

**OVERSEAS STUDENT HEALTH COVER** 

## Pregnancy Fact sheet



## During your pregnancy

It is important to have health cover for your family. Allianz Care Australia offers three types of policies:



**SINGLE**Covers only the primary student visa holder



DUAL FAMILY:
Covers the primary student visa holder plus either their partner or one or more dependant children



MULTIFAMILY:
Covers the primary
student visa holder plus their
partner and one or more
dependant children

#### **MEDICAL FEES**

The Australian Government provides financial assistance with medical expenses and hospital care through a scheme called Medicare. However, as an international student you may not be eligible for Medicare, in which case you will be required to hold an OSHC policy. Your OSHC benefits are based on the Medicare Benefit Schedule of fees (MBS).

## **GAP FEE**

Some medical services may have a gap fee, which is the difference between the amount charged by the doctor and the MBS benefit. You will be responsible for these costs and cannot claim this amount under your OSHC policy. These gap fees also apply to Australian citizens who are eligible for Medicare. You can contact the medical provider prior to your appointment and ask if there will be any gap fee to pay.

For outpatient (out of hospital) medical services provided by most general practitioners, your Allianz Care Australia OSHC policy covers the benefit amount as listed in the MBS. The benefit amount may vary depending on the type of medical service.

For other outpatients services such as pathology and radiology (including specialists) your Allianz Care Australia OSHC policy covers 85% of the MBS fee. You will be required to have ultrasounds and blood tests throughout your pregnancy.

For inpatient (in hospital) doctors (including specialists), pathology and radiology Allianz Care Australia OSHC covers 100% of the MBS fee.



#### **HOW TO REDUCE YOUR GAP EXPENSES**

If you are eligible for shared maternity care and able to receive this care from one of our direct-billing doctors, this will help to reduce your medical expenses.

In Australia, doctors, pathology and radiology medical services set their own fee schedule, and the difference in prices may vary considerably. To compare the prices of specialists, you could contact them and ask what their typical fee schedule is.

Choose a private hospital that has an agreement with the Australia Health Services Alliance and has contracted rates with our underwriter Peoplecare Health Limited. You can confirm this by asking the hospital maternity booking coordinator. Alternately the hospital finance department will have this information

Get an Informed Financial Consent form from your obstetrician/midwife or any other specialist involved in your care prior to treatment to ensure you understand their fee structure.

Contact Allianz Care Australia to arrange guarantee of payment for your hospital stay:

- Once you have chosen your doctor and hospital, your next step is to complete the Hospital Guarantee Request form, which can be located on our website allianzcare.com.au. Please email the completed form to oshcclaims@allianzcare.com.au. Alternatively, the maternity bookings coordinator at the hospital can contact our OSHC Eligibility Line on 1800 500 977.
- Our eligibility team will confirm you have a valid OSHC policy and that you have served all relevant waiting periods. We will then issue a guarantee for your treatment directly to the hospital for your admission so you will not need to pay up-front for these costs.

### OVERSEAS STUDENT HEALTH COVER PREGNANCY COVERAGE

## Frequently asked questions

## IF I FALL PREGNANT AFTER I ARRIVE IN AUSTRALIA, AM I COVERED?

If you have Allianz Care Australia

OSHC Essentials, no waiting period will apply for pregnancy related conditions.

If you have Allianz Care Australia

OSHC Standard, for the first 12 months after your arrival in Australia, you are not covered for pregnancy-related conditions because there is a 12 month waiting period for pregnancy related conditions.

### **HOW DO I UPGRADE MY POLICY?**

To upgrade your Allianz Care OSHC policy, please call our team on 136 742 before your baby is born or within 60 days of your baby's birth date.

## IF I AM ON A SINGLE POLICY, IS MY BABY COVERED?

If you are on a single policy, you will need to upgrade to either a dual family policy or a multi-family policy. Either of these options will mean an increase to your premium.

## IF I AM ON A DUAL POLICY, IS MY BABY COVERED?

If you are on a dual family policy, this policy covers the primary student visa holder plus either one adult spouse or recognised de-facto partner or one or more dependant children. Depending on the mix of dependants, you may need to upgrade to a multi-family policy. For example, if your policy covers your spouse or de facto partner but no dependant children, you will need to upgrade your policy upon the birth of your baby or within 60 days of your baby's birth. This option will mean an increase to your premium. If your policy covers your dependant children but no spouse or de facto partner, you do not need to upgrade your policy upon the birth of your baby. However, you should add your baby to your cover.

#### WAITING PERIOD FOR PREGNANCY-RELATED CONDITIONS

| OSHC Essentials policy | OSHC Standard policy    |  |
|------------------------|-------------------------|--|
| No waiting period      | 12-month waiting period |  |

### HAVE QUESTIONS? CONTACT OUR TEAM

**136 742** (within Australia) **+61 7 3305 8841** (overseas)

Or via the 'Contact Us' section on allianzcare.com.au

## IF I AM ON A MULTI-FAMILY POLICY, IS MY BABY COVERED?

Yes, if you are on a multi-family policy, all you need to do is add your baby's details to the policy. There is no change to your premium or policy type.

