

Fund Name: ACA Health Benefits Fund

Address: Locked Bag 2014
WAHROONGA NSW 2076

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Chief Executive Officer: Jody Burgoyne

Hospital Claims Enquires: 1300 368 390 Option 1
hospitalclaims@acahealth.com.au

Membership Enquires: 1300 368 390 Option 2
membership@acahealth.com.au

To confirm patient eligibility and membership level of cover please contact the Fund prior to admission.

Table: DH

Tier: Gold

Description: Gold Deluxe Hospital
MOIETY PER DAY – N/A
SERVICES SUBJECT TO MOIETY - N/A
EXCESS – N/A
EXCLUSIONS – N/A

Table: PH

Tier: Gold

Description: Gold Private Hospital
MOIETY PER DAY - \$100
SERVICES SUBJECT TO MOIETY – All Services
In the instance where there is an ERC add-on, moiety of \$100 per day still applies. Please contact the Fund to confirm rehabilitation days per admission.
EXCESS – N/A
EXCLUSIONS – N/A

Table: SH

Tier: Silver Plus

Description: Silver Private Hospital
MOIETY PER DAY - N/A
SERVICES SUBJECT TO MOIETY - N/A
EXCESS - \$750 per Person/Calendar Year
EXCLUSIONS - Cataracts, Joints, Obstetrics, Assisted reproductive services
RESTRICTIONS - Psych, Rehab Paid at Gov default

Table: SV

Tier: Silver Plus

Description: Silver Private Hospital
MOIETY PER DAY - N/A
SERVICES SUBJECT TO MOIETY - N/A
EXCESS - \$500 per Person/Calendar Year
EXCLUSIONS - Cataracts, Joints, Obstetrics, Assisted reproductive services
RESTRICTIONS - Psych, Rehab Paid at Gov default

Table: BE

Tier: Bronze

Description: Bronze Essentials Hospital
MOIETY PER DAY – N/A
SERVICES SUBJECT TO MOIETY - N/A
EXCESS - \$750 per Person/Calendar Year (not applicable to child dependant)
EXCLUSIONS - Heart and Vascular, Lung and Chest, Blood, Back, Neck and Spine, Plastic Reconstructive Surgery, Dental Surgery, Podiatric Surgery, Implantation of Hearing Devices, Cataracts, Joint Replacements, Dialysis, Pregnancy and Birth, Assisted Reproductive Surgery, Weight Loss Surgery, Insulin Pumps, Pain Management with Device, Sleep Studies

Table: BV

Tier: Bronze

Description: Bronze Essentials Hospital
MOIETY PER DAY – N/A
SERVICES SUBJECT TO MOIETY - N/A
EXCESS - \$500 per Person/Calendar Year (not applicable to child dependant)
EXCLUSIONS - Heart and Vascular, Lung and Chest, Blood, Back, Neck and Spine, Plastic Reconstructive Surgery, Dental Surgery, Podiatric Surgery, Implantation of Hearing Devices, Cataracts, Joint Replacements, Dialysis, Pregnancy and Birth, Assisted

Reproductive Surgery, Weight Loss Surgery, Insulin Pumps, Pain Management with Device, Sleep Studies

Table: BH

Tier: Basic

Description: Basic Hospital

All services paid at government default public hospital rates, No Theatre Fees payable

MOIETY PER DAY – N/A

SERVICES SUBJECT TO MOIETY - N/A

EXCESS – N/A

EXCLUSIONS – N/A

NOTES