

Private Health Information Statement - General treatment policy

Corporate Extras

Bupa HI Pty Ltd
<http://www.bupa.com.au>
 134 135

Monthly Premium
\$231.60[#]
 (before any rebate or insurer discount)

Covers two adults & dependants (3 or more people, only 2 of whom are adults)
Available in Northern Territory

[#] 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 and other dependants up to and including the age of 20, students up to and including the age of 31, as well as persons with a disability who qualify as a child or other dependant or student in these age ranges.

Employees/Members of organisations with arrangements with this health insurer

General Treatment Cover

This policy can only be purchased with certain hospital policies.

We have agreements with a network of dental practitioners, chiros, physios & podiatrists across Australia called Members First providers. By using them, in most cases you'll receive up to 80% back, up to your yearly limits. See <http://www.bupa.com.au/find-a-provider>.

This policy  includes General treatment (Extras) cover for

*Note, for items marked with an asterisk *: Home nursing covers selected services. Step down benefits apply after first 10 total services across Chiropractic and Osteopathy. Podiatry does not include Orthotics. Where applicable, benefits may be payable under Health Aids & Appliances. Dentures payable once every 3 years. Periodic oral examination (012), Scale & Clean (114), Fluoride treatment (121) payable once every 6 months. Pharmacy benefit paid after current PBS patient contribution deducted.*

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	\$1,000 per person	Periodic oral examination - \$34.50 Scale & clean - \$64.50 Fluoride treatment - \$26.50 Surgical tooth extraction - \$85.00
Major dental*	12	\$800 per person (combined limit for major dental & endodontic)	Full crown veneered - \$630.00
Endodontic	12		Filling of one root canal - \$110.00
Orthodontic	12	\$1,350 per person \$2,700 lifetime limit	Braces for upper & lower teeth, including removal plus fitting of retainer - 100% of charge
Optical	2	\$200 per person	Single vision lenses & frames - \$200.00 Multi-focal lenses & frames - \$200.00
Non PBS pharmaceuticals*	2	\$300 per person	Per eligible prescription - \$40.00
Physiotherapy	2	\$600 per person	Initial visit - \$36.00 Subsequent visit - \$27.00
Chiropractic	2	\$600 per person (combined limit for chiropractic, eye therapy (orthoptics), occupational therapy, osteopathy & speech therapy)	Initial visit - \$32.00 Subsequent visit - \$24.00
Podiatry	2	\$300 per person	Initial visit - \$32.00 Subsequent visit - \$26.00
Psychology	2	\$300 per person	Initial visit - \$71.50 Subsequent visit - \$53.00
Acupuncture	2	\$200 per person (combined limit for acupuncture, remedial massage,	Initial visit - \$24.00 Subsequent visit - \$24.00

Remedial massage	2	chinese medicine, exercise physiology & other services - Sub-limits apply)	Initial visit - \$22.00 Subsequent visit - \$24.00
Hearing aids*	12	\$1,000 per person (combined limit for hearing aids, blood glucose monitors, orthotics (podiatric orthoses) & other services - Sub-limits apply)	Hearing aid - 80% of charge
Blood glucose monitors*	12		Per monitor - 80% of charge
Chinese medicine	2	Combined limit - see Acupuncture	Initial visit - \$24.00 Subsequent visit - \$24.00
Dietetics/dietary advice	2	\$400 per person	Initial visit - \$46.00 Subsequent visit - \$27.00
Exercise physiology	2	Combined limit - see Acupuncture	Initial visit - \$24.00 Subsequent visit - \$24.00
Eye therapy (orthoptics)	2	Combined limit - see Chiropractic	Initial visit - \$32.00 Subsequent visit - \$22.00
Home nursing*	2	\$350 per person	Initial visit - \$35.00 Subsequent visit - \$35.00
Occupational therapy	2	Combined limit - see Chiropractic	Initial visit - \$64.50 Subsequent visit - \$44.00
Orthotics (podiatric orthoses)*	12	Combined limit - see Hearing aids	Orthotics supply & fit - 80% of charge
Osteopathy	2	Combined limit - see Chiropractic	Initial visit - \$39.50 Subsequent visit - \$29.50
Speech therapy	2	Combined limit - see Chiropractic	Initial visit - \$69.00 Subsequent visit - \$46.00

Travel 100% up to \$100. Accommodation (per night) \$40 up to \$150. Where applicable, benefits will be paid under your Hospital cover (cannot claim benefits on both hospital and extras for the same trip). Eligibility criteria apply. Mental health includes Psychology, Digital Mental Health, Social Work (psychological therapies), and Counselling (including Indigenous Counselling). Sub-limits apply for Digital Mental Health. Blood glucose monitors, hearing aids, orthotics, and other health aids, are payable under the Health Appliances category up to \$1000 per year. Sub-limits and restrictions apply. Blood glucose monitors are payable once per year (sub-limit \$500). Hearing aids are payable once every 3 years (sub-limit \$850). To find out about other health appliances included and relevant sub-limits and restrictions, please contact us.

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

X Other treatments - check with your insurer

Other features of this general treatment cover

The longer you're with Bupa, the more you get back. For selected services, your yearly limit increases each calendar year, up to a set amount. For more details or to purchase this product contact Bupa.

Ambulance cover

Pensioner Concession Card and Commonwealth Seniors Health Card holders are entitled to free ambulance transport services. St John's ambulance offers a subscription service for ambulance cover in the Northern Territory (<https://www.stjohnnt.org.au/ambulance/ambulance-cover.php>). Cover is included whilst interstate for less than 21 days.

For further information about this policy see

<http://www.bupa.com.au/health-insurance/cover/ambulance>

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.