

# Private Health Information Statement - Combined policy

## Bronze Hospital 2 Excess \$500 HunterExtras (Family)

### Hunter Health Insurance

<http://www.hunterhi.com.au>

[enquiries@hunterhi.com.au](mailto:enquiries@hunterhi.com.au)

02 4990 1385

Underwritten by CDH Benefits Fund

### Monthly Premium

**\$577.46<sup>#</sup>**

(before any rebate, loading or discount)

Covers two adults & dependants (3 or more people, only 2 of whom are adults)

Available in NSW & ACT

<sup>#</sup> 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 20, 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.

## 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>

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

### This policy ✗ does not include cover for

|                                       |                               |  |
|---------------------------------------|-------------------------------|--|
| ✗ Assisted reproductive services      | ✗ Insulin pumps               | ✗ Plastic and reconstructive surgery (medically necessary) |
| ✗ Cataracts                           | ✗ Joint replacements          | ✗ Pregnancy and birth                                      |
| ✗ Dialysis for chronic kidney failure | ✗ Lung and chest              | ✗ Sleep studies  |
| ✗ Heart and vascular system           | ✗ Pain management with device | ✗ 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](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 of \$500 per admission. This is limited to a maximum of \$1000 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.

For further information about this policy see

<https://www.hunterhi.com.au/products/>

## General Treatment Cover

This health insurer does not operate a preferred provider scheme.

This policy  includes General treatment (Extras) cover for

| Treatment               | Waiting period (months) | Benefit limits (per 12 months unless otherwise stated)  | Examples of maximum benefits   |
|-------------------------|-------------------------|---|--|
| General dental          | 2                       | Gap Free Preventative Dental 100% Benefit<br>Limit 2 Service Person Per Year Items<br>Number 011-015 111-116  | Periodic oral examination - 100% of charge<br>Scale & clean - 100% of charge<br>Fluoride treatment - \$25.00<br>Surgical tooth extraction - \$125.00 |
| Major dental            | 12                      | \$850 per person  | Full crown veneered - \$800.00   |
| Endodontic              | 2                       | No annual limit   | Filling of one root canal - \$125.00   |
| Orthodontic             | 12                      | \$400 per person<br>\$2,400 lifetime limit  | Braces for upper & lower teeth, including removal plus fitting of retainer - \$2,400.00  |
| Optical                 | 2                       | \$299 per person  | Single vision lenses & frames - 100% of charge<br>Multi-focal lenses & frames - 100% of charge   |
| Non PBS pharmaceuticals | 2                       | \$700 per person<br>(combined limit for non pbs pharmaceuticals & vaccinations - <b>Sub-limits apply</b> )  | Per eligible prescription - \$70.00  |
| Physiotherapy           | 2                       | \$700 per person<br>(combined limit for physiotherapy, occupational therapy & speech therapy - <b>Sub-limits apply</b> )  | Initial visit - \$40.00<br>Subsequent visit - \$36.00  |
| Chiropractic            | 2                       | \$480 per person<br>(combined limit for chiropractic, podiatry, psychology, acupuncture, remedial massage, dietetics/dietary advice, exercise physiology & osteopathy - <b>Sub-limits apply</b> ) | Initial visit - \$26.00<br>Subsequent visit - \$22.00  |
| Podiatry                | 2                       |   | Initial visit - \$26.00<br>Subsequent visit - \$22.00  |

|  |    |  |   |
|--|----|--|---|
| Psychology   | 2  |  | Initial visit - \$38.00<br>Subsequent visit - \$38.00 |
| Acupuncture  | 2  |  | Initial visit - \$35.00<br>Subsequent visit - \$35.00 |
| Remedial massage   | 2  |  | Initial visit - \$40.00<br>Subsequent visit - \$40.00 |
| Hearing aids   | 12 | \$750 per person                             | Hearing aid - 75% of charge                           |
| Blood glucose monitors                                     | 12 | \$100 per person                             | Per monitor - 75% of charge                           |
| Ante-natal/Post-natal classes                              | 2  | \$150 per person                             | Initial visit - \$15.00<br>Subsequent visit - \$15.00 |
| Dietetics/dietary advice                                   | 0  | Combined limit - see Chiropractic            | Initial visit - \$26.00                               |
| Exercise physiology  | 2  | Combined limit - see Chiropractic            | Initial visit - \$26.00<br>Subsequent visit - \$26.00 |
| Health management / Healthy lifestyle                      | 2  | \$100 per person                             | Health management - \$50.00                           |
| Home nursing   | 2  | \$750 per Calendar Year                      | Initial visit - \$16.00<br>Subsequent visit - \$16.00 |
| Occupational therapy                                       | 2  | Combined limit - see Physiotherapy           | Initial visit - \$28.00<br>Subsequent visit - \$28.00 |
| Orthotics (podiatric orthoses)                             | 12 | \$150 per person                             | Orthotics supply & fit - 75% of charge                |
| Osteopathy   | 2  | Combined limit - see Chiropractic            | Initial visit - \$26.00<br>Subsequent visit - \$22.00 |
| Speech therapy   | 2  | Combined limit - see Physiotherapy           | Initial visit - \$28.00<br>Subsequent visit - \$32.00 |
| Vaccinations   | 2  | Combined limit - see Non PBS pharmaceuticals | Per service - \$70.00                                 |
| CSIRO Total Wellbeing Diet \$299 1 Per Membership Per Year |    |  |   |

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

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

For further information about this policy see

<https://www.hunterhi.com.au/products/>

## 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.hunterhi.com.au/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.