Private Health Information Statement - Combined policy

Gold Easy Choice

TUH, part of the Teachers Health Group	*Monthly Premium*	Covers two adults & dependants (3 or more people, only 2 of whom are adults)
https://tuh.com.au/ enquiries@tuh.com.au 1300 360 701	*$719.70 #* (before any rebate, loading or discount)	Available in Northern Territory

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.

This policy covers children and other dependants up to and including the age of 20, students up to and including the age of 31, as well as persons with a disability who qualify as a child or other dependant or student in these age ranges.

Membership of this insurer is restricted to current or former union members and their families.

This is a corporate policy only available to new members who qualify under TUH's Fund Rules.

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.

X **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 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 on admission. This is limited to a maximum of $300 per person per year.

Excess payments do not apply to hospital admissions for dependants.

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
- 9 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

Top hospital cover when you need it. Excellent range of value-added services: hospital substitute treatment, hospital substitute programs, chronic disease management programs and care coordination (conditions apply). An excess is applied once per adult per calendar year. The hospital excess is waived for dependants. Reducing your excess is considered to be upgrading your membership. We will charge your previous excess within the first two months of the upgrade, including for adults who are upgrading their level of cover by joining/re-joining as a dependant on a family membership.

For further information about this policy see

https://tuh.com.au/package/gold-easy-choice

General Treatment Cover

No-gap or agreed discounts at preferred optical, dental, podiatry and physiotherapy providers. See https://tuh.com.au/information/using-your-extras/find-provider.

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

*Note, for items marked with an asterisk *: *Major Dental limit includes Crowns/Bridges $670 sub-limit, Implants $350 sub-limit, Dentures $600 sub-limit, Endodontia $350 sub-limit, Periodontia $350 sub-limit, Inlays/Onlays/Facings $350 sub-limit. *Orthodontic $880 sub-limit maximum lifetime benefit $2,640. Optical set benefits apply for frames/lenses/repairs, 100% up to annual limit for contacts. *Physiotherapy limit includes Exercise Physiology $140 sub-limit and Group Physiotherapy $190 sub-limit. *Acupuncture limit includes $400 sub-limit Acupuncture, Chinese Medicine. $400 sub-limit Osteopathy and $400/person $800/policy Remedial Massage, Myotherapy sub-limit. *Podiatry other therapies limit includes Podiatry and Orthotics $400 sub-limit, Dietetics $400 sub-limit, Speech Therapy $400 sub-limit, Occupational Therapy $400 sub-limit and Orthoptics $400 sub-limit.*

Treatment	*Waiting period (months)*	*Benefit limits (per 12 months unless otherwise stated)*	*Examples of maximum benefits*
General dental	2	$1,000 per person	Periodic oral examination - $35.70 Scale & clean - $67.20 Fluoride treatment - $30.45 Surgical tooth extraction - $125.00
Major dental*	12	$2,000 per person (combined limit for major dental, endodontic, orthodontic & other services - **Sub-limits apply**)	Full crown veneered - $670.00

Endodontic	12		Filling of one root canal - $161.00
Orthodontic*	12		Braces for upper & lower teeth, including removal plus fitting of retainer - $880.00
Optical*	6	$260 per person	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge
Non PBS pharmaceuticals	2	$500 per person	Per eligible prescription - $60.00
Physiotherapy*	2	$700 per person (combined limit for physiotherapy, exercise physiology & other services - **Sub-limits apply**)	Initial visit - $52.00 Subsequent visit - $42.00
Chiropractic	2	$400 per person	Initial visit - $37.00 Subsequent visit - $33.00
Podiatry*	2	$1,000 per person (combined limit for podiatry, dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), speech therapy & other services - **Sub-limits apply**)	Initial visit - $40.00 Subsequent visit - $34.00
Psychology	2	$400 per person	Initial visit - $85.00 Subsequent visit - $75.00
Acupuncture*	2	$500 per person (combined limit for acupuncture, remedial massage, chinese medicine, osteopathy & other services - **Sub-limits apply**)	Initial visit - $36.00 Subsequent visit - $31.00
Remedial massage	2		Initial visit - $40.00 Subsequent visit - $40.00
Hearing aids	12	$1800 overall limit $900 per ear $650 sub-limit on repairs. Limits apply over 3-year period from date of first supply.	Hearing aid - $900.00
Blood glucose monitors	12	$400 per person (combined limit for blood glucose monitors & other services - **Sub-limits apply**)	Per monitor - 85% of charge
Audiology	2	$200 per person	Initial visit - $70.00 Subsequent visit - $60.00
Ante-natal/Post-natal classes	2	$240 per person up to $480 per policy (combined limit for ante-natal/post-natal classes, health management / healthy lifestyle & other services - **Sub-limits apply**)	Initial visit - 80% of charge Subsequent visit - 80% of charge
Chinese medicine	2	Combined limit - see Acupuncture	Initial visit - $36.00 Subsequent visit - $31.00
Dietetics/dietary advice	2	Combined limit - see Podiatry	Initial visit - $60.00 Subsequent visit - $42.00
Exercise physiology	2	Combined limit - see Physiotherapy	Initial visit - $26.00 Subsequent visit - $26.00
Eye therapy (orthoptics)	2	Combined limit - see Podiatry	Initial visit - $42.00 Subsequent visit - $42.00
Health management / Healthy lifestyle	2	Combined limit - see Ante-natal/Post-natal classes	Health management - 80% of charge
Occupational therapy	2	Combined limit - see Podiatry	Initial visit - $49.00 Subsequent visit - $35.00
Orthotics (podiatric orthoses)	12	Combined limit - see Podiatry	Orthotics supply & fit - 85% of charge
Osteopathy	2	Combined limit - see Acupuncture	Initial visit - $38.00 Subsequent visit - $33.00
Speech therapy	2	Combined limit - see Podiatry	Initial visit - $67.00 Subsequent visit - $41.00

