

Private Health Information Statement - Combined policy

FIT & FREE SILVER PLUS NIL EXCESS

HCF

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 13 13 34

Monthly Premium

\$382.57[#]

(before any rebate, loading or discount)

Covers only one person
 Available in NSW & ACT
 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 and benefits for travel or accommodation (outside of hospital) - check with your insurer for details.

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

This policy ✗ does not include cover for

✗ Assisted reproductive services	✗ Pregnancy and birth	✗ Weight loss surgery
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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: No excess

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

Comprehensive hospital and extras package designed for singles and couples without dependant kids. No excess for accident related treatment. Includes involuntary unemployment assistance, travel and accommodation benefits for hospital admission and cover for unlimited emergency ambulance trips. See fund rules for more information. Access to over 100 exclusive offers through HCF Thank You program. For more information visit: www.hcf.com.au/thankyou.

General Treatment Cover

Our nationwide network of No-Gap participating providers gives you access to comprehensive extras cover at an affordable price. Find out more See <https://www.hcf.com.au/locations/find-a-participating-provider>.

This policy  includes General treatment (Extras) cover for

*Note, for items marked with an asterisk *: General dental includes dental check-ups which have service limits not included in annual limit. Endodontic, periodontic, oral surgery & occlusal treatment have a combined limit of \$500. Crowns & bridges have a limit of \$800. Dentures and orthodontics are not covered. A \$200 sublimit for foot orthotics included within Podiatry. (12 month waiting period apply for orthotics). A higher psychology benefit (\$75) may apply after Medicare Mental Health Treatment Plan is used up for the remainder of the calendar year.*

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	\$550 per policy (Sub-limits apply)	Periodic oral examination - \$34.00 Scale & clean - \$69.00 Fluoride treatment - \$27.00
Major dental*	12	\$1,300 per policy (combined limit for major dental, endodontic & other services - Sub-limits apply)	Surgical tooth extraction - \$182.00 Full crown veneered - \$580.00
Endodontic*	12		Filling of one root canal - \$164.00
Optical	2	\$250 per policy	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge
Non PBS pharmaceuticals	2	\$500 per policy	Per eligible prescription - \$50.00
Physiotherapy*	2	\$600 per policy (combined limit for physiotherapy, chiropractic, exercise physiology, occupational therapy, osteopathy & other services)	Initial visit - \$46.00 Subsequent visit - \$42.00
Chiropractic*	2		Initial visit - \$40.00 Subsequent visit - \$35.00
Podiatry*	2	\$300 per policy (combined limit for podiatry & other services - Sub-limits apply)	Initial visit - \$38.00 Subsequent visit - \$34.00
Psychology*	2	\$300 per policy	Initial visit - \$44.00 Subsequent visit - \$44.00
Acupuncture	2	\$300 per policy (combined limit for acupuncture, remedial massage,	Initial visit - \$27.00 Subsequent visit - \$20.00

Remedial massage	2	chinese medicine & other services)	Initial visit - \$27.00 Subsequent visit - \$20.00
Audiology	2	\$300 per policy (combined limit for audiology, dietetics/dietary advice, orthotics (podiatric orthoses) & speech therapy - Sub-limits apply)	Initial visit - \$52.00 Subsequent visit - \$35.00
Chinese medicine	2	Combined limit - see Acupuncture	Initial visit - \$27.00 Subsequent visit - \$20.00
Dietetics/dietary advice	2	Combined limit - see Audiology	Initial visit - \$50.00 Subsequent visit - \$35.00
Exercise physiology	2	Combined limit - see Physiotherapy	Initial visit - \$32.00 Subsequent visit - \$30.00
Health management / Healthy lifestyle	2	\$200 per policy	Health management - \$200.00
Occupational therapy	2	Combined limit - see Physiotherapy	Initial visit - \$62.00 Subsequent visit - \$40.00
Orthotics (podiatric orthoses)	12	Combined limit - see Audiology	Orthotics supply & fit - \$100.00
Osteopathy	2	Combined limit - see Physiotherapy	Initial visit - \$40.00 Subsequent visit - \$35.00
Speech therapy	2	Combined limit - see Audiology	Initial visit - \$60.00 Subsequent visit - \$40.00
Major dental includes surgical extraction, occlusal therapy, periodontics, endodontics and crown & bridges services only. Therapies include mental health services (psychology, HCF-approved counselling, accredited mental health social worker and HCF-approved online cognitive behavioural therapy courses), physiotherapy, exercise physiology, chiropractic, osteopathy, occupational therapy, dietetics, podiatry, audiology, speech pathology, remedial massage, myotherapy, acupuncture and chinese herbal medicine services only.			

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

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

Other features of this general treatment cover

A \$200 sublimit for foot orthotics included within Podiatry (12 month waiting period apply for orthotics). Claim psychology after Medicare entitlements exhausted. A higher psychology benefit (\$75) may apply after Medicare Mental Health Treatment Plan is used up.

Ambulance cover

In NSW & ACT this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

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

Other features of this ambulance cover

Cover for unlimited air, land and sea emergency ambulance trips and treatment by paramedics in Australia for services provided by recognised Ambulance Service Providers. Benefits are not payable when covered by another third party or other funding arrangement, such as a State government scheme. See fund rules for more information.

For further information about this policy see

<https://www.hcf.com.au/faqs/faqs-cover#what-is-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.