



**TUH, part of the Teachers Health Group**  
**Silver+ Family Hospital \$750 excess**

Restricted Insurer

**\$404.23 / month**

(Before Rebate, Discount & Loading)

Available in QLD

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:** One adult & dependants (2 or more people, only one of whom is an adult).

Children (0 - 17), non-classified\* dependant (18 - 20) and students (21 - 31), as well as persons with a disability who qualify as a child, non-classified\* dependant and student in these age ranges.

\*Non-classified dependant: A child of the primary member or their partner who is between the ages of 18 and 20 and does not themselves have a partner.

**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/KF/QCYP1D

Source: Private Health Information Statement (PHIS).

## Hospital Cover

✓ Covered

R Restricted Cover

✗ Not Covered

**This policy includes cover for**

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

**This policy does not include cover for**

- |             |                       |
|-------------|-----------------------|
| ✗ Cataracts | ✗ 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](https://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.

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
- 9 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**

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/silver-plus-family-hospital>

## Ambulance cover

Ambulance cover is provided by the State government for Queensland residents (<https://www.ambulance.qld.gov.au>). This includes cover whilst interstate.

**Other features of this ambulance cover:** All permanent Queensland residents are covered under the State scheme delivered by Queensland Ambulance Service (QAS), including interstate travel, therefore no additional benefit is payable. Benefits may be payable for state-owned air ambulance services where charges are not payable by QAS (\$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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 <https://tuh.com.au/>

 [enquiries@tuh.com.au](mailto:enquiries@tuh.com.au)

 **1300 360 701**

**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/QTU/KF/QCYP1D>