Cover Summary
Medibank Gold Premier Signature.

medibank

Here's a summary of the services and treatments we pay benefits towards on your cover. Please read it and keep it somewhere safe for future reference. For a better understanding of how your cover works refer to your Member Guide, which is a summary of our Fund Rules and policies, or call us on **132 331.**

Hospital cover.

Hospital cover provides benefits when you are treated as a private patient admitted to hospital. It can only pay towards some services when you're not admitted to hospital such as ambulance. It won't pay towards seeing your GP and specialist.

Here are the services that are Included under your hospital cover. Before booking treatment, you should call us to ask about the benefits you can expect to receive and what out-of-pocket expenses you might incur.

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

What does it mean?

✔ **Included service**

We pay benefits towards overnight and same day hospital accommodation, intensive care and medical services where a Medicare benefit is payable.

It's important to know that if you are treated in a non-Members' Choice hospital, the benefits we pay are generally lower than for a Members' Choice hospital and you may incur significant out-of-pocket expenses. Members' Choice providers are not available in all areas.

Where you are treated as a private patient in a public hospital, we'll pay benefits towards overnight and same day accommodation in a shared room. If you have a private room in a public hospital, we may pay an additional amount towards this, but the hospital may still charge you an out-of-pocket expense.

Medibank hospital cover does not pay towards cosmetic treatment that is not medically necessary.

Common and Support Services

There are a number of Medicare Benefits Schedule (MBS) items that will also be included to support the services under this cover where a benefit is payable. These may include items like in-hospital consultations and some scans, tests and anaesthetics that are associated with your hospital admission.

- For ambulance attendance or transportation to a hospital where immediate professional attention is required and your medical condition is such that you couldn't be transported any other way. TAS and QLD have State schemes to cover ambulance services for residents of those States.

* Your hospital cover does not include non-PBS drugs. We will only pay towards cancer-related surgery where that surgery is an Included Service under your cover.

^ For Dental surgery performed by a dentist rather than a medical practitioner we only pay benefits towards hospital charges. If the surgery is performed by a medical practitioner and Medicare benefits are payable, we will pay benefits towards the hospital and medical charges.

\+ For Podiatric surgery we only pay benefits towards hospital charges. There are no Medicare benefits payable for podiatric surgery. This means we also don't pay any benefits towards the surgical podiatrist's fees under Hospital cover and you could incur significant out-of-pocket expenses.

Things you need to know about your Hospital cover.

Waiting periods.

A waiting period applies when you join Medibank, or change your cover to include new or upgraded services or lower your excess. We won't pay benefits for any items purchased or services received while you are serving a waiting period.

Accident Waiting Period Waiver.

Where a 1 day or 2 month waiting period applies to a service or treatment under your Hospital cover, it may be waived for claims resulting from an Accident that occurred after joining this cover.

Waiting periods	
1 day	Ambulance services.
2 months	Hospital psychiatric services, Rehabilitation and Palliative care.
	Hospital treatment for conditions requiring hospitalisation that are not deemed pre-existing conditions.
12 months	**Pre-existing conditions** An ailment, illness or condition that, in the opinion of a Medical Practitioner appointed by Medibank, the signs or symptoms of which existed at any time in the 6 month period ending on the day on which you became insured under the policy or changed your cover.
	Pregnancy and birth.
	CPAP-type devices.

Excess.

No excess is payable on this cover.

Making the most of your Hospital cover.

Go to a Members' Choice Hospital.

Medibank has arrangements with most private hospitals and day surgeries in Australia, so you generally get better value for Included Services if you go to one of these providers.

To find your nearest Members' Choice hospital, visit **medibank.com.au/memberschoice**

Members' Choice hospitals are subject to change from time to time and are not in all areas.

GapCover – how to reduce your in-hospital medical out-of-pocket expenses.

Medibank's GapCover is designed to help eliminate or reduce your out-of-pocket expenses for in-hospital doctor's charges.

Where your doctor decides to charge more than the MBS fee (the set government fee), you will be left with an out-of pocket expense, commonly referred to as the 'gap'.

Doctors can choose to participate in GapCover on a claim-by-claim basis.

