

## Private Health Information Statement - General treatment policy

### HCF CORPORATE FLEX MY EXTRAS

#### HCF

<http://www.hcf.com.au>  
[service@hcf.com.au](mailto:service@hcf.com.au)  
 13 13 34

#### Monthly Premium

**\$39.03 #**

(before any rebate or insurer discount)

Covers only one person  
 Available in Northern Territory

# 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 is a corporate policy which is only available to employees/members of organisations with arrangements with this health insurer.

### General Treatment Cover

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 \*: Features a combined limit of \$650 per person per calendar year. General dental includes 100% back on 1 check-up, 1 scale and clean and 1 fluoride at participating No Gap providers and subject to annual limit. Gap Bonus helps reduce or eliminate out-of-pocket costs by topping up the benefit HCF pay on services included in your Corporate Flex My Extras cover.

| Treatment                 | Waiting period (months) | Benefit limits (per 12 months unless otherwise stated)   | Examples of maximum benefits  |
|---------------------------|-------------------------|--|---|
| General dental*           | 2                       | \$650 per policy<br>(no limit on preventative dental)<br>(combined limit for general dental, physiotherapy, acupuncture, chinese medicine, dietetics/dietary advice, exercise physiology, vaccinations & other services) | Periodic oral examination - 65% of charge<br>Scale & clean - 65% of charge<br>Fluoride treatment - 65% of charge<br>Surgical tooth extraction - 65% of charge |
| Optical                   | 2                       | \$175 per policy   | Single vision lenses & frames - 65% of charge<br>Multi-focal lenses & frames - 65% of charge  |
| Physiotherapy*            | 2                       | Combined limit - see General dental  | Initial visit - 65% of charge<br>Subsequent visit - 65% of charge   |
| Acupuncture*              | 2                       | Combined limit - see General dental  | Initial visit - 65% of charge<br>Subsequent visit - 65% of charge   |
| Remedial massage          | 2                       | \$100 per policy   | Initial visit - 65% of charge<br>Subsequent visit - 65% of charge   |
| Chinese medicine*         | 2                       | Combined limit - see General dental  | Initial visit - 65% of charge<br>Subsequent visit - 65% of charge   |
| Dietetics/dietary advice* | 2                       | Combined limit - see General dental  | Initial visit - 65% of charge   |
| Exercise physiology*      | 2                       | Combined limit - see General dental  | Initial visit - 65% of charge<br>Subsequent visit - 65% of charge   |
| Vaccinations*             | 2                       | Combined limit - see General dental  | Per service - 65% of charge   |

Features a combined limit, with a separate optical, remedial massage and myotherapy limit. Offers digital mental health service, HCF-approved Online Cognitive Behavioural Therapy courses and teeth whitening (2 and 12 months wait period).

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

|   |   |  |
|---|---|--|
|  Blood glucose monitors |  Major dental            |  Psychology                                 |
|  Chiropractic           |  Non PBS pharmaceuticals |  Other treatments - check with your insurer |

|                |               |  |
|----------------|---------------|--|
| ✗ Endodontic   | ✗ Orthodontic |  |
| ✗ Hearing aids | ✗ Podiatry    |  |

### Other features of this general treatment cover

Features a combined limit of \$650, with a separate optical limit of \$175 and a separate remedial massage and myotherapy limit of \$100, both per person per calendar year. Includes a range of no-gap services delivered through participating dental providers in selected states, depending on level of cover.

### Ambulance cover

In Northern Territory this policy provides:

**Emergency:** with a waiting period of 1 day, limited to 1 services per year.

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

### Other features of this ambulance cover

If you are a resident of NT and you don't have an ambulance subscription with your state ambulance service and aren't offered cover under another arrangement, you have an annual service limit of 1 per person and 2 per policy for emergency ambulance services provided by state Ambulance Service Providers.

For further information about this policy see

<https://www.hcf.com.au/faqs/faqs-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.