



Defence Health Limited
Value Hospital Silver Plus 250

Restricted Insurer

\$383.94 / month

(Before Rebate, Discount & Loading)

Available in TAS

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 policy covers: One adult & dependants (2 or more people, only one of whom is an adult).

Children (0 - 17), non-classified* dependant (18 - 20) and students (21 - 30), as well as persons with a disability who qualify as a child, non-classified* dependant and student in these age ranges.

*Non-classified dependant: We continue to keep kids covered, no questions asked, until they turn 21.

Restricted insurer: Membership of this insurer is restricted to current or former members of the ADF and the Defence community and their families.

- This policy exempts you from the Medicare Levy Surcharge.
- This policy provides accident cover - check with insurer for details.
- This policy does not provide benefits for travel or accommodation outside of hospital.

Policy ID: AHB/J15/TBOP1D

Source: [Private Health Information Statement \(PHIS\)](#)

Hospital Cover

 Covered Restricted Cover Not Covered**This policy includes cover for**

 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)
 Chemotherapy, radiotherapy and immunotherapy for cancer	 Implantation of hearing devices	 Pregnancy and birth
 Dental surgery	 Insulin pumps	 Rehabilitation
 Diabetes management (excluding insulin pumps)	 Joint reconstructions	 Skin
 Digestive system	 Kidney and bladder	 Sleep studies
 Ear, nose and throat	 Lung and chest	 Tonsils, adenoids and grommets
 Eye (not cataracts)	 Male reproductive system	
	 Miscarriage and termination of pregnancy	

This policy does not include cover for

 Assisted reproductive services	 Dialysis for chronic kidney failure	 Weight loss surgery
 Cataracts	 Joint replacements	

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 \$250 per person and \$250 per policy per year.

Excess payments do not apply to hospital admissions for dependants.

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 (<https://www.health.gov.au/resources/apps-and-tools/medical-costs-finder>) lets you find out more about the cost of specialist medical services.

Other features of this hospital cover

Includes home nursing, midwifery and a range of health programs. Access Gap available to reduce or eliminate out of pocket medical costs where the treating doctor, specialist, surgeon, anaesthetist, pathologist or radiologist agrees to use it. Go to defencehealth.com.au or call 1800 335 425 for details.

For further information about this policy see: <https://www.defencehealth.com.au/>

Ambulance cover

Ambulance cover is provided by the State government for residents of Tasmania. This may include cover whilst interstate, except for South Australia and Queensland where no cover applies. In other states please check with Ambulance Tasmania - https://www.health.tas.gov.au/ambulance/fees_and_accounts.

Other features of this ambulance cover: Comprehensive cover for ambulance services by state-appointed ambulance providers across Australia. This includes emergency services, non-emergency dispatch, mobile intensive care and air and sea ambulance services. Non-emergency services are those that are classed as clinically necessary; for example, you need to be monitored by a paramedic during transport. Patient transfer services and transport services by Patient Transport vehicles are not ambulance services and are not claimable.

For further information about this policy see: <https://www.defencehealth.com.au/>

Insurer Details



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Call now 1800 335 425
Sponsor link

Defence Health Limited
⊕ <http://www.defencehealth.com.au>
✉ info@defencehealth.com.au
📞 1800 335 425

Disclaimer: This document is not a Private Health Information Statement (PHIS), and it is not intended to replace that document. The details contained in the **healthslips.com.au Policy Information** was provided by the insurer to the Australian Government. It is intended as general information. It may not take into account your circumstances. For further information contact the insurer. Information used is Licensed from the Commonwealth of Australia under a Creative Commons 3.0 licence.

Private Health Information Statement is available from the Private Health Insurance Ombudsman website at
<https://privatehealth.gov.au/dynamic/Premium/PHIS/AHB/J15/TBOP1D>