

Private Health Information Statement - Combined policy

Gold Signature Hospital 750 and Best 70% Back Extras

AIA Health Insurance Pty Ltd

<http://www.aia.com.au/health>

Health.MemberServices@aia.com.au

1800333004

Monthly Premium

\$1,424.00 #

(before any rebate, loading or discount)

Covers 2 adults (and no-one else)

Available in Queensland

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.

Only available to existing AIA Health Retail members

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.

✗ 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: You will have to pay an excess on admission. This is limited to a maximum of \$750 per person and \$1500 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

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 \$500 of your \$750 Excess (Excess Refund) if 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, insulin pumps, pain management (with device) and sleep studies.

General Treatment Cover

Members can receive up to 80% 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 70% back. See <https://www.aia.com.au/en/products/health-insurance/find-a-provider>.

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, Hydrotherapy and Ante-natal/Post-natal Classes share an annual limit. Chiropractic and Osteopathy share an annual limit. Medically Prescribed Appliances, Orthotics and Blood Glucose Monitors share a limit. Non PBS pharmaceuticals pays back up to \$40 per script after the current PBS amount is deducted; vaccinations fall under this Pharmacy limit. This policy 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. www.aivitality.com.au*

| Treatment | Waiting period (months) | Benefit limits (per 12 months unless otherwise stated) | Examples of maximum benefits |
|--------------------------|-------------------------|---|--|
| General dental* | 2 | \$1,000 per person | Periodic oral examination - 70% of charge Scale & clean - 70% of charge Fluoride treatment - 70% of charge |
| Major dental | 12 | \$1,000 per person (combined limit for major dental & endodontic - Sub-limits apply) | Surgical tooth extraction - 70% of charge Full crown veneered - 70% of charge |
| Endodontic | 12 | | Filling of one root canal - 70% of charge |
| Orthodontic | 12 | \$800 per person \$3,200 lifetime limit | Braces for upper & lower teeth, including removal plus fitting of retainer - 70% of charge |
| Optical | 6 | \$250 per person up to \$500 per policy | Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge |
| Non PBS pharmaceuticals* | 2 | \$300 per person (combined limit for non pbs pharmaceuticals & vaccinations) | Per eligible prescription - \$40.00 |

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| Physiotherapy* | 2 | \$600 per person up to \$1,200 per policy (combined limit for physiotherapy, ante-natal/post-natal classes, exercise physiology & other services) | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Chiropractic* | 2 | \$400 per person up to \$800 per policy (combined limit for chiropractic & osteopathy) | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Podiatry | 2 | \$250 per person | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Psychology | 2 | \$300 per person | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Acupuncture | 2 | \$200 per person | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Remedial massage | 2 | \$200 per person up to \$400 per policy | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Hearing aids | 12 | \$400 per person 1 service(s) every 3 years (combined limit for hearing aids & other services) | Hearing aid - 70% of charge |
| Blood glucose monitors* | 12 | \$400 per person 1 service(s) every 3 years (combined limit for blood glucose monitors & orthotics (podiatric orthoses)) | Per monitor - 70% of charge |
| Audiology | 2 | \$200 per person | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Ante-natal/Post-natal classes* | 2 | Combined limit - see Physiotherapy | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Dietetics/dietary advice | 2 | \$350 per person | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Exercise physiology | 2 | Combined limit - see Physiotherapy | Initial visit - 70% of charge |
| Eye therapy (orthoptics) | 2 | \$200 per person | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Health management / Healthy lifestyle | 2 | \$200 per person | Health management - 70% of charge |
| Occupational therapy | 2 | \$200 per person | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Orthotics (podiatric orthoses) | 2 | Combined limit - see Blood glucose monitors | Orthotics supply & fit - 70% of charge |
| Osteopathy* | 2 | Combined limit - see Chiropractic | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Speech therapy | 2 | \$200 per person | Initial visit - 70% of charge Subsequent visit - 70% of charge |
| Vaccinations* | 2 | Combined limit - see Non PBS pharmaceuticals | Per service - \$40.00 |
| Swimming lessons are covered under this policy - Benefit Limit \$200 per person, per year. Smoking cessation services are covered under this policy - Benefit Limit \$150 per person, per year. Psychology benefit includes counselling services. | | | |

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

X Other treatments - check with your insurer

Ambulance cover

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

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.