

Central

RT HEALTH CENTRAL MAGAZINE

FEATURE

Small changes can have a big impact

COMMUNITY

Meet our members

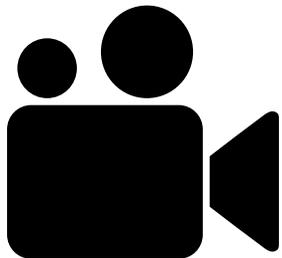
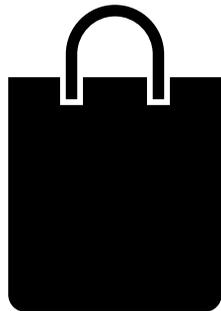
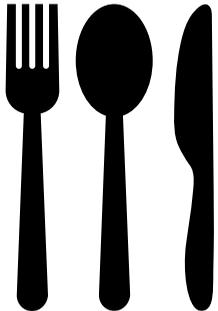
WELLBEING

Health checks by age: Are you up to date?



RT HEALTH





RT THANK YOU

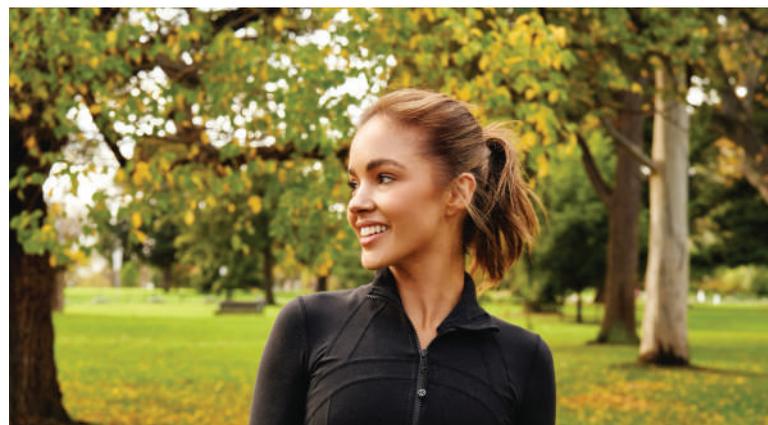
As Australia's first registered private health insurer, we know the value of looking after our members. RT Thank You is our way of showing you how much we appreciate you. And, our loyalty rewards program helps members ease cost-of-living pressures with access to significant savings on everyday household spending items like groceries and fuel, as well as shopping and entertainment. The RT Thank You range of exclusive offers will grow over time so the longer you're with us, the more ways we'll be able to say thank you*.

For more info, check out our website at www.rthealthfund.com.au/memberbenefits - or login via the online Member Service portal.

* RT Thank You excludes Ambulance Only members

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Central

Our members are the centre of everything we do. Our magazine is a place where our people and their stories come together.

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With yet another new financial year on the horizon, it's my pleasure to welcome you to the second edition of RT Health's *Central* magazine. I hope you enjoy the collection of stories about our community, teamed with informative content about how you can learn more about (and make the most of) your cover with us. Of course, we've included some insightful health pieces to help you stay in great shape.

The start of a new financial year always puts me in reflection mode. It's a great opportunity to think about the past six months and our ongoing commitment to providing even more value and care for our members.

Some great news for RT Health members recently when we announced we'd be returning another round of COVID-19 savings to members later this year. This is just another way we're supporting you as cost-of-living pressures continue to impact household budgets. If you're eligible, you'll hear more from us soon. It's rewarding to be able to support our members in this way and follows on from our decision to freeze premium increases back in April (for a further five months). And, members who were with us when we merged with HCF back in November 2021 will also get their second month of free health cover before the end of the year. These are great initiatives that underpin the everyday value we're able to provide by being part of the HCF family.

Our RT Thank You program (where you can access loyalty rewards and save on everyday household spending items like groceries and fuel, as well as shopping and entertainment) has been well received. We also recently introduced a 10 per cent discount on HCF Pet Insurance for RT Health members. It's wonderful to hear feedback from members who are enjoying these offers and discounts.

It's always nice to be recognised for the things you do best. Here at RT Health, we're very proud of the care we provide our members by helping them make the

right decisions when it comes to their health. We were thrilled to be named the Best Health Insurance for 2023 in the Product Review.com.au annual awards, an achievement of which we're justly proud. Health insurance can be complicated, which is why we're so pleased our members have told us they value our service when it comes to navigating their healthcare journeys. It really is our members and our community that makes us great - so thank you for your trust in us.

I love to see our members out and about at events that connect with our rich industrial heritage, but also allow families to make memories together. It was wonderful to see photos captured at the recent Day Out With Thomas™ event at Thirlmere's NSW Rail Museum. We were fortunate to be able to provide complimentary passes to local members, who got the chance to meet Thomas (and Sir Topham Hat), take a mini-train ride and enjoy all the fun family activities on offer.

Likewise, our recent Branch 2U events in Rooty Hill and Penrith drew a great reception from members in these areas. We look forward to bringing more events to you (in many different areas) as the year progresses.

In the meantime, we hope you enjoy this edition of *Central*.

Take care and be well

Simone Tregeagle
Chief Officer



Dr Craig Nossel

After heading up Discovery Vitality Wellness for 16 years, Craig co-founded Carenomix. As a medical doctor, Craig's passion lies in the health and wellness industries and in applying strategic thinking, innovation, product development and marketing, to drive positive health behaviour change.



Small changes can have a big impact

Charlie's alarm clock goes off at 6 a.m. on Monday morning. Within three seconds Charlie finds the snooze button to provide 10 more minutes of the warm, comfortable bed before needing to get up for the morning run. It's dark outside. It's cold outside. It's raining outside. Immediately, Charlie thinks:

"Maybe I should just do a longer run tomorrow?"

"Maybe I'll do an afternoon run?"

"Maybe I'll just eat healthy food today and skip the run altogether."

Charlie, like most of us, knows exactly why the alarm clock was set the night before - to get up early to go for a run. Charlie knows that regular physical activity is not only crucial for maintaining physical fitness but also plays a significant role in our overall wellbeing.

Charlie knows the multitude of health benefits, including

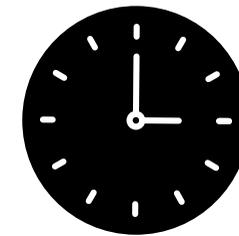
- lowering risks of heart attack, stroke, diabetes and high blood pressure
- lowering the risk of depression and anxiety
- improving mood and energy levels
- improving the quality of sleep
- helping with weight management.

However, despite being aware of these benefits, Charlie (just like many of us) struggles to incorporate exercise into our daily lives. We know that it just takes 30 minutes of some type of physical exertion (or even shorter periods of physical activity during the day) to get these great benefits.

We say we just don't have time. We often struggle to stay motivated. We want to put it off until tomorrow, because of the physical discomfort or feeling overwhelmed by the effort required. The immediate gratification of sedentary activities outweighs the long-term benefits of exercise. Sadly, 3.2 million across the globe die each year because they aren't physically active enough. In Australia, more than half of us are not active enough.

The reality is that maintaining an exercise routine is hard. However, there are ways to counteract our tendency to stay sedentary. These approaches to behaviour change solutions can be found in the science of Behavioural Economics. We can develop subtle interventions that can 'nudge' ourselves in a certain, hopefully positive, direction.

Here are three principles which may help starting and sticking to that exercise program, especially during the colder winter months.

**1. Commitment bias**

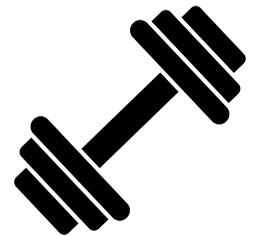
This is the tendency for us to 'be consistent' with what we have already done or said we will do in the past. Inconsistency is not a desirable trait and so we try to keep our promises and reflect consistency. Research conducted at Stanford University found that individuals who publicly committed to their exercise goals were more likely to follow through with their plans. Planning and goal setting can be very effective when it comes to exercise. Commit to work out on a specific day at a specific time (like this Tuesday at 8 a.m.) is much more effective than "sometime next week". You can also try adding this session to your calendar. The pre-commitment of having the workout scheduled can make all the difference if you follow through - or not. For added success share your commitment with friends and family, or even on social media channels. We're far less likely to fail if we feel accountable not only to ourselves but to others as well.

**2. Incentives and rewards**

An incentive is something that motivates us to perform an action and can therefore be effective in encouraging behaviour change. Two types of incentives exist: intrinsic, such as achievement and recognition, and extrinsic, such as money and prizes. If you're struggling to exercise, try incentivising yourself with a reward. Maybe you can only watch that next episode of your favourite television show if you go for a 30-minute run, or you can get yourself that morning cup of coffee if you walk the dogs. Don't underestimate intrinsic incentives though. Start a leaderboard with your family and friends to see who can achieve the most 'active days'.

