

**YOU'RE
ALL ABOUT
THEM**

**♥ WE'RE
ALL ABOUT
YOU**

**PREGNANCY
GUIDE**

**NURSES ♥
MIDWIVES
HEALTH**

Caring for the carers



NURSES MIDWIVES HEALTH

Caring for the carers

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PRIVACY POLICY

Nurses & Midwives Health respects your privacy and is committed to managing and protecting your personal and health-related information in accordance with relevant legislation in Australia. If you would like to find out more about Nurses & Midwives Health's privacy policy, visit nmhealth.com.au/privacy

THINKING ABOUT HAVING A BABY?

Does your current policy cover pregnancy and birth-related services? Will you have to pay an excess on your current cover? When you start planning a family, you need to think about your health cover.

If you want to be covered for obstetrics (pregnancy and birth-related services) in a private hospital with an obstetrician of your choice, you need to take out private Hospital cover or upgrade your existing cover well before you are pregnant, as waiting periods will apply.

Your private Hospital cover kicks in once you are admitted into hospital. Out-of-hospital medical expenses incurred throughout your pregnancy (scans, obstetrician appointments, blood tests etc) will not be covered by your private health insurance – although they may be covered to some extent by Medicare.

Check if you are eligible for additional Medicare benefits with the Medicare Safety Net (see page 15).





From dusk
til dawn
we've got
you covered

CHOOSE THE RIGHT PRODUCT FOR YOU

TOP HOSPITAL

Top Hospital is an appropriate level of cover for pregnancy and birth-related services. If you are on Top Hospital and your chosen hospital has an agreement with Nurses & Midwives Health, you will be covered in a private hospital for:

- accommodation, labour ward, theatre and intensive care fees
- private (subject to availability) or shared room
- obstetrician / surgeon / specialist fees (for services provided in hospital as an admitted patient)
- Access Gap Cover – if your doctor charges you under this scheme, your out-of-pocket expenses may be reduced or eliminated (see page 11)
- emergency ambulance transport.

Check if your hospital has an agreement with Nurses & Midwives Health at nmhealth.com.au or call us on **1300 344 000**.

If your chosen hospital does not have an agreement, you will be covered up to the minimum default benefit rate as set out by the Federal Government and will incur significant out-of-pocket expenses.

MID HOSPITAL & BASIC HOSPITAL

If you have Mid Hospital or Basic Hospital cover you will be covered in a **public hospital** for:

- accommodation, labour ward, theatre and intensive care fees up to the minimum default benefit rate as set out by the Federal Government
- a shared room
- obstetrician / surgeon / specialist fees (for services provided in hospital as an admitted patient)
- Access Gap Cover – if your doctor charges you under this scheme, your out-of-pocket expenses may be reduced or eliminated (see page 11)
- emergency ambulance transport.

See nmhealth.com.au for coverage details.

STARTERPAK

If you have StarterPak, **you will not be covered** for pregnancy and birth-related services in a private or public hospital.

WILL I HAVE WAITING PERIODS TO SERVE?

There is a nine month waiting period for all pregnancy and birth-related services. This means you need to have held an appropriate level of Hospital cover for at least nine months before you are admitted to hospital to have your baby.

Check your waiting period status by logging into your membership via Online Member Services at nmhealth.com.au/members or by calling **1300 344 000**.

WILL I HAVE TO PAY AN EXCESS?

If you have Top Hospital nil excess, no excess is payable. If you have Top Hospital 300 or 500, Mid Hospital or Basic Hospital, you will have an excess to pay towards your admission (see page 7).

