

**HCI**
Silver Plus Secure & Top Extras**\$773.60 / month**
(Before Rebate, Discount & Loading)
Available in WA

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 - 22) and students (23 - 31), as well as persons with a disability who qualify as a child, non-classified* dependant and student in these age ranges.

*Non-classified dependant: Coverage for dependants between 18 & 22

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

Policy ID: HCI/S1E4/WHNY2D**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 | ✓ Male reproductive system |
| ✓ Blood | ✓ Eye (not cataracts) | ✓ Miscarriage and termination of pregnancy |
| ✓ Bone, joint and muscle | ✓ Gastrointestinal endoscopy | ✓ Pain management |
| ✓ Brain and nervous system | ✓ Gynaecology | ✓ Palliative care |
| ✓ Breast surgery (medically necessary) | ✓ Heart and vascular system | ✓ Plastic and reconstructive surgery (medically necessary) |
| ✓ Cataracts | ✓ 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 |
| ✓ Dialysis for chronic kidney failure | ✓ Joint replacements | ✓ Tonsils, adenoids and grommets |
| ✓ Digestive system | ✓ Kidney and bladder | |
| | ✓ Lung and chest | |

This policy does not include cover for

- | | | |
|----------------------------------|-------------------------------|-----------------------|
| ✗ Assisted reproductive services | ✗ Pain management with device | ✗ Weight loss surgery |
| ✗ Insulin pumps | ✗ Pregnancy and birth | |

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 \$1000 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

The excess does not apply to any dependants under the age of 18.

For further information about this policy see: <https://www.hcilttd.com.au/hospital-cover/>

This health insurer does not operate a preferred provider scheme.

Policy ID: HCI/S1E4/WHNY2D Source: [Private Health Information Statement \(PHIS\)](#)

Extras Cover

This policy **includes** General treatment (Extras) cover for

Treatment & waiting period (months)		Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ Acupuncture	2	\$500 per person up to \$1,500 per policy combined limit for acupuncture, chinese medicine, chiropractic, osteopathy & remedial massage	• Initial visit: \$40 • Subsequent visit: \$40
✓ Audiology	2	\$250 per person up to \$750 per policy	• Initial visit: \$50 • Subsequent visit: \$50
✓ Blood glucose monitors	12	\$500 per person	• Per monitor: \$500
✓ Chinese medicine	2	\$500 per person up to \$1,500 per policy combined limit for acupuncture, chinese medicine, chiropractic, osteopathy & remedial massage	• Initial visit: \$40 • Subsequent visit: \$40

✓ Chiropractic	2	\$500 per person up to \$1,500 per policy combined limit for acupuncture, chinese medicine, chiropractic, osteopathy & remedial massage	- Initial visit: \$40 - Subsequent visit: \$40
✓ Dietetics/dietary advice	2	\$1,000 per person up to \$3,000 per policy combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), podiatry & speech therapy sub-limits apply	- Initial visit: \$40 - Subsequent visit: \$40
✓ Endodontic	12	\$1,650 per person up to \$4,950 per policy combined limit for endodontic, major dental & orthodontic sub-limits apply	Filling of one root canal: \$160
✓ Exercise physiology	2	\$750 per person up to \$2,250 per policy combined limit for exercise physiology & physiotherapy	- Initial visit: \$60 - Subsequent visit: \$60
✓ Eye therapy (orthoptics)	2	\$1,000 per person up to \$3,000 per policy combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), podiatry & speech therapy sub-limits apply	- Initial visit: \$40 - Subsequent visit: \$40
✓ General dental	2	\$1,650 per person up to \$4,950 per policy	- Fluoride treatment: \$30 - Scale & clean: \$80 - Surgical tooth extraction: \$160 - Periodic oral examination: \$45
✓ Health management / Healthy lifestyle	2	\$350 per person up to \$1,050 per policy sub-limits apply	Health management: \$200
✓ Hearing aids	36	\$2,000 per person up to \$6,000 per policy sub-limits apply	Hearing aid: \$1000
✓ Home nursing	2	\$500 per person up to \$1,500 per policy	- Initial visit: \$50 - Subsequent visit: \$50
✓ Major dental	12	\$1,650 per person up to \$4,950 per policy combined limit for endodontic, major dental & orthodontic sub-limits apply	Full crown veneered: \$800
✓ Non PBS pharmaceuticals	2	\$1,000 per person up to \$3,000 per policy sub-limits apply	Per eligible prescription: \$100
✓ Occupational therapy	2	\$1,000 per person up to \$3,000 per policy combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), podiatry & speech therapy sub-limits apply	- Initial visit: \$40 - Subsequent visit: \$40
✓ Optical	6	\$300 per person up to \$900 per policy	- Multi-focal lenses & frames: \$300 - Single vision lenses & frames: \$300
✓ Orthodontic	12	\$1,650 per person up to \$4,950 per policy combined limit for endodontic, major dental & orthodontic sub-limits apply	Braces for upper & lower teeth, including removal plus fitting of retainer: 100% of charge

✓ Orthotics (podiatric orthoses)	2	\$1,000 per person up to \$3,000 per policy combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), podiatry & speech therapy sub-limits apply	• Orthotics supply & fit: \$250
✓ Osteopathy	2	\$500 per person up to \$1,500 per policy combined limit for acupuncture, chinese medicine, chiropractic, osteopathy & remedial massage	• Initial visit: \$40 • Subsequent visit: \$40
✓ Physiotherapy	2	\$750 per person up to \$2,250 per policy combined limit for exercise physiology & physiotherapy	• Initial visit: \$60 • Subsequent visit: \$60
✓ Podiatry	2	\$1,000 per person up to \$3,000 per policy combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), podiatry & speech therapy sub-limits apply	• Initial visit: \$40 • Subsequent visit: \$40
✓ Psychology	2	\$300 per person up to \$900 per policy	• Initial visit: \$70 • Subsequent visit: \$70
✓ Remedial massage	2	\$500 per person up to \$1,500 per policy combined limit for acupuncture, chinese medicine, chiropractic, osteopathy & remedial massage	• Initial visit: \$40 • Subsequent visit: \$40
✓ Speech therapy	2	\$1,000 per person up to \$3,000 per policy combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), podiatry & speech therapy sub-limits apply	• Initial visit: \$40 • Subsequent visit: \$40
✓ Vaccinations	2	\$250 per person up to \$750 per policy sub-limits apply	• Per service: \$25

Flu vaccination 1 per calendar year \$25 per service. Other eligible vaccines \$100 per service. For eligible medicinal cannabis prescriptions a 12 month waiting period applies.

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

- ✗ Ante-natal/Post-natal classes

Other features of this general treatment cover: Policy limits or caps may apply.

For further information about this policy see: <https://www.hciltld.com.au/hospital-cover/>

Ambulance cover

In WA this policy provides:

Emergency: Unlimited with a waiting period of 2 months.

Call-out fees: Will be paid for each attendance, including emergency treatment without transport to hospital.

For further information about this policy see: <https://www.hciltld.com.au/hospital-cover/>

Insurer Details

**HCI**

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\$773.60 / month

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Call now  1800 804 950 Sponsor link**HCI** <https://www.hciltld.com.au> enquiries@hciltld.com.au 1800 804 950

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