



Heartbeat

THE NEWSLETTER OF *YOUR* HEALTH FUND

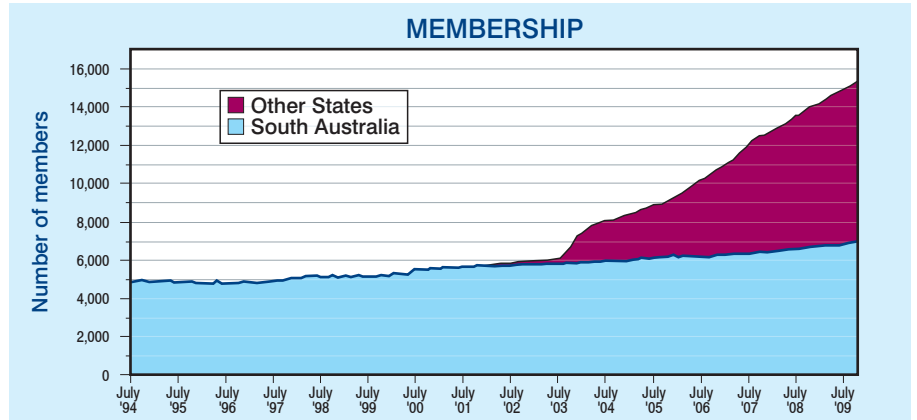


Chairman's Message

Welcome to our Christmas edition of Heartbeat. I hope that all of our readers have had a happy and healthy year. I would like to take this opportunity to talk to you about the last 12 months of Police Health.

As you are aware, the past year has been a very tough one for organisations such as ours who hold significant investments. While reasonably conservative in our investment policy, Police Health has not been immune from the global financial crisis and, as can be seen from the table below, we experienced a small loss for 2008/2009. While our income was higher, the year was made worse by a significantly higher number of claims than expected. On the other hand, it is pleasing we are able to help our members who were unfortunate enough to suffer illness or injury. After all, that is what our health fund is for!

Year	2007/8	2008/9
Income (\$ 000's)	\$41,135	\$48,509
Claims expense (\$ 000's)	\$37,272	\$45,167
Operating expense (\$ 000's)	\$2,991	\$3,634
Trading result (\$ 000's)	\$872	-\$292



Another significant event during the year was our transition from an Incorporated Association into a Company. This transfer was a requirement of the Private Health Insurance Act 2007 and cost around half a million dollars to make the necessary legal and administrative changes. I am sure that all of our members would agree that it is quite extraordinary that a not-for-profit fund such as ours, that only exists to serve our members, is forced to absorb that level of expense in order to comply with a regulatory requirement.

But, after all that energy and expense, it really is a case of business as usual. On a brighter note I am pleased to say that our growth in membership has continued at an exceptional rate, particularly from new members interstate (refer graph above).

It seems that in true policing tradition, word of mouth regarding our excellent service and benefits continues to bring in new members, ensuring that we are the preferred health insurer for police officers and their families. Our commitment to excellent customer service is highlighted by the terrific results of our customer satisfaction survey that culminated in Police Health receiving an award in Melbourne in June this year. I proudly accepted that award where we were recognised as having the "highest overall member satisfaction" of the 12 funds surveyed (please refer to a more detailed article in this addition). The

Board of Police Health is exceedingly proud of our staff and we are confident in assuring our members that they are getting the best service of any health fund in Australia.

Finally I would like to pay tribute to a long serving Board member who retired at our Annual General Meeting in November. Tony Woodcock has served our fund with enthusiasm and integrity over the past 13 years and he always put the members' interests before anything else. On behalf of the membership we thank you Tony for your contribution and wish you well in your future endeavours.

On behalf of the Board and all of the staff at Police Health, we wish you a healthy and happy festive season.

Peter Shanahan, *Police Health Chairman*

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Plus many more

Online Member survey gives Police Health highest rating

For the fourth year in a row Police Health has rated highly in the HIRMAA (Health Insurance Restricted Membership Association of Australia) membership survey.

The survey is part of an ongoing process to identify any issues and improve service standards - and Police Health scored well in all areas.

David Williams, managing partner of Discovery Research which has been responsible for conducting member satisfaction research for HIRMAA over the past four years, said he was astounded at the very high levels consistently achieved by Police Health.

