

Cover Summary

Medibank Gold Ultra Health Cover

Here's a summary of the services and treatments provided by 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 can pay towards services you receive when you're admitted to hospital and treated as a private patient. It can't pay towards any services when you're not admitted to hospital (eg. seeing your GP or specialist).

Here are the services that are Included under your Hospital cover.

You may still incur out-of-pocket expenses above the amount we pay. Before booking your treatment, call us to find out the benefits you can expect to receive, and any 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 podiatric surgeon)+	✓
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.

Medibank has arrangements with most private hospitals and day surgeries in Australia - these are known as Members' Choice hospitals. You'll generally get better value if you go to one of these providers.

If you're treated at a non-Members' Choice private hospital, we'll generally pay lower benefits and you may incur significant out-of-pocket expenses.

Where you're treated as a private patient in a public hospital, we'll pay benefits towards overnight and same-day accommodation in a shared room.

Medibank does not pay towards cosmetic treatment.

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 podiatric surgeon'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. We won't pay benefits for any items purchased or services received while you are serving a waiting period.

Switching from another health insurer?

You may not need to re-serve waiting periods if you join Medibank within 2 months of leaving your previous health insurer, and you've already served the waiting period for that service.

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.
6 months	UltraBonus.
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 prior to the day on which you became insured under the policy or changed your cover.
	Pregnancy and birth
	Continuous Positive Airway Pressure (CPAP)-type devices.

Excess

No excess is payable on this cover.

UltraBonus

This cover includes an UltraBonus that's applied towards approved out-of-pocket hospital and medical expenses associated with your hospital admission.

This bonus, which is applied to the membership, is topped up each year on 1 January and any unused UltraBonus will be added to the following year's amount. Please note, a 6-month waiting period applies.

To find out more about the UltraBonus, call us on **132 331**.

Single membership	\$100 per year
Couple/Family membership	\$200 per year

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.

Private Room Promise – a special feature on this cover

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;
- 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, or where your doctor specifically requests a shared room for clinical reasons.

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.

Surgically implanted prostheses

For an Included Service, we'll pay the minimum benefit as listed in the Australian Government's Prostheses List.

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 per admission are limited to \$50 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.

Continuous Positive Airway Pressure (CPAP)-type devices

Up to \$500 benefit per member every 5 years towards the hire or purchase of an approved device. Conditions apply, refer to your Member Guide.

24/7 Medibank Nurse




Members are supported around the clock by Medibank nurses on our 24/7 Medibank Nurse telephone service. Call 1800 644 325 for expert health-related advice any time of the day.

Extras cover







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

Through our Members' Choice network, you'll generally get better value for money with capped rates and a percentage back on what you're charged. With a non-Members' Choice provider, you'll generally get back a Fixed Amount for that service regardless of the provider's charge. As long as the provider is a Medibank recognised provider, benefits are payable for services or items included under your cover.


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 category	Example items and services	Waiting period	Amount you can claim		Annual limit per member
			Members' Choice provider	Non-Members' Choice provider	
Optical*	Frames	6 months	100%		\$300
	Prescription lenses				
	Contact lenses				
General dental*	Preventative treatment	2 months	100%	Fixed Amount	No annual limit 
	Dental examinations				
	Scale and clean				
	Surgical dental procedures (excluding hospital charges)	12 months			
Major dental*	Endodontic services (eg. root canal)	12 months	100%	Fixed Amount	\$1,600 
	Periodontics (eg. treatment of gum disease)				
	Crowns, dentures and bridges				
	Major restorative fillings (eg. veneers)				
Orthodontics	Braces	12 months	100%		\$1,500 opening balance. Top up of \$500 per year. Up to a \$3,500 lifetime limit
Physiotherapy*	Consultations	2 months	100%	Fixed Amount	\$1,000
	Clinical pilates				
	Hydrotherapy sessions				
Chiropractic*	Consultations	2 months	100%	Fixed Amount	Combined limit of \$750
Osteopathy			Fixed Amount		
Natural therapies	Consultations for remedial massage and acupuncture*	2 months	100%	Fixed Amount	Combined limit of \$500
	Consultations for exercise physiology and Chinese medicine		Fixed Amount		
Non-PBS Pharmaceuticals	Benefits for prescription-only non-PBS pharmaceuticals will be paid after a set charge has been deducted. Refer to your Member Guide for further details	2 months	Fixed Amount		\$800
Podiatry*	Consultations	2 months	100%	Fixed Amount	\$600
	Approved orthotics 				
Dietetics	Consultations only	2 months	Fixed Amount		\$600
Psychology	Consultations only	None	Fixed Amount		\$600
Occupational therapy	Consultations only	2 months	Fixed Amount		\$600

