



MEMBER FACT SHEET

Waiting periods explained

A waiting period is a limited period of time during which you – and anyone covered under your membership – can't claim benefits for certain treatments.

At GU Health you have access to a tailored health plan, superior benefits and exceptional service.

You're granted continuity of cover if you've transferred from a registered Australian health fund within 60 days of joining us and you've already served your waiting periods on a comparable level of cover. If you haven't fully served the waiting period with your previous fund, you'll need to serve the remainder with GU Health.

What is a waiting period?

It starts on the date you join GU Health or when you upgrade your level of cover.

If you're new to health insurance, you'll be covered automatically for all treatments except those that attract waiting periods. Please see the *Your Plan Information* document provided in your *Welcome Pack* for more details.

If you select or upgrade to a higher level of cover and a waiting period applies on services that you weren't previously covered for, you won't be eligible to make a claim until those waiting periods have been served.

Also, if the excess on your new cover is lower than the excess on your previous cover, the previous level of hospital excess will apply to any pre-existing conditions for the first 12 months under the new cover.

Transferring or upgrading your cover

If you already have health cover and you're transferring from another fund – or between covers – you'll be pleased to know that different rules apply. You won't have to serve waiting periods provided you've already done so with your previous insurer and you transfer to a level of cover with comparable benefits with GU Health within 60 days.

If your benefits with us are greater than the benefits you had with your previous fund, you may have to serve waiting periods for the additional benefit. And, if you upgrade between GU Health covers, waiting periods may apply to any services which weren't included on your previous cover.

In addition, the benefits you've claimed under your previous cover may be taken into consideration when we calculate your benefit limit for equivalent services under your new cover.

Transferring from an international health insurer to GU Health

If you're transferring from a recognised international health insurer, you can apply to GU Health to request that consideration be given for waiting periods already served.

When submitting your request, please include your previous membership details along with your certificate of cover (documents must be in English or provided

with a certified English translation).

We reserve the right to assess transfers from international insurers on a case-by-case basis. ●

What you need to know about waiting periods:

- Accrued entitlements and loyalty bonuses are not transferable between funds or covers.
- If you're coming across from another health fund, we're notified of your claims history through the Transfer Certificate you supply to us upon joining.



Please make sure you read the *Your Membership Guidelines* booklet in conjunction with *Your Cover at a Glance* and *Your Plan Information*, which you would have received in your *GU Health Welcome Pack*.



For further information about your GU Health cover or any queries relating to this document, please contact your GU Health Member Relations Team on **1800 249 966** or email: corporate@guhealth.com.au

Updated October 2018. 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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