

# GMHBA PRODUCT INFORMATION SHEET

**Fund Name:** GMHBA Limited (including GMHBA & FRANK)

**Address:** 60-68 Moorabool Street  
Geelong VIC 3220

**Telephone:** 1300 446 422

**Facsimile:** 03 5221 4582

**E-mail:** [service@gmhba.com.au](mailto:service@gmhba.com.au)

**Chief Executive Officer:** Mr David Greig

**Claims Enquiries:** Claims Department via Provider telephone number (1300 301 437)

**Membership Enquiries:** Membership Department via Service telephone number (1300 446 422)

**Eligibility:** [Patient eligibility and membership level of cover should be confirmed at https://echeck.hams.com.au/Login/tabid/63/Default.aspx?returnurl=%2fdefault.aspx prior to patient admission.](https://echeck.hams.com.au/Login/tabid/63/Default.aspx?returnurl=%2fdefault.aspx)

## GMHBA Health Insurance

**Product:** **Accident Only Hospital (Basic) GAH3 (Open)**

**Description:** Accident Protection provides cover for hospital treatment that is required as the result of an accident. If you have an accident, you'll be covered for treatments that are normally excluded or restricted on your cover, when initial treatment is sought through a doctor or an Emergency Department within 48 hours of sustaining the injury. Any related hospital admission must occur within 90 days from date of injury, and an Accident Declaration form must be supplied to GMHBA for benefits to be

**Other:**

**Inclusions (Private):** Accident Protection - See description

**Exclusions:**

<ul style="list-style-type: none"> <li>û Brain and nervous system</li> <li>û Eye (not cataracts)</li> <li>û Ear, nose and throat</li> <li>û Tonsils, adenoids and grommets</li> <li>û Bone, joint and muscle</li> <li>û Joint reconstructions</li> <li>û Kidney and bladder</li> <li>û Male reproductive system</li> <li>û Digestive system</li> <li>û Hernia and appendix</li> <li>û Gastrointestinal endoscopy</li> <li>û Gynaecology</li> <li>û Miscarriage and termination of pregnancy</li> <li>û Chemotherapy, radiotherapy and immunotherapy for cancer</li> <li>û Pain Management</li> <li>û Skin</li> <li>û Breast surgery (medically necessary)</li> <li>û Diabetes management (excluding insulin pumps)</li> </ul>	<ul style="list-style-type: none"> <li>û Heart and vascular system</li> <li>û Lung &amp; Chest</li> <li>û Blood</li> <li>û Back, neck and spine</li> <li>û Plastic and reconstructive surgery (medically necessary)</li> <li>û Dental surgery</li> <li>û Podiatric surgery (provided by an accredited podiatric surgeon)</li> <li>û Implantation of hearing devices</li> <li>û Cataracts</li> <li>û Joint replacements</li> <li>û Dialysis for chronic kidney failure</li> <li>û Pregnancy and birth</li> <li>û Assisted reproductive services</li> <li>û Weight loss surgery</li> <li>û Insulin pumps</li> <li>û Pain Management with Device</li> <li>û Sleep studies</li> </ul>
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**Restrictions:** Rehabilitation  
Hospital psychiatric services  
Palliative care

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess	Level 3 Excess
Admission excess (private hospital – overnight)	-	-	-	GAH3 \$750
Waived for private hospital day stays	-	-	-	YES
Admission excess (public hospital or day stay)	-	-	-	\$375
Maximum annual excess - per person	-	-	-	\$750
Maximum annual excess – singles	-	-	-	\$750
Maximum annual excess – families	-	-	-	\$1,500
Excess waived for child dependants under 21	-	-	-	No

**Product:** **GMHBA Basic Plus Hospital: BH0 (Closed), BH1 (Closed), BH2 (Closed)**

**Description:** Covered in a public hospital as a private patient in a shared room, but will face considerable out-of-pocket costs if treated in a private hospital (shared room default benefits as prescribed by commonwealth government).  
PROSTHESES: Benefits are as Government prescribes.

**Other:**

**Inclusions (Private):** n/a

**Exclusions:** û Dialysis for chronic kidney failure

û Weight loss surgery

û Insulin pumps

**Restrictions:**

<ul style="list-style-type: none"> <li>Rehabilitation</li> <li>Hospital psychiatric services</li> <li>Palliative care</li> <li>Brain and nervous system</li> <li>Eye (not cataracts)</li> <li>Ear, nose and throat</li> <li>Tonsils, adenoids and grommets</li> </ul>	<ul style="list-style-type: none"> <li>Breast surgery (medically necessary)</li> <li>Diabetes management (excluding insulin pumps)</li> <li>Heart and vascular system</li> <li>Lung &amp; Chest</li> <li>Blood</li> <li>Back, neck and spine</li> <li>Plastic and reconstructive surgery (medically necessary)</li> </ul>
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Bone, joint and muscle  
 Joint reconstructions  
 Kidney and bladder  
 Male reproductive system  
 Digestive system  
 Hernia and appendix  
 Gastrointestinal endoscopy  
 Gynaecology  
 Miscarriage and termination of pregnancy  
 Chemotherapy, radiotherapy and immunotherapy for cancer  
 Pain Management  
 Skin

Dental surgery  
 Podiatric surgery (provided by an accredited podiatric surgeon)  
 Implantation of hearing devices  
 Cataracts  
 Joint replacements  
 Pregnancy and birth  
 Assisted reproductive services  
 Pain Management with Device  
 Sleep studies

Moiety per day: n/a

Excess:

Excess Options Table	Level 0 Excess BHO	Level 1 Excess BH1	Level 2 Excess BH2	Level 3 Excess
Admission excess (private hospital – overnight)	\$0	\$250	\$500	-
Waived for private hospital day stays	No	No	No	-
Admission excess (public hospital or day stay)	\$0	\$250	\$500	-
Maximum annual excess - per person	\$0	\$250	\$500	-
Maximum annual excess – singles	\$0	\$250	\$500	-
Maximum annual excess – families	\$0	\$500	\$1,000	-
Excess waived for child dependants under 21	No	No	No	-

Product: Basic Plus Starter Hospital BP3 (Open)

Description: Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

Other:

Inclusions (Private):

ü Tonsils, adenoids and grommets  
 ü Joint reconstructions  
 ü Hernia and appendix  
 ü Tonsils, adenoids and grommets  
 ü Gynaecology

Exclusions:

ü Brain and nervous system  
 ü Eye (not cataracts)  
 ü Ear, nose and throat  
 ü Bone, joint and muscle  
 ü Kidney and bladder  
 ü Male reproductive system  
 ü Digestive system  
 ü Heart and vascular system  
 ü Lung & Chest  
 ü Blood  
 ü Back, neck and spine  
 ü Plastic and reconstructive surgery (medically necessary)  
 ü Podiatric surgery (provided by an accredited podiatric surgeon)  
 ü Implantation of hearing devices

ü Cataracts  
 ü Joint replacements  
 ü Dialysis for chronic kidney failure  
 ü Pregnancy and birth  
 ü Assisted reproductive services  
 ü Weight loss surgery  
 ü Insulin pumps  
 ü Pain Management with Device  
 ü Sleep studies

Restrictions:

Rehabilitation  
 Hospital psychiatric services  
 Palliative care

Moiety per day: n/a

Excess:

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess	Level 3 Excess BP3
Admission excess (private hospital – overnight)	-	-	-	\$750
Waived for private hospital day stays	-	-	-	Yes
Admission excess (public hospital or day stay)	-	-	-	\$375
Maximum annual excess - per person	-	-	-	\$750
Maximum annual excess – singles	-	-	-	\$750
Maximum annual excess – families	-	-	-	\$1,500
Excess waived for child dependants under 21	-	-	-	No

Product: Basic Plus Starter Family Package GSFp1 (Closed) GSFp2 (Closed)

Description: Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

Other:

Inclusions (Private):

ü Tonsils, adenoids and grommets  
 ü Joint reconstructions  
 ü Hernia and appendix  
 ü Gastrointestinal endoscopy

ü Dental surgery

Exclusions:

ü Gynaecology  
 ü Dental surgery  
 ü Podiatric surgery (provided by an accredited podiatric surgeon)  
 ü Implantation of hearing devices

ü Dialysis for chronic kidney failure  
 ü Weight loss surgery  
 ü Insulin pumps

Restrictions:

Rehabilitation  
 Hospital psychiatric services  
 Palliative care  
 Brain and nervous system  
 Eye (not cataracts)  
 Ear, nose and throat  
 Bone, joint and muscle  
 Kidney and bladder  
 Male reproductive system  
 Digestive system  
 Miscarriage and termination of pregnancy  
 Chemotherapy, radiotherapy and immunotherapy for cancer  
 Pain Management

Skin  
 Breast surgery (medically necessary)  
 Diabetes management (excluding insulin pumps)  
 Heart and vascular system  
 Lung & Chest  
 Blood  
 Back, neck and spine  
 Plastic and reconstructive surgery (medically necessary)  
 Podiatric surgery (provided by an accredited podiatric surgeon)  
 Implantation of hearing devices  
 Cataracts  
 Joint replacements  
 Pregnancy and birth

Assisted reproductive services  
 Pain Management with Device  
 Sleep studies

Moiety per day: n/a

Excess:

Excess Options Table	Level 0 Excess	Level 1 Excess GSFp1	Level 2 Excess GSFp2	Level 3 Excess
Admission excess (private hospital – overnight)	-	\$250	\$500	-
Waived for private hospital day stays	-	\$125	\$250	-
Admission excess (public hospital or day stay)	-	\$125	\$250	-

