

Private Health Information Statement - Combined policy

Packaged Basic + 500 Level 2

St Lukes

<http://www.stlukes.com.au>
general@stlukes.com.au
 1300 651 988

Monthly Premium

\$436.00[#]

(before any rebate, loading or discount)

Covers two adults & dependants (3 or more people, only 2 of whom are adults)

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 or an insurer discount. Check with your insurer for details.

This policy covers children and other dependants up to and including the age of 22, students up to and including the age of 24, as well as persons with a disability who qualify as a child or other dependant or student in these age ranges.

Hospital cover

This policy exempts you from the Medicare Levy Surcharge.

This policy does not provide accident cover or benefits for travel and 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**

✓ Back, neck and spine	✓ Hernia and appendix	✓ Skin
✓ Blood	✓ Implantation of hearing devices	✓ Sleep studies
✓ Bone, joint and muscle	✓ Insulin pumps	✓ Tonsils, adenoids and grommets
✓ Brain and nervous system	✓ Joint reconstructions	R Assisted reproductive services
✓ Breast surgery (medically necessary)	✓ Kidney and bladder	R Cataracts
✓ Chemotherapy, radiotherapy and immunotherapy for cancer	✓ Lung and chest	R Dialysis for chronic kidney failure
✓ Dental surgery	✓ Male reproductive system	R Heart and vascular system
✓ Diabetes management (excluding insulin pumps)	✓ Miscarriage and termination of pregnancy	R Hospital psychiatric services
✓ Digestive system	✓ Pain management	R Joint replacements
✓ Ear, nose and throat	✓ Pain management with device	R Pregnancy and birth
✓ Eye (not cataracts)	✓ Palliative care	R Weight loss surgery
✓ Gastrointestinal endoscopy	✓ Plastic and reconstructive surgery (medically necessary)	
✓ Gynaecology	✓ Rehabilitation	

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

✘ Podiatric surgery (provided by a registered podiatric surgeon – limited benefits)

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 \$500 per person and \$1000 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
- 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.

Other features of this hospital cover

Ambulance Levy included for NSW and ACT residents. Ambulance services in Tasmania provided free by State Government to Tasmanian residents.

General Treatment Cover

This health insurer does not operate a preferred provider scheme.

This policy  includes General treatment (Extras) cover for

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental	2	\$500 per person	Periodic oral examination - \$33.00 Scale & clean - \$54.00 Fluoride treatment - \$17.00 Surgical tooth extraction - \$139.00
Optical	6	\$200 per person	Single vision lenses & frames - \$200.00 Multi-focal lenses & frames - \$200.00
Physiotherapy	2	\$500 per person (combined limit for physiotherapy, acupuncture & remedial massage - Sub-limits apply)	Initial visit - \$45.00 Subsequent visit - \$34.00
Acupuncture	2		Initial visit - \$25.00 Subsequent visit - \$25.00
Remedial massage	2		Initial visit - \$32.00 Subsequent visit - \$27.00

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

✘ Blood glucose monitors	✘ Major dental	✘ Psychology
✘ Chiropractic	✘ Non PBS pharmaceuticals	✘ Other treatments - check with your insurer

<input checked="" type="checkbox"/> Endodontic	<input checked="" type="checkbox"/> Orthodontic	
<input checked="" type="checkbox"/> Hearing aids	<input checked="" type="checkbox"/> Podiatry	

Ambulance cover

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

For further information about this policy see

<https://www.stlukes.com.au/forms-brochures?tag=Information+sheet>

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.