

Having a baby?

Here's what you'll need to know.



Your Health Insurance Partner

(MEMBERS OWN)
HEALTH FUND

When it's time to go to hospital to have your baby, the last thing you want to worry about is your health insurance.

That's why we've put together this information to make things easier for you. It's written in three main sections – 'before you have your baby', 'while you're in hospital' and 'after you have your baby'.

Read this in conjunction with our 'going to hospital' flyer, to fully understand how your hospital visit will work.

For specific questions about your pregnancy and delivery, speak to your obstetrician, midwife or GP.

Before you have your baby

Is pregnancy covered?

Pregnancy is included on several Health Partners Hospital covers. It includes all birth-related procedures, your hospital accommodation and the care you receive in the labour ward.

Contact us to confirm if pregnancy is included in your Hospital cover and whether waiting periods have been served.



Is there a waiting period?

There's a 12 month waiting period for pregnancy cover. To be eligible for benefits, your baby's delivery date (not 'expected' or 'due' date) must be after the 12 month period. This means, if you want private hospital care during your pregnancy and labour, you'll need to take out Hospital cover that includes maternity, *before* you get pregnant.

If you're already pregnant but only joined or upgraded your Hospital cover in the last 12 months, your benefits may be lower or you may not be entitled to any benefits.

Call us to find out more, or for advice on the best level of cover if you're planning a family in the near future.

Your pregnancy care options

If it's your first pregnancy, you may be wondering where to go and who to speak to about the care options available to you. Often it's your GP that will discuss these options with you, and based on several factors such as your personal health and history, you can decide on the best option for you.

- *You could choose to be a **private patient in a private hospital***

Your pregnancy, labour and birth will be managed by a private obstetrician of your choice. Your antenatal (pregnancy) visits will be at the private rooms of the obstetrician.

- *You could choose to be a **private patient in a public hospital***

You'll give birth in a public hospital maternity unit under the care of your private obstetrician and the hospital team.

- *You could choose to be a **public patient in a public hospital***

There is a range of options that may be available to you at a public hospital, for example, you may have the option of care provided in a public hospital birth centre or by the hospital team at their maternity unit.

If you decide to be a private patient, you'll need your health insurance to help cover the costs.

Additional guidance with Motherhood Support

Our Motherhood Support Program provides you with ongoing support from the time you learn of your pregnancy through to the first 8 weeks of your baby's life. It includes support, advice and benefits for: lactation consultations, post-natal advice on a range of topics, baby development and what to expect, first aid for babies and general parenting support – all of which can be accessed via email, phone or in person depending on your location.

If you're eligible to enrol, you'll get a first aid kit and access to a first aid course or e-course. We'll also deliver a gift bag to you with essentials for you and your baby.

How can I join the program?

To join the Motherhood Support Program, enrol via Members Online at healthpartners.com.au (once logged in, click on Other Services > Motherhood Support) or complete the enrolment form (available at our website or upon request).

Note: This program is available on certain covers only. Please contact us, or refer to your individual cover to see if you're eligible.

For more information call us on 1300 113 113.

Tip: *The Motherhood Support Program isn't limited to private hospitalisation.*

If you're admitted as a public patient in a public hospital and contribute to an eligible Hospital cover, you too can access this program.

Finding your obstetrician

One of the great things about being a private patient is that you get to choose your own obstetrician. This is an important consideration that is usually decided during your first trimester.

- Your GP is a great source of information and may recommend or refer you to any number of obstetricians.
- You can search a list of practising obstetricians at rancog.edu.au (the Royal Australia and New Zealand College of Obstetricians and Gynaecologists).
- Or perhaps you know a new mum whose recommendation you value.

Your out-of-pocket costs

As a private patient, there will always be some out-of-pocket costs that you'll need to pay. The costs are mostly 'gaps' arising from services you access both in and out of hospital and are affected by your obstetrician's fees (and the fees of other specialists such as your anaesthetist's).

