

**Qantas Insurance**Qantas Silver Plus Hospital and Lifestyle Extras \$500  
Excess**\$713.07 / month**

(Before Rebate, Discount &amp; 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 - 30), as well as persons with a disability who qualify as a child, non-classified\* dependant and student in these age ranges.

\*Non-classified dependant: For nib Policies a person who is not a Policy Holder or Partner and who: is aged under 21 years

is not married and does not have a defacto Partner; and includes a Foster Child, legally adopted child or stepchild.

- 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: NIB/J69/TIUQ2D****Source:** [Private Health Information Statement \(PHIS\)](#)

## Hospital Cover

 Covered Restricted Cover Not Covered**This policy includes cover for**

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

**This policy does not include cover for**

-  Assisted reproductive services
-  Pregnancy and birth
-  Weight loss surgery

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](https://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 and \$1000 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**

We do not have a preferred-provider-network-arrangement but operate a MediGap scheme aiming to eliminate the 'gap' payments for specialist fees in hospital. When a specialist chooses to participate in MediGap, they agree not to charge an out-of-pocket expense for your procedure. We do this by building a network of specialists who may agree to receive a higher benefit from us than they would ordinarily receive. In exchange, they do not charge you an out-of-pocket expense. Ask your specialist if they'll MediGap for you!

For further information about this policy see: <https://my.nib.com.au/product-collateral/163>

By using our FirstChoice providers, you may have lower out-of-pocket costs on many allied health services. A list of "preferred providers" is available from the health insurer. See <https://insurance.qantas.com/find-a-provider>.

Policy ID: NIB/J69/TIUQ2D 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 <b>\$300 per person</b> combined limit for acupuncture, remedial massage & other services	<ul style="list-style-type: none"><li>• Initial visit: 60% of charge</li><li>• Subsequent visit: 60% of charge</li></ul>
✓ Chiropractic	2 <b>\$300 per person</b> combined limit for chiropractic & osteopathy	<ul style="list-style-type: none"><li>• Initial visit: 60% of charge</li><li>• Subsequent visit: 60% of charge</li></ul>
✓ Dietetics/dietary advice	2 <b>\$300 per person</b>	<ul style="list-style-type: none"><li>• Initial visit: 60% of charge</li><li>• Subsequent visit: 60% of charge</li></ul>
✓ Endodontic	12 <b>\$600 per person</b> combined limit for endodontic & major dental	<ul style="list-style-type: none"><li>• Filling of one root canal: 60% of charge</li></ul>
✓ General dental	2 <b>\$600 per person</b>	<ul style="list-style-type: none"><li>• Fluoride treatment: 60% of charge</li><li>• Scale &amp; clean: 60% of charge</li><li>• Periodic oral examination: 60% of charge</li></ul>

<b>✓ Health management / Healthy lifestyle</b>	6	<b>\$150 per person</b>	<ul style="list-style-type: none"> <li>Health management: 60% of charge</li> </ul>
<b>✓ Major dental</b>	12	<b>\$600 per person</b> combined limit for endodontic & major dental	<ul style="list-style-type: none"> <li>Surgical tooth extraction: 60% of charge</li> <li>Full crown veneered: 60% of charge</li> </ul>
<b>✓ Non PBS pharmaceuticals</b>	2	<b>\$150 per person</b>	<ul style="list-style-type: none"> <li>Per eligible prescription: 60% of charge</li> </ul>
<b>✓ Optical</b>	6	<b>\$250 per person</b>	<ul style="list-style-type: none"> <li>Multi-focal lenses &amp; frames: 60% of charge</li> <li>Single vision lenses &amp; frames: 60% of charge</li> </ul>
<b>✓ Orthotics (podiatric orthoses)</b>	2	<b>\$200 per person</b> combined limit for orthotics (podiatric orthoses) & podiatry	<ul style="list-style-type: none"> <li>Orthotics supply &amp; fit: 60% of charge</li> </ul>
<b>✓ Osteopathy</b>	2	<b>\$300 per person</b> combined limit for chiropractic & osteopathy	<ul style="list-style-type: none"> <li>Initial visit: 60% of charge</li> <li>Subsequent visit: 60% of charge</li> </ul>
<b>✓ Physiotherapy</b>	2	<b>\$350 per person</b>	<ul style="list-style-type: none"> <li>Initial visit: 60% of charge</li> <li>Subsequent visit: 60% of charge</li> </ul>
<b>✓ Podiatry</b>	2	<b>\$200 per person</b> combined limit for orthotics (podiatric orthoses) & podiatry	<ul style="list-style-type: none"> <li>Initial visit: 60% of charge</li> <li>Subsequent visit: 60% of charge</li> </ul>
<b>✓ Psychology</b>	2	<b>\$300 per person</b>	<ul style="list-style-type: none"> <li>Initial visit: 60% of charge</li> <li>Subsequent visit: 60% of charge</li> </ul>
<b>✓ Remedial massage</b>	2	<b>\$300 per person</b> combined limit for acupuncture, remedial massage & other services sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: 60% of charge</li> <li>Subsequent visit: 60% of charge</li> </ul>

Preventative Tests - \$100 limit per person per calendar year (waiting period 6 months): 60% back on preventative health test e.g. thin prep, bone density testing, bowel screening (service limits apply). Wellbeing Health Aids - \$250 limit per person per calendar year (waiting period 12 months): 60% back on health aids e.g. shoulder braces, knee braces, splints (service limits apply). Myotherapy - \$300 combined limit with acupuncture, remedial massage and Chinese herbalism per person per calendar year (waiting period 2 months). Healthy Lifestyle includes approved weight management, quit smoking and health management programs (gym, personal trainer) and more. Psychology has a sublimit of \$150 for Digital Cognitive Behavioural Therapy (CBT). For Preventative dental service limits apply.

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

- |  |                                   |                               |
|--|-----------------------------------|-------------------------------|
| <b>✗ Ante-natal/Post-natal classes</b> | <b>✗ Exercise physiology</b>      | <b>✗ Occupational therapy</b> |
| <b>✗ Audiology</b>                     | <b>✗ Eye therapy (orthoptics)</b> | <b>✗ Orthodontic</b>          |
| <b>✗ Blood glucose monitors</b>        | <b>✗ Hearing aids</b>             | <b>✗ Speech therapy</b>       |
| <b>✗ Chinese medicine</b>              | <b>✗ Home nursing</b>             | <b>✗ Vaccinations</b>         |

**Other features of this general treatment cover:** Extras that are designed to appeal to those with an active lifestyle. Of course, you can see your choice of provider, but by choosing a FirstChoice provider, you may have less to pay towards the cost of your treatment. We've created the FirstChoice network to help you access quality healthcare and a better deal for you and your family. We've locked in lower costs with our FirstChoice providers, so you can enjoy competitive treatment fees when you visit the dentist or a discount the next time you claim for glasses.

**For further information about this policy see:** <https://my.nib.com.au/product-collateral/163>

## 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](https://www.health.tas.gov.au/ambulance/fees_and_accounts).

**Other features of this ambulance cover:** Emergency ambulance costs are covered by the state government for residents of Tasmania.

**For further information about this policy see:** <https://my.nib.com.au/product-collateral/163>

## Insurer Details

FREQUENT FLYER | QANTAS INSURANCE

**Qantas Insurance**

Qantas Silver Plus Hospital and Lifestyle Extras \$500 Excess

**\$713.07 / month**

(Before Rebate, Discount & Loading)

Available in TAS

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**Qantas Insurance**

 <https://www.qantasinsurance.com/health>

 13 49 60

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