HOSPITAL COVER	EXCESS PAYABLE
PRIVATE HOSPITAL COVER	
TOP HOSPITAL	No excess.
TOP HOSPITAL 300	<p>\$300 per person, per calendar year.</p> <p>The excess is paid once per person, per calendar year to a maximum of twice per membership, for Family and Couple memberships.</p> <p>This excess is only payable when admitted to a private hospital.</p> <p>Please note: excess does not apply to child dependants under the age of 21.</p>
TOP HOSPITAL 500	<p>\$500 per person, per calendar year.</p> <p>The excess is paid once per person, per calendar year to a maximum of twice per membership, for Family and Couple memberships.</p> <p>This excess is only payable when admitted to a private hospital.</p> <p>Please note: excess does not apply to child dependants under the age of 21.</p>
PUBLIC HOSPITAL COVER	
MID HOSPITAL 300	<p>\$300 per person, per calendar year.</p> <p>The excess is paid once per person, per calendar year to a maximum of twice per membership, for Family and Couple memberships.</p> <p>This is payable when you are admitted to a private or public hospital.</p> <p>Excess does not apply to child dependants under the age of 21.</p> <p>Please note: If you choose to deliver in a private hospital, significant out-of-pocket expenses will be incurred. Mid Hospital only provides pregnancy cover in a public hospital.</p>
MID HOSPITAL 500	<p>\$500 per person, per calendar year.</p> <p>The excess is paid once per person, per calendar year to a maximum of twice per membership, for Family and Couple memberships.</p> <p>This is payable when you are admitted to a private or public hospital.</p> <p>Excess does not apply to child dependants under the age of 21.</p> <p>Please note: If you choose to deliver in a private hospital, significant out-of-pocket expenses will be incurred. Mid Hospital only provides pregnancy cover in a public hospital.</p>
BASIC HOSPITAL	<p>\$300 per person, per calendar year.</p> <p>The excess is paid once per person, per calendar year to a maximum of twice per membership, for Family and Couple memberships.</p> <p>This is payable when you are admitted to a private or public hospital and applies to all people on the policy.</p> <p>Please note: If you choose to deliver in a private hospital, significant out-of-pocket expenses will be incurred. Basic Hospital only provides pregnancy cover in a public hospital.</p>
NO COVER	
STARTERPAK	Pregnancy and birth-related services are not covered.



Every family
& everybody

CHOOSE AN OBSTETRICIAN

HOW DO I CHOOSE AN OBSTETRICIAN?

Ask your GP for a list of obstetricians in your area. We recommend that you give them a call and ask them the following questions:

1. Are you taking any more patients?
2. At which hospitals do you deliver?
3. Is that a public or private hospital?
4. Can you provide me with a rough guide as to the fees you charge for managing my pregnancy?
5. Do you participate in the Access Gap Cover scheme?
6. What arrangements do you have in place if you are away at the time of the delivery?

CONTACT US AND ASK:

- If the hospital your obstetrician works at has an agreement with Nurses & Midwives Health. If you elect to have your baby in a hospital that does not hold an agreement with us, you will have significant out-of-pocket expenses.
- Whether your obstetrician has participated in Access Gap Cover (AGC) before (see page 11 for more details on AGC). If they have, they may consider charging you under the AGC scheme which will eliminate or significantly reduce your out-of-pocket expenses.

ASK YOUR OBSTETRICIAN FOR A QUOTE

Obtain a quote (known as Informed Financial Consent) from your obstetrician so you are aware of the charges payable throughout your pregnancy. Remember that any services received while you are not admitted in hospital may only be partially covered by Medicare.

You should discuss with your obstetrician if they will bill you under the AGC scheme for services received when you are admitted to hospital to give birth.



We've got
your back
because you
have ours

ASK ABOUT THE ACCESS GAP COVER SCHEME

Access Gap Cover (AGC) is a billing scheme that aims to reduce or eliminate out-of-pocket expenses for medical services received in hospital as an in-patient.

AGC allows us to pay above the scheduled fee for services provided to you as an in-patient. Doctors can choose to participate in AGC on a patient-by-patient basis so contact your doctor to discuss if they are willing to treat you under this arrangement.

If your doctor or specialist agrees to bill you under this arrangement, you will experience either reduced or nil out-of-pocket expenses for in-patient medical charges. If they charge above the AGC fee you will be able to establish the 'known gap' that you will have to pay before you receive treatment.

