

Combined Cover

No Maternity Hospital with Mid Extras Combo



Phone 1300 13 40 60

Visit hif.com.au

Looking for intermediate Hospital and Extras cover with no maternity? Look no further. Our new combined cover option provides great value private hospital insurance for singles and couples, plus a host of handy Extras services including dental, optical, ambulance, chiro, physio, healthy lifestyle services and more.

What hospital services are covered?

The Hospital cover component of this policy gives you access to benefits for a range of services that are eligible for a Medicare benefit, including:

- ✓ Full cover for a shared room in an HIF-contracted private hospital. If you'd like a private room, you simply need to pay the difference between the cost of a shared and a private room.
- ✓ Joint reconstruction and investigation
- ✓ Joint replacement
- ✓ Cardiac (heart) conditions, procedures or monitoring
- ✓ Cancer related treatment and services
- ✓ Colonoscopy, endoscopy and gastroscopy
- ✓ Back surgery
- ✓ Brain surgery
- ✓ Renal dialysis
- ✓ Non-cosmetic eye surgery
- ✓ Surgical removal of appendix
- ✓ Removal of tonsils and adenoids
- ✓ Hernia repair
- ✓ Intensive care
- ✓ Theatre care
- ✓ Palliative care
- ✓ AccessGap Cover
- ✓ Benefits for surgically implanted prostheses and other items on the Federal Government's Prostheses Schedule
- ✓ Inpatient pharmacy drugs (*charges vary between private hospitals depending on the contracts in place – please check with us or the hospital.*)
- ✓ All other inpatient services that are covered by Medicare and not listed as restricted or not covered in this document (*see over the page*)



Medical Gaps and AccessGap Cover

The 'medical gap' is the difference between the doctor's fee for services provided in hospital and the combined Medicare benefit and health insurance benefit.

As an admitted patient (or inpatient), Medicare will pay a benefit of 75% of the Medicare Benefit Schedule (MBS) fee and we will pay the remaining 25% - that's 100% of the MBS fee covered. For example if the MBS for a procedure is \$100 and your doctor charges \$120, Medicare pays \$75, we will pay \$25 and you would need to pay the extra \$20.

You may also be entitled to a further benefit under HIF's AccessGap Cover, our medical gap cover arrangement which aims to minimise or eliminate out of pocket expenses for inpatient services. Visit hif.com.au/accessgap to learn more.

Standard excess

Excesses apply to overnight stays in hospital only, once per-person, per calendar year, up to the maximum of \$500 for a single membership and \$1,000 for couples.

Call us on 1300 13 40 60 whenever you're planning hospital treatment. We are always happy to help and can provide you with a benefit estimate.

No Maternity Hospital Cover

What's not covered

- Pregnancy and birth related services
- Assisted reproductive technology (e.g. IVF)
- Gastric banding and obesity surgery
- Prostheses items used in relation to excluded services

Other situations when you will not be covered by HIF include:

- Occasions when you're not admitted to hospital as an inpatient (instead receiving outpatient treatment for services like GP visits, specialist consultations or emergency room treatment). In those instances, you will only be able to claim a benefit from Medicare.
- When you receive treatment for a service that you're still serving waiting periods for.
- When you receive treatment during a period where your HIF policy is currently suspended, classified as unfinancial (e.g. not paid up-to-date), or has been cancelled.
- Any hospital treatment, service, device or circumstances where Medicare or the Therapeutic Goods Administration (TGA) doesn't pay a benefit. This includes in-hospital services such as experimental treatment and/or procedures, prostheses and technologies.
- Any charges raised by a non-agreement or public hospital which are not covered, or are above the benefit that HIF pays.
- Any charges raised for treatment administered by a provider that's not recognised by HIF.
- Any cosmetic service for which Medicare will not pay a benefit (e.g. cosmetic surgery which is not clinically necessary).
- Any personal expenses not covered by your HIF policy such as newspapers, phone calls, internet access, pay TV or meals ordered for visitors.
- Any inpatient pharmacy benefits for non-intrinsic or discharge drugs. Benefits may be restricted or may not apply to experimental or high-cost drugs or drugs that aren't approved by the Therapeutic Goods Administration (TGA).
- If you're admitted to hospital for more than 35 days and you've been classified as a 'nursing home type' patient. In these situations, patients may receive minimum benefits but will need to personally contribute towards the remaining costs associated with their stay.
- For Respite Care.
- Where compensation, damages or benefits for medical treatment can or have been claimed from a third party; such as workers compensation, public liability sources, your employer or any other insurance policy.
- For any hospital service or medical treatment provided outside Australia.

