Intermediate Hospital gives you comprehensive hospital cover for thousands of medical procedures, including common procedures such as removal of tonsils and wisdom teeth, knee and shoulder reconstructions, cancer treatment, maternity and birth-related services, cataract and eye lens procedures, heart treatment, joint replacement surgery and psychiatric care.

We don’t cover hospital treatment that’s not eligible for a Medicare benefit, such as cosmetic surgery and podiatric surgery. Please contact us for more information.

This is an overview of Intermediate Hospital. Additional information you should know relating to this cover can be found in the Membership guide available at hbf.com.au/membership-guide, in a branch or via 133 423.

**Hospital costs you can receive a benefit towards:**

<table>
<thead>
<tr>
<th>Cost Description</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Accommodation</strong></td>
<td>Includes the fees charged for your room in a private or public hospital.</td>
</tr>
<tr>
<td><strong>Theatre</strong></td>
<td>Includes the fees charged for the theatre in which your procedure is performed.</td>
</tr>
<tr>
<td><strong>Pharmacy</strong></td>
<td>Includes the cost of some of the medication administered during your hospital stay.</td>
</tr>
<tr>
<td><strong>Prostheses</strong></td>
<td>Includes the costs of any prostheses (surgically implanted devices you may need if you have a procedure such as joint replacement or cataract surgery) used during your procedure.</td>
</tr>
<tr>
<td><strong>Medical</strong></td>
<td>Includes the fees charged by your surgeon, anaesthetist and pathologist.</td>
</tr>
</tbody>
</table>

You’re also covered for urgent ambulance transport by road, which means ambulance trips that St John Ambulance classifies as requiring urgent attention. While you’re staying in hospital as a private patient, you’re also covered for all medically necessary inter-hospital ambulance transfers, to or from a private hospital.

**Accommodation benefits**

In most cases, when you go into hospital, regardless of whether you have a procedure or not, you’ll be charged for a hospital room. As an HBF member, you’ll receive a benefit towards this cost.

Intermediate Hospital provides substantial cover for a shared room for agreed services in HBF Member Plus hospitals (you will need to pay a co-payment towards the cost of your room for up to six days of a hospital stay, but after this we’ll cover the full fee, except for psychiatric treatment). If shared accommodation isn’t available, you may need to pay the additional cost between the shared room and private room rate.

**How soon can you claim?**

The table below is a brief overview of the standard waiting periods that may apply to your cover. If you haven’t completed the necessary waiting period, we may not be able to pay a benefit.

<table>
<thead>
<tr>
<th>Ailment Description</th>
<th>Waiting Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-existing ailments or conditions</td>
<td>12-month period.</td>
</tr>
<tr>
<td>Maternity and birth-related services</td>
<td>12-month period.</td>
</tr>
<tr>
<td>Other hospital treatments including surgery</td>
<td>2-month period.</td>
</tr>
<tr>
<td>Urgent ambulance (by road only, excludes air ambulance)</td>
<td>7-day period.</td>
</tr>
</tbody>
</table>

Pre-existing ailments or conditions: Defined as an illness or condition which, in the opinion of a medical practitioner (appointed by HBF), was known to exist, or where signs or symptoms were evident during the six-month period before you became an HBF member, including on the day you joined.

Excess

Intermediate Hospital members have the choice of adding a $140 excess to reduce the premium. If you have added an excess, you will be required to pay an excess for day and overnight admissions.

You only need to pay this once per member, per calendar year and only if you’re admitted to hospital. There’s no excess for any dependants on your policy.

**Before receiving any treatment, you should contact us or go to hbf.com.au/myhbf for a health benefit quote so you know how much you’re covered for, the benefits you’ll receive and any out-of-pocket expenses.**
More information about your health cover

Theatre benefits
You’re 100% covered for theatre charges.

Maternity
You will receive 100% cover for labour ward and accommodation for the first three days in a shared room in a Member Plus hospital (less any excess). After this, you will need to make a co-payment towards the cost of the next six days. And if you’re in hospital any longer, the additional days will be fully covered in a shared room.
If you’d prefer your own room or shared accommodation isn’t available, you may need to pay the additional cost between the shared room and private room rate.

Pharmacy benefits
When you are admitted into hospital for a procedure, it’s likely you’ll be given medication. The government subsidises the cost of some medications under the Pharmaceutical Benefits Scheme (PBS), and we will pay a benefit towards the cost of non-PBS prescription pharmaceuticals administered during a hospital stay.

Prostheses benefits
Prostheses are surgically implanted devices you may need if you have a procedure such as a joint replacement, cataract surgery or heart treatment. You’re covered for items listed on the government’s Prostheses List that are implanted while you’re in hospital.

Psychiatric treatment
We will pay you benefits for in-patient psychiatric treatment in hospitals with approved programs. Co-payments will apply. Please contact us for details.

HBF Member Plus hospitals and non-agreed services
HBF Member Plus hospitals provide great value for our members. In Member Plus hospitals you’ll be covered for accommodation and theatre fees, less any co-payment or agreed excess for all agreed services.

HBF non-Member Plus hospitals
It’s important to stay at an HBF Member Plus hospital, otherwise you may have significant out-of-pocket expenses. We recommend that before arranging a hospital stay, you call us on 133 423 to find out if you are being admitted to an HBF Member Plus hospital and to confirm what you are covered for.

Non-agreed services in HBF Member Plus hospitals
While most services are covered in all Member Plus hospitals, there may be some services that are not – we refer to them as ‘non-agreed’ services. It’s important to check that your required service is covered by HBF before going to hospital to avoid any significant out-of-pocket expenses.