Cover Summary

Medibank Silver Plus Families.



This cover is only available for couples and families.

Here's a summary of the services and treatments we pay benefits towards on your cover. Please read it and keep it somewhere safe for future reference. For a better understanding of how your cover works refer to your Member Guide, which is a summary of our Fund Rules and policies, or call us on 132 331.

Hospital cover

Hospital cover can pay towards services you receive when you're admitted to hospital and treated as a private patient. It can only pay towards some services when you're not admitted to hospital such as ambulance. It won't pay towards seeing your GP and specialist.

Here are the services that are Included, Restricted and Excluded under your Hospital cover.

You may still incur out-of-pocket expenses above the amount we pay. Before booking your treatment, call us to find out the benefits you can expect to receive, and what out-of-pocket expenses you might incur.

Ambulance services [~] Accident Cover Boost Rehabilitation Hospital psychiatric services Palliative care	ı
Rehabilitation Hospital psychiatric services	4
Hospital psychiatric services	_
	·
	ı
Brain and nervous system	·
Eye (not cataracts)	·
Ear, nose and throat	·
Tonsils, adenoids and grommets	·
Bone, joint and muscle	ı
Joint reconstructions	·
Kidney and bladder	·
Male reproductive system	·
Digestive system	·
Hernia and appendix	·
Gastrointestinal endoscopy	·
Gynaecology	·
Miscarriage and termination of pregnancy	ı
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	,
Pregnancy and birth	,
Assisted reproductive services	,
Weight loss surgery	,
Insulin pumps	ı
Pain management with device	,

? What does it mean?

✓ Included Service

We pay benefits towards overnight and same day hospital accommodation, intensive care and medical services where a Medicare benefit is payable. Medibank has arrangements with most private hospitals and day surgeries in Australia - these are known as Members' Choice hospitals. You'll generally get better value if you go to one of these providers.

If you're treated at a non-Members' Choice private hospital, we'll generally pay lower benefits and you may incur significant out-of-pocket expenses.

Where you're treated as a private patient in a public hospital, we'll pay benefits towards overnight and same-day accommodation in a shared room. If you have a private room in a public hospital, we may pay an additional amount towards this, but the hospital may still charge you an out-of-pocket expense.

Restricted Service

A Restricted Service is a service where we pay the minimum benefit set by the government towards hospital accommodation.

If you're treated in a private hospital for a Restricted Service, you are likely to incur substantial out-of-pocket expenses because this minimum benefit will not be enough to cover all hospital costs.

For Restricted Services as a private patient in a public hospital we will pay minimum shared room benefits.

x Excluded Service

An Excluded Service is a service that we won't pay any benefits towards, including any hospital accommodation or medical services.

Hospital cover does not pay towards cosmetic treatment that is not medically necessary.

Common and Support Services

There are a number of Medicare Benefits Schedule (MBS) items that will also be included to support the services under this cover where a benefit is payable. These may include items like in-hospital consultations and some scans, tests and anaesthetics that are associated with your hospital admission.

- For ambulance attendance or transportation to a hospital where immediate professional attention is required and your medical condition is such that you couldn't be transported any other way. TAS and QLD have State schemes to cover ambulance services for residents of those States.
- * Your hospital cover does not include non-PBS drugs. We will only pay towards cancer-related surgery where that surgery is an Included or Restricted Service under your cover.
- ^ For Dental surgery performed by a dentist rather than a medical practitioner we only pay benefits towards hospital charges. If the surgery is performed by a medical practitioner and Medicare benefits are payable, we will pay benefits towards the hospital and medical charges.
- + For Podiatric surgery we only pay benefits towards hospital charges. There are no Medicare benefits payable for podiatric surgery. This means we also don't pay any benefits towards the podiatric surgeon's fees under Hospital cover and you could incur significant out-of-pocket expenses.

Accident Cover Boost means that any Excluded or Restricted Service will be treated as if it is an Included Service, where you require hospital treatment as a result of injuries sustained in an Accident. It only applies to hospital treatment received within twelve (12) months of the date of the Accident occurring, and where:

- The Accident occurred after joining your cover
- · The Accident occurred in Australia
- · Your cover was not suspended at the time of the Accident
- · You sought treatment from a medical practitioner within seven (7) days of the Accident

See your Member Guide for more information.

? Things you need to know about your Hospital cover.

Waiting periods.

A waiting period applies when you join Medibank, or change your cover to include new or upgraded services or lower your excess. We won't pay benefits for any items purchased or services received while you are serving a waiting period.

