	nib Health Fund
Product Name	nib OSHC Top Cover
Hospital In-Patient Benefits	<u>. </u>
Public Hospital	LB(Gazetted Rate)
Private Contracted Hospital	Contracted Rate
Private Non-Contracted Hospital	(Default Rate)
Emergency Public Hospital	100% Cost
Emergency Contracted Hospital	100% Cost
Emergency Non-Contracted Hospital	100% Cost
In-Patient Medical	100% Cost
In-Patient Pharmaceutical	Yes
Surgically Implanted Prosthesis	Yes
Out-Patient Continuing Treatment (Member Support Program)	Yes
Pregnancy and Birth related services	Yes
Psychiatric	Yes
Rehabilitation Care	Yes
Clinically necessary cosmetic surgery	Yes
Renal dialysis for Chronic renal failure	Yes
Knee arthroscopy and meniscectomy	Yes
Ambulance services	Yes
Allied Health services	Yes
Back neck and spine	Yes
Blood	Yes
Bone marrow and organ transplants	Yes
Bone, joint and muscle	Yes
Brain and nervous system	Yes
Breast surgery (medically necessary)	Yes
Cataracts	Yes
Chemotherapy, radiotherapy and immunotherapy for cancer	Yes
Dental surgery	Yes
Diabetes management (excluding insulin pumps)	Yes
Dialysis for chronic kidney failure	Yes
Digestive system	Yes
Ear, nose and throat	Yes
Eye (not cataracts)	Yes
Gastrointestinal endoscopy	Yes
Gynaecology	Yes
Heart and vascular system	Yes

	nib Health Fund
Product Name	nib OSHC Top Cover
Hospital psychiatric services	Yes
Implantation of hearing devices	Yes
Insulin pumps	Yes
Joint reconstructions	Yes
Joint replacements	Yes
Kidney and bladder	Yes
Lung and chest	Yes
Male reproductive system	Yes
Miscarriage and termination of pregnancy	Yes
Obesity and weight loss surgery	Yes
Pain management	Yes
Pain management with device	Yes
Palliative care	Yes
Plastic and reconstructive surgery (medically necessary)	Yes
Podiatric surgery (provided by a registered podiatric surgeon)	Yes
Pregnancy and birth	Yes
Rehabilitation	Yes
Skin	Yes
Sleep studies	Yes
Tonsils, adenoids and grommets	Yes
Weight loss surgery	Yes
Medical Out-Patient Benefits	
General Practitioner Consultations	100% Cost
Specialist Consultations	100% Cost
Radiology	100% Cost
Pathology	100% Cost
Chemotherapy & Computerised Tomography	Yes
	PBS & non-PBS: No
Out-Patient Pharmaceutical	annual limits
Psychiatric related consultations	100% Cost
Pregnancy and Birth related services	100% Cost
Other Benefits	
Funeral	X
Repatriation	X
Ambulance Transport	Yes
Ambulance Attendance	Yes

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Insulin pumps	Yes
Joint reconstructions	Yes
Joint replacements	Yes
Kidney and bladder	Yes
Lung and chest	Yes
Male reproductive system	Yes
Miscarriage and termination of pregnancy	Yes
Obesity and weight loss surgery	Yes
Pain management	Yes
Pain management with device	Yes
Excluded benefits	
Assisted Reproductive services/IVF	X
Infertility investigations	X
Cosmetic Surgery	X
Sterility reversal	X
Services not covered by Medicare	X
Extras	
General Dental	100% back, \$1,000 annual limit
Major Dental	100% back, \$2,500 annual limit
Optical	100% back, \$500 annual limit
Physiotherapy / Exercise Physiology / Chiropractic / Osteopathy	100% back, \$300 annual limit
Psychology	X
Hearing aids / Artificial aids / Orthotics Other therapies	x x
Waiting Periods	
Pre-Existing Conditions	Nil
Out-patient (GP, Specialists Pathology)	Nil
Pregnancy and Birth related services	Nil
Pharmaceutical	Nil
Psychiatric	Nil
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Dental	Nil
Major Dental	Nil
Optical	Nil
Other Extras	Nil