Private Health Information Statement - Combined policy

CI Premier Gold Hospital And Value Benefits (Single)

GU Health

http://www.guhealth.com.au corporate@guhealth.com.au 1800 249 966

Monthly Premium \$321.60

(before any rebate, loading or discount)

Covers only one person Available in All States

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.

Employees/Members of organisations with arrangements with this health insurer

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

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.

X 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 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)
- 0 months for all other treatments

Gap Cover

This provider offers knowngap or root of 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

Home support services and programs: This program allows you to leave hospital early and continue to receive expert inhome care, so you can recover in the comfort of your own home.

For further information about this policy see

https://www.guhealth.com.au/

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 *: Pharmaceutical benefits paid for items with an official pharmacy receipt, after you pay a sum equal to the Australian Government's highest current PBS co-payment. One hearing aid appliance(s) every five years				
Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits	
General dental	0	\$1,700 per policy (combined limit for general dental, major dental, endodontic & orthodontic)	Periodic oral examination - 85% of charge Scale & clean - 100% of charge Fluoride treatment - 85% of charge Surgical tooth extraction - 85% of charge	
Major dental	0		Full crown veneered - 60% of charge	
Endodontic	0		Filling of one root canal - 85% of charge	
Orthodontic	0		Braces for upper & lower teeth, including removal plus fitting of retainer - 60% of charge	
Optical	0	\$350 per policy	Single vision lenses & frames - 80% of charge Multi-focal lenses & frames - 80% of charge	
Non PBS pharmaceuticals*	0	\$500 per policy	Per eligible prescription - 100% of charge	
Physiotherapy	0	\$600 per policy (combined limit for physiotherapy, ante-natal/post- natal classes, eye therapy (orthoptics), occupational therapy, speech therapy & other services)	Initial visit - 80% of charge Subsequent visit - 80% of charge	
Chiropractic	0	\$600 per policy (combined limit for chiropractic, osteopathy & other services)	Initial visit - 80% of charge Subsequent visit - 80% of charge	
Podiatry	0	\$300 per policy	Initial visit - 80% of charge Subsequent visit - 80% of charge	

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Psychology	0	\$600 per policy	Initial visit - 80% of charge Subsequent visit - 80% of charge
Acupuncture	0	(combined limit for psychology, acupuncture, remedial massage, chinese medicine, dietetics/dietary advice,	Initial visit - 80% of charge Subsequent visit - 80% of charge
Remedial massage	0	exercise physiology & other services)	Initial visit - 80% of charge Subsequent visit - 80% of charge
Hearing aids*	0	\$600 per policy 1 appliance(s) every 5 years	Hearing aid - 100% of charge
Blood glucose monitors	0	\$500 per policy (combined limit for blood glucose monitors, orthotics (podiatric orthoses) & other services)	Per monitor - 80% of charge
Audiology	0	\$200 per policy	Initial visit - 80% of charge Subsequent visit - 80% of charge
Ante-natal/Post-natal classes	0	Combined limit - see Physiotherapy	Initial visit - 80% of charge Subsequent visit - 80% of charge
Chinese medicine	0	Combined limit - see Psychology	Initial visit - 80% of charge Subsequent visit - 80% of charge
Dietetics/dietary advice	0	Combined limit - see Psychology	Initial visit - 100% of charge Subsequent visit - 100% of charge
Exercise physiology	0	Combined limit - see Psychology	Initial visit - 80% of charge Subsequent visit - 80% of charge
Eye therapy (orthoptics)	0	Combined limit - see Physiotherapy	Initial visit - 100% of charge Subsequent visit - 100% of charge
Occupational therapy	0	Combined limit - see Physiotherapy	Initial visit - 100% of charge Subsequent visit - 100% of charge
Orthotics (podiatric orthoses)	0	Combined limit - see Blood glucose monitors	Orthotics supply & fit - 80% of charge
Osteopathy	0	Combined limit - see Chiropractic	Initial visit - 80% of charge Subsequent visit - 80% of charge
Speech therapy	0	Combined limit - see Physiotherapy	Initial visit - 100% of charge Subsequent visit - 100% of charge

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

GU Health specialises in corporate health cover, providing superior health plans with executive benefits. Enjoy generous benefits on a range of services including general dental, physiotherapy, chiropractic and remedial massage.

For further information about this policy see

https://www.guhealth.com.au/

Ambulance cover

In All States this policy provides:

Emergency: Unlimited with no waiting period.

Call-out fees: will not be paid.

State schemes provide ambulance services for residents of Tasmania

(https://www.health.tas.gov.au/ambulance/fees and accounts) and Queensland (https://www.ambulance.qld.gov.au/).

For further information about this policy see

https://www.guhealth.com.au/forms-and-publications/fact-sheets

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.