

## Private Health Information Statement - General treatment policy

### Quality Extras

nib Health Funds Ltd.

<https://www.nib.com.au>

13 14 63

**Monthly Premium**

**\$117.32<sup>#</sup>**

(before any rebate or insurer discount)

Covers only one person

Available in Northern Territory

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.

### General Treatment Cover

By using our FirstChoice providers, you may have lower out-of-pocket costs on many allied health services. A list of "preferred providers" is available from the health insurer. See <https://www.nib.com.au/find-a-provider>.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk \*: Benefit paid after current PBS patient contribution deducted

| Treatment                | Waiting period (months) | Benefit limits (per 12 months unless otherwise stated)   | Examples of maximum benefits  |
|--------------------------|-------------------------|--|---|
| General dental           | 2                       | General Dental/Major Dental: Multiple Limits, Sub-Limits, Shared Limits and Service Limits Apply; See insurer for details  | Periodic oral examination - \$21.00<br>Scale & clean - \$35.00<br>Fluoride treatment - \$19.00<br>Surgical tooth extraction - \$65.00 |
| Major dental             | 12                      |  | Full crown veneered - \$415.00  |
| Endodontic               | 12                      | Non-specialty Endodontia: \$400; Specialty Endodontia: \$450, \$1600 per Lifetime; Service Limits Apply  | Filling of one root canal - \$80.00   |
| Orthodontic              | 12                      | Non-specialty Orthodontia: \$350, \$1050 per Lifetime; Specialty Orthodontia: \$350, increasing by \$100 per calendar year to \$2400 per Lifetime  | Braces for upper & lower teeth, including removal plus fitting of retainer - 100% of charge   |
| Optical                  | 6                       | \$200 per policy   | Single vision lenses & frames - \$140.00<br>Multi-focal lenses & frames - \$190.00  |
| Non PBS pharmaceuticals* | 2                       | \$600 per policy   | Per eligible prescription - \$60.00   |
| Physiotherapy            | 2                       | \$900 per policy (combined limit for physiotherapy, chiropractic, acupuncture, ante-natal/post-natal classes, exercise physiology, eye therapy (orthoptics), occupational therapy, osteopathy & speech therapy - <b>Sub-limits apply</b> ) | Initial visit - \$28.00<br>Subsequent visit - \$26.00   |
| Chiropractic             | 2                       |  | Initial visit - \$25.00<br>Subsequent visit - \$22.00   |
| Podiatry                 | 2                       | \$220 per policy   | Initial visit - \$25.00<br>Subsequent visit - \$21.00   |
| Psychology               | 2                       | \$300 per policy   | Initial visit - \$45.00<br>Subsequent visit - \$40.00   |
| Acupuncture              | 2                       | Combined limit - see Physiotherapy   | Initial visit - \$21.00<br>Subsequent visit - \$11.00   |
| Remedial massage         | 2                       | \$170 for single policies, \$340 for family groups (Combined limit with Chinese Herbalism and Myotherapy)  | Initial visit - \$19.00<br>Subsequent visit - \$18.00   |
| Hearing aids             | 36                      | \$560 per policy<br>2 appliance(s) every 5 years   | Hearing aid - \$560.00  |

|                                       |    |   |   |
|---------------------------------------|----|---|---|
| Blood glucose monitors                | 12 | \$600 per policy<br>2 appliance(s) every 1 year<br>(combined limit for blood glucose monitors & other services) | Per monitor - \$180.00                                |
| Ante-natal/Post-natal classes         | 2  | Combined limit - see Physiotherapy  | Initial visit - \$11.00<br>Subsequent visit - \$11.00 |
| Chinese medicine                      | 2  | Combined limit - see Remedial massage   | Initial visit - \$19.00<br>Subsequent visit - \$18.00 |
| Dietetics/dietary advice              | 2  | \$250 per policy  | Initial visit - \$27.00<br>Subsequent visit - \$25.00 |
| Exercise physiology                   | 2  | Combined limit - see Physiotherapy  | Initial visit - \$28.00<br>Subsequent visit - \$26.00 |
| Eye therapy (orthoptics)              | 2  | Combined limit - see Physiotherapy  | Initial visit - \$28.00<br>Subsequent visit - \$25.00 |
| Health management / Healthy lifestyle | 6  | \$100 for single policies, \$200 for family groups  | Health management - 100% of charge                    |
| Home nursing                          | 2  | \$750 per policy  | Initial visit - \$72.00<br>Subsequent visit - \$72.00 |
| Occupational therapy                  | 2  | Combined limit - see Physiotherapy  | Initial visit - \$29.00<br>Subsequent visit - \$28.00 |
| Orthotics (podiatric orthoses)        | 2  | \$200 per policy  | Orthotics supply & fit - \$100.00                     |
| Osteopathy                            | 2  | Combined limit - see Physiotherapy  | Initial visit - \$25.00<br>Subsequent visit - \$23.00 |
| Speech therapy                        | 2  | Combined limit - see Physiotherapy  | Initial visit - \$29.00<br>Subsequent visit - \$27.00 |
| Vaccinations                          | 2  | \$100 per policy  | Per service - \$16.00                                 |

Combined Therapies (\$900) includes acupuncture (\$200 sub-limit, \$400 sub-limit for families), antenatal services, chiropractic / osteopathy (\$400 sub-limit), exercise physiology, eye therapy, occupational therapy, physiotherapy and speech pathology. Artificial aids (\$600) e.g. spacer, peak flow meter, nebuliser, Irlen lens. Myotherapy: combined (limit of \$170 for singles, \$340 for family groups) with remedial massage and Chinese herbalism. Healthier Lifestyle includes nib approved weight management programs, quit smoking and nicotine replacement. Post-natal services not included. Psychology has a sublimit of \$150 for Digital Cognitive Behavioural Therapy (CBT).

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

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

### Other features of this general treatment cover

A comprehensive Extras cover for services customers can use everyday to stay healthy. Of course, you can see your choice of provider, but by choosing a FirstChoice provider, you may have less to pay towards the cost of your treatment. We've created the FirstChoice network to help you access quality healthcare and a better deal for you and your family. We've locked in lower costs with our FirstChoice providers, so you can enjoy competitive treatment fees when you visit the dentist or a discount the next time you claim for glasses.

For further information about this policy see <https://my.nib.com.au/product-collateral/29>

### Ambulance cover

In Northern Territory 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

All our health covers include unlimited emergency ambulance (1 day waiting period on all emergency ambulance). Emergency ambulance is when you need immediate transport by a State or Territory ambulance to get to a hospital or other facility for urgent medical treatment. No annual limits for emergency ambulance apply.

For further information about this policy see

<https://my.nib.com.au/product-collateral/29>

#### 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.