

Going to hospital guide

Going to hospital can be a stressful time. We're here to help.

We've put together a guide for your hospital stay – from what to ask your doctor to how we pay the bills so that you know what to expect ahead of a hospital admission

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STEP 1

Visit your GP

It begins with a referral from your GP to see a specialist doctor (like a surgeon for instance). Your GP should talk to you about whether a certain procedure is a good option for you. Procedure success rates, patient health benefits and health risks matter. That's why it's good to get this impartial advice.

Tip:

Once you're happy to continue, your GP will refer you to a specialist. You could even take your referral to another specialist within the same specialty.

Here are a few questions you might want to ask your GP:

- Do I need further treatment?
- What are my treatment options?
- Do I need any tests? If so, how much will I pay?
- What is the referral process? Is there more than one specialist I can see?



STEP 2

Find a specialist

Use our specialist doctor search on the Peoplecare website to get an estimate of how much each specialist charges under the Access Gap scheme.

What's Access Gap?

Access Gap is a scheme that aims to reduce the difference between the Medicare fee and what specialists charge. Specialists can choose to take part in Access Gap on a case by case basis, and if they take part, you'll either have no gap or be told exactly what your gap will be.

When your specialist chooses to use Access Gap, they'll charge us directly & they mustn't charge you fees like:

- Booking fees
- Management fees
- Technology fees
- Administration fees
- Insurance levy fees
- Hospital facility fees

At this point, you can choose your specialist with your GP based on your treatment and how often they participate in our scheme to reduce your gap. If you're going in for a procedure, for example, with a Cardiothoracic Surgeon, you can search in advance to find a surgeon in your area who could offer you gap-free services.

Peoplecare has agreements with more than 36,000 doctors across Australia. There are plenty of Access Gap specialists to choose from (gaps can vary from case to case).

Visit peoplecare.com.au/findaspecialist to find specialist doctors who've taken part in Access Gap in the past.

The results, which you can use as a guide, will look like this:

- No Gap in 90% of admissions
- Gap up to \$500 in 10% of admissions

Participation for Dr ABC is based on 200 admissions in a 24 month period

NEED HELP USING THE SPECIALIST SEARCH?

There's a step-by-step guide on the Peoplecare website peoplecare.com.au/access-gap.



STEP 3

Visit your specialist & get an itemised quote

When you visit your specialist, you'll get to learn about the treatment options your specialist recommends for you. It's a good time to gather information to help you make a decision about your next step. **Take [the Informed Financial Consent quote form](#) to your specialist appointment. Make sure either the specialist or practice manager complete this with you (ask at reception).** Some of the things to ask include:

Specialists can choose to take part in Access Gap on a case-by-case basis. If they take part, you'll either have no gap or be told exactly what your out-of-pocket expenses will be. So please **ask your specialists to take part in Access Gap**. If you save money, that makes you happy and us happy.

- What are the treatment pros & cons?
- Is the procedure likely to be successful?
- Are there any side effects?
- What would my recovery plan be?
- Can you bill using Access Gap?



KNOW YOUR COSTS: GET AN ITEMISED QUOTE

In hospital terms, a quote for your specialist fees is called 'Informed Financial Consent'. An itemised Informed Financial Consent quote will tell you exactly what your out-of-pocket expenses will be. From there, you can make your choice knowing all the important information. It also tells Peoplecare which Medicare Benefit Schedule items are being billed as part of your procedure (so, we'll be able to tell you if you're covered – that's in the next step).

Informed Financial Consent should be provided in writing to you by your specialist.

CONFIRM WHERE THE PROCEDURE IS TAKING PLACE

Where your procedure is taking place matters (as it could change if you are covered by Peoplecare), so make sure you have the name of the facility in writing so that we can check for you. Alternately, you can see if Peoplecare has an agreement with your hospital by using our hospital search peoplecare.com.au/findahospital.



