

**Australian Unity Health Limited**
Essential Choice (Bronze Plus)**\$219.70 / 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: Only one person.

- 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/J62/THSQ10**Source:** [Private Health Information Statement \(PHIS\)](#)

Hospital Cover

Covered **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	Palliative care
Breast surgery (medically necessary)	Gynaecology	Podiatric surgery (provided by a registered podiatric surgeon)
Chemotherapy, radiotherapy and immunotherapy for cancer	Hernia and appendix	Rehabilitation
Dental surgery	Hospital psychiatric services	Skin
Diabetes management (excluding insulin pumps)	Joint reconstructions	Sleep studies
Digestive system	Kidney and bladder	Tonsils, adenoids and grommets
	Lung and chest	
	Male reproductive system	

This policy does not include cover for

Assisted reproductive services	Heart and vascular system	Pain management with device
Back, neck and spine	Implantation of hearing devices	Plastic and reconstructive surgery (medically necessary)
Cataracts	Insulin pumps	Pregnancy and birth
Dialysis for chronic kidney failure	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 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 \$500 per policy per year.

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

Day surgery excess is limited to half the total per person excess (where no overnight stay). If the total per person excess isn't paid after your first hospital admission you will pay the balance on any subsequent admission(s) within the calendar year. Additional Benefits of the cover: 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.

Using a preferred provider means you may have lower out of pocket costs and can access more No Gap treatments on dental, plus discounts on some optical purchases. A preferred providers list is available from Australian Unity.

Policy ID: AUF/J62/THSQ10 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. Treatments claimed as No Gap Dental benefits (where available) do not count to yearly limit. 2) A full denture replacement is limited to once every three years. 3) Surgical tooth extractions and treatment of gum disease have a 12-month waiting period. 4) Limit of one chiropractic x-ray per person per calendar year. 5) Travel Vaccinations only.

Treatment & waiting period (months)	Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ Acupuncture	2 \$200 per policy combined limit for acupuncture, remedial massage & other services	<ul style="list-style-type: none">• Initial visit: 60% of charge• Subsequent visit: 60% of charge
✓ Chiropractic*	2 \$250 per policy combined limit for chiropractic & osteopathy	<ul style="list-style-type: none">• Initial visit: 60% of charge• Subsequent visit: 60% of charge
✓ Dietetics/dietary advice	2 \$200 per policy	<ul style="list-style-type: none">• Initial visit: 60% of charge• Subsequent visit: 60% of charge
✓ Endodontic	12 \$700 per policy combined limit for endodontic, general dental, major dental & other services	<ul style="list-style-type: none">• Filling of one root canal: 60% of charge

✓ Exercise physiology	2	\$350 per policy combined limit for exercise physiology & physiotherapy	<ul style="list-style-type: none"> Initial visit: 60% of charge Subsequent visit: 60% of charge
✓ General dental*	2	\$700 per policy combined limit for endodontic, general dental, major dental & other services	<ul style="list-style-type: none"> Fluoride treatment: 60% of charge Scale & clean: 60% of charge Periodic oral examination: 60% of charge
✓ Major dental*	12	\$700 per policy combined limit for endodontic, general dental, major dental & other services	<ul style="list-style-type: none"> Surgical tooth extraction: 60% of charge Full crown veneered: 60% of charge
✓ Optical	6	\$200 per policy	<ul style="list-style-type: none"> Multi-focal lenses & frames: 100% of charge Single vision lenses & frames: 100% of charge
✓ Osteopathy	2	\$250 per policy combined limit for chiropractic & osteopathy	<ul style="list-style-type: none"> Initial visit: 60% of charge Subsequent visit: 60% of charge
✓ Physiotherapy	2	\$350 per policy combined limit for exercise physiology & physiotherapy	<ul style="list-style-type: none"> Initial visit: 60% of charge Subsequent visit: 60% of charge
✓ Podiatry	2	\$200 per policy	<ul style="list-style-type: none"> Initial visit: 60% of charge Subsequent visit: 60% of charge
✓ Psychology	2	\$100 per policy	<ul style="list-style-type: none"> Initial visit: 60% of charge Subsequent visit: 60% of charge
✓ Remedial massage	2	\$200 per policy combined limit for acupuncture, remedial massage & other services	<ul style="list-style-type: none"> Initial visit: 60% of charge Subsequent visit: 60% of charge
✓ Vaccinations*	0	\$100 per policy	<ul style="list-style-type: none"> Per service: 60% of charge

Annual benefit limits apply per calendar year. Myotherapy also included - 60% of the consultation fee, maximum of \$200 per person (Combined limit with Acupuncture and Remedial Massage), 2 month waiting period. There are Preventative Health Services and Health Support Programs available on this cover. Please refer to the product Fact Sheet or contact Australian Unity for further details.

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

<ul style="list-style-type: none"> ✗ Ante-natal/Post-natal classes ✗ Audiology ✗ Blood glucose monitors ✗ Chinese medicine ✗ Eye therapy (orthoptics) 	<ul style="list-style-type: none"> ✗ Health management / Healthy lifestyle ✗ Hearing aids ✗ Home nursing ✗ Non PBS pharmaceuticals 	<ul style="list-style-type: none"> ✗ Occupational therapy ✗ Orthodontic ✗ Orthotics (podiatric orthoses) ✗ Speech therapy
--	--	---

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



Australian Unity Health Limited
Essential Choice (Bronze Plus)

\$219.70 / month

(Before Rebate, Discount & Loading)

Available in TAS

Call now  13 29 39 [Sponsor link](#)

Australian Unity Health Limited

-  <http://www.australianunity.com.au>
-  healthcover@australianunity.com.au
-  13 29 39

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/AUF/J62/THSQ10>