

## Private Health Information Statement - Combined policy

### Silver Plus Assure Hospital \$750 Excess - Family Extension and Top Extras - Family Extension

**RT Health - a division of  
The Hospitals  
Contribution Fund**  
http://www.rthealth.com.au  
help@rthealth.com.au  
1300 886 123

**Monthly Premium**  
**\$907.65 #**  
(before any rebate, loading or discount)

Covers two adults & dependants,  
including non-student dependants  
(3 or more people, only 2 of whom  
are adults)  
Available in Tasmania

# 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, students up to and including the age of 30 and non-students up to and including the age of 30, as well as persons with a disability who qualify as a child, student or non-student in these age ranges.

### Hospital cover

This policy exempts you from the Medicare Levy Surcharge.

This policy provides accident cover and benefits for travel or accommodation (outside of hospital) - check with your insurer for details.

- ✓ 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

✓ Back, neck and spine	✓ Eye (not cataracts)	✓ Miscarriage and termination of pregnancy
✓ Blood	✓ Gastrointestinal endoscopy	✓ Pain management
✓ Bone, joint and muscle	✓ Gynaecology	✓ Pain management with device
✓ Brain and nervous system	✓ Heart and vascular system	✓ Palliative care
✓ Breast surgery (medically necessary)	✓ Hernia and appendix	✓ Plastic and reconstructive surgery (medically necessary)
✓ Cataracts	✓ Implantation of hearing devices	✓ Podiatric surgery (provided by a registered podiatric surgeon - limited benefits)
✓ 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	R Hospital psychiatric services
✓ Ear, nose and throat	✓ Male reproductive system	

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

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 \$750 per admission. This is limited to a maximum of \$750 per person and \$1500 per policy 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**

\$100 excess for day admission. No excess for dependants under the age of 22.

For further information about this policy see

<https://rthealthfund.com.au/managing-your-cover/understanding-your-cover/#HospitalCoverGuides>

**General Treatment Cover**

This health insurer does not operate a preferred provider scheme.

This policy ✓ includes General treatment (Extras) cover for

Note, for items marked with an asterisk \*: 100% back on a range of no-gap services through our More for program, and no-gap network providers, subject to your cover, waiting periods and annual limits. Find out more: <https://www.rthealth.com.au/health-services/find-a-dental-clinic> and <https://www.rthealth.com.au/health-services/find-an-optical-provider>.

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 - \$35.00 Scale & clean - \$72.00 Fluoride treatment - \$44.00 Surgical tooth extraction - \$190.00
Major dental	12	\$1,500 per person (combined limit for major dental & endodontic)	Full crown veneered - \$782.00
Endodontic	12		Filling of one root canal - \$192.00
Orthodontic	12	\$1,000 per person \$3,000 lifetime limit	Braces for upper & lower teeth, including removal plus fitting of retainer - 100% of charge
Optical*	2	\$300 per person	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge
Non PBS pharmaceuticals	2	\$600 per person	Per eligible prescription - \$70.00

Physiotherapy	2	\$550 per person	Initial visit - \$60.00 Subsequent visit - \$54.00
Chiropractic	2	\$500 per person (combined limit for chiropractic, osteopathy & other services)	Initial visit - \$49.00 Subsequent visit - \$39.00
Podiatry	2	\$500 per person	Initial visit - \$45.00 Subsequent visit - \$40.00
Psychology	2	\$500 per person (combined limit for psychology & other services)	Initial visit - \$80.00 Subsequent visit - \$60.00
Acupuncture	2	\$750 per person (combined limit for acupuncture, remedial massage, chinese medicine, exercise physiology & other services)	Initial visit - \$40.00 Subsequent visit - \$35.00
Remedial massage	2		Initial visit - \$40.00 Subsequent visit - \$40.00
Hearing aids	24	\$1,200 per person 2 service(s) every 3 years <b>(Sub-limits apply)</b>	Hearing aid - \$600.00
Blood glucose monitors	12	\$600 per person (combined limit for blood glucose monitors & other services - <b>Sub-limits apply</b> )	Per monitor - 80% of charge
Audiology	2	\$160 per person	Initial visit - \$80.00 Subsequent visit - \$80.00
Ante-natal/Post-natal classes	2	\$300 per person	Initial visit - \$30.00 Subsequent visit - \$30.00
Chinese medicine	2	Combined limit - see Acupuncture	Initial visit - \$35.00 Subsequent visit - \$30.00
Dietetics/dietary advice	2	\$500 per person	Initial visit - \$55.00 Subsequent visit - \$55.00
Exercise physiology	2	Combined limit - see Acupuncture	Initial visit - \$40.00 Subsequent visit - \$35.00
Eye therapy (orthoptics)	2	\$500 per person	Initial visit - \$40.00 Subsequent visit - \$35.00
Health management / Healthy lifestyle	2	\$150 per person up to \$300 per policy	Health management - 100% of charge
Home nursing	2	\$700 per person	Initial visit - \$30.00 Subsequent visit - \$30.00
Occupational therapy	2	\$500 per person	Initial visit - \$60.00 Subsequent visit - \$53.00
Orthotics (podiatric orthoses)	12	\$250 per person	Orthotics supply & fit - 100% of charge
Osteopathy	2	Combined limit - see Chiropractic	Initial visit - \$53.00 Subsequent visit - \$40.00
Speech therapy	2	\$500 per person	Initial visit - \$70.00 Subsequent visit - \$60.00
Vaccinations	2	\$150 per person	Per service - \$50.00

RT Health members pay no gap on a range of popular dental and optical services through HCF Dental or Optical Centres and the More for provider network. Includes mental health services (psychology, approved counselling, mental health social worker and OCBT courses). Health aids include blood pressure monitors, CPAP machines & masks, tens machines, wheelchairs, wigs (conditions apply). Annual, membership, service and sub limits apply.

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

**X** Other treatments - check with your insurer

### Other features of this general treatment cover

Health management / Healthy lifestyle includes benefits towards gym membership and Tai Chi, Yoga & Pilates. Combined limit is \$150 per person, \$300 per membership per calendar year. For more details contact our member care team on 1300 886 123 or visit [rthealthfund.com.au](http://rthealthfund.com.au).

### For further information about this policy see

[PrivateHealth.gov.au](http://PrivateHealth.gov.au)

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## 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

Up to \$5,000 per person per year for emergency ambulance attendance or transportation in the case of accident or illness. Cover applies anywhere in Australia. Residents of Tasmania are covered by a reciprocal state government ambulance scheme in all states except QLD and SA, so our ambulance cover only applies where the state government scheme does not. You can also purchase additional ambulance cover through a state government ambulance service.

For further information about this policy see

<https://rthealthfund.com.au/managing-your-cover/understanding-your-cover/#HospitalCoverGuides>

### 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.