

PREGNANCY FACT SHEET

OVERSEAS STUDENT
HEALTH COVER



Allianz  Care

DURING YOUR PREGNANCY

It is important to have health cover for your family. Allianz Care Australia offers three types of policies:



SINGLE

Covers only the valid student visa holder



DUAL FAMILY:

Covers the valid student visa holder plus either one adult spouse or recognised de-facto partner or one or more dependant children



MULTI FAMILY:

Covers the 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

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 policy. Your OSHC benefits are based on the Medicare Benefit Schedule of fees (MBS).

GAP FEE

Some medical services may have a gap fee, which is the difference between the amount charged by the doctor and the MBS fee. You will be responsible for these costs and cannot claim this amount using your OSHC policy. These gap fees also apply to Australian citizens who are eligible for 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 Allianz Care Australia OSHC policy covers the benefit amount as listed in the MBS. The benefit amount may vary depending on the type of medical service.

For other outpatients services such as pathology and radiology (including specialists) your Allianz Care Australia 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 Allianz Care Australia OSHC covers 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. To compare prices of specialists, you could contact and ask their receptionists what their typical fee schedule is.

Choose a private hospital that has an agreement with the Australia Health Services Alliance and has contracted rates with our underwriter Peoplecare Health Limited. You can confirm this by asking the hospital maternity booking coordinator. Alternately the hospital finance department will have this information.

Get an Informed Financial Consent form from your obstetrician/midwife or any other specialist involved in your care prior to treatment to ensure you

understand their fee structure.

Contact Allianz Care Australia 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 allianzcare.com.au. Please email the completed form to oshclaims@allianzcare.com.au. Alternatively, the maternity bookings coordinator at the hospital can contact our OSHC Eligibility Line on **1800 500 977**.
- Our eligibility team will confirm you have a valid OSHC policy and that you have served all relevant waiting periods. We will 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.

FREQUENTLY ASKED QUESTIONS OVERSEAS STUDENT HEALTH COVER PREGNANCY COVERAGE

IF I FALL PREGNANT AFTER I ARRIVE IN AUSTRALIA, AM I COVERED?

If you have Allianz Care Australia **OSHC Essentials**, you are covered as long as your student visa is for a period of three months or more and you have a valid OSHC policy.

If you have Allianz Care Australia **OSHC Standard**, for the first 12 months after your arrival in Australia, you are not covered for pregnancy-related conditions.

The Department of Home Affairs will only issue you with a student visa if you have a valid OSHC policy for the proposed duration of your visa.

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 to your premium.

HOW DO I UPGRADE MY POLICY?

Contact our team before your baby is born or within 60 days on [13 67 42](tel:136742) to ensure you have the right level of cover to add your baby to your Allianz Care Australia OSHC policy or to upgrade.

IF I AM ON A DUAL POLICY, IS MY BABY COVERED?

If you are on a dual family policy, this policy covers the valid student visa holder plus either one adult spouse or recognised de-facto partner **or** one or more dependant children. Depending on the mix of dependants, you may need to upgrade to a multi-family policy. For example, if your policy covers your spouse or de facto partner but no dependant children, you will need to upgrade your policy upon the birth of your baby. This option will mean an increase to your premium. However, if your policy covers your dependant children but no spouse or de facto partner, you do not need to upgrade your policy upon the birth of your baby.

WAITING PERIOD FOR PREGNANCY-RELATED CONDITIONS

OSHC Essentials policy	OSHC Standard policy
No waiting period	12-month waiting period

HAVE QUESTIONS? CONTACT OUR TEAM

13 67 42 (within Australia)
+61 7 3305 8841 (overseas)

Or via the 'Contact Us' section on
[allianzcare.com.au](https://www.allianzcare.com.au)

WHEN SHOULD I UPGRADE MY POLICY?

You can purchase your upgraded policy before your baby is born, or you have 60 days to upgrade your policy post-birth. If you do not upgrade within 60 days of your baby's birth, this may affect your coverage, serving waiting periods and premium.

