

Private Health Information Statement - Hospital policy

GMF Mid Silver Plus \$300/\$600 Excess		
HBF Health Limited http://hbf.com.au memberservices@hbf.com.au 133 423	Monthly Premium \$425.48[#] (before any rebate, loading or discount)	Covers two adults & dependants (3 or more people, only 2 of whom are adults) Available in Northern Territory 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 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 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	 Gastrointestinal endoscopy	 Pain management with device
 Back, neck and spine	 Gynaecology	 Palliative care
 Blood	 Heart and vascular system	 Plastic and reconstructive surgery (medically necessary)
 Bone, joint and muscle	 Hernia and appendix	 Podiatric surgery (provided by a registered podiatric surgeon – limited benefits)
 Brain and nervous system	 Implantation of hearing devices	 Pregnancy and birth
 Breast surgery (medically necessary)	 Insulin pumps	 Rehabilitation
 Chemotherapy, radiotherapy and immunotherapy for cancer	 Joint reconstructions	 Skin
 Dental surgery	 Kidney and bladder	 Sleep studies
 Diabetes management (excluding insulin pumps)	 Lung and chest	 Tonsils, adenoids and grommets
 Digestive system	 Male reproductive system	 Hospital psychiatric services
 Ear, nose and throat	 Miscarriage and termination of pregnancy	
 Eye (not cataracts)	 Pain management	

This policy  does not include cover for

 Cataracts	 Joint replacements
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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 on admission. This is limited to a maximum of \$300 per person and \$600 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

For agreed services, you are fully covered for accommodation in a private room in an HBF Member Plus hospital or a private room in a public hospital.

Ambulance cover

In Northern Territory this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

Non-emergency: Unlimited transport 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

Fully covered for emergency treatment and urgent transport (by road) and for non-emergency treatment or ambulance transport (by road) per person per calendar year within Australia by a State Government ambulance provider or an HBF approved ambulance provider. Services not covered include air ambulance services and transport not provided in an ambulance.

For further information about this policy see

<http://www.hbf.com.au/health-insurance/ambulance-cover.html>

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.