Switching from another health insurer?

You may not need to re-serve waiting periods if you join Medibank within 2 months of leaving your previous health insurer, and you've already served the waiting period for that service.

Accident Waiting Period Waiver.

Where a 1-day or 2-month waiting period applies to a service or treatment under your Hospital cover, it may be waived for claims resulting from an Accident that occurred after joining this cover.

Waiting periods		
1 day	Ambulance services.	
2 months	Hospital psychiatric services, Rehabilitation and Palliative care.	
2 months	Hospital treatment for conditions requiring hospitalisation that are not deemed pre-existing conditions.	
12 months	Pre-existing conditions An ailment, illness or condition that, in the opinion of a Medical Practitioner appointed by Medibank, the signs or symptoms of which existed at any time in the 6 month period ending on the day on which you became insured under the policy or changed your cover.	
	Continuous Positive Airway Pressure (CPAP)-type devices.	

Excess.

This is the amount you pay towards your hospital admission (same-day or overnight) before we pay any benefits.

There are three excess levels on this cover; \$250, \$500 and \$750.

The excess applies per member, per calendar year and it doesn't apply to Child, Student or Adult Dependants on a family membership. Some hospitals may require you to pay the excess at the time of admission.

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Making the most of your Hospital cover.

Go to a Members' Choice Hospital.

Medibank has arrangements with most private hospitals and day surgeries in Australia, so you generally get better value for Included Services if you go to one of these providers.

To find your nearest Members' Choice hospital, visit medibank.com.au/memberschoice

Members' Choice hospitals are subject to change from time to time and are not in all areas.

GapCover - How to reduce your in-hospital medical out-of-pocket expenses.

Medibank's GapCover is designed to help eliminate or reduce your out-of-pocket expenses for in-hospital doctor's charges.

Where your doctor decides to charge more than the MBS fee (the set government fee), you will be left with an out-of-pocket expense, commonly referred to as the 'gap'.

Doctors can choose to participate in GapCover on a claim-by-claim basis.

Check upfront with each doctor involved if they'll participate in Medibank's GapCover for each claim as part of your treatment, to help reduce your out-of-pocket expense. Out-of-pocket expenses may still apply.

It's important to know GapCover doesn't apply to diagnostic services. See your Member Guide for more information.

Choice of treating doctor or specialist.

You can choose your doctor or specialist when you're treated in hospital as a private patient.

Medical devices and human tissue products.

For an Included or Restricted Service, we'll pay the minimum benefit as listed in the Australian Government's Prescribed List of Medical Devices and Human Tissue Products.

Travel and accommodation.

We pay benefits for travel and non-hospital accommodation related to an eligible hospital admission. Travel benefits are payable where the patient must travel more than 200km return. Accommodation costs are limited to \$40 per night and travel costs are set at \$0.15 per km. The total combined benefit payable for travel and accommodation is \$75 per admission. Conditions apply, refer to your Member Guide.

Continuous Positive Airway Pressure (CPAP)-type devices.

Up to \$500 benefit per member every 5 years towards the hire or purchase of an approved device. Conditions apply, refer to your Member Guide.

Health support that never sleeps.

Medibank health insurance members can talk to a registered nurse or mental health professional at no extra cost. Chat over the phone or online with 24/7 Medibank Nurse Support and 24/7 Medibank Mental Health Support. Call **1800 644 325** or chat online using My Medibank.

= Some referred services may involve out of pocket costs and waiting periods may apply.

Making the most of your Extras cover.

Members' Choice extras providers.

Through our Members' Choice network, you'll generally get better value for money with capped rates and a percentage back on what you're charged. With a non-Members' Choice provider, you'll generally get back a Fixed Amount for that service regardless of the provider's charge. As long as the provider is a Medibank recognised provider, benefits are payable for services or items included under your cover.

Get more value at Members' Choice and Members' Choice Advantage providers.

100% back on up to 2 check-ups each year at Members' Choice Advantage dentists and this doesn't count towards annual limits.‡

100% back on a mouthguard each year, subject to your annual limits and capped prices.

100% back on optical items up to your annual limit, and discounts on most lenses and lens options."

100% back for kids at Members' Choice providers.^

- ‡ Members can claim a maximum of two 100% back dental check-ups per member, per year-either two check-ups at a Members' Choice Advantage dentist (including up to two bitewing x-rays) per check-up where required), or a first check-up at a Members' Choice dentist (excluding x-rays) and a second check-up at a Members' Choice Advantage dentist. These check-ups do not count towards annual limits.
- ~ Some items excluded. A 6 month waiting period applies.
- ^ 100% back for kids applies to Child and Student Dependants only, up to annual limits. Waiting periods apply.

