Australian Government
Department of Health, Disability and Ageing

OVERSEAS STUDENT HEALTH COVER (OSHC) – FACT SHEET

What is Overseas Student Health Cover (OSHC)?

OSHC is health insurance that helps you (your partner and family members listed on your student visa) pay for medical and hospital care while studying in Australia. If your partner or family are with you, you can choose from Couple, Single-Parent or Family OSHC policies. If this changes while you are in Australia, you must change the policy to match.

Why do I need OSHC?

You, your partner and family must have OSHC as a condition of your Australian student visa (Subclass 500). You must buy OSHC before you arrive in Australia and keep it for the whole time you study in Australia. Without OSHC, you would have to pay the full cost of any medical treatment you, your partner and family members needed in Australia.

How do I buy OSHC?

There are 5 health insurers in Australia that sell OSHC (OSHC insurers):

- Allianz Care Australia
- Bupa Australia
- CBHS International Health
- Medibank and ahm (part of Medibank)
- nib OSHC

You can buy OSHC through:

- one of the OSHC insurers listed above
- your education provider
- a migration agent or an education agent who represents your OSHC insurer.

You can compare OSHC insurers to see which one best for your needs and choose your own OSHC insurer. Your education provider may also recommend one but you do not have to accept their recommendation. Visit the website of any of the 5 OSHC insurers listed above to get a quote. You can also change your OSHC insurer at any time during your studies. However, you must make sure there is no break in your OSHC coverage.

What does OSHC cover?

OSHC insurers usually offer two types of policies - basic or additional coverage. Check the costs and benefits for each policy offered by your preferred OSHC insurer.

All OSHC insurers must include the following services in their basic policy (called Basic, Standard or Essentials)*:

- Doctor (General Practitioner or GP) – benefit equal to 85% of the Medicare Benefits Scheme (MBS) fee#
- Specialist doctors – benefit equal to 85% of the MBS fee
- Hospital treatment in a public or private hospital
- Surgery

- Blood tests and x-rays – benefit equal to at least 85% of the MBS fee
- Ambulance services for emergency treatment - 100% of the cost for transport
- Some prescription medicines – up to $50 per item up to $500 (single) or $1000 (couple/family) per year.

*Gap fees may apply to any of these services

#In Australia, the Medicare Benefits Schedule (MBS) is a list of medical services.

What is a gap fee?

A gap fee is the amount you pay after your health insurer has paid their share of the cost. All MBS services have a corresponding schedule fee which is used to decide how much OSHC insurers pay towards certain medical expenses. Check what your OSHC insurer pays. For more information visit: https://www.privatehealth.gov.au/dynamic/insurer/gapdoctors.

EXAMPLE

Anh visits the doctor and is charged $80 for a consultation. Anh pays the full amount of $80 to the doctor and then sends a claim their OSHC insurer. Anh's OSHC insurer pays $42.85 toward the cost (this is the current MBS fee) and Anh pays the remaining $37.15 ($80 - $42.85).

What is a waiting period?

A waiting period is the time before you can make a claim on your OSHC policy. Waiting periods reduce the risk of people using OSHC for pre-existing conditions. This reduces the cost of your OSHC policy. If you ask your OSHC insurer, they may agree to reduce your waiting period in some cases. From 1 January 2026 OSHC insurers will begin removing waiting periods for pregnancy related treatment on policies of 2 or more years duration. Talk with your OSHC insurer for details, including when these changes will happen.

Additional Cover

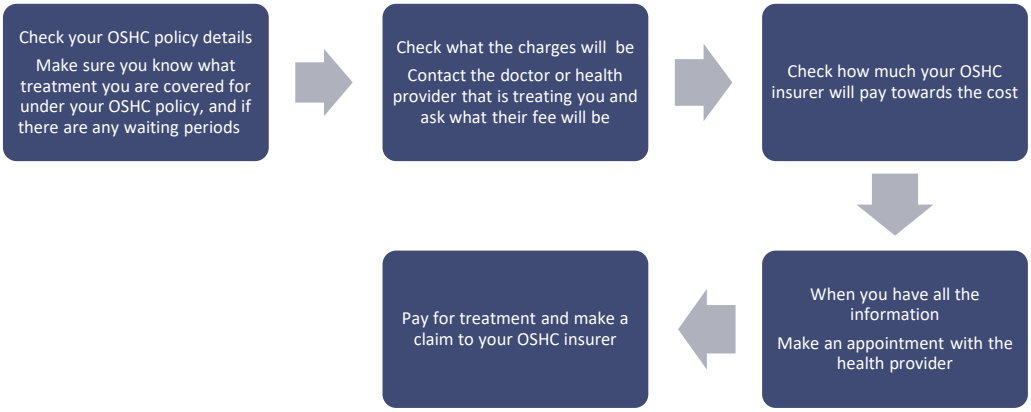
You can choose to buy additional cover. Additional cover is more expensive and includes all the basic services listed above, plus services such as dental, physiotherapy, optical services, private psychology, counselling and repatriation. Each OSHC insurer offers different services under additional coverage, so it is a good idea to check the services included in your OSHC package and compare with other OSHC insurers.

Seeking treatment and making a claim

Emergencies

In an emergency, seek care immediately (dial 000 or attend an emergency department). When you are able to, contact your OSHC insurer to discuss your care and costs. Waiting periods do not apply for 'emergency treatment'.

All other Medical Care



- For treatment other than for emergencies, always check with your OSHC insurer before you agree to treatment. You may not be covered and have to pay the costs. Most OSHC insurers can also help you find care.
- Your OSHC insurer will explain how you can make a claim. There may be more than one way to make a claim.

For example, some OSHC insurers will pay GPs directly so you won't need to pay the full cost of the consultation first. When you visit a GP in their approved network, you only pay any gap fee.

Exemptions from OSHC

Some overseas students from Norway, Belgium, and Sweden are covered by their countries' international insurance and do not need to buy OSHC. However, these students may wish to buy OSHC for health care costs not covered.

What should I do if I have a complaint about my OSHC insurer?

- Contact your OSHC insurer first, to try and fix the issue. If the issue isn't fixed and you want to make a complaint about your OSHC insurer, you can contact the Private Health Insurance Ombudsman.
- If you have a complaint about your higher education provider, contact the National Student Ombudsman at www.nso.gov.au or by calling **1300 395 775**.
- If you prefer to use an interpreter, you can use the free Translating and Interpreter Service on **131 450**.
- All of these services are free of charge.

More Resources

- The Australian Government's Private Health website
- The Department of Health, Disability and Ageing's OSHC resources webpage
- The Commonwealth Ombudsman's website