

**Australian Unity Health Limited**  
**Care 'n Repair (Basic Plus)****\$252.20 / month**

(Before Rebate, Discount &amp; Loading)

Available in SA

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:** Two adults (and no-one else).

- 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:** AUF/J25/SCVA20**Source:** Private Health Information Statement (PHIS)

## Hospital Cover

✓ Covered

R Restricted Cover

✗ Not Covered

**This policy includes cover for**

|                                                           |                                   |                                                                  |
|-----------------------------------------------------------|-----------------------------------|------------------------------------------------------------------|
| R Back, neck and spine                                    | R Eye (not cataracts)             | R Miscarriage and termination of pregnancy                       |
| R Blood                                                   | R Gastrointestinal endoscopy      | R Pain management                                                |
| R Bone, joint and muscle                                  | R Gynaecology                     | R Pain management with device                                    |
| R Brain and nervous system                                | R Heart and vascular system       | R Palliative care                                                |
| R Breast surgery (medically necessary)                    | R Hernia and appendix             | R Plastic and reconstructive surgery (medically necessary)       |
| R Chemotherapy, radiotherapy and immunotherapy for cancer | R Hospital psychiatric services   | R Podiatric surgery (provided by a registered podiatric surgeon) |
| R Dental surgery                                          | R Implantation of hearing devices | R Rehabilitation                                                 |
| R Diabetes management (excluding insulin pumps)           | R Insulin pumps                   | R Skin                                                           |
| R Digestive system                                        | R Joint reconstructions           | R Sleep studies                                                  |
| R Ear, nose and throat                                    | R Kidney and bladder              | R Tonsils, adenoids and grommets                                 |
|                                                           | R Lung and chest                  |                                                                  |
|                                                           | R Male reproductive system        |                                                                  |

**This policy does not include cover for**

|                                  |                                       |                       |
|----------------------------------|---------------------------------------|-----------------------|
| ✗ Assisted reproductive services | ✗ Dialysis for chronic kidney failure | ✗ Pregnancy and birth |
| ✗ Cataracts                      | ✗ Joint replacements                  | ✗ Weight loss surgery |

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](https://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 \$750 per admission. This is limited to a maximum of \$750 per person and \$1500 per policy per year.

Excess payments do not apply to hospital admissions for accidents.

**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

##### Other features of this hospital cover

Covered in agreement private hospitals for treatments resulting from an Accident that occurs after joining this cover, with no excess. For all other hospital treatments (unless excluded) cover is Restricted in an agreement private hospital or you're covered in a shared room of a public hospital. Additional Benefits of the cover include: Hospital Substitution Programs, Health Support Programs and Preventative Health Services. Waiting periods may apply. Please refer to the product Fact Sheet or contact Australian Unity for further details.

This health insurer does not operate a preferred provider scheme.

Policy ID: AUF/J25/SCVA20 Source: [Private Health Information Statement \(PHIS\)](#)

## Extras Cover

#### This policy **includes** General treatment (Extras) cover for

Note, for treatments marked with \*: 1) No waiting period for preventative dental and selected diagnostic services. A 12-month waiting period applies for surgical tooth extractions and treatments of gum disease. 2) Remedial Massage sub-limit is \$85 per person.

| Treatment & waiting period (months) |    | Benefit limits per 12 months unless otherwise stated                                                                         | Examples of maximum benefits                                                                           |
|-------------------------------------|----|------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| ✓ Acupuncture                       | 2  | <b>\$170 per person</b><br>combined limit for acupuncture, dietetics/dietary advice, occupational therapy & remedial massage | <ul style="list-style-type: none"><li>• Initial visit: \$17</li><li>• Subsequent visit: \$17</li></ul> |
| ✓ Dietetics/dietary advice          | 2  | <b>\$170 per person</b><br>combined limit for acupuncture, dietetics/dietary advice, occupational therapy & remedial massage | <ul style="list-style-type: none"><li>• Initial visit: \$17</li><li>• Subsequent visit: \$17</li></ul> |
| ✓ Endodontic                        | 12 | <b>\$500 per person</b><br>combined limit for endodontic, general dental & other services                                    | <ul style="list-style-type: none"><li>• Filling of one root canal: \$75</li></ul>                      |
| ✓ Exercise physiology               | 2  | <b>\$300 per person</b><br>combined limit for exercise physiology, physiotherapy & other services                            | <ul style="list-style-type: none"><li>• Initial visit: \$25</li><li>• Subsequent visit: \$25</li></ul> |

