

Private Health Information Statement - General treatment policy

Classic Extras

see-u by HBF
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Monthly Premium
\$123.82 #
(before any rebate or insurer discount)

Covers two adults & dependants (3 or more people, only 2 of whom are adults)
Available in Western Australia
Closed to new members

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 22, students up to and including the age of 24, as well as persons with a disability who qualify as a child or other dependant or student in these age ranges.

General Treatment Cover

This health insurer does not operate a preferred provider scheme.

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 | \$700 per person | Periodic oral examination - \$33.00 Scale & clean - \$66.00 Fluoride treatment - \$20.00 |
| Major dental | 12 | \$700 per person (combined limit for major dental & endodontic) | Surgical tooth extraction - \$151.00 Full crown veneered - \$747.00 |
| Endodontic | 12 | | Filling of one root canal - \$158.00 |
| Orthodontic | 12 | \$500 per person \$1,500 lifetime limit for Orthodontic | Braces for upper & lower teeth, including removal plus fitting of retainer - 100% of charge |
| Optical | 6 | \$200 per person | Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge |
| Non PBS pharmaceuticals | 2 | \$300 per person | Per eligible prescription - \$35.00 |
| Physiotherapy | 2 | \$550 per person | Initial visit - \$51.00 Subsequent visit - \$39.00 |
| Chiropractic | 2 | \$400 per person (combined limit for chiropractic & osteopathy) | Initial visit - \$48.00 Subsequent visit - \$32.00 |
| Podiatry | 2 | \$225 per person (combined limit for podiatry & orthotics (podiatric orthoses)) | Initial visit - \$32.00 Subsequent visit - \$25.00 |
| Psychology | 2 | \$250 per person (combined limit for psychology, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, speech therapy & other services) | Initial visit - \$80.00 Subsequent visit - \$63.00 |
| Acupuncture | 2 | \$250 per person up to \$150 per service up to \$500 per policy (combined limit for acupuncture, remedial massage, chinese medicine & other services - Sub-limits apply) | Initial visit - \$41.00 Subsequent visit - \$24.00 |
| Remedial massage | 2 | | Initial visit - \$23.00 Subsequent visit - \$23.00 |
| Hearing aids* | 12 | \$600 per person 1 appliance(s) every 3 years (combined limit for hearing aids, blood glucose monitors & other services - Sub-limits apply) | Hearing aid - 60% of charge |
| Blood glucose monitors | 12 | | Per monitor - 60% of charge |
| Chinese medicine | 2 | Combined limit - see Acupuncture | Initial visit - \$23.00 Subsequent visit - \$23.00 |

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|---|----|-----------------------------------|---|
| Dietetics/dietary advice | 2 | Combined limit - see Psychology | Initial visit - \$46.00 Subsequent visit - \$26.00 |
| Exercise physiology | 2 | Combined limit - see Psychology | Initial visit - \$41.00 Subsequent visit - \$41.00 |
| Eye therapy (orthoptics) | 2 | Combined limit - see Psychology | Initial visit - \$79.00 Subsequent visit - \$79.00 |
| Health management / Healthy lifestyle | 6 | \$100 per person | Health management - 50% of charge |
| Occupational therapy | 2 | Combined limit - see Psychology | Initial visit - \$54.00 Subsequent visit - \$34.00 |
| Orthotics (podiatric orthoses) | 12 | Combined limit - see Podiatry | Orthotics supply & fit - 60% of charge |
| Osteopathy | 2 | Combined limit - see Chiropractic | Initial visit - \$48.00 Subsequent visit - \$32.00 |
| Speech therapy | 2 | Combined limit - see Psychology | Initial visit - \$73.00 Subsequent visit - \$34.00 |
| * Benefit replacement periods and sub-limits may apply to some Health Aids and Appliances - see insurer for details | | | |

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

Extras cover with features including Wellness Benefits, in addition to commonly used services like dental, optical and others. Be rewarded with Loyalty Bonus on common services and receive additional general dental benefits including free dental check ups to help reduce the cost of dental care.

For further information about this policy see

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

Ambulance cover

In Western Australia this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

Call-out fees: will be paid for each attendance, including emergency treatment without transport to hospital.

For further information about this policy see

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

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.