Private Health Information Statement - Combined policy

Top Hospital (Gold) & Select Care Extras

Queensland Country Health Fund	Monthly Premium	Covers one adult & dependants, including non-student dependants (2 or more people, only one of whom is an adult)
https://www.queenslandcountry.health/ info@queenslandcountry.health 1800 813 415	*$720.87 #* (before any rebate, loading or discount)	Available in Tasmania 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, students up to and including the age of 31 and non-students up to and including the age of 31, 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 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: No excess

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

No excess applies for Dependent Children up to and including 21 years

For further information about this policy see

https://www.queenslandcountry.health/siteassets/product-factsheet-download/top_select_care.pdf

General Treatment Cover

By using this health insurer's "preferred providers" you will have lower out-of-pocket costs on selected allied health services and have access to more "no gap" services. See https://www.queenslandcountry.health/provider-search/premier-provider-network/.

This policy ✓ **includes** General treatment (Extras) cover for

*Note, for items marked with an asterisk *: There is an overall combined benefit limit for ALL benefits payable under this product (including dental, optical, therapies, pharmaceuticals, and Healthy Living benefits) up to $2,200 per person and $4,400 per policy per Membership Year. Sub-limits apply.*

Treatment	*Waiting period (months)*	*Benefit limits (per 12 months unless otherwise stated)*	*Examples of maximum benefits*
General dental*	2	$400 per person up to $800 per policy	Periodic oral examination - $44.00 Scale & clean - $71.00 Fluoride treatment - $19.00
Major dental*	12	$600 per person up to $1,200 per policy (combined limit for major dental & endodontic)	Surgical tooth extraction - $126.00 Full crown veneered - $560.00
Endodontic*	12		Filling of one root canal - $119.00
Optical*	2	$245 per person up to $490 per policy	Single vision lenses & frames - $245.00 Multi-focal lenses & frames - $245.00
Non PBS pharmaceuticals*	2	$400 per person up to $800 per policy (combined limit for non pbs pharmaceuticals & vaccinations)	Per eligible prescription - $55.00
Physiotherapy*	2	$500 per person up to $1,000 per policy **(Sub-limits apply)**	Initial visit - $44.00 Subsequent visit - $37.00
Chiropractic*	2	$500 per person up to $1,000 per policy (combined limit for chiropractic & remedial massage)	Initial visit - $44.00 Subsequent visit - $28.00

Podiatry*	2	$400 per person up to $800 per policy (combined limit for podiatry & orthotics (podiatric orthoses) - **Sub-limits apply**)	Initial visit - $32.00 Subsequent visit - $32.00
Remedial massage*	2	Combined limit - see Chiropractic	Initial visit - $33.00 Subsequent visit - $33.00
Hearing aids	12	$1,000 Limit renews every 3 Membership Years	Hearing aid - 100% of charge
Blood glucose monitors	12	$2,000 per person 1 appliance(s) every 3 years (combined limit for blood glucose monitors & other services, sub-limits apply)	Per monitor - 100% of charge
Health management / Healthy lifestyle*	2	$125 per person up to $250 per policy	Health management - $125.00
Home nursing	12	$1,000 per person Sub-limits apply	Initial visit - $50.00 Subsequent visit - $50.00
Orthotics (podiatric orthoses)	2	Combined limit - see Podiatry	Orthotics supply & fit - 100% of charge
Vaccinations*	2	Combined limit - see Non PBS pharmaceuticals	Per service - $55.00

Hearing aid limit increases with length of membership – up to 10 years $1,000, 10-15 years $1,500, and 15 years + $2,000. Benefits on the purchase (or hire where applicable) of Health Appliances and Services approved by Queensland Country Health Fund with a limit of $2,000 per person per Membership Year (sub-limits and benefit replacement periods apply to some items). Please contact Queensland Country Health Fund regarding benefit availability prior to purchasing an Appliance or Service.

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

✗ Acupuncture	✗ Psychology
✗ Orthodontic	✗ Other treatments - check with your insurer

Other features of this general treatment cover

Health management (Healthy Living benefit) provides benefits towards the costs of metabolic dieticians or nutritionists consultations to assist with weight management, diabetes education consultations, quit smoking programs, skin checks for skin cancers (except where there is a Medicare benefit), bowel screening and bone density tests, a second yearly prostate specific antigen test not covered by Medicare, supermarket tours conducted by a dietitian or other allied health professional qualified to provide nutrition advice, and gym memberships/personal training sessions provided under an approved health management or chronic disease management program. Please contact the insurer for full details.

For further information about this policy see

https://www.queenslandcountry.health/siteassets/product-factsheet-download/top_select_care.pdf

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

When travelling to States/Territories not covered under the state arrangements, this product provides cover for one emergency ambulance transport service or on-the-spot emergency treatment per person per Membership Year. A 1 day waiting period and other conditions apply – for more information please visit https://www.queenslandcountry.health/cover-options/ambulance-cover/.

For further information about this policy see

https://www.queenslandcountry.health/cover-options/ambulance-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.