

Private Health Information Statement - Combined policy

Gold Proactive Package

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

Monthly Premium
\$705.70[#]
 (before any rebate, loading or discount)

Covers 2 adults (and no-one else)
 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.

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

✓ 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)
- 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

Additional medical gap benefits are also payable.

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	\$600 per person (combined limit for general dental & endodontic)	Periodic oral examination - \$24.20 Scale & clean - \$46.40 Fluoride treatment - \$18.50 Surgical tooth extraction - \$81.00
Major dental	12	\$600 per person	Full crown veneered - \$432.00
Endodontic	2	Combined limit - see General dental	Filling of one root canal - \$88.20
Optical	2	\$150 per person	Single vision lenses & frames - \$150.00 Multi-focal lenses & frames - \$150.00
Non PBS pharmaceuticals	2	\$250 per person	Per eligible prescription - \$25.00
Physiotherapy	2	\$350 per person	Initial visit - \$26.00 Subsequent visit - \$20.00
Podiatry	2	\$300 per person (combined limit for podiatry, orthotics (podiatric orthoses) & other services)	Initial visit - \$45.00 Subsequent visit - \$35.00
Psychology	2	\$350 per person	Initial visit - \$45.00 Subsequent visit - \$25.00
Hearing aids	36	\$550 per person 1 appliance(s) every 5 years	Hearing aid - \$550.00
Blood glucose monitors	36	\$240 per policy 1 appliance(s) every 3 years (combined limit for blood glucose monitors & other services)	Per monitor - \$240.00
Audiology	2	\$50 per person	Initial visit - \$20.00 Subsequent visit - \$15.00
Dietetics/dietary advice	2	\$250 per person	Initial visit - \$24.00 Subsequent visit - \$18.00

Eye therapy (orthoptics)	2	\$350 per person (combined limit for eye therapy (orthoptics), occupational therapy & speech therapy)	Initial visit - \$26.00 Subsequent visit - \$20.00
Health management / Healthy lifestyle	2	\$70 per person	Health management - \$70.00
Home nursing	2	\$250 per person	Initial visit - \$15.00 Subsequent visit - \$15.00
Occupational therapy	2	Combined limit - see Eye therapy (orthoptics)	Initial visit - \$26.00 Subsequent visit - \$20.00
Orthotics (podiatric orthoses)	2	Combined limit - see Podiatry	Orthotics supply & fit - \$187.00
Speech therapy	2	Combined limit - see Eye therapy (orthoptics)	Initial visit - \$26.00 Subsequent visit - \$20.00
The orthotic benefit shown is a guide only and benefits will differ according to the orthotic prescribed. Pharmacy benefits is 15% of the cost of private scripts up to \$25.00. Benefits are also payable for pressure garments, nebulisers, CPAP machine, personal alarm call system, home services, and breast prostheses.			

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

X Acupuncture	X Orthodontic	X Other treatments - check with your insurer
X Chiropractic	X Remedial massage	

Ambulance cover

In Northern Territory this policy provides:

Emergency: Unlimited with a waiting period of 2 months.

Non-emergency: Unlimited transport with a waiting period of 2 months, or 2 months for pre-existing conditions.

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.