

Clear and Complete Documentation Policy

1. PREFACE

To ensure prudent administration, risk management and governance Emergency Services Health maintains a register approved policies. These policies are reviewed regularly, but not later than the review date specified in this policy.

2. DEFINITION

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

Policy holder means those insured persons registered as adults on the private health insurance policy.

3. INTRODUCTION

This policy is used as a guide on the manner and process for reviewing information provided to policy holders. Information will be in plain language and in a format designed to ensure comprehension.

4. POLICY

Emergency Services Health is committed to improving the quality of products, services and processes so that satisfaction is increased and complaints are kept to a minimum. Consistent with this commitment, Emergency Services Health will provide policy holders with information that is in plain language and in a format designed to ensure comprehension. Emergency Services Health will achieve this by:

- (a) engaging the services of an external writer or editor, as required;
- (b) undertaking a regular review of policy holder documents;
- (c) reviewing the Communications Register; and
- (d) obtaining advice from the Private Health Insurance Ombudsman, as necessary.

Emergency Services Health will provide new customers of Emergency Services Health with details of entitlements to benefits and confirmation of cover following acceptance as a Contributor.

Policy documentation, including that available on the website, will accurately reflect the cover offered and will highlight and contain accurate information, at a minimum regarding:

- (a) waiting periods;
- (b) an explanation of the scope and implications of limitations of on benefits;
- (c) annual limits (individual and membership);
- (d) an explanation on pre-existing conditions;
- (e) how to find agreement hospitals;
- (f) how to find no gap or known gap doctors;
- (g) how to find out if ancillary providers are recognised;
- (h) the Privacy Policy;
- (i) the Complaints Policy; and
- (j) advice that documentation should be read carefully and retained.

Emergency Services Health will also:

- (a) Provide details on benefit entitlements consistent with the Benefit Entitlement Policy;
- (b) Provide timely advice on detrimental changes to benefits consistent with the Changes to Benefits Policy;
- (c) Produce and maintain material on private health insurance covers available to consumers.

All complaints about unclear information are to be recorded in Emergency Services Health's Communications Register.

5. POLICY ADMINISTRATION

Date Policy Approved: 1 September 2016
Policy Review Date: 30 September 2019