

**GMHBA Limited****GMHBA Bronze Hospital Plus - Corporate**

Corporate Policy

\$269.85 / 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, an Age-based Discount 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 - 24), as well as persons with a disability who qualify as a child, non-classified* dependant and student in these age ranges.

*Non-classified dependant: Dependant from the age of 18 to 20

Corporate policy: Available to employees of a company that has an agreement with GMHBA

- 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: GMH/H55/TKB01D**Source:** Private Health Information Statement (PHIS)

Hospital Cover

✓ Covered

R Restricted Cover

✗ Not Covered

This policy includes cover for

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

This policy does not include cover for

- | | | |
|---------------------------------------|-------------------------------|-----------------------|
| ✗ Assisted reproductive services | ✗ Insulin pumps | ✗ Pregnancy and birth |
| ✗ Cataracts | ✗ Joint replacements | ✗ Weight loss surgery |
| ✗ Dialysis for chronic kidney failure | ✗ Lung and chest | |
| ✗ Heart and vascular system | ✗ Pain management with device | |

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 of \$500 per 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 day surgery.

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

Private hospital coverage for all other services not listed as excluded or restricted to public hospital benefits.

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: Tasmanian residents are covered by a State based scheme. Please contact Ambulance Tasmania for more details regarding coverage.

Insurer Details

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Call now  **1300 4 GMHBA (46422)**
Sponsor link**GMHBA Limited** <http://www.gmhba.com.au> service@gmhba.com.au **1300 4 GMHBA (46422)**

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/GMH/H55/TKB01D>