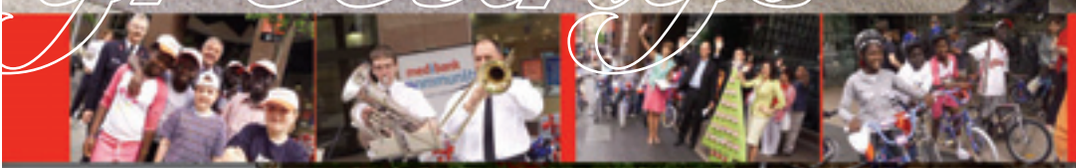
seasons greetings



private *i*

WRAP-UP 2004

inside

This year, why not be one of Santa's little helpers?

want to find out more? go to page 16

medibank PRIVATE

george speaks

Only a few short weeks ago we officially opened our new premises at 700 Collins Street and celebrated how the move has provided Melbourne staff with an improved working environment that we are confident will be conducive to servicing our members with excellence as we continue to build a performance organisation.

To go on creating achievements as a performance organisation, we must continue pushing boundaries, exploring what we, as a community at Medibank Private, can do to make an impact outside of our working environment, lifting ourselves above our competitors.

Our understanding of the social impact of our business - on staff, the wider community, and environment - is positively evolving. Our development in this area was recently acknowledged in the **Reputex 2004 Social Responsibility Ratings**, where we achieved an "A" rating, which is testimony to our commitment to constantly improve all aspects of our business.

We have a story on the results later in the magazine. I urge you to read the good news about Medibank Private.

You and I, and indeed Medibank Private, are part of a larger community outside the four walls we work in.

As Medibank Private staff, as members of the community, as human beings, we can contribute to making a positive difference in the lives of people less fortunate than ourselves.

I have no doubt there are a number of Medibank Private staff who have quite selflessly rolled up their sleeves and got dirty - some so to speak and some quite literally - at the recent Grow West tree planting sessions in western Victoria! I congratulate those of you who got involved.

We now want to foster the passion for community involvement throughout the organisation through the initiative we have called 'Medibank Community'.

This initiative has been taken seriously by our employees and this extends to all areas and levels of the business, as expressed by Medibank's chairman at the launch of Medibank Community.

So, how does it work?

A framework has been developed in which you can choose your own community organisation to work with either individually, as part of a team, or as part of a Medibank corporate initiative.

We are encouraging and supporting your involvement in the program by providing a half-day's leave per year to perform community services if you wish to work with a registered charity within working hours.

Your community involvement leave should be taken at a time that is mutually convenient for you and your Manager.

You can choose to use your professional skills to benefit an organisation if appropriate - e.g. volunteer your time to help The Oak Tree Foundation or organise a Dinners For Life event

Or you can accept the challenge to step outside your comfort zone and volunteer to visit individuals impacted by drug addicts or give blood for the Red Cross - the 'comfort zone' will vary for everyone!

At the core of this program is not just what you as an individual, or Medibank as a community, will get out of it. The reason and motivation for Medibank to embrace this program is quite obviously the individual lives in which we can make a difference, delivering on our Corporate social responsibility.

George Savvides

get smart with max

connecting the people who need to know stuff, with the stuff they need to know

If knowledge management is defined as getting the right information to the right person at the right time, then Medibank is certainly doing it the smart way with Max.

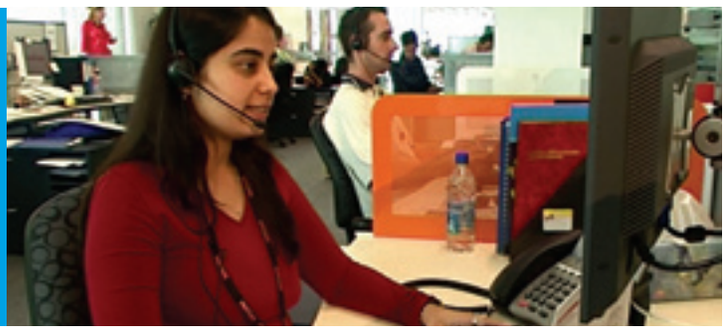
Clive Roberts, Knowledge Management Advocate, says getting the right information to staff efficiently helps develop an effective organisational performance.

"Max is a key feature of Medibank's long-term strategy to develop a better knowledge management system and knowledge sharing culture. Max is an information system for frontline staff that is quickly conveying all the information we need, in time, when we need it.

"On the 4th of November, Max was launched nationally to all Call Centres and Retail Centres. Staff now have access to a vast range of information, such as policies, processes and procedures, products, rates, and miscellaneous information."

A lot of the development time was spent making certain the enormous library of information was relevant to frontline needs and experiences. Max will enable Medibank to improve the overall customer experience by providing consistent and accurate information in a timely manner.

"We ran a pilot program in March, and we've been fine tuning the system since July. We've been deploying software around the company since the beginning of October and now staff are completing the training and actively using the system. We went through a very rigorous approval process to get the content right," says Clive.



Sensational feedback

The launch took place on November 4th and the feedback has been nothing short of sensational. Both frontline staff and management agree that Max is a powerful information tool that is making life easier in our dealings and interactions with members.

Medibank Private is striving to engender a service culture across the organisation and Max is a wonderful component of that objective.

Cathy Brosnan, Southland Retail Centre: "Just thought I would let you know I have been able to throw out so much paperwork that I have accumulated in my abridged manual, my personal folder, my desk drawer and my locker.All thanks to my confidence in Max!"

Max is the first major step in the evolution of an effective knowledge management system, and there will be an ongoing rollout of additional content. The plan is to have a permanent team managing and supporting the future development across the organisation, and ensuring Max is a great success.

QATeam process working

Clive says it's timely to remember the origins of the Max project, which was a knowledge management issue borne out of a QATeam.

"The QATeam itself has evolved into an operational advisory committee to make sure the focus of Max stays on frontline operations. We want frontline staff to be the advocates of the system, driving the changes and prioritising their needs. It's being designed and improved by the users for the users."

"This ties in nicely with our organisation's workforce empowering itself."

Clive acknowledges that one of the biggest challenges is staff changing their current work practices in how they source moment-of-need information. Historically, staff have accessed information from multiple sources. Anecdotal feedback is indicating that staff are beginning to access Max for their knowledge needs rather than calling the helpdesk or using other information sources to answer member enquiries.

"We're still wrestling with the issues of better knowledge management, of which Max is just one component, albeit a critical one. Now we're going to continue to deploy and explore other knowledge management initiatives across the organization." added Clive.

ed i

Welcome to our last issue of Private i for 2004!

What a great read we have for you this time. Our '2004 Wrap-Up' edition focuses on some of the major changes ahead for Medibank, particularly in Information Technology.

A couple of exciting knowledge management stories take centre stage in this edition. The introduction of Max - our fantastic new operational knowledge tool - will make life so much easier for frontline staff in our call centres and retail centres. At the press of a button, Max delivers more information than ever before, and at a much greater speed. That spells good news for our members and staff, who work in a hectic and quite demanding environment. Well done to Clive Roberts and his team for creating and delivering such a wonderful tool that will enhance our service image!

The changes to our organisation will be quite profound as the business systems renewal (BSR) program unfolds over the coming year. Having the latest technologies and business systems in place will help achieve our goal of building a Performance Organisation and being the Industry leader in the PHI sector. In this edition Clive Mullett (Manager, Business Services) talks about the BSR program, which will revitalise our IT infrastructure. The stories behind the efforts of our two 'Clives' provide great reading.

Change in Medibank is not only in business projects, but in our leaders too! In the last edition we interviewed the new SBU General Managers, and in this issue we meet Ian Whitehead, Tim Morphy, and Roger Ryan, who have new roles and challenges in the business.

We also launch a new competition 'Dead Ringers'. Did you know we have some staff in our organisation who bear an uncanny resemblance to famous faces? We'll let you be the judge of our first offering.

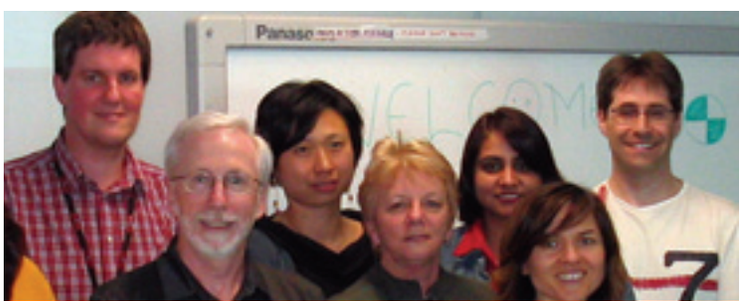
Our MediHealth section focuses on men's health issues, a problem that is often neglected. It's a great read for the guys out there at Medibank.

