

## Private Health Information Statement - General treatment policy

### Top Extras

#### Defence Health Limited

<http://www.defencehealth.com.au>

[info@defencehealth.com.au](mailto:info@defencehealth.com.au)

1800 335 425

#### Monthly Premium

**\$139.69<sup>#</sup>**

(before any rebate or insurer discount)

Covers one adult & dependants,  
including non-student dependants  
(2 or more people, only one of  
whom is an adult)

Available in Queensland  
Closed to new members

<sup>#</sup> You may be entitled to an Australian Government rebate on the above premium. Your premium may also include an insurer discount. Check with your insurer for details.

This policy covers children, students up to and including the age of 30 and non-students up to and including the age of 30, as well as persons with a disability who qualify as a child, student or non-student in these age ranges.

Membership of this insurer is restricted to current or former members of the ADF and the Defence community and their families.

### General Treatment Cover

This policy can only be purchased with certain hospital policies.

Visit a network dentist for quality dental care at special member prices. Plus, network optical providers offer no-gap glasses and discounts on other optical purchases up to the optical limit. See <https://www.defencehealth.com.au/Health-Insurance/Find-Providers-and-Hospitals>.

This policy  includes General treatment (Extras) cover for

| Treatment               | Waiting period (months) | Benefit limits (per 12 months unless otherwise stated)                                                                                              | Examples of maximum benefits                                                                   |
|-------------------------|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| General dental          | 2                       | No annual limit<br>(no limit on preventative dental)                                                                                                | Periodic oral examination - \$35.40<br>Scale & clean - \$66.20<br>Fluoride treatment - \$19.00 |
| Major dental            | 12                      | \$850 per person<br>(combined limit for major dental & endodontic)                                                                                  | Surgical tooth extraction - \$132.50<br>Full crown veneered - \$714.20                         |
| Endodontic              | 12                      |                                                                                                                                                     | Filling of one root canal - \$136.70                                                           |
| Orthodontic             | 12                      | \$800 per person                                                                                                                                    | Braces for upper & lower teeth, including removal plus fitting of retainer - \$800.00          |
| Optical                 | 2                       | \$255 per person                                                                                                                                    | Single vision lenses & frames - 100% of charge<br>Multi-focal lenses & frames - 100% of charge |
| Non PBS pharmaceuticals | 2                       | \$500 per person<br>(combined limit for non pbs pharmaceuticals & vaccinations)                                                                     | Per eligible prescription - \$80.00                                                            |
| Physiotherapy           | 2                       | \$550 per person<br>(combined limit for physiotherapy & ante-natal/post-natal classes)                                                              | Initial visit - \$50.00<br>Subsequent visit - \$39.00                                          |
| Chiropractic            | 2                       | \$450 per person<br>(combined limit for chiropractic & osteopathy)                                                                                  | Initial visit - \$45.00<br>Subsequent visit - \$32.00                                          |
| Podiatry                | 2                       | \$300 per person                                                                                                                                    | Initial visit - \$45.00<br>Subsequent visit - \$32.00                                          |
| Psychology              | 2                       | \$400 per person                                                                                                                                    | Initial visit - \$80.00<br>Subsequent visit - \$70.00                                          |
| Acupuncture             | 2                       | \$300 per person<br>(combined limit for acupuncture, remedial massage, exercise physiology, health management / healthy lifestyle & other services) | Initial visit - \$31.00<br>Subsequent visit - \$27.00                                          |

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| Remedial massage                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 2  |                                                                                                                                                             | Initial visit - \$31.00<br>Subsequent visit - \$27.00 |
| Hearing aids                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 12 | \$1,000 per person<br>(combined limit for hearing aids, blood glucose monitors, orthotics (podiatric orthoses) & other services - <b>Sub-limits apply</b> ) | Hearing aid - \$1,000.00                              |
| Blood glucose monitors                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 12 |                                                                                                                                                             | Per monitor - \$400.00                                |
| Audiology                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 2  | \$200 per person                                                                                                                                            | Initial visit - \$60.00<br>Subsequent visit - \$40.00 |
| Ante-natal/Post-natal classes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 2  | Combined limit - see Physiotherapy                                                                                                                          | Initial visit - \$20.00<br>Subsequent visit - \$20.00 |
| Dietetics/dietary advice                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 2  | \$250 per person                                                                                                                                            | Initial visit - \$50.00<br>Subsequent visit - \$30.00 |
| Exercise physiology                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 2  | Combined limit - see Acupuncture                                                                                                                            | Initial visit - \$31.00<br>Subsequent visit - \$27.00 |
| Eye therapy (orthoptics)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 2  | \$500 per person                                                                                                                                            | Initial visit - \$50.00<br>Subsequent visit - \$35.00 |
| Health management / Healthy lifestyle                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 2  | Combined limit - see Acupuncture                                                                                                                            | Health management - \$80.00                           |
| Home nursing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 2  | \$1,000 per person                                                                                                                                          | Initial visit - \$32.00<br>Subsequent visit - \$32.00 |
| Occupational therapy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2  | \$500 per person                                                                                                                                            | Initial visit - \$65.00<br>Subsequent visit - \$40.00 |
| Orthotics (podiatric orthoses)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 12 | Combined limit - see Hearing aids                                                                                                                           | Orthotics supply & fit - \$220.00                     |
| Osteopathy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 2  | Combined limit - see Chiropractic                                                                                                                           | Initial visit - \$45.00<br>Subsequent visit - \$32.00 |
| Speech therapy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 2  | \$500 per person                                                                                                                                            | Initial visit - \$85.00<br>Subsequent visit - \$45.00 |
| Vaccinations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 2  | Combined limit - see Non PBS pharmaceuticals                                                                                                                | Per service - \$80.00                                 |
| Health and Wellbeing annual limit \$300 includes: Acupuncture, Remedial Massage, Exercise Physiology, Myotherapy - initial consultation: \$31.00, subsequent consultation: \$27.00, Health Management and Group Physiotherapy - \$17.00 per session. Also includes cover for Laser Refractive Eye Surgery - annual limit: \$1,000 every two financial years; School Accident - annual limit: \$600. Health appliances limit also includes: Orthopaedic Shoes - sub-limit: \$250; Nebuliser - sub-limit: \$250 every three financial years; Spacer - sub-limit: \$250. |    |                                                                                                                                                             |                                                       |

This policy **✗ does not include** General treatment (Extras) cover for

**✗** Other treatments - check with your insurer

### Other features of this general treatment cover

No lifetime limit on orthodontics. All benefits are per person. Benefits reset on 1 July each year. Details and claim conditions are in product guides available at [defencehealth.com.au](https://defencehealth.com.au)

For further information about this policy see

<https://www.defencehealth.com.au/>

## Ambulance cover

Ambulance cover is provided by the State government for Queensland residents (<https://www.ambulance.qld.gov.au/>). This includes cover whilst interstate.

### Other features of this ambulance cover

Comprehensive cover for ambulance services by state-appointed ambulance providers across Australia. This includes emergency services, non-emergency dispatch, mobile intensive care and air and sea ambulance services. Non-emergency services are those that are classed as clinically necessary; for example, you need to be monitored by a paramedic during transport. Patient transfer services and transport services by Patient Transport vehicles are not ambulance services and are not claimable.

For further information about this policy see

#### Disclaimer

The information contained in this Private Health Information Statement was provided by the insurer and is intended as general information. It may not take into account your particular circumstances. For information please contact the insurer.