



Queensland Country Health Fund
Value Hospital (Basic+) \$250 excess

\$396.12 / month

(Before Rebate, Discount & Loading)

Available in NSW & ACT

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 (and no-one else).

- 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: QCH/H6/NFWV20

Source: Private Health Information Statement (PHIS)

Hospital Cover

✓ Covered

R Restricted Cover

✗ Not Covered

This policy includes cover for

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

This policy does not include cover for

- | | |
|----------------------|-----------------------|
| ✗ Joint replacements | ✗ 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 \$250 per admission. This is limited to a maximum of \$250 per person and \$500 per policy per year.

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

If you are young and healthy and are not planning a family, this cover may be for you. Benefits for some hospital services are restricted or excluded to keep the premium more affordable. No excess applies for Dependent Children up to and including 21 years

For further information about this policy see: <https://www.queenslandcountry.health/siteassets/product-factsheet-download/value.pdf>

Ambulance cover

In NSW & ACT this policy provides:

Emergency: With a waiting period of 1 day, limited to 1 service per year.

Call-out fees: Will not be paid.

Other features of this ambulance cover: This product provides automatic cover for emergency ambulance services within your respective State/Territory only. When travelling outside your home State/Territory you are covered for one emergency ambulance transport service or on-the-spot emergency treatment per person per Membership Year. Other conditions apply – for more information please visit <https://www.queenslandcountry.health/cover-options/ambulance-cover/>.

For further information about this policy see: <https://www.queenslandcountry.health/cover-options/ambulance-cover/>

Insurer Details



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Call now  **1800 813 415**
Sponsor link

Queensland Country Health Fund

 <https://www.queenslandcountry.health/>

 info@queenslandcountry.health

 **1800 813 415**

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/QCH/H6/NFWV20>