

Private Health Information Statement - General treatment policy

Base Extras

Health Partners

<http://www.healthpartners.com.au>
ask@healthpartners.com.au
 1300 113 113

Monthly Premium

\$59.28 #
 (before any rebate or insurer discount)

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

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

Health Partners operates a preferred provider scheme available only in South Australia. See <https://www.healthpartners.com.au/members/providers/>.







This policy  includes General treatment (Extras) cover for

*Note, for items marked with an asterisk *: Health Partners and participating providers are in SA only. If you attend a Health Partners Dental or participating dental provider, higher benefits and 100% back on a dental check-up, including x-rays, will apply. General dental benefits are based on the Health Partners schedule of fees. If your provider charges a higher fee, a larger gap payment will apply. At Health Partners Optical get 100% back up to your optical limit and 40% thereafter once you've reached your limit. At Health Partners participating physiotherapists higher benefits apply. T&Cs apply.*

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	\$350 per person	Periodic oral examination - 35% of charge Scale & clean - 35% of charge Fluoride treatment - 35% of charge Surgical tooth extraction - 35% of charge
Optical*	2	\$100 per person	Single vision lenses & frames - 40% of charge Multi-focal lenses & frames - 40% of charge
Non PBS pharmaceuticals*	2	\$100 per person (combined limit for non pbs pharmaceuticals & vaccinations)	Per eligible prescription - n/a
Physiotherapy*	2	\$150 per person (combined limit for physiotherapy, chiropractic, exercise physiology & osteopathy - Sub-limits apply)	Initial visit - \$30.00 Subsequent visit - \$25.00
Chiropractic	2		Initial visit - \$30.00 Subsequent visit - \$25.00
Exercise physiology	2		Initial visit - \$30.00 Subsequent visit - \$25.00
Osteopathy	2		Initial visit - \$30.00 Subsequent visit - \$25.00
Vaccinations*	2	Combined limit - see Non PBS pharmaceuticals	Per service - n/a

In South Australia, get more from your cover by using Health Partners Dental and Optical practices - like 100% back on your dental check-up (including x-rays), and 40% benefit on other general dental services. At Health Partners Optical, you get 100% back on your optical limit, and an unlimited 40% benefit after you've reached your limit. At our participating physios get 100% back on a physio visit and 40% thereafter, up to your limit. Save 20% every day on full-price, non-prescription products at over 50 pharmacies across South Australia, which include participating Priceline and TerryWhite Chemmart stores. T&Cs apply.

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	

Other features of this general treatment cover

Combined limit for physio, chiro, exercise physiology & osteopathy provides flexibility for you to use your limit on what's important to you. T&Cs apply.

For further information about this policy see

<https://www.healthpartners.com.au/health-insurance/extras-cover>

Ambulance cover

In Western Australia this policy provides:

Emergency: with a waiting period of 2 months, limited to \$20,000 per person per year and 1 services per year.

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

Other features of this ambulance cover

Ambulance is limited to 1 per person, per year up to \$20,000. You will be covered for the cost of service required on medical grounds (excluding clinic-car type transport) that is deemed or classified as 'emergency' only (emergency classification determined by approved ambulance provider). Additionally, you will be covered for treatment where no transport is required. This will count towards your annual limit.

For further information about this policy see

<https://www.healthpartners.com.au/health-insurance/understanding-private-health-insurance/>

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.