|                               |   |                                                                                                                                                  |                                                                                                                                                                                                       |
|-------------------------------|---|--------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ✓ <b>General dental*</b>      | 2 | <b>\$500 per person</b><br>combined limit for endodontic, general dental & other services                                                        | <ul style="list-style-type: none"> <li>• Fluoride treatment: \$17</li> <li>• Scale &amp; clean: \$34</li> <li>• Surgical tooth extraction: \$80</li> <li>• Periodic oral examination: \$24</li> </ul> |
| ✓ <b>Occupational therapy</b> | 2 | <b>\$170 per person</b><br>combined limit for acupuncture, dietetics/dietary advice, occupational therapy & remedial massage                     | <ul style="list-style-type: none"> <li>• Initial visit: \$17</li> <li>• Subsequent visit: \$17</li> </ul>                                                                                             |
| ✓ <b>Physiotherapy</b>        | 2 | <b>\$300 per person</b><br>combined limit for exercise physiology, physiotherapy & other services                                                | <ul style="list-style-type: none"> <li>• Initial visit: \$25</li> <li>• Subsequent visit: \$25</li> </ul>                                                                                             |
| ✓ <b>Remedial massage*</b>    | 2 | <b>\$170 per person</b><br>combined limit for acupuncture, dietetics/dietary advice, occupational therapy & remedial massage<br>sub-limits apply | <ul style="list-style-type: none"> <li>• Initial visit: \$17</li> <li>• Subsequent visit: \$17</li> </ul>                                                                                             |

Annual benefit limits apply per calendar year. Hire or purchase of braces, splints, wheelchairs, crutches or compression garments - up to 100% of the cost per item, combined max \$150 per person - 2 month waiting period.

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

- |                                 |                                         |                                  |
|---------------------------------|-----------------------------------------|----------------------------------|
| ✗ Ante-natal/Post-natal classes | ✗ Health management / Healthy lifestyle | ✗ Orthodontic                    |
| ✗ Audiology                     | ✗ Hearing aids                          | ✗ Orthotics (podiatric orthoses) |
| ✗ Blood glucose monitors        | ✗ Home nursing                          | ✗ Osteopathy                     |
| ✗ Chinese medicine              | ✗ Major dental                          | ✗ Podiatry                       |
| ✗ Chiropractic                  | ✗ Non PBS pharmaceuticals               | ✗ Psychology                     |
| ✗ Eye therapy (orthoptics)      | ✗ Optical                               | ✗ Speech therapy                 |
|                                 |                                         | ✗ Vaccinations                   |

#### Ambulance cover

In SA this policy provides:

Emergency: Unlimited with no waiting period.

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

**Other features of this ambulance cover:** Despite the above, call-out fees where you're not taken to hospital are limited to 2 ambulance attendances per-person per-calendar year. Please note: This cover doesn't include non-emergency ambulance transportation. Emergency ambulance transportation to hospital is only covered if transport is coded and invoiced as emergency transport by a state/territory ambulance service/authority. Some authorities provide certain ambulance services at no cost to eligible residents. Refer to your local ambulance provider for more information. Australian Unity won't pay a Benefit if you're eligible to claim from, or are covered by, another source. Australian Unity doesn't pay a benefit towards ambulance subscription services.

#### Insurer Details

**Australian Unity Health Limited**

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**\$252.20 / month**

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Call now  13 29 39 Sponsor link**Australian Unity Health Limited** <http://www.australianunity.com.au> [healthcover@australianunity.com.au](mailto:healthcover@australianunity.com.au) 13 29 39

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