

Our Hospital covers at a glance



Gold Top Hospital

A comprehensive cover

- ✓ Must be taken with an Extras cover.
- ✓ Covers all Medicare recognised hospital procedures.
- ✓ Ideal if you are planning a family or want the best nib cover.



Silver Advantage Hospital Plus You want extensive cover but don't need pregnancy

- ✓ Don't pay for pregnancy and assisted reproductive services.
- ✓ Ideal for completed families and over 55's.



Silver Hospital

Great value cover including many of our most commonly claimed services

- ✓ Excludes some hospital procedures you're less likely to need.
- ✓ Ideal if you're healthy and not planning on having kids.



Bronze Hospital Plus

A cover that includes more than just the basics

- ✓ Covers you for accidents and many commonly claimed procedures.
- ✓ Great choice if you're young and healthy or on a budget.



Basic Essential Hospital Plus

Our basic cover

- Covers you for accidents, some specific hospital services as well as emergency ambulance[^].
- ✓ Great choice for your first health cover or families on a budget.

Key features

- ✓ nib Accidental Injury Benefit¹.
- ✓ nib emergency ambulance cover[^].
- ✓ No excess for dependant children under 21 years of age.
- ✓ Can help you to avoid the Medicare Levy Surcharge if you have a taxable income above \$90,000 (\$180,000 for families) and Lifetime Health Cover Loading.

Refer to the Policy Booklet for benefit terms and conditions (available at **nib.com.au**). Not available to residents of Queensland and Tasmania who have ambulance services provided by their State ambulance schemes, or pension and health care card holders who have ambulance services provided by State ambulance schemes (check entitlements with Centrelink if unsure).

Hospital excess options to help you save money

A hospital excess is the amount you pay towards the cost of a hospital stay before any benefits are payable by nib. Selecting a higher excess means your premiums with nib will be lower.

You only pay an excess if you or someone (other than a dependant child under 21 years of age) on your policy goes to hospital. The number of times a hospital excess is payable per calendar year varies (check your product information).

Hospital excess options \$250 | \$500 | \$750

\$250 option not available on Gold Top Hospital, Silver Hospital or Bronze Hospital Plus. \$500 option not available on Gold Top Hospital.

Great value for families

- ✓ No hospital excess for dependant children under 21 years of age.
- For each of the products listed on this page, each adult on the policy will only pay one excess per calendar year if they go to hospital, no matter how many admissions they may need.

If you've recently switched Hospital covers your previous level of excess may apply for up to 12 months for pre-existing conditions.

This product information is correct as at 1 July 2021 and is intended as a summary only. It should be read in conjunction with the Policy Booklet, available at **nib.com.au**. Rules and benefits may change from time to time. nib health funds limited abn 83 000 124 381.

In-hospital treatments and surgery

Included and excluded hospital
services by Hospital cover

This cover must be taken with an Extras Cover	Hospital Plus		Hospital		Hospital Plus		Hospital Plus			
\$750	\$250	\$500	\$750	\$500	\$750	\$500	\$750	\$250	\$500	\$750
per person per calendar year	per pers	on per caler	ndar year	per person per	r calendar year	per person pe	r calendar year	per pers	on per caler	ndar year

Basic Essential

Silver Advantage

Included and excluded hospital		This cover must be taken with an Extras cover	nuspital rius	nospital	nospitai rius	nospital Flus
services by Hospital cover	Hospital excess options	\$750	\$250 \$500 \$750	\$500 \$750	\$500 \$750	\$250 \$500 \$750
		per person per calendar year	per person per calendar year	per person per calendar year	per person per calendar year	per person per calendar year
Rehabilitation		✓	✓	✓	MBP	MBP
Hospital psychiatric services		✓	МВР	МВР	МВР	МВР
Palliative care		✓	✓	✓	MBP	МВР
Brain and nervous system		✓	✓	✓	✓	×
Eye (not cataracts)		✓	✓	✓	✓	×
Ear, nose and throat		✓	✓	✓	✓	×
Tonsils, adenoids and grommets		✓	✓	✓	✓	✓
Bone, joint and muscle		✓	✓	✓	✓	×
Joint reconstructions		✓	✓	✓	✓	✓
Kidney and bladder		✓	✓	✓	✓	×
Male reproductive system		✓	✓	✓	✓	×
Digestive system		✓	✓	✓	✓	×
Hernia and appendix		✓	✓	✓	✓	✓
Gastrointestinal endoscopy		✓	✓	✓	✓	✓
Gynaecology		✓	✓	✓	✓	✓
Miscarriage and termination of pregnancy		✓	✓	✓	✓	✓
Chemotherapy, radiotherapy and immunotherapy for cancer		✓	✓	✓	✓	×
Pain management		✓	✓	✓	✓	×
Skin		✓	~	✓	✓	×
Breast surgery (medically necessary)		✓	✓	✓	~	×
Diabetes management (excluding insulin pumps)		✓	~	✓	~	×
Heart and vascular system		✓	✓	✓	×	×
Lung and chest		✓	✓	✓	✓	×
Blood		✓	✓	✓	✓	×
Back, neck and spine		✓	✓	✓	×	×
Plastic and reconstructive surgery (medically necessary)		✓	✓	✓	×	×
Dental surgery		✓	✓	✓	✓	✓
Podiatric surgery (provided by a registered podiatric surgeon)		⊻	~	¥	~	×
Implantation of hearing devices		✓	✓	✓	×	×
Cataracts		✓	✓	×	×	×
Joint replacements		✓	✓	×	×	×
Dialysis for chronic kidney failure		✓	✓	×	×	×
Insulin pumps		✓	~	×	×	×
Pain management with device		✓	✓	×	×	×
Sleep studies		✓	~	×	×	×
Pregnancy and birth		✓	×	×	×	×
Assisted reproductive services		✓	×	×	×	×
Weight loss surgery		✓	×	×	×	×

Other included services All product levels include:

'Refer to the Policy Booklet for benefit terms and conditions (available at nib.com.au). And available to residents of Queensland and Tasmania who have ambulance services provided by their State ambulance schemes, or pension and health care card holders who have ambulance services provided by State ambulance schemes (check entitlements with Centrelink if unsure).