3. Attentional bias

This is the tendency for our perception to be affected by our recurring thoughts. We can use the attentional bias to our advantage by placing visual cues around the house that will prompt us to think of exercise and be more active. Try putting some exercise



equipment out or make a sign that reminds you to perform basic movements such as "calf raises" by the stairs, "shoulder dips" by your chairs, or "push-ups" by your counter tops. By making everyday items act as reminders for exercise, we are more likely to be more active.

Social support is instrumental in maintaining motivation. Research published in the *Journal of Sport and Exercise Psychology* shows that individuals who exercise with a partner or in a group setting experience increased motivation and adherence to exercise programs. Engaging friends, family, or online communities can provide support and accountability, making the exercise journey more enjoyable and sustainable.

Hopefully when the alarm clock goes off again, Charlie will be aware of the commitment to walk with Sam for 30 minutes at 7 a.m. on Monday morning before getting a coffee together.

Olivia Molly Rogers



Authenticity is something that matters to Olivia Molly Rogers (that's one of the reasons we love her!). She's a former Miss Universe Australia, published author, qualified speech pathologist, mental health advocate ... and now a proud RT Health member. With 207,000 Instagram followers, Olivia's committed to promoting ongoing awareness and discussion about mental wellness and body positivity. We caught up with Olivia recently for a quick chat.



Q: Tell us a little bit about yourself. Where did you grow up? What was your childhood like?

A: I always find it tricky to answer this question briefly! I am a content creator, author, artist and model. I am also a speech pathologist (although I'm not currently practising) and I really miss working in that field. I grew up in Adelaide but I moved to Melbourne six years ago. I had a great childhood as the middle of three children, my sister, Eleanor, and my brother, Oscar. After my parents split up, Dad married my stepmum, Emily, and they had my brother, Jack, and my sister, Harriette. I am grateful to have such an amazing extended family, with plenty of cousins, aunts and uncles too. I definitely experienced some challenging times when I was growing up, but I was very lucky to always be surrounded by such a wonderful support network within my family. My siblings and parents are still back in Adelaide, and my sister now has two children, so I try to get back as often as I can to visit them.

Q: Wearing so many hats, your days must be extremely busy. Tell us a little about how you're able to maintain good mental health with such a busy schedule?

A: I make a conscious effort to do things that I know help my mental health; they are all very practical things but they are non-negotiables for me. The busier I am, the more I need to access my mental health tools to make sure I can maintain a level head. For me, this means planning ahead and ensuring I can squeeze in as much rest and downtime as possible to recharge.

Q: What are some health and wellbeing practices (tips) you do every day?

A: I exercise regularly but not every day as I also prioritise rest and sleep when I can. I eat lots of nutritious foods and drink plenty of water. I stay in regular contact with my close friends and family - Mum and I speak at least once a day and it's often one of my favourite parts of my day. This one isn't a daily practice but I see a psychologist every three to four weeks, which I find so helpful in keeping my anxiety at bay.

Q: How do you balance wellness and life in the public spotlight?

A: To be honest, it's an ongoing juggle as my schedule tends to change all the time. I can rarely predict what my next week or month will look like, so I try to stay consistent with my health and wellbeing practices so at least that is a constant in my life that I know makes me feel good.

Q: Your book *Find Your Light: Learning to Accept and Embrace Yourself* was released in 2021. Tell us a bit about what inspired you to write it?

A: I struggled with an eating disorder for about six years in my late teens and into my twenties. At the time, I hadn't seen many people openly share their experience with disordered eating, nor did I see people in the public eye who spoke about overcoming something similar. I decided to write the book to share my personal journey to recovery, with the intention to help young people experiencing eating disorders. I wanted to demonstrate to them that there is light at the end of the tunnel and life can be so incredible on the other side of an eating disorder.

Q: What are some daily practices that work for you (and some things that anyone can do often) to maintain good mental health and keep stress and anxiety at bay?

A:

- Get some fresh air; a little walk or jog outside can do amazing things for your mood
- Sleep - prioritise it like we do for children; it's so important for our mental health
- Eat wholesome, nutritious foods regularly
- Let natural light into your home where you can
- Talk! Be open and candid with your loved ones and seek support when you need it.

Q: You're a qualified speech pathologist. Tell us a little bit more about how you got interested in this field?

A: I know it's a bit cliché, but when I was younger I always hoped I would end up doing something that helps people. In my senior years at school, I loved psychology and biology and I considered going into medicine or teaching. I figured speech pathology was a good combination of these areas, so I gave it a go. I studied at Flinders University in Adelaide. The degree was really challenging but I truly loved it. I learned so much and became more invested in the world of speech pathology the more I studied. I practised for a couple of years when I first graduated, and then again in 2019 until the start of 2021. I'm not practising at the moment while I focus on other goals in my career, but I miss the job and I miss my clients.

Q: You're a new member of the RT Health family (we're thrilled!). Why is private health insurance (PHI) important to you?

A: Thank you so much, I'm thrilled too! PHI is important to me for peace of mind. We all have so many stressors in life and it can be so unpredictable, so knowing that you have PHI to support you when you need it takes away some of that stress. I like the reassurance that I can push myself and know that I will be okay.



Carl & Alma Ellefsen



Proud career railwayman Carl Ellefsen is just one example of the thousands of hardworking Aussies who've spent their working days in service to the railways. We spent some time with Carl and his wife, Alma, recently. Now both in their late eighties, they've been with RT Health for 70 years!



We're lucky at RT Health to have a community of members who can fondly recall the formative years of the railways – the busy days of the steam era and the ongoing development of the modern era.

Proud career railwayman Carl Ellefsen is just one example of the thousands of hardworking Aussies who've spent their working days in service to the railways.

We spent some time with Carl and his wife, Alma, recently. Now both in their late eighties, they've been with RT Health for 70 years!

Carl recounted some great stories from his 42-year career, starting from the romantic era of steam engines right through to the complexity of managing a busy stores complex in the 1990s.

Married in 1959, the couple is now retired and lives at Shell Cove on the idyllic NSW South Coast (after more than 40 years in Padstow). We loved spending some time with them to hear about their memories of their life as a railway family over four decades.

The era of steam. A career is born.

Carl started on the railways as an apprentice in 1952. It was the era of steam. He recalls in detail his work on steam engines and steam engine maintenance – and the training provided by the Railway Institute.

A five-month break for National Service in 1955 meant that Carl's apprenticeship went a little beyond the usual five-year indenture period.

Carl became a fully qualified fitter in 1957 and was set to work on two-and-four-car self-propelled rail cars manufactured at Rolling Stock Workshop.

"That was a highlight at the time because it was all new work and overhaul, and modifications and development," says Carl.

And this was just one of many career highpoints that took Carl across Sydney's rail infrastructure.

"In 1961, I had the pleasure of being the construction fitter on the first 620 railway set that went to Newcastle. I was fortunate enough to deliver it from the workshop to Newcastle. And after that I

had a stint of relief time in the planning office and we continued to manufacture the 18 sets altogether," Carl recalls.

Much of Carl's later career was invested in material supply – making sure stock and equipment was kept up to the busy rail network.

After 23 years at Rolling Stock, Carl relocated to Clyde, where an opportunity presented itself in a new workshop dedicated to maintaining freight wagons. He liked the work so much he stayed until 1985.

Opportunity again called when Carl went on to take up a supply officer role at the General Manager's Office in Redfern. He relished the responsibility of his new role.

