

Pre-existing cardiac schedule

For those members with pre-existing cardiac conditions

Effective 17 October 2011



The following **Coverage Tables** forms part of your **policy** and should be read in conjunction with your policy document.

These **Coverage Tables** apply to members who have been on one of the following plans for three years or more: SuperCare, SureCare, UltraCare Base, UltraCare 100, UltraCare 400, HospitalCare, and Hospital and SpecialistCare and have cardiac **pre-existing conditions** which have been accepted by Southern Cross Health Society in writing. The **policy limits** below only apply to cardiac **pre-existing conditions**. In some cases your refund will be significantly less than the cost of treatment.

All figures charged include GST charged by the providers.

HEALTHCARE SERVICE	MAXIMUM*	OTHER TERMS AND CONDITIONS
SURGICAL TREATMENT		\$600 excess applies to SureCare surgical treatment benefits
Coronary artery bypass, single vessel (using vein or artery) Surgeon's fee Anaesthetist's fee	\$5,888 per operation \$3,516 per operation	Performed by a Medical Practitioner Band IV on private practice and in an approved facility .
Coronary artery bypass, double vessel (using vein or artery) Surgeon's fee Anaesthetist's fee	\$6,875 per operation \$4,075 per operation	
Coronary artery bypass, triple vessel (using vein or artery) Surgeon's fee Anaesthetist's fee	\$7,675 per operation \$4,435 per operation	
Coronary artery bypass, quadruple vessel (using vein or artery) Surgeon's fee Anaesthetist's fee	\$8,276 per operation \$4,781 per operation	
Aortic Valve replacement Surgeon's fee Anaesthetist's fee	\$7,176 per operation \$4,219 per operation	
Mitral Valve replacement Surgeon's fee Anaesthetist's fee	\$7,176 per operation \$4,219 per operation	
Pulmonary Valve replacement Surgeon's fee Anaesthetist's fee	\$7,176 per operation \$4,219 per operation	
Tricuspid Valve replacement Surgeon's fee Anaesthetist's fee	\$7,176 per operation \$4,219 per operation	
Bentalls Procedure (incl Aortic Valve Replacement) Surgeon's fee Anaesthetist's fee	\$9,795 per operation \$5,000 per operation	
Atrial Septal Defect (open procedure) Surgeon's fee Anaesthetist's fee	\$6,675 per operation \$3,549 per operation	
Valvuloplasty (open) Surgeon's fee Anaesthetist's fee	\$7,071 per operation \$3,240 per operation	

*See the chart in your policy document for how your refund will be calculated.

Your refund for any **eligible healthcare service** will be the lower of the actual cost or the **policy limit** applicable to that **healthcare service**, less any excess applicable and payable by you. You will be responsible for paying the balance.



HEALTHCARE SERVICE	MAXIMUM*	OTHER TERMS AND CONDITIONS
SURGICAL TREATMENT		\$600 excess applies to SureCare surgical treatment benefits
Balloon Valvuloplasty - Mitral Surgeon's fee Anaesthetist's fee	\$4,135 per operation \$1,375 per operation	
Balloon Valvuloplasty - Aortic Surgeon's fee Anaesthetist's fee	\$3,999 per operation \$1,250 per operation	
Maze Arrhythmia Surgery (as an additional procedure) Surgeon's fee Anaesthetist's fee	\$1,426 per operation \$500 per operation	
Maze Arrhythmia Surgery (standalone procedure) Surgeon's fee Anaesthetist's fee	\$5,139 per operation \$1,500 per operation	
Maze Arrhythmia Surgery (Thoroscopic Limited) Surgeon's fee Anaesthetist's fee	\$3,810 per operation \$1,188 per operation	
Maze Arrhythmia Surgery (Thoroscopic Extensive) Surgeon's fee Anaesthetist's fee	\$5,281 per operation \$1,625 per operation	
Maze pen prosthesis	\$6,133 per operation	
Pericardiotomy Surgeon's fee	\$3,775 per operation	
Pericardiocentesis Surgeon's fee	\$563 per operation	
Drainage of Pericardial Effusion Surgeon's fee Anaesthetist's fee	\$1,676 per operation \$511 per operation	
Pacemaker Surgery - Initial Implantation (excluding the cost of the pacemaker) Surgeon's fee Anaesthetist's fee	\$2,494 per operation \$675 per operation	
Removal of Sternal Wire Surgeon's fee Anaesthetist's fee	\$1,405 per operation \$766 per operation	
Removal & Rewiring of Sternal Wire Surgeon's fee Anaesthetist's fee	\$1,946 per operation \$788 per operation	

