

**Queensland Country Health Fund**

Budget Hospital (Basic+) \$750 excess &amp; Essential Extras

**\$191.56 / month**

(Before Rebate, Discount &amp; Loading)

Available in NSW &amp; 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:** Only one person.

- 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/HB9/NMNI10****Source:** [Private Health Information Statement \(PHIS\)](#)

## Hospital Cover

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

Bone, joint and muscle	Joint reconstructions	Rehabilitation
Dental surgery	Kidney and bladder	Skin
Diabetes management (excluding insulin pumps)	Lung and chest	Tonsils, adenoids and grommets
Hernia and appendix	Miscarriage and termination of pregnancy	
Hospital psychiatric services	Palliative care	

**This policy does not include cover for**

Assisted reproductive services	Digestive system	Male reproductive system
Back, neck and spine	Ear, nose and throat	Pain management
Blood	Eye (not cataracts)	Pain management with device
Brain and nervous system	Gastrointestinal endoscopy	Plastic and reconstructive surgery (medically necessary)
Breast surgery (medically necessary)	Gynaecology	Podiatric surgery (provided by a registered podiatric surgeon)
Cataracts	Heart and vascular system	Pregnancy and birth
Chemotherapy, radiotherapy and immunotherapy for cancer	Implantation of hearing devices	Sleep studies
Dialysis for chronic kidney failure	Insulin pumps	Weight loss surgery
	Joint replacements	

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](http://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 \$750 per admission. This is limited to a maximum of \$750 per person and \$750 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**

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/budget\\_essential.pdf](https://www.queenslandcountry.health/siteassets/product-factsheet-download/budget_essential.pdf)

By using this health insurer's "preferred providers" you will have lower out-of-pocket costs on selected allied health services and have access to more "no gap" services. See <https://www.queenslandcountry.health/provider-search/premier-provider-network/>

Policy ID: QCH/HB9/NMNI10 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      \$900 per policy combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy	<ul style="list-style-type: none"><li>• Initial visit: \$25</li><li>• Subsequent visit: \$25</li></ul>
✓ Ante-natal/Post-natal classes	12     \$42 per policy	<ul style="list-style-type: none"><li>• Initial visit: \$42</li><li>• Subsequent visit: \$42</li></ul>

✓ <b>Audiology</b>	2	<b>\$900 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$35</li> <li>Subsequent visit: \$35</li> </ul>
		combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy	
✓ <b>Chinese medicine</b>	2	<b>\$900 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$25</li> <li>Subsequent visit: \$25</li> </ul>
		combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy	
		sub-limits apply	
✓ <b>Chiropractic</b>	2	<b>\$900 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$39</li> <li>Subsequent visit: \$25</li> </ul>
		combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy	
		sub-limits apply	
✓ <b>Dietetics/dietary advice</b>	2	<b>\$900 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$53</li> <li>Subsequent visit: \$28</li> </ul>
		combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy	
✓ <b>Endodontic</b>	12	<b>\$900 per policy</b>	<ul style="list-style-type: none"> <li>Filling of one root canal: \$119</li> </ul>
		combined limit for endodontic, general dental, major dental & other services	
		sub-limits apply	
✓ <b>Exercise physiology</b>	2	<b>\$900 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$35</li> <li>Subsequent visit: \$25</li> </ul>
		combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy	
		sub-limits apply	
✓ <b>Eye therapy (orthoptics)</b>	2	<b>\$900 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$42</li> <li>Subsequent visit: \$42</li> </ul>
		combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy	
✓ <b>General dental</b>	2	<b>\$900 per policy</b>	<ul style="list-style-type: none"> <li>Fluoride treatment: \$16</li> <li>Scale &amp; clean: \$63</li> <li>Periodic oral examination: \$39</li> </ul>
		combined limit for endodontic, general dental, major dental & other services	
		sub-limits apply	
✓ <b>Health management / Healthy lifestyle</b>	2	<b>\$125 per policy</b>	<ul style="list-style-type: none"> <li>Health management: \$125</li> </ul>