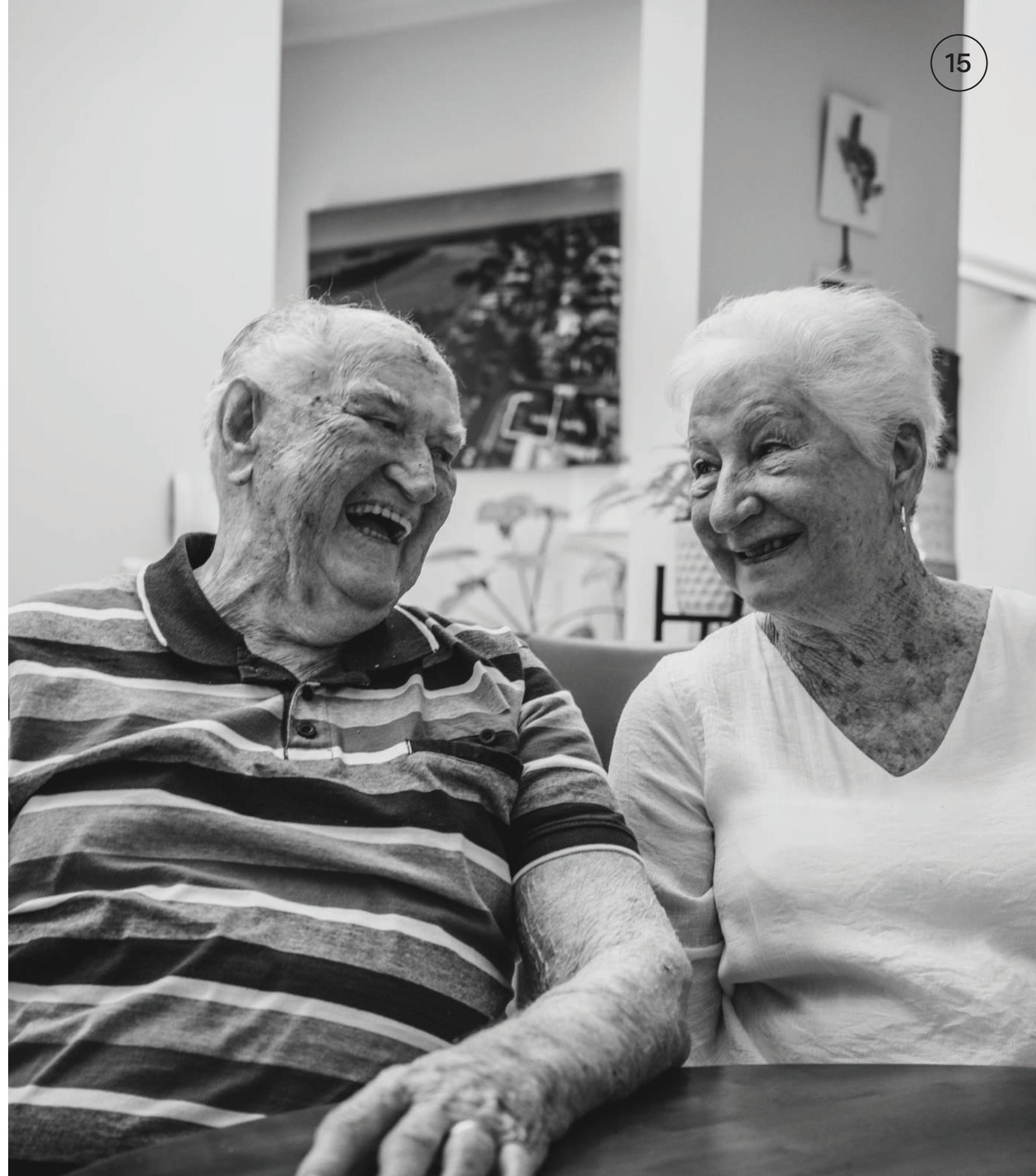
"Each workshop had to confer with me, so we ordered enough wheels and axles to maintain the system, what they were using in every quarter. And it was a very big bill. Sometimes in the early stages, it was around \$25 million a year," he says.

Inevitably the workshops closed, and Carl transitioned into reclamation work in the Storage Branch, identifying equipment and materials either unused or no longer suitable for use.

It wasn't long before a job came up as the manager of the City Rail Stores, a role Carl proudly took on for three years before retiring in 1993.

Carl was at the helm of stores for four branches – Elcar, Mortdale, Flemington and Hornsby – with the responsibility of \$33 million of stock to look after: thousands of items, from small components through to rail engines and motors.

"There were thousands of items, some probably as big as your thumbnail while others you couldn't lift unless you had a forklift. So that wasn't light work to start, but it had to be done," says Carl. "You might get a semi-trailer load of toilet paper one day and tomorrow you'd get an engine or a motor from one of the suppliers. It was a big program."



Fond memories. The Railway Institute.

One of the things Carl recalls most fondly is his years of training at the Railway Institute.

The Railway Institute was established in 1891 to provide for the education and welfare of railway workers in NSW.

Carl has great memories of five (and a bit!) years of learning and mateship at the Institute.

But it wasn't all work. He also remembers the comradeship and social events to sustain the rail workers.

"We could get library books. And then they had pool tables, table tennis, so there was sport available. So you'd go into tech, do your class and come out and have a half-hour of table tennis. And then you went back to the workshop, and at lunchtime they had table tennis and shuttlecock competitions in the workshop."

Carl also remembers monthly concerts presented by the workshop committees. He'd keenly pay his threepence a week to be involved. (This was the membership dues for the Railway Institute.)

"They used to have a big auditorium and an eating area, and the canteen used to serve you lunch. They had hot lunch service as well," says Carl.

"That was tops to get a meal, because the workshops were in places you couldn't walk out the front gate and get a sandwich ... A lot of the food was homemade by the cooks at the railway refreshment rooms at Central, down under Central Station. They used to cook all the meals and send them out to the workshop canteens. So, they all made homemade pies and slices. So, you got a pretty good deal." But it wasn't always fun and games. There was a lot of hard work. Carl's confident that apprentices of those days came to greatly value the training they received.

"It was good training. And all the apprentices, I don't think any of them regretted training in the Institute because it was top class."



The rail life

Carl knows he was fortunate to be able to live a settled family life alongside his family, while also progressing his railway career.

After marrying Alma in 1959, the couple moved to Padstow, where they lived for almost 41 years.

He says it was a lot harder for some families – with rail workers who were often away for extended periods and travelled large distances away from their wives and children.

"You had to move in the system to get grades. It was quite a lot; people used to come home on a Friday night with their washing and ironing and then Monday morning, they'd be on a train to travel to somewhere in the state where they'd be for the week, then back home on the train. Yeah, a lot of men had families where mum had to mind the kids while dad went to work," he recalls.

"A driver, fireman and guard could be away for two or three days, and then there were other specialised people who had to go around the state and supervise and see what was going on. That was the hardest part, I think, for a lot of the railwaymen and their families to get. Fortunately, I didn't have to do that and I got all my grades in Sydney."

Carl says he has a lot of respect for the teams who worked hard every day and sacrificed time with their families to keep the trains on the tracks.

"The driver and the fireman's life was very hard in those days. And the guard. It was always a three-men group, but they got to know one another so they often shared meals and stuff when they got to the barracks. So, they stayed in the barracks overnight if it was too far and they couldn't get a shift back," he says.

With some humour and a sharp wit, Alma recalls just how dirty the work could be, especially in the earlier days. She had the unenviable task of washing Carl's work gear.



"Carl always used to come home with this stuff on his gear. I thought they'd stand up on their own, they left so much gunk and stuff," she says.

Alma recalls the process of soaking the clothes for hours in hot water in a kerosene drum before even being able to handle them.

And Carl adds:

"The guys took it in their stride. They were black on Monday morning, they were still black Friday afternoon when they finished; so it didn't matter, they got used to it. That was the hard part, because in the steam depots it was dirty as you had grease and oil and coal mixed, and the steam engine blew out ash too, and that used to get into the oil and stuff on the foot pavement."

Proud Sydneysiders, Carl and Alma once declined an offer to move to Newcastle when their kids were young. They didn't want to leave what they'd established together in Padstow.

Proud RT Health members

Carl joined RT Health way back in 1952 (more than 70 years ago). Back in those days, agents for RT Health were stationed in the workshops to encourage the rail workers to become members. That's how Carl was introduced to the organisation that's helped look after his family's health for seven decades.

Reflecting on private health insurance, Carl and Alma are both grateful they've been able to protect their wellbeing with private cover.

"We really wouldn't be without our private health cover. Especially later in life we've used our RT cover many times, so it's been great for us," said Carl.

Ben Hall



RT Health member Ben Hall has proudly become a train driver 'later' in life. Ben made a career transition in his late thirties, and with great enthusiasm he spoke with us about his 'new' working life as a train driver ... and a few other things.





For many, a working life on the railways is in the blood; long-held, proud careers ingrained in the hardworking ethos of rail. For others, a newer breed of modern railwaymen, it can be a commitment that comes later in life, like it did for RT Health member Ben Hall, who discovered the pride involved in becoming a train driver 'later' in life, although at just 42, Ben's certainly got plenty of life ahead of him.

Ben made a career transition to the railways in his late thirties, and with great enthusiasm he spoke with us about his 'new' working life as a train driver.

First and foremost, Ben's a proud family man and home is Cringila, near Wollongong, where he and his wife, Alice, lead a happy but busy life raising their two young kids. While his new career at the helm of a train may be exciting, Ben's got a much bigger story to tell. He's an Australian representative at his chosen sport of roller derby, and also has a firm interest in the quirky community of medieval re-enactment.

Here's Ben's story.

Career transition. So, why become a train driver?

A few years back, Ben contemplated a career change. When a family friend suggested training as a train driver, Ben instantly saw the appeal. He was drawn to a sense of independence, but also the opportunity to work as part of a team in an important role. And he hasn't looked back.

After a period of intensive training, Ben became a qualified train driver in November 2018. He initially drove mainly out of Sydney's Mortdale Depot, and up and down the Illawarra line (from Bondi to Waterfall).

His routes sometimes took him to Cronulla, as well as Penrith and Hornsby on the weekends. More recently, Ben's been driving out of the Wollongong depot. And, he's relishing the view he gets from the driver's seat, even though it's not unusual for his route to include between 50 to 100 stops each day.

