

## Private Health Information Statement - Combined policy

### Premium Gold Hospital 200 & Budget Extras

#### Navy Health Ltd

<https://navyhealth.com.au/why-navy-health/>

[query@navyhealth.com.au](mailto:query@navyhealth.com.au)

1300 306 289

#### Monthly Premium

**\$477.09<sup>#</sup>**

(before any rebate, loading or discount)

Covers one adult & dependants (2 or more people, only one of whom is an adult)

Available in South Australia  
Closed to new members

<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 or an insurer discount. Check with your insurer for details.

This policy covers children and other dependants up to and including the age of 21, students up to and including the age of 31, as well as persons with a disability who qualify as a child or other dependant or student in these age ranges.

Membership of this insurer is restricted to Cover for the ADF community - serving, ex-serving ADF, employees of contractors to ADF and families.

### Hospital cover

This policy exempts you from the Medicare Levy Surcharge.

This policy provides accident cover - check with your insurer for details.

This policy does not provide benefits for travel or accommodation (outside of hospital).

- ✓ 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   |

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:** You will have to pay an excess of \$200 per admission. This is limited to a maximum of \$200 per person and \$200 per policy per year.

Excess payments do not apply to hospital admissions for dependants.

**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

### Hospital Accommodation

Covered as a private patient in a private hospital for any included services on your policy. Navy Health's cover includes hospital accommodation fees, intensive care fees, theatre fees, and up to 100% of the Medicare Benefits Scheduled fee (MBS) for day admissions or overnight stays.

### 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

Receive up to 100% cover at over 490 private hospitals and day facilities, in addition to all recognised public hospitals across Australia. You also have access to Member Health Support Program for home recovery, as well as unlimited ambulance cover Australia-wide, which means you are not required to take out ambulance cover elsewhere.

## General Treatment Cover

This health insurer does not operate a preferred provider scheme.

[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 person<br>(combined limit for general dental & major dental) | Periodic oral examination - \$28.00<br>Scale & clean - \$50.00<br>Fluoride treatment - \$15.60 |
| Major dental            | 12                      |  | Surgical tooth extraction - \$102.00   |
| Optical                 | 6                       | \$170 per person   | Single vision lenses & frames - 100% of charge<br>Multi-focal lenses & frames - 100% of charge |
| Non PBS pharmaceuticals | 2                       | \$200 per person   | Per eligible prescription - \$50.00  |
| Physiotherapy           | 2                       | \$300 per person   | Initial visit - \$37.00<br>Subsequent visit - \$27.00  |

|                     |   |   |   |
|---------------------|---|---|---|
| Chiropractic        | 2 | \$300 per person up to \$600 per policy<br>(combined limit for chiropractic, osteopathy & other services)                             | Initial visit - \$30.00<br>Subsequent visit - \$22.00 |
| Acupuncture         | 2 | \$200 per person up to \$400 per policy<br>(combined limit for acupuncture, remedial massage, chinese medicine & exercise physiology) | Initial visit - \$18.00<br>Subsequent visit - \$18.00 |
| Remedial massage    | 2 |   | Initial visit - \$18.00<br>Subsequent visit - \$18.00 |
| Chinese medicine    | 2 |   | Initial visit - \$18.00<br>Subsequent visit - \$18.00 |
| Exercise physiology | 2 |   | Initial visit - \$18.00<br>Subsequent visit - \$18.00 |
| Osteopathy          | 2 | Combined limit - see Chiropractic   | Initial visit - \$30.00<br>Subsequent visit - \$22.00 |

Members can access special offers from any of Navy Health's preferred optical providers: OPSM, Laubman & Pank, Specsavers, Teachers Eye Care, Eyebenefit and Q Optical Network (QON). General treatment benefit year runs from 1 July to 30 June.

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

|                                 |                      |   |
|---------------------------------|----------------------|---|
| <b>X</b> Blood glucose monitors | <b>X</b> Orthodontic | <b>X</b> Other treatments - check with your insurer |
| <b>X</b> Endodontic             | <b>X</b> Podiatry    |   |
| <b>X</b> Hearing aids           | <b>X</b> Psychology  |   |

Other features of this general treatment cover

Telehealth services available for Physiotherapy.

**Ambulance cover**

In South Australia this policy provides:

**Emergency:** Unlimited with a waiting period of 2 months.

**Non-emergency:** Unlimited transport with a waiting period of 2 months, or 2 months for pre-existing conditions.

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

Other features of this ambulance cover

We cover 100% of the cost of ambulance services within Australia, provided it is provided by a state based run Ambulance service, by either air/sea or land. We do not provide benefits for privately run patient transport services.

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.