# Health improvement benefit approval form



This form must be completed by your Doctor, Dietitian, Exercise Physiologist, Physiotherapist, Osteopath, Chiropractor, Occupational Therapist, Psychologist, Diabetes Educator or Aboriginal Health Worker stating what condition the exercise classes or program are intended to manage.

#### 1 Your details Please use black pen and print in UPPERCASE

Member number	Title	Firs	First names										
Surname										Date of b	oirth		
2 Practitioner details													
2 Practitioner details Practitioner name							Practition	ornumha	or				
Practitioner speciality													
Tractitioner speciality													
Practitioner address													
Suburb									State		Postcode		
Suburb									Julie		FUSICUUE		
3 Health condition det													
Benefits can only be paid for cla	isses or programs	that have a star	t date afte	r the date yo	ur conditi	on was i	dentified.						
What condition are the classes ain	ned to manage?												
Arthritis	Asthma	Asthma Body Mass Index (BMI) over 26 for adults or unhealthy BMI for children											
Diabetes	High blood pres	sure	Muscul	ar skeletal dis	sorder								
Other condition – please detai	il (must be a diagn	osed condition):											
The member has had this condit	tion since:												
Which benefit is the member seek	ring? (See overleaf	for note about red	coanised n	roviders)									
Exercise Physiology	ang. (See overlear		eognised p	iovider3)									
Exercise classes conducted at	a gym or by a pers	onal trainer											
Pilates (unless conducted by a			vhen no for	m is required	)								
Yoga		p <b>j</b> p			,								
Swimming lessons for children	0-17 years												
Weight Loss classes													
How long should the activity be ur	ndertaken? (Note: t	this form lasts fo	r a maxim	um of one y	ear and w	ill need	to be rene	ewed afte	er that tin	ıe)			
3 months													
6 months													
12 months													
Other (please specify)													

**4 Declaration by health practitioner** I declare that the benefit sought by the member is intended to manage a specific health condition(s) that I have identified and that all the information contained in this form is true and correct. Health practitioner's signature

Date: / /

## Important information about claiming health improvement benefits

# Private Health Insurers in Australia are only allowed to pay benefits for health improvements when the programs or classes are to manage a condition that has been identified BEFORE you start the programs or classes.

The programs or classes must form part of a health management plan recommended by your GP or other recognised health practitioner (as listed on the front page).

Some classes or programs that you undertake must be by an ahm recognised provider. To be recognised by ahm, providers must meet the following criteria:

- Swimming lessons need to be provided by an Austswim® or Swim Australia accredited swim school or instructor
- Weight Loss classes need to be conducted by a Weight Management Council of Australia member.

When you're ready to claim for health improvement benefits, you'll need to complete a claim form and attach a receipt for the service you've received. Claim forms can be downloaded from ahm.com.au/downloads or contact us and we can send you one in the mail.

Your claim form, receipt and completed Health Improvement Benefit form needs to be mailed to ahm Health Insurance, Locked Bag 1006, Matraville NSW 2036.

## **Common questions**

#### Why are there so many rules?

In Australia there are strict criteria that health insurers must follow to determine whether or not we can pay benefits for health improvement programs or classes.

We're not able to pay benefits unless you can provide proof that a specific condition was identified before you started the classes or program. This can be provided by a health management plan recommended by a GP or other ahm recognised health practitioner.

We also have a responsibility to ensure that all service providers are accredited. We want to ensure that our members are receiving the best treatment and service from the most highly accredited and properly insured providers.

#### Why do I need to complete this form to claim health improvement benefits?

This form must be completed by your GP or other recognised health practitioner so that you can claim for health improvement benefits. ahm can only pay towards these benefits if certain conditions are met and the form is used to identify these conditions and confirm whether you're eligible for benefits.

#### Who's a recognised provider?

It is important that we recognise service providers so that you receive quality health care from the providers you choose.

Recognising a provider means we get specific details and credentials from them to make sure they meet both legislative and our criteria for benefit payment. All service providers must be recognised by ahm Health Insurance before we can pay benefits.

To find out if your service provider is recognised by us, contact us or use the ahm online provider search tool at **ahm.com.au/find-a-provider** 

#### What's a specific health condition?

A specific health condition is an ailment or condition that's been identified by your GP or ahm recognised health practitioner. The health program that you're claiming for must be for the management or prevention of that condition. Examples of specific health conditions include (but aren't limited to) asthma, arthritis, unhealthy BMI, high blood pressure, muscular skeletal disorders.

It is not enough to simply state something like 'core strengthening' or 'flexibility' as these aren't specific health conditions.

## What happens if my GP (or other health practitioner) recommends a program for more than 12 months?

We can only pay benefits for programs up to 12 months in duration on the basis of the information contained in this form. If your program goes for longer than 12 months you will need to provide us with a new Health Improvement Benefit Form every 12 months.

This form can be downloaded from our website at ahm.com.au/downloads or contact us we can send you one in the mail.

Your privacy We're subject to the *Privacy Act 1988* and comply with the principles for handling your personal information. View our Privacy Policy at ahm.com.au or contact us to have a copy posted or emailed to you.