Phoenix Health Fund Limited

Bronze Plus Starter 500 & Base Extras

$360.64 / month
(Before Rebate, Discount & Loading)
Available in WA

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: One adult & dependants, including non-student dependants (2 or more people, only one of whom is an adult).

Children (0 - 17), non-classified* dependant (18 - 20), students (21 - 24) and non-students (21 to 24), as well as persons with a disability who qualify as a child, non-classified* dependant, student and non-student in these age ranges.

*Non-classified dependant: Dependants can stay on your family policy at no extra cost until their 21st birthday.

- This policy exempts you from the Medicare Levy Surcharge.
- This policy provides accident cover - check with insurer for details.
- This policy provides benefits for travel or accommodation outside of hospital - check with insurer for details.

Policy ID: PWA/BSBA/WCBA1Y

Source: Private Health Information Statement (PHIS)

Hospital Cover

✓ Covered | R Restricted Cover | ✗ Not Covered

This policy includes cover for

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

This policy does not include cover for

- ✗ Assisted reproductive services
- ✗ Back, neck and spine
- ✗ Cataracts
- ✗ Dialysis for chronic kidney failure
- ✗ Heart and vascular system
- ✗ Insulin pumps
- ✗ Joint replacements
- ✗ Pain management with device
- ✗ 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 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.

This health insurer does not operate a preferred provider scheme.
Policy ID: PWA/BSBA/WCBA1Y 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
✓ **Chiropractic**	2	**$250 per person** combined limit for chiropractic & osteopathy	• Initial visit: $32 • Subsequent visit: $24
✓ **General dental**	2	**$500 per person**	• Fluoride treatment: $19.2 • Scale & clean: $55.2 • Periodic oral examination: $29.2
✓ **Non PBS pharmaceuticals**	2	**$200 per person**	• Per eligible prescription: $30
✓ **Optical**	6	**$150 per person**	• Multi-focal lenses & frames: $80 • Single vision lenses & frames: 80% of charge
✓ **Osteopathy***	2	**$250 per person** combined limit for chiropractic & osteopathy	• Initial visit: $32 • Subsequent visit: $24
✓ **Physiotherapy**	2	**$250 per person**	• Initial visit: $40 • Subsequent visit: $29.6

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

- ✕ Acupuncture
- ✕ Ante-natal/Post-natal classes
- ✕ Audiology
- ✕ Blood glucose monitors
- ✕ Chinese medicine
- ✕ Dietetics/dietary advice
- ✕ Endodontic
- ✕ Exercise physiology
- ✕ Eye therapy (orthoptics)
- ✕ Health management / Healthy lifestyle
- ✕ Hearing aids
- ✕ Home nursing
- ✕ Major dental
- ✕ Occupational therapy
- ✕ Orthodontic
- ✕ Orthotics (podiatric orthoses)
- ✕ Podiatry
- ✕ Psychology
- ✕ Remedial massage
- ✕ Speech therapy
- ✕ Vaccinations

Ambulance cover

In WA this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

Non-emergency: Unlimited transport with a waiting period of 1 day, or 1 day for pre-existing conditions.

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

For further information about this policy see: https://phoenixhealthfund.com.au/covers-by-life-stage/

Insurer Details

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Call now 1800 028 817 Sponsor link

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