



Australian Unity Health Limited
Everyday Hospital (Bronze Plus)

\$341.90 / 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 - 22) and students (23 - 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: A period during which we cover single dependants regardless of student status.

- 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/J43/TEGY1D

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

Hospital Cover

✓ Covered

R Restricted Cover

✗ Not Covered

This policy includes cover for

✓ Blood	✓ Ear, nose and throat	✓ Miscarriage and termination of pregnancy
✓ Bone, joint and muscle	✓ Eye (not cataracts)	✓ Pain management
✓ Brain and nervous system	✓ Gastrointestinal endoscopy	✓ Pain management with device
✓ Breast surgery (medically necessary)	✓ Gynaecology	✗ Palliative care
✓ Chemotherapy, radiotherapy and immunotherapy for cancer	✓ Hernia and appendix	✓ Plastic and reconstructive surgery (medically necessary)
✓ Dental surgery	✓ Hospital psychiatric services	✗ Rehabilitation
✓ Diabetes management (excluding insulin pumps)	✓ Joint reconstructions	✓ Skin
✓ Digestive system	✓ Kidney and bladder	✓ Sleep studies
	✓ Lung and chest	✓ Tonsils, adenoids and grommets
	✓ Male reproductive system	

This policy does not include cover for

✗ Assisted reproductive services	✗ Heart and vascular system	✗ Podiatric surgery (provided by a registered podiatric surgeon)
✗ Back, neck and spine	✗ Implantation of hearing devices	✗ Pregnancy and birth
✗ Cataracts	✗ Insulin pumps	✗ Weight loss surgery
✗ Dialysis for chronic kidney failure	✗ 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](https://privatehealth.gov.au/dynamic/agreementhospitals) 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 \$500 per person and \$1000 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
- 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

Excess applies once per person admitted into hospital per calendar year and is waived if the admission is for a dependant. Additional services include: Hospital Substitution Programs, Preventative Health Services and Health Support Programs. Waiting periods may apply. Please refer to the product Fact Sheet or contact Australian Unity for further details.

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: 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. If you're not covered, this cover includes emergency ambulance to hospital, if transport is coded and invoiced as emergency transport by a state/territory ambulance service/authority. Call-out fees where you're not taken to hospital are limited to 2 ambulance attendances per person per calendar year. This cover doesn't include non-emergency ambulance transportation

Insurer Details



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Call now  13 29 39
Sponsor link

Australian Unity Health Limited

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✉ healthcover@australianunity.com.au
📞 13 29 39

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Private Health Information Statement is available from the Private Health Insurance Ombudsman website at <https://privatehealth.gov.au/dynamic/Premium/PHIS/AUF/J43/TEGY1D>