

CONTRIBUTION TABLE - 40% Rebate

Contributors aged 70 and over

Effective 1/04/2008

F = Full Cost A = After Rebate

		SINGLE			FAMILY		
		Weekly	Monthly	Yearly	Weekly	Monthly	Yearly
Deluxe Hospital & Complete Ancillary	F	43.59	188.89	2,266.68	87.18	377.78	4,533.36
	A	26.14	113.29	1,359.98	52.28	226.63	2,720.01
Private Hospital & Complete Ancillary	F	38.00	164.67	1,976.00	76.00	329.34	3,952.00
	A	22.80	98.77	1,185.60	45.60	197.59	2,371.20
Basic Hospital & Complete Ancillary	F	28.43	123.19	1,478.36	56.86	246.39	2,956.72
	A	17.03	73.89	887.01	34.11	147.79	1,774.02
		Weekly	Monthly	Yearly	Weekly	Monthly	Yearly
Deluxe Hospital & Ancillary <i>lite</i>	F	38.60	167.27	2,007.20	77.20	334.53	4,014.40
	A	23.15	100.32	1,204.30	46.30	200.68	2,408.60
Private Hospital & Ancillary <i>lite</i>	F	32.55	141.05	1,692.60	65.10	282.10	3,385.20
	A	19.50	84.60	1,015.55	39.05	169.25	2,031.10
Basic Hospital & Ancillary <i>lite</i>	F	22.58	97.85	1,174.16	45.16	195.69	2,348.32
	A	13.53	58.70	704.46	27.06	117.39	1,408.97
		Weekly	Monthly	Yearly	Weekly	Monthly	Yearly
Deluxe Hospital Only	F	30.83	133.60	1,603.16	61.67	267.24	3,206.84
	A	18.48	80.15	961.86	36.97	160.34	1,924.09
Private Hospital Only	F	24.77	107.34	1,288.04	49.54	214.67	2,576.08
	A	14.82	64.39	772.79	29.69	128.77	1,545.63
Basic Hospital Only	F	14.79	64.09	769.08	29.58	128.18	1,538.16
	A	8.84	38.44	461.43	17.73	76.88	922.86
		Weekly	Monthly	Yearly	Weekly	Monthly	Yearly
Complete Ancillary Only	F	16.79	72.76	873.08	33.58	145.52	1,746.16
	A	10.04	43.66	523.83	20.13	87.27	1,047.66
Ancillary <i>lite</i> Only	F	7.80	33.80	405.60	15.60	67.60	811.20
	A	4.65	20.25	243.35	9.35	40.55	486.70

ACA Health Pricing Guide

Rates effective from
1 April 2008

Including and excluding the
Federal Government Rebate on
Private Health Insurance

For payment options and more information please refer to
the ACA Health Products and Benefits Guide, or contact
the ACA Health office on 1 300 368 390

