Your Health Cover

OSHC Core

This cover meets the Department of Home Affairs student visa requirements

Medical Benefits

We pay benefits towards medical services provided by a doctor either in or out of hospital, that are listed on the Australian Government Medicare Benefits Schedule (MBS). You must pay the difference, if any, between the benefit nib pays and the actual fee charged by the doctor or medical provider. No benefits are payable for services not covered by this policy, see 'Exclusions' below.

The medical services and benefits payable under nib OSHC Core:

Services	Benefits
Doctor (general practitioner) visits	Benefits equivalent to 100% of the MBS fee for consultations with a doctor. If your doctor charges more than the recommended MBS fee you will be required to pay the difference
Medical services provided out of hospital (e.g. specialists, pathology and radiology)	Benefits equivalent to 85% of the MBS fee
Medical services provided when admitted to hospital (e.g. surgeon's fees, anaesthetist's fees)	Benefits equivalent to 100% of the MBS fee
Emergency ambulance (medically necessary transport provided by a State and Territory ambulance service)	Benefits equivalent to 100% of the ambulance fee

Hospital Inpatient Benefits

When you're admitted to a private hospital that is contracted to nib, we will pay 100% of the contracted rate for the following services that relate to procedures included on nib OSHC Core.

- ✓ Doctors' surgical fees and in-hospital consultations (100% of the MBS Fee)
- ✓ Hospital accommodation for overnight and same day stays
- ✓ Government approved prosthetic devices
- ✓ Operating theatre, intensive care and ward fees
- ✓ Pharmaceuticals for treatment when in hospital

If admitted to a private hospital that is not contracted to nib, we will pay 100% of the default benefit. This may result in significant out-of-pocket expenses. No benefits are payable for services listed under 'Exclusions'.

If you are admitted to a shared ward in a public hospital, we will pay 100% of the Gazetted Rate determined by State and Territory health authorities. This may result in you experiencing significant out-of-pocket expenses.

You will be responsible for paying any difference between the benefit we pay and the amount charged. It is important that you check your benefit entitlement with nib before going into hospital by calling **1800 775 204**.

Waiting periods apply

See the following page

Examples of Inclusions

- ✓ Accidents
- ✓ All eye surgery (e.g. cataracts, squints, pterygiums)
- ✓ Back surgery (e.g. slipped disc)
- ✓ Colonoscopies and bowel surgery
- ✓ Grommets in ears
- ✓ Heart surgery (e.g. stents, open heart surgery)
- ✓ Hernia surgery
- ✓ Kidney stone and gall stone removal
- ✓ Knee and shoulder surgery
- ✓ Knee, hip and shoulder investigations
- ✓ Major joint replacement (e.g. artificial knee/hip)
- ✓ Rehabilitation programs
- ✓ Removal of appendix
- ✓ Removal of tonsils and adenoids
- ✓ Renal dialysis
- ✓ Upper gastrointestinal investigations
- ✓ All other Medicare recognised services that are not listed as Exclusions

This product information is correct as at 16 June 2026 and intended as a summary only.
It should be read in conjunction with the OSHC Fund Rules.

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Exclusions

Exclusions are services not covered under your health cover. You will not receive a benefit for the services listed below.

- ✕ Cosmetic surgery
- ✕ Extra services such as treatments by a dentist, physiotherapist or any other Extras service provider
- ✕ Infertility treatments like assisted reproductive services or in-vitro fertilisation and secondary conditions related to infertility treatments
- ✕ Transportation into or out of Australia
- ✕ Treatment arranged before arriving in Australia
- ✕ Treatment outside of Australia or en route to or from Australia
- ✕ Services and treatments that are covered by compensation or damages of any kind (like workers compensation or third party insurance)
- ✕ Services not covered by Medicare and therefore not attracting MBS item numbers such as non-government approved MRI scans, cosmetic surgery, laser eye surgery and experimental surgery

Please note that this list is not all-inclusive. For a full list of Exclusions please refer to the nib OSHC Fund Rules.

Standard Waiting Periods

Waiting periods apply if you are new to health insurance. You need to serve the waiting periods before you are entitled to receive the benefits below.

- **12 months** - Pre-existing conditions except psychiatric
- **12 months** - Pregnancy and birth related services if your cover is less than 2 years in duration
- **2 months** - Pre-existing psychiatric treatment
- **No waiting period** - Ambulance services
- **No waiting period** - Pregnancy and birth related services if your cover is 2 or more years in duration prior to commencing.

Prescription Medicines

Limit of $50 per prescription item listed on the Pharmaceutical Benefits Scheme (PBS), after you pay the PBS patient contribution.

- $500 yearly limit for singles
- $1,000 yearly limit for couples and families

No benefits are payable for items not listed on the PBS.

Important

If you gain access to Medicare entitlements or your visa status changes (e.g. you are granted permanent residency), your OSHC policy may no longer be suitable. Please contact us if your circumstances change.

We recommend that you confirm any out-of-pocket expenses before admission with the hospital and doctors (including the surgeon, assistant surgeon and anaesthetist).

Where possible before booking treatment, you should always call us to ask about the benefits you can expect to receive and any out-of-pocket expenses you might incur.

Graduating and moving to 485 Visa?

Great value health insurance from nib that meets 485 visa requirements.



Simply visit **nib.com.au/OSHC** or call nib on **1800 775 204**

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