Private Health Information Statement - Hospital policy

Frank Basic Hospital Plus (Basic+)

Frank Health Insurance	*Monthly Premium*	Covers only one person
https://www.frankhealthinsurance.com.au	*$113.10 #*	Available in NSW & ACT
frank@frankhealthinsurance.com.au	(before any rebate, loading or discount)	Closed to new members
1300 209 428		
Underwritten by GMHBA Limited		

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.

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

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

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

X Dialysis for chronic kidney failure	X Insulin pumps
X Gynaecology	X Weight loss surgery

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 of $750 per admission. This is limited to a maximum of $750 per person and $750 per policy per year.

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

Covers you in a private hospital for the hospital categories list as covered above. For services other than those listed as exclusions, you are covered as a private patient in a public hospital. Ph: 1300 437 265

For further information about this policy see

http://frankhealthinsurance.com.au

Ambulance cover

In NSW & ACT this policy provides:

Emergency: Unlimited with no waiting period.

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

Other features of this ambulance cover

If you are a resident of NSW or ACT take out any hospital cover, you are automatically covered for emergency transportation within NSW. Ambulance NSW is a Levy Based Scheme which is why it operates under your hospital cover. If an ambulance is called, you will receive a bill. If you have a hospital product with us, you can send this bill on to us, and we'll let the NSW/ACT Ambulance service know you're covered.

For further information about this policy see

http://frankhealthinsurance.com.au

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.