Queensland Country Health Fund
Budget Hospital (Basic+) $750 excess & Young Extras

$177.12 / 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: 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/HY9/NMSE10

Source: Private Health Information Statement (PHIS)

Hospital Cover

✓ Covered | R Restricted Cover | ✗ Not Covered

This policy includes cover for

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

This policy does not include cover for

- ✗ Assisted reproductive services
- ✗ Back, neck and spine
- ✗ Blood
- ✗ Brain and nervous system
- ✗ Breast surgery (medically necessary)
- ✗ Cataracts
- ✗ Chemotherapy, radiotherapy and immunotherapy for cancer
- ✗ Dialysis for chronic kidney failure
- ✗ Digestive system
- ✗ Ear, nose and throat
- ✗ Eye (not cataracts)
- ✗ Gastrointestinal endoscopy
- ✗ Gynaecology
- ✗ Heart and vascular system
- ✗ Implantation of hearing devices
- ✗ Insulin pumps
- ✗ Joint replacements
- ✗ Male reproductive system
- ✗ Pain management
- ✗ Pain management with device
- ✗ Plastic and reconstructive surgery (medically necessary)
- ✗ Podiatric surgery (provided by a registered podiatric surgeon)
- ✗ Pregnancy and birth
- ✗ Sleep studies
- ✗ 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 $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_young.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/HY9/NMSE10 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	**$300 per service up to $500 per policy** combined limit for acupuncture, chinese medicine, chiropractic, orthotics (podiatric orthoses), osteopathy, podiatry & remedial massage	• Initial visit: $30 • Subsequent visit: $30
✓ **Chinese medicine**	2	**$300 per service up to $500 per policy** combined limit for acupuncture, chinese medicine, chiropractic, orthotics (podiatric orthoses), osteopathy, podiatry & remedial massage	• Initial visit: $30 • Subsequent visit: $30
✓ **Chiropractic**	2	**$300 per service up to $500 per policy** combined limit for acupuncture, chinese medicine, chiropractic, orthotics (podiatric orthoses), osteopathy, podiatry & remedial massage	• Initial visit: $42 • Subsequent visit: $30

✓ **General dental**	2	**$500 per policy** combined limit for general dental & major dental	• Fluoride treatment: $18 • Scale & clean: $67 • Periodic oral examination: $42
✓ **Health management / Healthy lifestyle**	2	**$125 per policy**	• Health management: $125
✓ **Major dental**	12	**$500 per policy** combined limit for general dental & major dental	• Surgical tooth extraction: $135 • Full crown veneered: $500
✓ **Non PBS pharmaceuticals**	2	**$150 per policy** combined limit for non pbs pharmaceuticals & vaccinations	• Per eligible prescription: $45
✓ **Optical**	2	**$225 per policy**	• Multi-focal lenses & frames: $225 • Single vision lenses & frames: $225
✓ **Orthotics (podiatric orthoses)**	2	**$300 per service up to $500 per policy** combined limit for acupuncture, chinese medicine, chiropractic, orthotics (podiatric orthoses), osteopathy, podiatry & remedial massage	• Orthotics supply & fit: 100% of charge
✓ **Osteopathy**	2	**$300 per service up to $500 per policy** combined limit for acupuncture, chinese medicine, chiropractic, orthotics (podiatric orthoses), osteopathy, podiatry & remedial massage	• Initial visit: $42 • Subsequent visit: $30
✓ **Physiotherapy**	2	**$400 per policy** sub-limits apply	• Initial visit: $42 • Subsequent visit: $37
✓ **Podiatry**	2	**$300 per service up to $500 per policy** combined limit for acupuncture, chinese medicine, chiropractic, orthotics (podiatric orthoses), osteopathy, podiatry & remedial massage	• Initial visit: $30 • Subsequent visit: $30
✓ **Remedial massage**	2	**$300 per service up to $500 per policy** combined limit for acupuncture, chinese medicine, chiropractic, orthotics (podiatric orthoses), osteopathy, podiatry & remedial massage	• Initial visit: $35 • Subsequent visit: $35
✓ **Vaccinations**	2	**$150 per policy** combined limit for non pbs pharmaceuticals & vaccinations	• Per service: $45

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

- ✗ Ante-natal/Post-natal classes
- ✗ Audiology
- ✗ Blood glucose monitors
- ✗ Dietetics/dietary advice
- ✗ Endodontic
- ✗ Exercise physiology
- ✗ Eye therapy (orthoptics)
- ✗ Hearing aids
- ✗ Home nursing
- ✗ Occupational therapy
- ✗ Orthodontic
- ✗ Psychology
- ✗ Speech therapy

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_young.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/.

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Insurer Details

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