

## Private Hospital Care Without Private Health Insurance: What You Need to Know

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### What Does “Uninsured” or “Self-Funded” Mean?

Being uninsured or self-funded means you do not have private health insurance with hospital cover and are choosing to pay for private hospital care yourself.

As a self-funded patient:

- You are responsible for all hospital costs not covered by Medicare
- Medicare does not cover private hospital accommodation, theatre fees, or most hospital services
- Medicare may only contribute to a portion of doctors' fees, based on the Medicare Benefits Schedule (MBS)

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### Financial Risks of Complications

All surgery carries some risk of complications. If complications occur and you do not have private health insurance, you may face significant additional costs, including:

- Extended hospital stays
- Additional procedures or surgery
- Intensive care or high-dependency unit admission
- Extra specialist, imaging, pathology, or medication fees

Without insurance, these costs are not capped and are generally payable by you.

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### Transfer to a Public Hospital if Complications Arise

If complications occur that require care beyond what the private hospital can safely provide:

- You may need to be transferred to a public hospital
- Transfer arrangements may involve ambulance or retrieval services
- Depending on circumstances, you may still be responsible for some costs incurred before or during transfer

Public hospitals provide emergency care regardless of insurance status, but care pathways and waiting times may differ.

### Common Scenarios That Could Incur Extra Costs

Situation	Potential Financial Impact
Extended hospital stay due to complications	Increased accommodation, nursing, and facility fees
Unplanned return to theatre	Additional surgeon, anaesthetist, and theatre costs
Intensive care admission	High daily ICU and specialist fees
Specialist fees above Medicare rebates	Out-of-pocket “gap” payments
Additional imaging or tests	Costs not fully covered by Medicare
Medical devices or implants	Full device cost or gap payments

*These examples are not exhaustive and costs vary between hospitals and procedures.*

### Recommendations

Before proceeding with surgery in a private hospital without private health insurance, you are encouraged to:

- Request a written cost estimate from your surgeon and the hospital, including possible additional costs
- Clarify what Medicare does and does not cover
- Ask about payment requirements, including deposits or upfront fees
- Discuss alternative options, such as treatment in the public hospital system
- Consider delaying non-urgent surgery until appropriate insurance cover is in place, if suitable

Understanding the potential financial risks helps support informed decision-making.

## Evidence-Based Resources

The following reputable sources provide evidence-based and consumer-focused information about private hospital care and health costs in Australia:

- Australian Government – [PrivateHealth.gov.au](http://PrivateHealth.gov.au)  
Out-of-pocket costs and how private health insurance works  
<https://www.privatehealth.gov.au>
- Healthdirect Australia  
Information on private hospitals and healthcare costs  
<https://www.healthdirect.gov.au>
- Medical Costs Finder (Australian Government)  
Tool to explore typical costs for medical procedures and specialists  
<https://medicalcostsfinder.health.gov.au>
- Australian Commission on Safety and Quality in Health Care (ACSQHC)  
Informed consent and patient safety principles  
<https://www.safetyandquality.gov.au>
- AHPRA / National Boards – Codes of Conduct  
Expectations around informed consent and professional practice  
<https://www.ahpra.gov.au>

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*This information is provided for general guidance only and does not replace individual medical or financial advice.*