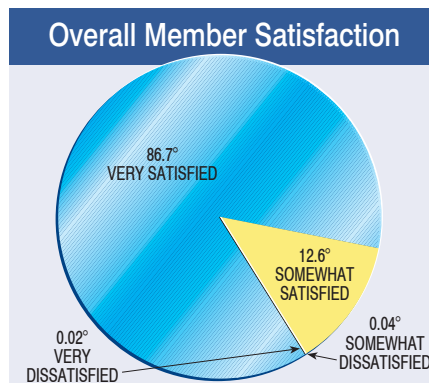
"I am sure that the levels of member satisfaction that Police Health attain would be the envy of most organisations - both in the private health insurance context and the broader business community," he said. "The growth in membership numbers that Police Health has experienced over this period makes their results even more remarkable."

"During periods of significant business growth many businesses find that customer service standards are incredibly hard to maintain - their resources being stretched and their capabilities being tested like never before."

"Police Health continues to receive extremely positive feedback from its members year in year out, showing a real dedication to providing excellence in member service."

The HIRMAA survey showed that member satisfaction at Police Health continues at high levels and in fact has increased with 87 per cent reporting they are 'very satisfied' while 13 per cent were 'satisfied'. Only three of 475 respondents said they were not satisfied. See pie chart following.

The result gave Police Health an overall customer satisfaction index of 92.6. This is a weighted method of scoring and for the fourth year running Police Health rated the highest of all the health funds surveyed (12 funds took part this year).



"The survey feedback not only allows us to benchmark ourselves so that we can improve our product, but by measuring ourselves against other health funds we can strengthen our focus on customer satisfaction," said Police Health Managing Director Michael Oertel.

"The survey confirmed that members want cover that is easy to understand with fast payment of claims - areas in which we rate highly."

"Significantly, a third of Police Health members reported that their level of satisfaction had increased over the past 12 months. But while we were delighted with the overall positive response, we've already begun implementing measures to improve our service."

In direct response to member feedback, Police Health is introducing BPAY and extending direct debit services in addition to existing payment methods. You can read about these elsewhere in this newsletter.

Michael said other initiatives planned for 2010 included taking our SA-based member newsletter national and a redesigned website which will be more user-friendly and with greater functionality.

Communication was one of the areas addressed by the member survey with 68 per cent saying they were 'very satisfied' with Police Health and 29 per cent were 'somewhat satisfied'.

Police Health also rated highly on the speed of claims being paid, with 86 per cent 'very satisfied' and 14 per cent 'somewhat satisfied'.

There was a strong message about the importance of maintaining existing benefits with well over half of the respondents happy with the current level of benefits.

Additionally, more than 80 per cent of respondents were prepared to pay modest increases in premiums to maintain the current level of extras benefits and 74 per cent were strongly opposed to reducing hospital coverage for lower premiums.

"Police Health will continue to provide meaningful benefits that remain relevant to today's rising costs of healthcare," said Michael. "The HIRMAA survey has helped confirm what we are doing right but has also identified where we can improve our performance so that we can work on moving members in the 'satisfied' group into the 'very satisfied'."

David Williams complimented Police Health on its approach.

"What particularly impresses me is Police Health's culture of continued service improvement for its members, whereby the feedback that the annual survey provides becomes an extremely important element in developing their future service improvement initiatives," he said.

Police Health thanks the 477 members who responded to this year's survey and for providing invaluable feedback on the fund's performance. Further comments are welcome anytime on 1800 603 603 or email feedback@policehealth.com.au

We would like to congratulate Andrew Dick, who was the lucky prize winner of our member survey competition. He was chosen at random from the 477 members who participated, and has won a luxury weekend for two, to the value of \$500. Andrew had this to say about Police Health: "Everything about my health cover is all great, the level of services is great."



Health Feature

When snoring becomes a health risk

Loud snoring is an annoying complaint that affects millions of Australians. For partners the condition can be extremely irritating and lead to sleepless nights.

For the snorer, the prognosis can be far more serious - chronic ill health or even death.

Snoring is often a symptom of sleep apnoea, a common breathing disorder that regularly goes undiagnosed despite affecting around one in 20 Australians.

Twice as many men as women are at risk of having the condition which can lead to high blood pressure, heart failure, stroke and even car accidents through tired drivers falling asleep at the wheel.

The chances of developing sleep apnoea increase as you grow older and if you are overweight. It affects at least one in 10 people over the age of 65 and women are more vulnerable after menopause.

Even though many people go through life unaware they are sufferers, there are tell-tale signs. Common symptoms resulting from poor quality sleep include tiredness, fatigue, memory loss, irritability and impotence.

What is sleep apnoea?

There are essentially three forms of sleep apnoea - central, obstructive and complex - and all relate to interrupted breathing during sleep.

The most common form is obstructive sleep apnoea (OSA). This accounts for 84 per cent of cases and involves a physical block to airflow.