[✓] nib Accidental Injury Benefit¹ (waiting period 1 day)

[✓] nib emergency ambulance cover[^] (waiting period 1 day).

^{*}Minimum Benefits Payable (MBP) means that we will pay the minimum amount of benefits that we are required to pay under the Private Health Insurance Act, to or on behalf of a member for hospital treatment under a Hospital cover. If you're attending a private hospital for these services, there will be significant out-of-pocket costs. If a treatment important to you is listed as MBP, we recommend you consider a higher level of cover.

[👱] 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.

The Medicare Levy Surcharge and how you could avoid paying extra tax

If your taxable income is above \$90,000 (\$180,000 for families), and you don't have an appropriate level of private Hospital cover, you may have to pay the Medicare Levy Surcharge. This is an additional 1% to 1.5% in tax (on top of the Medicare Levy we all have to pay).

How much you could be required to pay in extra tax depends on your income (or combined income for couples and families):

	Base Tier	Tier 1	Tier 2	Tier 3		
Singles	\$90,000 or less	\$90,001–105,000	\$105,001–140,000	\$140,001+		
Families	\$180,000 or less	\$180,001–210,000	\$210,001–280,000	\$280,001+		
Medicare Levy Surcharge						
	0.0%	1.0%	1.25%	1.5%		

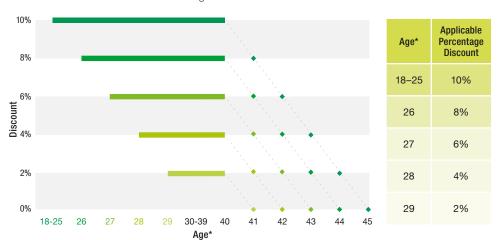
You can avoid the Medicare Levy Surcharge (and pay less tax) by joining any nib Hospital cover and maintaining it for the full financial year. If you take out Hospital cover part-way through the financial year, you will only avoid the surcharge for the period you held suitable Hospital cover.

Source: Australian Tax Office. These thresholds apply for the 2021/2022 financial year. For families, and single parent families, the threshold increases by \$1,500 for each dependant child after the first. There are specific rules for calculating income for Medicare Levy Surcharge purposes. For more information go to ato.gov.au

Age Based Discount

Age Based Discounting is a Federal Government initiative designed to encourage people to purchase private Hospital cover earlier in life. This means, if you are aged under 30 and take out private Hospital cover, you may be eligible to receive a discount. The discount is based on your age on the Discount Assessment Date, which is generally 1 April 2019, or the date you first took out an eligible private Hospital cover following 1 April 2019.

When a person turns 41, the Age Based Discount will reduce at the rate of 2% per year, so that no Age Based Discounts are available after the age of 45.

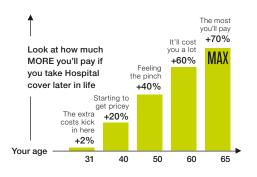


*Age as at the Discount Assessment Date

Join early to avoid paying more

Under Lifetime Health Cover (LHC) if you don't have Hospital cover by 1 July after your 31st birthday, you'll pay a 2% loading on top of the normal premiums for each year you don't have Hospital cover. The loading applies for 10 years of continuous Hospital cover.

This isn't just with nib, but every health fund. So if you wait until you're 40, you'll pay 20% more than someone on the same cover who joined when they were 31.



The Australian Government Rebate on private health insurance

The Private Health Insurance Rebate offers a saving on the cost of private health cover funded by the Federal Government. The level of Rebate you could be entitled to receive is based on the age of the oldest person on the policy and your taxable income (or combined family income for couples and families).

The table below will help you determine which rebate level you could be entitled to. The Rebate percentages are set annually by the Australian Government.

If you have a Lifetime Health Cover loading, the Rebate is not claimable on the LHC loading component of your premium

	Base Tier	Tier 1	Tier 2	Tier 3
Singles	\$90,000 or less	\$90,001–105,000	\$105,001–140,000	\$140,001+
Families	\$180,000 or less	\$180,001–210,000	\$210,001–280,000	\$280,001+

Private Health Insurance Rebate – from 1 April 2021

	Base Tier	Tier 1	Tier 2	Tier 3
Under 65	24.608%	16.405%	8.202%	0%
65-69	28.710%	20.507%	12.303%	0%
70+	32.812%	24.608%	16.405%	0%

Source: Australian Tax Office. These thresholds apply for the 2021/2022 financial year. For families, and single parent families, the threshold increases by \$1,500 for each dependant child after the first. All members on the policy must be eligible to claim the Rebate. There are specific rules for calculating income for Australian Government Rebate purposes. For more information go to ato.gov.au

Need help?

Go to **nib.com.au**Call us on **13 14 63** Mon-Fri: 8am-8.30pm Sat: 8am-1pm (AEST/AEDT)