

Private Health Insurance SIS Explanatory Notes – General Health Policy

*This line provides a reminder that the SIS is a summary document only.
This line will include the fund's phone number and website link (if available).*

HEALTH FUND:	Registered Health Fund name <i>Restricted funds are noted here</i>	TYPE OF COVER:	Who is covered, eg couple
PRODUCT NAME:	Fund's name for this policy	MONTHLY PREMIUM:	Indicative monthly fee <i>Policies that can only be bought as part of a package with specific hospital policies to make a custom 'combined policy' are noted here</i>
AVAILABLE FOR:	<i>Can be purchased by people living in these states Organisation name shown here for restricted fund or corporate policy Funds closed to new members are noted here</i>	AVAILABLE FROM:	<i>Date you can purchase policy (new policies only)</i>

The price shown is monthly premium with the 30% Rebate deducted. It does not include any Lifetime Health Cover loading or factor in any discounts that may be available or higher level of Rebate that may apply.

PREFERRED SERVICE PROVIDER ARRANGEMENTS: *Describes the fund's arrangements with specific hospitals, clinics or allied health service providers (eg physiotherapy, dental services) to provide services to members at a reduced rates.*

SERVICES	COVER	WAITING PERIOD (MAX MONTHS)	BENEFIT LIMITS (PER 12 MONTHS)	EXAMPLES OF MAXIMUM BENEFITS
DENTAL				<p>Services – The SIS shows a standard list of services, for comparison purposes only. Funds may offer benefits on other services not listed, such as preventative dental, periodontics, oral surgery, osteopathy, speech therapy, speech pathology, eye therapy, audiology, dietetics, and other natural therapies. If you are interested in these services, contact the fund for details.</p> <p>Cover – ✓ in the Cover column means the policy pays benefits for at least one of the examples listed in the Maximum Benefits column. ✗ means these specific examples are not covered. ★ means check the note below for these services. The policy may pay benefits on many other items – check with the fund for details.</p> <p>Waiting Period – How many months you will need to wait before you can claim against this type of service. For ambulance cover, the waiting period is shown in days.</p> <p>Benefit Limits – The maximum amount you can claim within a 12 month period under this policy. For a couple or family policy, this column will also show any per person limits, in addition to policy limits. If there is a combined limit across several services, all the related services are shown in full once. The other related services will refer back to these details.</p> <p>Examples of Maximum Benefits – The maximum amount you can claim for the listed service. These standard examples have been selected as the most commonly claimed items, to give a comparison across different policies. This is not a comprehensive list – contact the fund for a full list of benefits. In some cases, maximum benefits may only be paid to a 'recognised provider' – check with your fund for details.</p>
• General dental				
• Major dental				
• Endodontic services				
• Orthodontic				
OPTICAL (eg prescribed spectacles/ contact lenses)				
PHYSIOTHERAPY				
CHIROPRACTIC				
PODIATRY				
PSYCHOLOGY				
NON PBS PHARMACEUTICALS				
ACUPUNCTURE				
NATUROPATHY				
REMEDIAL MASSAGE				
HEARING AIDS				
BLOOD GLUCOSE MONITORS				
AMBULANCE				N/A means ambulance services are covered by this state government.

★ Fund's explanation of the special conditions that apply to the services in the table above that are marked with an asterisk.

HEALTH CARE PROGRAMS AND OTHER FEATURES: *Fund's own description of their programs and features, in addition to the other information provided on this SIS.*