And don't forget our old favourites like our puzzles and competition pages!

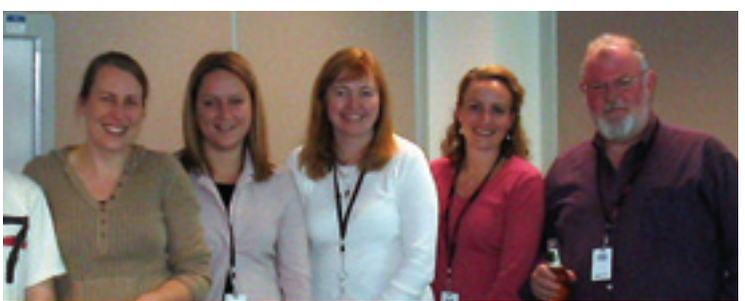
Finally, have a safe and enjoyable Christmas and New Year - Private i will definitely be back in 2005.

Read on and enjoy…and remember your feedback is important to us. If you'd like to see something new, drop me a line at clea_parker@medibank.com.au

From your Editor - CP



Clive Roberts, Joe Rhine, Cynthia Wong, Kay Mullins, Ritu Chaudhry, Mirjana Taflaga, and Steven Pulver



Geri Overberg, Helen Zygouris, Ceri Rees, Michelle Dyer, Jack Hogan

Deepti Dhawan, Miranda Roberts, Meredith Taghi, Karen Spiteri

our new brand tv ad

No doubt you saw Medibank Private's new brand ad on TV recently. It was launched on 31st October and ran for three weeks. For those of you who missed it, don't worry, it will return in the New Year.

This ad is part of a campaign to strengthen our brand position and to ensure we are known, unique, trusted, admired and of course, the leading brand in private health insurance.

The ad shows a range of people - singer, musicians, young people, couples and families - who have had the unexpected (a medical condition or injury) happen to them. We want our audience to understand that the unexpected can happen to anyone. So it's 'important to look after your health and even better to look after your health cover', for when you need it.

Behind the scenes

Have you wondered what's involved in getting a TV ad to air? Our Marketing team and advertising agency, DNA, worked extremely hard to produce the latest TV ad in the record time of just eight weeks, so that we could achieve our October deadline. Usually a production of this size would take much longer.

Concept development

This particular concept took about four weeks to develop. Market research was an important part of the process, and this involved conducting focus groups with people with PHI and without PHI, both young and old, to test run the ideas.

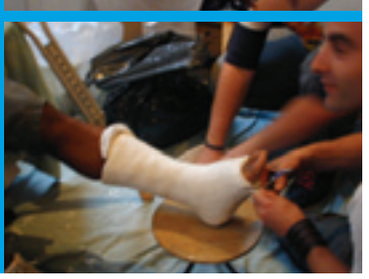
In the director's chair

Making a TV ad is just like shooting a mini movie. The production company responsible for making the ad employed a director, assistant director, producer, art director, camera, props, wardrobe, make up artist, gaffer, grip, nurse, caterer and much more!

Our ad agency sourced a reputable director, Roger Tompkins, who has made some great TV ads including the Tooheys blind man and dog ad and the 100% pure NZ ad.

On location every minute counts when it comes to delays - it can be tens of thousands of dollars a day - so shooting of the ad took place in Sydney, as the weather is usually reliable!

Shooting was completed over two and a half days, and we were lucky enough to have great weather for the beach scene at South Maroubra. Other locations included the carousel at Darling Harbour, the dancing scene at an old art deco hall in the outer suburb of Granville and the wedding scene at a church outside Sydney.



Getting it to air

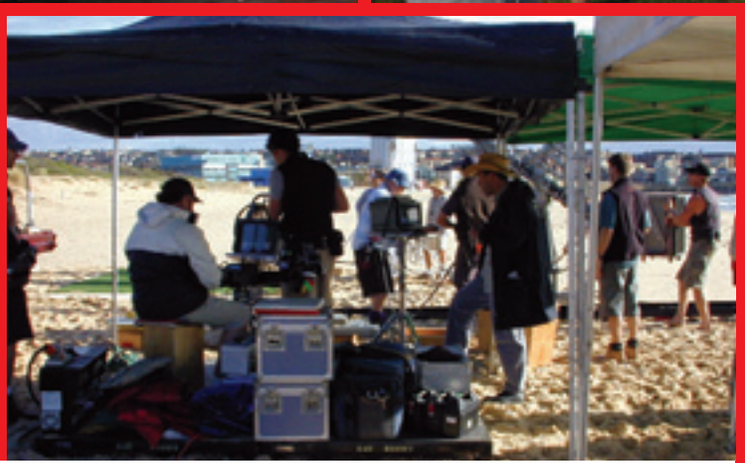
If you think making a TV ad is the most expensive part, then you're wrong! Buying media time is where the largest proportion of our budget goes.

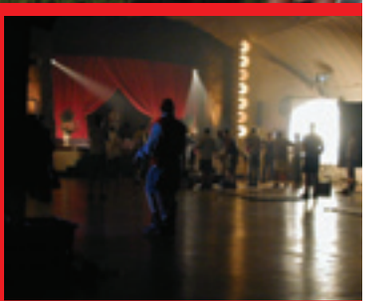
This is an important part of the process that our media company, Mitchell & Partners, assisted us with. Their job is to help us choose the right programs to run our ads and this depends on our target audience. In this case, as it is a younger audience we were aiming for, we chose the Sunday movies and suitable shows such as Australia Idol.

Some familiar faces

Is that Ricky Ponting in the TV ad? Yes, we had a last minute opportunity to include the Australian Cricket Captain in our ad. Ricky recently injured his thumb, so he was actually really injured at the time of filming the ad.

And who is the young woman singing 'I feel better now'? Prinnie Stevens, a talented, up and coming singer, was actually one of the top 30 finalists in this second season of Australian Idol. As well as performing in the ad, she also recorded the song.





Thanks to...

We must thank the following people for their great effort in project managing and overseeing this production: ***Michelle Moore, Kay Waterman, Tim Morphy,*** the Research team headed up by ***Barry Leung*** and all those involved in the approvals process, especially ***Shaul Jontof-Hutter, Rachel Olliffe***, and our friends at Minter Ellison who helped get the ad to air quickly.

A special thanks to ***Fleur Shaw-Jones*** and ***David Nowell*** from Health Services who advised on how to best portray the various medical conditions.

Also thanks to our ad agency, DNA, and our media company, Mitchell & Partners.

If you have any questions about our brand ad, you can contact ***Kay Waterman*** or ***Michelle Moore***.

Queensland participants

Participants in the WA walk

walk to cure - a success

The JDRF's largest fund raising activity is the annual Walk to Cure. Last year approximately 80,000 people around Australia walked and raised over $2.6 million to help try and find a cure for juvenile diabetes.

On October 17th, around 458 Medibank staff members and their families and friends walked for the Juvenile Diabetes Research Foundation (JDRF) annual Walk to Cure day. Walks were held in Adelaide, Canberra, Melbourne, Perth, Sydney and Queensland. This year was the third year that Medibank Private has participated in the JDRF Walk to Cure.

In addition to the walk activity, Medibank held a number of corporate office, retail and call centre activities. Many staff got involved in selling chocolates, jelly baby guessing competitions, and footy handballing challenges. Everyone had a lot of fun as they donated their time and money to a great cause.

As at the 9 November Medibank Private had raised the grand total of $14,300 - which is a tremendous effort.

ACT walkers

Entertainment at the WA walk

Walkers take a break in Melbourne

Big thanks to the walk captains

We had a number of 'walk captains' who helped to coordinate the walk day activities in each state.

ACT: ***Julie Valeri***
NSW: ***Jennet Ibrahim***
QLD: ***Trudi Moran-Fry***
SA: ***Katy Brown***
VIC: ***Sally Wiber, Dean Jayakody, Stella Kassimiotis, Clare Skinner***
WA: ***Samanatha Blagojevic, Gavin Terwey, Amanda Hardie.***

These people did a fantastic job directing people on the day, organising events and lunches. The children at the JDRF will benefit from their input and energy.

JDRF awarded for their success

Medibank Private congratulate JDRF on recently receiving the "Givewell Best Practice Charity Award" at the 2004 Ethical Investor Sustainability Awards, presented on Wednesday 1 December in Sydney.

