

Private Health Information Statement - Combined policy

Healthy Start (Basic)

Latrobe Health Services
<http://www.latrobehealth.com.au>
info@lhs.com.au
 1300 362 144

Monthly Premium
\$295.76[#]
 (before any rebate, loading or discount)

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

[#] 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 31, 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.
- X Not Covered**
These categories are not covered by this policy.

This policy **✓ includes cover for**

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

Benefits are payable for a shared or single room in any public hospital. Availability of single rooms in public hospitals cannot be guaranteed. If you elect to be admitted to a private room in a public hospital, we will pay a benefit equal to the Department of Health's shared ward accommodation rate in a public hospital plus an additional amount of up to \$80.00, and you may incur an out-of-pocket expense. Additional medical gap benefits are payable on this table.

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 | \$500 per person up to \$2,000 per policy | Periodic oral examination - \$30.50 Scale & clean - \$57.60 Fluoride treatment - \$23.20 |
| Major dental | 12 | Accident only cover, \$250 per accident, maximum \$500 per person, membership limit is \$2000. Combined with General Dental. | Full crown veneered - n/a |
| Optical | 6 | \$150 per person | Single vision lenses & frames - \$150.00 Multi-focal lenses & frames - \$150.00 |
| Non PBS pharmaceuticals | 2 | \$250 per person up to \$500 per policy (combined limit for non pbs pharmaceuticals, physiotherapy, chiropractic, podiatry, remedial massage, osteopathy, vaccinations & other services) | Per eligible prescription - \$25.00 |
| Physiotherapy | 2 | | Initial visit - \$30.00 Subsequent visit - \$30.00 |
| Chiropractic | 2 | | Initial visit - \$26.00 Subsequent visit - \$26.00 |
| Podiatry | 2 | | Initial visit - \$25.00 Subsequent visit - \$25.00 |
| Remedial massage | 2 | | Initial visit - \$25.00 Subsequent visit - \$25.00 |
| Osteopathy | 2 | | Initial visit - \$25.00 Subsequent visit - \$25.00 |
| Vaccinations | 2 | | Per service - \$25.00 |

A benefit is also payable for a 50% rebate on full ambulance subscriptions when paid voluntarily but not as a state tax or levy. Vaccinations are for travel vaccines and must be approved by Latrobe.

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

| | | |
|---------------------------------|-----------------------|---|
| X Acupuncture | X Hearing aids | X Other treatments - check with your insurer |
| X Blood glucose monitors | X Orthodontic | |
| X Endodontic | X Psychology | |

Ambulance cover

In NSW & ACT 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.

For further information about this policy see

<https://www.latrobehealth.com.au/health-cover/emergency-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.