Maximum annual excess - per person	-	\$250	\$500	-
Maximum annual excess – singles	-	\$250	\$500	-
Maximum annual excess – families	-	\$500	\$1,000	-
Excess waived for child dependants under 21	-	Yes	Yes	-

**Product:** **GMHBA Bronze Essential Hospital: VBE3 (Closed)**

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

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

**Exclusions:**

ü Heart and vascular system	ü Cataracts
ü Lung & Chest	ü Joint replacements
ü Blood	ü Dialysis for chronic kidney failure
ü Back, neck and spine	ü Pregnancy and birth
ü Plastic and reconstructive surgery (medically necessary)	ü Assisted reproductive services
ü Dental surgery	ü Weight loss surgery
ü Podiatric surgery (provided by an accredited podiatric surgeon)	ü Insulin pumps
ü Implantation of hearing devices	ü Pain Management with Device
	ü Sleep studies

**Restrictions:**

Rehabilitation  
Hospital psychiatric services  
Palliative care

**Moiety per day:**

n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess	Level 3 Excess VBE3
Admission excess (private hospital – overnight)	-	-	-	\$750
Waived for private hospital day stays	-	-	-	YES
Admission excess (public hospital or day stay)	-	-	-	\$375
Maximum annual excess - per person	-	-	-	\$750
Maximum annual excess – singles	-	-	-	\$750
Maximum annual excess – families	-	-	-	\$1,500
Excess waived for child dependants under 21	-	-	-	Yes

**Product:** **GMHBA Bronze Hospital Plus: BPH2 (Open)**

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

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

**Exclusions:**

ü Heart and vascular system	ü Cataracts
ü Lung & Chest	ü Joint replacements
ü Back, neck and spine	ü Dialysis for chronic kidney failure
ü Podiatric surgery (provided by an accredited podiatric surgeon)	ü Pregnancy and birth
ü Implantation of hearing devices	ü Assisted reproductive services
	ü Weight loss surgery
	ü Insulin pumps
	ü Pain Management with Device
	ü Sleep studies

**Restrictions:**

Rehabilitation  
Hospital psychiatric services  
Palliative care

**Moiety per day:**

n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess	Level 3 Excess BPH2
Admission excess (private hospital – overnight)	-	-	-	\$750
Waived for private hospital day stays	-	-	-	Yes
Admission excess (public hospital or day stay)	-	-	-	\$375
Maximum annual excess - per person	-	-	-	\$750
Maximum annual excess – singles	-	-	-	\$750
Maximum annual excess – families	-	-	-	\$1,500
Excess waived for child dependants under 21	-	-	-	No

**Product:** **Bronze Plus Advantage Hospital: BzP2 (Open) BzP3 (Open)**

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

ü Brain and nervous system	ü Chemotherapy, radiotherapy and immunotherapy for cancer
ü Eye (not cataracts)	ü Pain Management
ü Ear, nose and throat	ü Skin
ü Tonsils, adenoids and grommets	ü Breast surgery (medically necessary)
ü Bone, joint and muscle	ü Diabetes management (excluding insulin pumps)
ü Joint reconstructions	ü Blood
ü Kidney and bladder	ü Back, neck and spine

- ü Male reproductive system
- ü Digestive system
- ü Hernia and appendix
- ü Gastrointestinal endoscopy
- ü Gynaecology
- ü Miscarriage and termination of pregnancy

- ü Plastic and reconstructive surgery (medically necessary)
- ü Dental surgery
- ü Podiatric surgery (provided by an accredited podiatric surgeon)
- ü Sleep studies

**Exclusions:**

- ü Heart and vascular system
- ü Lung & Chest
- ü Cataracts
- ü Joint replacements
- ü Dialysis for chronic kidney failure
- ü Implantation of hearing devices

- ü Pregnancy and birth
- ü Assisted reproductive services
- ü Weight loss surgery
- ü Insulin pumps
- ü Pain Management with Device
- ü Sleep studies

**Restrictions:**

- Rehabilitation
- Hospital psychiatric services
- Palliative care

**Moiety per day:**

n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess BzP2	Level 3 Excess BzP3
Admission excess (private hospital – overnight)	-	-	\$500	\$750
Waived for private hospital day stays	-	-	Yes	Yes
Admission excess (public hospital or day stay)	-	-	\$250	\$375
Maximum annual excess - per person	-	-	\$500	\$750
Maximum annual excess – singles	-	-	\$500	\$750
Maximum annual excess – families	-	-	\$1,000	\$1,500
Excess waived for child dependants under 21	-	-	No	No

**Product:**

**GMHBA Bronze Plus Hospital: CBH2 (Open)**

**Description:**

Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

- ü Brain and nervous system

- ü Chemotherapy, radiotherapy and immunotherapy for cancer

- ü Eye (not cataracts)
- ü Ear, nose and throat
- ü Tonsils, adenoids and grommets
- ü Bone, joint and muscle
- ü Joint reconstructions
- ü Kidney and bladder
- ü Male reproductive system
- ü Digestive system
- ü Hernia and appendix
- ü Gastrointestinal endoscopy
- ü Gynaecology
- ü Miscarriage and termination of pregnancy

- ü Pain Management
- ü Skin
- ü Breast surgery (medically necessary)
- ü Diabetes management (excluding insulin pumps)
- ü Blood
- ü Back, neck and spine
- ü Plastic and reconstructive surgery (medically necessary)
- ü Dental surgery
- ü Podiatric surgery (provided by an accredited podiatric surgeon)
- ü Implantation of hearing devices
- ü Sleep studies

**Exclusions:**

- ü Heart and vascular system
- ü Lung & Chest
- ü Cataracts
- ü Joint replacements
- ü Dialysis for chronic kidney failure

- ü Pregnancy and birth
- ü Assisted reproductive services
- ü Weight loss surgery
- ü Insulin pumps
- ü Pain Management with Device

**Restrictions:**

- Rehabilitation
- Hospital psychiatric services
- Palliative care

**Moiety per day:**

n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess CBH2	Level 3 Excess
Admission excess (private hospital – overnight)	-	-	\$500	-
Waived for private hospital day stays	-	-	Yes	-
Admission excess (public hospital or day stay)	-	-	\$250	-
Maximum annual excess - per person	-	-	\$500	-
Maximum annual excess – singles	-	-	\$500	-
Maximum annual excess – families	-	-	\$1,000	-
Excess waived for child dependants under 21	-	-	No	-

**Product:**

**GMHBA Silver Core Hospital: VSC2 (Closed), VSC3 (Closed)**

**Description:**

Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

- ü Brain and nervous system
- ü Eye (not cataracts)
- ü Ear, nose and throat
- ü Tonsils, adenoids and grommets
- ü Bone, joint and muscle
- ü Joint reconstructions
- ü Kidney and bladder
- ü Male reproductive system
- ü Digestive system
- ü Hernia and appendix
- ü Gastrointestinal endoscopy
- ü Gynaecology
- ü Miscarriage and termination of pregnancy
- ü Chemotherapy, radiotherapy and immunotherapy for cancer
- ü Pain Management
- ü Skin

- ü Breast surgery (medically necessary)
- ü Diabetes management (excluding insulin pumps)
- ü Heart and vascular system
- ü Lung & Chest
- ü Blood
- ü Back, neck and spine
- ü Plastic and reconstructive surgery (medically necessary)
- ü Dental surgery
- ü Podiatric surgery (provided by an accredited podiatric surgeon)
- ü Implantation of hearing devices

**Exclusions:**

- ü Cataracts
- ü Joint replacements
- ü Dialysis for chronic kidney failure
- ü Pregnancy and birth
- ü Assisted reproductive services

- ü Weight loss surgery
- ü Insulin pumps
- ü Pain Management with Device
- ü Sleep studies

**Restrictions:**

- Rehabilitation
- Hospital psychiatric services

Palliative care

Moiety per day: n/a

Excess:

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess VSC2	Level 3 Excess VSC3
Admission excess (private hospital – overnight)	-	-	\$500	\$750
Waived for private hospital day stays	-	-	Yes	Yes
Admission excess (public hospital or day stay)	-	-	\$250	\$375
Maximum annual excess – per person	-	-	\$500	\$750
Maximum annual excess – singles	-	-	\$500	\$750
Maximum annual excess – families	-	-	\$1,000	\$1,500
Excess waived for child dependants under 21	-	-	Yes	Yes

Product: Silver Hospital NCP: SH0 (Closed), SH1 (Closed), SH2 (Closed)

Description: Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

Other:

Inclusions (Private):

- ü Brain and nervous system
- ü Eye (not cataracts)
- ü Ear, nose and throat
- ü Tonsils, adenoids and grommets
- ü Bone, joint and muscle
- ü Joint reconstructions
- ü Kidney and bladder
- ü Male reproductive system
- ü Digestive system
- ü Hernia and appendix
- ü Gastrointestinal endoscopy
- ü Gynaecology
- ü Miscarriage and termination of pregnancy
- ü Chemotherapy, radiotherapy and immunotherapy for cancer
- ü Pain Management
- ü Skin
- ü Breast surgery (medically necessary)
- ü Diabetes management (excluding insulin pumps)
- ü Heart and vascular system
- ü Lung & Chest
- ü Blood
- ü Back, neck and spine
- ü Plastic and reconstructive surgery (medically necessary)
- ü Dental surgery
- ü Podiatric surgery (provided by an accredited podiatric surgeon)
- ü Implantation of hearing devices