The Ethical Investor Sustainability Awards recognise outstanding achievement in a range of areas of corporate sustainability and two of the eight awards - the Best Practice Charity Award and Best Charity Project Award - recognize excellence in the not-for-profit sector.

JDRF was selected from a field of over 1600 charities.

"Our success relies on the dedication and generosity of thousands of people around Australia who together donate time, money and experience to help JDRF find a cure for type 1 diabetes. This Award is a wonderful acknowledgement of their support, as well as the dedication of our staff around the country." said Mike Wilson, Chief Executive Officer of the JDRF

The criteria for assessing nominated organisations covered all the qualities donors expect of a 'good' charity, including:

– transparency, accountability and good management
– dealing with root causes and addressing big problems
– acting in tangible ways
– presenting thoughtful programs and good fundraising ideas to raise money creatively
– operating across a range of social capital dimensions, including awareness raising, developing networks, finding a solution; and providing support.

JDRF is the world's largest non-profit, non-governmental contributor of funds to diabetes research, funding an estimated 35% of all type 1 diabetes related research globally. In the year ahead, JDRF will commit $9 million to 27 research projects around Australia, as part of its $130 million global research investment.

"More than 140,000 Australian children and adults suffer from this unpreventable, life-long condition which can lead to heart disease, kidney failure, nerve damage, blindness and amputation. In addition to its huge social costs, type 1 diabetes is conservatively estimated to cost the Australian community $2.5 billion to treat each year," said Mr Wilson.

Medibank Private staff should all be proud of their support and contribution to such a worthy cause and effective organisation as JDRF.

the page of Fame

pat mckinney

As a tribute to one of the organisation's most recognisable and famous faces, the Page of Fame departs from its usually irreverent style to allow *Pat McKinney* take his final bow as a leading player on the Medibank Private stage.

In an interview with Private i, talks about his retirement and plans for the future.

Why are you leaving?

I feel it's an absolutely natural time to move onwards from what I've been doing over the last 30 years. It's a natural time for all sorts of reasons, particularly as the business has been through a bit of a roller-coaster ride over the last three years, but now it's really well positioned for the future. The whole new structure will drive us forward and our prospects look so good it is time to go out whilst on top.

On a personal level, I want to try other things in my life now. My family has been doing it hard in many ways. I've been away a lot over the past few years, so it's time to start making it up to my family and giving something back to them for their patience and understanding.

Tell us about your family situation?

My wife's name is Maxine and we've been married for 33 years. We have two daughters, Rebecca and Rachael. Rebecca is working and living in London. Rachael is married and about to make me a grandfather for the first time. I'm very excited about that and looking forward to the birth of her baby. Even though Rebecca resides in London, we're still a very close-knit family. Maxine and I plan to visit her soon.

Who is Pat McKinney?

I was born in Ireland then moved to Waterford, England when I was young. I was educated in England but immigrated to Australia in the 1960s for the great adventure. I was your typical ten-pound 'pom'. After I finished my studies I was quite restless, so I decided Australia was the place for adventure because it was still a real frontier land in those days. I applied for and got a job with Mt. Isa mines in the IT area, however I never managed to get there. Just a couple of weeks after I arrived, I realised there were so many opportunities and doors open every place I looked.

What did you do after arriving in the mid 1960s?

When I landed in Sydney I never looked back. The combination of climate and lifestyle in Sydney, for a young man from gloomy England, was too good to be true. I stayed in Sydney for many years; it was a fantastic, magical time indeed for a young man from Waterford.

Tell us about some of the adventures you had when you first arrived.

I once worked the bar in a pub in western Sydney. That was pretty harrowing. One Friday night the resident band's singer failed to show up so the pub owner ordered me to fill-in. There I was belting out numbers all night.

What about your career with Medibank Private?

In a word, 'fantastic'! I've had my ups and downs, but my career here has been simply wonderful. I joined Medibank when it started way back in 1976. It was one of those green field opportunities where an organisation was being set up from scratch. I thought it was an exciting chance to get involved. We didn't have a lot of experience with things like distribution and pricing, so we had to make it up as we went along. It was fantastically exciting to see the organisation get up and running. We weren't expected to succeed because the other funds at the time were trying to freeze us out of the market. Within that environment, it produced great motivation for the staff and inspired us to go on with the job. During that period, it felt like a day-to-day proposition, but we succeeded and thrived.

My career with MPL has principally been at the operational front end of the business. When I first came here my skills were in IT, but I never got to use them. My first role was managing a large processing centre or back office activity. In 1982, I was asked to put together a model, which brought together the direct customer facing activities. I did and it became the branch office network. I managed that for 2-3 years then I moved around the business a lot. In those days if you wanted pursue a career you head to be prepared to move around.

What are the major differences between then and now?

The model we created is as relevant today as it was years ago. Our strategy was to provide superior customer service, low cost management expenses, and a national branch network that supported our members in each state. At the time the strategy was pretty good and it hasn't changed much today.

What are some of your major achievements?

There have been a number of achievements and I've got a pride in all of those. When Medicare came along in the early 80s, we were able to convince the Labor Government that we could manage the implementation of it. The same goes for PBS. At the beginning we had the belief in ourselves to survive and thrive, and then become the market leaders. Being involved in the Lifetime Health Cover was a major achievement. And working with all the fantastic people along the way has been simply great.

What does Medibank mean to you?

It has given me the opportunity to grow and to learn from all the experiences I've had and have lots of fun along the way. A sense of humour is very important in what you do because you need to enjoy life.

What is the future for Pat McKinney?

I've got about 40 per cent of the future mapped out, but the rest I'm going to wing it. I plan to do a lot of travelling, improve my golf game, and spend more time with my family.

Do you have a final word?

Thank you Medibank Private for all the good times I've had.

Some of the changes as seen through Pat's eyes

What was life like in 1976 when Pat joined Medibank?

- No plastic cards. If you wanted to buy something you paid by cash or cheque.
- No one had personal computers.
- Computers with the power of your laptop were about a quarter the size of an average room.
- Thirty per cent of the Australian workforce still got their wages in notes and coins in a brown paper envelope.
- There were no mobile phones.
- The exchange rate for the Australian dollar was about 85 cents US.
- AC/DC released 'It's a long way to the top if you want to rock'n'roll. Abba released Mamma Mia.
- Jimmy Carter was elected President of the USA.
- Malcolm Fraser was Prime Minister of Australia.

medibank PRIVATE

medibank social club

WE WANT YOU!

Medibank's social club is really delivering on it promise to offer great discounts and engage staff in fun social activities. For a fortnightly contribution, staff have access to a wonderful range of products, services and events.

Using its Australia-wide network, API is providing some really great benefits for members of the social club.

Jodie Scully booked a hire car through API for her recent holiday in Queensland. Jodie said API negotiated a cheaper hire rate with Hertz and reduced excess.

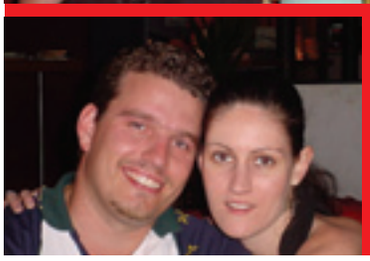
Angela Clarke in WA said API helped her to organise an end of the year bash at the Brass Monkey club. All people who attended received four drink vouchers valued at $5 each and finger food: vegetarian puff pastry tartlets, spring rolls, samosas, spinach & fetta rolls, pizza bites, Danish sandwiches, and vegetable crudities.

How much was all this? NOTHING FOR API MEMBERS!! Non-members had to pay $15.

Angela said if you wanted a drink worth more than $5, arrangements were made with the Brass Monkey for this situation. If you wanted a drink worth more than $5 you could top up your voucher.

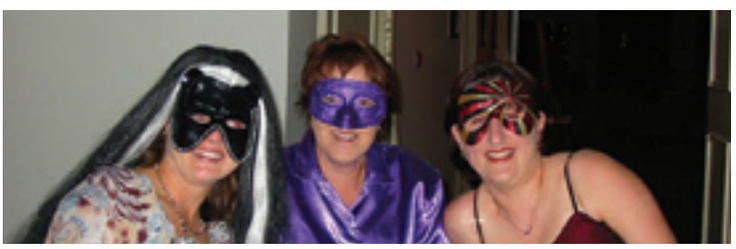
Simone Garrad is the national representative for Victoria. Simone helps to coordinate events and promote them internally. Simone says at the moment API is offering good discounts on Cirque De Soleil tickets and great value shopping vouchers.

The discounts and fun doesn't stop here. We can get cheaper footy tickets, rock concert tickets, and a whole range of goodies. Join up now and share in the benefits.



