

Fund Name: Health Insurance Fund of Australia (HIF)

100 Stirling Street PERTH WA 6000 Address:

Correspondence:

PO Box X2221 PERTH WA 6847

Telephone: 1300 13 40 60 (08) 9328 3345 Facsimile: Email: info@hif.com.au Chief Executive Officer: Glenn Oellermann Claims Enquires: 1300 13 40 60

Membership Enquires: 1300 13 40 60

To confirm patient eligibility and membership level of cover please contact the Fund prior to admission. The information below is not a substitute.

Eligibility Check Fax No:

(08) 9227 0145 (Monday –Friday. 8.30am – 4.30pm WST)

"Online" eligibility checking is available 24 hours per day, 7-days per week via the HAMBS eligibility system or ECLIPSE services.

	Domestic Hospital Suite (Open) - From 1 April 2025								
Hospital accommodation for included services	Basic Starter (Packaged Cover)	Basic Plus Hospital	Bronze Hospital	Bronze Plus Hospital	Bronze Plus Simple Choice (Packaged Cover)	Silver Hospital	Silver Plus Hospital	Silver Plus No Maternity Combo	Gold Top Hospital
Shared room - all stays	✓	✓	✓	√	✓	✓	✓	✓	√
Private room - HIF-contracted private hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓
Ambulance									
Road ambulance transport	✓	✓	✓	✓	✓	✓	✓	✓	✓
Hospital treatments & services by clinical category	Basic Starter (Packaged Cover)	Basic Plus Hospital	Bronze Hospital	Bronze Plus Hospital	Bronze Plus Simple Choice(Packaged Cover)	Silver Hospital	Silver Plus Hospital	Silver Plus No Maternity Combo	Gold Top Hospital
Rehabilitation	√R	√R	√R	√R	√R	✓	✓	✓	✓
Hospital psychiatric services	√R	√R	√R	√R	√R	√R	√R	√R	✓
Palliative care	√R	√R	√R	√R	√R	✓	✓	✓	✓
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 and chest	×	×	×	✓	✓	✓	✓	✓	✓
Blood	×	×	×	✓	✓	✓	✓	✓	✓
Back, neck and spine	×	×	×	×	✓	✓	✓	✓	✓
Plastic and reconstructive surgery (medically necessary)	×	×	×	×	×	✓	✓	✓	✓
Dental surgery	×	×	×	✓	✓	✓	✓	✓	✓
Podiatric surgery	×	×	×	✓	✓	✓	✓	✓	✓
Implantation of hearing devices	×	×	×	✓	✓	✓	✓	✓	✓

Cataracts	×	×	×	×	×	×	✓	✓	✓
Joint replacements	×	×	×	×	×	×	✓	✓	✓
Dialysis for chronic kidney failure	×	×	×	×	×	×	✓	✓	✓
Pregnancy and birth	×	×	×	×	×	×	×	×	✓
Assisted reproductive services	×	×	×	×	×	×	×	×	✓
Weight loss surgery	×	×	×	×	×	×	×	×	✓
Insulin pumps	×	×	×	×	×	×	✓	✓	✓
Pain management with device	×	×	×	×	×	×	✓	✓	✓
Sleep Studies	×	×	×	×	✓	✓	✓	✓	✓
Broader health	×	×	✓	✓	✓	✓	✓	✓	✓
Chronic disease management programs	×	×	✓	✓	✓	✓	✓	✓	✓
Accident cover on services not covered	✓	✓	×	×	×	×	×	×	×
Excess Options	Basic Starter (Packaged Cover)	Basic Plus Hospital	Bronze Hospital	Bronze Plus Hospital	Bronze Plus Simple Choice(Packaged Cover)	Silver Hospital	Silver Plus Hospital	Silver Plus No Maternity Combo	Gold Top Hospital
Choice of Excess	×	√	✓	✓	×	√	✓	×	×
Excess amount	\$750	Choice of: \$500 \$750	Choice of: \$200 \$500 \$750	Choice of: \$200 \$500 \$750	\$750	Choice of: \$200 \$500 \$750	Choice of: \$200 \$500 \$750	\$500	\$750
Excess details	Excess is paid once per person per calendar year (to a maximum of twice per family policy) no matter how many times a person may be hospitalised. The excess applies to same day and overnight admissions. Does not apply to dependant children under the age of 18 on family policies						Excess is paid once per person per calendar year (to a maximum of twice per family policy) no matter how many times a person may be hospitalised. The excess applies to same day and overnight admissions.	_	

