Astute Simplicity Health

Astute Silver Plus Hospital 500 and Astute Extras Protect

Corporate Policy

$307.80 / month

(Before Rebate, Discount & Loading)

Available in VIC

You may be entitled to an Australian Government Rebate on the above premium. Your premium may also include a Lifetime Health Cover Loading or an insurer discount. Check with your insurer for details.

This policy covers: Only one person.

Corporate policy: Employees and customers of Astute Financial

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

Policy ID: SLM/J13B/VDDF10

Source: Private Health Information Statement (PHIS)

Hospital Cover

✓ Covered | R Restricted Cover | ✗ Not Covered

This policy includes cover for

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

This policy does not include cover for

- ✗ Assisted reproductive services
- ✗ Cataracts
- ✗ Dialysis for chronic kidney failure
- ✗ Joint replacements
- ✗ Pain management with device
- ✗ Pregnancy and birth
- ✗ 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 $500 per person and $500 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

Half excess applies to day surgery up to maximum product excess. Ambulance subscriptions are claimable up to an annual premium, where there is no state based Ambulance scheme or levy. Unmarried dependants covered until they turn 23 and single F/T students covered until they turn 25.

This health insurer does not operate a preferred provider scheme.
Policy ID: SLM/J13B/VDDF10 Source: Private Health Information Statement (PHIS)

Extras Cover

This policy includes General treatment (Extras) cover for

Note, for treatments marked with * : Under Preventative Dental, we pay 100% of your dentist's regular fee up to a maximum benefit per eligible service. This applies to examinations, x-rays, scale and clean and fissure sealing. If your dentist charges above the maximum benefit, or in excess of their regular fee, a gap or out of pocket may apply. Regular fee refers to the average fee your dentist charges to all patients of his or her practice for each eligible service.

Treatment & waiting period (months)		Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ **Acupuncture**	2	**Combined limit of $500 per person for chiropractic/osteopathy, acupuncture and other services. $400 sub-limit applies per person, per service.** combined limit for acupuncture, chinese medicine, chiropractic, osteopathy & remedial massage	• Initial visit: $35 • Subsequent visit: $30
✓ **Ante-natal/Post-natal classes**	2	**$850 per policy** combined limit for ante-natal/post-natal classes, exercise physiology & physiotherapy sub-limits apply	• Initial visit: $49 • Subsequent visit: $49

✓ **Audiology**	2		• Initial visit: $50 • Subsequent visit: $40
✓ **Blood glucose monitors**	12	**Overall limit of $1000 per person applies to Health Appliances & Aids**. $200 sub-limit applies to foot orthotics.** combined limit for blood glucose monitors & orthotics (podiatric orthoses)	• Per monitor: $200
✓ **Chinese medicine**	2	**Combined limit of $500 per person for chiropractic/osteopathy, acupuncture and other services. $400 sub-limit applies per person, per service.** combined limit for acupuncture, chinese medicine, chiropractic, osteopathy & remedial massage	• Initial visit: $32 • Subsequent visit: $28
✓ **Chiropractic**	2	**Combined limit of $500 per person for chiropractic/osteopathy, acupuncture and other services. $400 sub-limit applies per person, per service.** combined limit for acupuncture, chinese medicine, chiropractic, osteopathy & remedial massage	• Initial visit: $41 • Subsequent visit: $30
✓ **Dietetics/dietary advice**	2	**$1,000 per policy** combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, podiatry & speech therapy sub-limits apply	• Initial visit: $75 • Subsequent visit: $45
✓ **Endodontic**	12	**$1,500 per policy** combined limit for endodontic & major dental sub-limits apply	• Filling of one root canal: $180
✓ **Exercise physiology**	2	**$850 per policy** combined limit for ante-natal/post-natal classes, exercise physiology & physiotherapy sub-limits apply	• Initial visit: $53 • Subsequent visit: $40
✓ **Eye therapy (orthoptics)**	2	**$1,000 per policy** combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, podiatry & speech therapy sub-limits apply	• Initial visit: $65 • Subsequent visit: $38
✓ **General dental***	2	**$1,000 per policy**	• Fluoride treatment: $36 • Scale & clean: 100% of charge • Surgical tooth extraction: $180 • Periodic oral examination: 100% of charge
✓ **Hearing aids**	36		• Hearing aid: $1000
✓ **Home nursing**	2	**$500 per policy**	• Initial visit: $50 • Subsequent visit: $50
✓ **Major dental**	12	**$1,500 per policy** combined limit for endodontic & major dental sub-limits apply	• Full crown veneered: $810
✓ **Non PBS pharmaceuticals**	2	**$600 per policy**	• Per eligible prescription: $70

✓ **Occupational therapy**	2	**$1,000 per policy** combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, podiatry & speech therapy	• Initial visit: $80 • Subsequent visit: $55
✓ **Optical**	6	**$300 per policy**	• Multi-focal lenses & frames: $300 • Single vision lenses & frames: $300
✓ **Orthodontic**	12	**$1,000 per policy** $2,800 lifetime limit	• Braces for upper & lower teeth, including removal plus fitting of retainer: 100% of charge
✓ **Orthotics (podiatric orthoses)**	2	**Overall limit of $1000 per person applies to Health Appliances & Aids**. $200 sub-limit applies to foot orthotics.** combined limit for blood glucose monitors & orthotics (podiatric orthoses)	• Orthotics supply & fit: 90% of charge
✓ **Osteopathy**	2	**Combined limit of $500 per person for chiropractic/osteopathy, acupuncture and other services. $400 sub-limit applies per person, per service.** combined limit for acupuncture, chinese medicine, chiropractic, osteopathy & remedial massage	• Initial visit: $57 • Subsequent visit: $45
✓ **Physiotherapy**	2	**$850 per policy** combined limit for ante-natal/post-natal classes, exercise physiology & physiotherapy sub-limits apply	• Initial visit: $57 • Subsequent visit: $49
✓ **Podiatry**	2	**$1,000 per policy** combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, podiatry & speech therapy	• Initial visit: $47 • Subsequent visit: $38
✓ **Psychology**	12	**Benefits payable towards counselling services - Initial consultation $80/subsequent consultation $70 included in $600 Psychology Limit**	• Initial visit: $145 • Subsequent visit: $110
✓ **Remedial massage**	2	**Combined limit of $500 per person for chiropractic/osteopathy, acupuncture and other services. $400 sub-limit applies per person, per service.** combined limit for acupuncture, chinese medicine, chiropractic, osteopathy & remedial massage	• Initial visit: $35 • Subsequent visit: $30
✓ **Speech therapy**	2	**$1,000 per policy** combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, podiatry & speech therapy sub-limits apply	• Initial visit: $120 • Subsequent visit: $67

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

- ✗ Health management / Healthy lifestyle
- ✗ Vaccinations

Other features of this general treatment cover: Orthodontic limit included in annual Major Dental limit. Diabetes Education & Nutrition benefits included in Dietetics sub-limit. Approved health management programs when Extras Protect is taken with hospital cover. Member rewards apply after 5 years continuous membership. **Limits apply to individual Health Appliances & Aids.

Ambulance cover

Pensioner Concession Card and Healthcare Card holders are entitled to free clinically necessary ambulance transport. If you are not eligible for a concession and want to be covered, you can purchase insurance from a private health insurer or take out a subscription with the state ambulance service (https://www.ambulance.vic.gov.au/membership).

For further information about this policy see: https://www.stlukes.com.au/forms-brochures?tag=Information+sheet

Insurer Details

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Call now 1300 090 960 Sponsor link

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