

Private Health Information Statement - Hospital policy

Everyday Silver Plus Hospital \$500 Excess

CBHS Health Fund Limited http://www.cbhs.com.au help@cbhs.com.au 1300 654 123	Monthly Premium \$104.48 # (before any rebate, loading or discount)	Covers only one person Available in Northern Territory
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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.

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

Back, neck and spine	Eye (not cataracts)	Miscarriage and termination of pregnancy
Blood	Gastrointestinal endoscopy	Pain management
Bone, joint and muscle	Gynaecology	Plastic and reconstructive surgery (medically necessary)
Brain and nervous system	Heart and vascular system	Podiatric surgery (provided by a registered podiatric surgeon – limited benefits)
Breast surgery (medically necessary)	Hernia and appendix	Rehabilitation
Chemotherapy, radiotherapy and immunotherapy for cancer	Implantation of hearing devices	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	Palliative care

This policy does not include cover for

Assisted reproductive services	Insulin pumps	Pregnancy and birth
Cataracts	Joint replacements	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: You will have to pay an excess of \$500 per admission. This is limited to a maximum of \$500 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
- 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

A mid-level Hospital cover offering the comfort of knowing there's coverage for treatments such as heart and vascular, and rehabilitation services. We've excluded high-cost services such as pregnancy and joint replacement to help keep your cover more cost-effective. If your doctor or specialist participates in our Access Gap Cover scheme, you may be able to reduce or eliminate your out-of-pocket medical costs. When clinically appropriate, Hospital Substitute Treatment program gives suitable members the option to receive acute care in the home instead of the hospital.

Ambulance cover

In Northern Territory 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.

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.