

Private Health Information Statement - Combined policy

Medibank Gold Advantage \$250 Excess

Medibank Private Limited

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Monthly Premium

\$440.05 #

(before any rebate, loading or discount)

Covers only one person
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, 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 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

✓ Assisted reproductive services	✓ Eye (not cataracts)	✓ Miscarriage and termination of pregnancy
✓ Back, neck and spine	✓ Gastrointestinal endoscopy	✓ Pain management
✓ Blood	✓ Gynaecology	✓ Pain management with device
✓ Bone, joint and muscle	✓ Heart and vascular system	✓ Palliative care
✓ Brain and nervous system	✓ Hernia and appendix	✓ Plastic and reconstructive surgery (medically necessary)
✓ Breast surgery (medically necessary)	✓ Hospital psychiatric services	✓ Podiatric surgery (provided by a registered podiatric surgeon – limited benefits)
✓ Cataracts	✓ Implantation of hearing devices	✓ Pregnancy and birth
✓ 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	✓ Weight loss surgery
✓ Ear, nose and throat	✓ 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 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 \$250 per person 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

Includes a Private Room Promise at a Medibank Members' Choice private hospital and Medibank Nurse 24/7. Includes Hospital Bonus to help pay for a range of approved hospital charges related to a hospital admission. See Cover Summary for more information.

General Treatment Cover

At Members' Choice extras providers you may get more for your cover. This includes 100% back on a dental check up, scale and clean each year and great optical deals. See <https://www.medibank.com.au/health-insurance/find-provider/#/>.

This policy  includes General treatment (Extras) cover for

<i>Note, for items marked with an asterisk *: A 12 month waiting period applies to surgical tooth extraction.</i>			
Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	No annual limit	Periodic oral examination - \$29.90 Scale & clean - \$51.20 Fluoride treatment - \$16.10 Surgical tooth extraction - \$50.60
Major dental	12	\$2,000 per policy (combined limit for major dental & endodontic)	Full crown veneered - \$510.00
Endodontic	12		Filling of one root canal - \$85.00
Orthodontic	12	\$800 per policy \$2,400 lifetime limit for Orthodontic	Braces for upper & lower teeth, including removal plus fitting of retainer - \$400.00
Optical	6	\$250 per policy	Single vision lenses & frames - \$115.00 Multi-focal lenses & frames - \$175.00
Non PBS pharmaceuticals	2	\$600 per policy	Per eligible prescription - \$30.60
Physiotherapy	2	\$700 per policy	Initial visit - \$32.90 Subsequent visit - \$23.00
Chiropractic	2	\$400 per policy (combined limit for chiropractic & osteopathy)	Initial visit - \$32.90 Subsequent visit - \$19.20
Podiatry	2	\$400 per policy (combined limit for podiatry & orthotics (podiatric orthoses))	Initial visit - \$27.10 Subsequent visit - \$19.50
Psychology	0	\$400 per policy	Initial visit - \$131.96 Subsequent visit - \$109.28

Acupuncture	2	\$400 per policy	Initial visit - \$27.10 Subsequent visit - \$15.80
Remedial massage	2	\$150 per policy (combined limit for remedial massage, chinese medicine & exercise physiology)	Initial visit - \$20.00 Subsequent visit - \$20.00
Hearing aids	36	\$800 per policy (combined limit for hearing aids & other services)	Hearing aid - \$600.00
Blood glucose monitors	24	\$240 per policy	Per monitor - \$150.00
Chinese medicine	2	Combined limit - see Remedial massage	Initial visit - \$20.00 Subsequent visit - \$20.00
Dietetics/dietary advice	2	\$400 per policy	Initial visit - \$34.60 Subsequent visit - \$17.10
Exercise physiology	2	Combined limit - see Remedial massage	Initial visit - \$20.00 Subsequent visit - \$12.00
Eye therapy (orthoptics)	2	\$400 per policy	Initial visit - \$18.40 Subsequent visit - \$15.30
Occupational therapy	2	\$400 per policy	Initial visit - \$47.20 Subsequent visit - \$19.50
Orthotics (podiatric orthoses)	2	Combined limit - see Podiatry	Orthotics supply & fit - 60% of charge
Osteopathy	2	Combined limit - see Chiropractic	Initial visit - \$32.90 Subsequent visit - \$19.20
Speech therapy	2	\$400 per policy	Initial visit - \$58.50 Subsequent visit - \$30.20

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

Health appliances and external prostheses (2 month waiting period) fixed benefits, benefit replacements apply - \$500 annual limit. Breathing appliances (12 month waiting period), fixed benefits, benefit replacement periods apply and \$180 limit per member every 3 years. Blood glucose monitors share a per member limit of \$240 every 3 years with Blood pressure monitors (24 month waiting period). Counselling and Pharmacogenetic Testing share an annual limit of \$400 with Psychology. School accidents for pre-school, primary and secondary school students only, \$800 annual limit, 2 month waiting period. Contact Medibank for more information.

Ambulance cover

In South Australia 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 an ambulance when you require immediate professional attention and you need to be transported to hospital or other approved facility and your medical condition is such that you cannot be transported any other way, or where an ambulance is called but transport is not needed. Cover for air ambulance where pre-approval has been obtained from Medibank. In all cases the ambulance provider must be Medibank approved. Please contact Medibank for further details.

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.