

TRANSITIONING FROM THE ADF?

**A quick guide to healthcare
outside the Navy, Army and
Air Force.**



**Uniformed or not.
A Defence connection
through family or
business can mean
you're eligible.**

**Serving everyone
connected to Defence.**

**Serving
everyone
connected
to Defence.**



Contents

| | |
|---|----|
| 1. Understanding Healthcare After Transition: What to think about now | 01 |
| 2. Brief overview of the Civilian Healthcare System | 02 |
| 3. Understanding your DVA benefits | 04 |
| 4. Understanding the Australian Government incentives and penalties | 05 |
| 5. Why get Private Health Insurance? | 06 |
| 6. Deciding if Private Health Insurance is for you | 07 |
| 7. Cover with Navy Health | 07 |
| 8. What to do next | 09 |

1 UNDERSTANDING HEALTHCARE AFTER TRANSITION: WHAT TO THINK ABOUT NOW

When does my ADF healthcare (Joint Health Command and ADF Family Health Program) end?

Your entitlement to healthcare from the ADF, including Joint Health Command and the ADF Family Health Program, will cease once you transition. It's crucial to familiarise yourself with the civilian healthcare system and understand your post-separation healthcare needs well in advance of this date. Doing so will enable you to identify any necessary actions that must be taken before your separation date, including organising your private health insurance.

Where to start?

Read This Guide

- This guide provides essential information tailored to ADF members transitioning out. It covers important aspects of healthcare and other relevant topics to ensure you have a comprehensive understanding of your options post-transition.

Attend a JTA Transition Seminar

- Begin your journey by attending a Joint Transition Authority (JTA) seminar. Check the schedule on the JTA website to find one in your area. During these seminars, we conduct a comprehensive healthcare presentation, which we highly recommend attending. Following the presentation, our representatives are available at our booth to address any further questions.

Visit the Defence Transition Website

- Explore the programs and support offered on the Defence Transition website. Here, you can find valuable information to assist you in your transition process.

Explore Our Transition Healthcare Hub

- Visit the Navy Health Transition Healthcare Hub on our website, where you'll find further resources dedicated to helping you understand the civilian healthcare system. We address frequently asked questions and offer clear, informative breakdowns of complex healthcare topics.

Transition healthcare hub



2

BRIEF OVERVIEW OF THE CIVILIAN HEALTHCARE SYSTEM

Who pays for what?

General Practitioners

When you fall ill or get injured, you'll usually go see a local doctor, also known as a general practitioner (GP), who treats minor illnesses and injuries.

| Medicare | You | Private Health Insurance |
|---|--|--------------------------|
| Yes When a doctor bulk bills, it means Medicare will cover the full cost of your appointment. | Sometimes Some doctors can choose to charge an out-of-pocket cost. This is a gap between what is covered by Medicare and your doctors fee. You are required to pay this gap out of pocket. | No |

Pharmacists

Pharmacists specialise in preparing and dispensing medications. They also offer pharmaceutical advice, recommend over-the-counter medications, and provide services such as health screenings and immunisations. After a doctor's visit, if prescribed medication, you will need to go to a pharmacy to get your prescription filled.

| Medicare | You | Private Health Insurance |
|--|--|---|
| Yes The Australian Government's Pharmaceutical Benefits Scheme reduces the cost of some medications, but out-of-pocket expenses generally still apply. | Yes Most of the time there will be an out-of-pocket cost for medication. | Sometimes If you hold the right level of cover and your medication is not listed on the PBS, some medications may be claimable through your private health insurance. |

Healthcare Specialists

Healthcare Specialists are doctors with advanced education and training in specific medical fields such as cardiology, psychiatry, and dermatology. If your doctor recommends that you see a specialist, they'll provide you with a referral which will be needed to book an appointment.

| Medicare | You | Private Health Insurance |
|---|--|--------------------------|
| Yes While Medicare may cover a portion of the fee, specialist appointments are expensive and will most likely have an out-of-pocket cost that you'll need to cover. | Yes Most of the time there will be an out-of-pocket cost for this service. | No |

Healthcare Professionals

Healthcare professionals can provide treatment and advice based on formal training and experience such as a dentist, physiotherapist, optometrist or podiatrist.

