

Private Health Information Statement - Combined policy

Hospital Plus - Silver Plus \$500 Excess

nib Health Funds Ltd.
https://www.nib.com.au
13 14 63

Monthly Premium

\$417.49[#]
(before any rebate, loading or discount)

Covers only one person
Available in Queensland
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, 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) | ✓ Pain management |
| ✓ Back, neck and spine | ✓ Gastrointestinal endoscopy | ✓ Pain management with device |
| ✓ Blood | ✓ Gynaecology | ✓ Palliative care |
| ✓ Bone, joint and muscle | ✓ Heart and vascular system | ✓ Plastic and reconstructive surgery (medically necessary) |
| ✓ Brain and nervous system | ✓ Hernia and appendix | ✓ Podiatric surgery (provided by a registered podiatric surgeon – limited benefits) |
| ✓ Breast surgery (medically necessary) | ✓ Implantation of hearing devices | ✓ Pregnancy and birth |
| ✓ Cataracts | ✓ Insulin pumps | ✓ Rehabilitation |
| ✓ Chemotherapy, radiotherapy and immunotherapy for cancer | ✓ Joint reconstructions | ✓ Skin |
| ✓ Dental surgery | ✓ Joint replacements | ✓ Sleep studies |
| ✓ Diabetes management (excluding insulin pumps) | ✓ Kidney and bladder | ✓ Tonsils, adenoids and grommets |
| ✓ Dialysis for chronic kidney failure | ✓ Lung and chest | R Hospital psychiatric services |
| ✓ Digestive system | ✓ Male reproductive system | |
| ✓ Ear, nose and throat | ✓ Miscarriage and termination of pregnancy | |

This policy ✗ does not include cover for

✗ Weight loss surgery

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 \$500 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/14>

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 *: Non PBS Pharmaceuticals: benefit paid after current PBS patient contribution deducted. Antenatal benefit limits apply to antenatal classes conducted by a midwife and antenatal classes provided by a hospital. | | | |
|--|-------------------------|--|--|
| 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 - 50% of charge Scale & clean - 50% of charge Fluoride treatment - 50% of charge |
| Major dental | 12 | \$600 per policy (combined limit for major dental & endodontic) | Surgical tooth extraction - 50% of charge Full crown veneered - 50% of charge |
| Endodontic | 12 | | Filling of one root canal - 50% of charge |
| Orthodontic | 12 | \$200 per policy \$1,000 lifetime limit | Braces for upper & lower teeth, including removal plus fitting of retainer - 50% of charge |
| Optical | 6 | \$250 per policy | Single vision lenses & frames - 50% of charge Multi-focal lenses & frames - 50% of charge |
| Non PBS pharmaceuticals | 2 | \$200 per policy | Per eligible prescription - 50% of charge |
| Physiotherapy | 2 | \$350 per policy (combined limit for physiotherapy, chiropractic, exercise physiology, osteopathy & other services) | Initial visit - 50% of charge Subsequent visit - 50% of charge |
| Chiropractic | 2 | | Initial visit - 50% of charge Subsequent visit - 50% of charge |
| Acupuncture | 2 | \$200 per policy (combined limit for acupuncture, remedial massage, chinese medicine & other services) | Initial visit - 50% of charge Subsequent visit - 50% of charge |
| Remedial massage | 2 | | Initial visit - 50% of charge Subsequent visit - 50% of charge |
| Ante-natal/Post-natal classes* | 2 | \$100 per policy | Initial visit - 100% of charge Subsequent visit - 100% of charge |

| | | | |
|--|---|------------------------------------|---|
| Chinese medicine | 2 | Combined limit - see Acupuncture | Initial visit - 50% of charge Subsequent visit - 50% of charge |
| Exercise physiology | 2 | Combined limit - see Physiotherapy | Initial visit - 50% of charge Subsequent visit - 50% of charge |
| Health management / Healthy lifestyle | 2 | \$150 per policy | Health management - 50% of charge |
| Osteopathy | 2 | Combined limit - see Physiotherapy | Initial visit - 50% of charge Subsequent visit - 50% of charge |
| Myotherapy: combined limit of \$200 with acupuncture, remedial massage and Chinese herbalism. Healthier Lifestyle includes nib approved weight management, quit smoking and health management programs (gym, personal trainer), preventative health tests. | | | |

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

| | | |
|---------------------------------|---------------------|---|
| X Blood glucose monitors | X Podiatry | X Other treatments - check with your insurer |
| X Hearing aids | X Psychology | |

Other features of this general treatment cover

High level of private hospital cover plus a great range of Extras. 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/14>

Ambulance cover

Ambulance cover is provided by the State government for Queensland residents (<https://www.ambulance.qld.gov.au/>). This includes cover whilst interstate.

Other features of this ambulance cover

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

For further information about this policy see

<https://my.nib.com.au/product-collateral/14>

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.