Private Health Insurance Standard Information Statement - Hospital Policy

This Statement provides basic information for the purposes of comparison only. For full explanation of this hospital policy please contact the health insurer on 1300 4 GMHBA (46422) or visit http://www.gmhba.com.au.

HEALTH INSURER: GMHBA Limited WHO IS COVERED: One adult & dependant(s)

PRODUCT NAME: Frank Better Hospital MONTHLY PREMIUM: \$165.50 (no rebate)

AVAILABLE FOR: Residents of **Western Australia**WITH 30% REBATE: \$115.80

MEDICARE LEVY SURCHARGE: **Exempt**

Your actual premium may include a Lifetime Health Cover loading or insurer discounts. Australian Government Rebates also range from 0% to 40% and depend on age and income levels. The most common rebate of 30% is shown above. Check with your insurer for more details.

WHAT'S COVERED IF I HAVE TO GO TO HOSPITAL?	 ✓ Hospital treatment, including accommodation as a private patient in a shared room in a private or public hospital ✓ Doctors' bills in hospital (see below)
WHAT SERVICES ARE NOT COVERED AT ALL? (Exclusions)	 Cataract and eye lens procedures Pregnancy and birth related services Assisted reproductive services Joint replacements ie shoulder, knee, hip and elbow, including revisions Dialysis for chronic renal failure Gastric banding and related services Hospital treatment for which Medicare pays no benefit eg most cosmetic surgery Other services (see insurer for details)
WHAT SERVICES ARE ONLY COVERED TO A LIMITED EXTENT? (Restrictions, Benefit Limitation Periods)	No restrictions You are not fully covered for the time period listed after the services for: • Psychiatric services - 24 months
How long are the waiting PERIODS FOR NEW AND UPGRADING MEMBERS?	 2 months for palliative care, rehabilitation and psychiatric treatment 12 months for treatments relating to other pre-existing ailments 2 months for all other treatments
WILL I HAVE TO PAY ANYTHING IF I GO TO HOSPITAL? (Excesses, Co-payments, Medical/Hospital gaps)	EXCESS: You will have to pay an excess of \$500 per admission. This is limited to a maximum of \$500 per person and \$1000 per policy per year. EXTRA COST PER DAY (CO-PAYMENTS): Every time you go to hospital you will have to pay: \$0 (zero) a day for a shared room \$100 a day for a private room - up to \$700 per hospital stay No co-payment for day surgery (no overnight stay) Doctors' AND HOSPITAL BILLS: 6 out of 10 medical services paid for by this health insurer in Western Australia have no out-of-pocket expenses. This insurer also has arrangements that may mean lower out-of-pocket expenses on doctors' bills. You may also have to pay other costs depending upon: the doctor(s) chosen the treatment you are having the hospital you go to Before you go to hospital, you should ask your doctor, hospital and health insurer about any out-of-pocket costs that may apply to you.
WHAT OTHER FEATURES DOES THIS POLICY HAVE?	Corneal surgery and dental implants performed in hospital excluded. Fast online sign-up, secure online member area - lodge claims, change your cover and read messages. Frank is an online brand of GMHBA. Visit frankhealthinsurance.com.au for more information.