Recruiting members

Non-Groups team - (from Left) Fiona Stirling, Bernadette O'Malley, Carolina Acevedo, Emma Cazaly, Hanadi Abbas, Pam Graham, Cheryl Ferns, (Front) Theresa Peters, Rosalie Wilson



Wendy Luyt, Fiona Askew, Vasiliki Molvalis

Greg Lukin (Back), Naydeen Hayes (front left) Paul Greer (front right)

A boy and his harem - (from Left) Lyn Linton, Melanie Bayliss, Madeline Wright, Nick McDonald, Helen Hilton, Melissa Gillingham, Annette Watson

masquerade ball brisbane

Susan Korach & Guest

Social Club Committee members - Carol Clarke, Trudi Moran-Fry, Bronwyn Edmeades, Leisa Erhardt, Debbie Greer

The Dancing Queens do the Village People at the YMCA

new managers up close

In the last edition of Private I we interviewed MPL's six new SBU managers. Their roles were created as a result of the organisational change that spread the accountability for profit ownership from two individuals, Simon Blair and George Savvides, to eight individuals.

In the course of the restructure another series of new roles was created in the organisation. Private I recently spoke to the National Managers of three new areas of the business. Like the SBU General Managers, their roles involve helping MPL move towards being a market focused business and a performance organisation.

The following set of questions was put to each Manager.

Q1. Describe your new role.

Q2. What are the key challenges facing your role?

Q3. What personal style will you bring to the role?

Q4. What can MPL expect from you?

Q5. How will you strive to deliver better performance and service?

Q6. What are you interests outside your work?

Q7. What was your most embarrassing moment?

tim morphy

national manager marketing

Q1. I came into MPL as the Manager of Business Development in 2000. I didn't have a background in private health insurance so I had to go on a massive learning curve. In that role I had the opportunity to be involved in a number of projects, including the Commonwealth Government's scoping study into Medibank. It was a great opportunity to see how the organisation functioned and to understand the business at a grass roots level. After the scoping study I did a range of different things. I had an opportunity to manage the Victorian Call Centre. After that, I was acting manager for Victorian Sales and Retail under the old structure. So I got to see both the sales and servicing sides of the business from the frontline. I acted in Steve Boomert's role as the GM for Corporate Development and Marketing while he was studying for his MBA. When Lisa Henderson left I had the opportunity to manage the Marketing role on a temporary basis. Then we went through the SBU restructure and I now fill the role of Head of Marketing on a permanent basis.

Q2. Yes, we revitalised the brand and gave it a fresh look, but it's only a step in the development of the brand. We have a new challenge, being the journey of the brand in terms of its personality, not just changing its look. We must continue to support the development of the brand. One of the other things we're focusing on is segmentation. That is, giving the right things to the right members at the right time.

Q3. I like to be inclusive. I supported the idea of bringing Marketing into a position that sits alongside the new SBU's. Bringing Marketing into the operational side of the business allows it to seen more as an operational activity rather than a corporate function.

Q4. I want to see us develop a great product range for all Australians - something for everyone who wants private health insurance. I want us to have great products; clearly differentiated, competitively priced, but the big differentiator we're aiming for being 'service'.

Q5. Having worked with the operational side of the business, I have an appreciation of the service focus needed to succeed. As I keep saying to people, Marketing can help describe it, advertise it and talk about it, but it really comes down to the way we service members; the way we talk on the phones, the way we deal with members in retail centres, the way we process claims, the way we send out letters. If we're mindful of these things, I'm sure we will see our performance improve.

Q6. I went to Melbourne University and studied philosophy for three years, much to my father's amusement. He always asked me 'what does a philosopher do when he graduates?' The year after graduating I went off and played basketball for Geelong in the NBL. I soon realised that I wasn't going to make much of a living out of philosophy or basketball, so I decided to study law at ANU in Canberra. After working as a lawyer for a while I decided to move more into the corporate world, and completed an MBA at the Melbourne Business School.. These days I enjoy travelling, collecting wine and supporting the Geelong Football Club. My wife's name is Jacqui and we've been married for three years. No children just yet.

Q7. I can't talk about my most embarrassing moment, it's too embarrassing.

ian whitehead

national manager customer services division

Q1. My role is to facilitate the provision of services to our SBUs and members. The majority of the service delivery covers our contact centres, the web, member services, as well as the provision of sales support for SBUs. We also generate 52 - 54 per cent of the new to fund joins for the SBUs.

Q2. My Division was created out of the restructure, so bringing the Division together; aligning it into a common purpose was probably my first challenge. The second is trying to be ahead of the SBUs in the sense that we can create capacity and plan for the things they want to do. Third, the SBUs are at different stages in their respective markets. We want to assist them to deliver national consistency but in a way that reflects their individual needs on a market-by-market basis.

Q3. I'm about engaging and driving my team, demanding an understanding of what the business is, the drivers, how variables affect our business and understanding "cause and effect" in the business. I want to drive productivity and create capacity.

Q4. Simple. I want to see outstanding service and sales delivery.

Q5. In the last six months we've made significant turnarounds in the business. Our Grade of Service in essentially all the areas we look after - Member Services, web and contact centres - has improved significantly. Average speed to answer is down significantly. Grade of Service is up significantly and trending upwards on last year's results. Average handle times have been maintained. Through the capacity of better management we have initiated a number of new programs: welcome calls, leads follow up, driving cross sell and up sell through the contact centres, and pushing for direct debit. In terms of arrears, Member Services in Queensland have done a magnificent job in bringing down arrears. Arrears in October were approximately $20 million, whereas same time last year, arrears in 2003 were about $45 million, so they've done a magnificent job cleaning up. Web sales performance is up. Overall, the Division has been doing an outstanding job in the last four months.

Q6. Golf. Family. My little girl Lilly is very special to me. I'm really thinking deeply of holidays at the moment.

Q7. After a long couple of days at work, waking up one morning (thinking alarm had gone off) going to work to only realise it was 04.00am!

roger ryan

national manager

distribution development and support

Q1. The DDS group covers a variety of MPL business activities. To help matters, we've broken up the department into a number of areas. Business Performance does the membership forecasting for our business, which goes out over three or four years. Those forecasts are the major building block for the corporate plan and resultant P&L's. We try to be accurate with our forecasting, but there are many assumptions to be made about price positions, marketing and what the competition is doing over time. Frontline Operations and Support assess what can happen to our frontline people following various MPL business decisions and try to make sure what is being proposed has the I's dotted and T's crossed. This group is also responsible for the ongoing development of our CRM system - R1. Another group manages a range of sophisticated business analysis tools that assist us with various distribution and channel management decisions. Our Retail Property group is responsible for maintaining Retail Property leasing and the remodeling of the retail network, plus a number of operational contracts. And the last group, Business Transformation and Production Services provides plenty of daily help to frontline systems users, updates hospital and ancillary contracts, arranges quality control checks, trains hospitals in our new ESP+ system and is directly involved with the imaging and workflow project.

Q2. Membership forecasting is probably the biggest challenge because it has such an influence on the running of the business. There are many variables and assumptions attached to our forecasts and we keep trying to improve the assumption process each time. The second one is our CRM system - R1. We've invested a lot of money and we need to get a better return on our investment. There are still a lot of pearls inside CRM that we can harvest and I want to be actively involved so we can maximise the potential of the system.

Q3. My management style has been described in a number of ways over the years. One of the more colourful terms has been 'earthy' but some wise counseling has seen much of this disappear. These days, I'm a lot more pragmatic about things and one of my strongest desires is to see all people who work on my team add more skills to their individual 'kit bag'. I like to see every individual on my team improve his or her skills, knowledge and experience. That's a point of principle for me that I ask my managers to take particular note of with their respective teams.

Q4+5. The continuous fine-tuning of the various tools and forecast models we use. There's an expectation to improve our accuracy and to realise the potential of our CRM system. We'd like to have at least 70 per cent of the network re-branded by next year and to have a number of the contracts we operate under tidied up through a competitive tender process.

Q6. I like cooking. I cook a variety of food both in the kitchen and on the bbq. I certainly like Australian wines. One of my favourites at the moment is Peter Cummings, Bendigo Shiraz. It's a terrific good value wine. My other interests are family and children, AFL football, cricket, travel and things that allow me to take a mental break from work.

Q7. I was in Adelaide at a staff forum when I was talking to some staff. I approached a staff member and asked her how long before the baby was born? To which she replied that she wasn't pregnant and I had mixed her up with another staff member. Fortunately, I had a good relationship with the Adelaide staff and they excused my faux pas. It was very embarrassing.

hicaps

keeps an eye out

On 1 July 2004 Benefit Risk Management (BRM) introduced a process whereby a dedicated analyst reviews daily HICAPS exception reports and selects individual transactions for follow-up by the BRM team.