Anti snore device $500 sub-limit included in Major Dental overall limit. Group Physiotherapy $20 per consult up to $190 sub-limit. Ante/post-natal Physiotherapy $17 per consult up to $125 sub-limit. Chiropractic x-ray (one per year) $63 included in Chiropractic limit. Group Psychology $35 per consult and Counselling $40 per initial consult, $35 per subsequent consult included in $400 Psychology limit. Osteopathic x-ray (one per year) $63 included in Osteopathy sub-limit. Myotherapy, Shiatsu, Alexander Technique $40 per consult included in Remedial Massage sub-limit. Western Herbal Medicine, Naturopathy $36/$31 per consult included in Acupuncture sub-limit. Podiatric Surgery 85% and Biogait Analysis (one per year) $34, included in $400 Podiatry and Orthotic sub-limit, this sub-limit also includes Orthotic Repairs 85% up to $100 and customised/moulded orthotics 85% up to $200. Group Speech Therapy $17 per consult and Paediatric Assessment (one per year) $80 up to $400 Speech Therapy sub-limit. Group Occupational Therapy $22.50 per consult up to $400 Occupational Therapy sub-limit. Health Management overall limit includes $100 sub-limit Health Screenings, $130 sub-limit on Health Management Programs, $140 sub-limit on Healthy Lifestyle Programs and $180 sub-limit on Ante/post-natal classes, all payable at 80% of cost. *Blood Glucose Monitors $400 sub-limit included in Health Devices/Appliances overall limit of $620. All services in Health Devices/Appliances limit payable at 85% of cost including $620 sub-limit on CPAP etc machines, $300 sub-limit on compression garments, $100 sub-limit on accessories/repair, 500 sub-limit on Non-surgically implanted prostheses e.g. breast prostheses and wigs. Blood Glucose Monitors $400 sub-limit also includes $200 sub-limit on other appliances and $120 sub-limit on Health Aids. Travel and Accommodation $45 per night and up to $100 travel up to $100 limit. Active Health Bonus $75/person $150/membership.

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

✗ Other treatments - check with your insurer

Other features of this general treatment cover

Annual major dental sub-limits increase with years of membership. Online and mobile access, claims via smart phone app.

For further information about this policy see

https://tuh.com.au/package/gold-easy-choice

Ambulance cover

In Northern Territory this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

Non-emergency: Unlimited transport with a waiting period of 1 day, or 1 day for pre-existing conditions.

Call-out fees: will be paid for each attendance, including emergency treatment without transport to hospital.

Other features of this ambulance cover

Members who have COMBINED HOSPITAL AND EXTRAS COVER are entitled to emergency ambulance services benefits. No annual limit will apply to emergency road ambulance services. State-owned air ambulance transportation services are covered up to $6,000 per person per annum. From 1 Jan 2022, members who have eligible stand-alone extras cover may claim the cost of a third-party ambulance subscription fee from the Health Program benefit category (sub-limits apply).

For further information about this policy see

https://tuh.com.au/information/glossary/ambulance

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.