

Private Health Information Statement - Combined policy

Bronze Essentials Hospital 750 and Ancillary Lite SA

ACA Health Benefits Fund

<http://acahealth.com.au>
info@acahealth.com.au
 1300 368 390

Monthly Premium

\$380.52[#]

(before any rebate, loading or discount)

Covers 2 adults (and no-one else)
 Available in South Australia

[#] You may be entitled to an Australian Government rebate on the above premium. Your premium may also include a Lifetime Health Cover loading or an insurer discount. Check with your insurer for details.

Membership of this insurer is restricted to Seventh-day Adventist Church employees, Local Church Officers and their families.

Hospital cover

This policy exempts you from the Medicare Levy Surcharge.

This policy does not provide accident cover or benefits for travel and accommodation (outside of hospital).

✓ Covered

For information on what is covered under each category, see <https://privatehealth.gov.au/categories>

R Restricted

Restricted categories partially cover your hospital costs as a private patient in a public hospital. You may incur significant expenses in a private room or private hospital.

✗ Not Covered

These categories are not covered by this policy.

This policy ✓ includes cover for

✓ Bone, joint and muscle	✓ Eye (not cataracts)	✓ Miscarriage and termination of pregnancy
✓ Brain and nervous system	✓ Gastrointestinal endoscopy	✓ Pain management
✓ Breast surgery (medically necessary)	✓ Gynaecology	✓ Skin
✓ Chemotherapy, radiotherapy and immunotherapy for cancer	✓ Hernia and appendix	✓ Tonsils, adenoids and grommets
✓ Diabetes management (excluding insulin pumps)	✓ Joint reconstructions	R Hospital psychiatric services
✓ Digestive system	✓ Kidney and bladder	R Palliative care
✓ Ear, nose and throat	✓ Male reproductive system	R Rehabilitation

This policy ✗ does not include cover for

✗ Assisted reproductive services	✗ Heart and vascular system	✗ Plastic and reconstructive surgery (medically necessary)
✗ Back, neck and spine	✗ Implantation of hearing devices	✗ Podiatric surgery (provided by a registered podiatric surgeon – limited benefits)
✗ Blood	✗ Insulin pumps	✗ Pregnancy and birth
✗ Cataracts	✗ Joint replacements	✗ Sleep studies
✗ Dental surgery	✗ Lung and chest	✗ Weight loss surgery
✗ Dialysis for chronic kidney failure	✗ Pain management with device	

The benefits paid for hospital treatment will depend on the type of cover you purchase and whether your fund has an agreement in place with the hospital in which you are treated. See 'Agreement Hospitals' on privatehealth.gov.au for which hospitals have arrangements with your insurer – <https://privatehealth.gov.au/dynamic/agreementhospitals>.

Under this policy, you may have to pay out-of-pocket costs above what you get from Medicare or your private health insurer. Before you go to hospital, you should ask your doctors, hospital and health insurer about any out-of-pocket costs that may apply to you.

The following payments may also apply for hospital admissions

Excess: You will have to pay an excess on admission. This is limited to a maximum of \$750 per person and \$1500 per policy per year.

Co-payments: No co-payments

The following waiting periods for hospital admissions apply to new or upgrading members

Waiting periods:

- 2 months for palliative care, rehabilitation and hospital psychiatric treatments, even if pre-existing
- 12 months for other pre-existing conditions
- 12 months for pregnancy and birth (obstetrics)
- 2 months for all other treatments

Gap Cover

This provider offers '[known gap](#)' or '[no gap](#)' cover for medical bills for this product.

The [Medical Costs Finder](#) lets you find out more about the cost of specialist medical services.

Other features of this hospital cover

\$750 excess per person per annum for adult non-dependents. For NSW & ACT residents only, Hospital cover includes ambulance cover for emergency (unlimited with no waiting period) and call-out fees (paid for each attendance, including emergency treatment without transport to hospital) in that state or territory only. No ambulance cover for excluded services.

For further information about this policy see

<https://acahealth.com.au/quote-details/?hospital=essentials&extras=lite>

General Treatment Cover

This health insurer does not operate a preferred provider scheme.

This policy  includes General treatment (Extras) cover for

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental	9	\$700 per person (combined limit for general dental, major dental, endodontic & other services - Sub-limits apply)	Periodic oral examination - \$100.00 Scale & clean - \$100.00 Fluoride treatment - \$100.00
Major dental	9		Surgical tooth extraction - \$168.00 Full crown veneered - \$400.00
Endodontic	9		Filling of one root canal - \$400.00
Optical	4	\$200 per person (combined limit for optical & other services)	Single vision lenses & frames - \$200.00 Multi-focal lenses & frames - \$200.00
Non PBS pharmaceuticals	2	\$250 per person	Per eligible prescription - \$50.00
Physiotherapy	2	\$300 per person (combined limit for physiotherapy, chiropractic, podiatry, osteopathy & other services)	Initial visit - \$37.50 Subsequent visit - \$26.50
Chiropractic	2		Initial visit - \$25.00 Subsequent visit - \$25.00
Podiatry	2		Initial visit - \$25.00 Subsequent visit - \$25.00

Acupuncture	2	\$100 per person (combined limit for acupuncture & remedial massage)	Initial visit - \$20.00 Subsequent visit - \$20.00
Remedial massage	2		Initial visit - \$20.00 Subsequent visit - \$20.00
Osteopathy	2	Combined limit - see Physiotherapy	Initial visit - \$25.00 Subsequent visit - \$25.00

This policy **X does not include** General treatment (Extras) cover for

X Blood glucose monitors	X Orthodontic	X Other treatments - check with your insurer
X Hearing aids	X Psychology	

For further information about this policy see

<https://acahealth.com.au/quote-details/?hospital=essentials&extras=lite>

Ambulance cover

In South Australia this policy provides:

Emergency: Unlimited with no waiting period.

Call-out fees: will be paid for each attendance, including emergency treatment without transport to hospital.

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Disclaimer

The information contained in this Private Health Information Statement was provided by the insurer and is intended as general information. It may not take into account your particular circumstances. For information please contact the insurer.