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HEALTHCARE SERVICE	MAXIMUM*	OTHER TERMS AND CONDITIONS
SURGICAL TREATMENT		
\$600 excess applies to SureCare surgical treatment benefits		
Hospital fees	\$35,000 per operation	This includes hospital costs for accommodation, parent accommodation with a child in hospital, operating theatre, anaesthetic supplies, intensive care and special in-hospital nursing, in-hospital x-rays, ancillary hospital charges and in-hospital post operative physiotherapy fees from a registered physiotherapist in private practice.
Perfusionist's charges	\$3,500 per operation	Including bypass machine supplies and off-bypass cardiac stabilisation consumables.
Intensivist's fee	\$1,215 per operation	
Heart valve	\$7,000 per operation	
Coronary angiogram	\$3,200 per operation	Performed by a Medical Practitioner Band III in private practice and in an approved facility . Includes hospitalisation, specialist and ancillary hospital charges.
Cardioversion	\$1,306 per procedure	Performed by a Medical Practitioner Band III in private practice and in an approved facility and includes any charges by a Medical Practitioner Band IV vocationally registered in anaesthesia.
Coronary angioplasty**		Coronary angioplasty in an approved facility including hospitalisation, specialist, stent(s) and ancillary fees performed by a Medical Practitioner Band III in private Practice.
Procedure by Affiliated Provider with or without Drug Eluting Stent(s).	Policy limits will apply. Prior to receiving treatment your Affiliated Provider will advise the balance payable by you.	No cover for Drug Eluting Stent(s) unless angioplasty procedure performed by an Affiliated Provider .
Procedure by other provider with or without Drug Eluting Stent(s).	\$11,000 per operation	No cover for Drug Eluting Stent(s).
Coronary angioplasty and angiogram on the same day.		Coronary angioplasty and angiogram performed on the same day in an approved facility including hospitalisation, specialist, stent(s) and ancillary fees performed by a Medical Practitioner Band III in private practice.
Procedure by Affiliated Provider with or without Drug Eluting Stent(s).	Policy limits will apply. Prior to receiving treatment your Affiliated Provider will advise the balance payable by you.	No cover for Drug Eluting Stent(s) unless angioplasty procedure performed by an Affiliated Provider .
Procedure by other provider with or without Drug Eluting Stent(s).	\$11,000 per operation	No cover for Drug Eluting Stent(s).

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If you require a coronary angioplasty including a drug eluting stent and you don't go to an Affiliated Provider there will be a significant shortfall you will need to pay. We strongly recommend that you discuss these charges with your **health services provider.

HEALTHCARE SERVICE	MAXIMUM*	OTHER TERMS AND CONDITIONS
IMAGING AND DIAGNOSTICS	If you are on a HospitalCare plan, the following imaging and diagnostics must be within 4 months before or after surgery to claim these benefits. \$50 excess applies to SureCare imaging and diagnostic benefits. Diagnostic imaging performed by a registered radiologist in private practice	
Computed Axial Tomography (CT/CAT scan)	\$650 per CT scan up to \$1,300 per claims year	Excludes calcium scoring
Magnetic Resonance Imaging (MRI)	\$1,200 per claims year	On referral from a Medical Practitioner Band II, III or Band IV and in private practice.
Myocardial perfusion scan	\$1,390 per test	On referral from a Medical Practitioner Band III or IV
TESTS	If you are on a HospitalCare plan. Cardiac Tests must be within 4 months before or after surgery to claim these benefits. \$50 excess applies to SureCare cardiac tests benefits. On referral by a Medical Practitioner Band III or IV and in an approved facility .	
Cardiac Tests	\$1,250 per test up to \$3,750 per claims year	Limited to the procedures listed in section 14 of the List of Surgical Procedures .
CONSULTATIONS	If you are on a HospitalCare plan and not having surgery, the following consultations are not covered by your policy . \$50 excess applies to SureCare consultation benefits.	
Medical Practitioner Band IV Initial consultation Follow-up consultation	\$160 per consultation \$110 per consultation	Consultations by a Medical Practitioner Band IV vocationally registered in cardiac surgery.
Cardiologist consultations Initial consultation Follow-up consultation	\$275 per consultation \$110 per consultation	Consultations with a registered cardiologist in private practice who is a Medical Practitioner Band III.
DAY-TO-DAY TREATMENT	If you are on a HospitalCare, Hospital and SpecialistCare or SureCare plan, day-to-day treatment is not covered by your policy .	
Medical Practitioner Band I Clinical consultation Home or after hours consultations	\$45 per consultation \$55 per consultation	Treatment and consultations (including dressings, acupuncture and ECG) by a Registered Medical Practitioner .
Registered Nurse Practitioner	\$27 per consultation	Only applicable where no Medical Practitioner Band I fee applies. Performed by a Band I Registered Nurse or a Band II Registered Nurse Practitioner.
Prescriptions	\$240 per claims year	Charges for prescription drugs , prescribed by a Medical Practitioner (all Bands) or Band II Registered Nurse Practitioner.

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