

Private Health Information Statement - General treatment policy

Select Extras

Queensland Country Health Fund  
<https://www.queenslandcountry.health/info@queenslandcountry.health>  
1800 813 415

Monthly Premium  
\$104.05 #  
(before any rebate or insurer discount)

Covers one adult & dependants  
(2 or more people, only one of whom is an adult)  
Available in Tasmania

# 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 31, as well as persons with a disability who qualify as a child or other dependant or student in these age ranges.

General Treatment Cover

By using this health insurer's "preferred providers" you will have lower out-of-pocket costs on selected allied health services and have access to more "no gap" services. See <https://www.queenslandcountry.health/provider-search/premier-provider-network/>.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk \*: There is an overall combined benefit limit for ALL benefits payable under this product (including dental, optical, therapies, pharmaceuticals, and Healthy Living benefits) up to \$2,200 per person and \$4,400 per policy per Membership Year. Sub-limits apply.

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	\$400 per person up to \$800 per policy	Periodic oral examination - \$44.00 Scale & clean - \$71.00 Fluoride treatment - \$19.00
Major dental*	12	\$600 per person up to \$1,200 per policy (combined limit for major dental & endodontic)	Surgical tooth extraction - \$126.00 Full crown veneered - \$560.00
Endodontic*	12		Filling of one root canal - \$119.00
Optical*	2	\$245 per person up to \$490 per policy	Single vision lenses & frames - \$245.00 Multi-focal lenses & frames - \$245.00
Non PBS pharmaceuticals*	2	\$400 per person up to \$800 per policy (combined limit for non pbs pharmaceuticals & vaccinations)	Per eligible prescription - \$55.00
Physiotherapy*	2	\$500 per person up to \$1,000 per policy (Sub-limits apply)	Initial visit - \$44.00 Subsequent visit - \$37.00
Chiropractic*	2	\$500 per person up to \$1,000 per policy (combined limit for chiropractic & remedial massage)	Initial visit - \$44.00 Subsequent visit - \$28.00
Podiatry*	2	\$400 per person up to \$800 per policy (combined limit for podiatry & orthotics (podiatric orthoses) - Sub-limits apply)	Initial visit - \$32.00 Subsequent visit - \$32.00
Remedial massage*	2	Combined limit - see Chiropractic	Initial visit - \$33.00 Subsequent visit - \$33.00
Health management / Healthy lifestyle*	2	\$125 per person up to \$250 per policy	Health management - \$125.00
Orthotics (podiatric orthoses)	2	Combined limit - see Podiatry	Orthotics supply & fit - 100% of charge
Vaccinations*	2	Combined limit - see Non PBS pharmaceuticals	Per service - \$55.00

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

✗ Acupuncture	✗ Hearing aids	✗ Psychology
✗ Blood glucose monitors	✗ Orthodontic	✗ Other treatments - check with your insurer

### Other features of this general treatment cover

Health management (Healthy Living benefit) provides benefits towards the costs of metabolic dieticians or nutritionists consultations to assist with weight management, diabetes education consultations, quit smoking programs, skin checks for skin cancers (except where there is a Medicare benefit), bowel screening and bone density tests, a second yearly prostate specific antigen test not covered by Medicare, supermarket tours conducted by a dietitian or other allied health professional qualified to provide nutrition advice, and gym memberships/personal training sessions provided under an approved health management or chronic disease management program. Please contact the insurer for full details.

For further information about this policy see

<https://www.queenslandcountry.health/cover-options/select-extras/>

### 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).

For further information about this policy see

<https://www.queenslandcountry.health/cover-options/ambulance-cover/>

### 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.