| Medicare | You | Private Health Insurance |
|--|---|--|
| Sometimes – with a treatment plan from GP | Sometimes Even if you hold an appropriate level of private health insurance or a portion is covered by Medicare there could possibly still be an out-of-pocket cost for this service. | Yes If not covered by Medicare, your private health insurance could make a contribution towards the cost of this service, depending on your level of Extras cover. |

Hospitals

In Australia there are two kinds of Hospitals: Private Hospitals and Public Hospitals.

| Medicare | You | Private Health Insurance |
|---|--|---|
| Yes Public Hospital: Medicare will cover 100% of the cost. Private Hospital: Medicare will cover 75% of the MBS fee. | Sometimes Public Hospital: No. Private Hospital: Yes. If you do not hold private health insurance then you are required to pay the full charge for the admission and treatment. If you do hold private health insurance, there may also be an out-of-pocket cost depending on how much your surgeon charges. Be sure to contact your insurer to discuss these details. | Yes Public Hospital: Sometimes. You can choose to be admitted as a private patient in a public hospital. In this case, depending on your level of Hospital Cover, your private health insurance will cover the cost of inpatient Hospital-related accommodation expenses and 25% of the MBS fee. Private Hospital: Depending on your level of Hospital Cover, your private health insurance will cover the cost of inpatient Hospital-related accommodation expenses and 25% of the MBS fee. |

Medicare

What is Medicare and How Does it Work?

Medicare is Australia's government-run scheme aimed at making healthcare more affordable for all Australians. It assists with covering partial costs of a wide range of services, including visits to general practitioners, specialists, and allied health professionals, as well as essential Hospital treatments. Through Medicare, you can receive medical care without bearing the full financial burden.

One of the primary benefits of Medicare is its bulk-billing system, where doctors bill Medicare directly for their services, leaving you with no out-of-pocket expenses. Additionally, Medicare aids in providing access to affordable medications through the Pharmaceutical Benefits Scheme (PBS), significantly reducing the cost of some prescriptions.

Medicare is funded by taxpayer money, and individuals contribute each year by paying the Medicare Levy at tax time, which is 2% of your annual income.

How Do I Sign Up for Medicare?

All citizens and permanent residents of Australia are eligible for Medicare. As you transition out of the ADF, registering for Medicare or updating your details is important for accessing public healthcare. If you are single, have never had Medicare before, and are separating, you must register with Medicare to access the benefits.

You can easily apply for Medicare online, by phone, or in person at a Service Centre.

Visit www.servicesaustralia.gov.au/contact-us to find out the best way to contact that suits you.

If your family already has Medicare, you can add yourself to the family Medicare card. In either case, you can register prior to separation, but you can't access benefits until you leave the ADF.



3

UNDERSTANDING YOUR DVA BENEFITS

Understand the difference between the DVA's benefits categories

Non-Liability Health Care (NLHC)

Non-liability health care refers to coverage by DVA for health treatments, without the need for veterans to establish service-causation or recognise liability for providing compensation. In other words, the veteran does not have to prove that the health treatment is required as a result of injury or illness sustained during service, for which the Australian Government has accepted liability.

All current and former members of the ADF with at least one day of continuous full-time service (CFTS) are eligible for treatment of any mental health condition under NLHC. A White Card is issued to transitioning members of the ADF to allow them to access to NLHC mental health treatment without needing to make a DVA claim.

Liability Accepted Conditions

If someone has an injury, illness, or condition related to their service in the ADF, DVA can help with treatment, payments, rehabilitation and support. To receive these benefits, Veterans need to submit a claim for each of the injuries, illnesses, or conditions that they sustained during service. If the claim is accepted it means the Commonwealth has accepted liability for their service-related injury.

If DVA accepts liability for a condition, the next step is to complete a needs assessment. A needs assessment is a discussion with a DVA delegate about the veteran's situation and the types of benefits, services and support that they may require.

Typically, a veteran can then claim through DVA for the costs of healthcare and ongoing treatment of their liability accepted condition(s). They may seek these services through either the public or private healthcare systems and receive reimbursement for the costs through the DVA.

Rehabilitation support and services provided by DVA are designed to help former ADF personnel to adapt, manage and recover following their service-related injury or disease. The aim is to get them back to the same physical and psychological state, and the same social, vocational and educational status, as before being injured or becoming ill.

