



Latrobe Health Services
Bronze Plus Hospital 750 Excess

\$267.71 / 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 - 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: A person who is between the ages of 18 & 20 who does not have a spouse or partner.

- 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: LHS/H30/TANW2D

Source: Private Health Information Statement (PHIS).

Hospital Cover

✓ Covered

R Restricted Cover

✗ Not Covered

This policy includes cover for

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|---|---------------------------------|--|
| ✓ Blood | ✓ Digestive system | ✓ Lung and chest |
| ✓ Bone, joint and muscle | ✓ Ear, nose and throat | ✓ Male reproductive system |
| ✓ Brain and nervous system | ✓ Eye (not cataracts) | ✓ Miscarriage and termination of pregnancy |
| ✓ Breast surgery (medically necessary) | ✓ Gastrointestinal endoscopy | ✓ Pain management |
| ✓ Chemotherapy, radiotherapy and immunotherapy for cancer | ✓ Gynaecology | R Palliative care |
| ✓ Dental surgery | ✓ Hernia and appendix | R Rehabilitation |
| ✓ Diabetes management (excluding insulin pumps) | R Hospital psychiatric services | ✓ Skin |
| | ✓ Joint reconstructions | ✓ Tonsils, adenoids and grommets |
| | ✓ Kidney and bladder | |

This policy does not include cover for

- | | | |
|---------------------------------------|--|--|
| ✗ Assisted reproductive services | ✗ Implantation of hearing devices | ✗ Podiatric surgery (provided by a registered podiatric surgeon) |
| ✗ Back, neck and spine | ✗ Insulin pumps | ✗ Pregnancy and birth |
| ✗ Cataracts | ✗ Joint replacements | ✗ Sleep studies |
| ✗ Dialysis for chronic kidney failure | ✗ Pain management with device | ✗ Weight loss surgery |
| ✗ Heart and vascular system | ✗ Plastic and reconstructive surgery (medically necessary) | |

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 \$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

Each adult only pays the excess once per calendar year. Families pay only two excesses per calendar year. Excesses do not apply to child dependants. Additional medical gap benefits are payable on this policy.

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.

For further information about this policy see: <https://www.latrobehealth.com.au/health-cover/emergency-ambulance-cover/>

Insurer Details



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Call now  **1300 362 144**
Sponsor link

Latrobe Health Services

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

 info@lhs.com.au

 **1300 362 144**

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/LHS/H30/TANW2D>