amount and may not cover the full cost of your stay and you may incur large out-of-pocket costs. On selected plans there will also be a benefit limit of \$300 per person per membership year for in-hospital pharmaceutical drugs so check *Your Plan Information* for more details.

If your cover includes 'Public hospitals only', you'll experience out-of-pocket expenses if you're admitted to a private hospital.

Waiting periods

A waiting period is the amount of time you and anyone covered under your membership is required to wait before you can first make a claim, or claim a higher benefit for a particular service or treatment on your new level of cover. Waiting periods apply to both hospital and extras cover.

A waiting period applies when you:

- first join or upgrade your level of cover
- re-join the fund after a break in cover
- reduce your hospital excess.

Please note, the service or treatment received must have occurred after the waiting period has been served, to be eligible for a benefit payment.

Treatment	Waiting period
Psychiatric, rehabilitation and palliative care	2 months
Pregnancy, childbirth and related treatment	12 months
Pre-existing conditions (except psychiatric, rehabilitation and palliative care)	12 months

Pre-existing conditions

A pre-existing condition is an ailment, illness or condition, the signs or symptoms of which were known or which a medical practitioner appointed by GU Health considers existed at any time up to six months before and on the day you joined us, upgraded or changed your level of cover.

This is regardless of whether you were diagnosed or aware of the pre-existing condition.

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Restrictions

If your membership has restrictions they'll be marked as ● on *Your Hospital Plan* table. This means GU Health will only pay a minimum (default) benefit for in-hospital treatments. The benefit we pay is the equivalent of the accommodation costs of a shared ward in a public hospital. GU Health won't cover the full cost of a private room in a public hospital or a room in a private hospital. Both can result in significant out-of-pocket expenses.

Depending on your chosen cover, restricted benefits may also apply in instances where you're undergoing treatment that isn't recognised by Medicare, such as elective cosmetic surgery.

Exclusions

Naturally, there are some things we can't cover. Exclusions are procedures or services that aren't covered under your membership and for which we're unable to pay any benefits. This includes instances where you're undergoing treatment that isn't recognised by Medicare, such as elective cosmetic surgery. If you have exclusions under your cover, they'll be marked as ✕ in *Your Hospital Plan* table.



Please note, services not recognised by Medicare aren't covered by GU Health, unless they're specifically listed under your cover as an included item.

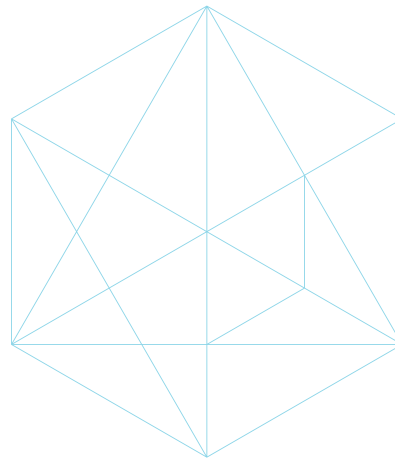
Ambulance cover

Your hospital cover will include full cover for medically necessary ambulance transport to hospital and on-the-spot treatment provided by or under an arrangement with an approved State or territory ambulance service. Please read *Your Membership Guidelines* to find out more.

Eligibility for overseas visitor cover

You're only eligible to be covered on an overseas visitor cover option if you don't have access to full Medicare entitlements and you're not a resident of Australia. If you're a permanent Australian resident or already have access to full Medicare entitlements – through a spousal visa, interim Medicare card or any other means – please contact your Member Relations Team for information about the cover options available to you.

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Eligibility for a tax statement

If you're covered under a RHCA plan you can receive a tax statement at the end of the financial year, which can be used to claim any Government Rebate entitlement or apply for exemption from the Medicare Levy Surcharge (MLS) if it applies to you.

If you wish to receive a copy of your tax statement contact your Member Relations Team or you can find a copy of your tax statement in your Online Member Services area at: guhealth.com.au.

If you're covered under a non-RHCA plan, you won't be eligible for a tax statement.

Australian Government Rebate

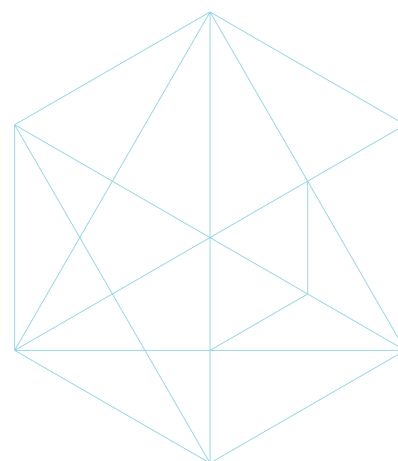
GU Health offers cover options tailored specifically for overseas visitors who are from countries that have a Reciprocal Health Care Agreement (RHCA) with Australia. If you have an appropriate RHCA cover with GU Health and a RHCA Medicare card, you may be able to apply for the Australian Government Rebate on private health insurance.

