

Your Hospital Cover

nib United Gold Resident Cover

This cover is only available to members whose employer has a corporate plan with nib through UnitedHealthcare Global.

What's Covered

- ✓ Medical treatments not requiring surgery, investigative procedures & surgeries
- ✓ Day surgery
- ✓ Overnight accommodation (private room where available)
- ✓ Special care unit accommodation (e.g. intensive, coronary & neonatal care)
- ✓ Operating theatre fees
- ✓ Government approved prosthetic devices (e.g. artificial hip joint, pacemaker)
- ✓ Doctors surgical fees and in-hospital consultations
- ✓ Allied health services (e.g. physiotherapy, occupational therapy)
- ✓ Prescription medication required for specific treatment when in hospital
- ✓ Ward-drugs and sundry medical supplies (e.g. bandages, painkillers)
- ✓ Patient meals
- ✓ Nursing care



Hospital Excess

No excess applies to this cover

Out-of-pocket expenses will apply to any services that are excluded or restricted on your cover.

Included Hospital Services

- ✓ Assisted reproductive services
- ✓ Back, neck and spine
- ✓ Blood
- ✓ Bone, joint and muscle
- ✓ Brain and nervous system
- ✓ Breast surgery (medically necessary)
- ✓ Cataracts
- ✓ Chemotherapy, radiotherapy and immunotherapy for cancer
- ✓ Dental surgery
- ✓ Diabetes management (excluding insulin pumps)
- ✓ Dialysis for chronic kidney failure
- ✓ Digestive system
- ✓ Ear, nose and throat
- ✓ Eye (not cataracts)
- ✓ Gastrointestinal endoscopy
- ✓ Gynaecology
- ✓ Heart and vascular system
- ✓ Hernia and appendix¹
- ✓ Hospital psychiatric services
- ✓ Implantation of hearing devices
- ✓ Insulin pumps
- ✓ Joint reconstructions
- ✓ Joint replacements
- ✓ Kidney and bladder
- ✓ Lung and chest
- ✓ Male reproductive system
- ✓ Miscarriage and termination of pregnancy
- ✓ Pain management
- ✓ Pain management with device
- ✓ Palliative care
- ✓ Plastic and reconstructive surgery (medically necessary)
- ✓ Podiatric surgery (provided by a registered podiatric surgeon)²
- ✓ Pregnancy and birth
- ✓ Rehabilitation
- ✓ Skin
- ✓ Sleep studies
- ✓ Tonsils, adenoids and grommets
- ✓ Weight loss surgery

Other Included Services

Ambulance - Emergency ambulance transport³

Excluded Hospital Services

- ✗ Cosmetic surgery
- ✗ Laser eye surgery
- ✗ Procedures not covered by Medicare

Don't Forget

Benefits are **NOT** payable for services performed by a medical practitioner, specialist, radiologist, radiographer, sonographer or pathologist when you were not an admitted private patient in a hospital.

Always call us first if you need to go to hospital

We can check your level of cover and advise you if you will experience any out-of-pocket expenses before you make a claim.

¹ Hospital investigation and treatment of a hernia or appendicitis. This benefit only covers a limited number of hernia repairs. It's essential to check the MBS item number for your procedure, as the treatment of hernias can fall under a different category (such as Digestive System).

² Hospital Treatment provided by a registered podiatric surgeon is limited to cover for accommodation and prosthetic devices. No benefits are payable for podiatric surgeon fees, medical specialist fees (e.g. anaesthetist) or theatre costs. Refer to the Policy Booklet for more information.

³ Excludes residents of QLD and TAS who have ambulance services provided by their State ambulance schemes.

Your Extras Cover

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Extras Covered	Annual Limit	Percentage Back
	Maximum amount claimable per person in a calendar year	
General dental treatment Includes fillings, basic extractions, x-rays		100%
Major dental treatment Includes root canal therapy, crowns, bridges dentures, oral surgery	\$2,500	80%
Orthodontia E.g. braces		60%
Optical appliances Includes prescription glasses and contact lenses	\$350	100%
Physiotherapy/Exercise physiology	40 visits	100%
Chiropractic/Osteopathy	40 visits	100%
Healthier lifestyle nib approved weight management, quit smoking and health management programs (gym, personal trainers)	\$250	100%
Preventative health tests Breast screening, thin prep, bone density testing, bowel screening tests	No annual limit	100%
Speech pathology (Speech therapy)	20 visits	100%
Occupational therapy	20 visits	100%
Eye therapy (Orthoptics)	20 visits	100%
Hearing aids 2 purchases per person every 5 years	\$5,000	100%
Artificial aids (appliance limits apply) Payable for specified services	\$5,000	100%
Psychology (no benefits are payable for tests or assessments, or if a benefit has already been claimed through Medicare)	No annual limit	100%
Pharmaceutical prescriptions (benefits only payable for non PBS items. Benefits do not apply to prescriptions dispensed to hospital inpatients)	No annual limit	100%
Natural therapies (consultations only) Acupuncture, remedial massage, Chinese herbalism and myotherapy	No annual limit	100%

Your Extras Cover

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Extras Covered	Annual Limit	Percentage Back
Maximum amount claimable per person in a calendar year		
Antenatal & postnatal services (by a midwife in private practice)	No annual limit	100%
Dietary advice (consultations only)	No annual limit	100%
Podiatry (consultations only)	No annual limit	100%
Home nursing services	No annual limit	100%