

Private Health Information Statement - General treatment policy

My Choice Extras Family 75

Medibank Private Limited

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Monthly Premium

\$208.20[#]

(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

[#] 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 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

At Members' Choice extras providers you may get more for your cover. This includes 100% back on a dental check up, scale and clean each year and great optical deals. See <https://www.medibank.com.au/health-insurance/find-provider/#/>.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk *: A 12 month waiting period applies to surgical tooth extraction. Exercise physiology benefit is \$21.50 for individual consultations and \$12.00 for group consultations. Counselling (no waiting period) shares an annual limit with Psychology. Vaccinations - non PBS listed flu vaccinations only.

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	No annual limit applies to General dental	Periodic oral examination - \$26.50 Scale & clean - \$51.70 Fluoride treatment - \$15.60 Surgical tooth extraction - \$109.30
Major dental	12	\$1,000 per person (combined limit for major dental & endodontic)	Full crown veneered - \$723.80
Endodontic	12		Filling of one root canal - \$136.40
Orthodontic	12	\$800 opening balance. Top-up of \$400 per year up to lifetime limit of \$2400	Braces for upper & lower teeth, including removal plus fitting of retainer - 100% of charge
Optical	6	\$225 per person (combined limit for optical & eye therapy (orthoptics))	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge
Non PBS pharmaceuticals	2	\$400 per person (combined limit for non pbs pharmaceuticals, psychology & vaccinations)	Per eligible prescription - \$31.00
Physiotherapy	2	\$600 per person (combined limit for physiotherapy, chiropractic, acupuncture, chinese medicine, exercise physiology & osteopathy)	Initial visit - \$40.60 Subsequent visit - \$34.10
Chiropractic	2		Initial visit - \$43.30 Subsequent visit - \$28.20
Psychology*	0	Combined limit - see Non PBS pharmaceuticals	Initial visit - \$131.96 Subsequent visit - \$109.28
Acupuncture	2	Combined limit - see Physiotherapy	Initial visit - \$31.70 Subsequent visit - \$24.80
Remedial massage	2	\$200 per person	Initial visit - \$37.40 Subsequent visit - \$25.90
Ante-natal/Post-natal classes	2	\$600 per person (combined limit for ante-natal/post-natal classes, occupational therapy, speech therapy & other services)	Initial visit - \$30.00 Subsequent visit - \$30.00

Chinese medicine	2	Combined limit - see Physiotherapy	Initial visit - \$21.50 Subsequent visit - \$21.50
Exercise physiology*	2	Combined limit - see Physiotherapy	Initial visit - \$21.50 Subsequent visit - \$12.00
Eye therapy (orthoptics)	2	Combined limit - see Optical	Initial visit - \$45.00 Subsequent visit - \$35.00
Occupational therapy	2	Combined limit - see Ante-natal/Post-natal classes	Initial visit - \$51.10 Subsequent visit - \$32.80
Osteopathy	2	Combined limit - see Physiotherapy	Initial visit - \$43.30 Subsequent visit - \$28.20
Speech therapy	2	Combined limit - see Ante-natal/Post-natal classes	Initial visit - \$70.30 Subsequent visit - \$41.70
Vaccinations*	2	Combined limit - see Non PBS pharmaceuticals	Per service - 100% of charge

Benefits for antenatal and postnatal services include birthing courses and lactation consultations with a registered midwife in private practice. Plus benefits towards Pregnancy Compression garments (2 mnth waiting period), \$60 per garment, Tens machine (2 mnth waiting period), hired device \$50 and purchased device \$100. Australian Breastfeeding Association membership (2 mnth waiting period) \$50.

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

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

Ambulance cover

In South Australia 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

Cover for an ambulance when you require immediate professional attention and you need to be transported to hospital or other approved facility and your medical condition is such that you cannot be transported any other way, or where an ambulance is called but transport is not needed. Cover for air ambulance where pre-approval has been obtained from Medibank. In all cases the ambulance provider must be Medibank approved. Please contact Medibank for further details.

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.