Private Health Information Statement - Hospital policy

AAMI Health Insurance Basic Hospital Plus $500 Excess

AAMI Health Insurance	*Monthly Premium*	Covers only one person
https://www.aami.com.au/health 13 22 44 Underwritten by nib Health Funds Ltd.	*$122.81 #* (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.

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

✓ Dental surgery	✓ Joint reconstructions	R Palliative care
✓ Gastrointestinal endoscopy	✓ Miscarriage and termination of pregnancy	R Rehabilitation
✓ Gynaecology	✓ Tonsils, adenoids and grommets	
✓ Hernia and appendix	R Hospital psychiatric services	

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

X Assisted reproductive services	X Digestive system	X Pain management
X Back, neck and spine	X Ear, nose and throat	X Pain management with device
X Blood	X Eye (not cataracts)	X Plastic and reconstructive surgery (medically necessary)
X Bone, joint and muscle	X Heart and vascular system	X Podiatric surgery (provided by a registered podiatric surgeon – limited benefits)
X Brain and nervous system	X Implantation of hearing devices	X Pregnancy and birth
X Breast surgery (medically necessary)	X Insulin pumps	X Skin
X Cataracts	X Joint replacements	X Sleep studies
X Chemotherapy, radiotherapy and immunotherapy for cancer	X Kidney and bladder	X Weight loss surgery
X Diabetes management (excluding insulin pumps)	X Lung and chest	
X Dialysis for chronic kidney failure	X 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: You will have to pay an excess of $500 per admission. This is limited to a maximum of $500 per person 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
- 2 months for all other treatments

Gap Cover

This provider does not offer any 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

We do not have a preferred-provider-network-arrangement, but operate a MediGap scheme aiming to eliminate the 'gap' payments for specialist fees in hospital. When a specialist chooses to participate in MediGap, they agree not to charge an out-of-pocket expense for your procedure. We do this by building a network of specialists who may agree to receive a higher benefit from us than they would ordinarily receive. In exchange they do not charge you an out-of-pocket expense. Ask your specialist if they'll MediGap for you!

For further information about this policy see

https://my.nib.com.au/product-collateral/124

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

All our health covers include unlimited emergency ambulance (1 day waiting period on all emergency ambulance). Emergency ambulance is when you need immediate transport by a State or Territory ambulance to get to a hospital or other facility for urgent medical treatment. No annual limits for emergency ambulance apply.

For further information about this policy see

https://my.nib.com.au/product-collateral/124

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.