#### WHEN SHOULD I UPGRADE MY POLICY?

You can upgrade your policy before your baby is born or within 60 days of your baby's birth. If you do not upgrade within 60 days of your baby's birth, we will be unable to pay claims for pregnancy related conditions.

Your upgraded policy start date can be adjusted once your child is born. Any adjustments to the premium can be addressed at this time

## WHAT IF I DO NOT HAVE CONTINUOUS COVER?

It is a condition of your student visa that you must maintain continuous cover for the duration of your stay in Australia. If you do not have continuous cover, you may be in breach of your student visa.

If your cover has lapsed, you are not able to claim on any treatment you received, and will need to re-serve waiting periods. Please contact our team immediately on 136 742 to discuss your cover.

## WHEN SHOULD I NOTIFY ALLIANZ CARE AUSTRALIA ABOUT MY PREGNANCY?

When your medical practitioner has referred you to a hospital and the hospital has scheduled your expected delivery:

- Complete the Hospital Guarantee Request form available on our website allianzcare.com.au and email the completed form to oshcclaims@allianzcare.com.au, OR
- The Maternity Bookings Coordinator at the hospital or your doctor's surgery can contact us via our Eligibility Line on 1800 550 977 to verify your eligibility for maternity care.

Once cover has been confirmed, we will send the hospital a guarantee of payment for your hospital stay.

## DO I PAY FOR DOCTOR, PATHOLOGY OR RADIOLOGY COSTS UPPRONT?

Some medical providers will request upfront payment. Please ensure you keep your receipts and submit these to us.

Your provider may bill us directly. If they do, generally you will need to pay any gap fees and then the provider will bill us for the outstanding amount.

Should you have any questions about eligibility for medical treatment, please contact our team on 136 742.

# Types of Pregnancy Care

The first step is to consult your local doctor for their recommendations of an obstetrician or qualified local doctor/midwife who participates in a shared maternity care program to manage your pregnancy.

Your chosen medical practitioner/specialist will then see you on a regular basis throughout your pregnancy.

#### **SHARED MATERNITY CARE**

Shared maternity care means that during your pregnancy you can see the same local doctor (GP), or community midwife for most of your pregnancy visits. You will visit the hospital early in your pregnancy and again at 36 weeks. Together, the hospital and your chosen local doctor/midwife will share your care.

### **OBSTETRICIANS IN PUBLIC HOSPITALS**

Obstetricians specialise in pregnancies and birth. If you experience complications during your pregnancy an obstetrician will be involved in your care. You will attend the public hospital antenatal clinic to see doctors and midwives. Your local doctor will refer you to your closest public hospital for your initial consultation.

#### A PRIVATE OBSTETRICIAN

You may wish to choose a private obstetrician to manage your pregnancy and delivery of your baby. Your chosen obstetrician will be affiliated with specific hospitals. If you have selected your obstetrician, you will need to have your baby at the hospital that they are affiliated with. If you prefer, you can choose your hospital first, then ask the hospital for a list of obstetricians.

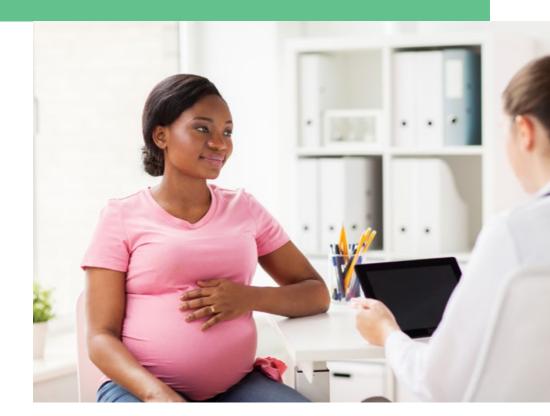
You need to obtain a referral from your local doctor and take this to your first obstetric appointment. Private obstetricians set their own fees. As such you will need to contact their surgery to confirm their fees and the Medicare item numbers. Once you have this information, contact our team on 136 742 to confirm your gap fee.

## Choosing your Hospital

There are a number of options when it comes to choosing where to have your baby. You can have your baby:

- As an OSHC patient in a public hospital
- · As a private patient in a public hospital
- As a private patient in a private hospital

The table on the following page shows what you are covered for in each of these situations.



