What if... you wanted to know about

Overseas Visitors Cover

Overseas Starter Working Visa

Our entry level Working Visa cover meeting visa conditions 8501.

Coverage for most inpatient hospital services for a private room (subject to availability) in a HIF-contracted private hospital and shared room in a public hospital. Includes emergency and non-emergency ambulance[3] trips and inpatient pharmacy, and hospital emergency department fees that lead to a hospital admission.

This product fact sheet must be read with our Health Cover Guide.

What's included?

KEY ✓ = included R = restricted ✗ = not included

Rehabilitation	✓
Hospital psychiatric services	R
Palliative care	✓
Bone Marrow and Organ Transplants	✗
Brain and nervous system	✓
Eye (not cataract)	✓
Ear, nose and throat	✓
Tonsils, adenoids & grommets	✓
Bone, joint and muscle	✓
Joint reconstructions	✓
Kidney and bladder	✓
Male reproductive system	✓
Digestive system	✓
Hernia and appendix	✓
Gastrointestinal endoscopy	✓
Gynaecology	✓
Miscarriage and termination of pregnancy	✓
Chemotherapy, radiotherapy and immunotherapy	✓
Pain management	✓
Skin	✓
Breast surgery (medical necessary)	✓
Diabetes (excluding insulin pumps)	✓
Heart and vascular systems	✓
Lung and chest	✓
Blood	✓
Back, neck and spine	✓
Plastic and reconstructive surgery (medically necessary)	✓
Dental surgery[1]	✓
Podiatric surgery[2] (provided by a registered podiatric surgeon)	✓
Implantation of hearing device	✓
Cataracts	✓
Joint replacement	✓
Dialysis for chronic kidney failure	✓
Pregnancy and birth	R
Assisted reproductive services	✗
Weight loss surgery	R
Insulin pumps	✓
Pain management with a device	✓
Sleep studies	✓
Ambulance[3]	✓
Repatriation	✓
AccessGap Cover	✗

Note: Overseas Starter Working Visa cover is only available to international visitors to Australia on a working visa, less than 65 years of age.

1 *Please note: If you undergo surgery by a recognised dentist in a hospital, you may be able to claim benefits for theatre, accommodation and anaesthetist costs. Benefits towards your dentist's fees will only be paid if you also hold a suitable Extras product and have served all relevant waiting periods in addition to your Hospital cover.*

2 *Limited benefits apply to Podiatric Surgery, and you may incur significant out of pocket expenses. Please refer to the Health Cover Guide for more information.*

3 *Not covered for*
- *Transportation from a hospital to your home, nursing home or other hospital.*
- *Transportation for ongoing medical treatment.*
- *Off road or air ambulance (e.g. plane, helicopter or boat).*

Phone **1300 134 060** Visit **hif.com.au/visitors**

Health Insurance Fund of Australia Ltd (HIF) ACN 128 302 161. Information correct as at 1 July 2026.

What does restricted mean?

Restricted benefits means that, if you are admitted for a service that is restricted under your policy, your health fund will pay minimum benefits only (as set by the Federal Government). In a private hospital, this is limited to the minimum benefit for hospital accommodation, with no benefits payable for other hospital charges such as theatre fees, intensive care, or labour ward services. For public hospital accommodation, benefits will be paid at the relevant state and territory health authority gazetted rates for ineligible patients. As a result, restricted services may lead to significant out-of-pocket costs.

What's not covered?

- Occasions when you're not admitted to hospital as an inpatient, instead receiving outpatient treatment for services like GP visits and specialist consultations.
- Any cosmetic service for which Medicare will not pay a benefit (e.g. cosmetic surgery not medically necessary).
- Services outside of Australia or arranged prior to coming to Australia.

Waiting periods

Waiting periods (the time you need to wait before you can claim) are necessary for all services.

- **Emergency Ambulance –** 1 day
- **Non-Emergency Ambulance –** 30 days
- **Psychiatric care, rehabilitation and palliative care regardless of whether or not the condition is pre-existing –** 2 months
- **All treatment related to a pre-existing condition** – 12 months
- **Pregnancy and birth –** 12 months
- **All other treatments –** no waiting period.

Important, please note: Waiting periods are effective from your arrival into Australia. For example, if your policy start date is January 1, however you do not arrive into Australia until March 2 – your 12-month pre-existing waiting period will end on March 1 the following year, with cover available from March 2.

Medical annual limit:

Please note: a medical annual limit of $1,000,000 per person applies to this policy.

