

Private Health Information Statement - General treatment policy

Corporate Mid Extras

Bupa HI Pty Ltd
<http://www.bupa.com.au>
 134 135

Monthly Premium
\$106.00 #
 (before any rebate or insurer discount)

Covers only one person
 Available in NSW & ACT
 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.

Employees/Members of organisations with arrangements with this health insurer

General Treatment Cover

We have agreements with a network of dental practitioners, chiro, physios & podiatrists across Australia called Members First providers. By using them, in most cases you'll receive up to 70% back, up to your yearly limits. See <http://www.bupa.com.au/find-a-provider>.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk *: Get 100% back on optical and 100% back on your first remedial massage and physio visit every year, up to yearly limits. Orthotics are payable once per year under podiatry, up to annual limit. Periodic oral examination (O12), Scale & Clean (114), Fluoride treatment (121) payable once every 6 months. Dentures payable once every 3 years. Pharmacy benefit paid after current PBS patient contribution deducted.

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	\$800 per policy	Periodic oral examination - \$27.50 Scale & clean - \$55.50 Fluoride treatment - \$22.50 Surgical tooth extraction - \$88.00
Major dental*	12	\$800 per policy (combined limit for major dental & endodontic)	Full crown veneered - \$800.00
Endodontic	12		Filling of one root canal - \$159.50
Optical*	2	\$250 per policy	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge
Non PBS pharmaceuticals*	2	\$300 per policy	Per eligible prescription - 70% of charge
Physiotherapy*	2	\$500 per policy (combined limit for physiotherapy & exercise physiology)	Initial visit - \$41.50 Subsequent visit - \$35.00
Chiropractic	2	\$400 per policy (combined limit for chiropractic & osteopathy)	Initial visit - \$37.25 Subsequent visit - \$25.60
Podiatry	2	\$400 per policy (combined limit for podiatry & orthotics (podiatric orthoses) - Sub-limits apply)	Initial visit - \$36.30 Subsequent visit - \$29.70
Psychology	2	\$400 per policy (combined limit for psychology & other services - Sub-limits apply)	Initial visit - \$99.00 Subsequent visit - \$88.50
Acupuncture	2	\$200 per policy (combined limit for acupuncture & chinese medicine)	Subsequent visit - \$24.20
Remedial massage*	2	\$200 per policy	Initial visit - \$43.50 Subsequent visit - \$33.00
Hearing aids	12	\$600 per policy (combined limit for hearing aids, blood glucose monitors & other services - Sub-limits apply)	Hearing aid - 70% of charge
Blood glucose monitors	12		Per monitor - 70% of charge

Chinese medicine	2	Combined limit - see Acupuncture	Initial visit - \$26.40 Subsequent visit - \$19.80
Dietetics/dietary advice	2	\$250 per policy	Initial visit - \$50.60 Subsequent visit - \$29.90
Exercise physiology	2	Combined limit - see Physiotherapy	Initial visit - \$26.40 Subsequent visit - \$19.80
Health management / Healthy lifestyle	6	\$100 per policy	Health management - 100% of charge
Orthotics (podiatric orthoses)*	12	Combined limit - see Podiatry	Orthotics supply & fit - 70% of charge
Osteopathy	2	Combined limit - see Chiropractic	Initial visit - \$46.00 Subsequent visit - \$31.50

Mental health includes Psychology, Digital Mental Health, Social Work (psychological therapies), and Counselling (including Indigenous Counselling). Sub-limits apply for Digital Mental Health. Blood glucose monitors, hearing aids, and other health aids, are payable under the Health Appliances category, which share a yearly limit with other services specified in list. Sub-limits and restrictions apply. Blood glucose monitors are payable once per year (sub-limit \$400). Hearing aids are payable once every 3 years. To find out about other health appliances included and relevant sub-limits and restrictions, please contact us.

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

X Orthodontic	X Other treatments - check with your insurer
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Ambulance cover

In NSW & ACT 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

You are covered for the uncapped costs associated with emergency ambulance transport services (via air or road) including on-the-spot emergency attendances where the service is provided by a Bupa recognised ambulance service. The following ambulance services are recognised by Bupa: ACT Ambulance Service, Ambulance Service of NSW, Ambulance Victoria, Queensland Ambulance Service, South Australia Ambulance Service, St John Ambulance NT, St John Ambulance WA, and Ambulance Tasmania. If you are eligible to claim from another source, a benefit won't be paid by Bupa.

For further information about this policy see

<http://www.bupa.com.au/health-insurance/cover/ambulance>

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.