

Private Health Information Statement - Hospital policy

**Astute Silver Plus Hospital 250**

**Astute Simplicity Health**  
<https://astutesimplicityhealth.com.au/>  
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**1300 090 960**  
Underwritten by St Lukes

**Monthly Premium**  
**\$382.00 #**  
(before any rebate, loading or discount)

**Covers one adult & dependants**  
(2 or more people, only one of whom is an adult)  
**Available in NSW & ACT**

# You may be entitled to an Australian Government rebate on the above premium. Your premium may also include a Lifetime Health Cover loading or an insurer discount. Check with your insurer for details.

This policy covers children and other dependants up to and including the age of 22, students up to and including the age of 24, as well as persons with a disability who qualify as a child or other dependant or student in these age ranges.

Employees and customers of Astute Financial

Hospital cover

This policy exempts you from the Medicare Levy Surcharge.

This policy does not provide accident cover or benefits for travel and 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

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

This policy  does not include cover for

|                                                                                                                   |                                                                                                        |                                                                                                           |
|-------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
|  Assisted reproductive services |  Joint replacements |  Weight loss surgery |
|-------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|

|                                       |                               |  |
|---------------------------------------|-------------------------------|--|
| ✗ Cataracts                           | ✗ Pain management with device |  |
| ✗ Dialysis for chronic kidney failure | ✗ 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](https://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 \$250 per person and \$250 per policy 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
- 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

Half excess applies to day surgery up to maximum product excess. Ambulance subscriptions are claimable up to an annual premium, where there is no state based Ambulance scheme or levy. Unmarried dependants covered until they turn 23 and single F/T students covered until they turn 25.

### Ambulance cover

Health Care Concession Card, Pensioner Concession Card, and Commonwealth Seniors Health Card holders are entitled to free ambulance transport services. If you are not eligible for a concession and want to be covered, you can purchase insurance from a private health fund.

#### 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.