

Private Health Information Statement - Combined policy

Bronze Hospital 2 Excess \$500 Premium Extras (Family)

Hunter Health Insurance

<http://www.hunterhi.com.au>

enquiries@hunterhi.com.au

02 4990 1385

Underwritten by CDH Benefits Fund

Monthly Premium

\$610.86[#]

(before any rebate, loading or discount)

Covers two adults & dependants (3 or more people, only 2 of whom are adults)

Available in Tasmania

[#] 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.

This policy covers children and other dependants up to and including the age of 20, students up to and including the age of 24, as well as persons with a disability who qualify as a child or other dependant or student in these age ranges.

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

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

This policy ✗ does not include cover for

✗ Assisted reproductive services	✗ Insulin pumps	✗ Plastic and reconstructive surgery (medically necessary)
✗ Cataracts	✗ Joint replacements	✗ Pregnancy and birth
✗ Dialysis for chronic kidney failure	✗ Lung and chest	✗ Sleep studies
✗ Heart and vascular system	✗ Pain management with device	✗ 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 \$1000 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.

For further information about this policy see

<https://www.hunterhi.com.au/products/>

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	2	Gap Free Preventative Dental 100% Benefit Limit 2 Service Person Per Year Items Number 011-015 111-116	Periodic oral examination - 100% of charge Scale & clean - 100% of charge Fluoride treatment - \$25.00 Surgical tooth extraction - \$110.00
Major dental	12	\$1,100 per person	Full crown veneered - \$800.00
Endodontic	12	No annual limit	Filling of one root canal - \$150.00
Orthodontic	12	\$600 per person \$2,500 lifetime limit (Sub-limits apply)	Braces for upper & lower teeth, including removal plus fitting of retainer - \$2,500.00
Optical	2	\$290 per person	Single vision lenses & frames - \$210.00 Multi-focal lenses & frames - \$290.00
Non PBS pharmaceuticals	2	\$700 per person	Per eligible prescription - \$70.00
Physiotherapy	2	\$700 per person (combined limit for physiotherapy, occupational therapy & speech therapy)	Initial visit - \$55.00 Subsequent visit - \$45.00
Chiropractic	2	\$600 per person (combined limit for chiropractic, podiatry, psychology, acupuncture, remedial massage, dietetics/dietary advice, exercise physiology & osteopathy - Sub-limits apply)	Initial visit - \$40.00 Subsequent visit - \$35.00
Podiatry	2		Initial visit - \$45.00 Subsequent visit - \$40.00
Psychology	2		Initial visit - \$50.00 Subsequent visit - \$50.00

Acupuncture	2		Initial visit - \$40.00 Subsequent visit - \$40.00
Remedial massage	2		Initial visit - \$50.00 Subsequent visit - \$30.00
Hearing aids	36	\$750 per person (combined limit for hearing aids & other services - Sub-limits apply)	Hearing aid - \$625.00
Blood glucose monitors	12	\$500 per person 1 appliance(s) every 1 year (combined limit for blood glucose monitors & other services)	Per monitor - 75% of charge
Ante-natal/Post-natal classes	2	\$250 per person	Initial visit - \$25.00
Dietetics/dietary advice	2	Combined limit - see Chiropractic	Initial visit - \$35.00
Exercise physiology	2	Combined limit - see Chiropractic	Initial visit - \$26.00 Subsequent visit - \$22.00
Health management / Healthy lifestyle	2	\$65 per person	Health management - \$65.00
Home nursing	2	\$950 per person	Initial visit - \$35.00
Occupational therapy	2	Combined limit - see Physiotherapy	Initial visit - \$35.00
Orthotics (podiatric orthoses)	2	\$200 per person	Orthotics supply & fit - 75% of charge
Osteopathy	2	Combined limit - see Chiropractic	Initial visit - \$35.00 Subsequent visit - \$30.00
Speech therapy	2	Combined limit - see Physiotherapy	Initial visit - \$35.00 Subsequent visit - \$40.00
Does not include treatment for: Alexander technique; Aromatherapy; Bowen therapy; Buteyko; Feldenkrais; Western herbalism; homeopathy; iridology; kinesiology; naturopathy; Pilates; reflexology; Rolfing; Shiatsu; Tai chi; Yoga CSIRO Total Wellbeing Diet \$60 Per Year Per Membership			

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

X Other treatments - check with your insurer

Other features of this general treatment cover

Orthodontic is paid at 75% of account in current year to max \$600.00 with \$250.00 per year accumulated up to a maximum benefit of \$2500.00 per person per lifetime.

For further information about this policy see

<https://www.hunterhi.com.au/products/>

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.

For further information about this policy see

<https://www.hunterhi.com.au/ambulance-cover/>

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.