<b>✓ Major dental</b>	12	<b>\$900 per policy</b> combined limit for endodontic, general dental, major dental & other services sub-limits apply	<ul style="list-style-type: none"> <li>Surgical tooth extraction: \$126</li> <li>Full crown veneered: \$560</li> </ul>
<b>✓ Non PBS pharmaceuticals</b>	2	<b>\$300 per policy</b> combined limit for non pbs pharmaceuticals & vaccinations	<ul style="list-style-type: none"> <li>Per eligible prescription: \$45</li> </ul>
<b>✓ Occupational therapy</b>	2	<b>\$900 per policy</b> combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy	<ul style="list-style-type: none"> <li>Initial visit: \$56</li> <li>Subsequent visit: \$28</li> </ul>
<b>✓ Optical</b>	2	<b>\$215 per policy</b>	<ul style="list-style-type: none"> <li>Multi-focal lenses &amp; frames: \$215</li> <li>Single vision lenses &amp; frames: \$215</li> </ul>
<b>✓ Orthodontic</b>	12	<b>\$1,500 lifetime limit</b> sub-limits apply	<ul style="list-style-type: none"> <li>Braces for upper &amp; lower teeth, including removal plus fitting of retainer: \$500</li> </ul>
<b>✓ Orthotics (podiatric orthoses)</b>	2	<b>\$900 per policy</b> combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy sub-limits apply	<ul style="list-style-type: none"> <li>Orthotics supply &amp; fit: 100% of charge</li> </ul>
<b>✓ Osteopathy</b>	2	<b>\$900 per policy</b> combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: \$39</li> <li>Subsequent visit: \$28</li> </ul>
<b>✓ Physiotherapy</b>	2	<b>\$900 per policy</b> combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: \$39</li> <li>Subsequent visit: \$33</li> </ul>
<b>✓ Podiatry</b>	2	<b>\$900 per policy</b> combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: \$28</li> <li>Subsequent visit: \$28</li> </ul>

<b>✓ Psychology</b>	<b>2</b>	<b>\$900 per policy</b>	<ul style="list-style-type: none"><li>Initial visit: \$56</li><li>Subsequent visit: \$56</li></ul>
		combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy	
<b>✓ Remedial massage</b>	<b>2</b>	<b>\$900 per policy</b>	<ul style="list-style-type: none"><li>Initial visit: \$30</li><li>Subsequent visit: \$30</li></ul>
		combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy sub-limits apply	
<b>✓ Speech therapy</b>	<b>2</b>	<b>\$900 per policy</b>	<ul style="list-style-type: none"><li>Initial visit: \$56</li><li>Subsequent visit: \$28</li></ul>
		combined limit for acupuncture, audiology, chinese medicine, chiropractic, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy, physiotherapy, podiatry, psychology, remedial massage & speech therapy	
<b>✓ Vaccinations</b>	<b>2</b>	<b>\$300 per policy</b>	<ul style="list-style-type: none"><li>Per service: \$45</li></ul>
		combined limit for non pbs pharmaceuticals & vaccinations	

**Rewarding Limits** - Once you have held your extras cover with us for one year, we will automatically increase your annual limits for dental (excluding orthodontics) and therapies by \$50 per year, up to a maximum of \$250. After five years of membership, your limits will increase to \$1,150 per person per Membership Year. We honour this loyalty limit for as long as you continuously hold this product. Rewarding limits do not apply to sub-limits.

**This policy does not include General treatment (Extras) cover for****✗** Blood glucose monitors**✗** Hearing aids**✗** Home nursing

**Other features of this general treatment cover:** Health management (Healthy Living benefit) provides benefits towards the costs of metabolic dieticians or nutritionists consultations to assist with weight management, diabetes education consultations, quit smoking programs, skin checks for skin cancers (except where there is a Medicare benefit), bowel screening and bone density tests, a second yearly prostate specific antigen test not covered by Medicare, supermarket tours conducted by a dietitian or other allied health professional qualified to provide nutrition advice, and gym memberships/personal training sessions provided under an approved health management or chronic disease management program. Please contact the insurer for full details.

**For further information about this policy see:** [https://www.queenslandcountry.health/siteassets/product-factsheet-download/budget\\_essential.pdf](https://www.queenslandcountry.health/siteassets/product-factsheet-download/budget_essential.pdf)

**Ambulance cover**

In NSW &amp; 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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**\$191.56 / month**

(Before Rebate, Discount & Loading)

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Call now 1800 813 415 [Sponsor link](#)

#### Queensland Country Health Fund

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

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1800 813 415

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