Your upgraded policy start date can be adjusted once your child is born. Any adjustments to the premium can be addressed at this time.

IF I AM ON A MULTI-FAMILY POLICY, IS MY BABY COVERED?

Yes, if you are on a multi-family policy, all you need to do is add your baby's details to the policy. There is no change to your premium or policy type. Details on the types of cover are available at [allianzcare.com.au](https://www.allianzcare.com.au).

WHAT IF I DO NOT 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 team immediately on **13 67 42** to discuss your cover.

WHEN SHOULD I NOTIFY ALLIANZ CARE AUSTRALIA ABOUT MY PREGNANCY?

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

- Complete the Hospital Guarantee Request form available on our website [allianzcare.com.au](https://www.allianzcare.com.au) and email the completed form to oshclaims@allianzcare.com.au OR
- The Maternity Bookings Coordinator at the hospital or your doctor's surgery can contact us via 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 OR RADIOLOGY COSTS UPFRONT?

Some medical providers will request upfront payment. Please ensure you keep your receipts and you can submit these to us 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 about eligibility for medical treatment, please contact our team on **13 67 42**.

TYPES OF PREGNANCY CARE

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

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 have 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, contact our team on [13 67 42](tel:136742) to confirm your gap fee.

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 on the following page shows what you are covered for in each of these situations.



CHOOSING YOUR HOSPITAL

	OSHC patient in a public hospital	Private patient in a public hospital	Private patient in a private hospital
Your choice of doctor	No	Yes	Yes
Your choice of hospital	No Need to go to public hospital in your local area which is based on your residential address.	Yes Need to go to public hospital in your local area which is based on your residential address or where your chose obstetrician has admitting rights.	Yes Need to choose private hospital that has an Australia Health Services Alliance (AHSA) contracted rate with Peoplecare Health Limited.
Covered for hospital expenses (accommodation and theatre fees)	Yes Hospital inpatient shared ward accommodation, 100% of the rate determined by the State or Territory health authority for Medicare ineligible patients.	Yes Hospital inpatient shared ward accommodation, 100% of the rate determined by the State or Territory health authority for Medicare ineligible patients.	Yes Hospital inpatient shared ward accommodation, 100% of the Australian Health Services Alliance (AHSA) contracted rate with Peoplecare Health Limited.
In hospital patient (inpatient) Covered for doctor, radiology and pathology fees	Yes We will cover the benefit amount as listed in the Medicare Benefits Schedule (MBS). The benefit amount may vary depending on the type of medical service.	Yes We will cover the benefit amount as listed in the Medicare Benefits Schedule (MBS). The benefit amount may vary depending on the type of medical service.	Yes We will cover the benefit amount as listed in the Medicare Benefits Schedule (MBS). The benefit amount may vary depending on the type of medical service.
Out of hospital (outpatient) Covered for doctors, pathology and radiology fees	Yes We will cover the benefit amount as listed in the Medicare Benefits Schedule (MBS). The benefit amount may vary depending on the type of medical service.	Yes We will cover the benefit amount as listed in the Medicare Benefits Schedule (MBS). The benefit amount may vary depending on the type of medical service.	Yes We will cover the benefit amount as listed in the Medicare Benefits Schedule (MBS). The benefit amount may vary depending on the type of medical service.
Gap fees likely	Only if charge is above 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 booking 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 to choose your hospital and practitioner/s. Once you have made a decision and have confirmed your obstetrician delivers at that hospital, you will need to make a booking 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 for 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, contact our team within 60 days on **13 67 42** to add your baby to your Allianz Care Australia OSHC policy.





Download the Allianz MyHealth App



For online services and information including:

- Find a doctor
- Claiming
- Health and wellbeing and other information

Visit allianzcare.com.au

Member services and general enquiries

13 OSHC (13 6742)

Claims

1800 651 349

24/7 assistance helpline

Medical, legal and interpreting services in emergency situations

1800 814 781

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