"The scenery always changes, so even though I'm mostly on the Illawarra (the Bondi runs), the city is always changing. So, in Sydney itself, there's buildings going up, there's construction, trees coming down (unfortunately).

"It's always changing. You never know what you're going to see on a daily basis," he says. "Since January, I've been driving out of the Wollongong depot and have an even better view of the coastline, all the way down to Kiama and on the little diesels (The Endeavour) to Bomaderry."

Ben speaks with great respect about the intensive training undertaken to educate and prepare train drivers.

You get to learn all your speed boards, the gradients, the stations, where the terminating locations are, where you can tun the train around," he recalls.

Plus, there are many different train models to learn.

"In the Sydney network, I was taught the Old Silver Set Trains, then we were taught the Millenniums. The Tangaras (which are on the Illawarra) are the ones I run mainly on my day-to-day work.

"And then there's the new trains: the Waratahs, both the A and the B sets."

Ben came 'off the street' (rail jargon for being new to the industry) so there was a lot to take in, but he speaks with pride about what it took to establish a new career as a train driver.

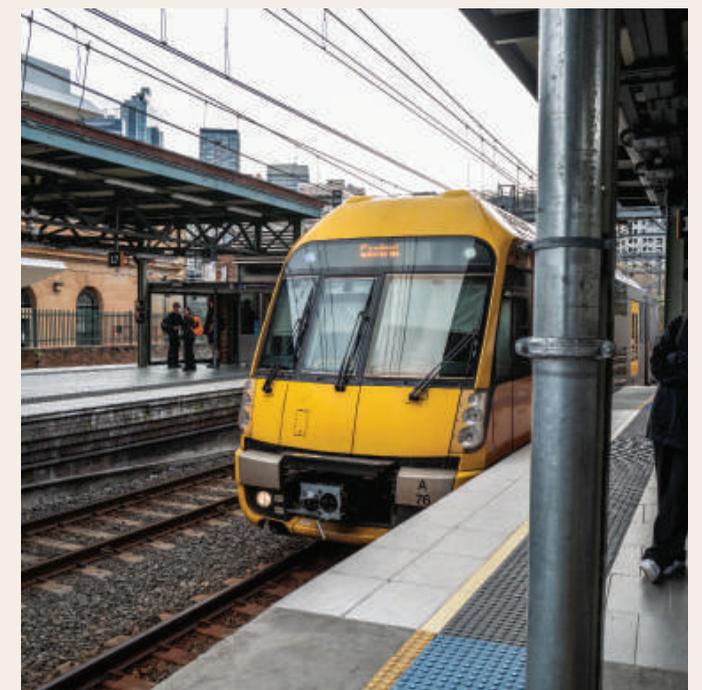
"You go through a safe working course, which is a couple of weeks in the training facility at Petersham. From there, you're taught what you can and can't do on the railways, you're taught how to read the signals that give you the proceed from station to station," he says.

He was trained in the three main sectors of the Sydney region - Illawarra, Central to Campbelltown/Macarthur, and Sydney's north (Penrith to Hornsby). His day-to-day work routine is based on a run-sheet system and starts with preparing or collecting the day's train, and driving all forecast stops - with designated breaks, of course.

But, we all know there's more to life than just work and Ben's interests and his zest for life spread far beyond just work. He's an accomplished sportsman (an Aussie roller derby rep) and has a passion for the historical medieval re-enactment community and events.

An Aussie sporting rep!

Representing our country is a big achievement, and one that Ben's justifiably proud of. He topped off a long career in roller sports with selection in the Australian roller derby team last year. His wife, Alice, initially introduced him to the sport, encouraging him to referee some games in the women's competition. Ben's always had a keen interest in roller sports (he played inline hockey - often known as rollerblade hockey) and it didn't take him long to take to the rink himself and have national selectors discover his roller derby prowess.





Reliving the far, far past

Ben and his family are keen history enthusiasts and attending medieval re-enactment events is something they enjoy together. Ben says he's part of a community of like-minded enthusiasts who gather to re-live the lives of medieval forefathers who lived centuries ago.

"Quite often for us, our holidays will involve some form of medieval re-enactment," says Ben. "I love four or five days of camping in period-style tents - so canvas tents, wooden frames. We're all in the gear and eating the traditional historical foods that they would have eaten between roughly 750 to 1100 AD."

His regular alter ego is a Scottish Viking character and Ben revels in the events that bring these themes together.

"So, my character is based on a Scottish Viking from around the 900s. I do have family history tied through the Scottish people, so I tend to try to recreate that persona and period, which means lots of research into what they would've worn, the type of weaponry they would've had, the types of food they would've eaten," he says.

Ben particularly enjoys the combat events - the swords, axes and spears used hundreds of years ago.

He's also drawn to the authenticity of the gatherings and the very real commitment to replicating medieval life - the combat, the dress, sleeping quarters and meals. All staying true to medieval history and the way life was lived in that era.

A proud RT Health member

If you're going to spend your spare time involved in contact sports and re-enacting medieval combat, it pays to have private health insurance.

Because the Hall family enjoys an active outdoor life with lots of physical activity, Ben sees the value of private health cover.

"I heard about RT Health right on what we call day zero, my very first day of employment," says Ben. "During that day there were a number of representatives from a couple of organisations that support Sydney Trains, and one of those organisations was RT Health."

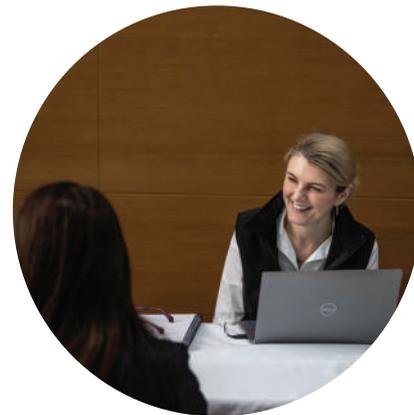
"I have been across the private health system for quite some time; obviously, being slightly older than 30, you do need to make sure you're covered."

"We certainly use our RT Health cover quite a lot. Optical cover is quite a big one for us. I also play a lot of different type of contacts sports, so I'll quite often use our cover for physiotherapy to make sure my muscles are in tip-top shape. Having the children, we also make sure we use the dental side of things as well," he says.

Ben's pragmatic when it comes to the value of private health cover for his family.

"It definitely gives peace of mind. Because we're such an active family it's amazing how quickly something like a broken bone can impact your life. Being able to have the best care - we're really lucky in this country; we have some really good care before we get to that private health - but being able to have that choice before going into the hospital, choice of doctor and how that care's going to work, really, really helps keep the stresses away when you're playing crazy sports."

On the road



The best part of our job is meeting our members where they are.

That means our team is often on the road getting out and about - whether it be in bus depots, industry conferences and events or at worksites. That's on top of our schedule of Branch 2U events and member visits. It makes for a busy calendar, but there's nothing we love more than being there for our members.

Transport Workers Union

Peta and Ali met around 150 Transport workers union (TWU) members when they visited FedEx sites in Enfield, Botany, Matraville and Erskine Park earlier in the year. They took the opportunity to chat with the workers about private health cover and our approach to supporting hardworking Aussies across the transport industry.

Annual Road Freight NSW Conference

Cockle Bay Wharf was the site for the annual Road Freight NSW Conference, where we met with workers from across the road transport and logistics sectors. Another great event, with many of the attendees taking the chance to have a free body scan on the day.

Meeting Ergon employees

Elaine and Peta enjoyed meeting Ergon employees in the North Queensland and Cairns areas late in April. She made the trip with Electrical Trades Union (ETU) Queensland Delegate Rob Hill and visited Ergon employees across four sites.

Waverley Bus Depot

Worksite visits are a regular thing for us at RT Health. Our team travels far and wide to spread the good word about how we can support people across the rail, transport and energy industries. Here's Ali on a recent visit to Waverley Bus Depot.

Day Out With Thomas™

Nothing makes us happier than treating our members to a fun day out, especially when there's lots of smiles and giggles involved.

Both were certainly obvious at the recent Day Out With Thomas™ program of events, hosted by the NSW Rail Museum at Thirlmere.

RT Health members enjoyed a fun family day out, with the opportunity to meet Thomas (and Sir Topham Hatt) high on the list of adventures. Many took the chance to meet Thomas, to climb into the driver's spot and toot his whistle!

And, a steam ride hauled by Donald, was a highlight. Unlimited mini-train rides, jumping castles, face painting and other fun activities made for a great family day out.

So wonderful to see families enjoying and embracing an event so aligned with our historical roots in the rail industry.



Maria Armstrong

One of the great things about our work here at RT Health is being able to celebrate our members. Milestones like 50 and 75 years of membership are certainly cause for celebration.

And we did just that when we called in on Maria Armstrong at one of her favourite places, Denison Bowling Club recently to present her with her 75-year membership certificate (and a lovely bunch of flowers).