Using the right of audit provisions of the HICAPS Provider Agreement, BRM then request documentary evidence to validate the transactions. If documentation is not supplied or it displays evidence of concern, then a full audit or investigation is conducted.

It is important to note that this process has the support of HICAPS, and since implementation not one complaint has been received. Nearly 100 providers have been contacted for transaction verification to date and we anticipate that 250 providers per annum will be contacted.

Results to Date

Results to date have been far better than what we first envisaged.

In a very short time this process has developed into a key identification tool that has enabled BRM to increase it's identification and intervention of high-risk transactions.

We estimate that approximately 60% of providers identified are new to BRM. This is because this process works from an individual transaction (bottom up), not from the traditional high-level top exposure providers (topdown). So even though the overall exposure to Medibank from an individual provider may be small, they are treated equally in the review and identification process.

The following are some examples of results achieved.

Provider A (Optical NSW) - identified as providing multiple family services on one day, upon notification of transaction request letter provider sent refund cheque apologising for incorrect claim.

Provider B (Optical Vic) - identified as providing glasses to all members of a family membership on the same day, after a number of requests for verification this behaviour has now ceased.

Provider C (Dental NSW) - potential benefit upcoding identified, provider contacted BRM to inform us that he had dismissed a staff member and to assure us that his practice did not operate this way.

Provider D (Dental NSW) - excessive services identified, not all transaction slips provided, full audit to be conducted as provider is in practice with Husband and practice receives benefits of nearly $200,000

Provider E (Dental Qld) - excessive services identified, provider has not responded to requests for transaction documentation, since initial letter monthly benefits have reduced from $12,000 to $3,000.

Provider F (NSW Dental) - excessive services identified, while total benefits put this provider below the radar, his servicing has doubled in the last 12 months and a commercial decision has now been made to remove his HICAPS access.

Provider G (NSW Dental) - excessive services identified, transaction documentation for one claim not received, this claim related to multiple x-rays, profile of provider indicated that his x-ray services have increased from 39 to 276 in the last 12 months. A full audit is to be conducted.

Further to the examples above we have also been informed that provider groups are discussing the increased checking being conducted. In one case a dentist commented to HICAPS that 'it is about time'. Issues are being identified on a daily basis and the rigour in our process is such that we are firmly placed to change behaviour.

reintroducing strategy and corporate development

You may know the name Strategy and Corporate Development, but what's the game and who's on the team?

Under ***Steve Boomert's*** leadership, the S&CD goal is to grow our business through development of our business unit portfolio, improving industry sustainability and stakeholder advocacy.

At its most basic level this means the S&CD team is looking to the future of Medibank, where the business wants to be and plotting the map to get there.

If you look at our vision and mission statements this becomes even clearer. The vision for Medibank Private is to be the recognised leader in private health insurance in Australia.

So the S&CD team is working on a wide range of projects that will help us get there. We are looking at business expansion opportunities that will grow our market, profitability and value to members.

Work has commenced on a program to enhance Medibank Private's reputation as a leader - in our financial performance, with our staff, with the community and for our members.

Like all shareholders, ours - the Minister of Finance and Administration, can significantly influence the path we take. Our relationship, managed through the S&CD team, is making sure we have united goals.

And of course, the whole business needs a coordinated approach to achieve this leadership role, so we manage the annual business planning process.

All of this work is done by four areas within S&CD. Strategic Development, headed up by ***Kirstin Atchison***, is reviewing a number of business expansion options (sorry - they're secret), analyses changes in the industry and provides high level market information for strategic decision making.

Mark Illiff manages the business' corporate planning, which includes the development and production of the 3 year corporate plan and statement of corporate intent. While you may not see the plan itself, the results of the planning process drive our business.

Maintaining and enhancing the vital political and industry relationships that enable us to operate our business our way is the responsibility of ***John Wallace, David Losberg*** and ***Maya Feldman***. As the Government and Industry Affairs team, they work closely with our shareholder, the Department of Health, industry bodies and other stakeholders to lobby for Medibank Private's position.

Ultimately the aim is to secure the best possible policy and regulatory environment and support for our corporate plan.

The Public Affairs team is driving the program to enhance Medibank Private's reputation and relationship with all stakeholders, and to position the business as an advocate for members and the public. You'll see more about this program in the coming months. In addition to this, Public Affairs runs media campaigns to support our national and state based marketing initiatives, and develops corporate communications such as the Annual Report.

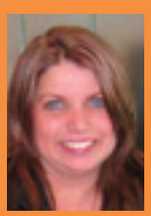

Steve Boomert


Kirstin Atchison


Libby Woolnough


Mark Illiff


Maya Feldman


Melanie Claessen


Sandy Capannolo


Sue Skeet

COMPANY RATING 2004

A
SOCIAL RESPONSIBILITY RATINGS
ReputTex®

we got an A

It's official. Medibank Private is a good corporate citizen and ahead of our peers.

The 'A' rating by Reputex confirms what most of us already knew - that our business is on the right track when it comes to our corporate governance, reducing our impacts on the environment, ensuring a positive impact on the community and creating a great place to work.

There's still some room to grow and improve as a business, but the A rating is a good start and a great improvement on last year's B.

Like Standard and Poors financial rating system, Reputex assess Australia's top 100 and New Zealand's top 20 revenue earning businesses on their policies and practices and the potential reputation impact.

So, how do we compare to other businesses like us? Of the 120 Australian and New Zealand companies that were assessed by Reputex, six could be considered our peers, because they are all insurance-based organisations.

Compared to these six businesses, Medibank Private performed extremely well, topping the rating for workplace practices and rating above the average for positively managing our environmental and social impacts. Our corporate governance rating matched the industry average.

Some of the key observations of Medibank Private that determined our ratings in the Reputex survey included our:

- transparent organisational structure that provides clear delineation of responsibilities;
- adoption and usage of the Code of Conduct to promote ethical business practice;
- sound audit and risk management systems in place;
- positive approach to working with the community, especially the long term alliances we have formed and the support offered to staff for volunteering in the community;
- commitment to investing our funds in businesses that are socially responsible;
- sound policies in relation to consumer rights;
- focus on the environment in our purchasing strategies and workplace activities;
- extensive training system that operates across all levels of the business and is aligned to business objectives;
- sound HR framework and remuneration strategies.

From this list, which covers only a fraction of the good work we do, you can see that the Reputex rating is the cumulative result of so many people's efforts. And the work continues. Hopefully our rating will continue to improve too.

A special thanks must go to ***Sally Wiber*** for her work in preparing the Reputex submission.

Company	Overall Rating
Insurance Australia Group	AA
Medibank Private	**A**
ACC NZ (New Zealand)	A
Promina	B
Allianz Australia	B-
AXA Asia Pacific	B-
QBE Insurance Group	B-
Industry sector average	B+

Company	Corporate Governance
ACC NZ (New Zealand)	G2
Insurance Australia Group	G2
Medibank Private	**G3**
Allianz Australia	G3
AXA Asia Pacific	G3
QBE Insurance Group	G3
Promina	G4
Industry sector average	G3

Company	Environmental Impact
Insurance Australia Group	E2
Medibank Private	**E4**
ACC NZ (New Zealand)	E4
Promina	E5
Allianz Australia	E6
AXA Asia Pacific	E6
QBE Insurance Group	E6
Industry sector average	E5

Who's on the team

Steve Boomert - Group Manager Strategy and Corporate Development
Sue Skeet - Executive Assistant to Steve Boomert

Strategic Development
Kirstin Atchison - Strategic Development Manager
Mario Delosa - Product Development Consultant
Dan Hilvert - Senior Markets Analyst
Sandy Capannolo - Project Manager

Corporate Planning
Mark Illiff - Corporate Planning Manager

Government and Industry Affairs
John Wallace - Health Policy and Economics Manager
David Losberg - Government Relations Manager
Maya Feldman - Government Relations Adviser

Public Affairs
Trish Hyde - Public Affairs Manager
Libby Woolnough - Media Relations Adviser
Melanie Claessen - Public Affairs Manager



Company	Social Impact
Insurance Australia Group	S2
Medibank Private	**S3**
ACC NZ (New Zealand)	S3
Allianz Australia	S4
AXA Asia Pacific	S4
Promina	S4
QBE Insurance Group	S5
Industry sector average	S4

Company	Workplace Practices
Medibank Private	**W2**
ACC NZ (New Zealand)	W3
Insurance Australia Group	W3
Allianz Australia	W5
AXA Asia Pacific	W5
Promina	W5
QBE Insurance Group	W5
Industry sector average	W4

business systems renewal

modernising our information systems

Over the last eighteen months, Medibank Private has progressed plans to modernise its legacy information systems environment. The CSR project of 2003-04 attempted to address the replacement of the existing legacy systems environment but concluded without identifying an acceptable solution.

