

Fund Name: **Navy Health Ltd**
Address: PO Box 172
BOX HILL VIC 3128
Provider Telephone: 1300 217 736
General Telephone: 1300 306 289
Facsimile: (03) 9880 7939
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CEO: Ron Wilson

Claim enquiries Noel Bucoy via provider number.
Membership Enquires: All Staff via general telephone number
To confirm patient eligibility and membership level of cover please access the Patient Eligibility Website prior to admission on <https://eligibility.hamsb.com.au>

Table / Description: **Premium Gold Hospital**
Excess: \$0
Services Subject to Moiety: N/A
Restrictions: Podiatry Surgery
Exclusions: Services that do not receive a Medicare benefit eg Cosmetic surgery

Table/ Description: **Premium Gold Hospital 200/Corporate Gold Hospital 200**
Excess per Person: \$200 per person, up to max. \$400 per couples and family covers. No excess for dependants
Services Subject to Moiety: Same day/overnight accommodation and or theatre
Restrictions: Podiatry Surgery
Exclusions: Services that do not receive a Medicare benefit eg Cosmetic surgery

Table/ Description: **Premium Gold Hospital 350**
Excess per Person: \$350 per person, up to max. \$700 per couples and family covers. No excess for dependants
Services Subject to Moiety: Same day/overnight accommodation and or theatre
Restrictions: Podiatry Surgery
Exclusions: Services that do not receive a Medicare benefit eg Cosmetic surgery

Table/ Description: **Premium Gold Hospital 500 / Corporate Gold Hospital 500**
Excess: \$500 per person, up to max \$1000 per couples and family covers. No excess for dependants
Services Subject to Moiety: Same day/overnight accommodation and or theatre
Restrictions: Podiatry Surgery
Exclusions: Services that do not receive a Medicare benefit eg Cosmetic surgery

Table/ Description: **Premium Gold Hospital 750**
Excess: \$750 per person, up to max \$1500 per couple and family covers. No excess for dependants
Services Subject to Moiety: Same day/overnight accommodation and or theatre
Restrictions: Podiatry Surgery
Exclusions: Services that do not receive a Medicare benefit eg Cosmetic surgery

Table/ Description: **Core Hospital 200**
Excess: \$200 per person, up to max. \$400 per couples and family covers. No excess for dependants
Services Subject to Moiety: Same day/overnight accommodation and or theatre
Restrictions: Podiatry Surgery, Cardiac and Cardiac related services, Pregnancy and pregnancy related services, psychiatric services
Assisted Reproductive services, Major Eye Surgery, Kidney Dialysis, Bariatric Surgery, Hip and knee replacements, Services that do not receive a Medicare benefit eg Cosmetic surgery

Table/ Description: **Core Hospital 500**
Excess: \$500 per person, up to max. \$1000 per couples and family covers. No excess for dependants
Services Subject to Moiety: Same day/overnight accommodation and or theatre
Restrictions: Podiatry Surgery, Cardiac and Cardiac related services, Pregnancy and pregnancy related services, psychiatric services
Assisted Reproductive services, Major Eye Surgery, Kidney Dialysis, Bariatric Surgery, Hip and knee replacements, Services that do not receive a Medicare benefit eg Cosmetic surgery

Table/ Description: **Saver Plus / Saver Hospital - This product can not be used by the ECLIPSE system**
Excess per Membership: \$500 per person, up to max. \$1000 per couples/single-parent & family covers
Services Subject to Moiety: Same day/overnight accommodation and or theatre
Restrictions: Podiatry Surgery, Pregnancy services, Cardiac services, Psychiatric, and Rehabilitation.
Exclusions: Reproductive Services, Bariatric Surgery, Major eye surgery, Renal Dialysis, Spinal Surgery, Major Joint replacement, Services that do not receive a Medicare benefit eg Cosmetic surgery

Table/ Description: **Public Basic+ Hospital**
Excess per Membership: \$0
Restrictions: Five (5) Private hospital day procedures per person, each financial year.
Exclusions: Services that do not receive a Medicare benefit eg Cosmetic surgery

NOTES

The list of services under the heading Services Subject to Moiety are only relevant if they are contained in the current contract.

Excess is applied once in a 12 month period from the date of first admission.
Moiety are not applicable for Prostheses.

Prosthesis appliances or devices surgically implanted during a hospital stay are subject to two benefit types, either 'no gap' or 'gap permitted'. These items are listed on the Commonwealth Prosthesis Schedule.