STEP 4

Call Peoplecare

CALL US ON 1800 808 690

A simple phone call could save you time and make you feel confident with your upcoming planned procedure. Plus, we have a team of Peoplecarers whose entire job is to help you with your hospital admission and answer your hospital questions – so why not benefit from their expertise?

Instead of picking through your hospital cover documentation, we'll tell you:

- if you're covered for your upcoming hospital admission (if we're unsure, we'll ask you what clinical category you are going in for and/or the Medicare Benefits Schedule items included in your itemised Informed Financial Consent from the previous step)
- if Peoplecare has an agreement with the hospital where the procedure is taking place
- your excess to pay (if any)
- some information to help your specific admission
- if you might be suitable for a hospital substitution program
- if your contact details & payments with us are up to date



STEP 5

Book your procedure & plan your hospital stay

BOOK YOUR PROCEDURE:

Call your specialist and book in the procedure. An important step at this point is to **ask about your recovery plan**, as this will help you plan what to do when you leave hospital and how long your stay will be.

DO YOUR HOSPITAL PAPERWORK

Your hospital will give you two short forms to complete online or on paper at least 48 hours before your admission. The forms are called Patient Registration Form and Patient Health History. These forms are also used to ensure we pay claims for the stay and that you chose to be treated privately.

OTHER ORGANISING

- Double check the time of admission
- Arrange how you will get to and from the hospital
- Get some easy meals ready in the freezer for your return

THINGS TO PACK CHECKLIST

- Your medicare card
- Your Peoplecare membership card
- your excess to pay (if any)
- Things needed for your treatment (referrals, blood tests, scans, X-rays)
- Sleepwear
- Underwear
- Toiletries
- Non-slip shoes
- Your detailed medication list or all of your medicines in their original packaging.
- Things to help the time pass (books, magazines, TV shows) - just be aware that if you choose to watch the hospital's TV, you'll be charged.
- Some cash or a credit card for parking and cafes, and incidentals like newspapers and TV.

PREPARE FOR PROCEDURE

- Make sure you follow your specialist's instructions on fasting before the procedure. Make sure you know if you need to fast and what things are banned (food only or liquids as well?)
- Take a shower if you're allowed to. It will be harder after procedure.
- Don't apply nail polish or make-up. Those things make it harder for the nurses to monitor your oxygen levels.

STEP 6

Go to hospital

You will be admitted to the hospital the day before or on the day of your procedure. Your friendly hospital staff will wheel you into theatre when they're ready. After your procedure, you will be in the recovery ward before being taken back to your room.

If you've got an excess on your cover, the hospital will ask you to pay it up front – either before your stay or when you're admitted to hospital.

Plus, don't forget to bring your hospital bag with all your medications, clothes and toiletries.

INCIDENTALS

Incidentals are the fees that private hospitals charge you personally. These can include, but are not limited to things like newspapers or having access to a TV in your room.

If you use any incidentals while you're in hospital you'll need to pay for them before you're discharged. This is usually separate to the rest of your hospital bills, and you'll need to pay for them yourself.

Ensure you have discussed with the hospital these potential incidental costs and whether you are able to opt out so you won't be charged for them.



Hospital Substitution Programs*

Get out of hospital earlier or recover where you're most comfortable, better yet, avoid it completely with in-home hospital services. All you need is a referral from your specialist* to be eligible.



Hospital at Home

Going to hospital? Want to be back in your own home recovering as soon as possible instead of staying in hospital? Our Hospital at Home program lets you receive short-term therapy services such as IV antibiotics and wound care in the comfort of your own home.



Rehab at Home

Rehab at Home gets you home from hospital sooner – we hear the food isn't that great in there anyway! Rehab at Home is a hospital substitute program that provides rehab services such as physio & occupational therapy in the comfort of your home.



Chemo at Home

Did you know that if you are covered on Peoplecare's hospital cover for chemotherapy, you can receive your chemotherapy treatment at home? Our trusted providers have a program called Chemo at Home that allows you to get the treatment you need (if it's covered by Medicare). The service is delivered in your home and can include chemotherapy, targeted cancer therapies and targeted therapies for inflammatory bowel disease.