Understand the 3 DVA Veteran cards: Gold, White, Orange

Veteran Gold Card

Holders of a Veteran Gold Card (the DVA Health Card – All Conditions within Australia) are entitled to the full range of health care services at DVA's expense, including medical, dental, optical care and subsidised pharmaceuticals. They are also entitled to medical aids and appliances to assist them to manage their health conditions. Essentially, all the veteran's medically necessary healthcare costs are covered by the DVA.

Veteran White Card

Non-Liability Health Care

Holders of White Cards issued under Non-Liability Health Care (NLHC) treatment arrangements may be entitled to treatment of malignant neoplasm (cancer), pulmonary tuberculosis, or any mental health condition, subject to meeting eligibility conditions. These conditions do not need to be linked to service.

Liability Accepted Conditions

Holders of a Veteran White Card for Specific Conditions are entitled to be treated at DVA's expense, including subsidised pharmaceuticals, for their liability-accepted disabilities or illnesses only.

Veteran Orange Card

Holders of a Veteran Orange Pharmaceutical Only card are entitled to subsidised pharmaceuticals only. The Veteran Orange Card gives veterans access to prescription medicines, wound care items and nutritional supplements at a concession rate. The card cannot be used for medical or other healthcare treatment.

Private Health Insurance (PHI) vs DVA Benefits: Quick Reference Guide

| DVA Benefit | PHI Consideration |
|---------------------------------------|--|
| White Card (Non-Liability Healthcare) | May not need PHI cover for mental health, cancer, or tuberculosis. |
| White Card (Accepted Conditions) | May not need PHI cover for surgeries, health services, or pharmaceuticals required to treat or recover from an accepted service-related injury or illness. |
| Orange Card (Pharmaceuticals) | May have a need for an Extras policy to provide cover for Non-PBS medication and pharmacy items. |
| Gold Card (All Conditions) | Very unlikely to need PHI as all medically necessary healthcare is covered by DVA. |

4

UNDERSTANDING THE AUSTRALIAN GOVERNMENT INCENTIVES AND PENALTIES

To encourage individuals to take out private health insurance, the Government has implemented one incentive and two penalties. These measures aim to alleviate the pressure on the public healthcare system and support those most in need of accessible healthcare.

Australian Government Rebate

The Government contributes towards your private health insurance premiums, reducing the overall cost of your PHI. Subject to age and income.

Medicare Levy Surcharge

High-income earners without appropriate Hospital Cover are subject to additional tax. It's crucial to figure out how much your Medicare Levy Surcharge is because often it can exceed the cost of a basic Hospital Cover.

Lifetime Health Cover loading

If you delay purchasing an appropriate level of Hospital Cover after 1 July following your 31st birthday, you face a 2% loading penalty on your private health insurance premiums for each year over the age of 30 you have not held Hospital Cover, up to a maximum of 70%. You will be required to hold an active Hospital Cover and pay that extra percentage on top of your regular premium price for 10 continuous years before this loading is removed.

While you are in service, you're exempt from these penalties. However, these are factors that will start applying on your transition date, so it is important that you are aware of and understand these incentives and penalties in order to make the best healthcare, tax, and financial decisions.[^]



WHY GET PRIVATE HEALTH INSURANCE?

Private Health Insurance

Private health insurance consists of two main components: Hospital Cover and Extras Cover, each offering various levels of protection. You have the flexibility to choose either type of cover individually or combine the different levels of cover to suit your specific needs.

Hospital Cover is there to support you during medical situations requiring Hospitalisation. It may assist in covering expenses such as accommodation fees and operating theatre costs during procedures like surgeries.

Extras Cover addresses services not covered or subsidised by Medicare. These typically include dental, optical, and physio services. We suggest you should only take out Extras Cover if you anticipate using these services. The value of your Extra's premium is reflected in the benefits you receive; the higher your premium, the greater the benefits.

Why take out Hospital Cover?

- Save on tax – Avoid Australian Government penalties.[^]
- Flexibility and choice – Ability to nominate when, who and where you receive care.
- Reduced waiting lists – Skip the lengthy public Hospital waiting lists, allowing you to get back to doing what you love sooner!
- Utilise government support – Access to Australian Government incentives.
- Ambulance cover.

Why take out Extras Cover?

- Reducing the out-of-pocket expenses for everyday health services such as dental and physio.
- Facilitate easier access to essential healthcare services.
- Manage your health more affordably.
- Lower the risk of unexpected healthcare costs.

