



HCI GOLD HOSPITAL PRODUCT SUMMARY



Gold Hospital ensures you can have total confidence in your hospital cover.

This summary provides an overview of the services and treatments provided by our Gold Hospital cover purchased on or after 1 February 2023. You should read this together with our [Guide to Cover](#), available from our website.

This policy includes:

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

KEY FEATURES:

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



Access to our complete range of "Low or Gap" hospital agreements to help keep out of pocket expenses under control so you can get the most out of your cover.



Your choice of excess - so you can choose how much you want to pay should you be admitted to hospital



GOLD HOSPITAL INCLUDES:

- ✓ \$250, \$500 and \$750 excess options
- ✓ Travel and accommodation benefits (for costs relating to a hospital admission).
- ✓ No excess for eligible dependent children under the age of 18 years.
- ✓ We also waive the excess for same day surgery admissions.

Need extras cover?

Ask about our Premier Extras available with HCI Gold Hospital cover



HCi - Gold Hospital Cover



THINGS YOU NEED TO KNOW

Waiting Periods

A waiting period applies when you join HCi, 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 HCi 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 pregnancy and birth related services, and pre-existing conditions
2 months	for palliative care, rehabilitation and hospital psychiatric treatments, even if pre-existing condition
2 months	for all other treatments (unless considered as pre-existing)

Pre-Existing Conditions

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

Excess

This is the amount you pay towards your hospital admission before we make any payments.

Generally, the higher your excess, the lower your premium. The excess applies per adult, per calendar year. Some hospitals may require you to pay the excess at the time of admission. HCi will waive the excess on same day admissions (day surgery), and for any dependants on your policy under the age of 18.

Medicare Levy Surcharge

Having this policy exempts you from the Medicare Levy Surcharge (MLS).

Hospital Accommodation Costs

HCi covers you for up to 100% of accommodation costs and theatre fees on eligible services in contracted hospitals and day surgery facilities in Australia.

Hospital Network Access

HCi 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.

It's important to remember that as an Australian resident, Medicare covers public hospital treatment and emergency patients will 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 HCi and Medicare.

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

Gap Costs

In the event you need specialist care in hospital, your doctor can use HCi'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.

What's Not Covered?

- Outpatient services including treatment received in an emergency department or within a doctor's room operated outside of the hospital. Your hospital cover does not cover you until you are 'admitted' to a hospital
- Cosmetic surgery
- Extra services beyond the hospital treatment plan
- Personal expenses while in hospital, such as phone calls, newspapers and TV rental
- Hospital claims 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.

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

Contact us

Freecall: **1800 804 950**  
Email: enquiries@hcilt.com.au
www.hcilt.com.au

A Registered Private Health Insurer
ABN 43 009 579 088