Maria's been a member of RT Health ever since her late husband, Arthur, joined RT Health as a young railway worker. (He was just 16 years old).

We loved chatting with Maria about her life and family. Thank you and congratulations!



Our guide to your excess

We get it. Sometimes, private health insurance can be confusing. But at RT Health, we don't want it to be that way. We want you to have the information you need to make informed decisions about your health cover and your care – when you need it! That's why we've put together our Private Health Insurance Explained section. Useful, easy-to-read and easy-to-understand information on some of the important topics you'll want to know more about.

What's an excess and how does it work?

Having an excess on your Hospital cover can make your health insurance a little more affordable.

An excess is the pre-set amount you pay if you're admitted to hospital for planned treatment. Generally, the higher your excess, the lower your premiums will be (and vice versa).

Just like with your car or home insurance, an excess is the amount you contribute to the expense of your hospital treatment.

Choosing a Hospital cover with an excess is a way to reduce the cost of your cover, without reducing the level of cover you have.

You're able to choose your excess level when you first join. Or, you can change it to suit your needs at any time throughout your membership (but subject to waiting periods if you lower your excess).

So, higher or lower excess. What's best?

IF YOU SELECT A HIGHER EXCESS

Your premiums will be lower, but you'll pay your excess if you're admitted to hospital. So, you'll pay less for your premiums but you will pay more if you need to go to hospital.

While there's no way of predicting whether you'll need to go to hospital, you may want to consider a higher excess if you:

- are young and healthy
- think it's unlikely you'll need to go to hospital
- can afford the upfront cost of a higher excess.

IF YOU SELECT A LOWER EXCESS

You'll pay more for your premiums, but you'll pay a lower excess if you need to go to hospital.

Because you're lowering the amount you'll need to pay if you have to go

to hospital, reducing your excess is considered an upgrade to your cover. This means that you'll have to re-serve waiting periods before your new excess amount kicks in (your previous higher excess will still apply during this time).

You might want to consider a lower excess if you:

- have a history of health issues or concerns
- have made multiple hospital claims in the past
- think you may need to go to hospital in the future
- can't afford the upfront cost of a higher excess.

When do you pay your excess?

You'll only need to pay one hospital excess amount per person per calendar year.

Also, you won't pay hospital excess for dependent children (under the age of 22).

Depending on your level of cover, you won't pay an excess (or you'll only pay a reduced excess) on same-day hospital admissions (when you don't stay overnight at hospital).

If your Hospital cover does have a same-day admission excess, and you have multiple day admissions in a calendar year, you'll only pay up to the maximum of your full hospital excess amount, no matter how many admissions you have.

How do you pay your excess?

If you're going to hospital either overnight or for a same-day admission, hospital staff will ask you for your Hospital cover details and then contact us to confirm:

- that you're covered for the procedure you're having
- that your cover is paid up to date
- the amount of excess on your cover.

If you have an excess to pay, we'll let them know the amount and they'll let you know when you need to pay it. You'll pay the excess directly to the hospital.

Your excess is an out-of-pocket expense and can't be claimed back from the fund.

MLS, LHC and 'the rebate'. How do they impact you?

Here we are again. The end of yet another financial year. For some, there's life admin we need to take care of - tax time is a good checkpoint to make sure our finances are in order.

That means this could be the perfect time to check your private health cover aligns to your stage of life.

And to do that, you'll need to be across the various incentives and rebates that can help keep the cost of your cover down. It helps to know how your private health insurance may potentially impact you as the financial year ends (and a new one begins).

The Medicare Levy Surcharge (MLS) and the Australian Government Rebate on Private Health Insurance (commonly referred to as 'the rebate') are the main things you need to be across.

And if you're turning 31, you'll want to be across the Lifetime Health Cover loading (LHC) and how it can affect you if you don't have Hospital cover.

These incentives and rebates don't apply to everyone all of the time, so we've put together this explainer to help you on your way. More detailed information is available on government websites - check the links below.

Medicare Levy Surcharge (MLS)

Commonly referred to as MLS, the Medicare Levy Surcharge was created to take the pressure off the public health system by encouraging higher-earning Aussies to take out private hospital cover.

If you earn over a certain amount and don't have private hospital cover, you'll have to pay an additional amount. And the more you earn, the more you'll need to pay (up to 1.5 per cent of your taxable income). That's the MLS.

WHO NEEDS TO KNOW ABOUT IT?

From 1 July 2023, anyone earning more than \$93,000 a year (for singles) or \$186,000 a year (for couples and families). If you earn more than these thresholds and want to avoid paying any MLS you need to hold eligible hospital cover through the financial year.

WHAT IS IT?

If you earn over a certain amount (as outlined above) and don't have private hospital cover, you'll need to pay an additional 'surcharge'. This is calculated when you submit your annual tax return.

WANT TO KNOW MORE?

There are a lot of specific rules that may affect your personal situation, so you need to take care when getting the info you need.

That's why we recommend checking out the ATO website (www.ato.gov.au) for more information, including who is considered a dependant for MLS purposes. This will also help you get a better picture of how MLS may impact your personal situation.

We also have an information hub on our website (www.rthealthfund.com.au). Just take a look at 'Incentives and Rebates' under the 'Health Insurance' tab.

The Australian Government Rebate on Private Health Insurance

It's commonly called 'the rebate' and is a government incentive that helps Aussies with the cost of their private health cover. It's means tested, so the amount you're able to receive depends on things like your income, your age and the number of dependants you have.

WHO NEEDS TO KNOW ABOUT IT?

Anyone with private health cover.

WHAT IS IT?

The rebate applies to both your Hospital and Extras cover and is the percentage of your private health insurance the government pays for you. Most people want to get their rebate as a reduction on their premiums (we can help you with this application when you join or at any point you'd like to change) or claim it as a tax offset at the end of each financial year.

The rebate is income tested. That means depending on your age, income and the number of dependent children you have, the government will contribute towards the cost of your private health cover. The rebate percentage is generally adjusted on 1 April each year.

Just like MLS, there are a lot of specific rules and elements that may impact your personal situation, so it's best to get the most up-to-date information directly from the ATO website.

You'll find more details about the rebate on the ATO website or at www.privatehealth.gov.au

Lifetime Health Cover loading (LHC)

LHC is an incentive designed to encourage people to take out private hospital cover earlier in life; that is, shortly after you turn 31. The rules calculate the specific date (generally it will be 1 July after you turn 31) you need to have Hospital cover to avoid the LHC loading.

From 1 July following your 31st birthday, you'll pay a 2% LHC loading on top of the usual premium for each year you haven't had Hospital cover since turning 30. LHC can be charged up to 70%. The good news is you don't have to pay LHC forever; it will be removed from your premium payments after 10 continuous years.

LHC loading only applies to hospital cover, so you won't need to pay it on your Extras or Ambulance cover. However, you don't receive the government rebate for any LHC loading portion of your premium.

If you're turning 31, now's the perfect time to look at private hospital cover. Even if you're past 31, it's sensible to see how you can avoid LHC surcharges in the future. The longer you wait, the more LHC loading you'll need to pay.

WHO NEEDS TO KNOW ABOUT IT?

Anyone approaching 30 who doesn't want to pay more for their hospital cover. Plus, if you've previously had cover since turning 31 (but let it lapse), you'll want to be in the know about LHC.

NEED MORE HELP?

If you have any tax-related questions or need help in completing your tax return, you can call the ATO's Personal Infoline on 13 28 61, visit the ATO website, or speak with your registered tax agent or accountant.

If you have questions about your RT Health cover, just give our friendly team a call on 1300 886 123. Or, you can check in by sending an email to help@rthealthfund.com.au.

Your guide to protecting your kids ... for as long as you can!

We're helping you keep your kids covered for longer

At RT Health, we like to think of ourselves as a family. That's why we're doing everything we can to make it easy for you to keep your kids covered - no matter what age they are!

Here's our guide, from birth through to 31, on how you can make sure you keep your loved ones protected by your health cover.

Make sure they're covered ... from day one (by adding your newborn baby)

When the happy time comes to welcome your new arrival, it's important to add them to your health cover. This will help to avoid your child needing to serve waiting periods down the track.

It's a busy time ... but we'll need some details from you to be able to do this, so get in touch (by phone or email) to provide bub's full name and date of birth within 12 months.

If you have a family or sole-parent family membership, you can add your newborn within 12 months of their birth, and they'll be covered immediately (with no waiting periods to serve).

If you're on a single membership, you'll need to upgrade to a sole-parent or family membership to keep your bub covered. If you don't do this two months before bub is born, they'll need to serve all waiting periods.

Adding more kids to your cover - step kids, foster kids and adopted kids

If you have a couple, family or sole-parent family membership, you can add additional dependent children at any time, and at no additional cost. However, waiting periods may apply on claims you make for them.

