

Pregnancy Fact Sheet

Having a baby

Pregnancy is an exciting time, but it can be a complex area when it comes to your health insurance. The RBHS aims to make this time as easy as possible with this outline of common topics ranging from early pregnancy to after the birth of your child.



Topics covered:

- Waiting periods
- Who pays?
- Midwives and obstetricians
- Tests during pregnancy
- Birthing classes and pregnancy aids
- Bills - hospital, medical & additional services
- In-hospital tests for your newborn
- Epidurals
- What is a gap payment?
- Hospital excess
- Special care
- Adding your newborn to your health cover

Overview - who pays?

This table outlines who pays for your hospital and medical services, and assumes that the 12 month waiting period for obstetrics has been served. In some cases, more than one party contributes to the cost of services. Please call the RBHS if you have any questions.

Service	RBHS		Medicare	You
	Hospital cover	Extras cover		
Obstetrician during birth	✓	x	✓	✓
Tests during pregnancy - outpatient	x	x	✓	✓
Tests during pregnancy - inpatient	✓	x	✓	✓
Obstetrician appointments - outpatient	x	x	✓	✓
Antenatal classes	x	✓	x	✓

IMPORTANT: There could be out-of-pocket costs on any of these services that you will need to pay for yourself. You can ask your service provider to give you the information up front and the RBHS can help you work it all out. Please also remember that there can be limits on any of these services.

Please contact the RBHS on 1800 027 299 or info@myrbhs.com.au if you have any questions about obstetrics cover.

All information supplied in this fact sheet is based on the assumption that you have served the 12 month waiting period for obstetrics. If you haven't served this waiting period, you won't be able to make any claims under your Hospital cover.



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Before and during pregnancy

At this time, it's important to consider your level of health cover. To be covered for pregnancy, you will need to make sure that you hold Hospital cover.

With the RBHS Gold Hospital cover, there is no excess and no restrictions. Premium Extras cover alone will not cover you for obstetric services in a hospital.

Waiting periods

All obstetric-related services have a 12 month waiting period, so it is important to make sure that you have Hospital cover before you are pregnant. If you don't have Hospital cover before you are pregnant, you won't be covered for the birth of your child.

If you're admitted to hospital during your pregnancy, your waiting period will need to be served in order to claim for obstetrics.

Midwife or obstetrician?

If you hold Gold Hospital cover, you are able to claim for an obstetrician for a hospital birth. Most private hospitals will only accept your admission if you have an obstetrician (rather than a midwife). If you decide on an obstetrician and have Gold Hospital cover, Medicare will cover 75% of the Medicare Scheduled Fee and the RBHS will cover the remaining 25% for the birth of your child. Any other charges from your obstetrician may be covered by Medicare only. It is important to note that doctors may charge above the Medicare Scheduled Fee, and anything above this fee is your out-of-pocket expense.

If you choose to have an obstetrician, a 12 month waiting period will apply (and will need to be served before you can claim for services).

If you decide to have a midwife for a home birth, you will be out-of-pocket as the RBHS does not pay benefits towards this service. If you decide to have a midwife in a public hospital as a public patient, in most cases you will be completely covered by Medicare. If you enter as a private patient in a public hospital, you may still have out-of-pocket costs.

Although the RBHS doesn't cover a midwife for birth, there are benefits available for a midwife as part of ante/post-natal services under Premium Extras cover.

Obstetrician appointments

Obstetrician fees can either be a lump sum or a charge per visit and your doctor will advise you of how they will charge. Medicare will cover a percentage of your obstetrician's fees, and you may have out-of-pocket expenses.

Your obstetrician will advise you of any out-of-pocket costs you may have prior to your admission to hospital. This is called Informed Financial Consent (IFC).

What is a Medicare Scheduled Fee?

Medicare sets a "Scheduled Fee" for all medical services - this is what they suggest a service should cost. They then provide a set rebate of that Scheduled Fee (75% of the cost for in-hospital services). With Gold Hospital cover, the RBHS takes care of the remaining 25% for in-hospital services. However, doctors and healthcare providers can charge above the Medicare Scheduled Fee, which is when an out-of-pocket (or "gap") cost occurs.



Tests during pregnancy

Tests throughout pregnancy are usually issued through your doctor or a private clinic and are only claimable through Medicare. They will often carry out-of-pocket expenses.

If you are admitted to hospital during your pregnancy (and have served your 12 month obstetrics waiting period), you will be able to claim tests you undergo as an inpatient with both Medicare and the RBHS.

If you are unable to claim your test through Medicare, contact the RBHS and it may be possible to make a claim under your Extras cover (if applicable).

Birthing classes and pregnancy aids

Premium Extras cover offers benefits towards some birthing classes. If you hold Extras cover, you are able to claim 90% of your antenatal classes, up to \$260 per calendar year.

These classes must be undertaken by a physiotherapist, chiropractor, registered nurse, midwife or childbirth educator in order to make a claim.