Our current situation comprises of a mainframe IT environment that is restricted by its design, build and configuration to meet rapidly changing needs, and continues to limit Medibank's ability to pursue a first-to-market approach.

The IT environment resides on an inherited mainframe technology, infrastructure and platforms that are shared by the Federal Health Insurance Commission (HIC) (although we are about to become autonomous, with physical separation from HIC due for completion in January). This environment has evolved over the past 25 years.

25 years is a long time by anyone's definition. Particularly in a world that has seen increased intensity in the industry's competition, greater demand for market responsiveness in terms of brand, product and channel flexibility, and continued regulatory change.

The Business Systems Renewal program aims to replace the mainframe environment as quickly as possible, whilst ensuring business as usual is maintained.

Clive Mullett, Manager, Business Services IT has taken the interim role of Program Director until a permanent appointment is made. Clive says the program of renewal will not interfere significantly with our daily business operations, but it will need the involvement of people from various parts of the business.

"We're building a program of change. To describe the event, we say we're building a new ship while sailing it."

The ship sets sail

The ability to meet future Corporate Plan objective depends on us moving away from our old legacy systems to a modern and flexible platform.

Clive says our Business Systems Renewal is an integrated program of projects to replace the existing legacy mainframe application systems environment. The projects will be undertaken and implemented over the next 2-3 years.

"The Business Systems Renewal program incorporates four significant components within its structure: Customer Relationship Management (CRM), Health Insurance Managements System (HIMS), Enterprise Data Warehouse (EDW), and Collections and Disbursements (C&D).

"The Executive Sponsors for the projects are: ***Simon Blair*** for CRM, ***Bruce Levy*** for HIMS, ***Cecil Piccinino*** for C&D, and ***Surinder Singh*** for EDW.

"The HIMS, EDW and C&D components are new applications that will be implemented as part of the renewal program. CRM is already in place but will be re-aligned with the introduction of these new systems.

"Each project isn't just a systems change, it involves business process change and organisational change that will positively affect the way we work.

"Our objective is to change the way we do things for the better, and improve the way we interact with our members and providers."

Benefits of change

For a capital investment of $51m over four years, the replacement of our legacy systems will realise some $175m of benefits to the organisation over nine years; $70m of these will be realised through reduced benefit outlays.

"We'll have modern systems in place that will allow us to be more competitive in the market place, have better financial controls, create a more productive work environment, and we will be better placed to have significantly enhanced information management and reporting for strategic decision making.

"And whilst not all initiatives within the project are anticipated to produce direct financial benefits to the organisation, they are each attributed with substantial intangible benefits across one or more of risk mitigation, productivity improvement and/or organisation flexibility," added Clive.

Establishing this project office provides us with a focused structure to deliver this critical program of business change. This will impact all areas of the Medibank business - including our people. A number of new positions have already been created, with this trend set to continue.

A clear strategy has been adopted within the project to supply, develop and retain talent within the organisation.

Wherever possible we would like to appoint internal staff, further developing and retaining our staff and Medibank's intellectual property. The project aims to make best use of the knowledge and expertise we have in the business, combined with external expertise to work with our people.

Karen Curnow (Program Lead, Process Change) and ***Tina Horewood*** (BSR Change and Training Manager) have come into the organisation with specific expertise in this area.

Michael Peacock (OD Manager) has recently accepted a 6-month secondment providing OD and Change Management support for the BSR Project. Further internal appointments will be announced shortly.

This provides great opportunities for staff to be involved in a critical business project.

At the end of the day

Clive believes we'll see a different future.

"We'll have an environment that will allow the retail centres and call centres to more easily interact with members.

"In terms of differentiating ourselves on service edge principles, these new systems will assist that aim. Not just with transactional information but our relationship management capabilities will be enhanced.

"We'll have a more productive work environment, better integration between the various technologies across the organisation, and in the back office, the future will be more automated and less frustrating. Working electronically will be a normal part of operations. Accessing all information in one single screen, and performing all transactions the same way with the same user functions will become normal.

"At the corporate level, we can look forward to having a single authoritative source of data that will assist management with reporting, analysis and decision-making. We'll be managing rate change in days rather than months. And we'll be exploring new products daily; using real data to predict profitability."

The intended outcome is to deliver an IT environment for the organisation that provides cost effective and timely support for efficient operations, corporate decision making and overall market competitiveness.

Clive believes the future is in our hands. "I'd like to emphasise that the program can only succeed if we've got the enthusiastic involvement of everyone across the organisation. We need everyone on board the ship, assisting with the changes. We can all play a role in the rebuilding of the new Medibank Private information systems environment."

As this magazine went to print, the decision had been made and a preferred vendor selected for HIMS, which is at the heart of the BSR program. The Board had also approved the C&D project business case. Exciting times ahead!

service records

Here is the list of MPL people who celebrated service anniversaries since the last edition of *Private i*. Congratulations everyone!
Anniversary Dates : September to November 2004

20 YEARS

Robyn Harding	Townsville Retail Centre	QLD
Smilja Karamarkovic	Chatswood Retail Centre	NSW
Sharyn Markou	Rundle Mall Retail Centre	SA

15 YEARS

Rosemary Burke	National Membership Mgnt	QLD
Gineza Catibog	Nat. Hospital Claims Mgnt	VIC
Margaret Kilkeary	Wintergarden Retail Centre	QLD
Christopher Saravanamuthu	Nat. Hospital Claims Mgnt	VIC
Marilyn Slater	Airport West Retail Centre	VIC

10 YEARS

Daniela Musico	Parramatta Retail Centre	NSW
Carolyn Holloway	Liverpool Retail Centre	NSW
Margaret Stephenson	Tamworth Retail Centre	NSW
Raeleigh Waddell	Kippa-Ring Retail Centre	QLD
Carol Clark	National Membership Mgnt	QLD
Beryl Johnson	Bankstown Retail Centre	NSW

building our business around efficient processes

In line with the aims of the 2004-2007 Corporate Plan, Medibank Private is striving to transform itself into a better performing organisation, where sustainable productivity improvements allow the organisation to re-invest gains in our core business (i.e. the things that add value to our members and to Medibank). Assisting this objective is the introduction of the Get Smarter initiative.

This pilot project is taking a systemic look at some of our frequently performed work practices to identify and reduce any 'noise' (the impact of inefficient process steps that result in duplication and rework.

Sally Newstead, National Operations Manger for Health Services, says the aim of the ***Get Smarter*** project is to work smarter, not harder.

"We're using a methodology to map a sample of our current processes and review where there are opportunities to improve the way we do things at Medibank.

"We've piloted the project predominantly in the Health Services area and one Retail Centre, where there are a high number of back office duties. We're trying to identify opportunities to eliminate as many non-value adding activities as possible. Significant opportunities exist to improve our current processes (reduce "noise") and achieve workflow improvements (and these improvements are outside or in additional to the improvements that would flow if we didn't have those old clunky IT systems!).

"Background noise in particular is the one we want to get rid of quickly. Why have duplication and reworking, when they add little or no value to the outcome?

'Inefficient work practices are a source of frustration, so we're targeting these changes to make life easier for staff," says Sally.

Five staff (four from Health Services and one from Retail) have been through an intensive training program for the past few months where they have learnt a robust methodology which is supported by a software tool XeP3. In Health Services, the project team has been working with Help Desk staff and hospital claims assessors to understand how they go about doing their work and in the process identify opportunities for improvement.

Standing (L-R) Dianne Tomlin, Sally Newstead
Seated (L-R) Bishop Grbic, Simon Osborne, Bianca Miranda

"The project started in early October and already we've identified several opportunities, which will be implemented before Christmas.

"As we go about cleaning up some old back office processes and building our business around more efficient work practices, we'll see start seeing those productivity gains we are aiming to achieve," added Sally.

If the project turns out to be as successful as we hope, operating costs will be reduced and staff will feel happier at work - a good outcome for both the business and staff.

The recent formation of the SBUs has created a great opportunity for Medibank Private to take the initiative and to start building stronger business relationships with the wider corporate community in markets nationwide.

