

Private Health Information Statement - General treatment policy

HEALTHCOVER EXTRAS

HCF

<http://www.hcf.com.au>
service@hcf.com.au
 13 13 34

Monthly Premium

\$113.87#

(before any rebate or insurer discount)

Covers only one person
 Available in Northern Territory
 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.

General Treatment Cover

This policy must be purchased with a hospital policy.

Our nationwide network of No-Gap participating providers gives you access to comprehensive extras cover at an affordable price. Find out more See <https://www.hcf.com.au/locations/find-a-participating-provider>.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk *: 100% back on 2 dental check-ups, prescription glasses and free digital retinal imaging with an eye test, an initial physio, chiro, osteo, podiatry consult as well as 100% back or reduced cost on high quality hearing aids through our partnership with Connect Hearing. Available at participating providers and subject to annual limits.

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	\$450 per policy	Periodic oral examination - \$34.00 Scale & clean - \$74.00 Fluoride treatment - \$27.00
Major dental	12	\$750 per policy (combined limit for major dental & other services)	Surgical tooth extraction - \$210.00 Full crown veneered - \$750.00
Endodontic	12	\$550 per policy	Filling of one root canal - \$164.00
Orthodontic	12	\$400 per policy \$2,200 lifetime limit	Braces for upper & lower teeth, including removal plus fitting of retainer - \$400.00
Optical*	2	\$210 per policy	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge
Non PBS pharmaceuticals	2	\$700 per policy (combined limit for non pbs pharmaceuticals & vaccinations)	Per eligible prescription - \$50.00
Physiotherapy*	2	\$750 per policy (combined limit for physiotherapy, dietetics/dietary advice, eye therapy (orthoptics), occupational therapy & speech therapy)	Initial visit - \$55.00 Subsequent visit - \$49.00
Chiropractic*	2	\$350 per policy (combined limit for chiropractic, exercise physiology & osteopathy)	Initial visit - \$40.00 Subsequent visit - \$35.00
Podiatry*	2	\$250 per policy	Initial visit - \$36.00 Subsequent visit - \$32.00
Psychology	2	\$300 per policy	Initial visit - \$44.00 Subsequent visit - \$44.00
Acupuncture	2	\$300 per policy (combined limit for acupuncture, remedial massage & chinese medicine)	Initial visit - \$35.00 Subsequent visit - \$27.00
Remedial massage	2		Initial visit - \$35.00 Subsequent visit - \$27.00
Hearing aids*	12	\$1,000 per policy 1 appliance(s) every 3 years	Hearing aid - \$1,000.00

Blood glucose monitors	12	(combined limit for hearing aids, blood glucose monitors & other services)	Per monitor - \$150.00
Chinese medicine	2	Combined limit - see Acupuncture	Initial visit - \$35.00 Subsequent visit - \$20.00
Dietetics/dietary advice	2	Combined limit - see Physiotherapy	Initial visit - \$45.00 Subsequent visit - \$45.00
Exercise physiology	2	Combined limit - see Chiropractic	Initial visit - \$35.00 Subsequent visit - \$35.00
Eye therapy (orthoptics)	2	Combined limit - see Physiotherapy	Initial visit - \$40.00 Subsequent visit - \$32.00
Health management / Healthy lifestyle	2	\$150 per policy	Health management - \$150.00
Occupational therapy	2	Combined limit - see Physiotherapy	Initial visit - \$62.00 Subsequent visit - \$62.00
Orthotics (podiatric orthoses)	12	\$120 per policy	Orthotics supply & fit - \$120.00
Osteopathy*	2	Combined limit - see Chiropractic	Initial visit - \$50.00 Subsequent visit - \$40.00
Speech therapy	2	Combined limit - see Physiotherapy	Initial visit - \$60.00 Subsequent visit - \$60.00
Vaccinations	2	Combined limit - see Non PBS pharmaceuticals	Per service - \$50.00

Preventative & Diagnostic dental have service limits which are not included in the annual limit. Orthodontic accrues annually up to a lifetime limit of \$2,200 for Orthodontist (\$1,800 for General Dentist). Dentures - \$700 limit renews every 3 years from the date of service. Crowns & bridges receive an increased annual limit of \$1,000 after 5 years membership. Endodontic limit (\$550) includes In chair teeth whitening treatment provided by a dentist, surgical extractions and periodontic services. A service limit of an in-chair treatment -max 8 teeth/session; applies every 36 months. Mental health services (psychology, HCF-approved counselling, accredited mental health social worker and HCF-approved OCBT courses) included. A higher psychology benefit (\$75) may apply after Medicare Mental Health Treatment Plan is used up for the remainder of the calendar year. Hearing aid limit renews every 3 years from the date of service. \$185 annual limit for orthopaedic shoes with a \$150 sub-limit on foot orthotics (foot orthotics limited to 1 pair per person per year).

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

Healthcover Extras is a medium level of extras. Includes Health Management Programs to a limit of \$150 per person/\$300 per policy. Members holding Top Hospital Gold, Healthy First Silver Plus or Healthstart Hospital Silver Plus are entitled to Health Dollars. Health Dollars can be used to reduce hospital excess or top up current extras benefits. A higher psychology benefit (\$75) may apply after Medicare Mental Health Treatment Plan is used up for the remainder of the calendar year.

Ambulance cover

In Northern Territory 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.

Other features of this ambulance cover

If you are a resident of NT and you don't have an ambulance subscription with your state ambulance service and aren't offered cover under another arrangement, you have unlimited emergency ambulance services provided by state Ambulance Service Providers.

For further information about this policy see

<https://www.hcf.com.au/faqs/faqs-cover#what-is-ambulance-cover>

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.