Check upfront with each doctor involved if they'll participate in Medibank's GapCover for each claim as part of your treatment, to help reduce your out-of-pocket expense. Out-of-pocket expenses may still apply.

It's important to know GapCover doesn't apply to diagnostic services. See your Member Guide for more information.

Choice of treating doctor or specialist.

You can choose your doctor or specialist when you're treated in hospital as a private patient.

Medical devices and human tissue products.

For an Included Service, we'll pay the minimum benefit as listed in the Australian Government's Prescribed List of Medical Devices and Human Tissue Products.

Travel and Accommodation.

We pay benefits for travel and non-hospital accommodation related to an eligible hospital admission. Travel benefits are payable where the patient must travel more than 200km return. Accommodation costs are limited to $50 per night and travel costs are set at $0.15 per km. The total combined benefit payable for travel and accommodation is $100 per admission. Conditions apply, refer to your Member Guide.

CPAP-type devices.

Up to $1,000 benefit per member every 5 years towards the hire or purchase of an approved device.

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24/7 Medibank Nurse and Mental Health Support.

Medibank health insurance members can chat to a registered nurse or mental health professional and get guidance on what they can do next. Call **1800 644 325** or chat online any time of the day or night, 7 days a week at no extra cost.^

Private Room Promise.

If there isn't a private room available at a Members' Choice hospital, you may be entitled to receive $50 a night, for up to five nights per stay.

The following conditions apply to the Private Room Promise:

- You'll need to request a private room from the Members' Choice hospital at least 24 hours before your stay;
- You must provide supporting documentation to Medibank from the hospital about this request;
- You must be eligible to receive benefits for the treatment you received during your stay;
- Does not apply for same-day admissions, or admissions for sleep studies where Included, or where your doctor specifically requests a shared room for clinical reasons.

^ Some referred services may involve out of pocket costs and waiting periods may apply.

Making the most of your Extras cover.

Members' Choice extras providers.

If you visit a provider from our large Members' Choice network you'll generally get better value for money. This means you can take advantage of capped rates. When you visit a non-Members' Choice provider, you'll generally receive a lower benefit for those services. As long as the provider is a Medibank recognised provider, benefits are payable for services or items included under your cover.

Get more value at Members' Choice and Members' Choice Advantage providers.

100% back on up to 2 check-ups each year at Members' Choice Advantage dentists and this doesn't count towards annual limits.‡

100% back on a mouthguard each year, subject to your annual limits and capped prices.

100% back on optical items up to your annual limit, and discounts on most lenses and lens options.~

‡ Members can claim a maximum of two 100% back dental check-ups per member, per year either at a Members' Choice Advantage dentist (including up to two bitewing x-rays per check-up where required), or a Members' Choice dentist (excluding x-rays), or a combination of both. These check-ups do not count towards annual limits.

~ Some items excluded. A 6 month waiting period applies.

Included extras.

Here are the Extras services you can claim for, along with the limits and waiting periods that apply.

It's important to know that the benefit we pay for services or items is likely to be less than your annual limit and less than your provider's charge, which means you may have out-of-pocket expenses to pay.

Service	Example items and services	Waiting period	Amount you can claim	Annual limit per member
General dental* MC	Preventative treatment	2 months	Fixed Amount	No annual limit
	Dental examinations			
	Scale and clean			
	Surgical dental procedures (excluding hospital charges)	12 months		
Major dental* MC	Periodontics (eg. treatment of gum disease)	12 months	Fixed Amount	$2,000 combined limit 1
	Crowns, dentures and bridges			
	Major restorative fillings (eg. veneers)			
	Endodontic services (eg. root canal)			
Orthodontics*	Braces	12 months	100%	$800 annual limit $2,400 lifetime limit