## **CHOOSING YOUR HOSPITAL**

|  | OSHC patient in a public hospital  | Private patient in a public hospital   | Private patient in a private hospital   |
|--|--|--|---|
| Your choice of doctor  | No   | Yes  | Yes   |
| Your choice of<br>hospital   | No Need to go to public hospital in your local area which is based on your residential address.  | Yes  Need to go to public hospital in your local area which is based on your residential address or where your chosen obstetrician has admitting rights.                                   | Yes Need to choose private hospital that has an Australia Health Services Alliance (AHSA) contracted rate with Peoplecare Health Limited.   |
| Covered for hospital expenses (accommodation and theatre fees)                               | Yes We will cover the rate determined by State and Territory health authorities for services charged to a patient who is not an Australian resident.                                       | Yes  We will cover the rate determined by State and Territory health authorities for services charged to a patient who is not an Australian resident.                                      | Yes We will cover 100% of the contracted charges for all insurable costs raised by one of our agreement hospitals with a minimum of shared ward accommodation. If there is no agreement between us and the private hospital/registered day hospital facility, we will pay the applicable minimum benefit as set out in the Benefit Requirement Rules. |
| In hospital patient<br>(inpatient)<br>Covered for doctor,<br>radiology and<br>pathology fees | Yes We will cover 100% of the Medicare Benefits Schedule (MBS) Fee for medical services provided in hospital.  | Yes We will cover 100% of the Medicare Benefits Schedule (MBS) Fee for medical services provided in hospital.  | Yes We will cover 100% of the Medicare Benefits Schedule (MBS) Fee for medical services provided in hospital.   |
| Doctors (out of<br>hospital)   | Yes General Practitioner (GP) including telehealth - We will cover 100% of the Medicare Benefits Schedule (MBS) Fee. The benefit amount may vary depending on the type of medical service. | Yes General Practitioner (GP) including telehealth - We will cover 100% of the Medicare Benefits Schedule (MBS) Fee. The benefit amount may vary depending on the type of medical service. | Yes General Practitioner (GP) including telehealth - We will cover 100% of the Medicare Benefits Schedule (MBS) Fee. The benefit amount may vary depending on the type of medical service.  |
| Specialists (out of<br>hospital)   | Yes We will cover 85% of the Medicare Benefits Schedule (MBS) Fee. The benefit amount may vary depending on the type of medical service.   | Yes We will cover 85% of the Medicare Benefits Schedule (MBS) Fee. The benefit amount may vary depending on the type of medical service.   | Yes We will cover 85% of the Medicare Benefits Schedule (MBS) Fee. The benefit amount may vary depending on the type of medical service.  |
| Gap fees likely  | Only if the charge is above the<br>MBS Fee, or outside the hospital<br>rates schedule.   | Yes  | Yes   |

<sup>\*</sup>Benefits payable as per the Medicare Benefit Schedule fee.

# How to arrange your stay in hospital

#### **PUBLIC HOSPITAL**

- Public hospitals accept OSHC members for maternity care.
- To book into a public hospital you will require a referral from your local doctor (GP) and confirmation of your residential address.
- The hospital maternity bookings department will then review the request. Acceptance into the public hospital will be based on the following:
  - Priority is given if your residential address falls within the specified catchment area of the public hospital.
  - Availability of maternity beds at the time you are due to have the baby. Should the hospital reach full capacity then you will need to apply to a different public hospital. You can contact the maternity bookings department to discuss your other options.
- If you are unable to confirm a booking in a public hospital then please talk to your local doctor (GP) about having your baby in a private hospital.
- Once your booking has been confirmed by the public hospital maternity booking department, please confirm when your first antenatal clinic appointment will be (usually scheduled around 12 – 14 weeks). Ongoing appointments will then be scheduled following your first visit.

### PRIVATE PATIENT IN A PUBLIC AND/OR PRIVATE HOSPITAL

Having your baby as a private patient allows you to choose your hospital and practitioner/s. Once you have made a decision and have confirmed your obstetrician delivers at that hospital, you will need to make a booking with the hospital. This is usually done through your obstetrician.

# After the Birth

After the birth of your baby, you can expect to stay in a public hospital for 48 hours following a normal birth or 72 hours following a caesarean delivery.

In a private hospital, you can expect to stay for four days following a normal delivery and four to five days following a caesarean delivery. The actual length of your stay will depend on your wellbeing and the health of your baby.

From birth, family doctors, paediatricians and child health nurses provide care for babies and children including performing routine check-ups to monitor growth and development.

## ADDING YOUR BABY TO YOUR OSHC MEMBERSHIP

Once your baby has arrived, contact our team within 60 days on 136 742 to add your baby to your Allianz Care Australia OSHC policy.



## Download the Allianz MyHealth App

- Access your OSHC e-membership card
- View your policy documents
- Submit a claim





## For online services and information including:

- Find a doctor
- Claiming
- Health and wellbeing and other information

Visit allianzcare.com.au

Member services and general enquiries

136 742

Claims

1800 651 349

## 24/7 assistance helpline

Medical, legal and interpreting services in emergency situations

1800 814 781



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