

Private Health Information Statement - Combined policy

Healthmate Essentials Silver Plus

HCF

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13 13 34

Monthly Premium

\$495.82[#]

(before any rebate, loading or discount)

Covers 2 adults (and no-one else)

Available in South 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 or an insurer discount. Check with your insurer for details.

Hospital cover

This policy exempts you from the Medicare Levy Surcharge.

This policy provides accident cover and benefits for travel or accommodation (outside of hospital) - check with your insurer for details.

✓ 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

✓ Assisted reproductive services	✓ Eye (not cataracts)	✓ Pain management
✓ Back, neck and spine	✓ Gastrointestinal endoscopy	✓ Pain management with device
✓ Blood	✓ Gynaecology	✓ Palliative care
✓ Bone, joint and muscle	✓ Heart and vascular system	✓ Plastic and reconstructive surgery (medically necessary)
✓ Brain and nervous system	✓ Hernia and appendix	✓ Podiatric surgery (provided by a registered podiatric surgeon – limited benefits)
✓ Breast surgery (medically necessary)	✓ Implantation of hearing devices	✓ Pregnancy and birth
✓ Cataracts	✓ Insulin pumps	✓ Rehabilitation
✓ Chemotherapy, radiotherapy and immunotherapy for cancer	✓ Joint reconstructions	✓ Skin
✓ Dental surgery	✓ Joint replacements	✓ Sleep studies
✓ Diabetes management (excluding insulin pumps)	✓ Kidney and bladder	✓ Tonsils, adenoids and grommets
✓ Dialysis for chronic kidney failure	✓ Lung and chest	R Hospital psychiatric services
✓ Digestive system	✓ Male reproductive system	
✓ Ear, nose and throat	✓ Miscarriage and termination of pregnancy	

This policy ✗ does not include cover for

✗ Weight loss surgery

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 \$250 per person and \$500 per policy per year.

Excess payments do not apply to hospital admissions for accidents.

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

Comprehensive hospital cover packaged with extras designed for singles and couples without dependant kids. No excess for accident related treatment. Includes travel and accommodation benefits for hospital admission and cover for unlimited emergency ambulance trips. See fund rules for more information. Access to over 100 exclusive offers through HCF Thank You program. For more information visit: www.hcf.com.au/thankyou.

General Treatment Cover

Our nationwide network of No-Gap participating providers gives you access to comprehensive extras cover at an affordable price. Find out more See <https://www.hcf.com.au/locations/find-a-participating-provider>.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk *: Includes 100% back on 2 dental check-ups, prescription glasses and free digital retinal imaging with an eye test, and 100% back on an initial chiro, osteo and podiatry consult, at participating providers and subject to annual limits.			
Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	\$400 per person (Sub-limits apply)	Periodic oral examination - \$32.00 Scale & clean - \$63.00 Fluoride treatment - \$27.00
Major dental	12	\$300 per person	Surgical tooth extraction - \$156.00 Full crown veneered - n/a
Optical*	2	\$180 per person	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge
Non PBS pharmaceuticals	2	\$300 per person (combined limit for non pbs pharmaceuticals & vaccinations)	Per eligible prescription - \$50.00
Physiotherapy	2	\$350 per person (combined limit for physiotherapy, chiropractic, exercise physiology & osteopathy)	Initial visit - \$45.00 Subsequent visit - \$38.00
Chiropractic*	2		Initial visit - \$34.00 Subsequent visit - \$30.00
Acupuncture	2		Initial visit - \$30.00 Subsequent visit - \$22.00
		(combined limit for acupuncture, remedial massage, chinese medicine & other services)	

Remedial massage	2		Initial visit - \$30.00 Subsequent visit - \$22.00
Chinese medicine	2		Initial visit - \$30.00 Subsequent visit - \$20.00
Exercise physiology	2	Combined limit - see Physiotherapy	Initial visit - \$30.00 Subsequent visit - \$30.00
Osteopathy*	2	Combined limit - see Physiotherapy	Initial visit - \$42.00 Subsequent visit - \$35.00
Vaccinations	2	Combined limit - see Non PBS pharmaceuticals	Per service - \$50.00
General dental limit of \$400 is for direct fillings and simple extractions. Cover also includes dental check ups, with service limits, that are not part of this general dental limit. Major dental limit of \$300 includes surgical extractions only. HCF-approved Online Cognitive Behavioural Therapy courses with a separate annual limit per person/ per policy.			

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

✗ Blood glucose monitors	✗ Orthodontic	✗ Other treatments - check with your insurer
✗ Endodontic	✗ Podiatry	
✗ Hearing aids	✗ Psychology	

Ambulance cover

In South 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

If you are a resident of SA and you don't have an ambulance subscription with your state ambulance service and aren't offered cover under another arrangement, you have unlimited emergency ambulance services provided by state Ambulance Service Providers.

For further information about this policy see

<https://www.hcf.com.au/faqs/faqs-cover#what-is-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.