Does a hospital excess apply?

For Overseas Starter Working Visa, a standard excess applies:

Single memberships:

- $500 per calendar year.

Couple/family policies:

- $500 per person up to a policy maximum of $1,000 per calendar year.

You'll only need to pay the excess per-person per calendar year if admitted to hospital for same-day or overnight stays.

What is a pre-existing condition

The Pre-existing Condition Rule is a 12-month waiting period for hospital treatment relating to a pre-existing condition - it's a rule that applies whether the ailment, illness or condition was known to the member or not.

A pre-existing condition is defined as, *'Any ailment, illness, or condition where, in the opinion of a medical adviser appointed by the health insurer, the signs or symptoms of that illness, ailment or condition existed at any time in the period of six months ending on the day on which the person became insured under the policy.'*

The pre-existing condition waiting period applies to new members and existing members upgrading their cover. The test applied under the law relies on the presence of signs or symptoms of the illness, ailment or condition, not on a diagnosis (i.e. it's not necessary for the member or their doctor to know what their condition is or for it to be diagnosed).

In forming an opinion about whether or not an illness is a pre-existing condition, an HIF appointed medical practitioner will take into account information provided by the member's treating doctor.

What is repatriation?

Repatriation is the process of returning an eligible international member to their home country because they are terminally ill or suffer from a substantial life-altering illness or injury. In that instance, we will pay a contribution towards the cost of their return travel with another family member and a professional who is qualified to provide medical supervision. In the event of a member passing away while visiting Australia, the deceased person's mortal remains may be repatriated to their home country if legally permissible. On Overseas Starter Working Visa cover, the repatriation benefit is $20,000 per person, per lifetime.

Other situations when you will not be covered by HIF include:

- When you receive treatment for a service that you're still serving waiting periods for.
- Hospital treatment provided by a practitioner not authorised by a hospital to provide that treatment.
- Hospital treatment for which Medicare pays no benefit. This includes in-hospital services such as experimental treatment and or procedures, Medical Devices and Human Tissue Products and respite care.
- Any personal expenses not covered by your HIF policy such as: pay TV, internet access, phone calls, newspapers, or meals ordered for visitors.
- When your policy is suspended, unfinancial or cancelled.
- Where compensation, damages or benefits for medical treatment can or have been claimed from a third party; such as workers compensation, public liability sources, your employer or any other insurance policy.

Hospital Emergency Department Treatment

Under Australian legislation, services provided in the emergency department of a hospital are defined as 'outpatient medical' and not deemed to be a 'hospital treatment'. As outpatient services are excluded under Overseas Starter Working Visa, emergency department fees are not covered if the patient is not admitted in hospital. However, emergency department fees charged by either a private or public hospital will be covered at 100% of the cost if the treatment results in an inpatient admission.

Please note: *doctor or specialist consultations, as well as any X-rays, scans, pathology or other outpatient services provided in the emergency department, are not covered.*

Got a question?

Visit our handy online knowledge base for 24/7 access to a wealth of information Visit **hif.com.au/help** to get started or call us on **1300 134 060**.

Do you have to pay anything if you are admitted (as an inpatient) into a hospital or day facility?

Yes, there is a $500 excess on this product payable per hospital admission, and you are fully covered for all inpatient medical (doctor) bills up to the Medicare Benefit Schedule Fee (MBS). The MBS is the schedule of fees set by the Australian Government for standard medical services.

As an overseas visitor with HIF insurance, you'll be covered up to 100% of the Medicare Benefit Schedule (MBS) fee if you are admitted (as an inpatient) into a hospital or a day facility. If your doctor charges more than the MBS fee, you'll need to pay the difference. We recommend you contact us before going into hospital to find if you will incur an out of pocket expense.

How does the health system work in Australia?

We have a health system that combines public and private health care services. Medicare is the public health care system, which provides limited cover for visitors from countries that have a reciprocal agreement, but only for emergency treatment, and only under certain conditions. In any case, with Medicare you aren't able to choose your doctor and you won't be coverd for:

- Treatment in a private hospital
- Non-emergency visits to the doctor
- Ambulance transportation

Important: HIF reserves the right to decline or refuse an application for overseas visitors health cover at any time.

Make sure you read our Health Cover Guide

It's important that you read our Health Cover Guide. It's full of information about Hospital cover, from benefits through to waiting periods, pre-existing conditions, further exclusions and contracted (or 'agreement') private hospitals. Download a copy now from **hif.com.au/visitors**

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