

**Health Partners**
Silver Hospital Plus Lite \$500 Excess**\$177.06 / 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, an Age-based Discount or an insurer discount. Check with your insurer for details.

This policy covers: Only one person.

- 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: SPS/J23/SBHA10**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

- | | | |
|---------------------------------------|-------------------------------|-----------------------|
| ✗ 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 of \$500 per 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
- 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

Health Partners Support Programs: Hospital to Home, which includes Hospital Guide, Hospital in the Home and Rehab in the Home. Unlimited Emergency Ambulance as defined by Health Partners. Includes Accident Cover - providing you with protection for all clinical categories, even hospital procedures and services that are listed as exclusions on your individual cover details. For more details on the conditions and how we define Accident Cover, refer to our Member Guide. Members can also access a range of discounts, refer to the 'Member Discount' page at healthpartners.com.au.

For further information about this policy see: <https://www.healthpartners.com.au/health-insurance/hospital-cover/>

Ambulance cover

In SA this policy provides:

Emergency: Unlimited with a waiting period of 2 months.

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

Other features of this ambulance cover: Unlimited emergency ambulance as defined by Health Partners, is for an unplanned event where there is a serious threat to your health, as a result of an accident, serious medical event or trauma, and immediate medical treatment is needed. Transport costs are covered from the place where you are initially treated, to the nearest hospital that can provide the necessary emergency medical treatment. This includes treatment where no transport is provided. It also includes transport between hospitals only where the required emergency care could not be provided at the transferring hospital. See Health Partners Member Guide for Terms & Conditions.

For further information about this policy see: <https://www.healthpartners.com.au/health-insurance/understanding-private-health-insurance/>

Insurer Details



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Call now  **1300 113 113**
Sponsor link

Health Partners

 <http://www.healthpartners.com.au>

 ask@healthpartners.com.au

 **1300 113 113**

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/SPS/J23/SBHA10>