Make sure you read our Product Disclosure Statement

It's important that you read our PDS. It's full of information about Hospital cover, from benefits and AccessGap cover through to waiting periods, pre-existing conditions and contracted (or 'agreement') private hospitals.

Download a copy here: hif.com.au/domesticpds

Restricted services

- *Psychiatric care and treatment*

Benefits for restricted services include basic public hospital rate (only) for accommodation. However, full AccessGap coverage applies for inpatient medical procedures and benefits will be paid towards prostheses in accordance with the Commonwealth Prostheses List. Items on the list (excluding human tissue) may be subject to a patient co-payment.

Waiting periods

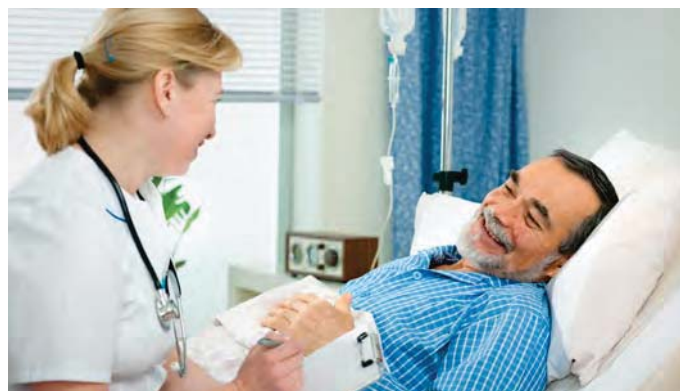
- *General hospitalisation: 2 months*
- *Psychiatric care, rehabilitation and palliative care: 2 months*
- *Pre-existing ailments or conditions: 12 months*

What's a pre-existing condition?

A pre-existing condition is defined as, 'Any ailment, illness, or condition where, in the opinion of a medical adviser appointed by the health insurer, the signs or symptoms of that illness, ailment or condition existed at any time in the period of six months ending on the day on which the person became insured under the policy.'

A pre-existing condition can be identified by the presence of signs or symptoms of the illness, ailment or condition (i.e. it's not necessary for the member or their doctor to know what their condition is, or for it to be diagnosed). In assessing whether a condition is a pre-existing condition or not, an HIF-appointed medical practitioner will take into account information provided by the member's treating doctor.

Read more about waiting periods and the pre-existing condition rule in our Product Disclosure Statement.



Got a question? Visit our handy online knowledge base for 24/7 access to a wealth of information. Visit hif.com.au/help to get started.



Here's your at-a-glance guide to the Extras services covered by this policy:

