Medical cover

We pay benefits towards medical services provided by a doctor either in or out of hospital, that are listed in the Australian Government Medicare Benefits Schedule. No benefits are payable for excluded services, see ‘Things we don’t pay benefits for’ below. You must pay the difference, if any, between the benefit Medibank pays you and the actual fee charged by the doctor.

The benefits payable under Medibank Comprehensive OSHC are shown below:

<table>
<thead>
<tr>
<th>Services</th>
<th>Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Practitioners.</td>
<td>Benefits equivalent to 100% of the Medicare Benefit Schedule (MBS) fee.</td>
</tr>
<tr>
<td>All other medical services provided out of hospital (eg. specialists, pathology and x-rays).</td>
<td>Benefits equivalent to the published 85%* MBS fee.</td>
</tr>
<tr>
<td>Medical services provided when admitted to hospital (eg. surgeon’s fees, anaesthetist’s fees).</td>
<td>Benefits equivalent to 100% of the MBS fee.</td>
</tr>
</tbody>
</table>

Hospital cover

Things we pay benefits for when admitted to hospital

All services recognised for Medicare benefit purposes unless on the list of excluded services.

Covered services include:
- Obstetrics and pregnancy-related services
- Heart-related admissions such as angiograms or open heart & bypass surgery
- Colonoscopies
- Appendicitis treatment
- Removal of tonsils & adenoids
- Knee & shoulder reconstruction surgery & investigations
- Plastic & reconstructive surgery (excludes cosmetic treatment)
- Major eye surgery – including cataract & lens-related services
- Hip & knee joint replacement surgery
- Renal dialysis
- Psychiatric treatment
- Rehabilitation treatment
- Palliative care
- Surgical removal of wisdom teeth (for hospital charges only).

Members’ Choice private hospitals

For these services we pay benefits towards:
- Private hospital accommodation
  - overnight admissions in a shared or private room
  - same day admissions
  - intensive care
  - theatre fees.

Non Members’ Choice private hospitals

For these services we pay benefits as listed above however, the benefits are generally lower than those payable in a Members’ Choice private hospital and could result in significant out-of-pocket expenses.

Public hospitals

For these services where you are treated as a private patient in a public hospital we pay benefits towards:
- overnight admissions in a shared room
- same day admissions (shared room only)
- outpatient accident and emergency department fees, including outpatient medical and post-operative services (fees raised by the hospital for treatment where you are not an admitted patient).

Other benefits include:
- choice of doctor or specialist for medical treatment in hospital
- doctors, fees for in-hospital medical services when you are treated as a private patient
- surgically implanted prostheses and other items on the Federal Government’s Prostheses List
- ambulance – for eligible services where immediate professional attention is required.

You will be responsible for paying any difference between the benefit we pay and the hospital charge. It is important that you check your benefit entitlement with Medibank before going into hospital.

* The published 85% MBS fee may not equal exactly 85% of the total MBS fee but is an amount published in the MBS as set by the Australian Government.
Things we don’t pay benefits for

We don’t pay any benefits towards the following services:

• Fertility treatment such as IVF & GIFT programs
• Cosmetic treatment i.e. surgery that isn’t clinically necessary and for which Medicare benefits aren’t payable
• Treatment not considered medically necessary e.g. health screening services and medical examinations, x-rays or pathology required by the Department of Immigration and Border Protection (DIBP) as part of the student visa renewal process.

Health Support for our members

• 24 hour, 7 days a week Student Health and Support Line 1800 887 283 for:
  - Medical assistance from a registered nurse
  - Counselling services
  - Emergency legal advice
  - Travel document assistance
  - Health system guide
  - Family and friends message service
  - Living in Australia support
  - Interpreter service

Prescription medicines

Comprehensive OSHC provides benefits towards the cost of prescription medicines, with the exception of oral contraceptives and medicines prescribed for cosmetic purposes.

• You will be required to pay a contribution towards the cost of each prescription item. Medibank will then pay benefits to a maximum of $50 per item. You will need to pay for any charges above the benefits we pay.
• An annual limit of $300 per calendar year (1 January to 31 December) per single membership and $600 per calendar year per couple or family membership applies (sub-limit of $300 per person).

Waiting periods

A waiting period 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 covered. These waiting periods include:

• 12 months for obstetrics and pregnancy-related services
• 12 months for pre-existing conditions [excluding psychiatric treatment].

A pre-existing condition is an ailment, illness, or condition where signs or symptoms existed at any time during the six months before your cover commenced.

Benefits are not generally payable for any services or items obtained while you are serving a waiting period. However, the waiting period does not apply when your treating medical practitioner certifies and Medibank agrees that the member required emergency treatment.

How to find out more

If at any time you gain access to full Medicare entitlements or your visa status changes (e.g. you are granted permanent residency), this cover may no longer be suitable. Please contact us if your circumstances change.

If you would like to find out more about your membership please refer to the Comprehensive OSHC Membership Guide which tells you about your cover and what you can and cannot claim for. It also includes a summary of the policies of Medibank as they apply to Comprehensive OSHC and includes the meaning of terms used in this document.

Where possible before booking treatment, you should always call us to ask about the benefits you can expect to receive and any out-of-pocket expenses you might incur.

It’s also a good idea to confirm any out-of-pocket expenses before admission with the hospital and doctors (including the surgeon, assistant surgeon and anaesthetist).

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