

Private Health Information Statement - Combined policy

**Gold Hospital 300 and Super Extras**

**St Lukes**  
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**Monthly Premium**  
**\$450.60 #**  
(before any rebate, loading or discount)

**Covers only one person**  
**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.

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

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

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 \$300 per person and \$300 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

Half excess applies to day surgery up to the maximum product excess. Ambulance Levy included for NSW and ACT residents. Ambulance services in Tasmania provided free by State Government to Tasmanian residents.

General Treatment Cover

This health insurer does not operate a preferred provider scheme.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk *: Under Preventative Dental, we pay up to 100% of the average fee charged Australia wide up to the maximum benefit for each eligible service. This applies to examinations, x-rays, scale and clean and fissure sealing. If your dentist charges above the maximum benefit, or in excess of the average fee, a gap or out of pocket may apply. Annual limits, fund rules and waiting periods apply.			
Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	\$1,000 per policy	Periodic oral examination - 100% of charge Scale & clean - 100% of charge Fluoride treatment - \$36.00 Surgical tooth extraction - \$180.00
Major dental	12	\$1,200 per policy (combined limit for major dental & endodontic - <b>Sub-limits apply</b> )	Full crown veneered - \$810.00
Endodontic	12		Filling of one root canal - \$180.00
Orthodontic	12	\$1,000 per policy \$2,800 lifetime limit	Braces for upper & lower teeth, including removal plus fitting of retainer - 100% of charge
Optical	6	\$300 per policy	Single vision lenses & frames - \$300.00 Multi-focal lenses & frames - \$300.00
Non PBS pharmaceuticals	2	\$600 per policy	Per eligible prescription - \$70.00
Physiotherapy	2	\$850 per policy (combined limit for physiotherapy, ante-natal/post-natal classes, exercise physiology & eye therapy (orthoptics) - <b>Sub-limits apply</b> )	Initial visit - \$57.00 Subsequent visit - \$49.00
Chiropractic	2	\$400 per policy (combined limit for chiropractic & osteopathy - <b>Sub-limits apply</b> )	Initial visit - \$41.00 Subsequent visit - \$30.00
Podiatry	2	\$400 per policy	Initial visit - \$47.00 Subsequent visit - \$38.00

Psychology	12	Benefits payable towards counselling services - Initial consultation \$80/subsequent consultation \$70 included in \$600 Psychology Limit.	Initial visit - \$145.00 Subsequent visit - \$110.00
Acupuncture	2	\$500 per policy (combined limit for acupuncture, remedial massage & chinese medicine - <b>Sub-limits apply</b> )	Initial visit - \$35.00 Subsequent visit - \$30.00
Remedial massage	2		Initial visit - \$35.00 Subsequent visit - \$30.00
Hearing aids	36	2 appliance(s) every 5 years	Hearing aid - \$1,000.00
Blood glucose monitors	12	\$1,000 per policy (combined limit for blood glucose monitors & orthotics (podiatric orthoses) - <b>Sub-limits apply</b> )	Per monitor - \$200.00
Audiology	2	\$1,000 per policy 2 service(s) every 1 year (combined limit for audiology, dietetics/dietary advice, home nursing, occupational therapy & speech therapy - <b>Sub-limits apply</b> )	Initial visit - \$50.00 Subsequent visit - \$40.00
Ante-natal/Post-natal classes	2	Combined limit - see Physiotherapy	Initial visit - \$49.00 Subsequent visit - \$49.00
Chinese medicine	2	Combined limit - see Acupuncture	Initial visit - \$32.00 Subsequent visit - \$28.00
Dietetics/dietary advice	2	Combined limit - see Audiology	Initial visit - \$75.00 Subsequent visit - \$45.00
Exercise physiology	2	Combined limit - see Physiotherapy	Initial visit - \$53.00 Subsequent visit - \$40.00
Eye therapy (orthoptics)	2	Combined limit - see Physiotherapy	Initial visit - \$65.00 Subsequent visit - \$38.00
Home nursing	2	Combined limit - see Audiology	Initial visit - \$50.00 Subsequent visit - \$50.00
Occupational therapy	2	Combined limit - see Audiology	Initial visit - \$80.00 Subsequent visit - \$55.00
Orthotics (podiatric orthoses)	12	Combined limit - see Blood glucose monitors	Orthotics supply & fit - 90% of charge
Osteopathy	2	Combined limit - see Chiropractic	Initial visit - \$57.00 Subsequent visit - \$45.00
Speech therapy	2	Combined limit - see Audiology	Initial visit - \$120.00 Subsequent visit - \$67.00

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

**X** Other treatments - check with your insurer

### Other features of this general treatment cover

Orthodontic limit included in annual Major Dental limit. Diabetes Education & Nutrition benefits included in Dietetics sub-limit. Overall limit of \$1000 per person applies to Health Appliances & Aids, individual limits apply. \$250 sub-limit applies to foot orthotics. Approved health management programs when Super Extras taken with hospital cover. Member rewards apply after 5 years continuous membership.

## 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.

For further information about this policy see

<https://www.stlukes.com.au/forms-brochures?tag=Information+sheet>

### 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.