

## Private Health Information Statement - General treatment policy

### Basic Extras

#### UniHealth

<http://unihealthinsurance.com.au>

[info@unihealthinsurance.com.au](mailto:info@unihealthinsurance.com.au)

1300 367 906

Underwritten by Teachers Health

#### Monthly Premium

**\$85.80 #**

(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 Northern Territory

# 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 31 and non-students up to and including the age of 31, as well as persons with a disability who qualify as a child, student or non-student in these age ranges.

Membership of this insurer is restricted to education union members and their families

### General Treatment Cover

We've partnered with a network of optical and dental providers Australia-wide to give members greater access to high quality treatment and exclusive discounts, including 'no gap' offers. See

<https://unihealthinsurance.com.au/members/find-a-provider/member-wellbeing-network/>.

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                       | \$400 per person up to \$800 per policy (Sub-limits apply)   | Periodic oral examination - \$20.00<br>Scale & clean - \$35.00<br>Fluoride treatment - \$20.00 |
| Optical                               | 6                       | \$150 per person up to \$300 per policy  | Single vision lenses & frames - 100% of charge<br>Multi-focal lenses & frames - 100% of charge |
| Non PBS pharmaceuticals               | 2                       | \$500 per person up to \$1,000 per policy (combined limit for non pbs pharmaceuticals, physiotherapy, chiropractic, psychology, acupuncture, remedial massage, chinese medicine, dietetics/dietary advice, exercise physiology, osteopathy & vaccinations) | Per eligible prescription - \$25.00  |
| Physiotherapy                         | 2                       |  | Initial visit - \$30.00<br>Subsequent visit - \$30.00  |
| Chiropractic                          | 2                       |  | Initial visit - \$30.00<br>Subsequent visit - \$30.00  |
| Psychology                            | 2                       |  | Initial visit - \$45.00<br>Subsequent visit - \$45.00  |
| Acupuncture                           | 2                       |  | Initial visit - \$22.00<br>Subsequent visit - \$22.00  |
| Remedial massage                      | 2                       |  | Initial visit - \$22.00<br>Subsequent visit - \$22.00  |
| Chinese medicine                      | 2                       |  | Initial visit - \$22.00<br>Subsequent visit - \$22.00  |
| Dietetics/dietary advice              | 2                       |  | Initial visit - \$22.00<br>Subsequent visit - \$22.00  |
| Exercise physiology                   | 2                       |  | Initial visit - \$30.00<br>Subsequent visit - \$30.00  |
| Health management / Healthy lifestyle | 6                       |  | \$150 per person up to \$300 per policy (Sub-limits apply)                                     |
| Osteopathy                            | 2                       | Combined limit - see Non PBS pharmaceuticals   | Initial visit - \$30.00<br>Subsequent visit - \$30.00  |
| Vaccinations                          | 2                       | Combined limit - see Non PBS pharmaceuticals   | Per service - \$25.00  |

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

|                                 |                       |   |
|---------------------------------|-----------------------|---|
| <b>X</b> Blood glucose monitors | <b>X</b> Major dental | <b>X</b> Other treatments - check with your insurer |
| <b>X</b> Endodontic             | <b>X</b> Orthodontic  |   |
| <b>X</b> Hearing aids           | <b>X</b> Podiatry     |   |

## Ambulance cover

In Northern Territory this policy provides:

**Emergency:** with a waiting period of 1 day, limited to \$6,000 per person per year and \$12,000 per policy.

**Call-out fees:** will be paid for each attendance, including emergency treatment without transport to hospital.

For further information about this policy see

<https://www.unihealthinsurance.com.au/health-insurance/our-products/emergency-ambulance/>

## 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.