



TUH, part of the Teachers Health Group
Bronze+ Hospital \$750 excess

Restricted Insurer

\$277.50 / month

(Before Rebate, Discount & Loading)

Available in TAS

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).

Restricted insurer: Membership of this insurer is restricted to current or former union members and their families.

- This policy exempts you from the Medicare Levy Surcharge.
- This policy provides accident cover - check with insurer for details.
- This policy does not provide benefits for travel or accommodation outside of hospital.

Policy ID: QTU/BF/TCQJ20

Source: [Private Health Information Statement \(PHIS\)](#)

Hospital Cover

✓ Covered

R Restricted Cover

✗ Not Covered

This policy includes cover for

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

This policy does not include cover for

| | | |
|---------------------------------------|-----------------------------------|--|
| ✗ Assisted reproductive services | ✗ Heart and vascular system | ✗ Pain management with device |
| ✗ Back, neck and spine | ✗ Implantation of hearing devices | ✗ Podiatric surgery (provided by a registered podiatric surgeon) |
| ✗ Cataracts | ✗ Insulin pumps | ✗ Pregnancy and birth |
| ✗ Dialysis for chronic kidney failure | ✗ 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 on admission. This is limited to a maximum of \$750 per person 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
- 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

Value-added services: home care after hospital, chronic disease management programs, hospital substitute programs (conditions apply). **Accident cover for included service categories only. An excess is applied once per adult per calendar year. The hospital excess is waived for dependants. Reducing your excess is considered to be upgrading your membership. We will charge your previous excess within the first two months of the upgrade, including for adults who are upgrading their level of cover by joining/re-joining as a dependant on a family membership.

For further information about this policy see: <https://tuh.com.au/hospital/bronze-plus-hospital>

Ambulance cover

Ambulance cover is provided by the State government for residents of Tasmania. This may include cover whilst interstate, except for South Australia and Queensland where no cover applies. In other states please check with Ambulance Tasmania - https://www.health.tas.gov.au/ambulance/fees_and_accounts.

Other features of this ambulance cover: Tasmanian residents are covered under the State scheme within Tasmania & all States & Territories except SA & Qld. Tasmanian residents who have COMBINED HOSPITAL AND EXTRAS COVER are entitled to full cover for emergency road ambulance services required whilst travelling in Qld or SA only. No annual limit will apply to emergency road ambulance services. This benefit is not available for stand-alone extras cover. Benefits may be payable for state-owned air ambulance transportation services where charges are not payable under the State scheme (\$6,000 per person per annum limit applies).

For further information about this policy see: <https://tuh.com.au/information/glossary/ambulance>

Insurer Details



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Call now 1300 360 701
Sponsor link

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Private Health Information Statement is available from the Private Health Insurance Ombudsman website at
<https://privatehealth.gov.au/dynamic/Premium/PHIS/QTU/BF/TCQJ20>