

## Private Health Information Statement - General treatment policy

### GMHBA Basic Extras Set Benefits

#### GMHBA Limited

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

[service@gmhba.com.au](mailto:service@gmhba.com.au)

1300 4 GMHBA (46422)

#### Monthly Premium

**\$63.10 #**

(before any rebate or insurer discount)

Covers 2 adults (and no-one else)

Available in South Australia

# 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 is a corporate policy which is only available to employees/members of organisations with arrangements with this health insurer.

### General Treatment Cover












This health insurer does not operate a preferred provider scheme.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk \*: Non PBS Pharmaceuticals must be a private Schedule 4 or Schedule 8 and dispensed via a provider in private practice.

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental	2	\$1,000 per person (combined limit for general dental & other services - <b>Sub-limits apply</b> )	Periodic oral examination - \$31.00 Scale & clean - \$57.75 Fluoride treatment - \$18.15
Optical	6	\$150 per person	Single vision lenses & frames - 80% of charge Multi-focal lenses & frames - 80% of charge
Non PBS pharmaceuticals*	2	\$150 per person up to \$350 per policy (combined limit for non pbs pharmaceuticals & vaccinations - <b>Sub-limits apply</b> )	Per eligible prescription - \$21.00
Physiotherapy	2	\$300 per person up to \$600 per policy (combined limit for physiotherapy & other services - <b>Sub-limits apply</b> )	Initial visit - \$33.00 Subsequent visit - \$25.00
Occupational therapy	2	\$300 per person up to \$600 per policy	Initial visit - \$30.00 Subsequent visit - \$23.00
Vaccinations	2	Combined limit - see Non PBS pharmaceuticals	Per service - \$21.00

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

 Acupuncture	 Hearing aids	 Psychology
 Blood glucose monitors	 Major dental	 Remedial massage
 Chiropractic	 Orthodontic	 Other treatments - check with your insurer
 Endodontic	 Podiatry	

### Other features of this general treatment cover

Occupational Therapy, Myotherapy and Hydrotherapy. An annual sub-limit up to \$300 per person per calendar year applies for preventative dental. Rates discounted for premiums paid by direct debit.

### Ambulance cover

South Australia has a subscription service to cover ambulance within the state, with an additional fee to cover interstate travel (<http://www.saambulance.com.au/ProductsServices/AmbulanceCover.aspx>).

#### 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.