		Closed Hospital Suit	te - From 1 April 2025			
Hospital accommodation for included services	Bronze Plus Starter Hospital (Closed 21/01/2019 and Renamed 01/04/2019)	Silver Plus Saver Hospital (Closed 28/11/2018 and Renamed 01/04/2019)	Gold Hospital (closed 12/08/2019)	Gold Star Hospital (\$400 excess closed 12/08/2019)	Gold Star Hospital (None, \$200, \$500 and \$750 excess closed 31/03/2022)	Gold Top Hospital (\$500 excess closed 01/04/2025)
Shared room - all stays	✓	✓	✓	✓	✓	✓
Private room - maternity stays (HIF-contracted private hospital)	×	×	✓	✓	✓	✓
Private room - HIF-contracted private hospital	✓	×	×	✓	✓	✓
		Amb	ulance			
Road ambulance transport	✓	✓	✓	✓	✓	✓
Hospital treatments & services by clinical category	Bronze Plus Starter Hospital (Closed 21/01/2019 and Renamed 01/04/2019)	Silver Plus Saver Hospital (Closed 28/11/2018 and Renamed 01/04/2019)	Gold Hospital (closed 12/08/2019)	Gold Star Hospital (\$400 excess closed 12/08/2019)	Gold Star Hospital (None, \$200, \$500 and \$750 excess closed 31/03/2022)	Gold Top Hospital (\$500 excess closed 01/04/2025)
Rehabilitation	√R	√R	✓	✓	✓	✓
Hospital psychiatric services	√R	√R	✓	✓	✓	✓
Palliative care	√R	√R	✓	✓	✓	✓
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 and chest	✓	✓	✓	✓	✓	√	
Blood	✓	✓	✓	✓	✓	✓	
Back, neck and spine	√	√	✓	✓	√	√	
Plastic and reconstructive surgery (medically							
necessary)	*	✓	✓	✓	✓	✓	
Dental surgery	√	√	✓	✓	√	√	
Podiatric surgery	√	✓	✓	✓	√	√	
Implantation of hearing devices	√ ·	√	√	√	<u> </u>	√	
Cataracts	×	√	√	√	<u> </u>	√	
Joint replacements	×	<i>√</i>	· · · · · · · · · · · · · · · · · · ·	· ✓	<u> </u>	· ✓	
Dialysis for chronic kidney failure	×	×	√ ·	· ✓	<u> </u>	<i>✓</i>	
Pregnancy and birth	×	*	√	· ✓	<u> </u>	,	
Assisted reproductive services	× .	*	√	· ✓	<u> </u>	√	
Weight loss surgery	x	×	· ✓	· ✓	<u>·</u>	·	
Insulin pumps	× ×	×	√	√	<u> </u>	√	
Pain management with device	~	~	,	·	<u> </u>	,	
	√	√	√	√	<u> </u>	√	
Sleep Studies	√	✓	✓	√	<u> </u>	√	
Broader health	√	√	√	√	<u> </u>	√	
Chronic disease management programs	×	*	×	*	×	×	
Accident cover on services not covered	*	*	*	*		^	
Excess Options	Bronze Plus Starter Hospital (Closed 21/01/2019 and Renamed 01/04/2019)	Silver Plus Saver Hospital (Closed 28/11/2018 and Renamed 01/04/2019)	Gold Hospital (closed 12/08/2019)	Gold Star Hospital (\$400 excess closed 12/08/2019)	Gold Star Hospital (None, \$200, \$500 and \$750 excess closed 31/03/2022)	Gold Top Hospital (\$500 excess closed 01/04/2025)	
Choice of Excess	×	×	✓	✓	✓	×	
Excess amount	\$250	\$200	Choice of: \$0 \$100 \$200 \$400	\$400	Choice of: \$0 \$200 \$500 \$750	\$500	
Excess details	Excess is paid once per person per calendar year (to a maximum of twice per family policy) no matter how many times a person may be hospitalised. The excess applies to same day and overnight admissions. Does not apply to dependant children under the age of 18 on family policies.						