Exclusions:

- ü Cataracts
- ü Joint replacements
- ü Dialysis for chronic kidney failure
- ü Pregnancy and birth
- ü Assisted reproductive services
- ü Weight loss surgery
- ü Insulin pumps
- ü Pain Management with Device
- ü Sleep studies

Restrictions:

Rehabilitation  
Hospital psychiatric services  
Palliative care

Moiety per day:

Excess:

Excess Options Table	Level 0 Excess SH0	Level 1 Excess SH1	Level 2 Excess SH2	Level 3 Excess
Admission excess (private hospital – overnight)	\$0	\$250	\$500	-
Waived for private hospital day stays	No	No	No	-
Admission excess (public hospital or day stay)	\$0	\$125	\$250	-
Maximum annual excess – per person	\$0	\$250	\$500	-
Maximum annual excess – singles	\$0	\$250	\$500	-
Maximum annual excess – families	\$0	\$500	\$1,000	-
Excess waived for child dependants under 21	No	No	No	-

Product: GMHBA Silver Plus Hospital: SPH0 (Closed), SPH1 (Closed), SPH2 (Open), SPH3 (Open)

Description: Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

Other:

Inclusions (Private):

- ü Rehabilitation
- ü Palliative care
- ü Brain and nervous system
- ü Eye (not cataracts)
- ü Ear, nose and throat
- ü Tonsils, adenoids and grommets
- ü Bone, joint and muscle
- ü Joint reconstructions
- ü Kidney and bladder
- ü Male reproductive system
- ü Digestive system
- ü Hernia and appendix
- ü Gastrointestinal endoscopy
- ü Gynaecology
- ü Miscarriage and termination of pregnancy
- ü Chemotherapy, radiotherapy and immunotherapy for cancer
- ü Pain Management
- ü Skin
- ü Breast surgery (medically necessary)
- ü Diabetes management (excluding insulin pumps)
- ü Heart and vascular system
- ü Lung & Chest
- ü Blood
- ü Back, neck and spine
- ü Plastic and reconstructive surgery (medically necessary)
- ü Dental surgery
- ü Podiatric surgery (provided by an accredited podiatric surgeon)
- ü Implantation of hearing devices
- ü Sleep studies

Exclusions:

- ü Cataracts
- ü Joint replacements
- ü Dialysis for chronic kidney failure
- ü Pregnancy and birth
- ü Assisted reproductive services
- ü Weight loss surgery
- ü Insulin pumps
- ü Pain Management with Device

Restrictions:

Hospital psychiatric services

Moiety per day:

n/a

Excess:

Excess Options Table	Level 0 Excess SPH0	Level 1 Excess SPH1	Level 2 Excess SPH2	Level 3 Excess SPH3
Admission excess (private hospital – overnight)	\$0	\$250	\$500	\$750
Waived for private hospital day stays	Yes	Yes	Yes	Yes
Admission excess (public hospital or day stay)	\$0	\$125	\$250	\$375
Maximum annual excess – per person	\$0	\$250	\$500	\$750
Maximum annual excess – singles	\$0	\$250	\$500	\$750
Maximum annual excess – families	\$0	\$500	\$1,000	\$1,500
Excess waived for child dependants under 21	Yes	Yes	Yes	Yes

**Product:** GMHBA Silver Plus Classic Hospital: VPN1 (Closed), VPN2 (Closed), VPN3 (Closed)

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>ü Rehabilitation</li> <li>ü Palliative care</li> <li>ü Brain and nervous system</li> <li>ü Eye (not cataracts)</li> <li>ü Ear, nose and throat</li> <li>ü Tonsils, adenoids and grommets</li> <li>ü Bone, joint and muscle</li> <li>ü Joint reconstructions</li> <li>ü Kidney and bladder</li> <li>ü Male reproductive system</li> <li>ü Digestive system</li> <li>ü Hernia and appendix</li> <li>ü Gastrointestinal endoscopy</li> <li>ü Gynaecology</li> <li>ü Miscarriage and termination of pregnancy</li> <li>ü Chemotherapy, radiotherapy and immunotherapy for cancer</li> <li>ü Pain Management</li> <li>ü Skin</li> </ul> | <ul style="list-style-type: none"> <li>ü Breast surgery (medically necessary)</li> <li>ü Diabetes management (excluding insulin pumps)</li> <li>ü Heart and vascular system</li> <li>ü Lung &amp; Chest</li> <li>ü Blood</li> <li>ü Back, neck and spine</li> <li>ü Plastic and reconstructive surgery (medically necessary)</li> <li>ü Dental surgery</li> <li>ü Podiatric surgery (provided by an accredited podiatric surgeon)</li> <li>ü Implantation of hearing devices</li> <li>ü Cataracts</li> <li>ü Joint replacements</li> <li>ü Dialysis for chronic kidney failure</li> <li>ü Insulin pumps</li> <li>ü Pain Management with Device</li> <li>ü Sleep studies</li> </ul> |
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**Exclusions:**  
 ü Pregnancy and birth  
 ü Assisted reproductive services  
 ü Weight loss surgery

**Restrictions:** Hospital psychiatric services

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess VPN1	Level 2 Excess VPN2	Level 3 Excess VPN3
Admission excess (private hospital – overnight)	-	\$250	\$500	\$750
Waived for private hospital day stays	-	Yes	Yes	Yes
Admission excess (public hospital or day stay)	-	\$125	\$250	\$375
Maximum annual excess - per person	-	\$250	\$500	\$750
Maximum annual excess – singles	-	\$250	\$500	\$750
Maximum annual excess – families	-	\$500	\$1,000	\$1,500
Excess waived for child dependants under 21	-	Yes	Yes	Yes

**Product:** GMHBA Silver Plus Premium Hospital: PrN1 (Closed), PrN2 (Open), PrN3 (Open)

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>ü Rehabilitation</li> <li>ü Palliative care</li> <li>ü Brain and nervous system</li> <li>ü Eye (not cataracts)</li> <li>ü Ear, nose and throat</li> <li>ü Tonsils, adenoids and grommets</li> <li>ü Bone, joint and muscle</li> <li>ü Joint reconstructions</li> <li>ü Kidney and bladder</li> <li>ü Male reproductive system</li> <li>ü Digestive system</li> <li>ü Hernia and appendix</li> <li>ü Gastrointestinal endoscopy</li> <li>ü Gynaecology</li> <li>ü Miscarriage and termination of pregnancy</li> <li>ü Chemotherapy, radiotherapy and immunotherapy for cancer</li> <li>ü Pain Management</li> <li>ü Skin</li> </ul> | <ul style="list-style-type: none"> <li>ü Breast surgery (medically necessary)</li> <li>ü Diabetes management (excluding insulin pumps)</li> <li>ü Heart and vascular system</li> <li>ü Lung &amp; Chest</li> <li>ü Blood</li> <li>ü Back, neck and spine</li> <li>ü Plastic and reconstructive surgery (medically necessary)</li> <li>ü Dental surgery</li> <li>ü Podiatric surgery (provided by an accredited podiatric surgeon)</li> <li>ü Implantation of hearing devices</li> <li>ü Cataracts</li> <li>ü Joint replacements</li> <li>ü Dialysis for chronic kidney failure</li> <li>ü Insulin pumps</li> <li>ü Pain Management with Device</li> <li>ü Sleep studies</li> </ul> |
|---|--|

**Exclusions:**  
 ü Pregnancy and birth  
 ü Assisted reproductive services  
 ü Weight loss surgery

**Restrictions:** Hospital psychiatric services

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess PrN1	Level 2 Excess PrN2	Level 3 Excess PrN3
Admission excess (private hospital – overnight)	-	\$250	\$500	\$750
Waived for private hospital day stays	-	Yes	Yes	Yes
Admission excess (public hospital or day stay)	-	\$125	\$250	\$375
Maximum annual excess - per person	-	\$250	\$500	\$750
Maximum annual excess – singles	-	\$250	\$500	\$750
Maximum annual excess – families	-	\$500	\$1,000	\$1,500
Excess waived for child dependants under 21	-	Yes	Yes	Yes

**Product:** GMHBA Silver Plus Hospital (No Pregnancy): GN0 (Closed),

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>ü Rehabilitation</li> <li>ü Hospital psychiatric services</li> <li>ü Palliative care</li> <li>ü Brain and nervous system</li> <li>ü Eye (not cataracts)</li> <li>ü Ear, nose and throat</li> <li>ü Tonsils, adenoids and grommets</li> <li>ü Bone, joint and muscle</li> <li>ü Joint reconstructions</li> <li>ü Kidney and bladder</li> <li>ü Male reproductive system</li> <li>ü Digestive system</li> <li>ü Hernia and appendix</li> <li>ü Gastrointestinal endoscopy</li> </ul> | <ul style="list-style-type: none"> <li>ü Breast surgery (medically necessary)</li> <li>ü Diabetes management (excluding insulin pumps)</li> <li>ü Heart and vascular system</li> <li>ü Lung &amp; Chest</li> <li>ü Blood</li> <li>ü Back, neck and spine</li> <li>ü Plastic and reconstructive surgery (medically necessary)</li> <li>ü Dental surgery</li> <li>ü Podiatric surgery (provided by an accredited podiatric surgeon)</li> <li>ü Implantation of hearing devices</li> <li>ü Cataracts</li> <li>ü Joint replacements</li> <li>ü Dialysis for chronic kidney failure</li> <li>ü Weight loss surgery</li> </ul> |
|---|--|

