

Cover summary – ahm Overseas Student Health Cover

This provides a summary of your cover. It contains important information and we recommend that you read and retain it. You can find out more information about your membership and terms defined in this document by referring to your Policy Document or calling us on **134 148**.

Medical cover

We pay benefits towards medical services provided by a doctor either in or out of hospital, that are listed in the Australian Government Medicare Benefits Schedule. No benefits are payable for excluded services, see 'Things we don't pay benefits for' below. You must pay the difference, if any, between the benefit ahm pays you and the actual fee charged by the doctor.

The benefits payable under ahm OSHC are shown to the right.

Services	Benefits
General Practitioners	Benefits equivalent to 100% of the Medicare Benefit Schedule (MBS) fee on standard GP consultations
All other medical services provided out of hospital (e.g. specialists, pathology and x-rays)	Benefits equivalent to published 85%* 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.

* The published 85% MBS fee may not equal exactly 85% of the total MBS fee but is an amount published in the MBS as set by the Australian Government.

Hospital cover

Things we pay benefits for when admitted to hospital

All services recognised for Medicare benefit purposes unless on the list of excluded services.

Covered services include:

- Obstetrics and pregnancy-related services
- Heart-related admissions such as angiograms or open heart & bypass surgery
- Colonoscopies
- Appendicitis treatment
- Removal of tonsils & adenoids
- Knee & shoulder reconstruction surgery & investigations
- Plastic & reconstructive surgery (excludes cosmetic surgery)
- Major eye surgery – including cataract & lens-related services
- Hip & knee joint replacement surgery
- Renal dialysis
- Psychiatric treatment
- Rehabilitation treatment
- Palliative care
- Surgical removal of wisdom teeth (for hospital charges only).

Partner private hospitals

We pay benefits towards:

- Private hospital accommodation
 - overnight admissions in a shared or private room
 - same day admissions
 - intensive care
 - theatre fees.

Non partner private hospitals

We pay benefits as listed above however, the benefits are generally lower than those payable in a partner private hospital and could result in significant out-of-pocket expenses.

Public hospitals

Where treated as a private patient in a public hospital we pay benefits towards:

- overnight admissions in a shared room
- same day admissions
- outpatient accident and emergency department fees, including outpatient medical and post-operative services (fees raised by the hospital for treatment where you are not an admitted patient).

Other benefits include:

- choice of doctor or specialist for medical treatment in hospital
- doctors' fees for in-hospital medical services when you are treated as a private patient
- surgically implanted prostheses and other items on the Federal Government's Prostheses List
- ambulance – emergency transportation to hospital or an approved facility.

You will be responsible for paying any difference between the benefit we pay and the hospital charge. It is important that you check your benefit entitlement with ahm before going into hospital.

Things we don't pay benefits for

Benefits are not paid towards the following services:

- Fertility treatment such as IVF & GIFT programs
- Cosmetic treatment/procedures i.e. surgery that isn't clinically necessary and for which Medicare benefits aren't payable
- Treatment not considered medically necessary e.g. health screening services and medical examinations, x-rays or pathology required by the Department of Immigration and Border Protection (DIBP) as part of the student visa renewal process
- Services/treatment covered under compensation and damage provisions of any kind, for example motor vehicle accidents covered by third party insurance.

Please note that this list is not inclusive. Please check the Policy Document for a full list of what is not covered.

Health Support for our members

- 24 hour, 7 days a week emergency service helpline **1800 006 745** for:
 - Emergency medical assistance
 - Stress and trauma counselling
 - Interpreter service
- Informative student website ahmoshc.com.au

Prescription medicines

For medicines and other prescription items prescribed by a doctor, ahm pays the difference between the current PBS amount and the cost of the item up to \$50 per item. Please note ahm OSHC provides benefits towards the cost of prescription medicines, with the exception of over the counter medicines, oral contraceptives and medicines prescribed for cosmetic purposes.

- Maximum of \$50 per item.
- An annual limit of \$300 per calendar year (1 January to 31 December) per single membership and \$600 per calendar year per couple or family membership applies (sub-limit of \$300 per person).

Waiting periods

A waiting period is a period of time you need to wait after taking out your cover before you're entitled to receive benefits for services or items covered. ahm OSHC has the following waiting periods:

- 12 months for obstetrics and pregnancy-related services
- 12 months for pre-existing conditions
- 2 months for pre-existing psychiatric conditions.

Benefits are not generally payable for any services or items obtained while you are serving a waiting period. However, the waiting period does not apply when your treating medical practitioner certifies and ahm agrees that the member required emergency treatment. Please check the Policy Document for when waiting periods apply.

How to find out more

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

If you would like to find out more about your membership please refer to the ahm OSHC Policy Document which tells you about your cover and what you can and cannot claim for. It also includes a summary of the policies of ahm as they apply to ahm OSHC and includes the meaning of terms used in this document.

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.

It's also a good idea to confirm any out-of-pocket expenses before admission with the hospital and doctors (including the surgeon, assistant surgeon and anaesthetist).

Call 134 148

Visit ahmoshc.com.au