

CHANGES TO POLICIES AND BENEFITS POLICY

1. Purpose and Scope

This policy outlines the principles to be followed when there is a detrimental change to your private health insurance policy and benefits. While these principles will be adhered to in most cases, flexibility is reserved to deal with special or unusual circumstances on a case-by-case basis.

While not constituting a change to hospital treatment benefits for the purpose of this policy, changes to hospital contracting arrangements with a hospital can affect an insured person. Requirements for notification of such changes and transition arrangements are included in the relevant agreements and codes relating to conduct between health insurers and hospitals.

2. Policy Statement

We are committed to improving the quality of our products, services and processes to maximise satisfaction for our insured people and keep complaints to a minimum. Consistent with this commitment, proposed changes to your private health insurance policy will be communicated to the Contributor as follows:

1. General changes to hospital or general treatment (extras) policies

A minimum notice of 30 days will be provided to the affected Contributor for general changes to a hospital or general treatment policy, which includes:

- (a) a change of policy name; or
- (b) a change to payment frequency or method.

A written notice of 60 days minimum will be provided to the affected Contributor where there is a detrimental change to hospital or general treatment (extras) policies and includes:

- (a) Where the change to a payment frequency or method results in a payment frequency or method no longer being available.
- (b) Where closing a product has a significant detrimental effect to a policy holder, or group of policy holders (such as a when policy holders are required to move to an alternative product).

2. Detrimental changes to hospital treatment policy benefits

A detrimental change to hospital treatment benefits includes:

- (a) removal of a clinical category;
- (b) an increase to an excess or co-payment under a policy; or
- (c) a change in which an excess or co-payment may apply.

Where there is a detrimental change to hospital benefits, we will:

- (a) provide the affected Contributor with a minimum of 60 days' notice;
- (b) not apply the changes to pre-booked hospital admissions prior to the notification date; and
- (c) put in place transitional measures for patients already in a course of treatment for a reasonable time period, for example, be up to six months.

3. Detrimental changes to general treatment (extras) policy benefits

A detrimental change to general treatment (extras) benefits includes:

- (a) the reduction of a limit; or
- (b) a change to entitlement under such limit; or
- (c) removal of a service or modality covered under a general treatment (extras) policy.

For these detrimental changes to general treatment (extras) treatment benefits, we will:

- (a) provide the affected Contributor with a minimum of 60 days' written notice; and
- (b) provide a transitional period where a course of treatment is being undertaken in relation to orthodontic or endodontic services, for up to 6 months.

If accumulative roll over type benefits are affected, we may provide for up to 6 months a transitional period for unused benefits in the previous year.

4. General principle in relation to detrimental changes to policies and benefits

For any detrimental change (that is not significant) we will adopt the approach to provide 30 days' notice.

3. Definitions

In this policy, the following definitions apply:

Contributor means the person registered as the Contributor for a policy, and who is responsible for payment of contributions of the policy.

Chief Executive Officer (CEO) means the person appointed by the Board of Directors to give effect to the Board's decisions. Where there is a Managing Director, reference to the Chief Executive Officer is also reference to the person who is the Managing Director.

4. Policy Administration

This policy is approved by the Chief Executive Officer (CEO) on the date recorded below and is effective from that date.

Date policy approved: 06 December 2024

Policy review date: 31 December 2027

Policy oversight: Chief Executive Officer