- ü Gynaecology
  - ü Miscarriage and termination of pregnancy
  - ü Chemotherapy, radiotherapy and immunotherapy for cancer
  - ü Pain Management
  - ü Skin
- ü Insulin pumps
  - ü Pain Management with Device
  - ü Sleep studies

**Exclusions:** [Pregnancy and birth](#)  
[Assisted reproductive services](#)

**Restrictions:** n/a

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess <i>GNO</i>	Level 1 Excess	Level 2 Excess	Level 3 Excess
Admission excess (private hospital – overnight)	\$0	-	-	-
Waived for private hospital day stays	No	-	-	-
Admission excess (public hospital or day stay)	\$0	-	-	-
Maximum annual excess - per person	\$0	-	-	-
Maximum annual excess – singles	\$0	-	-	-
Maximum annual excess – families	\$0	-	-	-
Excess waived for child dependants under 21	Yes	-	-	-

**Product:** [GMHBA Silver Plus Elite Hospital: SPE1 \(Closed\) SPE2 \(Closed\)](#)  
**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

- Other:**
- Inclusions (Private):**
- ü Rehabilitation
  - ü Hospital psychiatric services
  - ü Palliative care
  - ü Brain and nervous system
  - ü Eye (not cataracts)
  - ü Ear, nose and throat
  - ü Tonsils, adenoids and grommets
  - ü Bone, joint and muscle
  - ü Joint reconstructions
  - ü Kidney and bladder
  - ü Male reproductive system
  - ü Digestive system
  - ü Hernia and appendix
  - ü Gastrointestinal endoscopy
  - ü Gynaecology
  - ü Miscarriage and termination of pregnancy
  - ü Chemotherapy, radiotherapy and immunotherapy for cancer
  - ü Pain Management
  - ü Skin
- ü Breast surgery (medically necessary)
  - ü Diabetes management (excluding insulin pumps)
  - ü Heart and vascular system
  - ü Lung & Chest
  - ü Blood
  - ü Back, neck and spine
  - ü Plastic and reconstructive surgery (medically necessary)
  - ü Dental surgery
  - ü Podiatric surgery (provided by an accredited podiatric surgeon)
  - ü Implantation of hearing devices
  - ü Cataracts
  - ü Joint replacements
  - ü Dialysis for chronic kidney failure
  - ü Weight loss surgery
  - ü Insulin pumps
  - ü Pain Management with Device
  - ü Sleep studies

**Exclusions:** [Pregnancy and birth](#)  
[Assisted reproductive services](#)

**Restrictions:** n/a

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess <i>SPE1</i>	Level 2 Excess <i>SPE2</i>	Level 3 Excess
Admission excess (private hospital – overnight)	-	\$250	\$500	-
Waived for private hospital day stays	-	Yes	Yes	-
Admission excess (public hospital or day stay)	-	\$125	\$250	-
Maximum annual excess - per person	-	\$250	\$500	-
Maximum annual excess – singles	-	\$250	\$500	-
Maximum annual excess – families	-	\$500	\$1,000	-
Excess waived for child dependants under 21	-	Yes	Yes	-

**Product:** [GMHBA Silver Plus Hospital \(No Pregnancy\) with Gap Saver: PGN0 \(Closed\), PGN1 \(Closed\), PGN2 \(Closed\)](#)  
**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

- Other:**
- Inclusions (Private):**
- ü Rehabilitation
  - ü Hospital psychiatric services
  - ü Palliative care
  - ü Brain and nervous system
  - ü Eye (not cataracts)
  - ü Ear, nose and throat
  - ü Tonsils, adenoids and grommets
  - ü Bone, joint and muscle
  - ü Joint reconstructions
  - ü Kidney and bladder
  - ü Male reproductive system
  - ü Digestive system
  - ü Hernia and appendix
  - ü Gastrointestinal endoscopy
  - ü Gynaecology
  - ü Miscarriage and termination of pregnancy
  - ü Chemotherapy, radiotherapy and immunotherapy for cancer
  - ü Pain Management
  - ü Skin
- ü Breast surgery (medically necessary)
  - ü Diabetes management (excluding insulin pumps)
  - ü Heart and vascular system
  - ü Lung & Chest
  - ü Blood
  - ü Back, neck and spine
  - ü Plastic and reconstructive surgery (medically necessary)
  - ü Dental surgery
  - ü Podiatric surgery (provided by an accredited podiatric surgeon)
  - ü Implantation of hearing devices
  - ü Cataracts
  - ü Joint replacements
  - ü Dialysis for chronic kidney failure
  - ü Weight loss surgery
  - ü Insulin pumps
  - ü Pain Management with Device
  - ü Sleep studies

**Exclusions:** [Pregnancy and birth](#)  
[Assisted reproductive services](#)

**Restrictions:** n/a

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess <i>PGN0</i>	Level 1 Excess <i>PGN1</i>	Level 2 Excess <i>PGN2</i>	Level 3 Excess
Admission excess (private hospital – overnight)	\$0	\$250	\$500	-
Waived for private hospital day stays	No	No	No	-
Admission excess (public hospital or day stay)	\$0	\$125	\$250	-

Maximum annual excess - per person	\$0	\$250	\$500	-
Maximum annual excess – singles	\$0	\$250	\$500	-
Maximum annual excess – families	\$0	\$500	\$1,000	-
Excess waived for child dependants under 21	Yes	Yes	Yes	-

**Product:** GMHBA Gold Hospital: GH0 (Closed), GH1 (Closed), GH2 (Closed)

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>ü Rehabilitation</li> <li>ü Hospital psychiatric services</li> <li>ü Palliative care</li> <li>ü Brain and nervous system</li> <li>ü Eye (not cataracts)</li> <li>ü Ear, nose and throat</li> <li>ü Tonsils, adenoids and grommets</li> <li>ü Bone, joint and muscle</li> <li>ü Joint reconstructions</li> <li>ü Kidney and bladder</li> <li>ü Male reproductive system</li> <li>ü Digestive system</li> <li>ü Hernia and appendix</li> <li>ü Gastrointestinal endoscopy</li> <li>ü Gynaecology</li> <li>ü Miscarriage and termination of pregnancy</li> <li>ü Chemotherapy, radiotherapy and immunotherapy for cancer</li> <li>ü Pain Management</li> <li>ü Skin</li> </ul> | <ul style="list-style-type: none"> <li>ü Breast surgery (medically necessary)</li> <li>ü Diabetes management (excluding insulin pumps)</li> <li>ü Heart and vascular system</li> <li>ü Lung &amp; Chest</li> <li>ü Blood</li> <li>ü Back, neck and spine</li> <li>ü Plastic and reconstructive surgery (medically necessary)</li> <li>ü Dental surgery</li> <li>ü Podiatric surgery (provided by an accredited podiatric surgeon)</li> <li>ü Implantation of hearing devices</li> <li>ü Cataracts</li> <li>ü Joint replacements</li> <li>ü Dialysis for chronic kidney failure</li> <li>ü Pregnancy and birth</li> <li>ü Assisted reproductive services</li> <li>ü Weight loss surgery</li> <li>ü Insulin pumps</li> <li>ü Pain Management with Device</li> <li>ü Sleep studies</li> </ul> |
|--|--|

**Exclusions:** n/a

**Restrictions:** n/a

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess GH0	Level 1 Excess GH1	Level 2 Excess GH2	Level 3 Excess
Admission excess (private hospital – overnight)	\$0	\$250	\$500	-
Waived for private hospital day stays	No	No	No	-
Admission excess (public hospital or day stay)	\$0	\$125	\$250	-
Maximum annual excess - per person	\$0	\$250	\$500	-
Maximum annual excess – singles	\$0	\$250	\$500	-
Maximum annual excess – families	\$0	\$500	\$1,000	-
Excess waived for child dependants under 21	Yes	Yes	Yes	-

**Product:** GMHBA Gold Premium Hospital: GHp3 (Closed)

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>ü Rehabilitation</li> <li>ü Hospital psychiatric services</li> <li>ü Palliative care</li> <li>ü Brain and nervous system</li> <li>ü Eye (not cataracts)</li> <li>ü Ear, nose and throat</li> <li>ü Tonsils, adenoids and grommets</li> <li>ü Bone, joint and muscle</li> <li>ü Joint reconstructions</li> <li>ü Kidney and bladder</li> <li>ü Male reproductive system</li> <li>ü Digestive system</li> <li>ü Hernia and appendix</li> <li>ü Gastrointestinal endoscopy</li> <li>ü Gynaecology</li> <li>ü Miscarriage and termination of pregnancy</li> <li>ü Chemotherapy, radiotherapy and immunotherapy for cancer</li> <li>ü Pain Management</li> <li>ü Skin</li> </ul> | <ul style="list-style-type: none"> <li>ü Breast surgery (medically necessary)</li> <li>ü Diabetes management (excluding insulin pumps)</li> <li>ü Heart and vascular system</li> <li>ü Lung &amp; Chest</li> <li>ü Blood</li> <li>ü Back, neck and spine</li> <li>ü Plastic and reconstructive surgery (medically necessary)</li> <li>ü Dental surgery</li> <li>ü Podiatric surgery (provided by an accredited podiatric surgeon)</li> <li>ü Implantation of hearing devices</li> <li>ü Cataracts</li> <li>ü Joint replacements</li> <li>ü Dialysis for chronic kidney failure</li> <li>ü Pregnancy and birth</li> <li>ü Assisted reproductive services</li> <li>ü Weight loss surgery</li> <li>ü Insulin pumps</li> <li>ü Pain Management with Device</li> <li>ü Sleep studies</li> </ul> |
|--|--|

