

## Private Health Information Statement - Combined policy

### Gold Advanced Cover \$750 Excess

nib Health Funds Ltd.

<https://www.nib.com.au>

13 14 63

Monthly Premium

**\$948.73<sup>#</sup>**

(before any rebate, loading or discount)

Covers 2 adults (and no-one else)

Available in Northern Territory

<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 - 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](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 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
- 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

Our Going to Hospital Pack provides more ways to reduce out-of-pockets, ask us for your copy.

For further information about this policy see

<https://my.nib.com.au/product-collateral/2796>

## General Treatment Cover

By using nib's First Choice providers, you will have lower out-of-pocket costs on many allied health services. A list of "preferred providers" is available from the health insurer. See <https://www.nib.com.au/find-a-provider>.

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                       | \$1,000 per person<br>(no limit on preventative dental)  | Periodic oral examination - 75% of charge<br>Scale & clean - 75% of charge<br>Fluoride treatment - 75% of charge |
| Major dental            | 12                      | \$1,300 per person<br>(combined limit for major dental & endodontic)                               | Surgical tooth extraction - 75% of charge<br>Full crown veneered - 75% of charge                                 |
| Endodontic              | 12                      |  | Filling of one root canal - 75% of charge  |
| Orthodontic             | 12                      | \$800 per person<br>\$2,600 lifetime limit   | Braces for upper & lower teeth, including removal plus fitting of retainer - 75% of charge                       |
| Optical                 | 6                       | \$350 per person   | Single vision lenses & frames - 75% of charge<br>Multi-focal lenses & frames - 75% of charge                     |
| Non PBS pharmaceuticals | 2                       | \$500 per person   | Per eligible prescription - 75% of charge  |
| Physiotherapy           | 2                       | \$600 per person<br>(combined limit for physiotherapy & other services)                            | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge  |
| Chiropractic            | 2                       | \$500 per person<br>(combined limit for chiropractic, osteopathy & other services)                 | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge  |
| Podiatry                | 2                       | \$400 per person<br>(combined limit for podiatry, orthotics (podiatric orthoses) & other services) | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge  |
| Psychology              | 2                       | \$500 per person   | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge  |

|                                       |    |  |   |
|---------------------------------------|----|--|---|
| Acupuncture                           | 2  | \$450 per person<br>(combined limit for acupuncture, remedial massage, chinese medicine & other services - <b>Sub-limits apply</b> ) | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge   |
| Remedial massage                      | 2  |  | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge   |
| Hearing aids                          | 36 | \$1,200 per person<br>2 appliance(s) every 5 years<br>(combined limit for hearing aids & other services)                             | Hearing aid - 75% of charge   |
| Blood glucose monitors                | 12 | \$500 per person<br>1 appliance(s) every 1 year<br>(combined limit for blood glucose monitors & other services)                      | Per monitor - 75% of charge   |
| Ante-natal/Post-natal classes*        | 2  | \$300 per person   | Initial visit - 100% of charge<br>Subsequent visit - 100% of charge |
| Chinese medicine                      | 2  | Combined limit - see Acupuncture   | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge   |
| Dietetics/dietary advice              | 2  | \$700 per person   | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge   |
| Exercise physiology                   | 2  | \$400 per person   | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge   |
| Eye therapy (orthoptics)              | 2  | \$300 per person   | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge   |
| Health management / Healthy lifestyle | 6  | \$200 per person   | Health management - 75% of charge                                   |
| Home nursing                          | 2  | \$200 per person   | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge   |
| Occupational therapy                  | 2  | \$550 per person   | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge   |
| Orthotics (podiatric orthoses)        | 2  | Combined limit - see Podiatry  | Orthotics supply & fit - 75% of charge                              |
| Osteopathy                            | 2  | Combined limit - see Chiropractic  | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge   |
| Speech therapy                        | 2  | \$450 per person   | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge   |

Preventative Tests (\$200) e.g. thin prep, bone density testing, bowel screening (Service limits apply). Health Aids (\$500) e.g. spacer, peak flow meter, nebuliser, Irlen lens. Myotherapy: combined limit of \$450 with acupuncture, remedial massage and Chinese herbalism. Sublimit of \$250 for Remedial Massage. Psychology has a sublimit of \$150 for Digital Cognitive Behavioural Therapy (CBT). Healthier Lifestyle (\$200) includes nib approved weight management, quit smoking and health management programs (gym, personal trainer) and more. Use nib Rewards to access a range of rewards and discounts on services like groceries, petrol, entertainment, health, wellbeing and more! For Preventative dental service limits apply. Non-PBS pharmaceuticals have a sub limit of \$150 for Weight Management Medication.

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

**X** Other treatments - check with your insurer

### Other features of this general treatment cover

By choosing an nib First Choice provider it means you could pay less on dental treatment, physiotherapy and optical. Service limit apply to Preventative dental, Optical, Orthotics, Hearing Aids & Hearing Aids Repair, Health Aids and Preventative Test.

For further information about this policy see

<https://my.nib.com.au/product-collateral/2796>

### Ambulance cover

In Northern Territory 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](#)

All our health covers include unlimited emergency ambulance (1 day waiting period on all emergency ambulance). Emergency ambulance is when you need immediate transport by a State or Territory ambulance to get to a hospital or other facility for urgent medical treatment. No annual limits for emergency ambulance apply.

For further information about this policy see

<https://my.nib.com.au/product-collateral/2796>

### 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.