**Hospital substitution programs Hospital at Home, Rehab at Home and Chemo at Home can ONLY substitute hospital treatments you are covered for on your hospital cover. Anything that is a pre-existing condition will have a 12-month waiting period. Exclusions and restrictions apply. Head to peoplecare.com.au/hospitalathome for more information on these services.*

WANT MORE INFORMATION?

For more information on our Hospital Substitution Programs, please give our Hospital & Health experts a call on 1800 808 690.



STEP 7

Check out of hospital & recover

Check out of hospital

GET YOUR DISCHARGE PLAN

Before you leave hospital, make sure you take your discharge plan and discharge summary.

Discharge plan should include things like:

- Follow-up tests and future appointments
- Medicines you need to take (and collect from the pharmacy)
- Equipment needed for your recovery
- Rehabilitation arrangements (if needed)

DISCHARGE SUMMARY SHOULD INCLUDE THINGS LIKE:

- Treatment you received in hospital
- Tests you received
- Medications you received
- Medication history
- Allergies and reactions during your admission
- Any future health arrangements

Remember to take a copy to your follow up appointments.

PAY FOR ANY EXTRA SERVICES YOU USED

If you added Wi-Fi, newspapers or TV to your account, pay the bill when you leave hospital.

COLLECT MEDICATIONS FROM THE HOSPITAL PHARMACY

When you get discharged, you might get prescriptions for medications to take home with you. Grab these on your way out at the hospital pharmacy. You won't be able to claim these medications on your hospital cover, but you should be able to claim any prescription medication over the current PBS amount if you have Peoplecare extras cover and have served your 2-month waiting period for pharmacy.

RECOVERY TIPS

- Follow your specialist's instructions closely
- Attend all your follow-up appointments
- Take care of your personal hygiene such as washing your hands
- Check your wounds for signs of infection
- Maintain a good diet & stay hydrated
- Move with care to avoid falls

Claim

HOSPITAL BILLS

These include fees for things like accommodation, theatre and medical devices and human tissue products.

Who gets the bill? Most of the time, your hospital will send the bill straight to us and we'll send you a benefit statement to let you know if it's paid. The only thing you'll have to pay to the hospital is your excess (if you have one) and any additional services you've used (like TV).

STEP 8

If your hospital bill does get sent to you, just send it on to us and we'll take care of the rest!

MEDICAL BILLS

These are bills from doctors, specialists, surgeons, anaesthetists, pathologists, radiologists, etc.

Who gets the bill? If your specialists are taking part in the Access Gap scheme, they'll send their bills straight to us and all you'll have to pay is the gap (which your doctor will tell you about before you go to hospital).

If you get a medical bill, complete Medicare's Two-Way Claim Form (you can get this on our website peoplecare.com.au/Members/Forms) and send it to Medicare (not us). Medicare pays 75% of the Medicare Scheduled Fee. Once Medicare has paid their benefit, Medicare sends the bill to us and we'll pay the remaining 25% of the bill.

If your specialists have charged more than the Medicare Scheduled Fee, you'll have what's called an 'out-of-pocket cost'. Your specialists should tell you what that cost will be before you go to hospital.

BOOK YOUR FOLLOW-UP VISITS WITH YOUR SPECIALIST & GP

Your discharge plan should say when you're meant to see your specialist and GP again, but as a rule of thumb, you'll normally see both around 6 weeks after procedure.

Get help for chronic conditions

People with chronic conditions need a bit of extra help to get on top of their health. That's why Peoplecare offers health programs to eligible members to help manage things like anxiety, depression, diabetes, obesity, heart disease and osteoarthritis.*

Interested in enrolling or learning more?

If you feel you're at risk or not coping with your health, contact us on **1800 808 690**, info@peoplecare.com.au or visit peoplecare.com.au/askouexperts.

