

Private Health Information Statement - Hospital policy

Comprehensive Hospital (Gold)		
CBHS Health Fund Limited http://www.cbhs.com.au help@cbhs.com.au 1300 654 123	Monthly Premium \$528.54[#] (before any rebate, loading or discount)	Covers one adult & dependants, including non-student dependants (2 or more people, only one of whom is an adult) Available in Western Australia 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 up to and including the age of 17, students up to and including the age of 30 and non-students up to and including the age of 30, as well as persons with a disability who qualify as a child, student or non-student in these age ranges.




Membership of this insurer is restricted to current and past employees of Commonwealth Bank Group, franchisees, contractors, 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

 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

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: No excess

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.

Ambulance cover

In Western Australia this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

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

[Other features of this ambulance cover](#)

Coverage for emergency ambulance services if you're transported directly to a hospital or treated at the scene during a medical emergency. This transport or treatment must be provided by a State Government or a private ambulance service that we recognise, e.g., the Royal Flying Doctor Service. Cover includes transport from the scene of an accident or medical event such as a heart attack. Residents of WA holding appropriate Hospital/package cover are also eligible to claim a benefit for non-emergency ambulance transport services up to a maximum of \$5,000 per person per calendar year.

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

<https://www.cbhs.com.au/health-insurance/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.