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Service category	Example items and services	Waiting period	Amount you can claim		Annual limit per member
			Members' Choice provider	Non-Members' Choice provider	
Eye therapy	Consultations only	2 months	Fixed Amount		\$600
Speech therapy	Consultations only	2 months	Fixed Amount		\$600
Health appliances and external prostheses 	Insulin delivery pens, pressure therapy garments, braces, splints, orthoses, post-mastectomy bras and external mammary prostheses/breast forms	2 months	Fixed Amount		\$600 
Breathing appliances 	Peak flow meters, nebulisers, spacing devices only	12 months	100%		Combined limit of \$300 
Blood glucose monitors and blood pressure monitors 	Purchase of devices only	24 months			
Hearing aids	Purchase of devices	36 months	100%		\$1,600 
Laser eye surgery	Where no Medicare benefit is payable	36 months	100%		\$3,500 lifetime limit
Health subscriptions	Membership fees for approved health bodies and organisations	2 months	100%		\$100
Health screening tests	Bone density tests, MRI's, retinal scans and bowel cancer screening tests where no Medicare benefits are payable	2 months	100%		\$200
Private hospital accident and emergency facility fees	Emergency department fees. Not available at all private hospitals. Please check whether your private hospital offers an accident and emergency department	2 months	100%		\$250
Teeth whitening*	Approved teeth whitening services provided by a recognised dentist	2 months	100%	Fixed Amount	\$400 (3 year limit starting from 1st claim)
Home nursing	Towards services provided by recognised home nursing providers (not available in NT or TAS)	2 months	100%		\$500

 Benefit replacement periods apply.

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

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

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How do orthodontic benefits work?

Your orthodontic limit starts with an opening balance which you can access after your 12-month waiting period.

Every year on 1 January after this waiting period, the balance is topped up with an additional amount up to the maximum lifetime limit.

The benefits you can claim after your waiting period:



* Includes benefits paid by Medibank or other private health insurers.

Things you need to know about your Extras cover

Waiting periods

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

Switching from another health insurer?

You may not need to re-serve waiting periods if you join Medibank within 2 months of leaving your previous health insurer, and you've already served the waiting period for that service. 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 we pay towards services and/or items within a calendar year. A combined limit is an annual limit that applies to a group of services and/or items.

Lifetime limit

This is a once-only limit that isn't reset each year. When you reach this limit, you can no longer claim that benefit again, even if you change your cover.

Fixed Amount

This is the amount we'll pay towards the cost of an Extras service or item if you visit a non-Members' Choice provider. It will generally be lower than the amount you would receive when you visit a Members' Choice provider. The amount of the Fixed Amount depends on the cover you hold and the type of service or item you receive.

Benefit Replacement Periods

This is the amount of time you need to wait from the date you purchase an item, before we pay towards a replacement for it. Below are the benefit replacement periods that apply to your cover. Additional limitations may apply to some individual dental items and services, please contact us on **132 331** before your treatment.

Benefit replacement periods are separate to waiting periods.

Service category	Items	Benefit replacement period
General dental	Mouthguards	12 months
Health appliances and external prostheses	External mammary prostheses and repairs of external prostheses	12 months
	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	Nebulisers, spacing devices and peak flow meters	
Major dental	Dentures, crowns and bridges	
Hearing aids	Hearing aids	60 months

Making the most of your Extras cover

Use Members' Choice Extras 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.

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

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

Check your available Extras balances

You can see your available Extras balances online at My Medibank. You can also update your details, check what your cover includes, make a payment and much more.

Best of all, it only takes two minutes to sign up for My Medibank, at medibank.com.au/members

You can also download the Medibank app on your smartphone. Just search for Medibank in your app store or go to medibank.com.au/mobile

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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