**Exclusions:** n/a

**Restrictions:** n/a

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess	Level 3 Excess GHp3
Admission excess (private hospital – overnight)	-	-	-	\$750
Waived for private hospital day stays	-	-	-	No
Admission excess (public hospital or day stay)	-	-	-	\$750
Maximum annual excess - per person	-	-	-	\$750
Maximum annual excess – singles	-	-	-	\$750
Maximum annual excess – families	-	-	-	\$1,500
Excess waived for child dependants under 21	-	-	-	Yes

**Product:** GMHBA Gold Ultimate Hospital: VUH1 (Closed), VUH2 (Closed), VUH3 (Closed)

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>ü Rehabilitation</li> <li>ü Hospital psychiatric services</li> <li>ü Palliative care</li> <li>ü Brain and nervous system</li> <li>ü Eye (not cataracts)</li> <li>ü Ear, nose and throat</li> <li>ü Tonsils, adenoids and grommets</li> </ul> | <ul style="list-style-type: none"> <li>ü Breast surgery (medically necessary)</li> <li>ü Diabetes management (excluding insulin pumps)</li> <li>ü Heart and vascular system</li> <li>ü Lung &amp; Chest</li> <li>ü Blood</li> <li>ü Back, neck and spine</li> <li>ü Plastic and reconstructive surgery (medically necessary)</li> </ul> |
|---|---|

- ü Bone, joint and muscle
- ü Joint reconstructions
- ü Kidney and bladder
- ü Male reproductive system
- ü Digestive system
- ü Hernia and appendix
- ü Gastrointestinal endoscopy
- ü Gynaecology
- ü Miscarriage and termination of pregnancy
- ü Chemotherapy, radiotherapy and immunotherapy for cancer
- ü Pain Management
- ü Skin

- ü Dental surgery
- ü Podiatric surgery (provided by an accredited podiatric surgeon)
- ü Implantation of hearing devices
- ü Cataracts
- ü Joint replacements
- ü Dialysis for chronic kidney failure
- ü Pregnancy and birth
- ü Assisted reproductive services
- ü Weight loss surgery
- ü Insulin pumps
- ü Pain Management with Device
- ü Sleep studies

Exclusions: n/a

Restrictions: n/a

Moiety per day: n/a

Excess:

Excess Options Table	Level 0 Excess	Level 1 Excess VUH1	Level 2 Excess VUH2	Level 3 Excess VUH3
Admission excess (private hospital – overnight)	-	\$250	\$500	\$750
Waived for private hospital day stays	-	Yes	Yes	Yes
Admission excess (public hospital or day stay)	-	\$125	\$250	\$375
Maximum annual excess - per person	-	\$250	\$500	\$750
Maximum annual excess – singles	-	\$250	\$500	\$750
Maximum annual excess – families	-	\$500	\$1,000	\$1,500
Excess waived for child dependants under 21	-	Yes	Yes	Yes

Product: **GMHBA Gold Hospital with Gap Saver: PGH0 (Closed), PGH1 (Closed), PGH2 (Closed)**

Description: Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

Other:

Inclusions (Private):

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

Exclusions: n/a

Restrictions: n/a

Moiety per day: n/a

Excess:

Excess Options Table	Level 0 Excess PGH0	Level 1 Excess PGH1	Level 2 Excess PGH2	Level 3 Excess
Admission excess (private hospital – overnight)	\$0	\$250	\$500	-
Waived for private hospital day stays	No	No	No	-
Admission excess (public hospital or day stay)	\$0	\$125	\$250	-
Maximum annual excess - per person	\$0	\$250	\$500	-
Maximum annual excess – singles	\$0	\$250	\$500	-
Maximum annual excess – families	\$0	\$500	\$1,000	-
Excess waived for child dependants under 21	Yes	Yes	Yes	-

Product: **GMHBA Basic Plus Young Singles Package: BHYSZp (Closed)**

Description: Covered in a public hospital as a private patient in a shared room, but will face considerable out-of-pocket costs if treated in a private hospital (shared room default benefits as prescribed by commonwealth government).

Other:

Inclusions (Private):

n/a

- Exclusions:
- ü Cataracts
  - ü Joint replacements
  - ü Dialysis for chronic kidney failure
  - ü Pregnancy and birth
  - ü Assisted reproductive services
  - ü Weight loss surgery
  - ü Insulin pumps

- Restrictions:
- Rehabilitation
  - Hospital psychiatric services
  - Palliative care
  - Brain and nervous system
  - Eye (not cataracts)
  - Ear, nose and throat
  - Tonsils, adenoids and grommets
  - Bone, joint and muscle
  - Joint reconstructions
  - Kidney and bladder
  - Male reproductive system
  - Digestive system
  - Hernia and appendix
  - Gastrointestinal endoscopy
  - Gynaecology
  - Miscarriage and termination of pregnancy
  - Chemotherapy, radiotherapy and immunotherapy for cancer
  - Pain Management
  - Skin
  - Breast surgery (medically necessary)
  - Diabetes management (excluding insulin pumps)
  - Heart and vascular system
  - Lung & Chest
  - Blood
  - Back, neck and spine
  - Plastic and reconstructive surgery (medically necessary)
  - Dental surgery
  - Podiatric surgery (provided by an accredited podiatric surgeon)
  - Implantation of hearing devices
  - Pain Management with Device
  - Sleep studies

Moiety per day: n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess <i>BHYSZp</i>	Level 3 Excess
Admission excess (private hospital – overnight)	-	-	\$500	-
Waived for private hospital day stays	-	-	No	-
Admission excess (public hospital or day stay)	-	-	\$500	-
Maximum annual excess – per person	-	-	\$500	-
Maximum annual excess – singles	-	-	\$500	-
Maximum annual excess – families	-	-	-	-
Excess waived for child dependants under 21	-	-	No	-

**Product:** **GMHBA Basic Plus Package: bCP3ap (Open)**

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

- ü Eye (not cataracts)
- ü Ear, nose and throat
- ü Tonsils, adenoids and grommets
- ü Joint reconstructions
- ü Hernia and appendix
- ü Dental surgery

**Exclusions:**

- ü Brain and nervous system
- ü Bone, joint and muscle
- ü Kidney and bladder
- ü Male reproductive system
- ü Digestive system
- ü Gastrointestinal endoscopy
- ü Gynaecology
- ü Miscarriage and termination of pregnancy
- ü Chemotherapy, radiotherapy and immunotherapy for cancer
- ü Pain Management
- ü Skin
- ü Breast surgery (medically necessary)
- ü Diabetes management (excluding insulin pumps)
- ü Heart and vascular system
- ü Lung & Chest
- ü Blood
- ü Back, neck and spine
- ü Plastic and reconstructive surgery (medically necessary)
- ü Podiatric surgery (provided by an accredited podiatric surgeon)
- ü Implantation of hearing devices
- ü Cataracts
- ü Joint replacements
- ü Dialysis for chronic kidney failure
- ü Pregnancy and birth
- ü Assisted reproductive services
- ü Weight loss surgery
- ü Insulin pumps
- ü Pain Management with Device
- ü Sleep studies

**Restrictions:**

- Rehabilitation
- Hospital psychiatric services
- Palliative care

**Moiety per day:**

n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess	Level 3 Excess <i>bCP3ap</i>
Admission excess (private hospital – overnight)	-	-	-	\$750
Waived for private hospital day stays	-	-	-	No
Admission excess (public hospital or day stay)	-	-	-	\$375
Maximum annual excess – per person	-	-	-	\$750
Maximum annual excess – singles	-	-	-	\$750
Maximum annual excess – families	-	-	-	\$1,500
Excess waived for child dependants under 21	-	-	-	No

**Product:** **GMHBA Basic Plus Starter Family Package: GSFp1 (Closed), GSFp2 (Closed)**

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

- ü Tonsils, adenoids and grommets
- ü Joint reconstructions
- ü Hernia and appendix
- ü Gastrointestinal endoscopy
- ü Dental surgery

**Exclusions:**

- ü Gynaecology
- ü Dialysis for chronic kidney failure
- ü Weight loss surgery
- ü Insulin pumps

**Restrictions:**

- Rehabilitation
- Hospital psychiatric services
- Palliative care
- Brain and nervous system
- Eye (not cataracts)
- Ear, nose and throat
- Bone, joint and muscle
- Kidney and bladder
- Male reproductive system
- Digestive system
- Miscarriage and termination of pregnancy
- Chemotherapy, radiotherapy and immunotherapy for cancer
- Pain Management
- Skin
- Breast surgery (medically necessary)
- Diabetes management (excluding insulin pumps)
- Heart and vascular system
- Lung & Chest
- Blood
- Back, neck and spine
- Plastic and reconstructive surgery (medically necessary)
- Podiatric surgery (provided by an accredited podiatric surgeon)
- Implantation of hearing devices
- Cataracts
- Joint replacements
- Pregnancy and birth
- Assisted reproductive services
- Pain Management with Device
- Sleep studies

**Moiety per day:**

n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess <i>GSFp1</i>	Level 2 Excess <i>GSFp2</i>	Level 3 Excess
Admission excess (private hospital – overnight)	-	\$250	\$500	-
Waived for private hospital day stays	-	No	No	-
Admission excess (public hospital or day stay)	-	\$125	\$250	-
Maximum annual excess – per person	-	\$250	\$500	-
Maximum annual excess – singles	-	\$250	\$500	-
Maximum annual excess – families	-	\$500	\$1,000	-
Excess waived for child dependants under 21	-	Yes	Yes	-