Throat muscles that have the job of keeping airways open for breathing rest when we go to sleep. This can lead to OSA if:

- The muscles relax too much.
- The tongue and tonsils are unusually large.
- There is too much fat tissue in the wall of the windpipe, a particular problem among overweight people.

- People have the wrong head and neck shape.

The risk of OSA is higher among smokers and is three times greater for people with diabetes.

Central sleep apnoea is caused by a lack of respiratory effort, and is the least common form of the condition, accounting for less than one in 200 cases. It occurs when the neurological controls for regulating breathing malfunction and fail to give the signal to inhale.

About 15 per cent of people with sleep apnoea have both obstructive and central, which is known as complex or mixed. This condition tends to occur when OSA is severe and longstanding, and episodes of central apnea develop.

Signs and symptoms

The most common sign of obstructive sleep apnoea is chronic snoring, although even the loudest snorer may not have the condition. It's when the snoring suddenly stops, with a pause in breathing followed by choking or gasping, that is the clearest signal.

This reaction occurs when the oxygen level is dangerously low and the brain responds by rousing the sleeper.

In cases of central sleep apnoea, snoring is not necessarily a symptom - the sleeper simply stops breathing. During this pause there is no effort made to breathe and there is no struggling. Immediately after the episode, breathing may be faster in order to emit retained waste gases and absorb more oxygen.

Others signs and symptoms of the different forms of sleep apnoea may include:

- Headaches and a dry throat when you wake up.
- Tiredness, mood swings and feeling depressed.
- Difficulty in concentrating.

Children with sleep apnoea may be hyperactive, perform poorly at school and be aggressive. They may also have unusual sleeping positions, be prone to bedwetting and breathe through their mouths instead of their noses during the day.

If sleep apnoea goes untreated the long-term health consequences can be severe, particularly in serious cases. Sufferers have increased risk of high blood pressure, irregular heartbeats, heart attack, stroke and diabetes.

Diagnosing sleep apnoea

Despite the prevalence of sleep apnoea, it often goes undiagnosed.

There are no obvious signs for doctors to detect during routine visits and there are no blood tests to reveal its presence.

However, anyone who suspects they may have the condition should contact their GP, who will evaluate the various symptoms and explore if there is any family history.

To help your doctor it is worth keeping a sleep diary for a couple of weeks. Make a note of how well you sleep and ask your partner about any snoring patterns. Write down any other symptoms, particularly if you feel tired during the day.

Evaluation of these factors together with a physical examination of your mouth, nose and throat will help your doctor with a diagnosis. Patients suspected of sleep apnoea may require further tests such as an overnight sleep study.

This is usually conducted in a specialist sleep centre or hospital where your breathing can be monitored while you sleep.

Diagnostic tests often include a polysomnogram, or PSG, which records factors such as brain activity, eye movement, breathing and heart rate and the volume of air breathed during sleep.

A PSG is painless. All you have to do is sleep with various sensors attached to different parts of your body.

Other tests include monitoring carbon dioxide levels, the amount of oxygen in your blood and how well you remain awake.

Treatment options

The good news for people with obstructive sleep apnoea - and their partners - is that there are several effective treatment options.

Lifestyle changes can help clear up the condition, particularly in mild cases.



*Twas the night
before Christmas,
when all through
the house, not
a creature was
stirring,
not even
a mouse ...*



*... But Muriel was
contemplating
an alternative
use for her
spare pillow.*

Options include losing weight, cutting down on alcohol consumption, stopping smoking and avoiding medications such as sleeping tablets which relax the throat muscles.

Because older, overweight men have a higher risk of OSA, eating healthy and regular exercise are both important.

Sufferers can also try sleeping on their side and not on their back which helps keep the throat open.

In many patients, correcting any underlying medical conditions, such as large tonsils or low thyroid hormone levels, is sometimes enough to treat the condition.

In more severe cases, a CPAP (continuous positive airway pressure) mask, nose or throat surgery, or a specially designed mouthguard may be necessary.

Studies suggest that up to 20 per cent of central sleep apnoea cases resolve without treatment.

When conditions persist, treatment options include oxygen, nasal CPAP, or bi-level positive airway pressure (BiPAP). Some types can also be treated with drugs that stimulate breathing.

Ask your doctor

Remember, sleep apnoea is a potentially

dangerous condition, so speak with your doctor if you believe you are at risk.

Your health fund

Police Health members who have Hospital Cover can claim benefits towards the cost of a sleep study conducted by a recognised sleep physician in hospital.