If your obstetrician chooses to participate in AGC, they must provide you with a written estimate of fees for the cost of the services throughout your pregnancy.

If you have any questions about AGC, contact us on **1300 344 000**.

QUESTIONS TO ASK YOUR OBSTETRICIAN ABOUT THE ACCESS GAP COVER SCHEME

- Will the fee you charge me be covered under Access Gap Cover (AGC) or will I have to pay a 'known gap'?
- If there is a gap amount, can you provide me with an Informed Financial Consent document so I know exactly how much I will be out-of-pocket?
- Can you provide me with the relevant Medicare Benefits Schedule (MBS) item numbers, so I can discuss these with Nurses & Midwives Health and/or Medicare?
- Will any assisting doctors involved in helping me give birth, including anaesthetist, assistant surgeon, paediatrician and pathologist, treat me under AGC? What out-of-pocket expenses, if any, will there be for their services?
- Can you send the bill directly to Nurses & Midwives Health, so that they can claim the Medicare benefit on my behalf and send the payment back to you?

OTHER INFORMATION

WHAT OUT-OF-POCKET EXPENSES MIGHT I HAVE?

- A hospital excess paid upon admission to hospital (depending on your level of cover).
- Anaesthetist (if you have an epidural or a caesarean section) if they do not participate in the Access Gap Cover (AGC) scheme.

It's important to note that there is still potential for out-of-pocket expenses even if you are billed under the AGC scheme.

- Any assisting specialists (e.g. assisting surgeon if you require a caesarean) who do not participate in the AGC scheme.
- If your baby receives treatment in the hospital and is not an admitted patient (e.g. paediatric check-up).
- Pharmaceuticals that are not covered in the agreement with the hospital or that are listed under the Pharmaceutical Benefits Scheme.

FOR VISITS TO YOUR OBSTETRICIAN AND ANY TESTS OR SCANS BEFORE AND AFTER YOU GO TO HOSPITAL:

- Medicare pays 85% of the MBS fee, you pay the remainder of the account.

FOR TREATMENT IN HOSPITAL WHEN AN ADMITTED PATIENT:

- Medicare pays 75% of the MBS fee, Nurses & Midwives Health pays 25% of the MBS fee.

You pay the remainder of the account (unless the specialist providing the treatment participates in AGC).

AFTER THE BABY ARRIVES

When you are settled in, give us a call on **1300 344 000** or log in to Online Member Services at nmhealth.com.au/members and add your baby to your cover. We will need your baby's name, date of birth and sex for them to be covered with no waiting periods. All waiting periods will be waived for your baby if you add them to your membership **within two months** of their birth.

PLEASE NOTE:

If you are on a Single membership, you will need to upgrade to a Family or Single Parent membership within two months of the birth of your baby, to add them to your cover and avoid any waiting periods.

FREQUENTLY ASKED QUESTIONS

- 1. What happens if I am considering getting pregnant but I'm on a Hospital cover that excludes or restricts pregnancy or birth-related services, and I want to give birth in a private hospital?**

It's important you have Hospital cover that includes pregnancy and birth-related services, such as Top Hospital. A nine month waiting period applies for all services relating to pregnancy and childbirth. This means, you will need to have held Top Hospital well in advance of your pregnancy.

- 2. What happens if my baby is premature and I have not served my waiting periods?**

If your baby comes early and you are still within the nine month waiting period you will not be entitled to benefits under your private hospital cover. For this reason, Nurses & Midwives Health recommends taking out or upgrading to a cover that includes pregnancy well in advance of your pregnancy.

- 3. What if my baby is premature and I am required to give birth in a public hospital, even though I am booked to give birth in a private hospital?**

You may be admitted as a private patient in a public hospital. You will not be guaranteed a private room, but if a private room is available or becomes available during your stay, you may be relocated to the available room. This decision is dependent on the hospital and is not controlled or influenced by Nurses & Midwives Health.

