

Private Health Information Statement - Combined policy

Gold Private Hospital and Complete Ancillary

ACA Health Benefits Fund

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

info@acahealth.com.au

1300 368 390

Monthly Premium

\$571.86

(before any rebate, loading or discount) #

Covers 2 adults (and no-one else)

Available in All States

You may be entitled to an Australian Government rebate on the above premium. Your premium may also include a Lifetime Health Cover loading or an insurer discount. Check with your insurer for details.

Membership of this insurer is restricted to Seventh-Day Adventist Church employees, Local Church Officers and their families.

Hospital cover

This policy exempts you from the Medicare Levy Surcharge.

This policy does not provide accident cover or benefits for travel and accommodation (outside of hospital).

✓ Covered

For information on what is covered under each category, see <https://privatehealth.gov.au/categories>

R Restricted

Restricted categories partially cover your hospital costs as a private patient in a public hospital. You may incur significant expenses in a private room or private hospital.

✗ Not Covered

These categories are not covered by this policy.

This policy ✓ includes cover for

✓ Assisted reproductive services	✓ Eye (not cataracts)	✓ Miscarriage and termination of pregnancy
✓ Back, neck and spine	✓ Gastrointestinal endoscopy	✓ Pain management
✓ Blood	✓ Gynaecology	✓ Pain management with device
✓ Bone, joint and muscle	✓ Heart and vascular system	✓ Palliative care
✓ Brain and nervous system	✓ Hernia and appendix	✓ Plastic and reconstructive surgery (medically necessary)
✓ Breast surgery (medically necessary)	✓ Hospital psychiatric services	✓ Podiatric surgery (provided by a registered podiatric surgeon – limited benefits)
✓ Cataracts	✓ Implantation of hearing devices	✓ Pregnancy and birth
✓ Chemotherapy, radiotherapy and immunotherapy for cancer	✓ Insulin pumps	✓ Rehabilitation
✓ Dental surgery	✓ Joint reconstructions	✓ Skin
✓ Diabetes management (excluding insulin pumps)	✓ Joint replacements	✓ Sleep studies
✓ Dialysis for chronic kidney failure	✓ Kidney and bladder	✓ Tonsils, adenoids and grommets
✓ Digestive system	✓ Lung and chest	✓ Weight loss surgery
✓ Ear, nose and throat	✓ Male reproductive system	

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: No excess

Co-payments: Every time you go to hospital you will have to pay:

- \$100 a day for a shared room
- \$100 a day for a private room
- \$100 for day surgery (no overnight stay)

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
- 12 months for pregnancy and birth
- 2 months for all other treatments

Other features of this hospital cover

No co-payments are payable when admitted to a public hospital.

For further information about this policy see

<http://www.acahealth.com.au/LinkClick.aspx?fileticket=c1rwZZv2p5g%3d&tabid=159>

General Treatment Cover

This policy ✓ includes General treatment (Extras) cover for

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental	9	\$1,700 per person (combined limit for general dental, major dental & other services - Sub-limits apply)	Periodic oral examination - \$100.00 Scale & clean - \$100.00 Fluoride treatment - \$100.00 Surgical tooth extraction - \$168.00
Major dental	9		Full crown veneered - \$1,000.00
Endodontic	9	\$1,200 per person \$3,600 lifetime limit (Sub-limits apply)	Filling of one root canal - \$1,200.00
Orthodontic	9	\$1,700 per person (Sub-limits apply)	Braces for upper & lower teeth, including removal plus fitting of retainer - \$3,600.00
Optical	4	\$400 per person (Sub-limits apply)	Single vision lenses & frames - \$400.00 Multi-focal lenses & frames - \$400.00
Non PBS pharmaceuticals	2	\$800 per person	Per eligible prescription - \$100.00
Physiotherapy	2	\$850 per person (combined limit for physiotherapy, chiropractic, exercise physiology, eye therapy (orthoptics), occupational therapy, osteopathy, speech therapy & other services)	Initial visit - \$40.00 Subsequent visit - \$34.00
Chiropractic	2		Initial visit - \$45.00 Subsequent visit - \$32.00
Podiatry	2	\$400 per person	Initial visit - 80% of charge Subsequent visit - 80% of charge
Psychology	2	\$500 per person (combined limit for psychology & other services)	Initial visit - \$110.00 Subsequent visit - \$80.00

Acupuncture	2	\$400 per person (combined limit for acupuncture, remedial massage & other services)	Initial visit - \$30.00 Subsequent visit - \$30.00
Remedial massage	2		Initial visit - \$30.00 Subsequent visit - \$30.00
Hearing aids	12	\$1,500 per person 1 appliance(s) every 3 years (combined limit for hearing aids & other services)	Per hearing aid - \$1,500.00
Blood glucose monitors	12	\$150 per person 1 appliance(s) every 1 year (combined limit for blood glucose monitors & other services)	Per monitor - \$150.00
Audiology	2	No annual limit	Initial visit - 50% of charge Subsequent visit - 50% of charge
Ante-natal/Post-natal classes	2	\$500 per policy	Initial visit - 80% of charge
Exercise physiology	2	Combined limit - see Physiotherapy	Initial visit - \$20.00 Subsequent visit - \$20.00
Eye therapy (orthoptics)	2	Combined limit - see Physiotherapy	Initial visit - 80% of charge
Home nursing	2	\$1,200 per person (Sub-limits apply)	Initial visit - \$1,200.00
Occupational therapy	2	Combined limit - see Physiotherapy	Initial visit - \$80.00 Subsequent visit - \$65.00
Orthotics (podiatric orthoses)	12	\$400 per person	Orthotics supply & fit - \$400.00
Osteopathy	2	Combined limit - see Physiotherapy	Initial visit - \$45.00 Subsequent visit - \$32.00
Speech therapy	2	Combined limit - see Physiotherapy	Initial visit - \$50.00 Subsequent visit - \$40.00
Vaccinations	2	\$800 per person	Per service - \$100.00

This policy **X** does not include General treatment (Extras) cover for

X Other treatments - check with your insurer

Other features of this general treatment cover

Product also covers Osteopathy, Speech Therapy, Occupational Therapy, Homeopathy, Antenatal Classes, Cardiac Rehabilitation, Confinement by Midwife, Diabetes Education, Dietetics, Home Nursing, Orthopaedic Shoes, Vitamins, and more.

For further information about this policy see

<http://www.acahealth.com.au/LinkClick.aspx?fileticket=c1rwZZv2p5g%3d&tabid=159>

Ambulance cover

In All States this policy provides:

Emergency: Unlimited with no waiting period.

Call-out fees: will not be paid.

State schemes provide ambulance services for residents of Tasmania (<https://www.dhhs.tas.gov.au/ambulance>) and Queensland (<https://www.ambulance.qld.gov.au/>).

For further information about this policy see

<http://www.acahealth.com.au/LinkClick.aspx?fileticket=c1rwZZv2p5g%3d&tabid=159>

Disclaimer

The information contained in this Private Health Information Statement was provided by the insurer and is intended as general information. It may not take into account your particular circumstances. For information please contact the insurer.