Overseas Hospital Suite (Open) - From 1 April 2025							
Hospital accommodation for included services	Basic	Essential	Intermediate	Comprehensive			
Private Hospital - Private Room	×	×	✓	✓			
Private Hospital - Shared Room	✓	✓	✓	✓			
Public Hospital - Private Room	×	*	✓	✓			
Public Hospital - Shared Room	✓	✓	✓	✓			
Hospital treatments & services	Basic	Essential	Intermediate	Comprehensive			
	Ambula	nce					
Road ambulance transport	✓	✓	✓	✓			
	Inpatient S	ervices					
Accidental injury	✓	✓	✓	✓			
Inpatient specialist consultations	✓	✓	✓	✓			
AccessGap cover	×	*	×	✓			
Theatre care	✓	✓	✓	✓			
Intensive care	✓	✓	✓	✓			
Inpatient radiology	✓	✓	✓	✓			
Inpatient pathology	✓	✓	✓	✓			
Inpatient pharmacy drugs	✓	✓	✓	✓			
In-hospital rehabilitation	✓	✓	✓	✓			

RESTRICTED: Authorised Recipients Only.

	Outpatient S	Services		
Doctor (GP) consultations	×	×	✓	✓
	*	x	,	<i>→</i>
Outpatient specialist consultations	×	×	√	✓
Outpatient radiology			√	√
Outpatient pathology		x		
Outpatient ultrasound scans	×	*	✓	✓
Public hospital emergency department admission	×	×	✓	✓
	Clinical Cate	egories		
Appendectomy	✓	✓	✓	✓
Removal of tonsils and adenoids	✓	✓	✓	√
Ear, nose and throat surgery	✓	✓	✓	✓
Non-cosmetic eye surgery	✓	✓	✓	✓
Back surgery	✓	✓	✓	✓
Brain surgery	✓	✓	✓	✓
Surgical removal of wisdom teeth in hospital	√	✓	✓	✓
Colonoscopy	√	√	✓	√
Endoscopy	✓	· ✓	<i>→</i>	<i>'</i>
	√	√	√	√
Gastroscopy Heart procedures	∨	√	√	√
Heart procedures	√	✓	√	√
Cancer related services				
Hernia repair	✓	√	✓	√
Gynaecological services	✓	✓	✓	✓
Surgically implanted prosthesis	✓	✓	✓	✓
	Family Pla			
Pregnancy and birth reated services	\checkmark	✓	✓	✓
Assisted reproductive technology (e.g. IVF)	×	×	×	✓
Sterilisation	✓	✓	✓	✓
	Joints	S		
Joint reconstruction	✓	✓	√	✓
Joint replacement	✓	✓	✓	✓
	Transpla	ents		
Bone marrow transplants	x	×	×	✓
	×	. x	. x	<i>→</i>
Organ transplants			^	•
	Other Ser			
Renal dialysis	✓	✓	✓	√
psychiatric care and treatment	✓	✓	✓	✓
Palliative care	✓	✓	✓	✓
Obesity related services	\checkmark	✓	✓	✓
	Repatriation in event of de	eath or terminal illness		
\$4,000	✓	✓	×	×
\$6,000	×	×	✓	×
\$8,000	×	×	×	✓
Excess Options	Basic	Essential	Intermediate	Comprehensive
Choice of Excess	×	×	×	✓ ✓
Excess amount	\$500	\$0	\$0	\$0 or \$500
Excess amount	 	70	Ţ0	90 01 9300
Excess details	Excess is applicable for all admissions.	-	-	Excess is paid once per person per calendar year (to a maximum of twice per family policy) no matter how many times a person may be hospitalised. The excess applies to overnight admissions only.

×	Excluded				
✓	Fully Covered				
√R	Restricted = Minimum default benefit				