

Private Health Information Statement - Combined policy

Silver Plus New Families Comprehensive

Medibank Private Limited

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Monthly Premium

\$288.95 #

(before any rebate, loading or discount)

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

This policy ✗ does not include cover for

| | |
|---------------------------------------|-----------------------|
| ✗ Cataracts | ✗ Joint replacements |
| ✗ Dialysis for chronic kidney failure | ✗ 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 \$250 per 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

Cover for hospital services such as pregnancy and removal of tonsils and grommets.

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. Exercise physiology benefit is \$21.50 for individual consultations and \$12.00 for group consultations

| Treatment | Waiting period (months) | Benefit limits (per 12 months unless otherwise stated) | Examples of maximum benefits |
|-----------------|-------------------------|--|--|
| General dental* | 2 | No annual limit (no limit on preventative dental) | Periodic oral examination - \$41.90 Scale & clean - \$62.10 Fluoride treatment - \$15.00 Surgical tooth extraction - \$143.60 |
| Major dental | 12 | \$800 per policy (combined limit for major dental & endodontic) | Full crown veneered - \$832.90 |
| Endodontic | 12 | | Filling of one root canal - \$137.90 |
| Optical | 6 | \$250 per policy | Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge |
| Physiotherapy | 2 | \$600 per policy | Initial visit - \$55.10 Subsequent visit - \$45.30 |
| Chiropractic | 2 | \$400 per policy (combined limit for chiropractic & osteopathy) | Initial visit - \$49.80 Subsequent visit - \$35.40 |
| Podiatry | 2 | \$500 per policy (combined limit for podiatry, psychology, acupuncture, blood glucose monitors, chinese medicine, dietetics/dietary advice, exercise physiology, orthotics (podiatric orthoses) & speech therapy) | Initial visit - \$39.20 Subsequent visit - \$32.20 |
| Psychology | 2 | | Initial visit - \$123.62 Subsequent visit - \$102.37 |
| Acupuncture | 2 | | Initial visit - \$36.20 Subsequent visit - \$34.60 |

| | | | |
|--------------------------------|----|-----------------------------------|---|
| Remedial massage | 2 | \$200 per policy | Initial visit - \$53.00 Subsequent visit - \$41.40 |
| Blood glucose monitors | 24 | Combined limit - see Podiatry | Per monitor - 100% of charge |
| Chinese medicine | 2 | Combined limit - see Podiatry | Initial visit - \$21.50 Subsequent visit - \$21.50 |
| Dietetics/dietary advice | 2 | Combined limit - see Podiatry | Initial visit - \$51.90 Subsequent visit - \$26.50 |
| Exercise physiology* | 2 | Combined limit - see Podiatry | Initial visit - \$21.50 Subsequent visit - \$12.00 |
| Orthotics (podiatric orthoses) | 2 | Combined limit - see Podiatry | Orthotics supply & fit - 70% of charge |
| Osteopathy | 2 | Combined limit - see Chiropractic | Initial visit - \$49.80 Subsequent visit - \$35.40 |
| Speech therapy | 2 | Combined limit - see Podiatry | Initial visit - \$68.00 Subsequent visit - \$39.60 |

Health appliances and external prostheses 2mth waiting period, Breathing appliances 12 mth waiting period, Blood pressure monitor 24 mth waiting period, Health subscriptions 2mth waiting period, Health screening tests 2mth waiting periods, fixed benefits, sublimits and benefit replacement periods apply share combined annual limit with Podiatry (contact Medibank for further information). – Private hospital accident and emergency fees, 2mth waiting period applies to child and student dependants only, annual limit \$250. – MembershipBonus, 6 mth waiting period, starts at \$100 per membership per year. 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 Hearing aids | X Orthodontic |
| X Non PBS pharmaceuticals | X Other treatments - check with your insurer |

Other features of this general treatment cover

Provides cover for services that younger families are more likely to need.

Ambulance cover

In Northern Territory 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.