The level of rebate that you're entitled to claim is based on the age of the oldest person covered under your membership and your household income. Unless an arrangement specific to your corporate health plan has already been set up by your employer, you may claim the rebate as an up-front reduction in your GU Health contributions or as a tax rebate when lodging your tax return.

If you're covered under a non-RHCA plan, you won't be eligible to apply for the rebate.

If the rebate tier nominated under your actual membership doesn't reflect your rebate entitlement, this will be reconciled by the Australian Taxation Office (ATO) as part of your tax return as either a tax debit or credit.

For further details, visit the ATO website at ato.gov.au



Ready to join?

Becoming a member is easy



Before joining GU Health log in to our website to refer to **Your Membership Guidelines** at guhealth.com.au/membership-guidelines

This document outlines the details regarding benefit and fund rules, and other conditions that apply to your membership with GU Health.

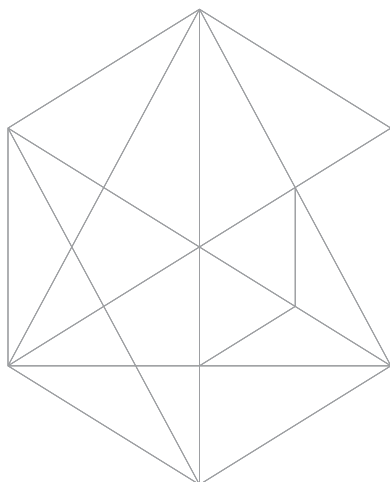
To join online, simply log in to: guhealth.com.au/adobe and enter the company code: adobe102.

In the 'New members' section click on the link 'Click here to join online' and follow the prompts.

Please have on hand your:

- personal details and those of your partner and dependants if applicable
- RHCA Medicare card, if you're planning on claiming the Australian Government Rebate
- previous health cover details if you're transferring from another Australian registered health fund.

If you've previously been a GU Health member, you won't be able to use our 'join online function', please join by downloading and completing an application form and returning it to: corporate@guhealth.com.au or GU Health
Reply Paid 2988 (no stamp required)
Melbourne Vic 8060





Company **RIGHTS**

Adobe may contact GU Health directly to:

- request that your membership be transferred, suspended, or removed from the company plan
- amend your personal details.

GU Health may disclose personal information about you or your membership to Adobe as it deems reasonably necessary subject to GU Health's privacy policy.

The privacy policy can be accessed online at guhealth.com.au

GU Health members have the option of being treated by a registered doctor or specialist of their choice.

Important information

Making a complaint

GU Health has an internal complaints resolution procedure. Simply contact your Member Relations Team and detail your concerns. Your Member Relations Consultant is trained and authorised to resolve most issues immediately. If you aren't satisfied with their response or resolution, we have an internal escalation procedure in place to further address your complaint. Full details on our complaints handling procedure are available on our website, guhealth.com.au/contact-us

Complaints can be lodged by:

FreeCall: 1800 633 819

8.30am to 5pm (AEST), Monday to Friday

Email: corporate@guhealth.com.au

FreePost to: GU Health, Reply Paid 2988, Melbourne Vic 8060 (no stamp required)

Where possible we like to resolve the issue directly with you. If you believe that GU Health has not made reasonable attempts to address your complaint or you are not satisfied with our resolution you can contact the Private Health Insurance Ombudsman.

Private Health Insurance Ombudsman

The Private Health Insurance Ombudsman deals with enquiries and complaints about any aspect of private health insurance. You can get free advice from the Ombudsman if you have a complaint about your private health fund.

Phone: 1300 362 072

Email: phio.info@ombudsman.gov.au

Mail: Commonwealth Ombudsman,
GPO Box 442
Canberra ACT 2601 Australia.

Privacy Policy

We're committed to the privacy and security of your membership and personal details.

Our Privacy Policy outlines your rights and includes information about how we use and disclose your details. To obtain a copy, please refer to our website at guhealth.com.au or contact your Member Relations Team.



Information Security ISO 27001



Globally-recognised standards for information security

We know the security of your personal and health information is important to you. That's why we adhere to ISO27001, a globally-recognised standard for maintaining our Information Security Management System (ISMS).

We're proud to be ISO27001 compliant, so you can have the peace of mind that comes with knowing we do our best to keep your information secure

Your Membership Guidelines is available at guhealth.com.au/membership-guidelines

This outlines further details regarding benefit and fund rules, and other conditions of cover applicable to your membership.



WE'RE HERE TO HELP

Your GU Health Member Relations Team is available to answer any questions you may have.

FreeCall: 1800 633 819
8.30am to 5pm (AEST), Monday to Friday

Email: corporate@guhealth.com.au



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GU Health is a signatory to the Private Health Insurance Code of Conduct. For details go to www.privatehealth.com.au/codeofconduct