- 4. What happens if I have Hospital cover that includes pregnancy, but I become pregnant while I am on a Single membership?**

If you have a Single membership, you will still be covered during your pregnancy and at the birth of your baby. Once your baby is born, you will need to upgrade to a Family or Single Parent membership. This is particularly important if your baby is admitted to hospital.

For more information, or to upgrade your membership, please contact us on **1300 344 000**. You will need to advise us of the name, date of birth and sex of your baby.

5. When is my baby an admitted patient?

Babies born without complications are generally not admitted to hospital, but treated as an out-patient.

A newborn baby is classified as an in-patient when one or more of the following criteria are met:

- the baby is admitted to an approved neo-natal intensive care facility
- the baby is the second or subsequent born in a multiple birth situation (i.e. twins or triplets)
- the baby is more than 10 days old when still in hospital.

6. What do I need to do if my baby is admitted to hospital?

After giving birth, your main focus will be on your own recovery and the health of your newborn baby. However, if your baby is admitted to hospital, they will need to be added to your cover as soon as possible (within two months) to ensure that a claim can be made for the costs incurred during that time.

7. What happens if my baby is not admitted to hospital but still receives treatment?

Benefits will only be available through Medicare. Medicare will cover 85% of the Medicare Benefits Schedule (MBS) fee. Benefits are not available from Nurses & Midwives Health when your baby is not an admitted patient in the hospital.

8. Does Nurses & Midwives Health pay benefits for physio?

Physio conducted outside of a hospital may be covered if you have Extras cover. Please contact us on **1300 344 000** for further information. Some hospitals offer postnatal classes in conjunction with your hospital admission and accommodation costs. These costs are covered by Nurses & Midwives Health if you have private Hospital cover. Eligibility criteria applies.

9. What is the Medicare Safety Net?

The Medicare Safety Net provides families and individuals with financial assistance for high out-of-pocket expenses for out-of-hospital Medicare Benefits Schedule (MBS) fees. Once you meet a Medicare Safety Net threshold, you may be eligible for additional Medicare benefits for out-of-hospital MBS services for the rest of the calendar year. You can register for the Medicare Safety Net for free at medicareaustralia.gov.au. This allows Medicare to track your out-of-hospital, out-of-pocket expenses and advise you when you are nearing the threshold.

10. Why won't my doctor participate in the Access Gap Cover (AGC) scheme?

It is up to your doctor to decide whether to charge you under the AGC scheme. Even if the doctor has previously participated in this scheme, it does not guarantee that the doctor will participate for your treatment. Doctors are free to choose on a patient-by-patient basis. This decision remains solely with the doctor.

11. What might I have to pay for during my hospital stay?

There are services that you may receive in hospital that are not covered by us. These include:

- telephone and internet usage charges
- TV hire or other items of a non-medical nature
- pharmaceuticals that are not covered in the agreement with the hospital or that are listed under the Pharmaceutical Benefits Scheme (PBS).

12. Can I receive benefits towards home nursing after a hospitalisation?

If you have Top Extras cover you may receive benefits towards home visits by a registered nurse in a private practice.

13. Does Nurses & Midwives Health pay a benefit for one-on-one lactation consultations?

If you have Top Extras cover you may receive benefits towards one-on-one lactation consultations received from a recognised provider.



NEW FAMILY PROGRAM

Nurses & Midwives Health provides more than simply health insurance to our members. We understand that starting a family can be challenging, so we developed the New Family Program to further support your health and wellbeing.

The New Family Program has been developed in collaboration with early childhood experts, Safe Sleep Space & Nourish Perinatal Wellness with the aim of helping our members to navigate the first few months of life with a newborn. The innovative and specialised program provides practical information and support on a range of early parenting matters, including sleep and settling routines. Members participating in the program receive:

- Safe Sleep Space/Nourish video programs – a USB flash drive containing six video segments which offer useful, common sense ante- and post-natal information, plus tips to gently prepare your baby for sleep. Topics include childbirth preparation, breastfeeding, understanding your baby and settling.
- Safe Sleep Space book – this easy to read book presents information on infant development, including what are realistic expectations and gentle approaches to sleep.
- Soothing Sounds for Sleep CD – based on the meditative effect of the multiple sound layers found within nature, this CD creates ‘white noise’ using the movement of ocean waters fused with the rhythm of powerful binaural heartbeats.

