# Private Health Information Statement - Combined policy

## Gold Ultimate Choice

| TUH, part of the Teachers Health Group | *Monthly Premium* | Covers one adult & dependants (2 or more people, only one of whom is an adult) |
|---|---|---|
| https://tuh.com.au/<br>enquiries@tuh.com.au<br>1300 360 701 | *$653.07 #*<br>(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:** No excess

**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

Superior health cover you and your family deserve. Excellent range of value-added services: home care after hospital, chronic disease management programs, hospital substitute programs (conditions apply).

### For further information about this policy see

https://tuh.com.au/package/gold-ultimate-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 $800 sub-limit, Implants $500 sub-limit, Dentures $750 sub-limit, Endodontia $500 sub-limit, Periodontia $500 sub-limit, Inlays/Onlays/Facings $500 sub-limit and Anti-snore device $500 sub-limit. *Orthodontic $1,000 annual sub-limit (maximum lifetime benefit $2,800). *Optical set benefits apply for frames/lenses/repairs, 100% up to annual limit for contacts. *Physiotherapy limit includes Exercise Physiology $250 sub-limit and Group Physiotherapy $300 sub-limit. Orthotics (customised and moulded) $360 sub-limit.*

| *Treatment* | *Waiting period (months)* | *Benefit limits (per 12 months unless otherwise stated)* | *Examples of maximum benefits* |
|---|---|---|---|
| General dental | 2 | No annual limit | Periodic oral examination - $44.10<br>Scale & clean - $80.85<br>Fluoride treatment - $32.55<br>Surgical tooth extraction - $156.00 |
| Major dental* | 12 | $3,800 per person<br>(combined limit for major dental, endodontic & other services - **Sub-limits apply**) | Full crown veneered - $800.00 |
| Endodontic | 12 | | Filling of one root canal - $195.00 |
| Orthodontic* | 12 | $1,000 per person<br>$2,800 lifetime limit | Braces for upper & lower teeth, including removal plus fitting of retainer - $1,000.00 |
| Optical* | 6 | $270 per person | Single vision lenses & frames - 100% of charge<br>Multi-focal lenses & frames - 100% of charge |

| | | | |
|---|---|---|---|
| Non PBS pharmaceuticals | 2 | $600 per person | Per eligible prescription - $60.00 |
| Physiotherapy* | 2 | $750 per person<br>(combined limit for physiotherapy, exercise physiology & other services - **Sub-limits apply**) | Initial visit - $62.00<br>Subsequent visit - $52.00 |
| Chiropractic | 2 | $450 per person | Initial visit - $44.00<br>Subsequent visit - $35.00 |
| Podiatry | 2 | $450 per person | Initial visit - $42.00<br>Subsequent visit - $39.00 |
| Psychology | 2 | $450 per person | Initial visit - $95.00<br>Subsequent visit - $83.00 |
| Acupuncture | 2 | $450 per person<br>(combined limit for acupuncture & chinese medicine) | Initial visit - $45.00<br>Subsequent visit - $40.00 |
| Remedial massage | 2 | $450 per person up to $900 per policy<br>(combined limit for remedial massage & other services) | Initial visit - $45.00<br>Subsequent visit - $45.00 |
| Hearing aids | 12 | $2200 limit overall $1100 per ear $800 sub-limit on repair. Limits apply over 3-year period from date of first supply. | Hearing aid - $1,100.00 |
| Blood glucose monitors* | 12 | $690 per person<br>(combined limit for blood glucose monitors & other services - **Sub-limits apply**) | Per monitor - 85% of charge |
| Audiology | 2 | $200 per person | Initial visit - $75.00<br>Subsequent visit - $70.00 |
| Ante-natal/Post-natal classes | 2 | $300 per person up to $600 per policy<br>(combined limit for ante-natal/post-natal classes, health management / healthy lifestyle & other services - **Sub-limits apply**) | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge |
| Chinese medicine | 2 | Combined limit - see Acupuncture | Initial visit - $45.00<br>Subsequent visit - $40.00 |
| Dietetics/dietary advice | 2 | $450 per person | Initial visit - $60.00<br>Subsequent visit - $42.00 |
| Exercise physiology | 2 | Combined limit - see Physiotherapy | Initial visit - $35.00<br>Subsequent visit - $35.00 |
| Eye therapy (orthoptics) | 2 | $450 per person | Initial visit - $42.00<br>Subsequent visit - $42.00 |
| Health management / Healthy lifestyle | 2 | Combined limit - see Ante-natal/Post-natal classes | Health management - 80% of charge |
| Home nursing | 2 | $600 per person<br>(combined limit for home nursing & other services) | Initial visit - $80.00<br>Subsequent visit - $80.00 |
| Occupational therapy | 2 | $450 per person | Initial visit - $59.00<br>Subsequent visit - $45.00 |
| Orthotics (podiatric orthoses) | 12 | $450 per person<br>(combined limit for orthotics (podiatric orthoses) & other services - **Sub-limits apply**) | Orthotics supply & fit - 85% of charge |
| Osteopathy | 2 | $400 per person | Initial visit - $49.00<br>Subsequent visit - $42.00 |
| Speech therapy | 2 | $450 per person | Initial visit - $77.00<br>Subsequent visit - $47.00 |

Other services: Anti snore device $500 sub-limit included in Major Dental overall limit. Hydrotherapy $25 per consult included in Physiotherapy limit. Group Physiotherapy $25 per consult up to $300 sub-limit. Ante/post-natal Physiotherapy $17 per consult up to $140 limit. Chiropractic x-ray (one per year) $63 included in Chiropractic limit. Group Psychology $42 per consult, Psychometric assessments $116 and Counselling $45 per initial consult, $41 per subsequent consult included within the $450 Psychology limit. Osteopathic x-ray (one per year) $63 included in Osteopathy limit. Myotherapy, Shiatsu, Alexander Technique $45 per consult included in Remedial Massage limit. Western Herbal Medicine, Naturopathy $45/$40 per consult included in Acupuncture limit. Outpatient Podiatric Surgery 85% and Biogait Analysis $37 (one per year) included in $450 Podiatry limit. Orthotic Repairs 85% up to $100 sub-limit. Group Speech Therapy $21 per consult and Paediatric Assessment (one per year) $100 up to $450 Speech Therapy limit. Group Occupational Therapy $28.50 per consult and Paediatric Assessment (one per year) $71 up to $450 Occupational Therapy limit. Health Management overall limit includes $120 sub-limit Health Screenings, $150 sub-limit on Health Management Programs, $160 sub-limit on Healthy Lifestyle Programs and $225 sub-limit on Ante/post-natal classes. *Blood Glucose Monitors $550 sub-limit included in Health Devices/Appliances overall $690 limit. All services in Health Devices/Appliances limit payable at 85% of cost including CPAP etc machines, $100 sub-limit on accessories/repair, $200 sub-limit on other appliances, $300 sub-limit on compression garments, and $120 sub-limit on Health Aids. $1,500 limit on Non-surgically implanted prostheses e.g. breast prostheses and wigs, payable at 85% of cost. Lactation nursing $50 daily included in $600 Home Nursing limit. Home Nursing benefits apply daily. Travel and Accommodation $55 per night and up to $110 travel up to $110 limit (conditions apply). Active Health Bonus $125/person $250/membership (conditions apply).

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

✗ Other treatments - check with your insurer

### Other features of this general treatment cover

Online and mobile access, claims via smart phone app. Most extras annual limits increase with years of membership.

### For further information about this policy see

https://tuh.com.au/package/gold-ultimate-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.