☆ Included extras.

Here are the Extras services you can claim for, along with the limits and waiting periods that apply.

It's important to know that the benefit we pay for services or items is likely to be less than your annual limit and less than your provider's charge, which means you may have out-of-pocket expenses to pay.

			Amount you can claim			
Service category	Example items and services	Waiting period	Members' Choice provider	Non-Members' Choice provider	Annual limit per member	
	Frames	6 months	'			
Optical MC	Prescription lenses		10	00%	\$200	
	Contact lenses					
	Preventative treatment					
	Dental examinations	2 months	550/		\$500	
General dental*	Scale and clean		55% (100% for kids [^])	Fixed Amount	(Increases by \$50 per year up to \$750)	
	Surgical dental procedures (excluding hospital charges)	12 months				
	Endodontic services (eg. root canal)	12 months	55% (100% for kids^)	Fixed Amount		
Major dental*	Periodontics (eg. treatment of gum disease)				\$400 (Increases by \$50 per year up to \$650)	
Trajor donical	Crowns, dentures and bridges				1	
	Major restorative fillings (eg. veneers)					
Orthodontics*	Braces	12 months	100%		\$400 opening balance. Top up of \$200 per year Up to a \$1,200 lifetime limit	
	Consultations			Fined Amount		
Physiotherapy MC	Clinical pilates		55%		Combined limit	
	Hydrotherapy sessions	2 months	(100% for kids [^]) Fixed Amount		of \$400 (Increases by \$50 per year up	
Chiropractic MC	- Consultations				to \$650)	
Osteopathy	Consultations		Fixed Amount			
Remedial massage 🚾	Consultations		55%		\$100	
Acupuncture MC	Consultations		(100% for kids^)	Fixed Amount		
Exercise physiology	Consultations	2 months	Fixed Amount			
Chinese medicine	Consultations only	1				
	Consultations		55% (100% for kids^)	Fixed Amount		
Podiatry MC	Approved orthotics	2 months			Combined limit	
Dietetics	Consultations only		Fixed Amount		of \$200	
Mental health support	Consultations with psychologists, counsellors and mental health social workers	None	Fixed Amount			
	Pharmacogenetic testing for all conditions#					
Speech therapy	Consultations	2 months				

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Service category	Example items and services	Waiting period	Amount you can claim		Annual limit
Service category			Members' Choice provider	Non-Members' Choice provider	per member
Health appliances and external prostheses	Insulin delivery pens, pressure therapy garments, braces, splints, non-podiatric orthoses, post-mastectomy bras and external mammary prostheses/breast forms	2 months	Fixed Amount		
Breathing appliances	Peak flow meters, nebulisers and spacing devices only	12 months	100%		
Blood glucose monitors and blood pressure monitors	Purchase of devices only	24 months			Combined limit, refer above
Health subscriptions	Membership fees for approved health bodies and organisations				
Health screening tests	Bone density tests, MRI's, retinal scans and bowel cancer screening tests where no Medicare benefits are payable	2 months			
Private hospital accident and emergency facility fees	Emergency department attendance fees. Not available at all private hospitals. Please check whether your private hospital offers an accident and emergency department	2 months	10	00%	\$250 per Child or Student Dependant only
facility fees Benefit restrictions app	hospital offers an accident and emergency department	™ Memb	ers' Choice providers are	e available for these service	, ,

- - A referral letter is required. Refer to your Member Guide for more information.
- 100% back for kids applies to Child and Student Dependants only, up to annual limits. Waiting periods apply.
- Benefits will only be paid towards dental and orthodontic treatments that are administered in person (not via phone or online), by a recognised provider.
- Medibank will pay benefits towards pharmacogenetic tests for all conditions. Benefits will only be paid towards pharmacogenetic tests administered in-person, or for approved home kits where supporting documentation from a medical practitioner outlining the clinical purpose is supplied.

How do orthodontic benefits work?

Your orthodontic limit starts with an opening balance which you can access after your 12-month waiting period.

Every year on 1 January after this waiting period, the balance is topped up with an additional amount up to the maximum lifetime limit.



MembershipBonus.

This cover includes a MembershipBonus, which accumulates each year (up to a maximum amount).

Any member on your cover can use this to help pay for a range of approved membership and health-related expenses. The bonus is topped up each year on 1 January. Please note, a 6-month waiting period applies before you are able to claim your MembershipBonus.

