

Private Health Information Statement - Combined policy

| Silver Plus Hospital \$500 & Mid Extras  |  |   |
|--|--|---|
| Peoplecare Health Insurance<br><a href="http://www.peoplecare.com.au">http://www.peoplecare.com.au</a><br><a href="mailto:info@peoplecare.com.au">info@peoplecare.com.au</a><br>1800 808 690 | Monthly Premium<br>\$319.89#<br>(before any rebate, loading or discount) | Covers only one person<br>Available in Tasmania |

# 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 - 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                                    | ✓ Eye (not cataracts)             | ✓ Miscarriage and termination of pregnancy  |
| ✓ Blood   | ✓ Gastrointestinal endoscopy      | ✓ Pain management   |
| ✓ Bone, joint and muscle                                  | ✓ Gynaecology                     | ✓ Pain management with device   |
| ✓ Brain and nervous system                                | ✓ Heart and vascular system       | ✓ Palliative care   |
| ✓ Breast surgery (medically necessary)                    | ✓ Hernia and appendix             | ✓ Plastic and reconstructive surgery (medically necessary)                          |
| ✓ Cataracts   | ✓ Implantation of hearing devices | ✓ Podiatric surgery (provided by a registered podiatric surgeon – limited benefits) |
| ✓ 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                  | R Hospital psychiatric services   |
| ✓ Ear, nose and throat                                    | ✓ Male reproductive system        |   |

This policy ✗ does not include cover for

|                                  |                       |                       |
|----------------------------------|-----------------------|-----------------------|
| ✗ Assisted reproductive services | ✗ Pregnancy and birth | ✗ 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 on 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.

For further information about this policy see

<https://www.peoplecare.com.au/siteassets/documents/cd/oms/silver-plus-hospital---500-750-excess--mid-extras.pdf>

General Treatment Cover

By using Peoplecare's 'preferred providers' you may have lower out of pocket costs on Dental and Optical treatments and have access to more 'no gap' treatments. A list of 'preferred providers' is available from Peoplecare. See <https://peoplecare.com.au/Members/Providers/Other-health-providers>.

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                       | \$750 per policy  | Periodic oral examination - 60% of charge<br>Scale & clean - 60% of charge<br>Fluoride treatment - 60% of charge<br>Surgical tooth extraction - 60% of charge |
| Major dental            | 12                      | \$500 per policy<br>(combined limit for major dental & endodontic)  | Full crown veneered - 60% of charge   |
| Endodontic              | 12                      |   | Filling of one root canal - 60% of charge   |
| Optical                 | 6                       | \$200 per policy  | Single vision lenses & frames - \$200.00<br>Multi-focal lenses & frames - \$200.00  |
| Non PBS pharmaceuticals | 2                       | \$300 per policy<br>(combined limit for non pbs pharmaceuticals & vaccinations - <b>Sub-limits apply</b> )  | Per eligible prescription - \$60.00   |
| Physiotherapy           | 2                       | \$350 per policy<br>(combined limit for physiotherapy, exercise physiology, eye therapy (orthoptics), occupational therapy & other services - <b>Sub-limits apply</b> ) | Initial visit - \$43.00<br>Subsequent visit - \$33.00   |
| Chiropractic            | 2                       | \$350 per policy<br>(combined limit for chiropractic & osteopathy)  | Initial visit - \$40.00<br>Subsequent visit - \$30.00   |
| Podiatry                | 2                       | \$200 per policy  | Initial visit - \$40.00<br>Subsequent visit - \$30.00   |
| Acupuncture             | 2                       | \$300 per policy<br>(combined limit for acupuncture, remedial massage, dietetics/dietary advice & other services)   | Initial visit - \$40.00<br>Subsequent visit - \$30.00   |

|                                       |   |  |   |
|---------------------------------------|---|--|---|
| Remedial massage                      | 2 |  | Initial visit - \$40.00<br>Subsequent visit - \$30.00             |
| Dietetics/dietary advice              | 2 |  | Initial visit - \$40.00<br>Subsequent visit - \$30.00             |
| Exercise physiology                   | 2 | Combined limit - see Physiotherapy           | Initial visit - 60% of charge<br>Subsequent visit - 60% of charge |
| Eye therapy (orthoptics)              | 2 | Combined limit - see Physiotherapy           | Initial visit - \$43.00<br>Subsequent visit - \$33.00             |
| Health management / Healthy lifestyle | 6 | \$150 per policy                             | Health management - 60% of charge                                 |
| Occupational therapy                  | 2 | Combined limit - see Physiotherapy           | Initial visit - \$43.00<br>Subsequent visit - \$33.00             |
| Osteopathy                            | 2 | Combined limit - see Chiropractic            | Initial visit - \$40.00<br>Subsequent visit - \$30.00             |
| Vaccinations                          | 2 | Combined limit - see Non PBS pharmaceuticals | Per service - \$60.00   |

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

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

For further information about this policy see

<https://www.peoplecare.com.au/siteassets/documents/cd/oms/silver-plus-hospital---500-750-excess--mid-extras.pdf>

## Ambulance cover

Ambulance cover is provided by the State government for residents of Tasmania. This may include cover whilst interstate, except for South Australia and Queensland where no cover applies. In other states please check with Ambulance Tasmania - [https://www.health.tas.gov.au/ambulance/fees\\_and\\_accounts](https://www.health.tas.gov.au/ambulance/fees_and_accounts).

### Other features of this ambulance cover

Tasmanian residents don't need to worry about ambulance travel in their state, as it's free. This cover will include Ambulance transport whilst on the mainland for land, sea & air.

For further information about this policy see

<https://www.peoplecare.com.au/health-insurance/hospital-cover/ambulance>

### 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.