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Service	Example items and services	Waiting period	Amount you can claim	Annual limit per member
Optical MC	Frames	6 months	100%	$250
	Prescription lenses			
	Contact lenses			
Physiotherapy MC	Consultations	2 months	Fixed Amount	$700
	Clinical pilates			
	Hydrotherapy sessions			
Non-PBS pharmaceuticals	Benefits for prescription-only non-PBS pharmaceuticals will be paid after the PBS co-payment amount has been deducted. Benefits are not payable if the item being claimed costs less than the current PBS co-payment	2 months	Fixed Amount	$600
Chiropractic MC	Consultations	2 months	Fixed Amount	Combined limit of $400
Osteopathy				
Remedial massage MC	Consultations	2 months	Fixed Amount	Combined limit of $200
Myotherapy				
Exercise physiology				
Chinese medicine	Consultations only			
Acupuncture MC	Consultations only	2 months	Fixed Amount	$400
Dietetics	Consultations and Jenny Craig weight loss benefit	2 months	Fixed Amount	$400
Podiatry MC	Consultations	2 months	Fixed Amount	$400
	Approved orthotics			
Occupational therapy	Consultations	2 months	Fixed Amount	$400
Eye therapy	Consultations	2 months	Fixed Amount	$400
Speech therapy	Consultations	2 months	Fixed Amount	$400
Mental health support	Consultations with psychologists, counsellors and mental health social workers	None	Fixed Amount	$400
	Pharmacogenetic testing for all conditions#			
School accidents	For pre-school, primary and secondary school students	2 months	Fixed Amount	$800
Health appliances and external prostheses	Insulin delivery pens, pressure therapy garments, braces, splints, non-podiatric orthoses, post-mastectomy bras and external mammary prostheses/ breast forms	2 months	Fixed Amount	$500
Breathing appliances	Peak flow meters, nebulisers and spacing devices only	12 months	Fixed Amount	$180 per member every 3 years
Blood glucose monitors and Blood pressure monitors	Purchase of devices only	24 months	Fixed Amount	$240 per member every 3 years
Hearing aids	Purchase of devices	36 months	Fixed Amount	$800

Benefit restrictions apply.

A referral letter is required. Refer to your Member Guide for more information.

MC Members' Choice providers are available for these services only.

* Benefits will only be paid towards dental and orthodontic treatments that are administered in person (not via phone or online), by a recognised provider.

\# Medibank will pay benefits towards pharmacogenetic tests for all conditions. Benefits will only be paid towards pharmacogenetic tests administered in-person, or for approved home kits where supporting documentation from a medical practitioner outlining the clinical purpose is supplied.

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PackageBonus.

The PackageBonus is an amount of money that accumulates each year to help pay for a range of approved membership and health-related expenses. Any member may claim PackageBonus benefits up to the maximum membership limit. There is a 6 month waiting period and entitlements apply from 1 January each year.

	Single membership	Couple/family membership
First calendar year of membership	$50	$100
Second calendar year of membership & each calendar year thereafter	$100	$200
Maximum membership limit	$500	$1,000
Any unused PackageBonus will be added to the following year's entitlement up to the maximum membership limit shown above, provided you stay on the same membership & on a cover with a PackageBonus.		

Benefit restrictions.

The Benefit Replacement Periods on your cover are shown below. A Benefit Replacement Period is the amount of time you need to wait from the date you purchase an item, before we pay towards a replacement for it.

Benefit Replacement Periods are separate to waiting periods.

Service category	Items	Benefit Replacement Period
Health appliances and external prostheses	Wigs, hip protectors and insulin delivery pens	24 months
	Other health appliances and external prostheses	36 months
Blood glucose monitors and blood pressure monitors	Blood glucose monitors and blood pressure monitors	36 months
Breathing appliances	Peak flow meters and nebulisers (per membership)	
	Spacing devices and nebulisers	
Major dental	Dentures, crowns and bridges	
Hearing aids	Hearing aids	60 months

Additional limitations such as service restrictions (clinical reasonability rules) may apply to some individual dental items and services.

Limits also apply to how often you can claim on some extras services. For example, you can only claim on one mouthguard per person, per calendar year.

Please contact us on **132 331** before your treatment.

Things you need to know about your Extras cover.

Members' Choice providers.

Medibank has arrangements with providers for some (but not all) services - these are known as Members' Choice providers. We've negotiated capped prices that Members' Choice Extras providers can charge, which generally means more money back in your pocket. You can still use a non-Members' Choice Extras provider, as long as they're recognised by Medibank, but you won't be able to take advantage of the capped pricing.

