Private Health Information Statement - Hospital policy

Value Hospital (Basic+) $500 excess

Queensland Country Health Fund	*Monthly Premium*	Covers one adult & dependants (2 or more people, only one of whom is an adult)
https://www.queenslandcountry.health/ info@queenslandcountry.health 1800 813 415	*$293.55 #* (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 and other dependants up to and including the age of 20, students up to and including the age of 31, 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 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.

X **Not Covered**
These categories are not covered by this policy.

This policy ✓ **includes** cover for

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

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

X Joint replacements	X Weight loss surgery

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 $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

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/value.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.