

Effective from your anniversary on or after 1 September 2025

Basic Plan

This Summary of Health Plan Changes details benefit changes to your Health Plan. These changes will apply from your anniversary on or after 1 September 2025 and to any claims that you make for events that occur after that date.

You should read this along with your Health Plan document and other documents that make up your policy as listed in the Health Plan document.

Accuro is becoming UniMed. We will be progressively updating communications to reflect this, and you'll see some references to Accuro until we've fully transitioned to UniMed. Find out more at unimed.co.nz/accuro.

You may also notice that we have updated some of our terminology including Health Plan documents that were previously called 'policy documents'. This has been done to make things easier to understand. Unless outlined below there is no change to the meaning of the terminology. See the glossary in your Health Plan document, or find out more at unimed.co.nz/important-documents.

Type of change	Benefit	Per policy year
Updated benefit to improve cover	Annual limit Increase in the maximum annual benefit limit	\$2,500 per person
Increased benefit limit	Registered medical practitioner or registered nurse consultations Increase in visit limit	\$55 per visit
Increased benefit limit	Registered medical specialist consultations Increase in visit limit for follow up visits	\$125 first visit/\$75 for follow up visit
Increased benefit limit	Imaging Increase in event limit	\$700 per event
Increased benefit limit	Private hospital fees Increase in event limit	\$1,000 per event
Updated benefit to improve cover	Mental health Included psychotherapist consultations under the Mental health benefit	\$1,000 per person

Wording Changes

Bereavement grant

We have changed the name of the benefit from Funeral support grant to Bereavement grant.

Suspension period

We have increased the maximum suspension period for unemployment, redundancy and financial hardship from 6 months to 12 months.

General exclusion - Robotic surgery

For clarity, we have updated the existing General exclusion for 'robotically assisted prostate surgery' to include all robotically assisted surgery:

- *robotically assisted surgery*

Robotic procedures are excluded under the new medical treatment, procedures, and technologies exclusion. We have previously also called out robotically assisted prostate surgery. However, to give clarity and transparency of what is not covered, which is all robotically assisted surgery/treatment, this has now been updated to reflect this.

General exclusion – Gender affirmation

We have updated the terminology for the below exclusion with regards to Gender affirmation, which was previously referred to as Gender reassignment to be reflective of the correct terminology.

- *gender affirmation surgery/treatment or gender dysphoria*

Complaints process

We have updated the wording in the document to reflect the current complaints process.

Glossary term - Policy year

We have updated the wording to more accurately reflect the policy year, which is the 12-month period from midnight on the policy annual renewal date and continues for the 12 months following, until your next annual renewal date.

Glossary term - Member

We have updated the definition to include any Member who is on your policy, i.e. the Primary Member or their spouse, partner, child etc.

Glossary term – Registered medical specialist

We have updated the definition to clarify that they also must hold a vocational scope of practice, and added *accident and medical practice* as a registration scope that doesn't fall under this definition.