

## Private Health Information Statement - General treatment policy

### Wellness Extras

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

**Monthly Premium**  
**\$199.70<sup>#</sup>**  
 (before any rebate or insurer discount)

Covers two adults & dependants, including non-student dependants (3 or more people, only 2 of whom are adults)  
**Available in Western Australia**

<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 31 and non-students up to and including the age of 31, as well as persons with a disability who qualify as a child, student or non-student in these age ranges.

### General Treatment Cover

We have agreements with a network of dental practitioners, chiros & physios across Australia called Members First providers. By using them, in most cases you'll receive up to 60% back, up to 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 \*: Pharmacy benefit paid after deduction of the PBS co-payment. Dentures payable once every 3 years. Periodic oral examination 012, Scale & Clean 114, Fluoride treatment 121 payable once every 6 months*

| Treatment                | Waiting period (months) | Benefit limits (per 12 months unless otherwise stated)  | Examples of maximum benefits  |
|--------------------------|-------------------------|---|---|
| General dental*          | 2                       | \$750 per person  | Periodic oral examination - \$31.00<br>Scale & clean - \$55.00<br>Fluoride treatment - \$16.50<br>Surgical tooth extraction - \$84.00 |
| Major dental*            | 12                      | \$750 per person<br>(combined limit for major dental & endodontic)  | Full crown veneered - \$576.00  |
| Endodontic               | 12                      |   | Filling of one root canal - \$131.00  |
| Orthodontic              | 12                      | \$600 per person<br>\$1,200 lifetime limit  | Braces for upper & lower teeth, including removal plus fitting of retainer - 100% of charge   |
| Optical                  | 2                       | \$250 per person  | Single vision lenses & frames - \$177.50<br>Multi-focal lenses & frames - \$240.50  |
| Non PBS pharmaceuticals* | 2                       | \$300 per person  | Per eligible prescription - 100% of charge  |
| Physiotherapy            | 2                       | \$800 per person<br>(combined limit for physiotherapy, chiropractic & osteopathy)   | Initial visit - \$37.00<br>Subsequent visit - \$28.00   |
| Chiropractic             | 2                       |   | Initial visit - \$31.00<br>Subsequent visit - \$23.00   |
| Podiatry                 | 2                       | \$200 per person<br>(combined limit for podiatry & orthotics (podiatric orthoses))  | Initial visit - \$35.10<br>Subsequent visit - \$27.30   |
| Psychology               | 2                       | \$300 per person  | Initial visit - \$138.50<br>Subsequent visit - \$100.50   |
| Acupuncture              | 2                       | \$400 per person up to \$800 per policy<br>(combined limit for acupuncture, remedial massage, chinese medicine & exercise physiology) | Subsequent visit - \$30.00  |
| Remedial massage         | 2                       |   | Initial visit - \$34.50<br>Subsequent visit - \$26.50   |
| Chinese medicine         | 2                       |   | Initial visit - \$28.80<br>Subsequent visit - \$21.60   |

|   |    |                                    |   |
|---|----|------------------------------------|---|
| Dietetics/dietary advice  | 2  | \$300 per person                   | Initial visit - \$50.60<br>Subsequent visit - \$25.30 |
| Exercise physiology   | 2  | Combined limit - see Acupuncture   | Initial visit - \$28.80<br>Subsequent visit - \$21.60 |
| Orthotics (podiatric orthoses)  | 12 | Combined limit - see Podiatry      | Orthotics supply & fit - 60% of charge                |
| Osteopathy  | 2  | Combined limit - see Physiotherapy | Initial visit - \$38.00<br>Subsequent visit - \$28.50 |
| Travel 100% up to \$100 per person, accommodation (per night) \$40 up to \$150 per person. 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. Digital Mental Health 100% back of the fee agreed between Bupa and the provider up to yearly limits at Bupa recognised providers. |    |                                    |   |

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

|                                 |                       |   |
|---------------------------------|-----------------------|---|
| <b>X</b> Blood glucose monitors | <b>X</b> Hearing aids | <b>X</b> Other treatments - check with your insurer |
|---------------------------------|-----------------------|---|

#### Other features of this general treatment cover

You'll get access to higher set benefits at our Optical Partners including a 'no-gap' fixed-priced package experience on glasses, yearly limits and waiting periods apply.

### Ambulance cover

In Western Australia this policy provides:

**Emergency:** Unlimited with a waiting period of 1 day.

**Call-out fees:** will not be paid.

#### Other features of this ambulance cover

You are covered for the costs associated with uncapped emergency ambulance transport services (via air or road), including on-the-spot emergency attendances where the service is provided by a Bupa recognised ambulance service. The following ambulance services are recognised by Bupa: ACT Ambulance Service, Ambulance Service of NSW, Ambulance Victoria, Queensland Ambulance Service, South Australia Ambulance Service, St John Ambulance NT, St John Ambulance WA, and Ambulance Tasmania. If you are eligible to claim from another source, a benefit won't be paid by Bupa.

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.