If you have a single membership, you'll need to upgrade to a family or sole-parent family membership two months before your baby's due date. There will be an increase in the cost of your cover, but this will ensure your new family member is covered under your policy from day one.

If you're adopting or fostering a new family member, waiting periods may apply when adding them to your cover. To add adopted or foster children of any age to your membership, you'll need to provide copies of legal documents such as adoption papers and court orders. Don't worry, we're here to help you through the process.

All you need to do is contact us with the child's details (name and date of birth) to get them covered. If they've never been covered by health insurance before, they may have waiting periods to serve.

We'll talk you through your situation when you contact us.





So, what happens as the kids get older?

We know it's important to keep your kids covered by your membership as long as you can.

That's why we've made it easy to protect your kids for longer with our dependent student program and Family Extension covers.

We cover your kids as dependants until they're 22 years old. Then, it's time to keep us updated on how we can help.

You'll have two options:

- If your child is studying, you can keep them on your membership as a dependent student. We'll just need to check in with you every year for some paperwork.
- You can keep your kids on your cover until they're 31 with our Family Extension cover. It costs a little extra, but is much less than the cost of them taking out their own health cover.

We've outlined each cover below.

Cover for dependent students

We make it easy to keep your older kids covered by offering cover for full-time students aged between 22 and 31.

Dependent students are young adults covered by a family or sole-parent family membership who are:

- aged between 22 and 30 years (inclusive)
- a full-time student at school college or university in Australia
- unmarried and not in a de facto relationship
- are primarily reliant on the Principal Member (or Principal Member's partner listed on your membership) for maintenance and support
- related to the Principal Member or their partner as a child, stepchild, or foster child or other child that the Principal Member or their partner has legal guardianship over.

Keeping your child covered while they're studying is easy! We'll ask you each year to complete a registration form providing details about your child's course of study.

If we don't hear from you after the annual cut-off date for re-registrations, we'll need to remove them from your cover (they may need to re-serve waiting periods if you wish to add them back as a student dependant later on).

Part-time students and apprentices are not eligible for cover as dependent students (but you may be able to keep them covered by taking out a Family Extension cover).

Cover 'til they're 31!

Our Family Extension cover is an option for families who have part-time students, apprentices or working adult children aged between 22 and 31.

Adult children who aren't eligible for cover as a dependent student can stay covered under a family or sole-parent family membership with Family Extension cover.

There's an additional cost, but it's only a fraction of what they'd pay for their own individual health cover.

This option is available on our Gold Hospital cover (excess options only) or our Silver Plus Assure covers. You're able to choose an Extras option to purchase with each of our Hospital covers.

Keeping the adult kids in the RT Health family

When it's time, we'll help you to pass on the benefits of RT Health membership to your adult children.

Once they're 31, it's time for the kids to get their own cover. If they transfer to their own membership within two months of leaving yours, and join an equivalent or lower level of cover, they won't need to serve any waiting periods (provided they pay contributions for the period from when they were last covered under your cover).

And, you'll be confident their health cover is sorted as they'll stay part of the RT Health family as they move into the next stage of their lives.

So, who is a dependent child?

Your dependent children can be covered under either a family or a sole-parent family membership. This includes our Family Extension covers that help you cover your kids up to age 31, whether they are studying or working.

Here are a few fast facts that might help you with any questions you have about your cover and dependent children.

- A dependent child is the natural, adopted or foster child of either or both adults on the membership, so it can include your stepchildren.
- Children can be covered by your sole-parent family membership whether or not they live with you full-time.
- At RT Health, we cover your dependent children under your family or sole-parent family membership until their 22nd birthday provided they are listed on your policy.
- Your adult children between the ages of 22 and 31 who are studying full-time may be eligible to remain on your membership as a 'student dependant' at no added cost. We'll be in touch every year so you can re-register or de-register your child.
- Some of our covers offer Family Extension. We make it easy for you to cover your adult children (between the ages of 22 and 31) who are not studying full-time to remain on your membership for a small additional cost (much less than the cost of them taking out their own membership).
- Once they turn 31, it's time for your kid to take out cover in their own name. We can help them every step of the way.



One in four of us in Australia will die from heart disease. But by taking better care of our hearts with some easy-to-adopt, healthy habits, we can prevent heart disease.

How to prevent heart disease and live a healthier life

Cardiovascular disease (CVD) – which includes conditions such as stroke, heart disease and diseases of the blood vessels – is one of Australia's most common health problems, affecting 1 in 6 Aussies. But in many cases it's reversible, and even entirely preventable by making some changes to your lifestyle.

For example, if you're overweight – or carrying too much fat around your waist – losing just a little weight can improve your heart health. A loss of as little as 5% of body weight can improve your blood pressure and blood sugar, lowering your risk of CVD.

"The good news is that modern medicine is diagnosing heart disease earlier than previously and providing better outcomes," says Dr Terri-Lynne South, Medical Director at Lifestyle Metabolic.

While men are 40% more likely than women to die from CVD, women are still at risk. But this can often be prevented with healthy choices and lifestyle changes.

"Research has shown that women who maintain a healthy weight, eat a healthy diet, exercise regularly, and do not

smoke are 84% less likely to experience clinical heart-related events than women who don't do these things. It's never too late to change your lifestyle to reduce your risk of CVD," according to Dr South.

The link between weight gain and heart disease

An inactive lifestyle and weight gain often go hand-in-hand. According to the Australian Bureau of Statistics, 2 in 3 Australians are overweight. Staying within a healthy weight range in the first place is one of the best preventions for heart disease, and this is something that many of us can control.

"The younger you start, the better," says Dr South. "When you're young it's easier to avoid the risk of weight gain. Excess body weight in adults is often associated with significant life changes and events, like being less physically active as we leave school or university and join the workforce. For women, becoming a parent is often a time associated with weight gain. Being more mindful of these risky times, and placing a higher priority on avoiding weight gain in the first place is better – and easier – than trying to reverse the consequences."



A physically active lifestyle can lower your risk of heart disease

Your lifestyle choices can make the difference between being at high risk of CVD and keeping your heart healthy. The first step towards better heart health is understanding what your risk factors are, and how they affect your long-term health.

“Health professionals often talk about heart health risk factors, but having two or more risk factors for heart disease is so much worse than only one,” says Dr South. “The risk factors don’t just add up, they multiply.”

Leading an active lifestyle can help manage or prevent multiple risk factors for heart disease. It can lower blood pressure, decrease insulin resistance (associated with a higher risk of type 2 diabetes), counter stress, improve sleep, and reduce blood fats like cholesterol and triglycerides (a type of fat, known as a lipid, found in your blood).

“Being more active doesn’t have to mean going to the gym,” says Dr South. “Getting more steps in your day – even just 1,000 more than usual – will make a difference. This could be as simple as walking to the bus stop, taking the stairs instead of a lift or escalator, or going for a 20-minute stroll at lunch or after dinner.”

Managing the risk factors leading to heart disease

There are some risk factors for CVD that you can’t control, like your age or family history of heart disease. But focusing on what can make a difference to your heart health is key. To help protect your heart, The Heart Foundation recommends that you:

- stop smoking
- follow a healthy eating pattern
- be more physically active
- lower and manage your cholesterol, blood pressure and blood sugar
- maintain a healthy weight
- lower your stress levels.

It’s also important to know that women who are at a greater risk of developing heart disease are those with:

- polycystic ovary syndrome
- premature menopause
- some cancer treatments
- depression
- pregnancy complications
- autoimmune conditions and their treatments.

How does your diet affect your heart?

Over the past few decades, diet-related heart problems have become more common, in part because we’re eating higher levels of salt, saturated fat, sugar, processed foods and junk foods.

“Poor diet is one of the leading risk factors for heart disease in Australia, which is why one of the most important things you can do to reduce your risk of heart disease is to eat a heart-healthy diet. This means consuming a variety of healthy foods from the five food groups,” says Deepti Khatri, Accredited Practising Dietitian (APD).

Saturated fat is one of the main villains in the fight against CVD. Fats found in processed meats, full-fat dairy products and many takeaway foods increase our levels of LDL (‘bad’) cholesterol, which is strongly associated with heart disease.

On the other hand, unsaturated fats (also called monounsaturated and polyunsaturated fats) help reduce LDL cholesterol and increase HDL (‘good’) cholesterol. Healthier fats are found in olives, avocados, nuts, salmon and tuna.

“Try to include two to three portions of oily fish like salmon, tuna or sardines per week,” says Deepti. “These are high in omega-3 oils, which help reduce the risk of heart disease and stroke. Aim for five serves of vegetables and two serves of fruit per day. They’re an excellent source of antioxidants, which help prevent heart disease, and they’re also a great source of soluble fibre, which helps reduce LDL cholesterol.”

Also, try to eat less salt. Around 70% of the salt in our diet comes from processed foods like bread, breakfast cereals, canned vegetables and sauces.