If you value these benefits, private health insurance could be a worthwhile consideration for you and your family.[^]



6 DECIDING IF PRIVATE HEALTH INSURANCE IS FOR YOU

Determining whether Hospital or Extras Cover is suitable for you requires careful consideration of your life stage, health requirements, and financial situation.[^] Take time to evaluate factors such as your current health status, how you may be affected by the Government penalties, and the type and frequency of healthcare services you use.

7 COVER WITH NAVY HEALTH

Decided that Private Health insurance is for you?
Wondering which cover suits you best and which company will have your best interests in mind?

For more than just the Navy, we serve everyone connected to Defence

Navy Health is dedicated to serve everyone connected to Defence. We support serving and ex-serving ADF members, the thousands of employees and contractors tied to Defence Industry, and all their families. As a members-first fund, we believe everyone connected to Defence deserves peace of mind with the best possible health cover.

With a local, agile team we can provide you with exceptional service and value, offering more than the big health insurance players.

With specific transition benefits including:

- **Competitive pricing** – As a restricted fund with specific eligibility criteria, Navy Health is able to offer highly competitive pricing compared to larger, open funds.
- **10% Discount** – As acknowledgement of your commitment and sacrifice, Navy Health offers veteran white and gold cardholders a 10% discount off their premiums.*
- **All waiting periods waived** – Discharging members avoid all waiting periods and pre-existing condition restrictions by joining within 90 days of discharge (and commencing their cover from date of discharge).

Let's find the health cover that serves you best.

^{*}Terms & Conditions apply. For more information visit [Navyhealth.com.au/defence-discounts/](https://navyhealth.com.au/defence-discounts/)

We strive to offer a great deal more:

| | |
|---------------------------|--|
| More Understanding | We have a deeper understanding of Defence life and the challenges that accompany it. |
| More Support | With a true members-first approach we listen and respond with care. |
| More Responsive | We have faster, more responsive service with calls answered within minutes. |
| More Experience | Over the years we have gained expertise in navigating Defence-related healthcare complexities. |
| More Simplicity | We have uncomplicated products that make finding the right cover easy. |
| More Ease | We make the joining and claiming processes as simple and easy as possible. |
| More Care | Our not-for-profit status means our profits go towards minimising premiums and enhancing services. |

Family already have cover with us?

Joining your families cover is straightforward. However, keep in mind that adding yourself to their policy may affect the premiums.

Here's what you need to do:

- 1. Confirm Your Transition Date**
Know when you need your new coverage to begin.
- 2. Request a Quote**
Contact us at 1300 306 289 or scan the QR code to request a quote for adding yourself to the policy.
- 3. Arrange Your Cover**
Get the policy holder to reach out to us to set up your cover starting from your transition date.

Explore Your Options

Keep in mind, your family's current cover level might not suit your individual needs. It's a good idea to explore our different cover options to ensure you get the cover you require. This might mean upgrading to a higher level of cover to address specific needs that may not have been relevant while you were serving.



8

WHAT TO DO NEXT

Signing up to Navy Health is straightforward! We'll assist you throughout the entire process. All you need to worry about is choosing the right cover for you or your family.

1. Review and compare cover options

Visit our website at navyhealth.com.au/cover or contact us at 1300 306 289 to explore our cover options. Our team will help you compare different levels to find what suits you best.

2. Choose your cover and get a quote

Evaluate and select the cover that meets your family's needs and get a quote by visiting our website at quote.navyhealth.com.au.

3. Defence Discounts

Check if you qualify for any defence discounts. If you are transitioning out, Navy Health offers special discounts to DVA card holders. Explore these discounts in more detail at navyhealth.com.au/defence-discounts.

4. Set up your cover

You can join Navy Health and set up your cover either online via quote.navyhealth.com.au or giving us a call on 1300 306 289.

5. Start enjoying your benefits

Log into your Member Portal and download our Navy Health app to begin claiming.



Explore cover options today



Get a quote today





1300 306 289 | sales@navyhealth.com.au | query@navyhealth.com.au

Disclaimer: ^aThe information in this article is for general information only. Navy Health is not a financial adviser. You should consider seeking independent legal, financial, taxation or other advice to check how the information in this article relates to your unique circumstances. Navy Health is not liable for any loss caused, whether due to negligence or otherwise arising from the use of, or reliance on, the information provided directly or indirectly, by use of this article.