

Private Health Information Statement - Combined policy

Corporate Gold Hospital 500 and Starter Set Extras

AIA Health Insurance Pty Ltd

<http://www.aia.com.au/health>

Health.MemberServices@aia.com.au

1800333004

Monthly Premium

\$405.40 #

(before any rebate, loading or discount)

Covers only one person
Available in Tasmania

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.

This is a corporate policy which is only available to employees/members of organisations with arrangements with this health insurer.

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 \$500 per person and \$500 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
- 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

All policies include membership to AIA Vitality, the science-backed health and wellbeing program that rewards you for looking after your health. If you have held an AIA Health Insurance policy for a minimum of six months and have an AIA Vitality status of Silver or above, we will refund your Excess in the event that you're admitted to hospital.

General Treatment Cover

Members can receive 2 x No Gap Dental on selected preventative dental services (excluded from dental limits) & lower treatment costs at [smile.com.au](https://www.aia.com.au) dentists. See <https://www.aia.com.au/en/products/health-insurance/find-a-provider>.

This policy  includes General treatment (Extras) cover for

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental	2	\$500 per policy (combined limit for general dental, major dental & endodontic)	Periodic oral examination - \$30.00 Scale & clean - \$51.00 Fluoride treatment - \$22.00
Major dental	12		Surgical tooth extraction - \$111.00 Full crown veneered - \$631.00
Endodontic	12		Filling of one root canal - \$121.00
Optical	6	\$250 per policy	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge
Non PBS pharmaceuticals	2	\$100 per policy (combined limit for non pbs pharmaceuticals & vaccinations)	Per eligible prescription - \$40.00
Physiotherapy	2	\$400 per policy (combined limit for physiotherapy & exercise physiology)	Initial visit - \$40.00 Subsequent visit - \$30.00
Chiropractic	2	\$300 per policy (combined limit for chiropractic & osteopathy)	Initial visit - \$40.00 Subsequent visit - \$30.00
Podiatry	2	\$200 per policy	Initial visit - \$40.00 Subsequent visit - \$30.00
Psychology	2	\$300 per policy	Initial visit - \$100.00 Subsequent visit - \$50.00

Acupuncture	2	\$200 per policy (combined limit for acupuncture & remedial massage)	Initial visit - \$35.00 Subsequent visit - \$30.00
Remedial massage	2		Initial visit - \$35.00 Subsequent visit - \$30.00
Blood glucose monitors	12	\$250 per policy (combined limit for blood glucose monitors & orthotics (podiatric orthoses))	Per monitor - \$100.00
Dietetics/dietary advice	2	\$200 per policy	Initial visit - \$40.00 Subsequent visit - \$40.00
Exercise physiology	2	Combined limit - see Physiotherapy	Initial visit - \$40.00 Subsequent visit - \$30.00
Health management / Healthy lifestyle	2	\$200 per policy	Health management - \$50.00
Orthotics (podiatric orthoses)	12	Combined limit - see Blood glucose monitors	Orthotics supply & fit - \$100.00
Osteopathy	2	Combined limit - see Chiropractic	Initial visit - \$45.00 Subsequent visit - \$35.00
Vaccinations	2	Combined limit - see Non PBS pharmaceuticals	Per service - \$40.00

Psychology benefit also includes cover for counselling services. Swimming lessons are covered under this policy. Benefit limit \$100 per person, per year. Smoking cessation is covered under this policy. Benefit limit \$200 per person, per year.

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

X Hearing aids	X Orthodontic	X Other treatments - check with your insurer
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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.

Other features of this ambulance cover

Cover for call-out fees where you're not taken to hospital are limited to 2 x ambulance attendances per insured person, per calendar year.

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.