Private Health Information Statement - Combined policy

Gold Hospital and Good 50% Back Extras

AIA Health Insurance Pty Ltd

http://www.aia.com.au/health Health.MemberServices@aia.com.au 1800333004

Monthly Premium \$884.31

(before any rebate, loading or discount)

Covers 2 adults (and no-one else)

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

This is a corporate policy which is only available to employees/members of organisations with arrangements with this health insurer.

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

✓ 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: Every time you go to hospital you will have to pay:

- \$350 per day for a shared room for overnight admissions up to \$1,400 per hospital stay
- \$350 per day for a private room for overnight admissions up to \$1,400 per hospital stay
- \$350 for day surgery (no overnight stay)
- The maximum co-payment is \$1,400 per year

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 knowngap or root of 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

All policies include membership to AIA Vitality, the science-backed health and wellbeing program that rewards you for looking after your health. If you have held an AIA Health Insurance policy for a minimum of six months and have an AIA Vitality status of Silver or above, we will refund your excess in the event that you're admitted to hospital. Excess Refund is not available when claiming on the following clinical categories: Cataracts, Joint replacements, Dialysis for chronic kidney failure, Pregnancy and birth, Assisted reproductive services, Weight loss surgery, Insulin pumps, Pain management with Device & Sleep Studies.

General Treatment Cover

Members can receive up to 60% back on dental services, No Gap Dental on selected preventative dental services & lower treatment costs at smile.com.au dentists. Dental services at other dentists can receive up to 50% back.

This policy ✓ includes General treatment (Extras) cover for

Note, for items marked with an asterisk *: General and Preventative Dental are combined under one limit. Physiotherapy, Myotherapy and Hydrotherapy share an annual limit. Chiropractic and Osteopathy share an annual limit. This product also provides access to AIA Vitality where you can earn rewards for leading a healthy lifestyle. By reaching Silver Vitality Status or above you can get an additional 10% back on any non-dental benefits. Visit www.aiavitality.com.au for more information.

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	\$750 per person	Periodic oral examination - 50% of charge Scale & clean - 50% of charge Fluoride treatment - 50% of charge
Major dental	12	\$600 per person (combined limit for major dental & endodontic - Sub-	Surgical tooth extraction - 50% of charge Full crown veneered - n/a
Endodontic	12	limits apply)	Filling of one root canal - 50% of charge
Optical	6	\$200 per person up to \$400 per policy	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge

2	\$350 per person up to \$700 per policy (combined limit for physiotherapy, exercise physiology & other services)	Initial visit - 50% of charge Subsequent visit - 50% of charge
2	\$350 per person up to \$700 per policy (combined limit for chiropractic & osteopathy)	Initial visit - 50% of charge Subsequent visit - 50% of charge
2	\$200 per person	Initial visit - 50% of charge
2	\$150 per person	Initial visit - 50% of charge Subsequent visit - 50% of charge
2	\$150 per person up to \$300 per policy	Initial visit - 50% of charge Subsequent visit - 50% of charge
2	\$200 per person	Initial visit - 50% of charge Subsequent visit - 50% of charge
2	Combined limit - see Physiotherapy	Initial visit - 50% of charge
2	\$200 per person	Health management - 50% of charge
2	Combined limit - see Chiropractic	Initial visit - 50% of charge Subsequent visit - 50% of charge
	2 2 2 2 2 2 2	2 (combined limit for physiotherapy, exercise physiology & other services) 2 \$350 per person up to \$700 per policy (combined limit for chiropractic & osteopathy) 2 \$200 per person 2 \$150 per person 2 \$150 per person up to \$300 per policy 2 \$200 per person 2 \$200 per person 2 \$200 per person 2 \$200 per person

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

X Blood glucose monitors	★ Non PBS pharmaceuticals	X Podiatry
X Hearing aids	X Orthodontic	X Other treatments - check with your insurer

Ambulance cover

In NSW & ACT this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

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

Other features of this ambulance cover

Cover for call-out fees where you're not taken to hospital are limited to 2 x ambulance attendances per insured person, per calendar year.

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.

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