Ambulance	Chiro, Physio & Podiatry (combined limit)	Complementary Therapies	Dental
<p>Emergency callouts: 100% covered</p> <p>Non-emergency callouts : A \$50 co-payment applies</p> <p>Limit per person: No limit</p> <p>Waiting period: 2 months</p> <p>Not covered:</p> <ul style="list-style-type: none"> Inter-hospital transportation except for inter-hospital transfers relating to an emergency or new illness where approved on a case by case basis by HIF. Transportation from a hospital to your home, nursing home or other hospital Transportation for ongoing medical treatment Off road or air ambulance. 	<p>Benefit: 60% of the charge</p> <p>Limit per person: \$500/year</p> <p>Waiting period: 2 months</p> <p>Please note: The following services have a combined annual limit of \$1,000 per person, and you can claim 60% back until your annual limit has been reached:</p> <ul style="list-style-type: none"> Dental Chiro, physio & podiatry Complementary therapies Healthy Lifestyle services <p>If you would like a benefit estimate prior to having any treatment, please get in touch.</p> <p>Please note: Orthotics are not covered on this policy.</p>	<p>This policy includes acupuncture, homeopathy, myotherapy, naturopathy, remedial massage, and traditional Chinese medicine.</p> <p>Benefit: 60% of the charge</p> <p>Limit per person: \$150/year</p> <p>Waiting period: 2 months</p> <p>Please note: The following services have a combined annual limit of \$1,000 per person, and you can claim 60% back until your annual limit has been reached:</p> <ul style="list-style-type: none"> Dental Chiro, physio & podiatry Complementary therapies Healthy Lifestyle services <p>Treatment must be provided by a practitioner who is registered with HIF in the speciality for which the charge is raised. Benefits are not payable on medicines.</p>	<p>This policy includes general dental, periodontic, endodontic, inlay/onlay, and dentures, crowns and bridges.</p> <p>Benefit: 60% of the charge</p> <p>Limit per person: \$600/year</p> <p>Please note: The following services have a combined annual limit of \$1,000 per person, and you can claim 60% back until your annual limit has been reached:</p> <ul style="list-style-type: none"> Dental Chiro, physio & podiatry Complementary therapies Healthy Lifestyle services <p>Waiting periods:</p> <p>2 months: Most general dental, Periodontic & Endodontic.</p> <p>12 months - Inlay/onlay, dentures crowns and bridges, and General Dental item numbers 322-331 and 595-596.</p> <p>If you would like a benefit estimate prior to having any treatment, please get in touch.</p>

Did you know... each state and territory of Australia has different ambulance arrangements? That means the charges and the services covered may vary. It's important to understand that in the unfortunate event you require emergency ambulance transport, Medicare won't cover the cost. However, some state governments subsidise ambulance services, and some pensioners and low income earners may also be entitled to free ambulance assistance. Please see our full PDS for more info on these state schemes or contact us for further details.

Healthy Lifestyle	Optical	Pharmacy	How to make a claim
<p>Services include health assessments (including gym memberships), exercise physiology, pilates, yoga, weight management programs, quit smoking plans and skin cancer screenings.</p> <p>Limit per person: \$150/year</p> <p>Waiting period: 2 months</p> <p>Please note: The following services have a combined annual limit of \$1,000 per person, and you can claim 60% back until your annual limit has been reached:</p> <ul style="list-style-type: none"> Dental Chiro, physio & podiatry Complementary therapies Healthy Lifestyle services <p>Benefits are payable for HIF approved programs delivered by registered providers only. Please contact us prior to commencing the program to check your eligibility.</p>	<p>Did you know... HIF members get bonus discounts of up to 25% from a range of optical stores. Visit hif.com.au/optical for full details.</p> <p>Benefit: 100% up to annual limit</p> <p>Limit per person: \$150/year</p> <p>Waiting period: 2 months</p> <p>Benefits are paid on items carried out by a registered optometrist or optical provider, approved by HIF. Benefits are not paid on non-prescription safety glasses, tinting, sunglasses, cosmetic glasses or cosmetic contact lenses, or frames not purchased via a registered Australian optical provider.</p>	<p>PBS = Pharmaceutical Benefit Scheme</p> <p>Benefit: Member pays PBS contribution. Benefit is 100% of the balance up to \$60 per script item.</p> <p>Limit per person: \$200/year</p> <p>Waiting period: 2 months</p> <p>Benefits are not payable on contraceptives or NHS (PBS) prescriptions or over the counter items purchased with or without a prescription.</p>	<p>With HIF, making an Extras claim is easy! In fact, the toughest bit is choosing from our host of convenient ways to make your claim.</p> <p>You can claim online, through our mobile app, by email, fax or post.</p> <p>In any case, it's quick and easy. You'll have your rebate in no time, and we offer some of the most competitive benefits in Australia.</p> <p>To find out more and download a claim form, visit hif.com.au/claim</p>