“High salt intake can increase high blood pressure and lead to increased risk of heart disease and stroke,” says Deepti. “Try to avoid adding salt to food and instead use herbs and spices to season your meals when cooking.”

Smoking and heart health

Major smoking-related health conditions include cancer, lung disease and – you guessed it – heart disease. While the daily smoking rate for Australians aged 18 and over has dropped from 20% in 2001 to 10.7% in 2021, latest figures show that smoking still accounts for 50 preventable deaths every day. According to research by Better Health Victoria, if you smoke, you’re four times more likely to die of heart disease.

“Smoking can be one of the hardest addictions to kick,” says Dr South. “But the benefits of quitting smoking for your heart health will begin to appear after only a few months – and you can reach that of a non-smoker in several years, even among older adults.”

Tips on eating for better heart health

Breakfast: Rolled oats are high in soluble fibre, which can help lower LDL cholesterol. Start the day with porridge or natural untoasted muesli, with low-fat milk and fresh fruit.

Snacks: Keep the fruit bowl filled for fast, nutritious treats. Keep chopped cucumber, carrot, celery and capsicum in the fridge and pair with a tablespoon of all-natural nut spread or hummus for a nourishing snack.

Lunch: If you can, cook extra for your evening meal so you can have leftovers for a healthy lunch. Load up your plate with steamed vegetables or salad – they’re low in kilojoules, high in vitamins, minerals and antioxidants, and full of dietary fibre to help you feel fuller for longer.

Dinner: Try to have a meal plan for the week so you’re less likely to fall back on takeaways. Choose lean cuts of meat and remove any fat (and the skin from poultry) before cooking to stop the meat absorbing it. Cook in bulk to save time. Soups, stews and casseroles are all easy to cook in bulk and then freeze in portions for later use.

See your doctor if you’re experiencing any of these symptoms – they could be a sign of an underlying heart health risk factor:

- chest pain
- unusual shortness of breath when you’re exerted or exercising
- unusual tiredness.

Health checks by age:

Your guide to staying on top of your health with the right screening checks for every life stage and age.

When it comes to your health, prevention is better than cure. Screening programs are designed for people who aren't showing any signs or symptoms. So even if you feel healthy, it's wise to keep up to date with your check-ups.

That said, it's important you also keep an eye on your body and visit your GP if you see any changes like a lump, new mole, sudden weight loss or change in bowel habits.

These recommendations refer to health checks for the general population but if you have specific risk factors – or a family history of a particular condition – be sure to seek individual advice from your GP.

In this article, we'll take you through health checks recommended by the experts for every age and every stage.

All

Melanoma/skin cancer

When: Check your skin regularly.

What: GPs can do a skin check to look for skin cancer or may refer you to a dermatologist (a specialist doctor who diagnoses and treats skin conditions). It's also recommended you check your own skin regularly as it's important to get to know your skin and what's normal for you, so you can notice any new spots or changes to existing freckles or moles.

The Cancer Council recommends undressing completely so you can check your entire body. Use good light and a hand mirror during self-checks to examine existing and new moles, freckles and spots for flaking, bleeding, crusting, weeping, or ulceration (skin that looks like an open sore). Look for changes in colour and shape, or spots that appear dry, scaly, pearly, pale red, lumpy, or feel itchy or appear inflamed.

Ask a family member to help you to self-check your skin by inspecting areas you can't see, like shoulders, back, ears and scalp. Remember to check your lips, palms, soles of the feet, between fingers and toes (and under nails). To look out for melanoma, the Cancer Council of NSW recommends the ABCDE system:

- Asymmetry of spots
- Border irregularity
- Colour combinations (e.g. black/blue)
- Evolving spots.

See your GP right away if you notice any changes.

Dental health

When: Every 6–12 months or based on your dentist's advice, as recommended by the Australian Dental Association NSW.

What: Dental check-up. Poor dental health increases your risk of dental cavities and contributes to gum disease, which is linked to heart disease and other health issues. So practise good oral hygiene and see your dentist and dental hygienist for regular checks, as well as a scale and clean to remove plaque from teeth.

20s

Cervical cancer

Who: Women who are aged 25–74 (and have a cervix), or women who are, or have been, sexually active, should have cervical screening, according to the Federal Department of Health. Register with the National Cervical Screening Program, and get reminders when your next test is due.

Are you up to date?

When: Every five years.

What: Cervical screening test. In 2017, the Pap smear test was replaced with a new human papillomavirus (HPV) test. To detect cervical cancer, a doctor or nurse removes a small sample of cervical cells with a long, thin swab. These cells are placed on a glass slide that's then sent to a lab where the cells are analysed for signs of HPV infection (which can cause cervical cancer in some women). While the Pap test looked for cell changes, the current cervical screening test looks for HPV and, if it's present, checks cells to detect any changes.

Testicular cancer

Who: Testicular cancer is most common in men aged 20–40.

When: Self-exams are recommended once a month by Better Health Channel.

What: Located behind a man's penis, in a pouch called the scrotum, are two glands called the testes, which normally feel firm and smooth. Testicle self-examination is important to check for testicular cancer, because it can have a very good treatment outcome if found early. See your doctor if you notice any changes, like a hard lump – the most common sign of testicular cancer, which often only occurs in one testicle.

30s

Heart disease

Who: People over 45 (or over 30 if Aboriginal or Torres Strait Islander).

When: Every two years according to the Heart Foundation.

What: A Heart Health Check. During this exam, your GP will discuss your diet, exercise, family history and heart health risks, like smoking or obesity. Your blood pressure will be checked and your doctor will order blood and urine tests. They'll be looking out for high blood pressure, high cholesterol or kidney disease.

Diabetes type 2

Who: Everyone from 40 years of age (or 18 if Aboriginal or Torres Strait Islander).

When: Every three years according to the Department of Health.

What: AUSDRISK: This questionnaire, which you can fill in yourself or with your doctor or nurse, assesses your risk of developing type 2 diabetes over the next five years. If you get a 'high' score, ask your GP if you're eligible for a special type 2 diabetes risk evaluation. You're at higher risk if you have:

- an AUSDRISK score of 12 or more
- cardiovascular disease
- a history of gestational diabetes
- polycystic ovaries
- a history of prescribed antipsychotic drugs.

Do doctors test for diabetes during check-ups? Sometimes, depending on your symptoms and risks. Discuss your family and personal health history with your GP, who can advise how often you should have a fasting blood glucose test. This involves an overnight fast followed by a morning blood test to check your blood glucose levels.

Pre-pregnancy health checks

Planning a pregnancy? Before you try to conceive, see your GP to have a:

1. full medical check and women's health check
2. blood test to check your:
 - vitamin D levels
 - antibodies to German measles (rubella) and chickenpox. If low or not detected, your doctor may suggest a vaccine top-up
 - Rhesus factor, an inherited protein that could affect your baby
3. discussion about:
 - lifestyle, including your diet, exercise, alcohol intake and any medications you're taking
 - taking a folic acid supplement, which can benefit your baby's health.

Health checks by age:

50s

Bowel cancer

Who: People over 50. The National Bowel Cancer Screening Program is free for Australians aged 50–74.

When: At least every two years according to the Cancer Council.

What: Faecal occult blood test (FOBT). Early bowel cancer can be successfully treated in 90% of cases. So, when you turn 50, the government will send you a test kit in the mail. Using this, you provide stool samples from two or three bowel motions. The Cancer Institute of NSW offers a quick 'how to' online video demonstration. After you've collected the samples, you pop them in a reply-paid Australia Post envelope, and they're sent to a special lab to be analysed.

The FOBT can detect even microscopic amounts of blood in your stool, which could be a sign of bowel cancer. If any traces of blood are found, your doctor may order more tests, such as a colonoscopy. It can also be helpful to learn more about bowel cancer prevention, so that you can make lifestyle changes to reduce your risk.

Breast cancer

Who: Women aged 50–74 qualify for a free mammogram through BreastScreen Australia. Women aged 40–49, and over 74, can also be screened free of charge, on request.

When: Every two years or more often, depending on your family history and health risks, according to BreastScreen Australia.

What: Mammogram. Each breast is pressed between two X-ray plates, which spread the breast tissue out so that clear pictures can be taken to detect any changes that could be signs of cancer. Mammograms can pick up very small lumps and breast changes. If you have risk factors, like family or personal history of breast or ovarian cancer, ask your GP if you need more frequent screening.

At home, check your breasts once a month, palpating gently all over your breasts and under the arms so you get to know how they normally look and feel. If you notice any breast changes, see your doctor.

Bone density

Who: Healthy Bones Australia recommends a bone density scan for men and women over 50 with risk factors, such as low body weight. People under 50 with other risk factors, such as long corticosteroid medication use, premature menopause and excessive alcohol intake, should also have a bone density scan.

When: As recommended by your GP.

What: Bone density DXA scan. This takes 10–15 minutes and measures the density of your bones using low-dose X-rays, usually at the hip and spine. During the scan you lie flat on a padded table while a large scanning arm will slowly pass over your body to measure bone density in the centre of your skeleton.

