

# Private Health Information Statement - Hospital policy

## Medibank Bronze Plus Value

### Medibank Private Limited

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### Monthly Premium

**\$260.70<sup>#</sup>**

(before any rebate, loading or discount)

Covers 2 adults (and no-one else)  
Available in South Australia

<sup>#</sup> You may be entitled to an Australian Government rebate on the above premium. Your premium may also include a Lifetime Health Cover loading, an age-based discount 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

|   |  |   |
|---|--|---|
| ✓ Blood   | ✓ Eye (not cataracts)                      | ✓ Pain management   |
| ✓ Bone, joint and muscle                                  | ✓ Gastrointestinal endoscopy               | ✓ Palliative care   |
| ✓ Brain and nervous system                                | ✓ Gynaecology                              | ✓ Podiatric surgery (provided by a registered podiatric surgeon - limited benefits) |
| ✓ Breast surgery (medically necessary)                    | ✓ Hernia and appendix                      | ✓ Skin  |
| ✓ Chemotherapy, radiotherapy and immunotherapy for cancer | ✓ Joint reconstructions                    | ✓ Sleep studies   |
| ✓ Dental surgery  | ✓ Kidney and bladder                       | ✓ Tonsils, adenoids and grommets  |
| ✓ Diabetes management (excluding insulin pumps)           | ✓ Lung and chest                           | R Hospital psychiatric services   |
| ✓ Digestive system  | ✓ Male reproductive system                 | R Rehabilitation  |
| ✓ Ear, nose and throat                                    | ✓ Miscarriage and termination of pregnancy |   |

This policy ✗ does not include cover for

|                                       |                                   |  |
|---------------------------------------|-----------------------------------|--|
| ✗ Assisted reproductive services      | ✗ Heart and vascular system       | ✗ Pain management with device                              |
| ✗ Back, neck and spine                | ✗ Implantation of hearing devices | ✗ Plastic and reconstructive surgery (medically necessary) |
| ✗ Cataracts                           | ✗ Insulin pumps                   | ✗ Pregnancy and birth                                      |
| ✗ Dialysis for chronic kidney failure | ✗ Joint replacements              | ✗ 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](http://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 of \$750 per admission. This is limited to a maximum of \$750 per person 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.

## Other features of this hospital cover

This cover has Accident Cover Boost, which means that any Excluded or Restricted Service will be treated as if it is an Included Service, where you require hospital treatment as a result of injuries sustained in an Accident that occurred after joining your cover. This cover also pays benefits towards the cost of a CPAP device. Please refer to your Medibank Member Guide for more information.

## 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

Cover for an ambulance when you require immediate professional attention and you need to be transported to hospital or other approved facility and your medical condition is such that you cannot be transported any other way, or where an ambulance is called but transport is not needed. Cover for air ambulance where pre-approval has been obtained from Medibank. In all cases the ambulance provider must be Medibank approved. Please contact Medibank for further details.

## 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.