



GMHBA Limited
GMHBA Basic Plus Hospital \$250

\$272.00 / 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: Two adults & dependants (3 or more people, only 2 of whom are adults).

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

- This policy exempts you from the Medicare Levy Surcharge.
- This policy does not provide accident cover.
- This policy does not provide benefits for travel or accommodation outside of hospital.

Policy ID: GMH/J5C/TAIQ2D

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 Joint reconstructions | R Skin |
| R Diabetes management (excluding insulin pumps) | R Joint replacements | R Sleep studies |
| R Digestive system | R Kidney and bladder | R Tonsils, adenoids and grommets |
| | R Lung and chest | |
| | R Male reproductive system | |

This policy **does not include** cover for

- | | | |
|---------------------------------------|-----------------|-----------------------|
| ✗ Dialysis for chronic kidney failure | ✗ Insulin pumps | ✗ 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 \$250 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
- 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

Covers fund approved hospital-substitution & chronic disease management services. Rates discounted for premiums paid by direct debit. Access to health programs.

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

**GMHBA Limited**

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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/J5C/TAIQ2D>