**You'll need to be on one of our Basic (Basic Plus)*, Mid (Basic Plus)*, Bronze Plus, Premium (Gold)*, Silver, Silver Plus Grow, Silver Plus or Gold hospital* covers, have served your 2-month waiting period and meet the program criteria to be eligible.*

**These covers are closed to new members*

Who's who at the hospital

- **Discharge planner**

A discharge planner (also called a continuing care coordinator) manages patient transition from hospital to another health facility or your home.

- **Physiotherapists and exercise physiotherapists**

Physiotherapists and exercise physiotherapists specialise in your physical recovery from hospital and help you strengthen your muscles with targeted exercises, movements and hands-on treatment.

- **Social worker**

Social workers can help connect you to community services that can assist in your care when you return home.

- **Nurse Unit Manager**

A nurse unit manager (who used to be called a matron) is the head nurse who manages all the nurses.

Key Terms

We like to keep things simple at Peoplecare, but there are still a few things to learn to help you understand how to use your health cover.

ACCOMODATION

Accommodation covers a bed and meals in hospital. It also includes in-hospital services like nursing and is separate to your doctors' bills.

EXCESS

An amount you agree to pay when you're admitted to hospital in exchange for a lower premium. Peoplecare doesn't charge on excess for children under 21 on a family hospital cover if they go to hospital.

Our excesses are halved if it's a day stay and the full excess for an overnight stay and longer. You only have to pay your full excess once each financial year on single covers and up to double your excess on couple and family covers (e.g. the full excess for two parents on a family cover).

MEDICAL EXPENSES

Fees for medical services while you're in hospital. Things like specialist, radiology, pathology and anaesthetists.

OUT-OF-POCKET EXPENSES

Also called out-of-pocket costs, these occur when specialists doctors such as surgeons and anaesthetists charge more than the Medicare Benefits Schedule Fee.

PRE-EXISTING CONDITION

A pre-existing condition is any ailment, illness, or condition that you had signs or symptoms of (in the opinion of a medical practitioner appointed by the health insurer) that existed during the 6 months before you joined a hospital cover or upgraded to a higher hospital cover. It is not necessary that you or your doctor knew what your condition was or that the condition had been diagnosed.

A condition can still be classed as pre-existing even if you hadn't seen your doctor about it before joining the hospital cover or upgrading to a higher hospital cover.

Pre-existing condition restrictions don't apply to the following services:

- Rehabilitation, hospital psychiatric services, palliative care have a 2-month waiting period
- Ambulance has a 1-day waiting period

THEATRE FEES

Costs for procedures performed in an operating room, including day surgery facilities.

WAITING PERIOD

How long you have to be a member before you can make a claim. The best way to check your waiting periods is to give us a call on **1800 808 690**.

Who pays

Between Medicare, private health insurance and out-of-pocket expenses, it's important to understand who pays for what and our chart explains the main things you need to know for hospital.

Benefits depend on your level of cover and any restrictions, exclusions or waiting periods you have and the 12-month wait for pre-existing conditions.

You can check what you're covered for and your waiting periods using our app, our Online Member Services, or by calling us on **1800 808 690**.

	Peoplecare			
	Medicare	Hospital	Extras	You
Ambulance emergency and/or non emergency	X	✓	✓	X
Doctors fees outside hospital (outpatient) Things like GP & specialist fees, radiology & pathology	✓	X	X	✓
Doctors fees in hospital (inpatient) Things like specialists, radiology & pathology fees, accommodation & theatre fees while you are in hospital	✓	✓	X	✓
Public hospital charges If you're admitted as a public patient	✓	X	X	X
Public hospital charges If you're admitted as a private patient	✓	✓	X	✓
Private hospital charges Like accommodation, theatre fees and medical devices and human tissue products	X	✓	X	✓
Other services Things like dental, optical & physio	X	X	✓	✓

See step 7 for how to claim your hospital stay.



1800 808 690



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peoplecare.com.au