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 http://www.cuahealth.com.au.

HEALTH INSURER: CUA Health Limited WHO IS COVERED: One adult
PRODUCT NAME: Public Hospital 100% MONTHLY PREMIUM: \$88.10 (no rebate)

AVAILABLE FOR: Residents of **South Australia**WITH 30% REBATE: \$61.65

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.

South Australia have no out-of-pocket expenses. This insurer also has arrangements that may meal lower out-of-pocket expenses on doctors' bills. You may also have to pay other costs depending up 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 Considerable out-of-pockets are payable if you are treated in a private hospital - we pay up to 50%	<u> </u>	•
COVERED AT ALL? (Exclusions) WHAT SERVICES ARE ONLY COVERED TO A LIMITED EXTENT? (Restrictions, Benefit Limitation Periods) **O Individual Periods** **No restrictions or benefit limitation periods** **No restrictions or benefits are payable for operating theatmand periods** **No restrictions or benefits are payable for operating theatmand periods** **No restrictions or benefit limitation periods** **No restrictions or benefits are payable for operating theatmand periods** **No restrictions or benefit limitation periods** **No restrictions or benefits are payable for operating theatmand periods** **No restrictions or benefit limitation periods** **No		
COVERED TO A LIMITED EXTENT? (Restrictions, Benefit Limitation Periods) HOW LONG ARE THE WAITING PERIODS FOR NEW AND UPGRADING MEMBERS? • 2 months for palliative care, rehabilitation and psychiatric treatment • 12 months for obstetric treatments • 12 months for all other treatments • 12 months for all other treatments • 2 months for all other treatments 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 10 out of 10 medical services paid for by this health insurer South Australia have no out-of-pocket expenses. This insurer also has arrangements that may med lower out-of-pocket expenses on doctors' bills. You may also have to pay other costs depending up • 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? Considerable out-of-pockets are payable if you are treated in a private hospital - we pay up to 50% the cost of standard single or shared accommodation, no benefits are payable for operating theatm	COVERED AT ALL?	➤ Hospital treatment for which Medicare pays no benefit eg most cosmetic surgery
Decrops of New And Upgrading Members? 12 months for treatments relating to other pre-existing ailments 12 months for obstetric treatments 12 months for all other treatments 12 months for all other treatments 12 months for all other treatments 12 months for obstetric treatments 12 months for obstetric treatments 12 months for treatments 12 months for obstetric treatments 12	COVERED TO A LIMITED EXTENT? (Restrictions, Benefit Limitation	No restrictions or benefit limitation periods
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THIS POLICY HAVE? the cost of standard single or shared accommodation, no benefits are payable for operating theatre	IF I GO TO HOSPITAL? (Excesses, Co-payments,	EXTRA COST PER DAY (CO-PAYMENTS): No co-payments DOCTORS' AND HOSPITAL BILLS: Almost 10 out of 10 medical services paid for by this health insurer in South 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
		Considerable out-of-pockets are payable if you are treated in a private hospital - we pay up to 50% of the cost of standard single or shared accommodation, no benefits are payable for operating theatre, labour ward and intensive care charges.