The push to generate these new forms of revenue and to access larger numbers of members has started in Victoria with the recent signing of business deals with two new partners: Melbourne Tigers in the National Basketball League (NBL) and the YMCA.

sponsorships breaking new ground

Melbourne Tigers

Larry Field, State Sales Manager, Victoria, says the deals present exciting opportunities to improve our profile with sports lovers in Victoria, Tasmania and South Australia.

"I started exploring the idea of doing something with the NBL, and in particular the Melbourne Tigers. What then developed was a fantastic sponsorship package that effectively made Medibank Private one of the two naming rights sponsors for the Melbourne Tigers.

"There are great branding opportunities with the Melbourne Tigers. We've managed to get fantastic signage over the courts, on the team uniforms, and across their merchandise.

"More importantly, for our business, we can leverage the new relationship to create other opportunities within the sponsor network.

"The Tigers have about 60 corporate associations with major organisations. This means that not only do sponsors gain the benefits of game day, they can also interact with the sponsor's network for the purpose of creating new relationships.

"Within hours of signing the deal with the Tigers, the marketing manager of another sponsor was on the phone to me, talking about developing some synergies. This showed one way how the deal with the Tigers would show a return on investment," says Larry.

There are a number of related benefits that go along with the sponsorship of the Tigers. Staff will receive up to 25 per cent discount on tickets to the games, whilst Medibank has access to their high profile players, Andrew Gaze and Mark Bradtke.

"Our objective was not just to align ourselves with a Melbourne-based sporting club, but to have an association with role models like Andrew and Mark. Andrew was our Olympic team captain in Sydney and is a highly regarded sportsperson and community role model. This type of association is valuable for both parties," added Larry.

YMCA

Medibank has signed a deal with the YMCA that will provide us with a strong presence in their sporting facilities around Victoria.

The YMCA is introducing a loyalty program for their 40,000 members and after extensive research they found that Medibank Private was the best fit for private health insurance. And we have the largest number of retail centres, a fact that appealed to them greatly.

In addition to their 40,000-member base, the YMCA has 4,000 employees.

The combination of YMCA members and their staff would provide a wonderful platform to grow our business.

We hope to sign as many of this group as possible by early next year. Then we can start matching our retail network to the YMCA's sporting facilities network, to enable our retail centres to begin developing a close relationship with the nearest YMCA sporting facility.

In this way, our retail centres will be responsible for handling the local YMCA account, growing the relationship further and building up their business-to-business association. This will be a very personalised approach to doing business with organisations.

The relationship with Melbourne Tigers and the YMCA is a fantastic way ahead for developing new markets in the youth area.

see the melbourne tigers in action!

Can you picture yourself sitting in a corporate box at the next Melbourne Tigers match? Well, you can!

Private i has walked the walk and talked the talk, and convinced Larry Field to hand over the corporate box for the Melbourne Tigers match on February 5th 2005.

All you have to do to win this fantastic pass to the match is tell us how many games of basketball Andrew Gaze has played for the Melbourne Tigers?

The winning entry will get a pass for eight people to the match. This means you have to take seven other work friends from Medibank with you.

We might even manage to get some signed t-shirts from the Tigers.

Good luck.

Send your entries to pmdennis@ozemail.com.au by January 15th 2005.

medibank private is ensuring a healthier christmas for australian families

Every year Christmas presents challenges for families.

For some families the challenge is where to spend Christmas, for others the challenge is finding the perfect gift. However, some families are challenged by bigger issues at Christmas such as providing enough food for their children to be able to celebrate a healthy Christmas together.

Once again this year Medibank Private, is supporting The Salvation Army's Christmas Appeal, to help many Australians living below the poverty line share some of the simple joys of Christmas.

Each year, The Salvation Army assists more than 300,000 families who struggle to meet the financial demands of Christmas. This Christmas, Medibank Private hopes to significantly help the Salvos achieve their aim of giving out 250,000 toys to young children who may otherwise receive no gifts at Christmas.

Donation bins have been placed in all 104 Medibank Private retail centres across Australia and its corporate offices, from 25 November to 22 December 2004, for people to place food, toiletries, and toys.

Demonstrating Medibank's support of the Salvo's, ***Frank Levene***, our NSW General Manager, generously donating 50 mountain bikes and helmets to the Salvation Army's Christmas appeal.

On December 7 a special presentation took place in Sydney's Martin Place, with some very eager and deserving children, from Barnardos Australia, on hand to experience the joy of giving and receiving, and of course the thrill of a new mountain bike!

The Salvos band entertained the Martin Place crowd with Christmas carols as NSW General Manager, Frank Levene and the Salvo's Major Neil Dickson presented the children with the bikes and helmets.

The activity caught the eye of the seven network's sunrise team and Medibank Private featured in the closing of the program with both presenters David Koch and Natalie Barr, and the excited children, thanking Medibank for our generosity.

The Christmas spirit is definitely alive and well and has continued to be spread by Medibank Private staff who volunteered to assist wrapping and distributing gifts and preparing and serving meals to families in Melbourne in the weeks leading up to Christmas.

The essence of Medibank Community being - *"about the goodness of heart, dedication, generosity, developing long term relationships with people in need and setting an example in the communities we live in."* - is definitely being embraced by staff.

‘easy’ life of a retail centre sales consultant

Ever wondered what life is like in a retail centre?

Private i crept behind the scenes of the Glen Waverley Retail Centre to discover how 'easy' it is to work in a retail environment. ***Marie-Anne*** tells us how her life is a 'breeze' at Glen Waverley.

“At the start of my day I need to:

– Log on to Relationship 1st and Mainframe.

– Open up Lotus Notes.

– Open following files - weekly stats, balance sheet, daily movie ticket sheet, reverse eftpos payment summary sheet, weekly courtesy call back sheet.

“I'm now ready to greet my first customer, who happens to be a new member.

“After explaining all the different options to him I need to create a lead, add contact, convert the lead, and action Membership Join. This involves the followings steps:

(1) Key details in R1 and Main Frame

(2) Key 30% Rebate form

(3) Enter Direct debit details where required.

“Then I go to a Case Number for Membership Join and action “send mail”. I print letter and give to member. Update details of 30% rebate on 30% daily tally sheet. Copy form and file original form in tray in back room. Update my four weekly courtesy new member profile form and copy form. Update the summary sheet of the four weekly courtesy call.

“Phewww. It's still not 10.00am. Time to put my feet up - not exactly!

“My next customer wants to buy some movie tickets. Simple and straightforward transaction! First I need to check that member holds a hospital cover. Then I need to create a case in R1 and update the daily movie tally sheet before I can give the tickets to our member. I have to remember to print sheet at the end of day and attach it to my balance sheet.

“Throughout the rest of the morning and into the afternoon, I'm processing medical, ancillary claims and premiums, answering numerous enquiries from members, changing covers, making numerous phone calls to providers and head office, and directing lost souls to HBA, Australian Unity or Medicare office.

“Oh, and to lighten our Manager's load I also help out with some back office duties.

“It's now 4.45pm.

“We have farewelled our last customer and closed the door. I now need to balance all my work. I need to make sure that I've entered all necessary details on the weekly stats sheet and balanced my cash. I also need to make sure that I have included with my balance sheet, the daily movie tickets sheet and reverse eftpos sheet.

“Everything is in order. The Retail Centre has balanced. After such an 'easy' day at the office we can all go home and unwind with a glass or two of lemonade (chardonnay or a nice red).”

Marie-Anne

Glen Waverley RC

are you a dead ringer?

Was *George Savvides* separated at birth from Adrian Monk (Tony Shalhoub)? Is *Tim Morphy* really Alexander Downer, or is Alexander Downer really Tim Morphy? Would the real Genie from Aladdin please stand up?

Dead Ringer means you are the spitting image of a celebrity. If you are, in fact, a dead ringer for a celebrity, you will most likely get invited to all the great parties around town, have no trouble finding a seat at your favourite restaurant, and have your own reality television show.

If George and Tim ever decide that senior management has lost its zing, they may decide to try out the world of look-alike work. Many agents are interested in hiring dead ringer look-alikes. However, looking exactly like a celebrity doesn't mean that you won't have to catch up on your performing abilities - you will still need some talent to be hired. So George, start practising your singing, and Tim, begin those acting lessons.

Are you a Dead Ringer? Win a DVD player!

Do you look like a famous person or a character portrayed by a celebrity in a film, a television show, or the media? If you do resemble someone famous, there is a DVD Recorder waiting for you.

Or you can do what many other successful look-alikes have done - recreate a recognisable character. Bring to life a favourite character that a celebrity is well known for.

