Phoenix Health Fund Limited
Gold Complete 500 & Everyday Extras 60

$821.28 / month
(Before Rebate, Discount & Loading)
Available in VIC

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 - 24), as well as persons with a disability who qualify as a child, non-classified* dependant and 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/GTE6/VIRN2D **Source:** Private Health Information Statement (PHIS)

Hospital Cover

✓ Covered | R Restricted Cover | ✗ Not Covered

This policy includes cover for

- ✓ Assisted reproductive services
- ✓ 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)
- ✓ Pregnancy and birth
- ✓ Rehabilitation
- ✓ Skin
- ✓ Sleep studies
- ✓ Tonsils, adenoids and grommets
- ✓ 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
- 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.

This health insurer does not operate a preferred provider scheme.
Policy ID: PWA/GTE6/VIRN2D Source: Private Health Information Statement (PHIS)

Extras Cover

This policy includes General treatment (Extras) cover for

Note, for treatments marked with * : 100% benefit available on preventative dental services– includes items 012, 013, 111, 114, 115, 121, 161. Claimable once per appointment, up to twice per person per calendar year.

Treatment & waiting period (months)		Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ **Acupuncture**	2	**$800 per person** combined limit for acupuncture, chiropractic, exercise physiology, osteopathy, physiotherapy & remedial massage	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Blood glucose monitors**	12	**$600 per person** sub-limits apply	• Per monitor: 60% of charge
✓ **Chiropractic**	2	**$800 per person** combined limit for acupuncture, chiropractic, exercise physiology, osteopathy, physiotherapy & remedial massage sub-limits apply	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Dietetics/dietary advice**	2	**$200 per person** combined limit for dietetics/dietary advice, health management / healthy lifestyle & other services	• Initial visit: 60% of charge • Subsequent visit: 60% of charge

✓ **Endodontic**	12	**$800 per person** combined limit for endodontic & major dental	• Filling of one root canal: 60% of charge
✓ **Exercise physiology**	2	**$800 per person** combined limit for acupuncture, chiropractic, exercise physiology, osteopathy, physiotherapy & remedial massage sub-limits apply	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Eye therapy (orthoptics)**	2	**$600 per person** combined limit for eye therapy (orthoptics), occupational therapy, psychology & speech therapy sub-limits apply	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **General dental***	2	**No annual limit**	• Fluoride treatment: 100% of charge • Scale & clean: 100% of charge • Periodic oral examination: 100% of charge
✓ **Health management / Healthy lifestyle**	2	**$200 per person** combined limit for dietetics/dietary advice, health management / healthy lifestyle & other services	• Health management: 60% of charge
✓ **Major dental**	12	**$800 per person** combined limit for endodontic & major dental	• Surgical tooth extraction: 60% of charge • Full crown veneered: 60% of charge
✓ **Non PBS pharmaceuticals**	2	**$250 per person** combined limit for non pbs pharmaceuticals & vaccinations	• Per eligible prescription: 60% of charge
✓ **Occupational therapy**	2	**$600 per person** combined limit for eye therapy (orthoptics), occupational therapy, psychology & speech therapy sub-limits apply	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Optical**	6	**$260 per person**	• Multi-focal lenses & frames: 60% of charge • Single vision lenses & frames: 60% of charge
✓ **Orthodontic**	12	**$800 per person** $2,100 lifetime limit	• Braces for upper & lower teeth, including removal plus fitting of retainer: 60% of charge
✓ **Orthotics (podiatric orthoses)**	2	**$300 per person**	• Orthotics supply & fit: 60% of charge
✓ **Osteopathy**	2	**$800 per person** combined limit for acupuncture, chiropractic, exercise physiology, osteopathy, physiotherapy & remedial massage sub-limits apply	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Physiotherapy**	2	**$800 per person** combined limit for acupuncture, chiropractic, exercise physiology, osteopathy, physiotherapy & remedial massage sub-limits apply	• Initial visit: 60% of charge • Subsequent visit: 60% of charge

✓ **Podiatry**	2	**$300 per person**	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Psychology**	2	**$600 per person** combined limit for eye therapy (orthoptics), occupational therapy, psychology & speech therapy sub-limits apply	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Remedial massage**	2	**$800 per person** combined limit for acupuncture, chiropractic, exercise physiology, osteopathy, physiotherapy & remedial massage sub-limits apply	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Speech therapy**	2	**$600 per person** combined limit for eye therapy (orthoptics), occupational therapy, psychology & speech therapy sub-limits apply	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Vaccinations**	2	**$250 per person** combined limit for non pbs pharmaceuticals & vaccinations	• Per service: 60% of charge

*$400 sublimit for Physiotherapy/ Myotherapy & Exercise Physiology; $400 sublimit for Chiropractic, Osteopathy, Remedial Massage & Acupuncture; up to overall combined limit of $800. *$200 sublimit per modality for Mental Health (including Psychology & Counselling), Speech Therapy, Eye Therapy, Occupational Therapy; up to overall combined limit of $600. *Aids to Recovery (including Blood Glucose monitors) have a sublimit of $200 per item, up to overall limit of $600 every 2 years. *Non PBS Pharmacy benefit applies after PBS co-payment applied.

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

- ✗ Ante-natal/Post-natal classes
- ✗ Audiology
- ✗ Chinese medicine
- ✗ Hearing aids
- ✗ Home nursing

Ambulance cover

In VIC 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

Phoenix Health Fund Limited

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Call now 1800 028 817 Sponsor link

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