



Navy Health Ltd
Public Basic+ Hospital

Restricted Insurer

\$328.12 / month

(Before Rebate, Discount & Loading)

Available in SA

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 - 21) and students (22 - 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 non classified dependant is defined by Navy Health as a child, legally adopted child or step-child who is unmarried and who is younger than 21 years of age.

Restricted insurer: Membership of this insurer is restricted to Cover for the ADF community - serving, ex-serving ADF, employees of contractors to ADF and families.

- 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: NHB/J2/SEIL2D

Source: [Private Health Information Statement \(PHIS\)](#).

Hospital Cover

✓ Covered

R Restricted Cover

✗ Not Covered

This policy **includes** cover for

R Assisted reproductive services	R Ear, nose and throat	R Miscarriage and termination of pregnancy
R Back, neck and spine	R Eye (not cataracts)	R Pain management
R Blood	R Gastrointestinal endoscopy	R Pain management with device
R Bone, joint and muscle	R Gynaecology	R Palliative care
R Brain and nervous system	R Heart and vascular system	R Plastic and reconstructive surgery (medically necessary)
R Breast surgery (medically necessary)	R Hernia and appendix	R Podiatric surgery (provided by a registered podiatric surgeon)
R Cataracts	R Hospital psychiatric services	R Pregnancy and birth
R Chemotherapy, radiotherapy and immunotherapy for cancer	R Implantation of hearing devices	R Rehabilitation
R Dental surgery	R Insulin pumps	R Skin
R Diabetes management (excluding insulin pumps)	R Joint reconstructions	R Sleep studies
R Dialysis for chronic kidney failure	R Joint replacements	R Tonsils, adenoids and grommets
R Digestive system	R Kidney and bladder	R Weight loss surgery
	R Lung and chest	
	R Male reproductive 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: No excess

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
- 12 months for pregnancy and birth (obstetrics)
- 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

There is no excess and no co-payments on admission, and you are covered for all services in a public hospital. You are also covered for unlimited ambulance cover Australia-wide, which means you are not required to take out ambulance cover elsewhere.

For further information about this policy see: <https://navyhealth.com.au/public-basic-hospital-cover>

Ambulance cover

In SA this policy provides:

Emergency: Unlimited with a waiting period of 2 months.

Non-emergency: Unlimited transport with a waiting period of 2 months, or 2 months for pre-existing conditions.

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

Other features of this ambulance cover: We cover 100% of the cost of ambulance services within Australia, provided it is provided by a state based run Ambulance service, by either air/sea or land. We do not provide benefits for privately run patient transport services.

For further information about this policy see: <https://navyhealth.com.au/public-basic-hospital-cover>

Insurer Details



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Call now  **1300 306 289**
Sponsor link

Navy Health Ltd

 <https://navyhealth.com.au/why-navy-health/>

 query@navyhealth.com.au

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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/NHB/J2/SEIL2D>