



Southern Cross
Health Society

Pre-existing cardiac schedule

For those members with pre-existing cardiac conditions

Effective from 1 July 2008

The following coverage table forms part of your policy and should be read in conjunction with your policy document.

This coverage table applies to members who have been on one of the following plans for three years or more: RegularCare Plus, 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.
Cardiac Surgery		Performed by a by a Medical Practitioner Band IV in private practice and in an approved facility .
Coronary artery bypass, single vessel Surgeon's fee Anaesthetist's fee	\$5,600 per operation \$3,440 per operation	
Coronary artery bypass, double vessel Surgeon's fee Anaesthetist's fee	\$5,810 per operation \$3,560 per operation	
Coronary artery bypass, triple vessel Surgeon's fee Anaesthetist's fee	\$6,130 per operation \$3,770 per operation	
Coronary artery bypass, quadruple vessel Surgeon's fee Anaesthetist's fee	\$6,340 per operation \$3,880 per operation	
Cardiac valve replacement Surgeon's fee Anaesthetist's fee	\$6,530 per operation \$3,460 per operation	
Cardiac Atrial Septal Defect (Open Closure) Surgeon's fee Anaesthetist's fee	\$6,530 per operation \$3,460 per operation	
Cardiac Valvuloplasty Surgeon's fee Anaesthetist's fee	\$5,230 per operation \$3,170 per operation	
Maze Arrhythmia Surgery Surgeon's fee Maze pen prostheses	\$750 per operation \$6,000 per operation	
Pericardiectomy Surgeon's fee	\$2,430 per operation	
Pericardiocentesis Surgeon's fee	\$550 per operation	
Drainage of Pericardial Effusion Surgeon's fee Anaesthetist's fee	\$1,640 per operation \$500 per operation	
Pacemaker Surgery - Implantation (Excluding The Cost Of The Pacemaker) Surgeon's fee Anaesthetist's fee	\$2,440 per operation \$660 per operation	
Removal of Sternal Wire Surgeon's fee Anaesthetist's fee	\$1,375 per operation \$750 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.

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
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 fees, 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 octopus system.
Intensivist's fee	\$1,215 per operation	
Heart valve	\$6,500 per operation	For heart valve replacement surgery only.
Coronary angiogram	\$3,200 per operation	Performed by a Medical Practitioner Band III in private practice and in an approved facility . No cover for CT coronary angiogram (CTA) unless procedure performed by an Affiliated Provider . Includes hospitalisation, specialist and ancillary fees.
Cardioversion	\$1,306 per procedure	Includes any charges by a Medical Practitioner Band IV vocationally registered in anaesthesia.
Coronary angioplasty Procedure by Affiliated Provider <u>with or without</u> Drug Eluting Stent(s).	Policy limits will apply. Prior to receiving treatment your Affiliated Provider will advise the balance payable by you. \$12,000 per operation	Coronary angioplasty in an approved facility including hospitalisation, specialist, stent(s) and ancillary fees performed by a Medical Practitioner Band III in private practice. No cover for Drug Eluting Stent(s) unless angioplasty procedure performed by an Affiliated Provider or other provider nominated by us to provide coronary angioplasty services.
Procedure by other provider nominated by Southern Cross <u>with</u> Drug Eluting Stent(s).	\$11,000 per operation	
Procedure by other provider nominated by Southern Cross <u>without</u> Drug Eluting Stent(s).	\$11,000 per operation	
Procedure by other provider <u>with or without</u> Drug Eluting Stent(s).		No cover for Drug Eluting Stent(s).
Coronary angioplasty and angiogram on the same day Procedure by Affiliated Provider <u>with or without</u> Drug Eluting Stent(s).	Policy limits will apply. Prior to receiving treatment your Affiliated Provider will advise the balance payable by you. \$12,000 per operation	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. No cover for Drug Eluting Stent(s) unless angioplasty procedure performed by an Affiliated Provider or other provider nominated by us to provide coronary angioplasty services.
Procedure by other provider nominated by Southern Cross <u>with</u> Drug Eluting Stent(s).	\$11,000 per operation	

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HEALTHCARE SERVICE	MAXIMUM*	OTHER TERMS AND CONDITIONS
SURGICAL TREATMENT		\$600 excess applies to SureCare surgical treatment benefits.
Procedure by other provider nominated by Southern Cross <u>without</u> Drug Eluting Stent(s).	\$11,000 per operation	No cover for Drug Eluting Stent(s).
Procedure by other provider <u>with or without</u> Drug Eluting Stent(s).		
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	
Computer 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 cardiothoracic surgery.
Cardiologists consultations Initial consultation Follow-up consultation	\$275 per consultation \$110 per consultation	Consultations (including resting ECG) 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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