

## Private Health Information Statement - General treatment policy

### Base Extras Cover

**Phoenix Health Fund Limited**  
<https://www.phoenixhealthfund.com.au>  
[enquiries@phoenixhealthfund.com.au](mailto:enquiries@phoenixhealthfund.com.au)  
1800 028 817

**Monthly Premium**  
**\$32.79 #**  
(before any rebate or insurer discount)

Covers only one person  
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.

### General Treatment Cover

This health insurer does not operate a preferred provider scheme.

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                       | \$500 per policy                                                   | Periodic oral examination - \$29.20<br>Scale & clean - \$55.20<br>Fluoride treatment - \$19.20 |
| Optical                 | 6                       | \$150 per policy                                                   | Single vision lenses & frames - 80% of charge<br>Multi-focal lenses & frames - \$80.00         |
| Non PBS pharmaceuticals | 2                       | \$200 per policy                                                   | Per eligible prescription - \$30.00                                                            |
| Physiotherapy           | 2                       | \$250 per policy                                                   | Initial visit - \$40.00<br>Subsequent visit - \$29.60                                          |
| Chiropractic            | 2                       | \$250 per policy<br>(combined limit for chiropractic & osteopathy) | Initial visit - \$32.00<br>Subsequent visit - \$24.00                                          |
| Osteopathy*             | 2                       |                                                                    | Initial visit - \$32.00<br>Subsequent visit - \$24.00                                          |

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

|                                                                                                           |                                                                                                  |                                                                                                                                |
|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
|  Acupuncture            |  Major dental |  Remedial massage                           |
|  Blood glucose monitors |  Orthodontic  |  Other treatments - check with your insurer |
|  Endodontic             |  Podiatry     |                                                                                                                                |
|  Hearing aids           |  Psychology   |                                                                                                                                |

### 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, or 1 day for pre-existing conditions.

**Call-out fees:** will be paid for each attendance, including emergency treatment without transport to hospital.

For further information about this policy see

<https://phoenixhealthfund.com.au/covers-by-life-stage/>

### Disclaimer

[PrivateHealth.gov.au](https://www.privatehealth.gov.au)

PolicyID: PWA/BA/WCDK10

Date statement issued: 01 April 2025

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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.