

# **Product Summary**

Saver Hospital with Daily Co-Pay (Bronze Plus) \$750 Excess with \$50 Daily Co-Payment

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

This Product Summary should be read together with the see-u Member Guide. Together, these documents set out important information including how your cover works, as well as your rights and obligations under your cover.



### Included Service

Where treatment is covered, benefits will be paid towards:

- · Charges for overnight or same day accommodation in a private or shared room
- Intensive care
- · Theatre fees
- Surgically implanted Medical Devices and Human Tissue Products (to the minimum benefit listed on the Federal Government's Prescribed List)
- · The Doctors' charges for in-hospital medical services up to the Medicare Schedule Fee.



### X Excluded Service

No benefits will be payable for any hospital admission, medical or other costs on an excluded service and you will be responsible for covering all associated costs.



### Restricted Service

We will only pay default benefits for Restricted Services.

For information on what this means, please refer to the see-u Member Guide.

#### **Accident Cover**

Accident Cover provides temporary hospital coverage for up to 90 days following an Accident for services that are normally Restricted or Excluded if the hospital treatment is required for injuries that are sustained in the Accident.

Accident Cover will not pay benefits for any hospital treatment required as a result of an accident that

- · Prior to joining this cover
- · Within the Accident waiting period or
- If the related admission occurs more than 90 days after the Accident

# **Important Information**

### **Waiting Periods**

When you first join see-u or upgrade your cover to include new services, there's a period you'll need to wait before you're able to claim certain services.

If you're transferring from another health fund, any waiting periods you've already served with your previous health fund for the same services will be recognised on an equivalent see-u cover. Please refer to the see-u Member Guide for more information on transferring from another health fund.

This table shows the waiting periods that apply to different services:

Ambulance Cover	1 Day
<b>Accident</b> (An unforeseen event, occurring by chance and caused by an unintentional and external force or object resulting in involuntary hurt or injury to the body, which requires Treatment by a Medical Practitioner or a Hospital Emergency department (within 48 hours). This definition excludes unforeseen Conditions attributable to medical causes.).	
Rehabilitation, Palliative care and Hospital Psychiatric services	2 Months
All other hospital treatments	
<b>Pre-existing conditions, ailments or illness</b> (A pre-existing condition is an ailment, illness or condition that, in the opinion of a Medical Practitioner appointed by us, existed at any time in the 6 months before you became insured under or changed your cover).	12 Months

### **Excess and Co-Payment**

#### Excess

An Excess is an amount you contribute towards the cost of your hospital stay or day surgery on admission. Having an Excess is a way of reducing your premium.

There is a standard \$750 excess on this product which applies per person (including Dependants), per admission to a maximum of \$1500 per calendar year.

#### Co-Payment

A Co-Payment is a daily amount you pay towards the cost of your hospital treatment when admitted to hospital and is payable in addition to any hospital excess.

A \$50 per day Co-Payment applies to this product which is capped at \$250 for each admission.

The Co-Payment applies to any same day and overnight admissions throughout a calendar year and is payable by Dependants.

### **Out of Pocket Expenses**

Please be aware that there are a range of circumstances which may result in you incurring out of pocket expenses, even if the treatment is for a service that is included on your cover.

We encourage you to call us to discuss your cover, and how to manage out of pocket expenses before you are admitted to hospital.

## Other features and benefits

### **Ambulance**

We will pay benefits towards emergency ambulance services if you do not hold a subscription with an ambulance provider, are not eligible for concession, or a free ambulance transport or state ambulance scheme does not provide cover.

This is capped at 2 medically necessary emergency ambulance claims per person on the policy, per calendar year. To find out more, refer to the see-u Member Guide.

### Agreement Hospitals

We have agreements with the majority of private hospitals and day surgeries in Australia. You can choose to be admitted to any hospital, but if your chosen hospital does not have an agreement with us, you may be subject to large out of pocket expenses, in addition to any Excess or Co-Payment.

A complete list of agreement hospitals is available at <a href="https://www.seeuhealthinsurance.com.au/faqs/information-for-policy-holders">https://www.seeuhealthinsurance.com.au/faqs/information-for-policy-holders</a>.

### **Access Gap Cover Scheme**

Access Gap Cover is a scheme aiming to help eliminate or reduce your out of pocket costs for in-hospital medical or Doctors' fees. If your Doctor or Specialist chooses to participate in our Access Gap Cover scheme you will have lower or no out of pocket expenses. Access to a list of Doctors and Specialists participating in the Access Gap Cover Scheme is available at <a href="https://www.seeuhealthinsurance.com.au/search-providers">https://www.seeuhealthinsurance.com.au/search-providers</a>. Please also refer to our Member Guide for more details on Access Gap Cover.

#### **Under 30's Discount**

This product is eligible for an age-based discount. Depending on your age, you may be eligible to receive up to a 10% discount on this hospital product. To find out more, refer to the see-u Member Guide.



Current as at 1 September 2025. We may change product features and benefits from time to time, but we will give you reasonable notice before making any detrimental changes. Visit <a href="https://www.seeuhealthinsurance.com.au">https://www.seeuhealthinsurance.com.au</a> or call us on 1300 499 260 to make sure you have the latest Product Summary. HBF Health Limited ABN 11 126 884 786 trading as see-u by HBF ("see-u", "we" or "us").