Private Health Information Statement - General treatment policy

Better Health 90

Medibank Private Limited http://medibank.com.au ask_us@medibank.com.au 132331	*Monthly Premium* *$191.15 #* (before any rebate or insurer discount)	Covers only one person 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.

Available to employees of a company that has an agreement with Medibank

General Treatment Cover

This policy can only be purchased with certain hospital policies.

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 12mth waiting period applies to Surgical tooth extraction.*

Treatment	*Waiting period (months)*	*Benefit limits (per 12 months unless otherwise stated)*	*Examples of maximum benefits*
General dental*	2	$1,900 per policy (combined limit for general dental, major dental, endodontic & orthodontic)	Periodic oral examination - 90% of charge Scale & clean - 90% of charge Fluoride treatment - 90% of charge Surgical tooth extraction - 90% of charge
Major dental	12		Full crown veneered - 90% of charge
Endodontic	12		Filling of one root canal - 90% of charge
Orthodontic	12		Braces for upper & lower teeth, including removal plus fitting of retainer - 90% of charge
Optical	6	$300 per policy	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge
Non PBS pharmaceuticals	2	$1,000 per policy (combined limit for non pbs pharmaceuticals, psychology, acupuncture, ante-natal/post-natal classes, chinese medicine, dietetics/dietary advice, exercise physiology, occupational therapy & speech therapy)	Per eligible prescription - 90% of charge
Physiotherapy	2	$700 per policy	Initial visit - 90% of charge Subsequent visit - 90% of charge
Chiropractic	2	$700 per policy (combined limit for chiropractic, podiatry, orthotics (podiatric orthoses) & osteopathy)	Initial visit - 90% of charge Subsequent visit - 90% of charge
Podiatry	2		Initial visit - 90% of charge Subsequent visit - 90% of charge
Psychology	0	Combined limit - see Non PBS pharmaceuticals	Initial visit - 90% of charge Subsequent visit - 90% of charge
Acupuncture	2	Combined limit - see Non PBS pharmaceuticals	Initial visit - 90% of charge Subsequent visit - 90% of charge
Remedial massage	2	$400 per policy	Initial visit - 90% of charge Subsequent visit - 90% of charge

Hearing aids	36	$600 per policy (combined limit for hearing aids, blood glucose monitors, eye therapy (orthoptics) & other services)	Hearing aid - 90% of charge
Blood glucose monitors	24		Per monitor - 90% of charge
Ante-natal/Post-natal classes	2	Combined limit - see Non PBS pharmaceuticals	Initial visit - 90% of charge Subsequent visit - 90% of charge
Chinese medicine	2	Combined limit - see Non PBS pharmaceuticals	Initial visit - 90% of charge Subsequent visit - 90% of charge
Dietetics/dietary advice	2	Combined limit - see Non PBS pharmaceuticals	Initial visit - 90% of charge Subsequent visit - 90% of charge
Exercise physiology	2	Combined limit - see Non PBS pharmaceuticals	Initial visit - 90% of charge Subsequent visit - 90% of charge
Eye therapy (orthoptics)	2	Combined limit - see Hearing aids	Initial visit - 90% of charge Subsequent visit - 90% of charge
Occupational therapy	2	Combined limit - see Non PBS pharmaceuticals	Initial visit - 90% of charge Subsequent visit - 90% of charge
Orthotics (podiatric orthoses)	2	Combined limit - see Chiropractic	Orthotics supply & fit - 90% of charge
Osteopathy	2	Combined limit - see Chiropractic	Initial visit - 90% of charge Subsequent visit - 90% of charge
Speech therapy	2	Combined limit - see Non PBS pharmaceuticals	Initial visit - 90% of charge Subsequent visit - 90% of charge
Health appliances and external prostheses (2mth waiting period), Breathing appliances (12mth waiting period) and Blood pressure monitors (24mth waiting period), 90% back up to annual limit, $600 annual limit shared with Hearing Aids. Various benefit replacement periods apply. Counselling (no waiting period) shares an annual limit with Psychology. Please contact Medibank for more information.			

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

✗ 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.