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

PRODUCT NAME: Public Hospital 100%

WHO IS COVERED: Two adults

MONTHLY PREMIUM: \$176.19 (no rebate)

AVAILABLE FOR: Residents of Northern Territory WITH 30% REBATE: \$123.29

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.

GO TO HOSPITAL? WHAT SERVICES ARE NOT COVERED AT ALL? (Exclusions) WHAT SERVICES ARE ONLY COVERED TO A LIMITED EXTENT? (Restrictions, Benefit Limitation Periods) HOW LONG ARE THE WAITING PERIODS FOR NEW AND UPGRADING MEMBERS? WILL I HAVE TO PAY ANYTHING (Excesses, Co-payments, Medical/Hospital gaps) WHAT OTHER FEATURES DOES THIS POLICY HAVE? WHAT OTHER FEATURES DOES CANSEL CON CONTROL OF POPERATION OF POPER		
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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 • 2 months for all other treatments WILL I HAVE TO PAY ANYTHING IF I GO TO HOSPITAL? (Excesses, Co-payments, Medical/Hospital gaps) DOCTORS' AND HOSPITAL BILLS: Almost 9 out of 10 medical services paid for by this health ins Northern Territory have no out-of-pocket expenses. This insurer also has arrangements that 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 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 the cost of standard single or shared accommodation, no benefits are payable for operating of	COVERED AT ALL?	➤ Hospital treatment for which Medicare pays no benefit eg most cosmetic surgery
PERIODS FOR 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 treatments 12 months for obstetric treatments 12 months for obstetric treatments 12 months for obstetric treatments 12 months for treatments 12 months for obstetric treatments 12 months for all other treatments 10 months for all other treatments 10 months for obstetric treatments 10 months for all other treat	COVERED TO A LIMITED EXTENT? (Restrictions, Benefit Limitation	No restrictions or benefit limitation periods
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labour ward and intensive care charges.		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.