Members participating in the program also receive access to telephone consultations with a trained Safe Sleep Space consultant. Based on individual circumstances, the consultations will support members through any early parenting challenges, particularly concerning infant sleep and settling.

This program is brought to members through a partnership with Teachers Healthcare Services, supporting our members’ health and wellbeing through quality, evidence-based health management programs and services. To be eligible for this program you must be a member of Nurses & Midwives Health and have Hospital Cover with all waiting periods served. Additional eligibility criteria may apply. To find out more, contact Nurses & Midwives Health on info@nmhealth.com.au or call **1300 344 000**. Eligible members will then be connected with a dedicated Teachers Healthcare Services care coordinator who will support members on their personal journey. This program is not intended to replace the clinical advice of your doctor or healthcare provider. You should consult your doctor for specialist medical advice if you have any concerns about your pregnancy.



MORE INFORMATION

Contact us on
1300 344 000

DID YOU KNOW?

DENTAL

- A pregnant woman's unique diet during pregnancy can sometimes cause dental diseases. The frequency of meals and gastric acids (due to vomiting when experiencing morning sickness) can cause erosion of the tooth surface. A diet low in sugar and acidity is recommended to reduce the risk of tooth decay.
- A pregnant woman runs an increased risk of gingivitis during pregnancy. This is caused by an excess of bacterial plaque compounded by hormonal changes. Good oral hygiene is highly recommended to prevent this.

So if you have Extras cover, have a dental check-up before you are planning to have a baby or after you conceive.

Don't forget to tell your dentist if you're pregnant, or planning to be, as x-rays may not be safe at this time.

OPTICAL

It is recommended to have a comprehensive eye examination during pregnancy, especially for women with conditions such as diabetes (including gestational diabetes), high blood pressure, or a family history of glaucoma.

During pregnancy, women can experience the following changes to their vision:

- **prescription changes** – this can be temporary or permanent. If your prescription changes during your pregnancy, we recommend that you be re-examined at some point after the delivery of your baby or once you finish breastfeeding
- **dry eyes** – especially if you wear contact lenses. This can be treated with eye drops.

MASSAGE

Remedial or pre-natal massages are great for back pain. There are some essential oils that are beneficial during pregnancy, however, there are some which should be avoided for their contraction stimulating properties. Be sure to check with a qualified therapist before using any essential oils during a massage while you are pregnant.

DEALING WITH MORNING SICKNESS

There are several remedies you can try to help relieve morning sickness – some of which are listed. It is important that you talk to your obstetrician or midwife before trying them. Also ensure that the service providers are experienced in dealing with pregnant women. You may be able to claim a benefit for these services from your Nurses & Midwives Health Extras cover.

Acupuncture

Consult a qualified practitioner such as a member of the Australian Acupuncture and Chinese Medicine Association (AACMA).

Reflexology

Reflexology can help to reduce stress and anxiety, which can cause conditions in pregnancy, labour and in the post-natal period.

If you have further questions, or are unsure of anything you have read in this brochure, please contact us on **1300 344 000**.



MORE INFORMATION

For more information, visit
[nmhealth.com.au](https://www.nmhealth.com.au)

IT DOESN'T HURT TO ASK

Your pregnancy should be an enjoyable experience. Please contact us if you have any questions – we are here to help you. Call **1300 344 000** or email **info@nmhealth.com.au**

Alternatively, you can direct your questions to your obstetrician or the hospital where you are scheduled to have your baby. They will be able to tell you what paperwork to take to Medicare and what to give Nurses & Midwives Health.



Here for
all your
firsts

NURSES MIDWIVES HEALTH



Caring for the carers

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