**Product:** **GMHBA Bronze Plus Package: brP3ap (Closed)**

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

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

**Exclusions:**

- ü Heart and vascular system
- ü Lung & Chest
- ü Blood
- ü Back, neck and spine
- ü Plastic and reconstructive surgery (medically necessary)
- ü Podiatric surgery (provided by an accredited podiatric surgeon)
- ü Implantation of hearing devices
- ü Cataracts
- ü Joint replacements
- ü Dialysis for chronic kidney failure
- ü Pregnancy and birth
- ü Assisted reproductive services
- ü Weight loss surgery
- ü Insulin pumps
- ü Pain Management with Device
- ü Sleep studies

**Restrictions:**

- Rehabilitation
- Hospital psychiatric services
- Palliative care

**Moiety per day:**

n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess	Level 3 Excess brP3ap
Admission excess (private hospital – overnight)	-	-	-	\$750
Waived for private hospital day stays	-	-	-	No
Admission excess (public hospital or day stay)	-	-	-	\$375
Maximum annual excess - per person	-	-	-	\$750
Maximum annual excess – singles	-	-	-	\$750
Maximum annual excess – families	-	-	-	\$1,500
Excess waived for child dependants under 21	-	-	-	No

**Product:** **GMHBA Bronze Plus Choice Package: VBp2 (Closed)**

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

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

**Exclusions:**

- ü Heart and vascular system
- ü Lung & Chest
- ü Back, neck and spine
- ü Podiatric surgery (provided by an accredited podiatric surgeon)
- ü Implantation of hearing devices
- ü Cataracts
- ü Joint replacements
- ü Dialysis for chronic kidney failure
- ü Pregnancy and birth
- ü Assisted reproductive services
- ü Weight loss surgery
- ü Insulin pumps
- ü Pain Management with Device
- ü Sleep studies

**Restrictions:**

- Rehabilitation
- Hospital psychiatric services
- Palliative care

**Moiety per day:**

n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess	Level 3 Excess VBp2
Admission excess (private hospital – overnight)	-	-	-	\$750
Waived for private hospital day stays	-	-	-	No
Admission excess (public hospital or day stay)	-	-	-	\$375
Maximum annual excess - per person	-	-	-	\$750
Maximum annual excess – singles	-	-	-	\$750
Maximum annual excess – families	-	-	-	\$1,500
Excess waived for child dependants under 21	-	-	-	Yes

**Product:** **GMHBA Silver Hospital Young Singles Package: SHYSZe (Closed)**

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

- ü Brain and nervous system
- ü Eye (not cataracts)
- ü Ear, nose and throat
- ü Tonsils, adenoids and grommets
- ü Bone, joint and muscle
- ü Joint reconstructions
- ü Kidney and bladder
- ü Male reproductive system
- ü Digestive system
- ü Hernia and appendix
- ü Gastrointestinal endoscopy
- ü Breast surgery (medically necessary)
- ü Diabetes management (excluding insulin pumps)
- ü Heart and vascular system
- ü Lung & Chest
- ü Blood
- ü Back, neck and spine
- ü Plastic and reconstructive surgery (medically necessary)
- ü Dental surgery
- ü Podiatric surgery (provided by an accredited podiatric surgeon)
- ü Implantation of hearing devices

- ü Gynaecology
- ü Miscarriage and termination of pregnancy
- ü Chemotherapy, radiotherapy and immunotherapy for cancer
- ü Pain Management
- ü Skin

<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>ü Cataracts</li> <li>ü Joint replacements</li> <li>ü Dialysis for chronic kidney failure</li> <li>ü Pregnancy and birth</li> <li>ü Assisted reproductive services</li> <li>ü Weight loss surgery</li> <li>ü Insulin pumps</li> <li>ü Pain Management with Device</li> <li>ü Sleep studies</li> </ul>
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<b>Restrictions:</b>	<ul style="list-style-type: none"> <li>Rehabilitation</li> <li>Hospital psychiatric services</li> <li>Palliative care</li> </ul>
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<b>Moiety per day:</b>	Applies to private rooms; \$100 per day up to 7 days per admission. Nil applied to shared rooms
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<b>Excess:</b>	<table border="1"> <thead> <tr> <th>Excess Options Table</th> <th>Level 0 Excess</th> <th>Level 1 Excess <i>SHYSZe</i></th> <th>Level 2 Excess</th> <th>Level 3 Excess</th> </tr> </thead> <tbody> <tr> <td>Admission excess (private hospital – overnight)</td> <td>-</td> <td>\$250</td> <td>-</td> <td>-</td> </tr> <tr> <td>Waived for private hospital day stays</td> <td>-</td> <td>No</td> <td>-</td> <td>-</td> </tr> <tr> <td>Admission excess (public hospital or day stay)</td> <td>-</td> <td>\$125</td> <td>-</td> <td>-</td> </tr> <tr> <td>Maximum annual excess - per person</td> <td>-</td> <td>\$250</td> <td>-</td> <td>-</td> </tr> <tr> <td>Maximum annual excess – singles</td> <td>-</td> <td>\$250</td> <td>-</td> <td>-</td> </tr> <tr> <td>Maximum annual excess – families</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> </tr> <tr> <td>Excess waived for child dependants under 21</td> <td>-</td> <td>No</td> <td>-</td> <td>-</td> </tr> </tbody> </table>					Excess Options Table	Level 0 Excess	Level 1 Excess <i>SHYSZe</i>	Level 2 Excess	Level 3 Excess	Admission excess (private hospital – overnight)	-	\$250	-	-	Waived for private hospital day stays	-	No	-	-	Admission excess (public hospital or day stay)	-	\$125	-	-	Maximum annual excess - per person	-	\$250	-	-	Maximum annual excess – singles	-	\$250	-	-	Maximum annual excess – families	-	-	-	-	Excess waived for child dependants under 21	-	No	-	-
Excess Options Table	Level 0 Excess	Level 1 Excess <i>SHYSZe</i>	Level 2 Excess	Level 3 Excess																																									
Admission excess (private hospital – overnight)	-	\$250	-	-																																									
Waived for private hospital day stays	-	No	-	-																																									
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Maximum annual excess - per person	-	\$250	-	-																																									
Maximum annual excess – singles	-	\$250	-	-																																									
Maximum annual excess – families	-	-	-	-																																									
Excess waived for child dependants under 21	-	No	-	-																																									

**Product:** [GMHBA Silver Package: VMp2 \(Closed\)](#)  
**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

<b>Other:</b>	
<b>Inclusions (Private):</b>	<ul style="list-style-type: none"> <li>ü Rehabilitation</li> <li>ü Brain and nervous system</li> <li>ü Eye (not cataracts)</li> <li>ü Ear, nose and throat</li> <li>ü Tonsils, adenoids and grommets</li> <li>ü Bone, joint and muscle</li> <li>ü Joint reconstructions</li> <li>ü Kidney and bladder</li> <li>ü Male reproductive system</li> <li>ü Digestive system</li> <li>ü Hernia and appendix</li> <li>ü Gastrointestinal endoscopy</li> <li>ü Gynaecology</li> <li>ü Miscarriage and termination of pregnancy</li> <li>ü Chemotherapy, radiotherapy and immunotherapy for cancer</li> <li>ü Pain Management</li> <li>ü Skin</li> <li>ü Breast surgery (medically necessary)</li> <li>ü Diabetes management (excluding insulin pumps)</li> <li>ü Heart and vascular system</li> <li>ü Lung &amp; Chest</li> <li>ü Blood</li> <li>ü Back, neck and spine</li> <li>ü Plastic and reconstructive surgery (medically necessary)</li> <li>ü Dental surgery</li> <li>ü Podiatric surgery (provided by an accredited podiatric surgeon)</li> <li>ü Implantation of hearing devices</li> </ul>

<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>ü Cataracts</li> <li>ü Joint replacements</li> <li>ü Dialysis for chronic kidney failure</li> <li>ü Pregnancy and birth</li> <li>ü Assisted reproductive services</li> <li>ü Weight loss surgery</li> <li>ü Insulin pumps</li> <li>ü Pain Management with Device</li> <li>ü Sleep studies</li> </ul>
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<b>Restrictions:</b>	<ul style="list-style-type: none"> <li>Hospital psychiatric services</li> <li>Palliative care</li> </ul>
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<b>Moiety per day:</b>	n/a
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<b>Excess:</b>	<table border="1"> <thead> <tr> <th>Excess Options Table</th> <th>Level 0 Excess</th> <th>Level 1 Excess</th> <th>Level 2 Excess</th> <th>Level 3 Excess <i>VMp2</i></th> </tr> </thead> <tbody> <tr> <td>Admission excess (private hospital – overnight)</td> <td>-</td> <td>-</td> <td>-</td> <td>\$750</td> </tr> <tr> <td>Waived for private hospital day stays</td> <td>-</td> <td>-</td> <td>-</td> <td>No</td> </tr> <tr> <td>Admission excess (public hospital or day stay)</td> <td>-</td> <td>-</td> <td>-</td> <td>\$375</td> </tr> <tr> <td>Maximum annual excess - per person</td> <td>-</td> <td>-</td> <td>-</td> <td>\$750</td> </tr> <tr> <td>Maximum annual excess – singles</td> <td>-</td> <td>-</td> <td>-</td> <td>\$750</td> </tr> <tr> <td>Maximum annual excess – families</td> <td>-</td> <td>-</td> <td>-</td> <td>\$1,500</td> </tr> <tr> <td>Excess waived for child dependants under 21</td> <td>-</td> <td>-</td> <td>-</td> <td>Yes</td> </tr> </tbody> </table>					Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess	Level 3 Excess <i>VMp2</i>	Admission excess (private hospital – overnight)	-	-	-	\$750	Waived for private hospital day stays	-	-	-	No	Admission excess (public hospital or day stay)	-	-	-	\$375	Maximum annual excess - per person	-	-	-	\$750	Maximum annual excess – singles	-	-	-	\$750	Maximum annual excess – families	-	-	-	\$1,500	Excess waived for child dependants under 21	-	-	-	Yes
Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess	Level 3 Excess <i>VMp2</i>																																									
Admission excess (private hospital – overnight)	-	-	-	\$750																																									
Waived for private hospital day stays	-	-	-	No																																									
Admission excess (public hospital or day stay)	-	-	-	\$375																																									
Maximum annual excess - per person	-	-	-	\$750																																									
Maximum annual excess – singles	-	-	-	\$750																																									
Maximum annual excess – families	-	-	-	\$1,500																																									
Excess waived for child dependants under 21	-	-	-	Yes																																									

