

Private Health Information Statement - Combined policy

Mid Plus - Silver Plus \$250 Excess

nib Health Funds Ltd.

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

13 14 63

Monthly Premium

\$734.66[#]

(before any rebate, loading or discount)

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

Available in South Australia
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.

This policy covers children and other dependants up to and including the age of 20, students up to and including the age of 30, as well as persons with a disability who qualify as a child or other dependant or 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

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

This policy ✗ does not include cover for

| | | |
|----------------------------------|-------------------------------|-----------------------|
| ✗ Assisted reproductive services | ✗ Joint replacements | ✗ Weight loss surgery |
| ✗ Cataracts | ✗ 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 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 \$1000 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.

For further information about this policy see

<https://my.nib.com.au/product-collateral/8>

General Treatment Cover

By using our FirstChoice providers, you may have lower out-of-pocket costs on many allied health services. A list of "preferred providers" is available from the health insurer. See <https://www.nib.com.au/find-a-provider>.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk *: * 65 % back up to your annual limit once maximum PBS amount has been deducted.

| Treatment | Waiting period (months) | Benefit limits (per 12 months unless otherwise stated) | Examples of maximum benefits |
|--------------------------|-------------------------|---|--|
| General dental | 2 | \$500 per person up to \$2,000 per policy | Periodic oral examination - 65% of charge Scale & clean - 65% of charge Fluoride treatment - 65% of charge |
| Major dental | 12 | \$600 per person up to \$2,400 per policy (combined limit for major dental & endodontic) | Surgical tooth extraction - 65% of charge Full crown veneered - 65% of charge |
| Endodontic | 12 | | Filling of one root canal - 65% of charge |
| Orthodontic | 12 | \$300 per person up to \$1,200 per policy \$1,500 lifetime limit | Braces for upper & lower teeth, including removal plus fitting of retainer - 65% of charge |
| Optical | 6 | \$250 per person up to \$1,000 per policy | Single vision lenses & frames - 65% of charge Multi-focal lenses & frames - 65% of charge |
| Non PBS pharmaceuticals* | 2 | \$300 per person up to \$1,200 per policy | Per eligible prescription - 65% of charge |
| Physiotherapy | 2 | \$350 per person up to \$1,400 per policy (combined limit for physiotherapy, chiropractic, exercise physiology & osteopathy) | Initial visit - 65% of charge Subsequent visit - 65% of charge |
| Chiropractic | 2 | | Initial visit - 65% of charge Subsequent visit - 65% of charge |
| Psychology | 2 | \$200 per person up to \$800 per policy | Initial visit - 65% of charge Subsequent visit - 65% of charge |

| | | | |
|--|---|---|---|
| Acupuncture | 2 | | Initial visit - 65% of charge Subsequent visit - 65% of charge |
| Remedial massage | 2 | \$200 per person up to \$800 per policy (combined limit for acupuncture, remedial massage, chinese medicine, dietetics/dietary advice & other services - Sub-limits apply) | Initial visit - 65% of charge Subsequent visit - 65% of charge |
| Chinese medicine | 2 | | Initial visit - 65% of charge Subsequent visit - 65% of charge |
| Dietetics/dietary advice | 2 | | Initial visit - 65% of charge Subsequent visit - 65% of charge |
| Exercise physiology | 2 | | Combined limit - see Physiotherapy |
| Health management / Healthy lifestyle | 6 | \$150 per person up to \$600 per policy | Health management - 65% of charge |
| Osteopathy | 2 | Combined limit - see Physiotherapy | Initial visit - 65% of charge Subsequent visit - 65% of charge |
| Myotherapy: combined limit of \$200 with acupuncture, dietary advice, remedial massage and Chinese herbalism. Healthier Lifestyle includes nib approved weight management programs, quit smoking and nicotine replacement, gym memberships, personal training, preventative health tests (service limits apply). Psychology has a sublimit of \$150 for Digital Cognitive Behavioural Therapy (CBT). Non-PBS pharmaceuticals have a sub limit of \$150 for Weight Management Medication. | | | |

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

| | |
|---------------------------------|---|
| X Blood glucose monitors | X Podiatry |
| X Hearing aids | X Other treatments - check with your insurer |

Other features of this general treatment cover

Of course, you can see your choice of provider, but by choosing a FirstChoice provider, you may have less to pay towards the cost of your treatment. We've created the FirstChoice network to help you access quality healthcare and a better deal for you and your family. We've locked in lower costs with our FirstChoice providers, so you can enjoy competitive treatment fees when you visit the dentist or a discount the next time you claim for glasses.

For further information about this policy see

<https://my.nib.com.au/product-collateral/8>

Ambulance cover

In South Australia 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

All our health covers include unlimited emergency ambulance (1 day waiting period on all emergency ambulance). Emergency ambulance is when you need immediate transport by a State or Territory ambulance to get to a hospital or other facility for urgent medical treatment. No annual limits for emergency ambulance apply.

For further information about this policy see

<https://my.nib.com.au/product-collateral/8>

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.