

## Private Health Information Statement - Combined policy

### Saver Bronze+ Hospital & Extras 65

#### Navy Health Ltd

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

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

1300 306 289

#### Monthly Premium

**\$397.30<sup>#</sup>**

(before any rebate, loading or discount)

Covers 2 adults (and no-one else)

Available in Tasmania

<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.

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

|   |                                   |   |
|---|-----------------------------------|---|
| ✓ Blood   | ✓ Eye (not cataracts)             | ✓ Miscarriage and termination of pregnancy  |
| ✓ Bone, joint and muscle                                  | ✓ Gastrointestinal endoscopy      | ✓ Pain management   |
| ✓ Brain and nervous system                                | ✓ Gynaecology                     | ✓ Palliative care   |
| ✓ Breast surgery (medically necessary)                    | ✓ Hernia and appendix             | ✓ Plastic and reconstructive surgery (medically necessary)                          |
| ✓ Chemotherapy, radiotherapy and immunotherapy for cancer | ✓ Implantation of hearing devices | ✓ Podiatric surgery (provided by a registered podiatric surgeon - limited benefits) |
| ✓ Dental surgery  | ✓ Joint reconstructions           | ✓ Skin  |
| ✓ Diabetes management (excluding insulin pumps)           | ✓ Kidney and bladder              | ✓ Tonsils, adenoids and grommets  |
| ✓ Digestive system  | ✓ Lung and chest                  | R Hospital psychiatric services   |
| ✓ Ear, nose and throat                                    | ✓ Male reproductive system        | R Rehabilitation  |

This policy ✗ does not include cover for

|                                       |                               |                       |
|---------------------------------------|-------------------------------|-----------------------|
| ✗ Assisted reproductive services      | ✗ Heart and vascular system   | ✗ Pregnancy and birth |
| ✗ Back, neck and spine                | ✗ Insulin pumps               | ✗ Sleep studies       |
| ✗ Cataracts                           | ✗ Joint replacements          | ✗ Weight loss surgery |
| ✗ Dialysis for chronic kidney failure | ✗ Pain management with device |                       |

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 \$500 per admission. This is limited to a maximum of \$500 per person and \$1000 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

### 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. For services that are listed as restricted, you are covered as a private patient in a public hospital. If you are treated in a private hospital for a restricted service, you may be significantly out of pocket. For services that are listed as excluded, no benefits are payable.

### 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

If you're young, fit, healthy and looking for simple hospital cover, consider Saver Bronze+ Hospital. It has the services you're usually likely to use – like treatment for accidents, wisdom teeth, knee reconstructions and more. You are also covered for unlimited ambulance cover Australia-wide, which means you are not required to take out ambulance cover elsewhere.

For further information about this policy see

<https://navyhealth.com.au/saver-bronze-hospital-and-extras-65-cover>

## 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                       | \$600 per person<br>(combined limit for general dental, major dental & endodontic) | Periodic oral examination - 65% of charge<br>Scale & clean - 65% of charge<br>Fluoride treatment - 65% of charge |
| Major dental   | 12                      |  | Surgical tooth extraction - 65% of charge<br>Full crown veneered - 65% of charge                                 |
| Endodontic     | 12                      |  | Filling of one root canal - 65% of charge  |
| Optical        | 6                       | \$200 per person   | Single vision lenses & frames - 65% of charge<br>Multi-focal lenses & frames - 65% of charge                     |

|                         |   |  |   |
|-------------------------|---|--|---|
| Non PBS pharmaceuticals | 2 | \$200 per person<br>(combined limit for non pbs pharmaceuticals & vaccinations)                                | Per eligible prescription - 65% of charge                         |
| Physiotherapy           | 2 | \$300 per person<br>(combined limit for physiotherapy, chiropractic & osteopathy)                              | Initial visit - 65% of charge<br>Subsequent visit - 65% of charge |
| Chiropractic            | 2 |  | Initial visit - 65% of charge<br>Subsequent visit - 65% of charge |
| Acupuncture             | 2 | \$200 per person<br>(combined limit for acupuncture, remedial massage, chinese medicine & exercise physiology) | Initial visit - 65% of charge<br>Subsequent visit - 65% of charge |
| Remedial massage        | 2 |  | Initial visit - 65% of charge<br>Subsequent visit - 65% of charge |
| Chinese medicine        | 2 |  | Initial visit - 65% of charge<br>Subsequent visit - 65% of charge |
| Exercise physiology     | 2 |  | Initial visit - 65% of charge<br>Subsequent visit - 65% of charge |
| Osteopathy              | 2 | Combined limit - see Physiotherapy   | Initial visit - 65% of charge<br>Subsequent visit - 65% of charge |
| Vaccinations            | 2 | Combined limit - see Non PBS pharmaceuticals   | Per service - 65% of charge                                       |

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> Psychology                                 |
| <b>X</b> Hearing aids           | <b>X</b> Podiatry    | <b>X</b> Other treatments - check with your insurer |

#### Other features of this general treatment cover

Telehealth services available for Physiotherapy.

For further information about this policy see

<https://navyhealth.com.au/saver-bronze-hospital-and-extras-65-cover>

#### 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](https://www.health.tas.gov.au/ambulance/fees_and_accounts).

#### 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.

For further information about this policy see

<https://navyhealth.com.au/saver-bronze-hospital-and-extras-65-cover>

#### 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.