

## Private Health Information Statement - General treatment policy

### Flexi 80 MC

#### Medibank Private Limited

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#### Monthly Premium

**\$278.40<sup>#</sup>**

(before any rebate or insurer discount)

Covers one adult & dependants, including non-student dependants (2 or more people, only one of whom is an adult)

Available in Tasmania  
Closed to new members

<sup>#</sup> 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, students up to and including the age of 30 and non-students up to and including the age of 30, as well as persons with a disability who qualify as a child, student or non-student in these age ranges.

Available to employees of a company that has an agreement with Medibank

### General Treatment Cover

This policy can only be purchased with certain hospital policies.

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 \*: 12 month waiting period applies to surgical tooth extraction. Can only be taken with an eligible hospital cover. Exercise physiology benefits are \$21.50 for individual consultations and \$15.00 for group consultations.

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	\$1,500 per person (combined limit for general dental, major dental, endodontic, orthodontic, physiotherapy, chiropractic, podiatry, psychology, acupuncture, remedial massage, hearing aids, blood glucose monitors, chinese medicine, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, orthotics (podiatric orthoses), osteopathy & speech therapy)	Periodic oral examination - \$25.00 Scale & clean - \$41.00 Fluoride treatment - \$16.70 Surgical tooth extraction - \$126.50
Major dental	12		Full crown veneered - \$710.00
Endodontic	12		Filling of one root canal - \$140.00
Orthodontic	12	\$3,000 lifetime limit for Orthodontic	Braces for upper & lower teeth, including removal plus fitting of retainer - 80% of charge
Optical	6	\$300 per person	Single vision lenses & frames - 100% of charge Multi-focal lenses & frames - 100% of charge
Physiotherapy	2	Combined limit - see General dental	Initial visit - \$30.00 Subsequent visit - \$23.00
Chiropractic	2	Combined limit - see General dental	Initial visit - \$30.00 Subsequent visit - \$23.00
Podiatry	2	Combined limit - see General dental	Initial visit - \$38.00 Subsequent visit - \$30.60
Psychology	0	Combined limit - see General dental	Initial visit - \$105.89 Subsequent visit - \$87.69
Acupuncture	2	Combined limit - see General dental	Initial visit - \$34.00 Subsequent visit - \$27.00
Remedial massage	2	Combined limit - see General dental	Initial visit - \$36.00 Subsequent visit - \$26.00
Hearing aids	36	Combined limit - see General dental	Hearing aid - \$800.00

Blood glucose monitors	24	Combined limit - see General dental	Per monitor - \$150.00
Chinese medicine	2	Combined limit - see General dental	Initial visit - \$21.50 Subsequent visit - \$21.50
Dietetics/dietary advice	2	Combined limit - see General dental	Initial visit - \$54.00 Subsequent visit - \$29.80
Exercise physiology*	2	Combined limit - see General dental	Initial visit - \$21.50 Subsequent visit - \$15.00
Eye therapy (orthoptics)	2	Combined limit - see General dental	Initial visit - \$45.00 Subsequent visit - \$35.00
Occupational therapy	2	Combined limit - see General dental	Initial visit - \$58.90 Subsequent visit - \$43.20
Orthotics (podiatric orthoses)	2	Combined limit - see General dental	Orthotics supply & fit - \$75.00
Osteopathy	2	Combined limit - see General dental	Initial visit - \$30.00 Subsequent visit - \$23.00
Speech therapy	2	Combined limit - see General dental	Initial visit - \$56.50 Subsequent visit - \$38.10

The policy also pays benefits towards other services as part of the \$1,500 General Dental annual limit. These include health appliances and external prostheses (2 month waiting period, fixed benefits apply), breathing appliances (12 month waiting period, fixed benefits apply), blood glucose and blood pressure monitors (24 month waiting period, fixed benefits apply), and health screening tests (2 month waiting period, fixed benefits apply). Counselling (no waiting period) shares an annual limit with Psychology. Please contact Medibank for more information.

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

**X** Non PBS pharmaceuticals

**X** Other treatments - check with your insurer

## 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](https://www.health.tas.gov.au/ambulance/fees_and_accounts).

## 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.