

Private Health Information Statement - Combined policy

AIA Silver Plus Hospital 500 and AIA Lite 60 Extras

AIA Health Insurance Pty Ltd

<http://www.aia.com.au/health>
Health.MemberServices@aia.com.au
1800333004

Monthly Premium

\$261.72[#]

(before any rebate, loading or discount)

Covers only one person
Available in NSW & ACT
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

| | | |
|---|-----------------------------------|---|
| ✓ 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 for

[PrivateHealth.gov.au](https://privatehealth.gov.au)

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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.

General Treatment Cover










This health insurer does not operate a preferred provider scheme.

This policy  **includes** General treatment (Extras) cover for

*Note, for items marked with an asterisk *: Optical cover pays back 100% up to annual limit. Physiotherapy, Myotherapy, Hydrotherapy, Chiropractic, and Osteopathy covered under a combined annual limit. This policy also provides access to AIA Vitality, where you can earn rewards for leading a healthy lifestyle! <https://aiavitality.com.au>*

| Treatment | Waiting period (months) | Benefit limits (per 12 months unless otherwise stated) | Examples of maximum benefits |
|----------------|-------------------------|---|--|
| General dental | 2 | \$600 per policy (no limit on preventative dental) | Periodic oral examination - 60% of charge Scale & clean - 60% of charge Fluoride treatment - 60% of charge |
| Major dental | 12 | \$300 per policy (combined limit for major dental & endodontic) | Surgical tooth extraction - 60% of charge 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 - 100% of charge Multi-focal lenses & frames - 100% of charge |
| Physiotherapy* | 2 | \$300 per policy (combined limit for physiotherapy, chiropractic & osteopathy) | Initial visit - 60% of charge Subsequent visit - 60% of charge |
| Chiropractic* | 2 | | Initial visit - 60% of charge Subsequent visit - 60% of charge |
| Osteopathy* | 2 | | Initial visit - 60% of charge Subsequent visit - 60% of charge |

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

| | | |
|---|---|--|
|  Acupuncture |  Non PBS pharmaceuticals |  Psychology |
|  Blood glucose monitors |  Orthodontic |  Remedial massage |
|  Hearing aids |  Podiatry |  Other treatments - check with your insurer |

Ambulance cover

In NSW & ACT this policy provides:

[PrivateHealth.gov.au](https://privatehealth.gov.au)

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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 call-out fees where you're not taken to hospital are limited to 2 x ambulance attendances per insured person, per calendar year.

[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.