

# Private Health Information Statement - Hospital policy

## Basic Care Hospital Plus \$750 Excess

nib Health Funds Ltd.

<https://www.nib.com.au>

13 14 63

Monthly Premium

**\$293.97<sup>#</sup>**

(before any rebate, loading or discount)

Covers two adults & dependants, including non-student dependants (3 or more people, only 2 of whom are adults)

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, an age-based discount or an insurer discount. Check with your insurer for details.

This policy covers children, students up to and including the age of 30 and non-students up to and including the age of 30, as well as persons with a disability who qualify as a child, student or non-student in these age ranges.

## 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

✓ Dental surgery	✓ Hernia and appendix	R Hospital psychiatric services
✓ Gastrointestinal endoscopy	✓ Joint reconstructions	R Palliative care
✓ Gynaecology	✓ Tonsils, adenoids and grommets	R Rehabilitation

This policy ✗ does not include cover for

✗ Assisted reproductive services	✗ Digestive system	✗ Miscarriage and termination of pregnancy
✗ Back, neck and spine	✗ Ear, nose and throat	✗ Pain management
✗ Blood	✗ Eye (not cataracts)	✗ Pain management with device
✗ Bone, joint and muscle	✗ Heart and vascular system	✗ Plastic and reconstructive surgery (medically necessary)
✗ Brain and nervous system	✗ Implantation of hearing devices	✗ Podiatric surgery (provided by a registered podiatric surgeon – limited benefits)
✗ Breast surgery (medically necessary)	✗ Insulin pumps	✗ Pregnancy and birth
✗ Cataracts	✗ Joint replacements	✗ Skin
✗ Chemotherapy, radiotherapy and immunotherapy for cancer	✗ Kidney and bladder	✗ Sleep studies
✗ Diabetes management (excluding insulin pumps)	✗ Lung and chest	✗ Weight loss surgery
✗ Dialysis for chronic kidney failure	✗ 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:** You will have to pay an excess of \$750 per admission. This is limited to a maximum of \$750 per person and \$1500 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
- 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](#)

nib does not have a preferred-provider-network-arrangement, but operates an nib-MediGap scheme aiming to eliminate the 'gap' payments for specialist fees in hospital. When a specialist chooses to participate in MediGap, they agree not to charge an out-of-pocket expense for your procedure. We do this by building a network of specialists who may agree to receive a higher benefit from nib than they would ordinarily receive. In exchange they do not charge nib customers an out-of-pocket expense. Ask your specialist if they'll MediGap for you! Our Going to Hospital Pack provides more ways to reduce out-of-pockets, ask us for your copy.

[For further information about this policy see](#)

<https://my.nib.com.au/product-collateral/2785>

**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](#)

Emergency ambulance costs are covered by the state government for residents of Tasmania.

[For further information about this policy see](#)

<https://my.nib.com.au/product-collateral/2785>

**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.