Private Health Information Statement - Combined policy

Bronze+ Young 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	*$397.52 #* (before any rebate, loading or discount)	Available in NSW & ACT

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.

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.

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

✓ Blood	✓ Gastrointestinal endoscopy	✓ Palliative care
✓ Bone, joint and muscle	✓ Gynaecology	✓ 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	✓ Skin
✓ Chemotherapy, radiotherapy and immunotherapy for cancer	✓ Joint reconstructions	✓ Sleep studies
✓ Dental surgery	✓ Kidney and bladder	✓ Tonsils, adenoids and grommets
✓ Diabetes management (excluding insulin pumps)	✓ Lung and chest	R Hospital psychiatric services
✓ Digestive system	✓ Male reproductive system	R Rehabilitation
✓ Ear, nose and throat	✓ Miscarriage and termination of pregnancy	
✓ Eye (not cataracts)	✓ Pain management	

This policy X **does not include** cover for

X Assisted reproductive services	X Heart and vascular system	X Pregnancy and birth
X Back, neck and spine	X Insulin pumps	X Weight loss surgery

✗ Cataracts	✗ Joint replacements	
✗ Dialysis for chronic kidney failure	✗ Pain management with device	

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 $250 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
- 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

Value-added services: home care after hospital, chronic disease management programs, hospital substitute programs (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/bronze-plus-young-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 *: *General dental overall limit includes general and preventative dental and major dental Endodontia services ($300 sub-limit). *Optical set benefits apply for frames/lenses/repairs, 100% up to annual limit for contacts. *Physiotherapy overall $450 limit includes $200/person $400/membership sub-limit Remedial Massage, Myotherapy, Shiatsu, Alexander Technique, Acupuncture, Chinese Medicine, Western Herbal Medicine and Naturopathy. *Health Management overall limit includes $85 sub-limit Health Screenings, $80 sub-limit Health Management Programs, and $120 sub-limit Healthy Lifestyle Programs.*

Treatment	*Waiting period (months)*	*Benefit limits (per 12 months unless otherwise stated)*	*Examples of maximum benefits*
General dental*	2	$600 per person (combined limit for general dental, endodontic & other services)	Periodic oral examination - $31.50 Scale & clean - $60.90 Fluoride treatment - $22.05 Surgical tooth extraction - $100.00
Endodontic	12		Filling of one root canal - $135.00
Optical*	6	$200 per person	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge

Physiotherapy*	2	$450 per person (combined limit for physiotherapy, chiropractic, psychology, acupuncture, remedial massage, chinese medicine, exercise physiology, osteopathy & other services - **Sub-limits apply**)	Initial visit - $42.00 Subsequent visit - $37.00
Chiropractic	2		Initial visit - $30.00 Subsequent visit - $27.00
Psychology	2		Initial visit - $75.00 Subsequent visit - $60.00
Acupuncture*	2		Initial visit - $32.00 Subsequent visit - $27.00
Remedial massage*	2		Initial visit - $35.00 Subsequent visit - $35.00
Chinese medicine	2		Initial visit - $32.00 Subsequent visit - $27.00
Exercise physiology	2		Initial visit - $23.00 Subsequent visit - $23.00
Health management / Healthy lifestyle*	2	$150 per person up to $300 per policy (combined limit for health management / healthy lifestyle & other services - **Sub-limits apply**)	Health management - 80% of charge
Osteopathy	2	Combined limit - see Physiotherapy	Initial visit - $33.00 Subsequent visit - $28.00
Also covers: Physiotherapy overall limit includes - Group Physiotherapy $17 per consult, Chiropractic x-ray (one per year) $45, Counselling $35/$28 per consult and Group Psychology $30 per consult, Osteopathic x-ray (one per year) $45. Myotherapy, Shiatsu, Alexander Technique $35 per consult. Western Herbal Medicine, Naturopathy $32/$27 per consult. Health Screenings 80% of cost up to $85 sub-limit. Active Health Bonus $20/person $40/membership (conditions apply). Remote travel and accommodation is provided as a fixed benefit of 15 cents per kilometre for trips exceeding 100 kilometres one way (or 200 kilometres return) calculated directly from the home address (conditions apply).			

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

✗ Blood glucose monitors	✗ Non PBS pharmaceuticals	✗ Other treatments - check with your insurer
✗ Hearing aids	✗ Orthodontic	
✗ Major dental	✗ Podiatry	

Other features of this general treatment cover

Online and mobile access, claims via smart phone app.

For further information about this policy see

https://tuh.com.au/package/bronze-plus-young-choice

Ambulance cover

In NSW & ACT 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

We pay an ambulance levy for ACT and NSW permanent residents as part of their hospital or combined hospital with extras cover. This covers emergency road ambulance transportation or attendance. No annual limit will apply to emergency road ambulance services. Conditions apply. Benefits may be payable for state-owned air ambulance services ($6,000 per person per annum limit applies). NEITHER THIS LEVY NOR ANY AMBULANCE SERVICE BENEFIT IS PAYABLE ON STAND-ALONE EXTRAS COVER.

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.