To find out how you can spend your MembershipBonus, call us on 132 331.

Couple/Family membership \$100 per membership per year up to a maximum limit of \$1000

Any unused MembershipBonus will be added to the following year's bonus amount, up to the maximum limit shown above, provided you stay on the same membership and on a cover with a MembershipBonus.

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? Things you need to know about your Extras cover.

Waiting periods.

A waiting period applies when you join Medibank, or change your cover to include new or upgraded services. We won't pay benefits for any items purchased or services received while you are serving a waiting period.

Switching from another health insurer?

You may not need to re-serve waiting periods if you join Medibank within 2 months of leaving your previous health insurer, and you've already served the waiting period for that service. Benefits paid under your previous cover will be taken into account in determining the benefits payable under your Medibank cover.

Annual limits.

An annual limit is the maximum amount of benefits we pay towards services and/or items within a calendar year. A combined limit is an annual limit that applies to a group of services and/or items.

Where the annual limit increases, it will increase on 1 January each year, up to the maximum limit. The first increase will be applied only after you've served one full calendar year of membership.

Lifetime limit.

This is a once-only limit that isn't reset each year. When you reach this limit, you can no longer claim that benefit again, even if you change your cover.

Fixed Amount.

This is the amount we'll pay towards the cost of an Extras service or item if you visit a non-Members' Choice provider. It will generally be lower than the amount you would receive when you visit a Members' Choice provider. The amount of the Fixed Amount depends on the cover you hold and the type of service or item you receive.

Benefit restrictions.

The Benefit Replacement Periods on your cover are shown below. A Benefit Replacement Period is the amount of time you need to wait from the date you purchase an item, before we pay towards a replacement for it.

Benefit Replacement Periods are separate to waiting periods.

Service category	Items	Benefit Replacement Period	
Health appliances and external	Wigs, hip protectors and insulin delivery pens	24 months	
prostheses	Other health appliances and external prostheses	36 months	
Blood glucose monitors and blood pressure monitors	Blood glucose monitors and blood pressure monitors		
Breathing appliances	Nebulisers, peak flow meters and spacing devices	36 months	
Major dental	Dentures, crowns and bridges		

Additional limitations such as service restrictions (clinical reasonability rules) may apply to some individual dental items and services.

Limits also apply to how often you can claim on some extras services. For example, you can only claim on one mouthguard per person, per calendar year.

Please contact us on 132 331 before your treatment.



Helping you live better.

Use Members' Choice Extras providers.

Medibank has arrangements with providers for some (but not all) services - these are known as Members' Choice providers. We've negotiated capped prices that Members' Choice Extras providers can charge, which generally means more money back in your pocket. You can still use a non-Members' Choice Extras provider, as long as they're recognised by Medibank, but you won't be able to take advantage of the capped pricing.

Members' Choice Advantage providers are part of our Members' Choice Network and you may enjoy even better value when you need to use eligible extras services at these providers.

It's important to be aware that Medibank's Members' Choice and Members' Choice Advantage Extras providers are subject to change without notice, and are not available in all areas, so please check if they're a Members' Choice or Members' Choice Advantage provider before your treatment or service.

Find your nearest Members' Choice provider at medibank.com.au/memberschoice

Telehealth services.

Medibank pays towards telehealth consultations for some extras services, such as mental health support.

Refer to the Member Guide or medibank.com.au/telehealth to check what other services on your cover are available through telehealth.

Manage your membership on the go.

Manage your membership anytime, anywhere with My Medibank. You can check extras balances, pay premiums, make claims on most extras, and update your details.

It only takes two minutes to sign up, just go to medibank.com.au/members to get started.

Live Better rewards.

We think Australians should be rewarded for looking after their health. That's why eligible Medibank members with Hospital or Extras cover can earn Live Better rewards points by tracking things they do every day like walking, eating healthy meals and more with Live Better rewards in My Medibank. Members can then redeem those points on anything from discounts on premium payments to rewards from our health and wellbeing partners.®

For more information visit medibank.com.au/livebetter/rewards

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How to find out more.

Health insurance can be complicated, that's why we've prepared a glossary of useful terms that you can view online at medibank.com.au/glossary

This information is current as at 7 May 2025 and subject to change from time to time. If you'd like to change your cover, please contact us on 132 331. Membership of Medibank Private is subject to our Fund Rules and policies which we can change from time to time and are summarised in our Member Guide. Medibank Private Limited ABN 47 080 890 259