Your obstetrician's fees

When you first meet your obstetrician ask them for a detailed summary of all their fees. This summary is known as 'informed financial consent' and is useful to determine how much of their fees will be covered by Health Partners, and how much you'll have to pay.

If your obstetrician charges above the Medicare Schedule Fee (which most do), you'll have to pay an out-of-pocket cost.

If reducing your out-of-pocket expenses is important to you, ask your obstetrician if they participate in Health Partners Access Gap. If they do, this means you'll have a reduced gap.

At Health Partners we have a list of obstetricians who may be willing to participate in Access Gap. Please visit the 'doctor search' at healthpartners.com.au or call us.

Midwife

In most cases you won't have anything to pay towards a midwife provided to you in a public hospital, however for information about fees and charges for a private midwife, contact your obstetrician.

Medical services outside of hospital

These services could include things like pre/post-natal obstetrician visits, scans or blood tests in the lead-up to the birth and antenatal classes. Just like the visits to your GP, these services can be claimed through Medicare, at 85% of the Medicare Scheduled Fee. The remainder is paid by you. This gap may be reduced if you're eligible for the Extended Medicare Safety Net. For more information please contact Medicare.

Your excess and co-payment

Depending on your level of cover you may have an excess and/or co-payment to pay for your hospital admission. If you're unsure, it's best to determine what this will be by calling us.

While you're in hospital

Once you've delivered your baby you'll be seen, and cared for, by the hospital team (midwives, your obstetrician and any other specialists as required). Your baby will also be assessed by the relevant health professionals at the hospital. Gaps may apply for these services, please check with your hospital.



Will my baby be admitted to hospital?

If there are no complications and your baby is well there's no need for them to be 'admitted' to hospital. Provided that you too are well, they'll get to stay with you until it's time for you to go home together.

The only other exception is if you've given birth to more than one baby. It's standard procedure for hospitals to admit second and subsequent babies as in-patients.

Will my baby be covered by my health insurance?

If your baby is admitted to hospital, provided that you add them to your Family Hospital cover within 60 days of their birth, they'll be covered.

Adding your baby to your cover

To make sure your baby is covered immediately, add them to your cover within 60 days from the date of birth. If you're already on a Family cover, you can do this via Members Online at healthpartners.com.au or by calling us.

If you're on Single or Couples cover, you'll first need to change to Sole Parent or Family cover from your baby's date of birth. Your adjusted health cover premiums will need to be paid from your baby's date of birth.

Tip: If you're the policyholder, you can grant Delegation of Authority to your partner/spouse so that come time to make changes to your policy, either one of you can do it. Download the Delegation of Authority form at our website or call us on 1300 113 113

After you have your baby

Follow-up appointments

You may need to see your doctor or your baby's paediatrician after the birth to ensure everything is going to plan with you and your baby. Because you're not admitted to hospital with these visits, they aren't covered under your Hospital cover. They are claimable through Medicare and may incur an out-of-pocket expense.

Lactation consultations

Our Motherhood Support Program includes gap-free clinic lactation consultations to support you while you're learning to breastfeed. The service is provided by a Medicare recognised lactation consultant. You need to be on an eligible product, obtain a signed doctor's referral and to enrol in the program.



Claiming your Health Partners benefit

If your doctor has chosen to participate in Access Gap, you probably won't need to do a thing! They'll send their bill directly to us. Once we've paid it, we'll send you a statement to let you know the benefits that have been paid on your behalf.

If your doctor sends the bill directly to you for claiming, you'll need to lodge a Medicare claim. The easiest way to do this is by completing and submitting a Medicare Two-Way Claim form – a link is available on our website.

Still have questions?

If you'd like to find out more about having a baby with private health insurance, call us on 1300 113 113, we're here to help.

In addition to speaking with your GP, information on pregnancy and birth care can also be obtained from your local public or private hospital(s).

