





Hospital cover


Product information brochure





Hospital covers at a glance

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Gold Hospital
 - ✓ The most comprehensive AAMI Health Insurance Hospital cover
 - ✓ You want to be covered in case you need to go to hospital.
 - ✓ Ideal for peace of mind or for planning a family.

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Silver Advantage Hospital Plus
 - ✓ You want extensive cover but don't need pregnancy
 - ✓ Ideal for completed families and over 55's.
 - ✓ A high level of cover without the added cost of birth coverage.

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Silver Everyday Hospital Plus
 - ✓ Save by excluding some hospital procedures you're less likely to need
 - ✓ Great value cover including many commonly claimed services.
 - ✓ Ideal if you're healthy and not planning to start a family.

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Bronze Hospital Plus
 - ✓ Cover for a range of common procedures excluding some high cost procedures
 - ✓ Suitable if you're young and healthy or on a budget.
 - ✓ Ideal for those who want a little more than just the basics.

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Basic Hospital Plus
 - ✓ AAMI Health Insurance basic level cover
 - ✓ You are on a budget or new to private health cover.
 - ✓ Cover for accidents, emergency ambulance and some hospital services.

Save on premiums with hospital excess options

A hospital excess is the amount you pay towards the cost of a hospital stay before any benefits are payable by the insurer. The higher the excess you choose, the lower your premium will be.

You'll only ever pay an excess if you, or someone (other than dependent children under 21) on your policy, goes to hospital. The excess applies once per person, per calendar year, no matter how many times you're admitted, and is paid directly to the hospital before your admission.

The excess for families is capped at twice your chosen level of excess (e.g. a \$250 excess is capped at \$500 per calendar year).

Heading to hospital? Call first

Before heading to hospital, give AAMI Health Insurance a call. The team will chat through the whole process, check your cover, and explain how to keep out-of-pocket expenses to a minimum. Call 13 22 44

Switching from another health fund?

AAMI Health Insurance recognise waiting periods already served with your current health fund for equivalent services on the same level of cover, so you can claim straight away~.

~ Available where there is a break in cover of 59 days or less. Waiting periods apply for services not currently covered, services with higher benefits, where waiting periods haven't been fully served, or where you select a lower excess. Any benefit limits already used with your current fund will apply to your Suncorp Health Insurance policy.

Excess options		
\$250 per person per calendar year	\$500 per person per calendar year	\$750 per person per calendar year

\$250 option not available on Silver Everyday Hospital Plus, Bronze Hospital Plus or Basic Hospital Plus.

Need help?

Go to aami.com.au/health
 Call 13 22 44
 Mon-Fri: 8am-6pm (AEST/AEDT)

In-hospital services

AAMI Health Insurance Product	Gold Hospital	Silver Advantage Hospital Plus	Silver Everyday Hospital Plus	Bronze Hospital Plus	Basic Hospital Plus
Hospital excess options	\$250/\$500/\$750 per person per calendar year	\$250/\$500/\$750 per person per calendar year	\$500/\$750 per person per calendar year	\$500/\$750 per person per calendar year	\$500/\$750 per person per calendar year
Included and excluded hospital services by Hospital cover					
Rehabilitation	✓	✓	✓	MBP*	MBP*
Hospital psychiatric services	✓	MBP*	MBP*	MBP*	MBP*
Palliative care	✓	✓	✓	MBP*	MBP*
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	✓	✓	✗	✗	✗
Pregnancy and birth	✓	✗	✗	✗	✗
Assisted reproductive services	✓	✗	✗	✗	✗
Weight loss surgery	✓	✗	✗	✗	✗
Insulin pumps	✓	✓	✓	✓	✗
Pain management with device	✓	✓	✓	✓	✗
Sleep studies	✓	✓	✓	✓	✗

Other included services on all products

- ✓ Accidental Injury Benefit[^] (waiting period 1 day).
- ✓ Emergency ambulance cover[#] (waiting period 1 day).

Key features

- Accidental Injury Benefit[^].
- 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.
- Hospital excess capped at once per person, per calendar year.

* **Minimum Benefits Payable (MBP)** means that AAMI Health Insurance will pay the minimum amount of benefits required 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, AAMI Health Insurance 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.

[^] Refer to the Policy Booklet for benefit terms and conditions available at aami.com.au/health

[#] 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).

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%

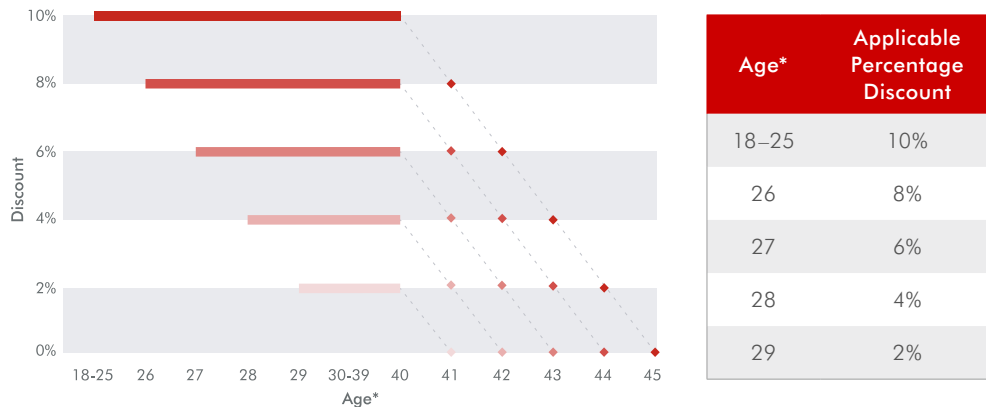
You can avoid the Medicare Levy Surcharge (and pay less tax) by joining any AAMI Health Insurance Hospital cover and maintaining it for the full financial year. If you take out Hospital cover part-way through the financial year, you will only avoid the surcharge for the period you held suitable Hospital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

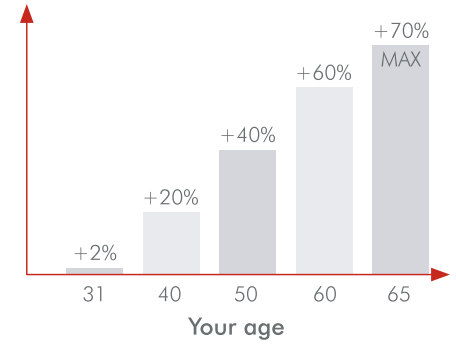
When a person turns 41, the Age Based Discount will reduce at the rate of 2% per year, so that no Age Based Discounts are available after the age of 45.



Lifetime Health Cover

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 AAMI Health Insurance, but every health fund.



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

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.

	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				
Under 65	24.608%	16.405%	8.202%	0.00%
65-69	28.710%	20.507%	12.303%	0.00%
70+	32.812%	24.608%	16.405%	0.00%

Source: Australian Tax Office. These thresholds apply for the 2021/2022 financial year. For families, and single parent families, the thresholds increase 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