Private Health Information Statement - Combined policy

Vital Hospital (Bronze+) $250 excess & Select Extras

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	*$407.26 #* (before any rebate, loading or discount)	Available in Victoria

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.

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

This policy ✓ **includes** cover for

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

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

✗ Assisted reproductive services	✗ Implantation of hearing devices	✗ Pregnancy and birth
✗ Cataracts	✗ Insulin pumps	✗ Sleep studies
✗ Dialysis for chronic kidney failure	✗ Joint replacements	✗ Weight loss surgery
✗ Heart and vascular system	✗ 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 $250 per person and $500 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

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
Health management / Healthy lifestyle*	2	$125 per person up to $250 per policy	Health management - $125.00
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

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

✗ Acupuncture	✗ Hearing aids	✗ Psychology
✗ Blood glucose monitors	✗ 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.

Ambulance cover

In Victoria 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.