Medicare may make a contribution to a bone density scan if you meet specific criteria. Otherwise, you may have out-of-pocket costs to pay, as medical and health practitioners, including diagnostic imaging providers, are free to set their own fees for the services they provide.

Prostate cancer

Who: Mostly men aged 50+

When: As medical opinion is divided about the pros and cons of screening regularly for prostate cancer, there's no national screening program in Australia. This means every man needs to make a decision about screening, based on factors such as family history, ongoing health risks and GP advice. You should also consult your doctor if you develop any possible symptoms of prostate cancer, including pain or difficulty when urinating, or blood in urine or semen.

Are you up to date?

What: Digital rectal examination (DRE) – your doctor gently inserts a gloved finger into the rectum to feel the prostate gland for any signs of change, like a hardened area or change in shape of the gland. If your doctor believes further testing is warranted, they might also order a prostate specific antigen (PSA) blood test, as an elevated PSA can sometimes indicate cancer.

For a quick online hearing check, you can also use the clinically-proven Blamey Saunders Speech Perception Test. It takes 10 minutes and gives you a result right away.

Through our partnership with Blamey Saunders hears, you could get 100% back* or a reduced cost on a range of high-quality hearing aids (one per calendar year).

You can also access free online tools to better understand your hearing.

To find out more go to Blamey Saunders hears or call 1300 443 279.

60s

Visual and hearing impairment

Who: Everyone aged 65+

When: Every 12 months.

What: Eye and hearing tests, according to Better Health Victoria. Without optimal vision and hearing, we lose the nuances of colours, such as a sunset, and engaging in conversation. So, changes to these senses should be detected early to minimise their impact on your everyday life.

To assess your vision, your GP will use a Snellen chart (the large chart with letters decreasing in size). To check for hearing loss, your GP will ask questions to determine if your hearing is declining and may send you for hearing tests.

On-the-spot health checks at the GP

Your doctor can do the following quick checks during a consultation:

Body Mass Index (BMI). A healthy weight range is 18.5 – 24.99.

Waist measurement. A waistline of more than 80 cm (for women) and 94 cm (for men) could increase the risk of health issues.

Blood pressure (BP). This should be checked from age 45. Your GP will attach an inflatable cuff, usually to the upper part of your arm, to measure your blood pressure. Normal blood pressure is around 120/80. Your GP will let you know if you need any follow-up tests.

Urine dipstick tests. After you give a urine sample, these can be used to check if there's evidence of issues like a urinary tract infection, to assess your blood glucose levels, or check kidney function. If results are not normal, your GP will order follow-up tests.

Mental health. There are many different questionnaires your GP can give you to assess your depression and/or anxiety levels. The DASS-21 and K10 checklists are commonly used, but there are also mental health surveys tailored more to specific cultural backgrounds and issues, such as postnatal depression.

How being an active participant in your health care can help you live a longer, healthier life.

How to be your own health advocate

People who act as their own 'health advocate' are more likely to live healthier and longer lives, according to a report by the Australian Health Policy Collaboration.

GP Dr Ryan Harvey agrees: "At the end of the day, it's your body and you're ultimately responsible for your own health. This is why it's important to be your own health advocate. No-one should care more about your health outcomes than you."

Other than following general health recommendations, such as eating a balanced diet, exercising for at least 30 minutes a day and getting plenty of sleep and rest, there are other ways you can practise self-care.

Do your research

Many of us use Google to search for a medical diagnosis, even when it isn't recommended. And while it means we're taking a proactive interest in our health, it's important to know that the internet can be a helpful resource, but not all sites can be trusted.

"The problem is, there's almost as much misinformation on the internet as good-quality information," says Dr Harvey.

"Your specialist or GP will be more than happy to point you in the right direction in terms of correct, useful information specific to your problem."

There are some trusted health websites that can help prompt the right conversations with your doctor, if you use them correctly. These trusted sources include government health bodies or departments such as Health Direct or the World Health Organization.



Speak up

For your GP to help you, you need to give them a full picture of your health. Tell them all your symptoms and be honest about your lifestyle and health habits. This way your GP will have all the facts, says Dr Harvey.

Don't be afraid to speak up if you're not clear on what the doctor is saying, or you're concerned about the tests or treatments they're recommending.

"If you're unsure what to do, or what the plan is at the end of the consultation, seek clarification from the doctor," he says.

If you're unhappy with the treatment you've received, speak to your treating doctor about your concerns. You may also wish to seek a second opinion from another doctor.

Take notes

When a doctor gives you information about a possible diagnosis, tests or treatments, listen closely and take notes to help you remember what they've said.

Keep your notes safe, so if you're referred to another specialist, or for further treatment, you have your history of symptoms and medications.

Talk money

It's important to find out all fees and charges for any treatments, medicines or procedures you may need. Ask your healthcare provider or their receptionist to give you a breakdown of the costs in writing.

Ask questions

When you make an appointment with a health professional, take the time to write a list of questions you'd like help with. Some questions to consider at your next GP or specialist appointment may include:

- What treatment do I need?
- How long do I have to take a prescribed medicine?
- Are there any risks or side effects?
- Do I need to see any other health professionals?
- Will I need any tests?
- Is there anything I can do to help my recovery?



Sweet potato & lentil soup

If ever there was a winter warmer for the whole family, this is it! Packed with vegies (and vitamins) this versatile and easy-to-make soup can be a meal in itself.

Ingredients

Olive or canola oil spray
 2 onions, chopped
 3 carrots, chopped
 3 sticks celery, chopped
 3 cloves garlic, chopped
 1 tbs ground cumin
 1 zucchini, chopped
 1 sweet potato, chopped
 3 x 400g cans no-added-salt brown lentils, drained and rinsed
 3 tsp reduced-salt vegetable stock powder
 12 slices wholemeal or multigrain bread, to serve

Method

1. Lightly spray a large pot with oil and place on medium to high heat.
2. Add onion, carrots and celery. Cook for 5 minutes, stirring often, until vegetables have softened.
3. Stir in garlic and cumin, cook for 1 minute until fragrant.
4. Add zucchini, sweet potato, lentils, stock powder and 1 1/2 L water; stir until well combined.
5. Bring to the boil and simmer, partially covered, for 15 minutes until vegetables are tender.
6. Ladle soup into bowls and sprinkle with coriander, if desired. Serve with bread or toast.

15

mins

PREP

25

mins

COOKING

6

SERVES

Rosemary lamb

A hearty family meal to share with your family during the cooler months.

Ingredients

4 x 120 g lamb leg steaks, trimmed of fat
 4 cloves garlic, crushed
 4 sprigs rosemary
 8 baby potatoes, unpeeled and washed
 Olive or canola oil spray
 1 large onion, diced
 2 sticks celery, diced
 1 eggplant, cut into 1cm cubes
 1 zucchini, cut into 1cm cubes
 1 red capsicum, seeded and diced
 400 g can no-added-salt diced tomatoes with basil, onion and garlic
 2 tbs balsamic or red wine vinegar
 1/2 cup olives, pitted and sliced
 Pepper, to taste
 1 cup basil leaves, chopped

Method

1. Slice steaks in half lengthways and add to a dish with 2 cloves crushed garlic and the finely chopped leaves from 2 sprigs of rosemary.
2. Coat lamb with garlic and rosemary and set aside while vegetables are prepared.
3. Place unpeeled potatoes in a saucepan and cover with water. Bring to the boil and allow to simmer for 10 minutes or until they can be easily pierced with a knife. Drain and set aside.
4. Spray a large non-stick frypan with oil and place on high heat. Add lamb and sear on both sides for 30 seconds until browned. Remove from the pan; cover to keep warm.
5. Cook onion with remaining 2 cloves garlic over medium to high heat for 3 minutes, stirring often; add celery and eggplant and stir for 2 minutes.
6. Add zucchini, capsicum, tomatoes, vinegar, olives and remaining 2 rosemary sprigs; season with pepper.
7. Simmer covered for 20 minutes, or longer if time permits, stirring occasionally until thickened. Remove rosemary sprigs.
8. Return lamb to the pan to cook for 2 minutes each side or until cooked to your liking.
9. Place lamb on serving plates then stir basil through vegetables and serve with potatoes.

15
mins

PREP

30
mins

COOKING

4

SERVES





From the archives | George Street, Sydney, 1962
Image courtesy of the State of NSW through the State Archives and Records Authority of NSW.

We always marvel at how things come full circle. And when you've been around for 130+ years, you get to have a front-row seat to how things change and evolve. Here's a flashback to Sydney's George Street in 1962, after the replacement of trams by buses. It's amazing to think that RT Health now calls George Street home since our merger with HCF - and that this famous Sydney thoroughfare has also since been transformed with the introduction of light rail transport. We can't wait to see the next 60 years brings for the area.

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