

## Private Health Information Statement - General treatment policy

### Blue Ribbon Extras Premium

#### Medibank Private Limited

<http://medibank.com.au>  
ask\_us@medibank.com.au  
132331

#### Monthly Premium

**\$207.90 #**

(before any rebate or insurer discount)

Covers two adults & dependants (3 or more people, only 2 of whom are adults)

Available in South 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 20, students up to and including the age of 30, as well as persons with a disability who qualify as a child or other dependant or student in these age ranges.

### General Treatment Cover

At Members' Choice extras providers you may get more for your cover. This includes 100% back on a dental check up, scale and clean each year and great optical deals. See <https://www.medibank.com.au/health-insurance/find-provider/#/>.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk \*: A 12 mth waiting period applies to surgical tooth extraction. Exercise physiology benefit is \$25 per individual consultations and \$15 per group consultation.

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 - \$25.80 Scale & clean - \$46.60 Fluoride treatment - \$19.80 Surgical tooth extraction - \$62.90
Major dental	12	\$2,000 per person (combined limit for major dental & orthodontic - Sub-limits apply)	Full crown veneered - \$680.00
Endodontic	12	\$400 per person	Filling of one root canal - \$100.00
Orthodontic	12	Combined limit - see Major dental	Braces for upper & lower teeth, including removal plus fitting of retainer - \$400.00
Optical	6	\$250 per person (Sub-limits apply)	Single vision lenses & frames - \$138.50 Multi-focal lenses & frames - \$203.50
Non PBS pharmaceuticals	2	\$600 per person	Per eligible prescription - \$40.70
Physiotherapy	2	\$700 per person	Initial visit - \$42.20 Subsequent visit - \$30.60
Chiropractic	2	\$400 per person (combined limit for chiropractic, acupuncture, remedial massage, chinese medicine, exercise physiology & osteopathy - Sub-limits apply)	Initial visit - \$42.20 Subsequent visit - \$25.60
Podiatry	2	\$400 per person (combined limit for podiatry, dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses) & speech therapy - Sub-limits apply)	Initial visit - \$34.40 Subsequent visit - \$26.00
Psychology	0	\$400 per person	Initial visit - \$131.96 Subsequent visit - \$109.28
Acupuncture	2	Combined limit - see Chiropractic	Initial visit - \$34.40 Subsequent visit - \$21.00

Remedial massage	2	Combined limit - see Chiropractic	Initial visit - \$25.00 Subsequent visit - \$25.00
Hearing aids	36	\$800 per person (combined limit for hearing aids, blood glucose monitors & other services - <b>Sub-limits apply</b> )	Hearing aid - \$800.00
Blood glucose monitors	24		Per monitor - \$180.00
Chinese medicine	2	Combined limit - see Chiropractic	Initial visit - \$25.00 Subsequent visit - \$25.00
Dietetics/dietary advice	2	Combined limit - see Podiatry	Initial visit - \$46.10 Subsequent visit - \$22.80
Exercise physiology*	2	Combined limit - see Chiropractic	Initial visit - \$25.00 Subsequent visit - \$15.00
Eye therapy (orthoptics)	2	Combined limit - see Podiatry	Initial visit - \$24.50 Subsequent visit - \$20.40
Occupational therapy	2	Combined limit - see Podiatry	Initial visit - \$61.20 Subsequent visit - \$26.00
Orthotics (podiatric orthoses)	2	Combined limit - see Podiatry	Orthotics supply & fit - 80% of charge
Osteopathy	2	Combined limit - see Chiropractic	Initial visit - \$42.20 Subsequent visit - \$25.60
Speech therapy	2	Combined limit - see Podiatry	Initial visit - \$76.30 Subsequent visit - \$40.30

Health appliances and external prostheses 2mth waiting period, Breathing appliances 12 mth waiting period, fixed benefits, sublimits and benefit replacement periods apply shared combined annual limit with Hearing aids and Blood glucose monitors. School accidents, for pre-school, primary and secondary school students only, 2 mth waiting period, fixed benefit, annual limit \$800. Counselling (no waiting period) shares an annual limit with Psychology. Please contact Medibank for more information

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

**X** Other treatments - check with your insurer

## Ambulance cover

In South 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.

### Other features of this ambulance cover

Cover for an ambulance when you require immediate professional attention and you need to be transported to hospital or other approved facility and your medical condition is such that you cannot be transported any other way, or where an ambulance is called but transport is not needed. Cover for air ambulance where pre-approval has been obtained from Medibank. In all cases the ambulance provider must be Medibank approved. Please contact Medibank for further details.

### 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.