Private Health Information Statement - Hospital policy

Intermediate Hospital (Basic+) $250 excess

Queensland Country Health Fund	Monthly Premium	
https://www.queenslandcountry.health/ info@queenslandcountry.health 1800 813 415	*$200.04 #* (before any rebate, loading or discount)	Covers only one person Available in Western 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.

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

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

This policy ✗ **does not include** cover for

✗ Joint replacements

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 $250 per person and $250 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

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 are young and healthy and are not planning a family, this cover may be for you. Benefits for some hospital services are restricted or excluded to keep the premium more affordable. 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/intermediate.pdf

Ambulance cover

In Western Australia this policy provides:

Emergency: with a waiting period of 1 day, limited to 1 services per year.

Call-out fees: will not be paid.

Other features of this ambulance cover

This product provides Australia wide cover for one emergency ambulance transport service or on-the-spot emergency treatment per person per Membership Year Australia wide. 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.