



LOW VISION AIDS AND TECHNOLOGY CAMPAIGN

Government support for equitable access to assistive technologies

The Foundation has been raising this matter with successive governments since 2005, and now, in 2012, there has still been little progress.

The Chief Executive Officer has written to Jenny Macklin, Chair of the Select Council of Australian Governments (COAG) detailing the following:

- A whole group of Australians have been discriminated against because of an inequitable landscape for low vision assistive technology across this country. It just does not seem to make any sense whatsoever that if you have a hearing impairment you can (as a concession cardholder) receive support for a hearing aid regardless of where you live, but for a vision impaired person where you live determines how well you can read.
- There is no strategy or timeline for addressing this significant problem; neither in the short term nor under the reform process proposed by the Productivity Commission in its Inquiry reports on disabilities and aged care.
- A growing number of people will be adversely affected before the National Disability Insurance Scheme is implemented for those under 65 years.
- What's more, the proposed reforms themselves, across both disabilities and aged care, raise serious questions about accessibility and affordability for aids and technologies because of the proposed structure of the reforms.
- The Foundation is concerned that under the proposed disability and aged care systems, if a person has a disability acquired before pension age they will be able to access funding and services through the disability system, but those acquiring a vision impairment after pension age (this is most likely to be those with AMD) must rely upon the aged care system.
- Although the Productivity Commission recommends that no-one should be worse off under the latter system, it is of great concern that the growing number of older people with late onset disabilities (eg those with AMD) may not have access to a comparable level of service and equipment as those within the disability system.

In summary, not only will most people with vision impairment continue to experience the current inequity caused by differences across geographical location and income, they may experience further inequity by being disadvantaged in comparison to younger people with vision impairment.

We will not give up!

“I have asked, on your behalf, that the Select Council work with the State/Territory governments and the Federal government to address this situation now. People with vision impairment need a low vision assistive technology subsidy scheme that is consistent and equitable across geographical location, so that where you live does not determine how well you see. The subsidy scheme must ensure that low vision assistive technologies are within financial reach of people on low incomes, particularly Centrelink concession card holders, and it must not discriminate on the basis of age. The system must be accessible to all those who qualify, regardless of which side of 65 years of age they acquire a vision impairment”.

Julie Heraghty
Chief Executive Officer
Macular Degeneration Foundation



Private health funds – good news

We are pleased to report that Teachers Health Fund and NIB have now introduced benefits as a result of our ongoing representations. There has been a positive development with BUPA (formerly MBF), clarifying their benefit which was previously difficult to access; HCF has widened the scope of referring practitioners and Australian Unity have continued to provide benefits since our last update. Medicare Private (the largest provider) requires more information, which we have now provided. We will advise you in the next newsletter of the outcome.

In addition, a number of other funds, large and small, while not yet providing a benefit, have agreed in principle to introduce a benefit in the future, and we are in ongoing discussions with a range of other funds. In discussions with health funds it is clear that your representations have had an impact, so thank you so much.

Our 2011 MD Foundation Deloitte Access Economics Report has been invaluable in providing accurate statistical information on Macular Degeneration in Australia to health funds for their assessment of the benefit.

The following two pages provide an updated summary table of known private health fund rebates regarding low vision aids and technologies.

All efforts have been made by the Macular Degeneration Foundation to verify the accuracy of the information provided at the time of printing.

Private Health Fund Benefits

Teachers Health Fund (ph: 1300 728 188)

The Foundation is very pleased that Teachers Health Fund has engaged in positive discussions with the Foundation, and as a result, has recently introduced a benefit for low vision aids.

Benefit: Up \$100 (under 'Health Aids' category)

Limit per Product: For member on Ultimate Choice, Easy Choice and Comprehensive General Cover, 85% of the cost up to the \$100

Waiting period: Varies depending on product - contact fund for details

What you need in order to claim: Receipt with proof of purchase and a letter from a recognised provider (optometrist, ophthalmologist or orthoptist) that you have low vision

NIB (ph: 13 14 63)

After on-going discussions with the Foundation, NIB will introduce a benefit on hand-held 'Macular Degeneration Aid Devices' from 1 June 2012. NIB has informed the Foundation that the information provided below is an example of the benefit payable on two of NIB's products and that readers should contact NIB to confirm their benefit.

Benefit: For 'Hand-held Macular Degeneration Aid Device' (under 'Artificial Aids' category)

Benefit amount – 75% of cost

Limit: \$800 annual limit; 1 device claimable every 3 years

Product: Top Cover

Waiting period: 12 months

What you need in order to claim: Letter from ophthalmologist, optometrist, orthoptist or occupational therapist confirming low vision assessment; official receipt for vision aid

Benefit: For 'Hand-held Macular Degeneration Aid Device' (under 'Artificial Aids' category)

Benefit amount – 65% of cost

Limit: \$400 annual limit; 1 device claimable every 3 years

Product: Premium Extras

Waiting period: 12 month

What you need in order to claim: Letter from ophthalmologist, optometrist, orthoptist or occupational therapist confirming low vision assessment; official receipt for vision aid

Medibank Private - including AHM (ph: 132 331)

Currently no cover provided for low vision assistive technologies. Medibank Private has requested information from the Foundation which it is currently reviewing carefully.

HBF (ph: 133 423)

HBF currently does not provide a benefit for low vision aids. The Foundation has recently written to HBF, for the first time, to arrange a time to discuss the introduction of benefits.

BUPA (ph: 134 135) formerly MBF, HBA and Mutual Community

The Foundation thanks BUPA for introducing these benefits, and is very grateful to BUPA for agreeing to further consultations moving forward.

Benefit: Ranging from \$45 to \$90 (depending on level of cover, annual maximums apply)

Limit: \$120 to \$300 per annum (per person; some products will have a family limit)

Product: Most 'Extras' products (please contact BUPA for details of your specific product entitlements)

Waiting period: 2 months

What you need in order to claim: A letter from your ophthalmologist, optometrist or orthoptist to confirm you have had a low vision assessment; a receipt from a BUPA approved supplier, with company's address and phone number; date of item purchase; name of customer who purchased the item; the products supplied and the charges for them

Australian Unity (ph: 13 29 39)

Thanks to Australian Unity who continues to provide cover for low vision aids.

Benefit: 80% of cost (under 'optical' cover)

Limit: \$300 per person per calendar year

Product: LifeChoice Plus (hospital plus extras)

Waiting period: 6 months

What you need in order to claim: Must be prescribed by registered optometrist/oculist in private practice. Referral letter and receipt required

Benefit: 100% of the cost (under 'optical' cover)

Limit: Up to \$200 per person

Product: Comprehensive Extras

Waiting period: 6 months

What you need in order to claim: Must be prescribed by registered optometrist/oculist in private practice. Referral letter and receipt required

HCF (ph: 13 13 34)

HCF continues to pay a benefit on low vision assistive technologies under their 'artificial appliance' category.

Benefit: Low vision magnifying device: up to \$75

Limit: 1 per person every 3 years

Product: Multicover and Super Multicover

Waiting period: 12 months (for 'Artificial Appliance' category)

What you need in order to claim: Letter from ophthalmologist, optometrist, orthoptist or occupational therapist confirming low vision assessment; official receipt for vision aid

Benefit: Desk-top magnifying device (electronic) up to \$500

Limit: 1 per policy every 3 years

Product: Multicover and Super Multicover

Waiting period: 12 months (for 'Artificial Appliance' category)

What you need in order to claim: Letter from ophthalmologist, optometrist, orthoptist or occupational therapist confirming low vision assessment; official receipt for vision aid