

Private Health Information Statement - General treatment policy

Dental Saver & Gap Saver \$100

HBF Health Limited
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133 423

Monthly Premium
\$43.22 #
(before any rebate or insurer discount)

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

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	\$400 per person	Periodic oral examination - \$37.50 Scale & clean - \$73.50 Fluoride treatment - \$18.75 Surgical tooth extraction - \$81.00

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

 Acupuncture	 Major dental	 Podiatry
 Blood glucose monitors	 Non PBS pharmaceuticals	 Psychology
 Chiropractic	 Optical	 Remedial massage
 Endodontic	 Orthodontic	 Other treatments - check with your insurer
 Hearing aids	 Physiotherapy	

Other features of this general treatment cover

Top up your benefits with GapSaver and you will have less out of pocket expense when it comes to making a claim.

Ambulance cover

In South Australia this policy provides:

Emergency: Unlimited with a waiting period of 7 days.

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

Other features of this ambulance cover

Emergency ambulance provides full cover for emergency treatment and urgent ambulance transport (by road) within Australia by a State Government ambulance provider or an HBF approved ambulance provider. Services not covered include air ambulance services, transport between a public hospital to your home and transport not provided in an ambulance.

For further information about this policy see

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.