Members' Choice Advantage Extras providers are part of our Members' Choice Network and you may enjoy even better value when you need to use eligible extras services at these providers.

It's important to be aware that Medibank's Members' Choice and Members' Choice Advantage Extras providers are subject to change without notice, and are not available in all areas, so please check if they're a Members' Choice or Members' Choice Advantage provider before your treatment or service.

Find your nearest Members' Choice provider at **medibank.com.au/memberschoice**

Non-Members' Choice providers.

These are extras providers recognised by Medibank but with whom we don't have an agreement.

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Waiting periods.

This is a period of time you need to wait after taking out your cover before you're entitled to receive benefits for services or items included under your cover. You're not able to receive benefits for any items or services you might have obtained while you're serving a waiting period or before you joined Medibank.

Transferring from another health insurer?

You may not need to re-serve waiting periods if you transfer within two months. Benefits paid under your previous cover will be taken into account in determining the benefits payable under your Medibank cover.

Annual limits.

An annual limit is the maximum amount of benefits payable towards services, items or groups of services and/or items within a calendar year (i.e. 1 January to 31 December). A combined limit is an annual limit that applies to a group of services and/or items. Where the annual limit increases, it will increase on 1 January, up to the maximum limit. The first increase will be applied only after you've served one full calendar year of membership.

Lifetime limit.

Once you've reached this limit you can no longer claim that benefit in any future year of membership, even if you change your cover.

Fixed Amount.

This is the amount that is payable for a particular service or item. The amount of the Fixed Amount depends on the cover you hold and the type of service or item you receive and will not exceed the annual limit or the provider's charge.

Non-PBS Pharmaceuticals.

Coverage for Non-PBS prescription pharmaceuticals allows members to claim prescription medicines not covered by the Pharmaceutical Benefit Scheme (PBS).

- It must be a prescription only medication.
- You cannot claim medications obtainable over the counter without a prescription.
- You can claim non-PBS medications that cost more than the current PBS co-payment, this amount is deducted from the cost of the medication before a benefit amount is assessed.

The PBS co-payment is the amount Medicare card holders pay when purchasing medicines listed under the PBS scheme.

Refer to your Member Guide for further details.

Telehealth services.

Medibank pays towards telehealth consultations for some extras services, such as mental health support. Refer to the Member Guide or **medibank.com.au/telehealth** to check what other services on your cover are available through telehealth.

Manage your membership on the go.

Manage your membership anytime, anywhere with My Medibank. You can check extras balances, pay premiums, make claims on most extras, and update your details.

It only takes two minutes to sign up, just go to **medibank.com.au/members** to get started.

Live Better Rewards.

Live Better Rewards is Medibank's health and wellbeing program inspiring, supporting, and rewarding you to eat, move, and feel better, all while enjoying the things you do every day like walking, sleeping, eating healthy and more. Eligible Medibank members with eligible hospital and/or extras cover could earn rewards each year by redeeming the points earned for taking healthy actions.@ Plus, if you shop with our partner brands, you could earn even more points!

@ Must be aged 16+ to register, but some partners require you to be 18+ to earn and redeem. Must hold eligible Medibank hospital and/or extras cover (excluding Overseas Student Health Cover and Ambulance only cover), be up-to-date with premium payments and have signed up in the My Medibank app to earn and redeem points. Live Better Management Pty Ltd ACN 003 457 289 may receive commissions from partners. Points earning activities and rewards may change and may be subject to availability - we'll notify you of changes where possible. Additional terms may apply. See full Medibank Live Better Rewards terms at medibank.com.au/livebetter/rewards/terms

How to find out more.

Health insurance can be complicated, that's why we've prepared a glossary of useful terms that you can view online at **medibank.com.au/glossary**

This information is current as at 22 September 2026 and subject to change from time to time. If you'd like to change your cover, please contact us on **132 331**. Membership of Medibank Private is subject to our Fund Rules and policies which we can change from time to time and are summarised in our Member Guide.

Medibank Private Limited ABN 47 080 890 259