

# Overseas Student

Health Cover

# Pregnancy

Fact Sheet

This fact sheet aims to help you understand the Australian healthcare system when having a baby.

## During your pregnancy

### Make sure you have health cover for your family

Allianz Global Assistance OSHC offers three types of policies:



**Single** – Covers only the valid student visa holder



or



**Dual Family** – Covers one valid student visa holder plus either one adult spouse or recognised de-facto partner or one or more dependant children



**Multi Family** – Covers one student visa holder plus more than one dependant which can only include one adult spouse or recognised de-facto partner and one or more dependant children

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## Frequently asked questions in regards to your OSHC pregnancy coverage

### If I fall pregnant after I arrive in Australia, am I covered?

- If you have OSHC Essentials cover, you are covered as long as your student visa is for a period of three months or more and you have valid OSHC cover.
- If you have OSHC Standard cover, for the first 12 months after your arrival in Australia, you are not covered for pregnancy-related conditions.
- The Department of Immigration and Border Protection will only issue you with a student visa if you have valid OSHC for the proposed duration of your visa.

### Waiting periods for pregnancy and pregnancy-related conditions

	Essential OSHC policy	Standard OSHC policy
Pregnancy and pregnancy-related conditions	No waiting period	12-month waiting period

### Do I need to upgrade my policy and when should I do this?

You can purchase your upgraded policy before your baby is born, or you have 60 days to upgrade your policy post-birth. Note: Your upgraded policy start date can be adjusted once your child is born. Any adjustments to the premiums can be addressed at this time.

### 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 in your premium.

### If I am on a dual family policy, is my baby covered?

If you are on a dual family policy, this policy covers one valid student visa holder plus either one adult spouse or recognised de-facto partner or one or more dependent children. Depending on the mix of dependants, you may need to upgrade to a multi-family policy. This option will mean an increase in your premium.

### If I am on a multi-family policy, is my baby covered?

If you are on a multi-family policy, all you need to do is add your baby to the policy. There is no change to your premium.

Details of the types of cover are available on our website at [www.oshcallianzassistance.com.au](http://www.oshcallianzassistance.com.au).



### **If I am on a family policy, is my baby covered?**

If you purchased, renewed or upgraded to family cover before 1 January 2012, please contact our member services team on 13 6742 to discuss your policy.

### **How do I upgrade my OSHC policy to either dual family or multi-family?**

- Simply go to our website and download an 'Upgrade to a dual family or multi-family policy' form.
- Once this has been completed, please post it to Locked Bag 3001, Toowong QLD 4066.
- Alternatively, you can ring and speak with one of our Member Services Officers on 13 OSHC (13 6742).

### **When should I add my baby to my policy?**

A baby can't be added before it's born. Please call us on 13 67 42 to add your baby within 60 days after your baby's birth. We are unable to pay for any medical costs for your baby until you have added your baby to your policy.

### **What if I don't 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 may need to re-serve waiting periods. Please contact our Member Services Officers immediately on 13 OSHC (13 6742) to discuss your cover.

### **When should I notify Allianz Global Assistance about my pregnancy?**

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

1. Complete the Hospital Guarantee Request Form located on the OSHC website under Downloadable Forms to avoid delays and email it to [oshcclaims@allianz-assistance.com.au](mailto:oshcclaims@allianz-assistance.com.au) or fax it to 07 3305 7009.

OR

2. The Maternity Bookings Coordinator at the hospital or your doctor's surgery can contact 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 and radiology costs up-front?**

- Some medical providers will request up-front payment. Please ensure you keep your receipts and you can submit these to OSHC for assessment.
- 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 in relation to eligibility for medical treatment, please contact our Member Services for general policy information on 13 OSHC (13 6742).

### **Still have questions? Please contact our Member Services and General Enquiries**

13 OSHC (13 6742)

+61 7 3305 8841 (If calling from outside Australia)

Or email via the 'Contact Us' section on our website [www.oshcallianzassistance.com.au/contact\\_us.aspx](http://www.oshcallianzassistance.com.au/contact_us.aspx)



### **Types of pregnancy care**

The first step is to consult your local doctor for their recommendations of an obstetrician or a 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** 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 community doctor/midwife will 'share your care'.

Shared maternity care is a popular choice for women who are healthy with a normal, low-risk pregnancy. Shared care doctors/midwives may charge some gap fees. This amount varies, but is likely to be less than obstetrician fees.