Because We Care



CONTRIBUTION TABLE - 30% Rebate

Contributors aged under 65

Effective 1/04/2008

F = Full Cost A = After Rebate

		SINGLE			FAMILY		
		Weekly	Monthly	Yearly	Weekly	Monthly	Yearly
Deluxe Hospital & Complete Ancillary	F	43.59	188.89	2,266.68	87.18	377.78	4,533.36
	A	30.49	132.19	1,586.68	61.03	264.43	3,173.31
Private Hospital & Complete Ancillary	F	38.00	164.67	1,976.00	76.00	329.34	3,952.00
	A	26.60	115.27	1,383.20	53.20	230.54	2,766.40
Basic Hospital & Complete Ancillary	F	28.43	123.19	1,478.36	56.86	246.39	2,956.72
	A	19.88	86.19	1,034.81	39.76	172.44	2,069.67
		Weekly	Monthly	Yearly	Weekly	Monthly	Yearly
Deluxe Hospital & Ancillary <i>lite</i>	F	38.60	167.27	2,007.20	77.20	334.53	4,014.40
	A	27.00	117.07	1,405.00	54.00	234.13	2,810.05
Private Hospital & Ancillary <i>lite</i>	F	32.55	141.05	1,692.60	65.10	282.10	3,385.20
	A	22.75	98.70	1,184.80	45.55	197.45	2,369.60
Basic Hospital & Ancillary <i>lite</i>	F	22.58	97.85	1,174.16	45.16	195.69	2,348.32
	A	15.78	68.45	821.91	31.61	136.94	1,643.82
		Weekly	Monthly	Yearly	Weekly	Monthly	Yearly
Deluxe Hospital Only	F	30.83	133.60	1,603.16	61.67	267.24	3,206.84
	A	21.58	93.50	1,122.21	43.17	187.04	2,244.79
Private Hospital Only	F	24.77	107.34	1,288.04	49.54	214.67	2,576.08
	A	17.32	75.14	901.59	34.64	150.27	1,803.23
Basic Hospital Only	F	14.79	64.09	769.08	29.58	128.18	1,538.16
	A	10.34	44.84	538.33	20.68	89.73	1,076.71
		Weekly	Monthly	Yearly	Weekly	Monthly	Yearly
Complete Ancillary Only	F	16.79	72.76	873.08	33.58	145.52	1,746.16
	A	11.74	50.91	611.13	23.48	101.82	1,222.31
Ancillary <i>lite</i> Only	F	7.80	33.80	405.60	15.60	67.60	811.20
	A	5.45	23.65	283.90	10.90	47.30	567.80

CONTRIBUTION TABLE - 35% Rebate

Contributors aged 65-69

Effective 1/04/2008

F = Full Cost A = After Rebate

		SINGLE			FAMILY		
		Weekly	Monthly	Yearly	Weekly	Monthly	Yearly
Deluxe Hospital & Complete Ancillary	F	43.59	188.89	2,266.68	87.18	377.78	4,533.36
	A	28.29	122.74	1,473.33	56.63	245.53	2,946.66
Private Hospital & Complete Ancillary	F	38.00	164.67	1,976.00	76.00	329.34	3,952.00
	A	24.70	107.02	1,284.40	49.40	214.04	2,568.80
Basic Hospital & Complete Ancillary	F	28.43	123.19	1,478.36	56.86	246.39	2,956.72
	A	18.48	80.04	960.91	36.96	160.14	1,921.87
		Weekly	Monthly	Yearly	Weekly	Monthly	Yearly
Deluxe Hospital & Ancillary <i>lite</i>	F	38.60	167.27	2,007.20	77.20	334.53	4,014.40
	A	25.05	108.72	1,304.65	50.15	217.43	2,609.35
Private Hospital & Ancillary <i>lite</i>	F	32.55	141.05	1,692.60	65.10	282.10	3,385.20
	A	21.15	91.65	1,100.15	42.30	183.35	2,200.35
Basic Hospital & Ancillary <i>lite</i>	F	22.58	97.85	1,174.16	45.16	195.69	2,348.32
	A	14.68	63.60	763.16	29.31	127.19	1,526.37
		Weekly	Monthly	Yearly	Weekly	Monthly	Yearly
Deluxe Hospital Only	F	30.83	133.60	1,603.16	61.67	267.24	3,206.84
	A	20.03	86.80	1,042.01	40.07	173.69	2,084.44
Private Hospital Only	F	24.77	107.34	1,288.04	49.54	214.67	2,576.08
	A	16.07	69.74	837.19	32.19	139.52	1,674.43
Basic Hospital Only	F	14.79	64.09	769.08	29.58	128.18	1,538.16
	A	9.59	41.64	499.88	19.23	83.28	999.76
		Weekly	Monthly	Yearly	Weekly	Monthly	Yearly
Complete Ancillary Only	F	16.79	72.76	873.08	33.58	145.52	1,746.16
	A	10.89	47.26	567.48	21.83	94.57	1,134.96
Ancillary <i>lite</i> Only	F	7.80	33.80	405.60	15.60	67.60	811.20
	A	5.05	21.95	263.60	10.10	43.90	527.25