You may also be eligible for benefits toward the cost of a CPAP machine if you are subsequently diagnosed with sleep apnoea and require treatment.



Police Health supports fitness and fun

Police Health is supporting good health through fitness and fun events next year by once again being the main sponsor of the SAPES Games and supporting SAPOL's Ride Like Crazy.



SAPES Games 2010

Anyone wishing to participate in next year's South Australian Police and Emergency Services Games will be able to register online from February 1.

The SAPES Games 2010 are being held between Friday April 30 and Sunday May 9 and are open to members of the following agencies and organisations:

South Australia Police

SA Metropolitan Fire Service

State Emergency Service, SA

SA Ambulance Service

Country Fire Service

South Australian Fire & Emergency Services Commission

Australian Customs Service

Australian Defence Force personnel

Australian Federal Police

Australian Protective Service

Aviation Rescue and Fire Fighting Service

Defence, Science & Technology Organisation

Department of Correctional Services

Australian Crime Commission

Northern Territory Police, Fire and Emergency Services

Office of the Sheriff of South Australia

Police Association of South Australia

Primary Industries and Resources South Australia

St. John Ambulance Australia

Surf Lifesaving SA

Transfield Services, Edinburgh Air Base

Department of Transport, Energy & Infrastructure

Volunteer Marine Rescue

For more details refer to the SAPES Games website www.sapes.com.au

Ride Like Crazy 2010

The fight against cancer takes to the roads again next year with SAPOL's Ride Like Crazy scheduled for Sunday January 17.

Participants have the option of riding the full 109.2 km or half ride of 53.2 km with all funds raised going to the Women's and Children's Hospital Foundation or Neurological Research Foundation for cancer research.

The first Ride Like Crazy was held earlier this year by friends and colleagues of SAPOL Senior Sergeant Mick "Crazy" Koerner who was diagnosed with an inoperable brain tumour in October 2008 and unfortunately passed away recently.

More than 600 supporters took part in the inaugural ride.

Due to its overwhelming success, SAPOL has officially adopted Ride Like Crazy as a community event.

For more details or online registration go to www.ridelikecrazy.com



Worth quoting

A good laugh and a long sleep are the best cures in the doctor's book.

Irish Proverb

New Payment options

Police Health is pleased to now offer BPAY as a payment option for payment of your premiums through quarterly, half yearly or annual renewal notices. These quarterly, half yearly or annual fees must be paid in full.

We have also broadened our current fortnightly payment options, of Police payroll and direct debits from Police Credit Unions. You can now pay your premium fortnightly through direct debit from any financial institution.

The introduction of these new payment options follows consideration of the valuable feedback that we receive from our annual customer satisfaction survey.

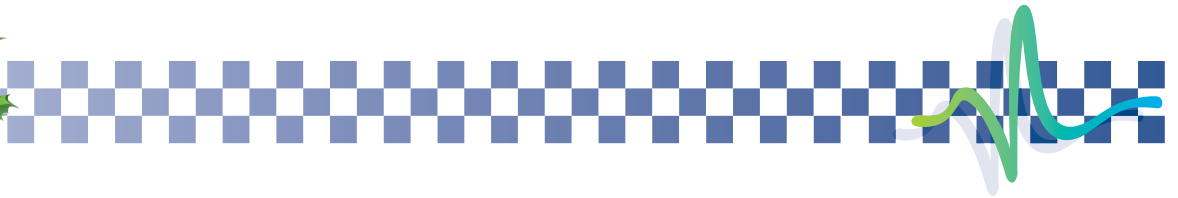
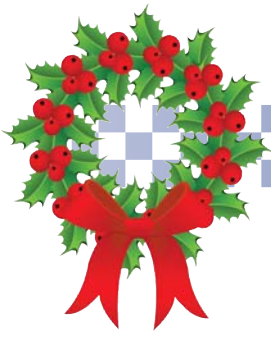
If you have any questions over these new payment options please contact Police Health.



Christmas closure

During this festive season, Police Health's office will be closed for customer contact from 3pm on Thursday December 24 until 8.45am on Monday January 4. Police Health will also be closed one hour early - at 3:45pm - on Friday December 18.

From the directors and staff of Police Health, we would like to wish all members and their families a very happy and safe Christmas and a prosperous 2010.



Police Health



YOUR HEALTH FUND

Police Health Limited.
ABN 86 135 221 519

PO Box 6111, Adelaide 5000.
339 King William Street, Adelaide.

Adelaide local phone: 8112 7000
Other areas phone: 1800 603 603 Fax: 8112 7099
Email: enquiries@policehealth.com.au
Web: www.policehealth.com.au

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