**Obstetricians in public hospitals** 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** means you can choose which private obstetrician you would like to manage your pregnancy and delivery of your baby. Your chosen obstetrician will be affiliated with specific hospitals. If you've 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 you can contact OSHC member services (13 6742) to confirm what your gap fee will be.

## 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 below shows what you are covered for in each of these situations.

	OSHC patient in a public hospital	Private patient in a public hospital	Private patient in a private hospital
<b>Your choice of doctor</b>	No	Yes	Yes
<b>Your choice of hospital</b>	No Need to go to public hospital in your local area which is based on your residential address.	No 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 contracted Australian Health Services Alliance (AHSa) contracted rate with <i>Peoplecare Health Insurance</i> .
<b>Covered for hospital expenses (accommodation and theatre fees)</b>	Yes Hospital inpatient <b>shared ward accommodation</b> , 100% of the rate determined by the State and Territory health authority for Medicare ineligible patients.	Yes Hospital inpatient <b>shared ward accommodation</b> , 100% of the rate determined by the State and Territory health authority for Medicare ineligible patients.	Yes Hospital inpatient <b>shared ward accommodation</b> , 100% of the Australian Health Services Alliance (AHSa) contracted rate with <i>Peoplecare Health Insurance</i> .
<b>In hospital patient (inpatient) Covered for doctor, radiology and pathology fees</b>	Yes 100% of the Medicare Benefits Schedule (MBS) fee. Any doctors' fees above the MBS fee will be a gap, which is a cost to you. OSHC does not cover any gap fee above the MBS fee.	Yes 100% of the Medicare Benefits Schedule (MBS) fee. Any doctors' fees above the MBS fee will be a gap, which is a cost to you. OSHC does not cover any gap fee above the MBS fee.	Yes 100% of the Medicare Benefits Schedule (MBS) fee. Any doctors' fees above the MBS fee will be a gap, which is a cost to you. OSHC does not cover any gap fee above the MBS fee.
<b>Out of hospital (outpatient) Covered for doctors, pathology and radiology fees</b>	Yes Benefit amount as listed in the Medicare Benefit Schedule (MBS) – 85% of the MBS fee*. OSHC does not cover any gap fees above the MBS fee.	Yes Benefit amount as listed in the Medicare Benefit Schedule (MBS) – 85% of the MBS fee*. OSHC does not cover any gap fees above the MBS fee.	Yes Benefit amount as listed in the Medicare Benefit Schedule (MBS) – 85% of the MBS fee*. OSHC does not cover any gap fees above the MBS fee.
<b>Gap fees likely</b>	Only if charge above the MBS rates, or outside the hospital rates schedule.	Yes	Yes

\*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 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 about having your baby in a private hospital.
- Once your booking has been confirmed by the public hospital maternity bookings 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 the opportunity to choose your hospital and practitioner/s. Once you have made a decision and have confirmed your obstetrician delivers at that hospital, a booking will need to be made 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 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, you will need to contact our member services within **60 days** on 13 6742 to add your baby to your Allianz Global Assistance OSHC membership.

## 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 are **not eligible** for Medicare, which is why you are required to hold an OSHC insurance policy. Your OSHC benefits are based on this Medicare Benefit Schedule of fees (MBS).

Doctors and medical services may choose to charge more than the MBS scheduled fee which is called a gap fee. You will be responsible for these costs and cannot claim this amount from OSHC. These gap fees would also apply to local residents who have 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 OSHC policy covers 100% of the MBS fee.

For other outpatient services such as pathology and radiology (including specialists) your 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 OSHC cover 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. As such, you can contact ahead and ask their receptionists what their typical fee schedule is prior to making an appointment.
- Choose a private hospital that has an agreement with the Australian Health Service Alliance contracted rates with Peoplecare. You can confirm this by asking the hospital maternity booking coordinator. Alternately the hospital finance department will have this information.
- Get Informed Financial Consent from your obstetrician/midwife and any other specialist involved in your care prior to treatment, to ensure you understand their fee structure.
- Contact Allianz Global Assistance 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 [www.oshcallianzassistance.com.au](http://www.oshcallianzassistance.com.au) under the OSHC information tab. Please complete this document and email to [oshclaims@allianz-assistance.com.au](mailto:oshclaims@allianz-assistance.com.au). Alternatively, the maternity bookings coordinator at the hospital can contact our OSHC Eligibility Line on 1800 550 977.
  - Our eligibility team will confirm if you have a valid OSHC policy, a valid student visa and that you have served all relevant waiting periods. OSHC can 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.