**Product:** [GMHBA Silver Everyday Family Package \(No Pregnancy\): GEFpN1 \(Closed\), GEFpN2 \(Closed\)](#)  
**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

<b>Other:</b>	
<b>Inclusions (Private):</b>	<ul style="list-style-type: none"> <li>ü Brain and nervous system</li> <li>ü Eye (not cataracts)</li> <li>ü Ear, nose and throat</li> <li>ü Tonsils, adenoids and grommets</li> <li>ü Bone, joint and muscle</li> <li>ü Joint reconstructions</li> <li>ü Kidney and bladder</li> <li>ü Male reproductive system</li> <li>ü Digestive system</li> <li>ü Hernia and appendix</li> <li>ü Gastrointestinal endoscopy</li> <li>ü Gynaecology</li> <li>ü Miscarriage and termination of pregnancy</li> <li>ü Chemotherapy, radiotherapy and immunotherapy for cancer</li> <li>ü Pain Management</li> <li>ü Skin</li> <li>ü Breast surgery (medically necessary)</li> <li>ü Diabetes management (excluding insulin pumps)</li> <li>ü Heart and vascular system</li> <li>ü Lung &amp; Chest</li> <li>ü Blood</li> <li>ü Back, neck and spine</li> <li>ü Plastic and reconstructive surgery (medically necessary)</li> <li>ü Dental surgery</li> <li>ü Podiatric surgery (provided by an accredited podiatric surgeon)</li> <li>ü Implantation of hearing devices</li> </ul>

<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>ü Cataracts</li> <li>ü Joint replacements</li> <li>ü Dialysis for chronic kidney failure</li> <li>ü Pregnancy and birth</li> <li>ü Assisted reproductive services</li> <li>ü Weight loss surgery</li> <li>ü Insulin pumps</li> </ul>
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ü Pain Management with Device  
 ü Sleep studies

**Restrictions:** Rehabilitation  
 Hospital psychiatric services  
 Palliative care

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess		Level 2 Excess		Level 3 Excess
		GEFpN1	GEFpN2	GEFpN1	GEFpN2	
Admission excess (private hospital – overnight)	-	\$250	\$500	-	-	-
Waived for private hospital day stays	-	No	No	-	-	-
Admission excess (public hospital or day stay)	-	\$125	\$250	-	-	-
Maximum annual excess – per person	-	\$250	\$500	-	-	-
Maximum annual excess – singles	-	\$250	\$500	-	-	-
Maximum annual excess – families	-	\$500	\$1,000	-	-	-
Excess waived for child dependants under 21	-	Yes	Yes	-	-	-

**Product:** GMHBA Silver Plus Everyday Family Package: GEFp1 (Closed), GEFp2 (Closed)  
**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

<ul style="list-style-type: none"> <li>ü Brain and nervous system</li> <li>ü Eye (not cataracts)</li> <li>ü Ear, nose and throat</li> <li>ü Tonsils, adenoids and grommets</li> <li>ü Bone, joint and muscle</li> <li>ü Joint reconstructions</li> <li>ü Kidney and bladder</li> <li>ü Male reproductive system</li> <li>ü Digestive system</li> <li>ü Hernia and appendix</li> <li>ü Gastrointestinal endoscopy</li> <li>ü Gynaecology</li> <li>ü Miscarriage and termination of pregnancy</li> <li>ü Chemotherapy, radiotherapy and immunotherapy for cancer</li> <li>ü Pain Management</li> <li>ü Skin</li> </ul>	<ul style="list-style-type: none"> <li>ü Breast surgery (medically necessary)</li> <li>ü Diabetes management (excluding insulin pumps)</li> <li>ü Heart and vascular system</li> <li>ü Lung &amp; Chest</li> <li>ü Blood</li> <li>ü Back, neck and spine</li> <li>ü Plastic and reconstructive surgery (medically necessary)</li> <li>ü Dental surgery</li> <li>ü Podiatric surgery (provided by an accredited podiatric surgeon)</li> <li>ü Implantation of hearing devices</li> <li>ü Pregnancy and birth</li> <li>ü Assisted reproductive services</li> </ul>
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**Exclusions:**

- ü Cataracts
- ü Joint replacements
- ü Dialysis for chronic kidney failure
- ü Weight loss surgery
- ü Insulin pumps
- ü Pain Management with Device
- ü Sleep studies

**Restrictions:** Rehabilitation  
 Hospital psychiatric services  
 Palliative care

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess		Level 2 Excess		Level 3 Excess
		GEFp1	GEFp2	GEFp1	GEFp2	
Admission excess (private hospital – overnight)	-	\$250	\$500	-	-	-
Waived for private hospital day stays	-	No	No	-	-	-
Admission excess (public hospital or day stay)	-	\$125	\$250	-	-	-
Maximum annual excess – per person	-	\$250	\$500	-	-	-
Maximum annual excess – singles	-	\$250	\$500	-	-	-
Maximum annual excess – families	-	\$500	\$1,000	-	-	-
Excess waived for child dependants under 21	-	Yes	Yes	-	-	-

**Product:** GMHBA Silver Plus Premium Family Package (No Pregnancy): GPFpN1 (Closed), GPFpN1 (Closed)  
**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

<ul style="list-style-type: none"> <li>ü Rehabilitation</li> <li>ü Hospital psychiatric services</li> <li>ü Palliative care</li> <li>ü Brain and nervous system</li> <li>ü Eye (not cataracts)</li> <li>ü Ear, nose and throat</li> <li>ü Tonsils, adenoids and grommets</li> <li>ü Bone, joint and muscle</li> <li>ü Joint reconstructions</li> <li>ü Kidney and bladder</li> <li>ü Male reproductive system</li> <li>ü Digestive system</li> <li>ü Hernia and appendix</li> <li>ü Gastrointestinal endoscopy</li> <li>ü Gynaecology</li> <li>ü Miscarriage and termination of pregnancy</li> <li>ü Chemotherapy, radiotherapy and immunotherapy for cancer</li> <li>ü Pain Management</li> <li>ü Skin</li> </ul>	<ul style="list-style-type: none"> <li>ü Breast surgery (medically necessary)</li> <li>ü Diabetes management (excluding insulin pumps)</li> <li>ü Heart and vascular system</li> <li>ü Lung &amp; Chest</li> <li>ü Blood</li> <li>ü Back, neck and spine</li> <li>ü Plastic and reconstructive surgery (medically necessary)</li> <li>ü Dental surgery</li> <li>ü Podiatric surgery (provided by an accredited podiatric surgeon)</li> <li>ü Implantation of hearing devices</li> <li>ü Cataracts</li> <li>ü Joint replacements</li> <li>ü Dialysis for chronic kidney failure</li> <li>ü Weight loss surgery</li> <li>ü Insulin pumps</li> <li>ü Pain Management with Device</li> <li>ü Sleep studies</li> </ul>
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**Exclusions:**

- ü Pregnancy and birth
- ü Assisted reproductive services

**Restrictions:** n/a

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess		Level 2 Excess		Level 3 Excess
		GPFpN1	GPFpN2	GPFpN1	GPFpN2	
Admission excess (private hospital – overnight)	-	\$250	\$500	-	-	-
Waived for private hospital day stays	-	No	No	-	-	-
Admission excess (public hospital or day stay)	-	\$125	\$250	-	-	-
Maximum annual excess – per person	-	\$250	\$500	-	-	-

Maximum annual excess – singles	-	\$250	\$500	-
Maximum annual excess – families	-	\$500	\$1,000	-
Excess waived for child dependants under 21	-	Yes	Yes	-

