

## Private Health Information Statement - Combined policy

### Medibank Gold Ultra Health Cover

#### Medibank Private Limited

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#### Monthly Premium

**\$682.80<sup>#</sup>**

(before any rebate, loading or discount)

Covers only one person  
Available in NSW & ACT

<sup>#</sup> 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](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:** 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
- 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

Medibank's most comprehensive cover. Gap bonus to use towards out-of-pocket costs in hospital. Private Room Priority for pre-booked admissions at a Members' Choice hospital. Where a two month waiting period applies to a service on your hospital cover, it may be waived for claims resulting from an Accident that occurred during this time, please contact Medibank for further 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

Note, for items marked with an asterisk \*: A 12 month waiting period applies to surgical tooth extraction. Orthodontics has a \$1500 opening balance then a top up of \$500 per year up to a \$3500 lifetime limit. Home nursing not available in NT or TAS.

| 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 - \$42.90<br>Scale & clean - \$77.70<br>Fluoride treatment - \$25.90<br>Surgical tooth extraction - \$187.60 |
| Major dental            | 12                      | \$1,600 per policy<br>(combined limit for major dental & endodontic)               | Full crown veneered - \$1,204.20                                                                                                       |
| Endodontic              | 12                      |                                                                                    | Filling of one root canal - \$191.90                                                                                                   |
| Orthodontic*            | 12                      | \$1,500 per policy<br>\$3,500 lifetime limit                                       | Braces for upper & lower teeth, including removal plus fitting of retainer - 100% of charge                                            |
| Optical                 | 6                       | \$300 per policy                                                                   | Single vision lenses & frames - 100% of charge<br>Multi-focal lenses & frames - 100% of charge                                         |
| Non PBS pharmaceuticals | 2                       | \$800 per policy                                                                   | Per eligible prescription - \$51.00                                                                                                    |
| Physiotherapy           | 2                       | \$1,000 per policy                                                                 | Initial visit - \$68.40<br>Subsequent visit - \$57.10                                                                                  |
| Chiropractic            | 2                       | \$750 per policy<br>(combined limit for chiropractic & osteopathy)                 | Initial visit - \$74.90<br>Subsequent visit - \$51.50                                                                                  |
| Podiatry                | 2                       | \$600 per policy<br>(combined limit for podiatry & orthotics (podiatric orthoses)) | Initial visit - \$59.90<br>Subsequent visit - \$48.30                                                                                  |

|                                |    |                                                                                                                  |                                                                     |
|--------------------------------|----|------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| Psychology                     | 0  | \$600 per policy                                                                                                 | Initial visit - \$160.77<br>Subsequent visit - \$139.80             |
| Acupuncture                    | 2  | \$500 per policy<br>(combined limit for acupuncture, remedial massage, chinese medicine & exercise physiology)   | Initial visit - \$46.40<br>Subsequent visit - \$33.90               |
| Remedial massage               | 2  |                                                                                                                  | Initial visit - \$68.80<br>Subsequent visit - \$46.40               |
| Hearing aids                   | 36 | \$1,600 per policy<br>1 appliance(s) every 5 years                                                               | Hearing aid - 100% of charge                                        |
| Blood glucose monitors         | 24 | \$300 per policy<br>1 appliance(s) every 3 years<br>(combined limit for blood glucose monitors & other services) | Per monitor - 100% of charge                                        |
| Chinese medicine               | 2  | Combined limit - see Acupuncture                                                                                 | Initial visit - \$32.50<br>Subsequent visit - \$32.50               |
| Dietetics/dietary advice       | 2  | \$600 per policy                                                                                                 | Initial visit - \$81.60<br>Subsequent visit - \$45.00               |
| Exercise physiology            | 2  | Combined limit - see Acupuncture                                                                                 | Initial visit - \$32.50<br>Subsequent visit - \$32.50               |
| Eye therapy (orthoptics)       | 2  | \$600 per policy                                                                                                 | Initial visit - \$60.00<br>Subsequent visit - \$50.00               |
| Home nursing*                  | 2  | \$500 per policy                                                                                                 | Initial visit - 100% of charge<br>Subsequent visit - 100% of charge |
| Occupational therapy           | 2  | \$600 per policy                                                                                                 | Initial visit - \$92.90<br>Subsequent visit - \$55.10               |
| Orthotics (podiatric orthoses) | 2  | Combined limit - see Podiatry                                                                                    | Orthotics supply & fit - 100% of charge                             |
| Osteopathy                     | 2  | Combined limit - see Chiropractic                                                                                | Initial visit - \$74.90<br>Subsequent visit - \$51.50               |
| Speech therapy                 | 2  | \$600 per policy                                                                                                 | Initial visit - \$117.00<br>Subsequent visit - \$54.30              |

- Health appliance and external prostheses, (contact Medibank for further information) \$600 per annum, 2 mth waiting period, fixed amount back per item up to annual limit. - Laser Eye Surgery (where no Medicare benefit is payable) \$3,500 per lifetime limit, 36 mth waiting period, 100% back up to lifetime limit. - Blood pressure monitor (24 mth waiting period) and Breathing appliances (12 mth waiting period) included with Blood glucose monitors. - Health subscriptions (refer to Medibank for approved organisations) \$100 per annum, 2 mth waiting period, 100% per subscription up to annual limit. - Health screening tests (where no Medicare benefit is payable) \$200 per annum, 2 mth waiting period, 100% per test up to annual limit. Refer to Medibank for approved screening tests. - Private hospital accident and emergency facility fees, \$250 per annum, 2 mth waiting period, 100% back up to annual limit. - Teeth whitening (must be provided by recognised dentist), \$250 per annum, 2 mth waiting period, fixed amount payable. - Counselling (no waiting period) shares an annual limit with Psychology. Please contact Medibank for more information.

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

Comprehensive hospital and extras cover in one convenient package. Widest range of extras services including laser eye surgery, teeth whitening and much more. Our highest annual limits. Easy online and electronic claiming.

### 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 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.