

Fund Name: **Health Partners**
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ADELAIDE SA 5001

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Chief Executive: Jon Goodgame

Claims Enquiries: Hospital Claims
Ph: 1300 113 113
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Membership Enquiries: Member Services
Ph: 1300 113 113

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ask@healthpartners.com.au

Hospital staff - To confirm patient eligibility and membership level of cover prior to admission, please use Eclipse or our web-based system at:
<https://webserv.healthpartners.com.au/HelperOnline>

Product name:	Gold Hospital Advantage
Description:	Top cover that includes pregnancy and birth related procedures and no exclusions.
Excess:	Excess of \$750 - no excess for dependants
Co-payment	Nil
Exclusions	Nil
Restrictions	Nil
Important notes	No exclusions for all recognised Medicare procedures. Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only. At our discretion we may contribute a higher benefit depending on the services received and location of the public hospital.
Product name:	Silver Hospital Plus Advantage
Description:	Cover that excludes pregnancy and birth related procedures, weight loss surgery and restricts Hospital psychiatric services.
Excess:	Choice of excess \$250, \$500 or \$750 - no excess for dependants
Co-payment	Nil
Exclusions	Excludes Weight loss surgery, Pregnancy & birth and Assisted reproductive services as defined by Clinical Definitions. All other recognised Medicare procedures included.
Restrictions	Restricted benefit for Hospital psychiatric services - minimum default benefits apply, this could lead to large out of pocket costs.
Important notes	Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only. At our discretion we may contribute a higher benefit depending on the services received and location of the public hospital.

Product name:	Silver Hospital Plus Lite
Description:	Provides a good level of protection with some exclusions to keep costs down.
Excess:	Choice of excess \$500 or \$750 - no excess for dependants
Co-payment	Nil
Exclusions	Excludes Cataracts, Joint replacements, Dialysis for chronic kidney failure, Weight loss surgery, Pain management with device, Pregnancy & birth and Assisted reproductive services as defined by Clinical Definitions. All other recognised Medicare procedures included.
Restrictions	Restricted benefit for Hospital psychiatric services - minimum default benefits apply, this could lead to large out of pocket costs.
Important notes	Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. This cover includes Accident Cover, meaning excluded clinical categories are included as a result of an accident - contact Health Partners for details. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only. At our discretion we may contribute a higher benefit depending on the services received and location of the public hospital.

Product name:	Bronze Hospital Plus
Description:	Great starter cover for a range of common procedures.
Excess:	Choice of excess \$500 or \$750 - no excess for accidents
Co-payment	Nil
Exclusions	Excludes Heart & vascular system, Back, neck & spine, Podiatric surgery, Implantation of hearing devices, Cataracts, Joint replacements, Dialysis for chronic kidney failure, Weight loss surgery, Insulin pumps, Pain management with device, sleep studies, Pregnancy & birth and Assisted reproductive services as defined by Clinical Definitions. All other recognised Medicare procedures included.
Restrictions	Restricted benefit for Rehabilitation, Palliative care & Hospital psychiatric services - minimum default benefits apply, this could lead to large out of pocket costs.
Important notes	Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. This cover includes Accident Cover, meaning excluded clinical categories are included as a result of an accident - contact Health Partners for details. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only. At our discretion we may contribute a higher benefit depending on the services received and location of the public hospital.

Product name:	Basic Hospital Plus
Description:	Cover designed to meet the needs of the young and healthy, covers Dental Surgery, Hernia and Appendix, Joint reconstructions, Tonsils, adenoids and grommets & includes Accident Cover.
Excess:	Choice of excess \$500 or \$750
Co-payment	Nil
Exclusions	Excludes Brain and nervous system, Eye (not cataracts), Ear, nose & throat, Bone, joint and muscle, Kidney and bladder, Male reproductive system, Digestive system, Gastrointestinal endoscopy, Gynaecology, Miscarriage and termination of pregnancy, Chemotherapy, radiotherapy and immunotherapy for cancer, Pain management, Skin, Breast surgery (medically necessary), Diabetes management, Heart & vascular system, Lung & chest, Blood, Back, neck & spine, Plastic and reconstructive surgery, Podiatric surgery, Implantation of hearing devices, Cataracts, Joint replacements, Dialysis for chronic kidney failure, Weight loss surgery, Insulin pumps, Pain management with device, sleep studies, Pregnancy & birth and Assisted reproductive services as defined by Clinical Definitions. All other recognised Medicare procedures included.
Restrictions	Restricted benefit for Rehabilitation, Palliative care & Hospital psychiatric services - minimum default benefits apply, this could lead to large out of pocket costs.
Important notes	Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. This cover includes Accident Cover, meaning excluded clinical categories are included as a result of an accident - contact Health Partners for details. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only. At our discretion we may contribute a higher benefit depending on the services received and location of the public hospital.

