

Private Health Information Statement - General treatment policy

Base Extras and Dental - AD

Mildura Health Fund

<http://www.mildurahealthfund.com.au>
 mhf@mildurahealthfund.com.au
 (03) 5023 0269

Monthly Premium

\$56.75 #

(before any rebate or insurer discount)

Covers only one person
 Available in All States

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.

General Treatment Cover

This health insurer does not operate a preferred provider scheme.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk *: \$350 benefit limit per person in the first year of membership.

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental*	2	\$1,050 per policy (combined limit for general dental, major dental, endodontic, orthodontic & other services - Sub-limits apply) \$1,500 lifetime limit for Orthodontic	Periodic oral examination - \$59.85 Scale & clean - \$122.70 Fluoride treatment - \$51.20 Surgical tooth extraction - \$204.00
Major dental*	2		Full crown veneered - \$650.00
Endodontic*	2		Filling of one root canal - \$199.80
Orthodontic*	24		Braces for upper & lower teeth, including removal plus fitting of retainer - \$600.00
Optical	6	\$185 per policy	Single vision lenses & frames - \$185.00 Multi-focal lenses & frames - \$185.00
Non PBS pharmaceuticals	2	\$100 per policy (combined limit for non pbs pharmaceuticals & vaccinations)	Per eligible prescription - \$15.00
Physiotherapy	2	\$390 per policy (combined limit for physiotherapy, exercise physiology & occupational therapy)	Initial visit - \$27.00 Subsequent visit - \$24.00
Chiropractic	2	\$390 per policy (combined limit for chiropractic & osteopathy)	Initial visit - \$25.00 Subsequent visit - \$21.00
Podiatry	2	\$390 per policy	Initial visit - \$31.00 Subsequent visit - \$27.00
Hearing aids	36	\$600 per policy 1 appliance(s) every 5 years (combined limit for hearing aids, blood glucose monitors & other services - Sub-limits apply)	Hearing aid - \$500.00
Blood glucose monitors	36		Per monitor - \$150.00
Dietetics/dietary advice	2	\$390 per policy	Initial visit - \$28.00 Subsequent visit - \$25.00
Exercise physiology	2	Combined limit - see Physiotherapy	Initial visit - \$27.00 Subsequent visit - \$24.00
Eye therapy (orthoptics)	2	\$390 per policy	Initial visit - \$27.00 Subsequent visit - \$24.00
Home nursing	2	\$350 per policy	Initial visit - \$12.00 Subsequent visit - \$12.00

Occupational therapy	2	Combined limit - see Physiotherapy	Initial visit - \$27.00 Subsequent visit - \$24.00
Osteopathy	2	Combined limit - see Chiropractic	Initial visit - \$27.00 Subsequent visit - \$24.00
Speech therapy	2	\$390 per policy	Initial visit - \$37.00 Subsequent visit - \$34.00
Vaccinations	2	Combined limit - see Non PBS pharmaceuticals	Per service - \$15.00

Refund on Ambulance Subscription - \$40 for single policy/\$80 for family policy. Health Aids & Appliances covered by this policy (combined limit & maximum benefits apply) – Blood Glucose Monitor - \$150, Blood Pressure Monitor - \$125, TENS Machine - \$125, Nebuliser - \$125, Constant Air Pressure monitor (CPAP) - \$230, Hearing Aid - \$500, Braces/Splints - up to \$300, CAM Boot - up to \$300, Artificial Limbs & Prosthesis -up to \$300, Crutches/Walking Frame - up to \$25, Wigs - up to \$150, Compression Garments - up to \$150. Waiting periods vary from one year to three years depending on appliance. Includes dentures - full set payable every 3 years.

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

X Acupuncture	X Remedial massage
X Psychology	X Other treatments - check with your insurer

Other features of this general treatment cover

Foot orthotics benefits payable after 12 months waiting period - limit combined with podiatry. Members paying by direct debit will receive a 2.5% discount (cheque or savings account only). Contact the Fund for further details.

For further information about this policy see

<http://www.mildurahealthfund.com.au>

Ambulance cover

Ambulance cover is provided by the State government in Tasmania (https://www.health.tas.gov.au/ambulance/fees_and_accounts) and Queensland (<https://www.ambulance.qld.gov.au/>). In other states concession card holders may have free cover and there are subscription services in several states (https://privatehealth.gov.au/health_insurance/what_is_covered/ambulance.htm).

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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.