



Health Insurance Fund of Australia Limited Bronze Plus Simple Choice

\$182.15 / 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 does not provide accident cover.
- This policy does not provide benefits for travel or accommodation outside of hospital.

Policy ID: HIF/CBP7/TCBJ10

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 | R Palliative care |
| ✓ 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 |
| | ✓ Lung and chest | |

This policy **does not include** cover for

- | | | |
|---------------------------------------|-------------------------------|--|
| ✗ Assisted reproductive services | ✗ Insulin pumps | ✗ Plastic and reconstructive surgery (medically necessary) |
| ✗ Cataracts | ✗ Joint replacements | ✗ Pregnancy and birth |
| ✗ Dialysis for chronic kidney failure | ✗ Pain management with device | ✗ Weight loss surgery |
| ✗ Heart and vascular system | | |

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 \$750 per person and \$750 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

Your choice of treating doctor or specialist. Access Gap Cover for eligible services (visit hif.com.au/accessgap to learn more and find your nearest known or no gap specialist). For family policies, no excess applies to dependants under the age of 18.

HIF has partnered with a network of providers to make a selected range of services more affordable. By choosing an HIF Choice Network provider you'll receive low or no out-of-pocket costs. See www.hif.com.au/choice-network

Policy ID: HIF/CBP7/TCBJ10 Source: [Private Health Information Statement \(PHIS\)](#)

Extras Cover

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

Note, for treatments marked with *: Pharmacy benefit paid after deduction of the PBS co-payment at 60% per script. A \$20 benefit (1 per person, per calendar year) will be paid on eligible claims for flu vaccinations from a registered pharmacy only. Optical benefit paid on frames and prescription optical items. Benefits for replacement dentures and partial dentures are not paid within three years of previous supply.

Treatment & waiting period (months)		Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ Acupuncture	2	\$350 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, health management / healthy lifestyle, non pbs pharmaceuticals, osteopathy, physiotherapy, podiatry, psychology, remedial massage & other services sub-limits apply	• Initial visit: 60% of charge • Subsequent visit: 60% of charge

✓ Chinese medicine	2	\$350 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, health management / healthy lifestyle, non pbs pharmaceuticals, osteopathy, physiotherapy, podiatry, psychology, remedial massage & other services sub-limits apply	- Initial visit: 60% of charge - Subsequent visit: 60% of charge
✓ Chiropractic	2	\$350 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, health management / healthy lifestyle, non pbs pharmaceuticals, osteopathy, physiotherapy, podiatry, psychology, remedial massage & other services	- Initial visit: 60% of charge - Subsequent visit: 60% of charge
✓ Endodontic	12	\$600 per policy combined limit for endodontic & major dental	Filling of one root canal: 60% of charge
✓ Exercise physiology	2	\$350 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, health management / healthy lifestyle, non pbs pharmaceuticals, osteopathy, physiotherapy, podiatry, psychology, remedial massage & other services	- Initial visit: 60% of charge - Subsequent visit: 60% of charge
✓ General dental	2	\$600 per policy	- Fluoride treatment: 60% of charge - Scale & clean: 60% of charge - Surgical tooth extraction: 60% of charge - Periodic oral examination: 60% of charge
✓ Health management / Healthy lifestyle	2	\$350 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, health management / healthy lifestyle, non pbs pharmaceuticals, osteopathy, physiotherapy, podiatry, psychology, remedial massage & other services sub-limits apply	Health management: 60% of charge
✓ Major dental*	12	\$600 per policy combined limit for endodontic & major dental	Full crown veneered: 60% of charge
✓ Non PBS pharmaceuticals*	2	\$350 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, health management / healthy lifestyle, non pbs pharmaceuticals, osteopathy, physiotherapy, podiatry, psychology, remedial massage & other services	Per eligible prescription: 60% of charge
✓ Optical*	2	\$200 per policy	- Multi-focal lenses & frames: 100% of charge - Single vision lenses & frames: 100% of charge
✓ Osteopathy	2	\$350 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, health management / healthy lifestyle, non pbs pharmaceuticals, osteopathy, physiotherapy, podiatry, psychology, remedial massage & other services	- Initial visit: 60% of charge - Subsequent visit: 60% of charge

✓ Physiotherapy	2	\$350 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, health management / healthy lifestyle, non pbs pharmaceuticals, osteopathy, physiotherapy, podiatry, psychology, remedial massage & other services	- Initial visit: 60% of charge - Subsequent visit: 60% of charge
✓ Podiatry	2	\$350 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, health management / healthy lifestyle, non pbs pharmaceuticals, osteopathy, physiotherapy, podiatry, psychology, remedial massage & other services	- Initial visit: 60% of charge - Subsequent visit: 60% of charge
✓ Psychology	2	\$350 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, health management / healthy lifestyle, non pbs pharmaceuticals, osteopathy, physiotherapy, podiatry, psychology, remedial massage & other services sub-limits apply	- Initial visit: 60% of charge - Subsequent visit: 60% of charge
✓ Remedial massage	2	\$350 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, health management / healthy lifestyle, non pbs pharmaceuticals, osteopathy, physiotherapy, podiatry, psychology, remedial massage & other services sub-limits apply	- Initial visit: 60% of charge - Subsequent visit: 60% of charge

Complementary Therapies sub-limit is \$150 per person (\$300 per couple or family membership). Benefits are claimable for acupuncture, myotherapy, remedial massage and traditional Chinese medicine. Treatment must be provided by a practitioner who is registered with HIF in the speciality for which the charge is raised, benefits are not payable on medicines. Healthy lifestyle sub-limit is \$150 per person (\$300 per couple or family membership). Psychology sub-limit is \$150 per person (\$300 per couple or family membership). The limits detailed above are subject to a combined overall person limit of \$350 (\$700 per couple or family membership) for physio, exercise physiology, chiro, osteo, podiatry, pharmacy, complementary therapies and healthy lifestyle.

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

- | | | |
|---------------------------------|----------------------------|----------------------------------|
| ✗ Ante-natal/Post-natal classes | ✗ Eye therapy (orthoptics) | ✗ Orthodontic |
| ✗ Audiology | ✗ Hearing aids | ✗ Orthotics (podiatric orthoses) |
| ✗ Blood glucose monitors | ✗ Home nursing | ✗ Speech therapy |
| ✗ Dietetics/dietary advice | ✗ Occupational therapy | ✗ Vaccinations |

Other features of this general treatment cover: Extras cover that offers 60% back or more on services such as General Dental, Major Dental, Optical, Physio, Chiro, Complimentary Therapies, Psychology and more.

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: There is no limit to the number of emergency ambulance services you use. If you're taken to a hospital's emergency department for urgent treatment, we'll cover 100% of the charge. If it's

a non-emergency ambulance service, you only make a \$50 co-payment per trip. Not covered: Inter-hospital transportation except for inter-hospital transfers relating to an emergency or new illness where approved on a case by case basis by HIF. Transportation from a hospital to your home, nursing home or other hospital. Transportation for ongoing medical treatment. Off road, sea or air ambulance (plane, helicopter or boat).

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

Insurer Details



Health Insurance Fund of Australia Limited

Bronze Plus Simple Choice

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Call now  1300 134 060 Sponsor link

Health Insurance Fund of Australia Limited

 <http://www.hif.com.au>

 hello@hif.com.au

 1300 134 060

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