**Product:** GMHBA Gold Optimum Hospital: GOH2 (Open) GOH3 (Open)

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

<ul style="list-style-type: none"> <li>ü Rehabilitation</li> <li>ü Hospital psychiatric services</li> <li>ü Palliative care</li> <li>ü Brain and nervous system</li> <li>ü Eye (not cataracts)</li> <li>ü Ear, nose and throat</li> <li>ü Tonsils, adenoids and grommets</li> <li>ü Bone, joint and muscle</li> <li>ü Joint reconstructions</li> <li>ü Kidney and bladder</li> <li>ü Male reproductive system</li> <li>ü Digestive system</li> <li>ü Hernia and appendix</li> <li>ü Gastrointestinal endoscopy</li> <li>ü Gynaecology</li> <li>ü Miscarriage and termination of pregnancy</li> <li>ü Chemotherapy, radiotherapy and immunotherapy for cancer</li> <li>ü Pain Management</li> <li>ü Skin</li> </ul>	<ul style="list-style-type: none"> <li>ü Breast surgery (medically necessary)</li> <li>ü Diabetes management (excluding insulin pumps)</li> <li>ü Heart and vascular system</li> <li>ü Lung &amp; Chest</li> <li>ü Blood</li> <li>ü Back, neck and spine</li> <li>ü Plastic and reconstructive surgery (medically necessary)</li> <li>ü Dental surgery</li> <li>ü Podiatric surgery (provided by an accredited podiatric surgeon)</li> <li>ü Implantation of hearing devices</li> <li>ü Cataracts</li> <li>ü Joint replacements</li> <li>ü Dialysis for chronic kidney failure</li> <li>ü Pregnancy and birth</li> <li>ü Assisted reproductive services</li> <li>ü Weight loss surgery</li> <li>ü Insulin pumps</li> <li>ü Pain Management with Device</li> <li>ü Sleep studies</li> </ul>
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**Exclusions:** n/a

**Restrictions:** n/a

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess	Level 2 Excess GOH2	Level 3 Excess GOH3
Admission excess (private hospital – overnight)	-	-	\$500	\$750
Waived for private hospital day stays	-	-	Yes	Yes
Admission excess (public hospital or day stay)	-	-	\$250	\$375
Maximum annual excess - per person	-	-	\$500	\$750
Maximum annual excess – singles	-	-	\$500	\$750
Maximum annual excess – families	-	-	\$1,000	\$1,500
Excess waived for child dependants under 21	-	-	Yes	Yes

**Product:** GMHBA Gold Premium Family Package: GPFp1 (Closed), GPFp2 (Closed)

**Description:** Covered as a private patient in participating private hospitals. Shared room default benefits apply in public hospitals and non-participating private hospitals.

**Other:**

**Inclusions (Private):**

<ul style="list-style-type: none"> <li>ü Rehabilitation</li> <li>ü Hospital psychiatric services</li> <li>ü Palliative care</li> <li>ü Brain and nervous system</li> <li>ü Eye (not cataracts)</li> <li>ü Ear, nose and throat</li> <li>ü Tonsils, adenoids and grommets</li> <li>ü Bone, joint and muscle</li> <li>ü Joint reconstructions</li> <li>ü Kidney and bladder</li> <li>ü Male reproductive system</li> <li>ü Digestive system</li> <li>ü Hernia and appendix</li> <li>ü Gastrointestinal endoscopy</li> <li>ü Gynaecology</li> <li>ü Miscarriage and termination of pregnancy</li> <li>ü Chemotherapy, radiotherapy and immunotherapy for cancer</li> <li>ü Pain Management</li> <li>ü Skin</li> </ul>	<ul style="list-style-type: none"> <li>ü Breast surgery (medically necessary)</li> <li>ü Diabetes management (excluding insulin pumps)</li> <li>ü Heart and vascular system</li> <li>ü Lung &amp; Chest</li> <li>ü Blood</li> <li>ü Back, neck and spine</li> <li>ü Plastic and reconstructive surgery (medically necessary)</li> <li>ü Dental surgery</li> <li>ü Podiatric surgery (provided by an accredited podiatric surgeon)</li> <li>ü Implantation of hearing devices</li> <li>ü Cataracts</li> <li>ü Joint replacements</li> <li>ü Dialysis for chronic kidney failure</li> <li>ü Pregnancy and birth</li> <li>ü Assisted reproductive services</li> <li>ü Weight loss surgery</li> <li>ü Insulin pumps</li> <li>ü Pain Management with Device</li> <li>ü Sleep studies</li> </ul>
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**Exclusions:** n/a

**Restrictions:** n/a

**Moiety per day:** n/a

**Excess:**

Excess Options Table	Level 0 Excess	Level 1 Excess GPFp1	Level 2 Excess GPFp2	Level 3 Excess
Admission excess (private hospital – overnight)	-	\$250	\$500	-
Waived for private hospital day stays	-	No	No	-
Admission excess (public hospital or day stay)	-	\$125	\$250	-
Maximum annual excess - per person	-	\$250	\$500	-
Maximum annual excess – singles	-	\$250	\$500	-
Maximum annual excess – families	-	\$500	\$1,000	-
Excess waived for child dependants under 21	-	Yes	Yes	-

**Ancillary**

Ancillary	Code	Product	Start Date	End Date
Basic Extras	BE	Moderate Ancillary Product	01/04/2008	01/04/2014
Basic Extras Set Benefits	BS	Basic Ancillary Product	01/03/2014	
Basic Extras 55	B55	Basic Ancillary Product	01/03/2014	01/09/2025
Mid Extras (interstate)	SAE	Moderate Ancillary Product	01/04/2008	01/04/2014
Mid Extras (vic)	SDE	Moderate Ancillary Product	01/04/2008	01/04/2014
Special Care Extras	Ye	Moderate Ancillary Product	01/11/2010	01/04/2020
Mid Extras Set Benefits	SS	Moderate Ancillary Product	01/03/2014	
Mid Extras 65	S65	Moderate Ancillary Product	01/03/2014	
Top Extras	GE	Top Ancillary Product	01/04/2008	01/04/2014
Top Extras - Corporate	Qe	Top Ancillary Product	01/04/2008	01/04/2014

Top Extras - Corporate Connect Rewards	QCRe	Top Ancillary Product	01/04/2008	01/04/2014
Top Extras Set Benefits	GS	Top Ancillary Product	01/03/2014	01/09/2025
Top Extras 75	G75	Top Ancillary Product	01/03/2014	01/09/2025
Top Extras No Dental	GNE	Moderate Ancillary Product	01/09/2010	01/04/2014
Platinum Extras	PE	Top Ancillary Product	01/04/2010	01/04/2014
Essential Extras	VE	Basic Ancillary Product	18/12/2018	01/05/2025
Core Extras	VC	Moderate Ancillary Product	18/12/2018	01/05/2025
Premium Extras	VP	Top Ancillary Product	18/12/2018	01/05/2025
Basic Starter Family Package	GSFpE	Basic Ancillary Product	18/02/2016	01/04/2019
Silver Everyday Family Package	GEFNE	Moderate Ancillary Product	18/02/2016	01/04/2019
Silver Plus Everyday Family Package	GEFpE	Moderate Ancillary Product	18/02/2016	01/04/2019
Silver Plus Premium Family Package	GFNE	Top Ancillary Product	18/02/2016	01/04/2019
Gold Premium Family Package	GFPE	Top Ancillary Product	18/02/2016	01/04/2019
Silver Package	VMpE	Moderate Ancillary Product	14/12/2017	01/04/2023
Bronze Plus Choice Package	VBpE	Basic Ancillary Product	14/12/2017	01/04/2023
Basic Plus Package	ap	Basic Ancillary Product	01/04/2019	01/04/2023
Bronze Plus Package	ap	Basic Ancillary Product	01/04/2019	01/04/2023
Basic Plus Young Singles \$500 Excess	Zp	Basic Ancillary Product	01/11/2010	01/04/2014
Silver Hospital Young Singles \$250 Excess	Ze	Basic Ancillary Product	01/11/2010	01/04/2014
Budget Direct Basic Extras 55%	BBE5	Moderate Ancillary Product	01/04/2013	06/12/2019
Budget Direct Basic Extras 85%	BBE8	Moderate Ancillary Product	01/04/2013	06/12/2019
Budget Direct Established Family Package	BEF2E	Top Ancillary Product	01/06/2016	06/12/2019
Budget Direct Family Value Package	BFV2E	Top Ancillary Product	01/06/2016	06/12/2019
Budget Direct Freedom Package	BFp2E	Top Ancillary Product	01/06/2016	06/12/2019
Budget Direct New Family Package	BNF2E	Top Ancillary Product	01/06/2016	06/12/2019
Budget Direct Starter Package	BSp2E	Basic Ancillary Product	01/06/2016	06/12/2019
Budget Direct Starter Package Plus	BSpPE	Basic Ancillary Product	01/06/2016	06/12/2019
Budget Direct Top Extras 55%	BTE5	Top Ancillary Product	01/04/2013	06/12/2019
Budget Direct Top Extras 85%	BTE8	Top Ancillary Product	01/04/2013	06/12/2019
SmartCare Starter Extras with sub-limits	CTL	Basic Ancillary Product	04/08/2025	
SmartCare Starter Boost Extras with sub-limits	TBL	Basic Ancillary Product	04/08/2025	
SmartCare Starter Extras	CT	Basic Ancillary Product	04/08/2025	
SmartCare Starter Boost Extras	TB	Basic Ancillary Product	04/08/2025	
SmartCare Everyday Extras with sub-limits	CVL	Moderate Ancillary Product	04/08/2025	
SmartCare Everyday Boost Extras with sub-limits	VBL	Moderate Ancillary Product	04/08/2025	
SmartCare Everyday Extras	CV	Moderate Ancillary Product	04/08/2025	
SmartCareEveryday Boost Extras	VB	Moderate Ancillary Product	04/08/2025	
SmartCare Complete Extras with sub-limits	CCL	Top Ancillary Product	04/08/2025	
SmartCare Complete Boost Extras with sub-limits	CBL	Top Ancillary Product	04/08/2025	
SmartCare Complete Extras	CC	Top Ancillary Product	04/08/2025	
SmartCareComplete Boost Extras	CB	Top Ancillary Product	04/08/2025	