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

Product name: Gold Hospital Advantage
Description: Top cover that includes pregnancy and birth related procedures and no exclusions.
Excess: Excess of \$750 per person or \$1500 per membership - no excess for dependants, no excess for accident
Co-payment: Nil
Exclusions: No exclusions or restrictions, except procedures that don't attract a Medicare Rebate
Restrictions: No restrictions
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: Silver Hospital Plus
Description: Cover that excludes pregnancy and birth related procedures, weight loss surgery and restricts Hospital psychiatric services.
Excess: Choice of excess \$250/\$500/\$750 per person or \$500/\$1000/\$1500 per membership- no excess for dependants, no excess for accident
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.

Product name: Silver Hospital Plus
Description: Provides a good level of protection with some exclusions to keep costs down.
Excess: Choice of excess \$500/\$750 per person or \$1000/\$1500 per membership- no excess for dependants, no excess for accident
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.

Product name: Bronze Hospital Plus
Description: Great starter cover for a range of common procedures.
Excess: Choice of excess \$500/\$750 per person or \$1000/\$1500 per membership- No excess for accident
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.

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, Male reproductive system, Gastrointestinal endoscopy, Gynaecology, Miscarriage and termination of pregnancy & includes Accident Cover.
Excess: Choice of excess \$500/\$750 per person or \$1000/\$1500 per membership- No excess for accident
Co-payment: Nil
Exclusions: Excludes Brain and nervous system, Eye (not cataracts), Ear, nose & throat, Bone, joint and muscle, Kidney and bladder, Digestive system, 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.

Product name:	Classic Accident Hospital
Description:	Cover only provides Accident cover
Excess:	\$750 per person or \$1500 per membership - No excess for accident
Co-payment	Nil
Exclusions	Restricted cover applies to Rehabilitation, hospital psychiatric services and palliative care only (minimum benefits payable and significant out-of-pocket costs may apply). All other clinical categories are excluded unless the admission is related to an Accident and meets the requirements of Health Partners Accident Cover (refer to the Member Guide or contact Health Partners to confirm eligibility). For private patients in a public hospital, the Government Default Benefit for a shared room only is payable.
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.

Grandfathered Products - closed to new memberships

Product name:	Classic Hospital
Description:	Top cover that includes pregnancy and birth related procedures and no exclusions.
Excess:	Choice of excess \$250/\$500/\$750 per person or \$500/\$1000/\$1500 per membership- no excess for dependants, no excess for accident
Co-payment	Nil
Exclusions	No exclusions or restrictions, except procedures that don't attract a Medicare Rebate.
Restrictions	No restrictions
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	No exclusions or restrictions, except procedures that don't attract a Medicare Rebate.
Restrictions	No restrictions
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 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	No exclusions or restrictions, except procedures that don't attract a Medicare Rebate.
Restrictions	No restrictions
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 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	No exclusions or restrictions, except procedures that don't attract a Medicare Rebate.
Restrictions	No restrictions
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 Gold 500
Description:	Full cover
Excess:	\$500 per person or \$1000 per membership- no excess for dependants, no excess for accident
Co-payment	Nil
Exclusions	No exclusions or restrictions, except procedures that don't attract a Medicare Rebate.
Restrictions	No restrictions
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 Gold 250
Description:	Full cover
Excess:	\$250 per person or \$500 per membership- no excess for dependants, no excess for accident
Co-payment	Nil
Exclusions	No exclusions or restrictions, except procedures that don't attract a Medicare Rebate.
Restrictions	No restrictions
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:	Silver Hospital Plus
Description:	Cover that excludes pregnancy and birth related procedures, weight loss surgery and restricts Hospital psychiatric services.
Excess:	Choice of excess \$0/\$250/\$500/\$750 per person or \$0/\$500/\$1000/\$1500 per membership- no excess for dependants, no excess for accident
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.

Product name:	Platinum Hospital Silver Plus
Description:	Has some exclusions, restrictions and an excess to keep premiums affordable
Excess:	Maximum \$500 per person or \$1000 per membership - No excess for accident
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:	Maximum \$500 per person or \$1000 per membership - No excess for accident, no excess 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.