Private Health Information Statement - General treatment policy

HEALTHCOVER EXTRAS

HCF

http://www.hcf.com.au service@hcf.com.au 13 13 34

Monthly Premium \$207.47#

(before any rebate or insurer discount)

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

This policy covers children and other dependants up to and including the age of 21, students up to and including the age of 30, 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 policy must be purchased with a hospital policy.

Our nationwide network of No-Gap participating providers gives you access to comprehensive extras cover at an affordable price. Find out more See https://www.hcf.com.au/locations/find-a-participating-provider.

This policy **✓ includes** General treatment (Extras) cover for

Note, for items marked with an asterisk *: 100% back on 2 dental check-ups, prescription glasses and free digital retinal imaging with an eye test, an initial physio, chiro, osteo, podiatry consult. Available at participating providers and subject to annual limits. A higher psychology benefit (\$75) may apply after Medicare Mental Health Treatment Plan is used up for the remainder of the calendar year. When combined with Top Hospital Gold you may receive Health Dollar Loyalty Rewards.

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 - \$34.00 Scale & clean - \$74.00 Fluoride treatment - \$27.00
Major dental	12	\$750 per person (combined limit for major dental & other services)	Surgical tooth extraction - \$210.00 Full crown veneered - \$750.00
Endodontic	12	\$500 per person	Filling of one root canal - \$164.00
Orthodontic	12	\$400 per person \$2,200 lifetime limit	Braces for upper & lower teeth, including removal plus fitting of retainer - \$400.00
Optical*	2	\$210 per person	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge
Non PBS pharmaceuticals	2	\$700 per person (combined limit for non pbs pharmaceuticals & vaccinations)	Per eligible prescription - \$50.00
Physiotherapy*	2	\$750 per person (combined limit for physiotherapy, dietetics/dietary advice, eye therapy (orthoptics), occupational therapy & speech therapy)	Initial visit - \$55.00 Subsequent visit - \$49.00
Chiropractic*	2	\$350 per person (combined limit for chiropractic, exercise physiology & osteopathy)	Initial visit - \$40.00 Subsequent visit - \$35.00
Podiatry*	2	\$250 per person	Initial visit - \$36.00 Subsequent visit - \$32.00
Psychology*	2	\$300 per person	Initial visit - \$44.00 Subsequent visit - \$44.00
Acupuncture	2	\$300 per person (combined limit for acupuncture, remedial massage,	Initial visit - \$35.00 Subsequent visit - \$27.00
1		chinese medicine & other services)	Data atatamantianna di 04 Annil 201

Remedial massage	2		Initial visit - \$35.00 Subsequent visit - \$27.00
Hearing aids	12	\$1,000 per person up to \$2,000 per policy 1 appliance(s) every 3 years (combined limit for hearing aids, blood glucose monitors & other services)	Hearing aid - \$1,000.00
Blood glucose monitors	12		Per monitor - \$150.00
Chinese medicine	2	Combined limit - see Acupuncture	Initial visit - \$35.00 Subsequent visit - \$20.00
Dietetics/dietary advice	2	Combined limit - see Physiotherapy	Initial visit - \$45.00 Subsequent visit - \$45.00
Exercise physiology	2	Combined limit - see Chiropractic	Initial visit - \$35.00 Subsequent visit - \$35.00
Eye therapy (orthoptics)	2	Combined limit - see Physiotherapy	Initial visit - \$40.00 Subsequent visit - \$32.00
Health management / Healthy lifestyle	2	\$150 per person up to \$300 per policy	Health management - \$150.00
Occupational therapy	2	Combined limit - see Physiotherapy	Initial visit - \$62.00 Subsequent visit - \$62.00
Orthotics (podiatric orthoses)	12	\$120 per person	Orthotics supply & fit - \$120.00
Osteopathy*	2	Combined limit - see Chiropractic	Initial visit - \$50.00 Subsequent visit - \$40.00
Speech therapy	2	Combined limit - see Physiotherapy	Initial visit - \$60.00 Subsequent visit - \$60.00
Vaccinations	2	Combined limit - see Non PBS pharmaceuticals	Per service - \$50.00

Preventative and Diagnostic dental has service limits which are not included in the annual limit. Orthodontic accrues annually up to a lifetime limit of \$2,200 for Orthodontist (\$1,800 for General Dentist). Dentures -\$700 limit renews every 3 yrs. Crowns & bridges receive an increased annual limit of \$1,000 after 5 years membership. Endodontic limit (\$500) includes In chair teeth whitening treatment provided by a dentist, surgical extractions and periodontic services. A service limit of an in-chair treatment -max 8 teeth/session; applies every 36 months. Mental health services (psychology, HCF-approved counselling, accredited mental health social worker and HCF-approved OCBT courses) included. Hearing aid limit renews every 3 years from the date you claimed them. \$185 annual limit for orthopaedic shoes with a \$150 sub-limit on foot orthotics (foot orthotics limited to 1 pair per person per year).

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

X Other treatments - check with your insurer

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

For all NSW and ACT residents who aren't offered cover under another arrangement there is unlimited emergency ambulance cover received within NSW or the ACT. For emergency ambulance services received outside of NSW or ACT there is an annual limit for emergency ambulance services provided by state Ambulance Service Providers.

For further information about this policy see

https://www.hcf.com.au/fags/fags-cover#what-is-ambulance-cover

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.