	SHARED COVER			
Benefit overview	KiwiCare	RegularCare		
	A shared cover surgical and healthcare plan which reimburses 80% of expenses up to the policy limits. Qualifying pre-existing conditions will be covered after 3 years. To help reduce your premiums, you can apply a \$500 excess.	A comprehensive shared cover surgical and healthcare plan which reimburses 80% of expenses up to the policy limits. Qualifying pre-existing conditions will be covered after 3 years. To help reduce your premiums, you can apply a \$500 excess.		
CANCER CARE				
Chemotherapy treatment	\$48,000 per year ² (includes \$8,000 per year for non-Pharmac approved Medsafe indicated chemotherapy drugs)	\$48,000 per year ² (includes \$8,000 per year for non-Pharmac approved Medsafe indicated chemotherapy drugs)		
Radiotherapy	Unlimited ²	Unlimited ²		
Additional cancer option	Add Cancer Assist Receive a one-off payment if diagnosed with a qualifying cancer	Add Cancer Assist Receive a one-off payment if diagnosed with a qualifying cancer		
SURGICAL TREATMENT				
Surgical procedures	\$100,000 per operation ^{1,3}	\$100,000 per operation ^{1,3}		
Skin surgery under general anaesthetic or sedation, and Mohs	Refunded under surgical procedures ²	Refunded under surgical procedures ²		
Skin surgery with local or no anaesthetic	\$5,000 per year ^{6,8}	\$5,000 per year ^{6,8}		
GP minor surgery	\$800 per claims year	\$800 per claims year		
Sterilisation	No cover	No cover		
DIAGNOSTIC IMAGING AND TESTS				
Diagnostic imaging	\$8,000 per claims year ²	\$8,000 per claims year ²		
Cardiac tests	\$3,000 per claims year ²	\$3,000 per claims year ²		
Diagnostic tests	\$2,000 per claims year ¹	\$2,000 per claims year ¹		
Laboratory tests	No cover	\$56 per claims year		
CONSULTATIONS				
Specialist consultations	5 visits per year up to \$4,000 per year ^{2,10}	5 visits per year up to \$4,000 per year ^{2,10}		
Psychiatrist consultations	\$600 per claims year ²	\$600 per claims year ²		
Dietitian consultations	\$400 per claims year ⁶	\$400 per claims year ⁶		
	\$400 per claims year -	\$400 per cialitis year -		
DAY-TO-DAY, VISION AND DENTAL				
GP consultations	No cover	\$36 per clinic consultation / \$45 per home consultation		
Physiotherapist	No cover	\$180 per claims year ⁶		
Dietitian or nutritionist	No cover	No cover		
Osteopath	No cover	No cover		
Chiropractor	No cover	No cover		
Registered massage therapist	No cover	No cover		
Acupuncturist	No cover	No cover		
Homeopath or naturopath	No cover	No cover		
	No cover			
Podiatrist		No cover		
Dental	No cover	No cover		
Prescription glasses and contact lenses	No cover	No cover		
Optometrist	No cover	No cover		
Orthoptist	\$128 per claims year	\$128 per claims year		
Prescriptions	No cover	\$400 per claims year		
Annual health check	No cover	No cover		
Flu vaccination	No cover	No cover		
Nurse consultations	No cover	\$20 per consultation		
Audiologist	No cover	\$128 per claims year ⁶		
Hearing tests	No cover	\$128 per claims year \$128 per claims year		
	No cover	No cover		
Clinical psychologist	NUCUVEI			
RECOVERY AND SUPPORT		* ***		
Post-operative home nursing	No cover	\$900 per claims year ^{5,6}		
Post-operative speech and language therapy	\$280 per claims year ^{6,7}	\$280 per claims year ^{6,7}		
Post-operative physiotherapy	\$180 per claims year ^{6,7}	\$180 per claims year ^{6,7}		
Ambulance allowance	No cover	\$144 per claims year		
Travel and accommodation allowance	\$400 per claims year	\$400 per claims year		
Parent accommodation allowance	\$400 per operation ⁶	\$400 per operation ⁶		
Palliative care and treatment allowance	No cover	No cover		
OBSTETRICS				
Obstetrics allowance	No cover	No cover		
NON-SURGICAL TREATMENT	110 00101	10 00 101		
	\$49,000 per claims year fi	¢49,000 per eleime vez fi		
Non-surgical hospitalisation	\$48,000 per claims year ⁶	\$48,000 per claims year 6		
Psychiatric hospitalisation	\$2,250 per claims year 6	\$2,250 per claims year ⁶		
Allergy services	\$600 per claims year ¹¹	\$600 per claims year ¹¹		
SURGICAL ALLOWANCES				
Gastric banding/bypass allowance	\$5,000 per lifetime ^{1,4}	\$5,000 per lifetime ^{1,4}		
Bilateral breast reduction allowance	\$3,200 per lifetime ^{1,4}	\$3,200 per lifetime ^{1,4}		
Post mastectomy allowance to achieve breast symmetry	\$6,500 per lifetime ¹	\$6,500 per lifetime ¹		
Prophylactic treatment allowance	\$30,000 per lifetime ^{1,4,9}	\$30,000 per lifetime ^{1,4,9}		
Overseas treatment allowance	No cover	\$5,000 per claims year		
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¹Some healthcare services covered under this benefit must be performed by an Affiliated Provider.

² All healthcare services covered under this benefit must be performed by an Affiliated Provider.

³ Prosthesis maximums apply.

⁴Available after 3 years continuous cover.

⁵ Available after 1 year continuous cover.

⁶ Sublimits apply.

⁷ Must be performed within 6 months after eligible related surgical treatment or cancer care.

⁸ All healthcare services covered under this benefit must be performed by an Affiliated Provider or General Practitioner.

⁹ Cover is not available where the high risk status was present prior to the original date of joining

¹⁰ 5 visit limit does not apply to oncologist and radiation oncologist consultations.

¹¹ All healthcare services covered under this benefit must be performed by an Affiliated Provider or General Practitioner who has an Easy-claim agreement with us.

This comparison chart has been designed to give you a general idea of some of the benefits offered under the policies listed. For full details of the benefits and maximums for each policy and any exclusions, limitations or other conditions that may apply, please refer to the relevant policy document (available on request).

How to join

- Call us on **0800 100 777** to discuss the best option for you.
- Join online at southerncross.co.nz/apply-now
- If your employer has a work scheme, call **0800 GET COVER (0800 438 268)** to speak to your Southern Cross consultant. Or you can discuss your options when they visit your organisation.

Level 1, EY Building 2 Takutai Square, Auckland 1010 Private Bag 99934 Newmarket, Auckland 1149

Standard & Poor's rating

Southern Cross Medical Care Society (trading as Southern Cross Health Society) has an A+ (Strong) financial strength rating given by Standard & Poor's (Australia) Pty Limited.

The rating scale is: AAA (Extreme BBB (Good)

	(Extremely Strong) (Good)	(Very Strong) (Marginal)	A B	(Strong) (Weak)
CCC R	(Very Weak) (Regulatory Action)	(Extremely Weak) (Not Rated)	SD or D	(Selective Default or Default)

Ratings from 'AA' to 'CCC' may be modified by the addition of a plus (+) or minus (-) sign to show relative standing within the major rating categories. Full details of the rating scale are available at www.standardandpoors.com. Standard & Poor's is an approved rating agency under the Insurance (Prudential Supervision) Act 2010.



Effective from 10 December 2018