

## Private Health Information Statement - Combined policy

### Frank Simple Essentials 60 Bundle 750 (Basic+)

#### Frank Health Insurance

<https://www.frankhealthinsurance.com.au>

frank@frankhealthinsurance.com.au

1300 209 428

Underwritten by GMHBA Limited

#### Monthly Premium

**\$182.85 #**

(before any rebate, loading or discount)

Covers only one person

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, an age-based discount or an insurer discount. Check with your insurer for details.

### 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

|                         |                                  |                  |
|-------------------------|----------------------------------|------------------|
| ✓ Dental surgery        | ✓ Tonsils, adenoids and grommets | R Rehabilitation |
| ✓ Hernia and appendix   | R Hospital psychiatric services  |                  |
| ✓ Joint reconstructions | R Palliative care                |                  |

This policy ✗ does not include cover for

|   |                                   |   |
|---|-----------------------------------|---|
| ✗ Assisted reproductive services                          | ✗ Ear, nose and throat            | ✗ Miscarriage and termination of pregnancy  |
| ✗ Back, neck and spine                                    | ✗ Eye (not cataracts)             | ✗ Pain management   |
| ✗ Blood   | ✗ Gastrointestinal endoscopy      | ✗ Pain management with device   |
| ✗ Bone, joint and muscle                                  | ✗ Gynaecology                     | ✗ Plastic and reconstructive surgery (medically necessary)                          |
| ✗ Brain and nervous system                                | ✗ Heart and vascular system       | ✗ Podiatric surgery (provided by a registered podiatric surgeon – limited benefits) |
| ✗ Breast surgery (medically necessary)                    | ✗ Implantation of hearing devices | ✗ Pregnancy and birth   |
| ✗ Cataracts   | ✗ Insulin pumps                   | ✗ Skin  |
| ✗ Chemotherapy, radiotherapy and immunotherapy for cancer | ✗ Joint replacements              | ✗ Sleep studies   |
| ✗ Diabetes management (excluding insulin pumps)           | ✗ Kidney and bladder              | ✗ Weight loss surgery   |
| ✗ Dialysis for chronic kidney failure                     | ✗ Lung and chest                  |   |
| ✗ Digestive system  | ✗ Male reproductive system        |   |

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](https://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 \$750 per admission. This is limited to a maximum of \$750 per person and \$750 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
- 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

For more information contact Frank on 1300 437 265 or visit [www.frankhealthinsurance.com.au](http://www.frankhealthinsurance.com.au)

## General Treatment Cover

This health insurer does not operate a preferred provider scheme.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk \*: Vaccinations must be a private Schedule 4 or Schedule 8 and dispensed via a provider in private practice. Benefit after deduction of the PBS co-payment.

| Treatment      | Waiting period (months) | Benefit limits (per 12 months unless otherwise stated)  | Examples of maximum benefits  |
|----------------|-------------------------|---|---|
| General dental | 2                       | \$500 per policy<br>(combined limit for general dental, major dental, endodontic & orthodontic) | Periodic oral examination - 60% of charge<br>Scale & clean - 60% of charge<br>Fluoride treatment - 60% of charge<br>Surgical tooth extraction - 60% of charge |
| Major dental   | 12                      |   | Full crown veneered - 60% of charge   |
| Endodontic     | 12                      |   | Filling of one root canal - 60% of charge   |
| Orthodontic    | 12                      |   | Braces for upper & lower teeth, including removal plus fitting of retainer - 60% of charge  |
| Optical        | 6                       | \$250 per policy  | Single vision lenses & frames - 60% of charge<br>Multi-focal lenses & frames - 60% of charge  |
| Physiotherapy  | 2                       | \$350 per policy<br>(combined limit for physiotherapy, chiropractic & osteopathy)               | Initial visit - 60% of charge<br>Subsequent visit - 60% of charge   |
| Chiropractic   | 2                       |   | Initial visit - 60% of charge<br>Subsequent visit - 60% of charge   |
| Osteopathy     | 2                       |   | Initial visit - 60% of charge<br>Subsequent visit - 60% of charge   |
| Vaccinations*  | 2                       | \$100 per policy  | Per service - 60% of charge   |

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

|                          |                           |  |
|--------------------------|---------------------------|--|
| ✗ Acupuncture            | ✗ Non PBS pharmaceuticals | ✗ Remedial massage                           |
| ✗ Blood glucose monitors | ✗ Podiatry                | ✗ Other treatments - check with your insurer |
| ✗ Hearing aids           | ✗ Psychology              |  |

#### Other features of this general treatment cover

Excludes chiropractic x-rays. Remember, Frank is all online. For more information contact Frank on 1300 437 265 or visit [www.frankhealthinsurance.com](http://www.frankhealthinsurance.com).

### 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](https://www.health.tas.gov.au/ambulance/fees_and_accounts).

#### Other features of this ambulance cover

Tasmanian residents are covered by a State based scheme. Please contact Ambulance Tasmania for more details regarding coverage.

#### 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.