



This policy includes cover for

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|---------------------------------|-------------------------|----------------------------------|
| ✓ Dental surgery | ✓ Joint reconstructions | ✓ Tonsils, adenoids and grommets |
| ✓ Hernia and appendix | R Palliative care | |
| R Hospital psychiatric services | R Rehabilitation | |

This policy does not include cover for

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|---|-----------------------------------|--|
| ✗ Assisted reproductive services | ✗ Digestive system | ✗ Male reproductive system |
| ✗ Back, neck and spine | ✗ Ear, nose and throat | ✗ Miscarriage and termination of pregnancy |
| ✗ Blood | ✗ Eye (not cataracts) | ✗ Pain management |
| ✗ Bone, joint and muscle | ✗ Gastrointestinal endoscopy | ✗ Pain management with device |
| ✗ Brain and nervous system | ✗ Gynaecology | ✗ Plastic and reconstructive surgery (medically necessary) |
| ✗ Breast surgery (medically necessary) | ✗ Heart and vascular system | ✗ Podiatric surgery (provided by a registered podiatric surgeon) |
| ✗ Cataracts | ✗ Implantation of hearing devices | ✗ Pregnancy and birth |
| ✗ Chemotherapy, radiotherapy and immunotherapy for cancer | ✗ Insulin pumps | ✗ Skin |
| ✗ Diabetes management (excluding insulin pumps) | ✗ Joint replacements | ✗ Sleep studies |
| ✗ Dialysis for chronic kidney failure | ✗ Kidney and bladder | ✗ Weight loss surgery |
| | ✗ Lung and chest | |

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 \$500 per admission. This is limited to a maximum of \$500 per person 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

This policy offers a Private Room Promise at Members' Choice hospitals. Conditions apply, see Insurer for details.

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.

Insurer Details



Medibank Private Limited
Corporate Basic Plus Hospital

Corporate Policy

\$239.90 / month

(Before Rebate, Discount & Loading)

Available in TAS

Call now **132331**
Sponsor link

Medibank Private Limited

<http://medibank.com.au>

ask_us@medibank.com.au

132331

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