

## Private Health Information Statement - General treatment policy

### Frank Classic Extras

#### Frank Health Insurance

<https://www.frankhealthinsurance.com.au>

[frank@frankhealthinsurance.com.au](mailto:frank@frankhealthinsurance.com.au)

1300 209 428

Underwritten by GMHBA Limited

#### Monthly Premium

**\$122.30 #**

(before any rebate or insurer discount)

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

Available in Victoria

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

### 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                       | \$600 per person up to \$1,200 per policy  | Periodic oral examination - \$32.60<br>Scale & clean - \$66.20<br>Fluoride treatment - \$19.70 |
| Major dental             | 12                      | \$800 per person up to \$1,600 per policy<br>(combined limit for major dental & endodontic)                                      | Surgical tooth extraction - \$116.40<br>Full crown veneered - \$520.00                         |
| Endodontic               | 12                      |  | Filling of one root canal - \$106.00   |
| Optical                  | 6                       | \$200 per person up to \$400 per policy  | Single vision lenses & frames - 100% of charge<br>Multi-focal lenses & frames - 100% of charge |
| Non PBS pharmaceuticals  | 2                       | \$350 per person up to \$700 per policy<br>(combined limit for non pbs pharmaceuticals, vaccinations & other services)           | Per eligible prescription - \$45.00  |
| Physiotherapy            | 2                       | \$350 per person up to \$700 per policy<br>(combined limit for physiotherapy, exercise physiology & other services)              | Initial visit - \$42.00<br>Subsequent visit - \$42.00  |
| Chiropractic             | 2                       | \$350 per person up to \$700 per policy<br>(combined limit for chiropractic, osteopathy & other services)                        | Initial visit - \$36.00<br>Subsequent visit - \$36.00  |
| Psychology               | 2                       | \$350 per person up to \$700 per policy  | Initial visit - \$50.00<br>Subsequent visit - \$50.00  |
| Acupuncture              | 2                       | \$350 per person up to \$700 per policy<br>(combined limit for acupuncture, remedial massage, chinese medicine & other services) | Initial visit - \$36.00<br>Subsequent visit - \$36.00  |
| Remedial massage         | 2                       |  | Initial visit - \$30.00<br>Subsequent visit - \$30.00  |
| Chinese medicine         | 2                       |  | Initial visit - \$36.00<br>Subsequent visit - \$36.00  |
| Dietetics/dietary advice | 2                       | \$350 per person up to \$700 per policy  | Initial visit - \$45.00<br>Subsequent visit - \$45.00  |
| Exercise physiology      | 2                       | Combined limit - see Physiotherapy   | Initial visit - \$30.00<br>Subsequent visit - \$30.00  |
| Osteopathy               | 2                       | Combined limit - see Chiropractic  | Initial visit - \$36.00<br>Subsequent visit - \$36.00  |

|              |   |  |                       |
|--------------|---|--|-----------------------|
| Vaccinations | 2 | Combined limit - see Non PBS pharmaceuticals | Per service - \$45.00 |
|--------------|---|--|-----------------------|

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

|                                 |                      |   |
|---------------------------------|----------------------|---|
| <b>X</b> Blood glucose monitors | <b>X</b> Orthodontic | <b>X</b> Other treatments - check with your insurer |
| <b>X</b> Hearing aids           | <b>X</b> Podiatry    |   |

Other features of this general treatment cover

Excludes chiropractic x-rays. Remember, Frank is all online. For more information contact Frank on 1300 437 265 or visit [www.frankhealthinsurance.com.au](http://www.frankhealthinsurance.com.au)

## Ambulance cover

In Victoria this policy provides:

**Emergency:** Unlimited with no waiting period.

**Call-out fees:** will not be paid.

## 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.