Using the magic of hairstyles, makeup, and costumes, recreate the appearance of a famous character. For example, you may not be the spitting image of Jim Carey, but if you can do a terrific impersonation of his colourful character from the film The Mask, then with the right hair and makeup you can win the DVD!

Send your photo and the name of the famous person or character you resemble to clea_parker@medibank.com.au

The best entry will win a DVD player.

Be creative and have fun finding a star or character that you are a dead ringer for.

medihealth

Following on from a recent presentation by the Prostate Cancer Foundation of Australia to staff at 700 Collins St. - which was an initiative of the new Health and Wellbeing QAT - we are spreading the word with the aim of increasing cancer awareness even further. We hope the information below is useful and thought provoking.

Detecting and treating prostate cancer

Guys, do you experience any of the following symptoms?

- **Frequent urination (especially at night)**
- **Weak urinary stream**
- **Inability to urinate**
- **Interruption of urinary stream (stopping and starting)**
- **Pain or burning on urination**
- **Blood in the urine**
- **Pain in lower back, pelvis or upper thighs**

If you have any of the above signs, it could men you have a problem with your prostate.

Around 10,500 Australian men are diagnosed with prostate cancer each year and more than 2600 of them will die from it. Prostate cancer is the most common type of cancer (excluding skin cancer) among American men. According to the American Cancer Society, men aged 50 and older, and those over the age of 45 who are in high-risk groups, such as men with a family history of prostate cancer, should have a prostate-specific antigen (PSA) blood test and digital rectal exam (DRE) once every year.

What is the prostate?

The prostate is a gland of the male reproductive system. The prostate produces some of the fluid for semen, which transports sperm during the male orgasm.

Normally, the prostate is quite small - it is nearly the same size and shape as a chestnut. It is located in front of the rectum, just below the bladder, and wraps around the urethra, the tube that carries urine from the bladder out through the tip of the penis. The prostate is made up of approximately 30% muscular tissue, and the rest is glandular tissue.

Understanding prostate cancer

Prostate cancer is a group of cancerous cells that begins most often in the outer part of the prostate.

Early prostate cancer usually does not cause any symptoms. However, as the tumour grows, it may spread from the prostate to surrounding areas. Change in urination, including increased frequency, hesitancy or dribbling of urine may be experienced.

Prostate cancer can spread from the prostate to nearby lymph nodes, bones or other organs. This spread is called metastasis. For example, as a result of metastasis to the spine, some men experience back pain.

What causes prostate cancer?

While researchers still do not know the exact answer to this question, they have identified some risk factors. These include environment, genetics and family history.

Incidence increases with age

More than 70% of all prostate cancers are diagnosed in men over age 65. Information regarding first-degree relatives (i.e., father, brother) has shown an over 2- to 11-fold increase in the risk of prostate cancer in men who have a history of this disease in their family.

Diagnosing prostate cancer

Determining whether you have prostate cancer generally involves a series of tests and exams.

Digital Rectal Exam (DRE)

Because the prostate lies in front of the rectum, your physician can feel the prostate by inserting a gloved, lubricated finger into the rectum. This simple procedure is called a digital rectal examination (DRE). It allows your physician to determine whether the prostate is enlarged or has lumps or other types of abnormal texture.

Prostate-Specific Antigen (PSA) test

Used in addition to the DRE, a PSA test increases the likelihood of prostate cancer detection. PSA is the abbreviation for prostate-specific antigen, a substance produced by the prostate cells. A PSA test measures the level of PSA in the bloodstream and is reported as nanograms per millilitre, or ng/mL. Very little PSA escapes from a healthy prostate into the bloodstream, but certain prostate conditions can cause larger amounts of PSA to leak into the blood.

A high level of PSA in the bloodstream is a warning sign that prostate cancer may be present. But since other kinds of prostate disease can also cause high PSA levels, PSA testing by itself cannot confirm the presence of prostate cancer.

A high PSA level only indicates the possibility of prostate cancer and the need for additional evaluation by your physician. Conversely, a low PSA level does not always mean that prostate cancer is not present.

Transrectal Ultrasound (TRUS)

Transrectal Ultrasound (TRUS) is the use of soundwaves to create an image of the prostate. As the waves bounce off the prostate, they create a pattern that is converted into a picture by a computer. TRUS is used to detect abnormal prostate growth and to guide a biopsy of the abnormal prostate area.

Biopsy

A biopsy is the removal of a sample of tissue, which is then examined under a microscope to check for cancerous changes. Only a biopsy can definitely confirm prostate cancer.

Typically, the physician takes multiple tissue samples for biopsy. Keep in mind that it is still possible to have cancer, even if the biopsy is negative. This is because, even though multiple samples are taken during a biopsy, it can still miss some cancers.

If the biopsy is taken and prostate cancer is found, the tumour is graded in the medical lab. The grade estimates how aggressive a prostate cancer is; that is, how fast it is growing and the likelihood of it spreading. Sometimes you will hear the grade referred to as the Gleason grade.

The value of early detection

The overall prognosis for prostate cancer patients has dramatically improved compared with years ago. Over the past 20 years, the overall survival rates for all stages of prostate cancer combined have increased from 67% to 97%. This means more men are living longer after diagnosis.

The major treatment options

The major treatment options for prostate cancer include:

- Hormonal therapy
- Surgery
- Radiation
- Chemotherapy
- Observation

These options are not listed in any particular order. The options selected for your treatment will depend on several factors, including your age, the stage of your disease and the advice of your physician.

Questions to ask your doctor about prostate cancer

- What is the grade and stage of my tumor and how does that affect my treatment options?
- What additional tests do you recommend and why?
- Is my tumor stimulated by testosterone?
- What treatment(s) are you recommending? Why?
- What are the side effects of the treatment(s) you are recommending?
- What are the advantages or disadvantages of both medical and surgical therapies?
- How will treatment affect my sex life?
- What are the chances I will have problems with incontinence? What options do I have for treating this?
- Are there any clinical trials for my type of cancer?
- Should I follow a special diet?
- Is watchful waiting safe?
- What if the prostate cancer comes back after my initial treatment?
- What are secondary treatment options?

COMPETITION 1

The Awful Tower

At the height of the French Revolution in a small provincial town, four minor aristocrats had been arrested, and were gaoled in a tower pending trial, each man being imprisoned on a different floor of the building.

From the clues given below, can you work out the name and full title of the man on each floor of the tower?

Clues

1. **The Comte de Petits-Pois was incarcerated on the floor above Reynaud.**
2. **Adolphe was imprisoned higher up the tower than the Marquis; neither of these aristocrats was named L'Epinard.**
3. **The Vicomte had a first-floor cell.**
4. **The second-floor prisoner was Maxim.**
5. **Celestin's family name was not de la Basse-Cour.**

First names: Adolphe; Celestin; Maxim; Reynaud.

Ranks: Baron; Comte; Marquis; Vicomte.

Family Names: de la Basse-Cour; deL'Epinard; de Petits-Pois; du Verger.

First Name: _____
Rank: _____
Family Names: _____

First Name: _____
Rank: _____
Family Names: _____

First Name: _____
Rank: _____
Family Names: _____

First Name: _____
Rank: _____
Family Names: _____

COMPETITION 2

Answer the following clues and place the initials to the answers into the appropriately numbered squares to find the mystery film character's name.

1	2	3	4	5	6
7	8	9	10	11	12

(8 & 10) **Oscar winner for As Good As It Gets.**

(7 & 2) **Marc Bolan was lead singer.**

(3 & 4) starring **Where monsters are found in this great science fiction film Leslie Nielson (before he became the Naked Gun).**

(5 & 12) **Sorry about that, Chief.**

(1 & 6 & 11) **Best Stingers of all time.**

(9) **There was a story told about this letter.**

Send your entries to pmdennis@ozemail.com.au

winners are grinners

Happy Birthday

What a tough one this turned out to be. I had my revenge because the majority of entries received were wide of the mark - no birthday presents for them.

However, one clever cookie hit the target. Congratulations to ***Andrew Harrild*** from Perth CCL for getting the answer correct.

For those of you still struggling to come to terms with the puzzle, the names and ages of the children are:

Darren - Age 6
Susie - Age 10
James - Age 8
Jane - Age 9
Peter - Age 7
Amanda - Age 6
Francis - Age 9
Sally - Age 7
Alan - Age 10
Emma - Age 8.

Andrew receives a $30 CD/book voucher.

Word Scrimmage

The winner here is ***Liz Pearson,*** Sales Consultant, Shop 51 Park Beach Plaza, Coffs Harbour.

Liz got a total of 697 points. Well done.

Liz also receives a $30 CD/book voucher.