

**HBF Health Limited**

Essential Silver Hospital \$750/\$1500 Excess

**\$339.23 / month**

(Before Rebate, Discount &amp; 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:** Two adults & dependants (3 or more people, only 2 of whom are adults).

Children (0 - 17), non-classified\* dependant (18 - 20) and students (21 - 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: Non-classified Dependant

A person who meets all of the following criteria:

- a. is aged 18 to 20 (inclusive); and
- b. does not have a partner (a person in a marital or de facto relationship with the Non-classified Dependant)

- 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.

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**Policy ID:** HBF/H25/TBVVX2D

**Source:** Private Health Information Statement (PHIS)

## Hospital Cover

Covered

Restricted Cover

Not Covered

**This policy includes cover for**

- |                                                           |                                   |                                                                  |
|-----------------------------------------------------------|-----------------------------------|------------------------------------------------------------------|
| ✓ Back, neck and spine                                    | ✓ Eye (not cataracts)             | ✓ Miscarriage and termination of pregnancy                       |
| ✓ Blood                                                   | ✓ Gastrointestinal endoscopy      | ✓ Pain management                                                |
| ✓ Bone, joint and muscle                                  | ✓ Gynaecology                     | ✓ Palliative care                                                |
| ✓ Brain and nervous system                                | ✓ Heart and vascular system       | ✓ 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   | ✓ 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                                 |
| ✓ Ear, nose and throat                                    | ✓ Lung and chest                  |                                                                  |
|                                                           | ✓ 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 | ✗ 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](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 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**

Essential Silver Hospital provides private room coverage (subject to availability) for agreed services at an HBF Member Plus Hospital and there is no excess payable for any dependant children on a family policy.

**For further information about this policy see:** <https://www.hbf.com.au/>

## 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](https://www.health.tas.gov.au/ambulance/fees_and_accounts).

For further information about this policy see: <http://www.hbf.com.au/health-insurance/ambulance-cover.html>

## Insurer Details



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Call now **133 423**  
Sponsor link

### HBF Health Limited

<http://hbf.com.au>

[memberservices@hbf.com.au](mailto:memberservices@hbf.com.au)

**133 423**

**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/HBF/H25/TBVVX2D>