

**Astute Simplicity Health****Astute Silver Plus Hospital 500 and Astute Wellbeing Extras**

Corporate Policy

\$564.80 / month

(Before Rebate, Discount & Loading)

Available in SA

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: Two adults (and no-one else).

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/J13D/SDFB20**Source:** Private Health Information Statement (PHIS)

Hospital Cover

✓ Covered

R Restricted Cover

✗ Not Covered

This policy includes cover for

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

This policy does not include cover for

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|---------------------------------------|-------------------------------|-----------------------|
| ✗ Assisted reproductive services | ✗ Joint replacements | ✗ Weight loss surgery |
| ✗ Cataracts | ✗ Pain management with device | |
| ✗ Dialysis for chronic kidney failure | ✗ Pregnancy and birth | |

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 \$1000 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/J13D/SDFB20 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 up to 60% of the average fee charged Australia wide up to the maximum benefit for each 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 the average fee, a gap or out of pocket may apply. Annual limits, fund rules and waiting periods apply.

Treatment & waiting period (months)		Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ Acupuncture	2	\$300 per person combined limit for acupuncture, chinese medicine & remedial massage sub-limits apply	<ul style="list-style-type: none">• Initial visit: \$32• Subsequent visit: \$28
✓ Ante-natal/Post-natal classes	2	\$350 per person combined limit for ante-natal/post-natal classes, exercise physiology, eye therapy (orthoptics) & physiotherapy sub-limits apply	<ul style="list-style-type: none">• Initial visit: 60% of charge• Subsequent visit: 60% of charge

✓ Audiology	2	\$350 per person combined limit for audiology, dietetics/dietary advice, home nursing & occupational therapy sub-limits apply	<ul style="list-style-type: none"> Initial visit: 60% of charge
✓ Chinese medicine	2	\$300 per person combined limit for acupuncture, chinese medicine & remedial massage sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$32 Subsequent visit: \$28
✓ Chiropractic	2	\$350 per person combined limit for chiropractic & osteopathy sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$38 Subsequent visit: \$27
✓ Dietetics/dietary advice	2	\$350 per person combined limit for audiology, dietetics/dietary advice, home nursing & occupational therapy sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$40 Subsequent visit: \$30
✓ Endodontic	12	\$500 per person combined limit for endodontic & major dental sub-limits apply	<ul style="list-style-type: none"> Filling of one root canal: 60% of charge
✓ Exercise physiology	2	\$350 per person combined limit for ante-natal/post-natal classes, exercise physiology, eye therapy (orthoptics) & physiotherapy sub-limits apply	<ul style="list-style-type: none"> Initial visit: 60% of charge Subsequent visit: 60% of charge
✓ Eye therapy (orthoptics)	2	\$350 per person combined limit for ante-natal/post-natal classes, exercise physiology, eye therapy (orthoptics) & physiotherapy sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$43 Subsequent visit: \$33
✓ General dental*	2	\$750 per person	<ul style="list-style-type: none"> Fluoride treatment: 60% of charge Scale & clean: 60% of charge Surgical tooth extraction: 60% of charge Periodic oral examination: 60% of charge
✓ Home nursing	2	\$350 per person combined limit for audiology, dietetics/dietary advice, home nursing & occupational therapy sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$50 Subsequent visit: \$50
✓ Major dental	12	\$500 per person combined limit for endodontic & major dental sub-limits apply	<ul style="list-style-type: none"> Full crown veneered: 60% of charge
✓ Non PBS pharmaceuticals	2	\$300 per person	<ul style="list-style-type: none"> Per eligible prescription: 60% of charge
✓ Occupational therapy	2	\$350 per person combined limit for audiology, dietetics/dietary advice, home nursing & occupational therapy sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$55 Subsequent visit: \$40
✓ Optical	6	\$200 per person	<ul style="list-style-type: none"> Multi-focal lenses & frames: \$200 Single vision lenses & frames: \$200

✓ Osteopathy	2	\$350 per person combined limit for chiropractic & osteopathy sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$43 Subsequent visit: \$40
✓ Physiotherapy	2	\$350 per person combined limit for ante-natal/post-natal classes, exercise physiology, eye therapy (orthoptics) & physiotherapy sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$53 Subsequent visit: \$47
✓ Podiatry	2	\$200 per person	<ul style="list-style-type: none"> Initial visit: \$40 Subsequent visit: \$33
✓ Psychology	12	Benefits payable towards counselling services - Initial consultation \$60/subsequent consultation \$45 included in \$400 Psychology Limit.	<ul style="list-style-type: none"> Initial visit: \$110 Subsequent visit: \$75
✓ Remedial massage	2	\$300 per person combined limit for acupuncture, chinese medicine & remedial massage sub-limits apply	<ul style="list-style-type: none"> Initial visit: \$32 Subsequent visit: \$28

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

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|---|----------------------------------|------------------|
| ✗ Blood glucose monitors | ✗ Hearing aids | ✗ Speech therapy |
| ✗ Health management / Healthy lifestyle | ✗ Orthodontic | ✗ Vaccinations |
| | ✗ Orthotics (podiatric orthoses) | |

Other features of this general treatment cover: Approved health management programs when Wellbeing Extras is taken with hospital cover. Benefits payable at 60% of fee charged, up to maximum benefit. Diabetes Education & Nutrition benefits included in Dietetics sub-limit.

Ambulance cover

South Australia has a subscription service to cover ambulance within the state, with an additional fee to cover interstate travel (<http://www.saambulance.com.au/ProductsServices/AmbulanceCover.aspx>).

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

Insurer Details



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Corporate Policy

\$564.80 / month


(Before Rebate, Discount & Loading)


Available in SA

Call now  1300 090 960 Sponsor link

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 <https://astutesimplicityhealth.com.au/>

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