# **Private Health Information Statement - General treatment policy**

# **Qantas Top Extras**

## **Qantas Insurance**

https://www.qantasinsurance.com/health 13 49 60

Underwritten by nib Health Funds Ltd.

# Monthly Premium \$169.23#

(before any rebate or insurer discount)

Covers only one person

Available in Victoria

# 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 <a href="https://insurance.gantas.com/find-a-provider">https://insurance.gantas.com/find-a-provider</a>.

## This policy **✓ includes** General treatment (Extras) cover for

| Treatment                     | Waiting period (months) | Benefit limits (per 12 months unless otherwise stated)  | Examples of maximum benefits   |
|-------------------------------|-------------------------|---|--|
| General dental                | 2                       | \$1,000 per policy<br>(no limit on preventative dental)   | Periodic oral examination - 75% of charge<br>Scale & clean - 75% of charge<br>Fluoride treatment - 75% of charge |
| Major dental                  | 12                      | \$1,300 per policy<br>(combined limit for major dental & endodontic)  | Surgical tooth extraction - 75% of charge<br>Full crown veneered - 75% of charge                                 |
| Endodontic                    | 12                      |   | Filling of one root canal - 75% of charge  |
| Orthodontic                   | 12                      | \$800 per policy<br>\$2,600 lifetime limit  | Braces for upper & lower teeth, including remova plus fitting of retainer - 75% of charge                        |
| Optical                       | 6                       | \$350 per policy  | Single vision lenses & frames - 75% of charge<br>Multi-focal lenses & frames - 75% of charge                     |
| Non PBS pharmaceuticals       | 2                       | \$500 per policy  | Per eligible prescription - 75% of charge  |
| Physiotherapy                 | 2                       | \$600 per policy  | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge  |
| Chiropractic                  | 2                       | \$400 per policy  | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge  |
| Podiatry                      | 2                       | \$400 per policy<br>(combined limit for podiatry & orthotics (podiatric<br>orthoses))   | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge  |
| Psychology                    | 2                       | \$500 per policy  | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge  |
| Acupuncture                   | 2                       | \$400 per policy<br>(combined limit for acupuncture, remedial massage,<br>chinese medicine & other services - <b>Sub-limits apply</b> ) | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge  |
| Remedial massage              | 2                       |   | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge  |
| Hearing aids                  | 36                      | \$1,200 per policy<br>2 appliance(s) every 5 years  | Hearing aid - 75% of charge  |
| Blood glucose monitors        | 12                      | \$500 per policy<br>1 appliance(s) every 1 year<br>(combined limit for blood glucose monitors & other<br>services)                      | Per monitor - 75% of charge  |
| Ante-natal/Post-natal classes | 2                       | \$250 per policy  | Initial visit - 100% of charge<br>Subsequent visit - 100% of charge  |

| Chinese medicine                         | 2 | Combined limit - see Acupuncture | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge |
|--|---|----------------------------------|---|
| Dietetics/dietary advice                 | 2 | \$600 per policy                 | Initial visit - 75% of charge                                     |
| Exercise physiology                      | 2 | \$300 per policy                 | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge |
| Eye therapy (orthoptics)                 | 2 | \$200 per policy                 | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge |
| Health management / Healthy<br>lifestyle | 6 | \$200 per policy                 | Health management - 75% of charge                                 |
| Home nursing                             | 2 | \$200 per policy                 | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge |
| Occupational therapy                     | 2 | \$450 per policy                 | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge |
| Orthotics (podiatric orthoses)           | 2 | Combined limit - see Podiatry    | Orthotics supply & fit - 75% of charge                            |
| Osteopathy                               | 2 | \$400 per policy                 | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge |
| Speech therapy                           | 2 | \$450 per policy                 | Initial visit - 75% of charge<br>Subsequent visit - 75% of charge |

Preventative Tests - \$200 limit per person per calendar year (waiting period 6 months): 75% back on preventative health test e.g. thin prep, bone density testing, bowel screening (service limits apply). Health Aids - \$500 limit per person per calendar year (waiting period 12 months): 75% back on health aids e.g. spacer, peak flow meter, nebuliser, blood glucose monitor, Irlen lens (service limits apply). Myotherapy - \$400 combined limit with acupuncture, remedial massage and Chinese herbalism per person per calendar year (waiting period 2 months). Healthy Lifestyle includes approved weight management, quit smoking and health management programs (gym, personal trainer). Psychology has a sublimit of \$150 for Digital Cognitive Behavioural Therapy (CBT). For Preventative dental service limits apply.

#### 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

For those who want the best when it comes to Extras. 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/110

#### **Ambulance cover**

In Victoria 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/110

#### 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.