



Reserve Bank Health Society Ltd
Gold Hospital and Premium Extras Cover

Restricted Insurer**\$1,140.89 / month**

(Before Rebate, Discount & Loading)

Available in All States

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 & dependants, including non-student dependants (3 or more people, only 2 of whom are adults).

Children (0 - 17), students (18 - 24) and non-students (18 to 24), as well as persons with a disability who qualify as a child, student and non-student in these age ranges.

Restricted insurer: Membership of this insurer is restricted to Current & former employees of the Reserve Bank.

- 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: RBH/J1/AAAV2Y**Source:** [Private Health Information Statement \(PHIS\)](#)

Hospital Cover

✓ Covered

✗ Restricted Cover

✗ Not Covered

This policy includes cover for

- | | | |
|---|-----------------------------------|--|
| ✓ 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 | ✓ 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) |
| ✓ Cataracts | ✓ Hospital psychiatric services | ✓ 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 |
| ✓ Dialysis for chronic kidney failure | ✓ Joint replacements | ✓ Tonsils, adenoids and grommets |
| ✓ Digestive system | ✓ Kidney and bladder | ✓ 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: No excess

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.

For further information about this policy see: <https://www.myrbhs.com.au/siteassets/documents/cover-descriptions/gold-hospital-and-premium-extras.pdf>

By using Reserve Bank Health Society's 'preferred providers' you may have lower out of pocket costs on Dental treatments and have access to more 'no gap' treatments. A list of 'preferred providers' is available from the fund.

Policy ID: RBH/J1/AAAV2Y 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 \$850 per person sub-limits apply	<ul style="list-style-type: none">• Initial visit: \$85• Subsequent visit: \$70
✓ Ante-natal/Post-natal classes	2 \$260 per person sub-limits apply	<ul style="list-style-type: none">• Initial visit: \$260
✓ Blood glucose monitors	12 \$1,040 per person sub-limits apply	<ul style="list-style-type: none">• Per monitor: 90% of charge
✓ Chinese medicine	2 \$850 per person combined limit for chinese medicine, exercise physiology & remedial massage	<ul style="list-style-type: none">• Initial visit: \$82• Subsequent visit: \$64
✓ Chiropractic	2 \$920 per person combined limit for chiropractic & osteopathy sub-limits apply	<ul style="list-style-type: none">• Initial visit: \$85• Subsequent visit: \$70

✓ Dietetics/dietary advice	2	\$425 per person sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$107 Subsequent visit: \$65
✓ Endodontic	12	\$850 per person sub-limits apply	<ul style="list-style-type: none"> Filling of one root canal: \$850
✓ Exercise physiology	2	\$850 per person combined limit for chinese medicine, exercise physiology & remedial massage	<ul style="list-style-type: none"> Initial visit: \$82 Subsequent visit: \$64
✓ Eye therapy (orthoptics)	2	\$790 per person sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$95 Subsequent visit: \$73
✓ General dental	2	No annual limit sub-limits apply	<ul style="list-style-type: none"> Fluoride treatment: \$33 Scale & clean: \$100 Surgical tooth extraction: \$340 Periodic oral examination: \$50
✓ Health management / Healthy lifestyle	2	\$200 per person sub-limits apply	<ul style="list-style-type: none"> Health management: \$200
✓ Hearing aids	12	\$1,088 per person sub-limits apply	<ul style="list-style-type: none"> Hearing aid: \$2720
✓ Home nursing	2	\$1,500 per person sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$1500 Subsequent visit: \$1500
✓ Major dental	12	\$1,200 per person sub-limits apply	<ul style="list-style-type: none"> Full crown veneered: \$1360
✓ Non PBS pharmaceuticals	2	\$1,000 per person sub-limits apply	<ul style="list-style-type: none"> Per eligible prescription: \$160
✓ Occupational therapy	2	\$790 per person sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$97 Subsequent visit: \$80
✓ Optical	12	\$460 per person sub-limits apply	<ul style="list-style-type: none"> Multi-focal lenses & frames: \$560 Single vision lenses & frames: \$370
✓ Orthodontic	12	\$890 per person \$4,450 lifetime limit	<ul style="list-style-type: none"> Braces for upper & lower teeth, including removal plus fitting of retainer: 90% of charge
✓ Osteopathy	2	\$920 per person combined limit for chiropractic & osteopathy	<ul style="list-style-type: none"> Initial visit: \$85 Subsequent visit: \$70
✓ Physiotherapy	2	\$1,000 per person sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$105 Subsequent visit: \$85
✓ Podiatry	2	\$750 per person sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$80 Subsequent visit: \$70
✓ Psychology	2	\$920 per person sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$190 Subsequent visit: \$190
✓ Remedial massage	2	\$850 per person combined limit for chinese medicine, exercise physiology & remedial massage sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$82 Subsequent visit: \$64

✓ Speech therapy	2	\$1,000 per person sub-limits apply	<ul style="list-style-type: none">Initial visit: \$103Subsequent visit: \$103
✓ Vaccinations	2	No annual limit	<ul style="list-style-type: none">Per service: 90% of charge

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

✗ Audiology **✗** Orthotics (podiatric orthoses)

Other features of this general treatment cover: Some of the general treatment benefits accumulate over time. Major Dental limit is \$6000 every 5 years. Optical limit is \$920 in any 2 years. Hearing Aids limit is \$5440 in any 5 years. Orthodontic limit after 1st year -\$890, increases by \$890 each year, to a maximum of \$4450 (loyalty limit).

For further information about this policy see: <https://www.myrbhs.com.au/siteassets/documents/cover-descriptions/gold-hospital-and-premium-extras.pdf>

Ambulance cover

In all states this policy provides:

Emergency: Unlimited with a waiting period of 2 months.

Non-emergency: Unlimited transport with a waiting period of 2 months.

Call-out fees: Will be paid for each attendance, including emergency treatment without transport to hospital.

State schemes provide ambulance services for residents of Tasmania (https://www.health.tas.gov.au/ambulance/fees_and_accounts) and Queensland (<https://www.ambulance.qld.gov.au>).

For further information about this policy see: <https://www.myrbhs.com.au/siteassets/documents/cover-descriptions/gold-hospital-and-premium-extras.pdf>

Insurer Details

**Reserve Bank Health Society Ltd**

Gold Hospital and Premium Extras Cover

Restricted Insurer

\$1,140.89 / month

(Before Rebate, Discount & Loading)

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Call now 1800 027 299 [Sponsor link](#)**Reserve Bank Health Society Ltd** <http://www.myrbhs.com.au>

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1800 027 299

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