

Private Health Information Statement - Hospital policy

Bronze+ Hospital \$750 excess

TUH, part of the Teachers Health Group https://tuh.com.au/enquiries@tuh.com.au 1300 360 701	Monthly Premium \$196.43[#] (before any rebate, loading or discount)	Covers one adult & dependants (2 or more people, only one of whom is an adult) Available in Western Australia
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[#] 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.

Membership of this insurer is restricted to current or former union members and their families.

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>
- 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

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	Skin
Chemotherapy, radiotherapy and immunotherapy for cancer	Joint reconstructions	Sleep studies
Dental surgery	Kidney and bladder	Tonsils, adenoids and grommets
Diabetes management (excluding insulin pumps)	Lung and chest	Hospital psychiatric services
Digestive system	Male reproductive system	Rehabilitation
Ear, nose and throat	Miscarriage and termination of pregnancy	

This policy **does not include** cover for

Assisted reproductive services	Heart and vascular system	Pain management with device
Back, neck and spine	Implantation of hearing devices	Podiatric surgery (provided by a registered podiatric surgeon – limited benefits)
Cataracts	Insulin pumps	Pregnancy and birth

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 on admission. This is limited to a maximum of \$750 per person 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.

Other features of this hospital cover

Value-added services: home care after hospital, chronic disease management programs, hospital substitute programs (conditions apply). **Accident cover for included service categories only. An excess is applied once per adult per calendar year. The hospital excess is waived for dependants. Reducing your excess is considered to be upgrading your membership. We will charge your previous excess within the first two months of the upgrade, including for adults who are upgrading their level of cover by joining/re-joining as a dependant on a family membership.

[For further information about this policy see](#)

<https://tuh.com.au/hospital/bronze-plus-hospital>

Ambulance cover

In Western Australia this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

Non-emergency: Unlimited transport with a waiting period of 1 day, or 1 day for pre-existing conditions.

Call-out fees: will be paid for each attendance, including emergency treatment without transport to hospital.

Other features of this ambulance cover

Members who have COMBINED HOSPITAL AND EXTRAS COVER are entitled to emergency ambulance services benefits. No annual limit will apply to emergency road ambulance services. State-owned air ambulance transportation services are covered up to \$6,000 per person per annum. From 1 Jan 2022 members who have eligible stand-alone extras cover may claim the cost of a third-party regional ambulance subscription fee from the Health Program benefit category (sub-limits apply).

[For further information about this policy see](#)

<https://tuh.com.au/information/glossary/ambulance>

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.