

Private Health Information Statement - General treatment policy

Flex 50 & Gap Saver \$800

HBF Health Limited

<http://hbf.com.au>

memberservices@hbf.com.au

133 423

Monthly Premium

\$152.46[#]

(before any rebate or insurer discount)

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

Available in Tasmania
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

HBF members have hundreds of participating optical stores nationally to choose from with access to a range of fully covered glasses. See <http://www.hbf.com.au/health-insurance/find-a-provider>.

This policy  includes General treatment (Extras) cover for

*Note, for items marked with an asterisk *: Before a benefit is payable on an eligible Pharmacy item, a co-payment amount reasonably determined by HBF is deducted from the cost of each script.*

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental	2	\$800 per person (combined limit for general dental, major dental, endodontic, non pbs pharmaceuticals, physiotherapy, chiropractic, psychology, acupuncture, remedial massage, chinese medicine, dietetics/dietary advice, exercise physiology, health management / healthy lifestyle, osteopathy, vaccinations & other services - Sub-limits apply)	Periodic oral examination - 50% of charge Scale & clean - 50% of charge Fluoride treatment - 50% of charge Surgical tooth extraction - 50% of charge
Major dental	12		Full crown veneered - 50% of charge
Endodontic	12		Filling of one root canal - 50% of charge
Optical	2	\$200 per person	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge
Non PBS pharmaceuticals*	2	Combined limit - see General dental	Per eligible prescription - 100% of charge
Physiotherapy	2	Combined limit - see General dental	Initial visit - 50% of charge Subsequent visit - 50% of charge
Chiropractic	2	Combined limit - see General dental	Initial visit - 50% of charge Subsequent visit - 50% of charge
Psychology	2	Combined limit - see General dental	Initial visit - 50% of charge Subsequent visit - 50% of charge
Acupuncture	2	Combined limit - see General dental	Initial visit - 50% of charge Subsequent visit - 50% of charge
Remedial massage	2	Combined limit - see General dental	Initial visit - 50% of charge Subsequent visit - 50% of charge
Chinese medicine	2	Combined limit - see General dental	Initial visit - 50% of charge Subsequent visit - 50% of charge
Dietetics/dietary advice	2	Combined limit - see General dental	Initial visit - 50% of charge Subsequent visit - 50% of charge
Exercise physiology	2	Combined limit - see General dental	Initial visit - 50% of charge Subsequent visit - 50% of charge
Health management / Healthy lifestyle	2	Combined limit - see General dental	Health management - 100% of charge

Osteopathy	2	Combined limit - see General dental	Initial visit - 50% of charge Subsequent visit - 50% of charge
Vaccinations*	2	Combined limit - see General dental	Per service - 100% of charge
Flex 50 also includes cover for: Hypnotherapy (waiting period 2 months, 50% initial or subsequent visit up to combined limit - see General Dental); Myotherapy (waiting period 2 months, 50% initial or subsequent visit up to combined limit - see General Dental). **Note: Natural Therapies (Acupuncture, Hypnotherapy, Myotherapy, Remedial Massage and Traditional Chinese Medicine) has a \$200 sub-limit.			

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

X Blood glucose monitors	X Orthodontic	X Other treatments - check with your insurer
X Hearing aids	X Podiatry	

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

Ambulance cover is provided by the State government for residents of Tasmania. This may include cover whilst interstate, except for South Australia and Queensland where no cover applies. In other states please check with Ambulance Tasmania - https://www.health.tas.gov.au/ambulance/fees_and_accounts.

For further information about this policy see

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

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.