

Health Fund List (As of 1 April 2012)

Professional Benefits

As an Australian organization, the APMA is chartered to be active in improving the local professional and legal climate for our membership. This includes continued lobbying with the various Australian Health Funds for rebate for our services. Please find below the current Health Fund List. If you have more information about these or Funds not listed, contact the APMA Administrator

FUND NAME	NAME OF POLICY	COVER LIMIT	APMA MEMBER'S INFO
BUPA Umbrella Health funds MBF / NRMA/ SGIO SGIC/ HBA/ ANZ Health/ Mutual Community Health	Refer client to their health fund to check which policies are covered		Medical Referral by a GP or other allied Health Practitioner who has signed a 'Living Well' Programme Approval Form. The referral must state the client is attending Pilates to improve or prevent a condition.
AUSTRALIAN UNITY 13 29 39	Health Management	Refer client to their health fund to verify limit of cover	Lifestyle Script' from a physiotherapist or medical practitioner for a specific condition that would benefit from Pilates and length of treatment. Clients need an itemized receipt for the classes attended. The receipt/amount must detail the APMA member's name and address on letterhead or rubber stamp, ABN number, client's name, date of service and type of service. APMA member does not need to register.
TEACHERS FEDERATION HEALTH FUND 1300 728 188	Top Extras	Refer client to their health fund to verify limit of cover	<i>APMA Registered Instructors from Level 2 & Higher recognized.</i> Clients are required to produce an itemized receipt, which should list the dates they attended the classes, business name and ABN number. APMA member does not need to register as a general rebate.
AUSTRALIAN HEALTH MANAGEMENT 13 42 46	Health Improvement Extras	Refer client to their health fund to verify limit of cover	<i>Applies to Level 3 & 4 APMA certification only.</i> APMA members need to register by filling out an application form from AHM and include photocopies of their APMA membership, insurance and First Aid Certificate. <u>Clients</u> need to advise AHM <u>prior</u> to commencement and be referred by Med. Prac., Physio, etc.
MANCHESTER UNITY 13 13 72	Keep Fit Programme	Refer client to their health fund to verify limit of cover	Association & Member does not need to register. Clients are required to produce an itemized receipt, with business name and ABN number.
CBHS 1300 654 123	All extras cover	Refer client to their health fund to verify limit of cover	Association will register all APMA Level 2 & higher members. Clients are required to produce itemized receipt with APMA member name printed clearly, Studio address & phone number, Full name of CBHS member receiving instruction, Description of services provided, APMA membership number
GU HEALTH 1800 249 966	Value Extras Cover (previously called Ancillary cover)	Refer client to their health fund to verify limit of cover	Association & Member does not need to register. Clients are required to produce an itemized receipt, with business name and ABN number.
TRANSPORT HEALTH	Well Being Pool	Refer client to their health fund to verify limit of cover	Association will register all APMA Level 2 & higher members. Clients are required to produce itemized receipt with APMA member name printed clearly, Studio address & phone number, Full name of CBHS member receiving instruction, Description of services provided, APMA membership number
HBF	To be advised	Refer client to their health fund to verify limit of cover	APMA Members download the form off www.hbf.com.au and send it in with copy of APMA Certificate (Proof of Level). proof of current Insurance and proof of CPR/1st Aid.
HEALTH PARTNERS 08 8236 4524	Gold Extra	Refer client to their health fund to verify limit of cover	Association will register all APMA Level 2 & higher members. Clients are required to produce itemized receipt with APMA member name printed clearly, Studio address & phone number, Full name of Health Partners member receiving instruction, Description of services provided, APMA membership number

NIB 1800 175 377	Healthier Lifestyle	Refer client to their health fund to verify limit of cover	Association will register all APMA Level 2 & higher members. Clients are required to produce itemized receipt with APMA member name printed clearly, Studio address & phone number, Full name of NIB member receiving instruction description of service, cost of treatment and amount due.
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