

Private Health Information Statement - Hospital policy

Budget Hospital (Basic Plus)

Australian Unity Health Limited

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13 29 39

Monthly Premium

\$257.40[#]

(before any rebate, loading or discount)

Covers 2 adults (and no-one else)

Available in Tasmania

Closed to new members

[#] 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.

Hospital cover

This policy exempts you from the Medicare Levy Surcharge.

This policy provides accident cover - check with your insurer for details.

This policy does not provide benefits for travel or 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

R Back, neck and spine	R Gastrointestinal endoscopy	R Miscarriage and termination of pregnancy
R Blood	R Gynaecology	R Pain management
R Bone, joint and muscle	R Heart and vascular system	R Pain management with device
R Brain and nervous system	R Hernia and appendix	R Palliative care
R Breast surgery (medically necessary)	R Hospital psychiatric services	R Plastic and reconstructive surgery (medically necessary)
R Chemotherapy, radiotherapy and immunotherapy for cancer	R Implantation of hearing devices	R Podiatric surgery (provided by a registered podiatric surgeon – limited benefits)
R Dental surgery	R Insulin pumps	R Rehabilitation
R Diabetes management (excluding insulin pumps)	R Joint reconstructions	R Skin
R Digestive system	R Kidney and bladder	R Sleep studies
R Ear, nose and throat	R Lung and chest	R Tonsils, adenoids and grommets
R Eye (not cataracts)	R Male reproductive system	

This policy ✗ does not include cover for

✗ Assisted reproductive services	✗ Dialysis for chronic kidney failure	✗ Pregnancy and birth
✗ Cataracts	✗ Joint replacements	✗ Weight loss surgery

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 of \$500 per admission. This is limited to a maximum of \$500 per person and \$1000 per policy per year.

Excess payments do not apply to hospital admissions for accidents.

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
- 2 months for all other treatments

Gap Cover

This provider does not offer any 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

You'll get private hospital benefits for admissions to hospital as a result of an Accident that occurs after joining this cover. No excess applies for Accidents. For all other included treatments you're covered as a private patient in a shared room of a public hospital. Excess applies. Additional Benefits of this cover include: Hospital Substitution Programs, Health Support Programs and Preventative Health Services. Waiting periods may apply. Please refer to the product Fact Sheet or contact Australian Unity for further details.

Ambulance cover

Ambulance cover is provided by the State government for residents of Tasmania. This may include cover whilst interstate, except for South Australia and Queensland where no cover applies. In other states please check with Ambulance Tasmania - https://www.health.tas.gov.au/ambulance/fees_and_accounts.

Other features of this ambulance cover

Some authorities provide certain ambulance services at no cost to eligible residents. Refer to your local ambulance provider for more information. Australian Unity won't pay a Benefit if you're eligible to claim from, or are covered by, another source. Australian Unity doesn't pay a benefit towards ambulance subscription services. If you're not covered, this cover includes emergency ambulance to hospital, if transport is coded and invoiced as emergency transport by a state/territory ambulance service/authority. Call-out fees where you're not taken to hospital are limited to 2 ambulance attendances per person per calendar year. This cover doesn't include non-emergency ambulance transportation

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.