



MEMBER FAQs

Mental Health Reform – Frequently Asked Questions

When does the mental health waiver start?

From 1 April 2018 members on low to mid-level covers can upgrade their cover and immediately access private hospital psychiatric services.

What is the definition of mental illness?

A mental illness or disorder is a health problem that significantly affects how a person feels, thinks, behaves, and interacts with other people. It is diagnosed according to standardised criteria. About one in five Australians will experience a mental illness in their lifetime.

Mental illnesses are of diverse types and degrees of severity. Some of the major types are depression, anxiety, schizophrenia, bipolar mood disorder, personality disorders and eating disorders.*

Who can access the mental health waiver?

The mental health waiver is available to all members (Resident and Non-Resident) who have served their initial two-month waiting period and currently hold a hospital cover that only has restricted benefits for psychiatric services.

What is a restricted benefit?

These are hospital services covered only at the 'restricted' benefit level. This is the amount set by the Federal Government as the minimum benefit a fund is required to pay for accommodation in hospital.

What happens if I haven't served the initial two-month waiting period?

You have the option to upgrade your level of cover at any time. However you'll still need to complete the mandatory initial two-month waiting period before you're able to access the waiver for higher psychiatric hospital benefits.

What happens if I don't contact GU Health within the initial five business days of my admission?

You can still upgrade your cover (if you've served your initial two-month waiting period for psychiatric services) and access the waiver however benefits under the higher level of cover will only apply from the date of the upgrade.

The waiver is once in a lifetime, what does this mean?

You only have one opportunity (regardless of which health fund you belong to) to have the upgrade waiting period removed and access private hospital psychiatric services immediately. Should you decide to downgrade your level of cover at a later date with GU Health or another health fund you will not be eligible to access the waiver again if you decide to upgrade your hospital cover a second time for higher psychiatric service benefits.

Does the waiver apply to just a one-off admission?

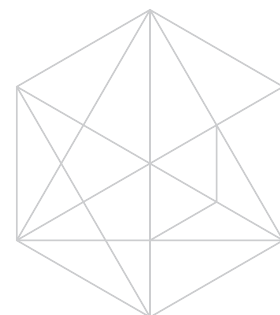
No, the waiting period waiver for higher hospital benefits applies to any valid private hospital psychiatric service admissions during the first two months of your new level of hospital cover.

What do I need to do in order to have the waiver to my membership applied?

You'll need to complete a Change of Cover Form, consent to the new level of cover and possibly arrange additional contribution payments (we'll let you know if that's the case).

What is an eligible psychiatric admission?

A member can be admitted to hospital and access the higher benefits regardless of whether a cause or complete diagnosis has been established. However the psychiatric treatment must be under the care of a consultant psychiatrist or medicine addiction specialist.



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Mental Health Reform

– Frequently Asked Questions ...continued

What happens if I change my mind about upgrading my cover?

As per our standard cooling-off policy, if a claim has not been made within 30 days of the change in level of cover then you can seek to cancel your upgrade request.

Please refer to *Your Membership Guidelines* at: guhealth.com.au for more information.

What happens if I transfer from another Fund?

You'll only be eligible for the waiver once. If you decide to transfer to another fund, the Transfer Certificate supplied to them will include details on whether or not the waiver has already been applied to your membership.

What do I do if I am concerned about my privacy?

We have a Privacy Policy which we abide by in order to protect our member's details.

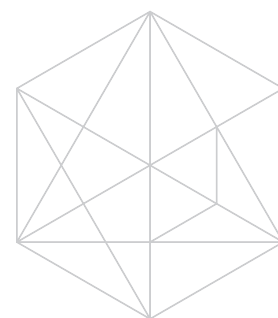
To view our Privacy Policy, please visit: guhealth.com.au

Any data we provide to your employer on private hospital benefits is always de-identified.

*Source: Department of health: [https://www.health.gov.au/internet/main/publishing.nsf/content/F602B63256E116BBCA257BF00020AACF/\\$File/whatmen2.pdf](https://www.health.gov.au/internet/main/publishing.nsf/content/F602B63256E116BBCA257BF00020AACF/$File/whatmen2.pdf)

We're here to help

For assistance or for more information email: corporate@guhealth.com.au or contact our Member Relations Team on **1800 249 966** between 8.30am to 5pm (AEST), Monday to Friday ●



Updated March 2019. The information contained within this document is current from the publication date and is subject to change. If you're planning a treatment for which you anticipate a benefit from GU Health, contact us in advance to confirm your benefit entitlement.

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