

**Defence Health Limited**
ADF Public Hospital Basic Plus

Restricted Insurer

Corporate Policy

\$118.60 / month

(Before Rebate, Discount & Loading)

Available in All States

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: Only one person.

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

Corporate policy: Members of the Permanent Navy, Army and Air Force

- 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/J7/AAIK10**Source:** Private Health Information Statement (PHIS)

Hospital Cover

✓ Covered

R Restricted Cover

✗ Not Covered

This policy includes cover for

R Assisted reproductive services	R Ear, nose and throat	R Miscarriage and termination of pregnancy
R Back, neck and spine	R Eye (not cataracts)	R Pain management
R Blood	R Gastrointestinal endoscopy	R Pain management with device
R Bone, joint and muscle	R Gynaecology	R Palliative care
R Brain and nervous system	R Heart and vascular system	R Plastic and reconstructive surgery (medically necessary)
R Breast surgery (medically necessary)	R Hernia and appendix	R Podiatric surgery (provided by a registered podiatric surgeon)
R Cataracts	R Hospital psychiatric services	R Pregnancy and birth
R Chemotherapy, radiotherapy and immunotherapy for cancer	R Implantation of hearing devices	R Rehabilitation
R Dental surgery	R Insulin pumps	R Skin
R Diabetes management (excluding insulin pumps)	R Joint reconstructions	R Sleep studies
R Dialysis for chronic kidney failure	R Joint replacements	R Tonsils, adenoids and grommets
R Digestive system	R Kidney and bladder	R Weight loss surgery
	R Lung and chest	
	R 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: No excess

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 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. Full details are provided on product guides available at defencehealth.com.au or 1800 335 425.

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

Ambulance cover

In all states this policy provides:

Emergency: Unlimited with a waiting period of 2 months.

Non-emergency: Unlimited transport with a waiting period of 2 months.

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

State schemes provide ambulance services for residents of Tasmania (https://www.health.tas.gov.au/ambulance/fees_and_accounts) and Queensland (<https://www.ambulance.qld.gov.au>).

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/J7/AAIK10>