Closed Products - closed to new memberships

Product name:	Gold Hospital
Description:	Top cover that includes pregnancy and birth related procedures and no exclusions.
Excess:	Choice of excess \$0, \$250, \$500 or \$750 - no excess for dependants
Co-payment	Nil
Exclusions	Nil
Restrictions	Nil
Important notes	No exclusions for all recognised Medicare procedures. Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only.

Product name:	Classic Hospital Gold
Description:	Full cover
Excess:	Nil
Co-payment	Nil
Exclusions	Nil
Restrictions	Nil

Important notes	Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only. At our discretion we may contribute a higher benefit depending on the services received and location of the public hospital.
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Product name:	Classic Hospital Gold 25
Description:	Full cover
Excess:	Nil
Co-payment	Co-payment amount: \$25 per day Co-payment description: Maximum 5 days per person (\$125 per year or \$250 per membership), waived for dependants
Exclusions	Nil
Restrictions	Nil
Important notes	Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only. At our discretion we may contribute a higher benefit depending on the services received and location of the public hospital.
Product name:	Classic Hospital Gold 50
Description:	Full cover
Excess:	Nil
Co-payment	Co-payment amount: \$50 per day Co-payment description: Maximum 5 days per person (\$250 per year or \$500 per membership), waived for dependants
Exclusions	Nil
Restrictions	Nil
Important notes	Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only. At our discretion we may contribute a higher benefit depending on the services received and location of the public hospital.
Product name:	Classic Hospital Gold 500
Description:	Full cover
Excess:	Excess amount: \$500 per person, per year Excess description: Maximum \$500 or \$1000 per membership, waived for dependants
Co-payment	Co-payment amount: \$50 per day Co-payment description: Maximum 5 days per person (\$250 per year or \$500 per membership), waived for dependants
Exclusions	Nil
Restrictions	Nil
Important notes	Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only. At our discretion we may contribute a higher benefit depending on the services received and location of the public hospital.

Product name:	Classic Hospital Gold 250
Description:	Full cover
Excess:	Excess amount: \$250 per person, per year Excess description: Maximum \$250 or \$500 per membership, waived for dependants
Co-payment	Co-payment amount: \$50 per day Co-payment description: Maximum 5 days per person (\$250 per year or \$500 per membership), waived for dependants
Exclusions	Nil
Restrictions	Nil
Important notes	Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only. At our discretion we may contribute a higher benefit depending on the services received and location of the public hospital.

Product name:	Silver Hospital Plus
Description:	Cover that excludes pregnancy and birth related procedures, weight loss surgery, assisted reproductive services and restricts Hospital psychiatric services.
Excess:	Choice of excess \$0, \$250, \$500 or \$750 - no excess for dependants
Co-payment	Nil
Exclusions	Excludes Weight loss surgery, Pregnancy & birth and Assisted reproductive services as defined by Clinical Definitions. All other recognised Medicare procedures included.
Restrictions	Restricted benefit for Hospital psychiatric services - minimum default benefits apply, this could lead to large out of pocket costs.
Important notes	Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only. At our discretion we may contribute a higher benefit depending on the services received and location of the public hospital.

Product name:	Classic Hospital Silver Plus
Description:	Has some exclusions, restrictions and an excess to keep premiums affordable
Excess:	Excess amount: \$500 per person, per year Excess description: Maximum \$500 or \$1000 per membership
Co-payment	Co-payment amount: \$50 per day Co-payment description: Maximum 5 days per person (\$250 per year or \$500 per membership)
Exclusions	Excludes Joint replacements, Dialysis for chronic kidney failure, Weight loss surgery, Pregnancy & birth and Assisted reproductive services as defined by Clinical Definitions. All other recognised Medicare procedures included.
Restrictions	Restricted benefit for Rehabilitation & Hospital psychiatric services - minimum default benefits apply, this could lead to large out of pocket costs.
Important notes	Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only.

Product name:	Classic Hospital Bronze Plus
Description:	Has some exclusions, restrictions and an excess to keep premiums affordable
Excess:	Excess amount: \$500 per person, per year Excess description: Maximum \$500 or \$1000 per membership, waived for surgical removal of wisdom teeth and accidents
Co-payment	Nil
Exclusions	Excludes Implantation of hearing devices, Cataracts, Joint replacements, Dialysis for chronic kidney Failure, Weight loss surgery, Insulin pumps, Pregnancy & birth and Assisted reproductive services as defined by Clinical Definitions. All other recognised Medicare procedures included.
Restrictions	Restricted benefit for Rehabilitation & Hospital psychiatric services - minimum default benefits apply, this could lead to large out of pocket costs.
Important notes	Significant out-of-pocket costs may apply for persons who do not have full Medicare eligibility. For private patient in a public hospital for services included on the members cover, we will pay the Default Benefit as set by the Government for a shared room only. At our discretion we may contribute a higher benefit depending on the services received and location of the public hospital.
