



HCI BRONZE PLUS HOSPITAL PRODUCT SUMMARY



Bronze Plus cover is a product that won't break the budget.

This summary provides an overview of the services and treatments provided by our Bronze Plus Hospital cover purchased on or after 1 March 2023. You should read this together with our Guide to Cover, available from our website.

This policy includes:

Blood
Bone, joint and muscle
Brain and nervous system
Breast surgery (medically necessary)
Chemotherapy, radiotherapy and immunotherapy for cancer
Dental surgery
Diabetes management (excluding insulin pumps)
Digestive system
Eye (not cataracts)
Ear, nose and throat
Gastrointestinal endoscopy
Gynaecology
Hernia & Appendix
Joint reconstructions
Kidney and bladder
Male reproductive system
Miscarriage and termination of pregnancy
Pain management
Palliative care
Skin
Sleep studies
Tonsils, adenoids and grommets

This policy includes restricted cover for:

Hospital psychiatric services
Rehabilitation

RESTRICTED SERVICES

A Restricted Service is a service where we pay the minimum benefit set by the Government towards hospital accommodation.

For Restricted Services as a private patient in a public hospital, we will pay minimum shared room benefits. If you're treated in a private hospital for a Restricted Service, you may incur substantial out-of-pocket expenses.

FEATURES:

Access to more than
500 private hospitals and
30,000 doctors across Australia



Covered for up to 100% for hospital
accommodation costs



No excess for dependent children under
the age of 18 years



BRONZE PLUS HOSPITAL INCLUDES:

- ✓ Added benefit of Accident Cover in case you have an accident that requires hospitalisation for medical treatment
- ✓ A \$750 excess per person to keep your premiums low
- ✓ Private room accommodation (if available)

For more information on HCI's Accident Cover visit www.hcilt.com.au/accident-cover

Just starting out? Bronze Plus Hospital might be for you

Keep your budget balanced - ask us about
Bronze Plus hospital today!





HCi BRONZE PLUS HOSPITAL COVER



This policy excludes:

Assisted reproductive services
Back, neck and spine
Cataracts
Dialysis for chronic kidney failure
Heart and vascular system
Implantation of hearing devices
Insulin pumps
Joint replacements
Lung and chest
Pain management with device
Plastic and reconstructive surgery (medically necessary)*
Podiatry surgery (provided by a registered podiatric surgeon)
Pregnancy and birth
Weight loss surgery

*Plastic surgery which is medically necessary and related to the treatment of a skin-related condition is covered under the "Skin" clinical category.

EXCLUDED SERVICES

An Excluded Service (see above for more information) is a service that we won't pay any benefits towards, including any hospital accommodation or medical services.

THINGS YOU NEED TO KNOW

Waiting Periods

A waiting period applies when you join HCl, or change your cover to include new or upgraded services. We won't pay benefits for relevant items during a waiting period.

Transferring from another health fund? We'll look after you when you transfer to HCl by honouring any waiting periods you've already served on equivalent cover. If your transfer includes an upgrade of cover, then the waiting periods below will apply to any new or upgraded services.

12 months	for pre-existing conditions
2 months	for palliative care, rehabilitation and hospital psychiatric treatments, even if pre-existing condition
2 months	for all other treatments

Pre-Existing Conditions

Pre-existing conditions are ailments, illnesses or conditions where signs or symptoms existed during the 6 months prior to joining HCl (or upgrading your cover).

Excess

This is the amount you pay towards a (same-day or overnight) hospital admission before we pay any benefits. HCl will waive the excess for any dependants on your policy under the age of 18. The excess level on this product is \$750. The excess applies per adult, per calendar year. Some hospitals may require you to pay the excess at the time of admission.

Hospital Accommodation Costs

HCl covers you for up to 100% of accommodation fees and theatre fees on eligible services in contracted hospitals and day surgery

facilities in Australia. Relevant medical treatment relating to your accident will be covered for up to 90 days following the date of the accident. On restricted services, you are likely to have out-of-pocket costs, as HCl will pay only up to the set government fee for your hospital accommodation.

Hospital Network Access

HCl has agreements with more than 500 private hospitals and day surgery hospital facilities around Australia. For a comprehensive list of our contracted hospitals in your local area, visit hcilt.com.au/provider-search.

Remember Medicare covers public hospital treatment for Australian residents and emergency patients normally go to a public hospital with Intensive Care Units.

Medical Costs

Under the Commonwealth Medical Benefits Schedule (MBS) fees are determined and split between HCl and Medicare.

Between HCl and Medicare we cover 100% of the MBS. Prior to treatment it is imperative to discuss with your doctor if there will be any out of pocket expenses. If your doctor charges over the MBS fee HCl cannot cover these expenses.

Gap Costs

If you need specialist care in hospital, your doctor can use HCl's Access Gap Cover. Access Gap is a simple billing system that aims to eliminate out-of-pocket expenses all together, or reduce them considerably. Through Access Gap your doctor can let you know exactly what you have to pay prior to treatment.

Medicare Levy Surcharge (MLS)

This policy exempts you from the MLS.

Travel and Accommodation

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

What's Not Covered?

- Outpatient services including treatment received in an emergency department or within a doctor's room who operates outside of the hospital. Your hospital cover does not cover you until you are 'admitted' to the hospital
- Cosmetic surgery
- Extra services beyond the hospital treatment plan
- Personal expenses while in hospital, such as phone calls, newspapers and TV rental
- Hospital Benefits where the professional services performed are not eligible for Medicare
- Pharmaceutical items supplied or prescribed on discharge
- Medical Gap
- Surgically implanted prostheses gap

Always check with the hospital and your doctor before proceeding with a hospital booking to ensure you will be covered and to discuss what costs you may incur.

HCl reserves the right to make changes to its products, benefits, terms and conditions from time to time. HCl will notify members a reasonable time in advance of any changes that might be detrimental to members' interests.

CONTACT US

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