## 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 499 260 or visit <a href="http://www.cuahealth.com.au">http://www.cuahealth.com.au</a>.

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

PRODUCT NAME: Private Hospital 75% MONTHLY PREMIUM: \$210.29 (no rebate)

AVAILABLE FOR: Residents of Queensland WITH 30% REBATE: \$147.19

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?	<ul> <li>✓ 75% of charge for hospital treatment, including accommodation as a private patient in a private or public hospital</li> <li>✓ Doctors' bills in hospital (see below)</li> <li>(Ambulance is covered by State government)</li> </ul>
WHAT SERVICES ARE NOT COVERED AT ALL? (Exclusions)	➤ Hospital treatment for which Medicare pays no benefit eg most cosmetic surgery
WHAT SERVICES ARE ONLY COVERED TO A LIMITED EXTENT? (Restrictions, Benefit Limitation Periods)	No restrictions or benefit limitation periods
HOW LONG ARE THE WAITING PERIODS FOR NEW AND UPGRADING MEMBERS?	<ul> <li>2 months for palliative care, rehabilitation and psychiatric treatment</li> <li>12 months for treatments relating to other pre-existing ailments</li> <li>12 months for obstetric treatments</li> <li>2 months for all other treatments</li> </ul>
WILL I HAVE TO PAY ANYTHING IF I GO TO HOSPITAL? (Excesses, Co-payments, Medical/Hospital gaps)	EXTRA COST PER DAY (CO-PAYMENTS): No co-payments  DOCTORS' AND HOSPITAL BILLS: Almost 9 out of 10 medical services paid for by this health insurer in Queensland 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?	100% of charge for hospital treatment as a private patient in a public hospital. Out-of-pocket costs for private hospital or day surgery accommodation, operating theatre and labour ward charges are capped at a maximum of \$1,000 per person for each calendar year.