

Family

F - Fortnightly M - Monthly Q - Quarterly

Family	Excess		Before Rebate			30% Rebate			35% Rebate			40% Rebate		
	Adult	Policy	F	M	Q	F	M	Q	F	M	Q	F	M	Q
Premier Hospital	Nil	Nil	\$144.30	\$312.65	\$938.00	\$101.00	\$218.85	\$656.60	\$93.75	\$203.20	\$609.70	\$86.55	\$187.55	\$562.80
	250	500	\$126.00	\$273.00	\$818.95	\$88.20	\$191.10	\$573.25	\$81.90	\$177.45	\$532.30	\$75.60	\$163.80	\$491.35
	500	1000	\$106.05	\$229.75	\$689.25	\$74.20	\$160.80	\$482.45	\$68.90	\$149.30	\$448.00	\$63.60	\$137.85	\$413.55
	*1000	*2000	\$68.30	\$148.00	\$444.05	\$47.80	\$103.60	\$310.80	\$44.35	\$96.20	\$288.60	\$40.95	\$88.80	\$266.40
Public Hospital	Nil	Nil	\$88.65	\$192.10	\$576.30	\$62.05	\$134.45	\$403.40	\$57.60	\$124.85	\$374.55	\$53.15	\$115.25	\$345.75
Premier Package	Nil	Nil	\$187.15	\$405.50	\$1,216.45	\$131.00	\$283.85	\$851.50	\$121.65	\$263.55	\$790.65	\$112.25	\$243.30	\$729.85
	250	500	\$168.85	\$365.80	\$1,097.40	\$118.20	\$256.05	\$768.15	\$109.75	\$237.75	\$713.30	\$101.30	\$219.45	\$658.40
	500	1000	\$148.90	\$322.55	\$967.70	\$104.20	\$225.75	\$677.35	\$96.75	\$209.65	\$629.00	\$89.35	\$193.50	\$580.60
	*1000	*2000	\$111.15	\$240.85	\$722.50	\$77.80	\$168.60	\$505.75	\$72.25	\$156.55	\$469.60	\$66.65	\$144.50	\$433.50
Essential Package	Nil	Nil	\$179.40	\$388.65	\$1,165.95	\$125.55	\$272.05	\$816.15	\$116.60	\$252.60	\$757.85	\$107.65	\$233.15	\$699.55
	250	500	\$161.05	\$348.95	\$1,046.90	\$112.70	\$244.25	\$732.80	\$104.65	\$226.80	\$680.45	\$96.60	\$209.35	\$628.10
	500	1000	\$141.10	\$305.75	\$917.20	\$98.75	\$214.00	\$642.00	\$91.70	\$198.70	\$596.15	\$84.65	\$183.45	\$550.30
	*1000	*2000	\$103.40	\$224.00	\$671.95	\$72.35	\$156.80	\$470.35	\$67.20	\$145.60	\$436.75	\$62.05	\$134.40	\$403.15
Public Hospital With Premier Extras	Nil	Nil	\$131.50	\$284.90	\$854.75	\$92.05	\$199.40	\$598.30	\$85.45	\$185.15	\$555.55	\$78.90	\$170.90	\$512.85
Premier Extras	Nil	Nil	\$47.90	\$103.75	\$311.20	\$33.50	\$72.60	\$217.80	\$31.10	\$67.40	\$202.25	\$28.75	\$62.25	\$186.70

Family Dependant Plus

F - Fortnightly M - Monthly Q - Quarterly

Family Dependant Plus	Excess		Before Rebate			30% Rebate			35% Rebate			40% Rebate		
	Adult	Policy	F	M	Q	F	M	Q	F	M	Q	F	M	Q
Premier Hospital	Nil	Nil	\$173.15	\$375.20	\$1,125.55	\$121.20	\$262.65	\$787.85	\$112.50	\$243.85	\$731.60	\$103.85	\$225.10	\$675.30
	250	500	\$151.20	\$327.60	\$982.80	\$105.80	\$229.30	\$687.95	\$98.25	\$212.90	\$638.80	\$90.70	\$196.55	\$589.65
	500	1000	\$127.25	\$275.70	\$827.10	\$89.05	\$192.95	\$578.95	\$82.70	\$179.20	\$537.60	\$76.35	\$165.40	\$496.25
	*1000	*2000	\$81.95	\$177.60	\$532.80	\$57.35	\$124.30	\$372.95	\$53.25	\$115.40	\$346.30	\$49.15	\$106.55	\$319.65
Premier Package	Nil	Nil	\$224.55	\$486.55	\$1,459.70	\$157.15	\$340.55	\$1,021.75	\$145.95	\$316.25	\$948.80	\$134.70	\$291.90	\$875.80
	250	500	\$202.60	\$438.95	\$1,316.90	\$141.80	\$307.25	\$921.80	\$131.65	\$285.30	\$855.95	\$121.55	\$263.35	\$790.10
	500	1000	\$178.65	\$387.10	\$1,161.25	\$125.05	\$270.95	\$812.85	\$116.10	\$251.60	\$754.80	\$107.15	\$232.25	\$696.75
	*1000	*2000	\$133.40	\$289.00	\$866.95	\$93.35	\$202.30	\$606.85	\$86.70	\$187.85	\$563.50	\$80.05	\$173.40	\$520.15
Essential Package	Nil	Nil	\$215.25	\$466.40	\$1,399.15	\$150.65	\$326.45	\$979.40	\$139.90	\$303.15	\$909.45	\$129.15	\$279.85	\$839.45
	250	500	\$193.25	\$418.75	\$1,256.30	\$135.25	\$293.10	\$879.40	\$125.60	\$272.15	\$816.60	\$115.90	\$251.25	\$753.75
	500	1000	\$169.35	\$366.90	\$1,100.70	\$118.55	\$256.80	\$770.50	\$110.05	\$238.45	\$715.45	\$101.60	\$220.10	\$660.40
	*1000	*2000	\$124.05	\$268.80	\$806.35	\$86.80	\$188.15	\$564.40	\$80.60	\$174.70	\$524.10	\$74.40	\$161.25	\$483.80

* High income earners (this level is set by the Federal Government) will not be exempt from the Medicare Levy Surcharge if a hospital policy with an excess of more than \$500 per adult is taken. For clarification of this Rule, call us on **Freecall 1800 804 950**.

No adult on a Family Policy with excess will pay more than half the selected excess.

No excess charged for child admissions.

No excess on same day treatments.