

Private Health Information Statement - General treatment policy

Comprehensive Extras

Peoplecare Health Insurance

<http://www.peoplecare.com.au>
info@peoplecare.com.au
 1800 808 690

Monthly Premium

\$262.40[#]

(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
 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, students up to and including the age of 30 and non-students up to and including the age of 30, as well as persons with a disability who qualify as a child, student or non-student in these age ranges.

General Treatment Cover

By using Peoplecare's 'preferred providers' you may have lower out of pocket costs on Dental and Optical treatments and have access to more 'no gap' treatments. A list of 'preferred providers' is available from Peoplecare. See <https://peoplecare.com.au/Members/Providers/Other-health-providers>.

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 | No annual limit (Sub-limits apply) | Periodic oral examination - \$31.00 Scale & clean - \$60.00 Fluoride treatment - \$26.00 Surgical tooth extraction - \$120.00 |
| Major dental | 12 | \$2,650 per person (Sub-limits apply) | Full crown veneered - \$750.00 |
| Endodontic | 2 | No annual limit | Filling of one root canal - \$110.00 |
| Orthodontic | 12 | \$2,100 per person \$2,100 lifetime limit | Braces for upper & lower teeth, including removal plus fitting of retainer - \$2,100.00 |
| Optical | 6 | \$300 per person | Single vision lenses & frames - \$300.00 Multi-focal lenses & frames - \$300.00 |
| Non PBS pharmaceuticals | 2 | \$500 per person up to \$1,000 per policy (combined limit for non pbs pharmaceuticals & vaccinations - Sub-limits apply) | Per eligible prescription - \$65.00 |
| Physiotherapy | 2 | \$550 per person up to \$1,100 per policy (combined limit for physiotherapy, exercise physiology, eye therapy (orthoptics), occupational therapy & other services - Sub-limits apply) | Initial visit - \$50.00 Subsequent visit - \$30.00 |
| Chiropractic | 2 | \$550 per person up to \$1,100 per policy (combined limit for chiropractic & osteopathy - Sub-limits apply) | Initial visit - \$45.00 Subsequent visit - \$25.00 |
| Podiatry | 2 | \$435 per person up to \$870 per policy (combined limit for podiatry, acupuncture, remedial massage & dietetics/dietary advice - Sub-limits apply) | Initial visit - \$35.00 Subsequent visit - \$25.00 |
| Psychology | 2 | \$500 per person up to \$650 per policy (Sub-limits apply) | Initial visit - \$120.00 Subsequent visit - \$60.00 |
| Acupuncture | 2 | Combined limit - see Podiatry | Initial visit - \$35.00 Subsequent visit - \$25.00 |
| Remedial massage | 2 | Combined limit - see Podiatry | Initial visit - \$35.00 Subsequent visit - \$25.00 |

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|---------------------------------------|----|---|---|
| Hearing aids | 24 | \$1,500 per person 1 appliance(s) every 5 years | Hearing aid - 80% of charge |
| Blood glucose monitors | 2 | \$200 per person 1 appliance(s) every 3 years (combined limit for blood glucose monitors & other services - Sub-limits apply) | Per monitor - \$200.00 |
| Ante-natal/Post-natal classes | 2 | \$150 per person | Initial visit - 80% of charge Subsequent visit - 80% of charge |
| Dietetics/dietary advice | 2 | Combined limit - see Podiatry | Initial visit - \$35.00 Subsequent visit - \$25.00 |
| Exercise physiology | 2 | Combined limit - see Physiotherapy | Initial visit - \$40.00 Subsequent visit - \$30.00 |
| Eye therapy (orthoptics) | 2 | Combined limit - see Physiotherapy | Initial visit - \$40.00 Subsequent visit - \$30.00 |
| Health management / Healthy lifestyle | 6 | \$150 per person up to \$300 per policy | Health management - 100% of charge |
| Home nursing | 2 | \$1,000 per person | Initial visit - \$45.00 Subsequent visit - \$45.00 |
| Occupational therapy | 2 | Combined limit - see Physiotherapy | Initial visit - \$60.00 Subsequent visit - \$35.00 |
| Orthotics (podiatric orthoses) | 2 | \$250 per person up to \$500 per policy 1 appliance(s) every 2 years (Sub-limits apply) | Orthotics supply & fit - 80% of charge |
| Osteopathy | 2 | Combined limit - see Chiropractic | Initial visit - \$45.00 Subsequent visit - \$25.00 |
| Speech therapy | 2 | \$800 per person | Initial visit - 80% of charge Subsequent visit - 80% of charge |
| Vaccinations | 2 | Combined limit - see Non PBS pharmaceuticals | Per service - \$65.00 |

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

X Other treatments - check with your insurer

For further information about this policy see

<https://www.peoplecare.com.au/siteassets/documents/CD/oms/comprehensive-extras.pdf>

Ambulance cover

In Western Australia this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

Non-emergency: Unlimited transport 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

Unlimited Ambulance covers you Australia wide for land, sea and air transport.

For further information about this policy see

<https://www.peoplecare.com.au/health-insurance/hospital-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.