

## Private Health Information Statement - Combined policy

### Basic Plus \$250 Excess

nib Health Funds Ltd.

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

13 14 63

Monthly Premium

**\$264.20<sup>#</sup>**

(before any rebate, loading or discount)

Covers only one person

Available in Tasmania

Closed to new members

<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

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

This policy ✗ does not include cover for

✗ Back, neck and spine	✗ Dialysis for chronic kidney failure	✗ Weight loss surgery
✗ Cataracts	✗ Joint replacements	

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 \$250 per admission. This is limited to a maximum of \$500 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.

For further information about this policy see

<https://my.nib.com.au/product-collateral/2>

## General Treatment Cover

By using our FirstChoice providers, you may 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

Note, for items marked with an asterisk *: Benefit paid after current PBS patient contribution deducted			
Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental	2	\$500 per policy	Periodic oral examination - 65% of charge Scale & clean - 65% of charge Fluoride treatment - 65% of charge
Major dental	12	\$600 per policy (combined limit for major dental & endodontic)	Surgical tooth extraction - 65% of charge Full crown veneered - 65% of charge
Endodontic	12		Filling of one root canal - 65% of charge
Orthodontic	12	\$200 per policy \$1,000 lifetime limit	Braces for upper & lower teeth, including removal plus fitting of retainer - 65% of charge
Optical	6	\$250 per policy	Single vision lenses & frames - 65% of charge Multi-focal lenses & frames - 65% of charge
Non PBS pharmaceuticals*	2	\$200 per policy	Per eligible prescription - 65% of charge
Physiotherapy	2	\$350 per policy (combined limit for physiotherapy, chiropractic, exercise physiology & osteopathy)	Initial visit - 65% of charge Subsequent visit - 65% of charge
Chiropractic	2		Initial visit - 65% of charge Subsequent visit - 65% of charge
Psychology	2	\$200 per policy	Initial visit - 65% of charge Subsequent visit - 65% of charge
Acupuncture	2	\$200 per policy (combined limit for acupuncture, remedial massage, chinese medicine, dietetics/dietary advice & other services - <b>Sub-limits apply</b> )	Initial visit - 65% of charge Subsequent visit - 65% of charge
Remedial massage	2		Initial visit - 65% of charge Subsequent visit - 65% of charge
Chinese medicine	2		Initial visit - 65% of charge Subsequent visit - 65% of charge

Dietetics/dietary advice	2		Initial visit - 65% of charge Subsequent visit - 65% of charge
Exercise physiology	2	Combined limit - see Physiotherapy	Initial visit - 65% of charge Subsequent visit - 65% of charge
Health management / Healthy lifestyle	6	\$150 per policy	Health management - 65% of charge
Osteopathy	2	Combined limit - see Physiotherapy	Initial visit - 65% of charge Subsequent visit - 65% of charge

Myotherapy: combined limit of \$200 with acupuncture, remedial massage, dietary advice and Chinese herbalism. Healthier Lifestyle includes e.g. approved weight management, quit smoking and nicotine replacement (gym, personal training), preventative health tests (service limits apply). Psychology has a sublimit of \$150 for Digital Cognitive Behavioural Therapy (CBT).

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

<b>X</b> Blood glucose monitors	<b>X</b> Podiatry
<b>X</b> Hearing aids	<b>X</b> Other treatments - check with your insurer

Other features of this general treatment cover

Great for young people who were not thinking about kids, but who wanted more cover for things like major dental. Of course, you can see your choice of provider, but by choosing a FirstChoice provider, you may have less to pay towards the cost of your treatment. We've created the FirstChoice network to help you access quality healthcare and a better deal for you and your family. We've locked in lower costs with our FirstChoice providers, so you can enjoy competitive treatment fees when you visit the dentist or a discount the next time you claim for glasses.

For further information about this policy see

<https://my.nib.com.au/product-collateral/2>

## Ambulance cover

Ambulance cover is provided by the State government for residents of Tasmania. This may include cover whilst interstate, except for South Australia and Queensland where no cover applies. In other states please check with Ambulance Tasmania - [https://www.health.tas.gov.au/ambulance/fees\\_and\\_accounts](https://www.health.tas.gov.au/ambulance/fees_and_accounts).

Other features of this ambulance cover

Emergency ambulance costs are covered by the state government for residents of Tasmania.

For further information about this policy see

<https://my.nib.com.au/product-collateral/2>

## 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.