Please contact the RBHS if you have any questions regarding the coverage of antenatal classes.

Please note: The RBHS does not cover any post-natal classes or aids.

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During your hospital stay

During your hospital stay, you are likely to receive a number of different bills:

- **Hospital bills** - these include fees for accommodation, theatre and meals. If you have Gold Hospital cover and admitted at a contracted hospital, you won't ever see these bills - the RBHS will take care of them for you. Contact us via phone on 1800 027 299 or email info@myrbhs.com.au, to confirm if the hospital you are admitted to holds a contracted agreement with the RBHS. Alternatively, you can look this up under 'Find a hospital' on our website - myrbhs.com.au/using-your-cover/using-your-hospital-cover/find-a-hospital/.
- **Medical bills** - these are for services from obstetricians, anaesthetists, etc. Between the RBHS and Medicare, you will be covered for 100% of the Medicare Scheduled Fee for your medical bills. Doctors may charge above the Scheduled Fee, and anything above this Fee is your out-of-pocket expense. These fees can be discussed directly with your doctor. We recommend asking your doctor whether they will participate in our Access Gap Scheme - which aims to reduce or remove out-of-pocket (gap) expenses - and you should receive Informed Financial Consent (IFC) regarding any out-of-pocket costs.
- **Additional service bills** - these are for optional extras during your hospital stay that are not covered by your health cover. They include things like TV, newspapers, a double bed, extra meals, etc. You will pay the full cost of these yourself.

Other costs include:

- Any out-of-pocket expenses on your medical bills, which you should be informed of prior to your hospital stay
- Charges for additional services, like TV (if used)
- Take-home pharmacy items. If you have Extras cover, you may be able to claim these.

We recommend contacting us before you are admitted to hospital to discuss your cover and any expenses that you may have. Remember, a 12 month waiting period for obstetrics will need to be served before you can make any claims under your Hospital cover.

In-hospital tests for your newborn

If your newborn is not admitted to special care, any tests carried out or visits from paediatricians are considered an outpatient service and are only claimable through Medicare.

If your newborn is admitted to special care, tests are claimable through both Medicare and the RBHS (if you have served your 12 month waiting period for obstetrics).

Special care

If you have family or couple cover, your newborn will not have any waiting periods and will be covered immediately for special care admission. The RBHS recommends adding your newborn to your cover as soon as possible.

If you have single cover, you will need to upgrade your cover to a family membership as soon as possible to ensure coverage for special care admission. This upgrade will mean an increase to your premiums.

What is a gap payment?

A gap is the difference between the Medicare Scheduled Fee and what you are charged by your doctor. The Access Gap scheme aims to reduce or remove these gaps. The RBHS has Access Gap arrangements with over 35,000 doctors across Australia.

We recommend that you ask your doctor whether they will participate in the Access Gap scheme prior to your hospital admission. If they agree to participate, you will have No Gap (where we will pay the full cost of your treatment) or Known Gap (where you will be advised of your exact out-of-pocket expenses prior to your hospital admission) and they will send your bills directly to us. Please note that doctors can decide to use the Gap scheme on a case-by-case basis.

Hospital excess

There are no excesses payable with RBHS Gold Hospital cover.

Epidurals

An epidural is administered by an anaesthetist and will be included in their bill. This is claimable through both Medicare and the RBHS. Your anaesthetist will inform you of any out-of-pocket costs associated with their bill.

What if the baby is premature?

To be covered for a premature birth, you will need to have served your 12 month waiting period for obstetrics under your Hospital cover. If you haven't served this waiting period, you and your baby won't be covered.



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After your hospital stay

Adding your newborn to your health cover

If possible, please contact the RBHS within 30 days of the birth of your child to add them to your health cover. To ensure that your newborn is covered with no waiting periods, you will need to contact the RBHS within the first 3 months. Please note that you may be required to back-pay some of your premiums to cover your newborn from their date of birth.

You can add your newborn to your health cover by calling us on 1800 027 299 or online at oms.myrbhs.com.au/ through Online Member Services.

If you are adding your newborn after the first 3 months, their cover will commence from the date of the request and they will need to serve all applicable waiting periods. You are unable to back-pay to cover your newborn from their date of birth after the first 3 months.

If you have a family membership, your newborn will be automatically covered without an increase to your premiums.

If you have a single membership, you will be upgraded to family cover and your premiums will increase.

Post-natal check-ups

Post-natal check-ups are an outpatient service and are covered by Medicare only.



Please contact the RBHS on 1800 027 299 or info@myrbhs.com.au if you have any questions about obstetrics cover.

Please remember:

- There could be out-of-pocket costs on any of obstetric services that you will need to pay for yourself. You can ask your service provider to give you the information up front and the RBHS can help you work it all out. Please also remember that there can be limits on any of these services.
- All information supplied in this fact sheet is based on the assumption that you have served the 12 month waiting period for obstetrics. If you haven't served this waiting period, you won't be able to make any claims under your Hospital cover.



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