

Private Health Information Statement - General treatment policy

Healthy Options 60% Extras

TUH Health Fund

<https://tuh.com.au/>
enquiries@tuh.com.au
1300 360 701

Monthly Premium

\$166.13[#]

(before any rebate or insurer discount)

Covers 2 adults (and no-one else)
Available in South Australia

[#] 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.

Membership of this insurer is restricted to current or former union members and their families.

General Treatment Cover

No-gap or agreed discounts at preferred optical, dental, podiatry and physiotherapy providers. See <https://tuh.com.au/information/using-your-extras/find-provider>.

This policy  includes General treatment (Extras) cover for

Note, for items marked with an asterisk *: *Dental combined limit for general, preventative and major dental including Orthodontics (\$700 orthodontic annual limit during active treatment with a maximum lifetime benefit of \$2100). In relevant States/Territories ambulance subscription fees are payable at 60% of cost under the Health Management category if this product is held without a hospital cover.

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental	2	\$1,000 per person (combined limit for general dental, major dental, endodontic, orthodontic & other services - Sub-limits apply)	Periodic oral examination - 60% of charge Scale & clean - 60% of charge Fluoride treatment - 60% of charge Surgical tooth extraction - 60% of charge
Major dental	12		Full crown veneered - 60% of charge
Endodontic	12		Filling of one root canal - 60% of charge
Orthodontic*	12		Braces for upper & lower teeth, including removal plus fitting of retainer - 60% of charge
Optical	6	\$260 per person	Single vision lenses & frames - 60% of charge Multi-focal lenses & frames - 60% of charge
Physiotherapy	2	\$450 per person (combined limit for physiotherapy, exercise physiology & other services)	Initial visit - 60% of charge Subsequent visit - 60% of charge
Chiropractic	2	\$500 per person (combined limit for chiropractic, podiatry, psychology, acupuncture, remedial massage, chinese medicine & other services)	Initial visit - 60% of charge Subsequent visit - 60% of charge
Podiatry	2		Initial visit - 60% of charge Subsequent visit - 60% of charge
Psychology	2		Initial visit - 60% of charge Subsequent visit - 60% of charge
Acupuncture	2		Initial visit - 60% of charge Subsequent visit - 60% of charge
Remedial massage	2		Initial visit - 60% of charge Subsequent visit - 60% of charge
Ante-natal/Post-natal classes	2	\$150 per person up to \$300 per policy (combined limit for ante-natal/post-natal classes, health management / healthy lifestyle & other services)	Initial visit - 60% of charge Subsequent visit - 60% of charge
Chinese medicine	2	Combined limit - see Chiropractic	Initial visit - 60% of charge Subsequent visit - 60% of charge

Exercise physiology	2	Combined limit - see Physiotherapy	Initial visit - 60% of charge Subsequent visit - 60% of charge
Health management / Healthy lifestyle	2	Combined limit - see Ante-natal/Post-natal classes	Health management - 60% of charge
Other services payable at 60% of cost up to the relevant annual service category limit include: Anti-snore devices included in overall dental limit. Optical frames, lenses and contact lenses. Group Physiotherapy and Ante/post-natal Physiotherapy. Chiropractic and Osteopathic x-rays (one per year) included in overall limit. Psychology group consultations, psychometric assessments and counselling. Myotherapy. Biogait analysis. Health screenings. Active Health Bonus \$40/person \$80/membership (conditions apply).			

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

X Blood glucose monitors	X Non PBS pharmaceuticals
X Hearing aids	X Other treatments - check with your insurer

Other features of this general treatment cover

Online and mobile access, claims via smart phone app. Extended dependant option only available with selected hospital products, contact us for further details.

For further information about this policy see

<https://tuh.com.au/extras/healthy-options-extras>

Ambulance cover

In South Australia 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

Members who have COMBINED HOSPITAL AND EXTRAS COVER are entitled to emergency ambulance services benefits. No annual limit will apply to emergency road ambulance services. State-owned air ambulance transportation services are covered up to \$6,000 per person per annum. From 1 Jan 2022, members who have eligible stand-alone extras cover may claim the cost of a third-party ambulance subscription fee from the Health Program benefit category (sub-limits apply).

For further information about this policy see

<https://tuh.com.au/information/glossary/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.