

## Private Health Information Statement - General treatment policy

### High Extras

#### Peoplecare Health Insurance

<http://www.peoplecare.com.au>  
[info@peoplecare.com.au](mailto:info@peoplecare.com.au)  
 1800 808 690

#### Monthly Premium

**\$119.26<sup>#</sup>**

(before any rebate or insurer discount)

Covers only one person  
 Available in Tasmania

<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.

### 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	\$1,000 per policy	Periodic oral examination - 70% of charge Scale & clean - 70% of charge Fluoride treatment - 70% of charge Surgical tooth extraction - 70% of charge
Major dental	12	\$1,000 per policy (combined limit for major dental & endodontic)	Full crown veneered - 70% of charge
Endodontic	12		Filling of one root canal - 70% of charge
Orthodontic	12	\$800 per policy \$2,400 lifetime limit	Braces for upper & lower teeth, including removal plus fitting of retainer - 70% of charge
Optical	6	\$250 per policy	Single vision lenses & frames - \$250.00 Multi-focal lenses & frames - \$250.00
Non PBS pharmaceuticals	2	\$400 per policy (combined limit for non pbs pharmaceuticals & vaccinations - <b>Sub-limits apply</b> )	Per eligible prescription - \$70.00
Physiotherapy	2	\$500 per policy (combined limit for physiotherapy, exercise physiology, eye therapy (orthoptics), occupational therapy & other services)	Initial visit - \$51.00 Subsequent visit - \$51.00
Chiropractic	2	\$500 per policy (combined limit for chiropractic & osteopathy)	Initial visit - \$50.00 Subsequent visit - \$50.00
Podiatry	2	\$400 per policy	Initial visit - \$45.00 Subsequent visit - \$35.00
Psychology	2	\$400 per policy	Initial visit - \$90.00 Subsequent visit - \$70.00
Acupuncture	2	\$350 per policy (combined limit for acupuncture, remedial massage, chinese medicine, dietetics/dietary advice & other services)	Initial visit - \$45.00 Subsequent visit - \$45.00
Remedial massage	2		Initial visit - \$45.00 Subsequent visit - \$45.00
Hearing aids	24	\$1,000 per policy 1 appliance(s) every 5 years	Hearing aid - 70% of charge
Blood glucose monitors	2	\$500 per policy 1 appliance(s) every 3 years (combined limit for blood glucose monitors, ante-	Per monitor - 70% of charge

Ante-natal/Post-natal classes	2	natal/post-natal classes, home nursing, orthotics (podiatric orthoses) & other services - <b>Sub-limits apply</b>	Initial visit - 70% of charge Subsequent visit - 70% of charge
Chinese medicine	2	Combined limit - see Acupuncture	Initial visit - \$45.00 Subsequent visit - \$45.00
Dietetics/dietary advice	2	Combined limit - see Acupuncture	Initial visit - \$45.00 Subsequent visit - \$45.00
Exercise physiology	2	Combined limit - see Physiotherapy	Initial visit - 70% of charge Subsequent visit - 70% of charge
Eye therapy (orthoptics)	2	Combined limit - see Physiotherapy	Initial visit - \$51.00 Subsequent visit - \$41.00
Health management / Healthy lifestyle	6	\$200 per policy	Health management - 70% of charge
Home nursing	2	Combined limit - see Blood glucose monitors	Initial visit - 70% of charge Subsequent visit - 70% of charge
Occupational therapy	2	Combined limit - see Physiotherapy	Initial visit - \$51.00 Subsequent visit - \$41.00
Orthotics (podiatric orthoses)	2	Combined limit - see Blood glucose monitors	Orthotics supply & fit - \$150.00
Osteopathy	2	Combined limit - see Chiropractic	Initial visit - \$50.00 Subsequent visit - \$50.00
Speech therapy	2	\$400 per policy	Initial visit - 70% of charge Subsequent visit - 70% of charge
Vaccinations	2	Combined limit - see Non PBS pharmaceuticals	Per service - \$70.00

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

Orthotics limited to 1 appliance every 2 financial years.

For further information about this policy see

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

#### Ambulance cover

Ambulance cover is provided by the State government for residents of Tasmania. This may include cover whilst interstate, except for South Australia and Queensland where no cover applies. In other states please check with Ambulance Tasmania - [https://www.health.tas.gov.au/ambulance/fees\\_and\\_accounts](https://www.health.tas.gov.au/ambulance/fees_and_accounts).

#### Other features of this ambulance cover

Tasmanian residents don't need to worry about ambulance travel in their state, as it's free. This cover will include Ambulance transport whilst on the mainland for land, sea & air.

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.