

## Private Health Information Statement - General treatment policy

### Executive Health 80

#### GU Health Insurance

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

[corporate@guhealth.com.au](mailto:corporate@guhealth.com.au)

1800 249 966

Underwritten by nib Health Funds Ltd.

#### Monthly Premium

**\$143.74<sup>#</sup>**

(before any rebate or insurer discount)

Covers only one person

Available in Tasmania

<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.

Employees/Members of organisations with arrangements with this health insurer

### General Treatment Cover

This policy can only be purchased with certain hospital policies.

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 <http://www.guhealth.com.au/my-membership/find-a-provider>.

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                       | \$1,800 per policy<br>(no limit on preventative dental)<br>(combined limit for general dental, major dental, endodontic & orthodontic)  | Periodic oral examination - 80% of charge<br>Scale & clean - 80% of charge<br>Fluoride treatment - 80% of charge<br>Surgical tooth extraction - 80% of charge |
| Major dental            | 12                      |   | Full crown veneered - 80% of charge   |
| Endodontic              | 12                      |   | Filling of one root canal - 80% of charge   |
| Orthodontic             | 12                      |   | Braces for upper & lower teeth, including removal plus fitting of retainer - 80% of charge  |
| Optical*                | 6                       | \$300 per policy  | Single vision lenses & frames - 80% of charge<br>Multi-focal lenses & frames - 80% of charge  |
| Non PBS pharmaceuticals | 2                       | \$900 per policy<br>(combined limit for non pbs pharmaceuticals, acupuncture, remedial massage, chinese medicine, dietetics/dietary advice, exercise physiology & health management / healthy lifestyle - <b>Sub-limits apply</b> )           | Per eligible prescription - 80% of charge   |
| Physiotherapy           | 2                       | \$700 per policy  | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge   |
| Chiropractic            | 2                       | \$700 per policy<br>(combined limit for chiropractic & osteopathy)  | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge   |
| Podiatry                | 2                       | \$600 per policy<br>(combined limit for podiatry, psychology, hearing aids, blood glucose monitors, audiology, ante-natal/post-natal classes, eye therapy (orthotics), occupational therapy, orthotics (podiatric orthoses) & speech therapy) | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge   |
| Psychology              | 2                       |   | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge   |
| Acupuncture             | 2                       | Combined limit - see Non PBS pharmaceuticals  | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge   |
| Remedial massage        | 2                       | Combined limit - see Non PBS pharmaceuticals  | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge   |

|                                       |    |  |   |
|---------------------------------------|----|--|---|
| Hearing aids*                         | 12 | Combined limit - see Podiatry                | Hearing aid - 80% of charge                                       |
| Blood glucose monitors*               | 12 | Combined limit - see Podiatry                | Per monitor - 80% of charge                                       |
| Audiology                             | 2  | Combined limit - see Podiatry                | Initial visit - 80% of charge                                     |
| Ante-natal/Post-natal classes         | 2  | Combined limit - see Podiatry                | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge |
| Chinese medicine                      | 2  | Combined limit - see Non PBS pharmaceuticals | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge |
| Dietetics/dietary advice              | 2  | Combined limit - see Non PBS pharmaceuticals | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge |
| Exercise physiology                   | 2  | Combined limit - see Non PBS pharmaceuticals | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge |
| Eye therapy (orthoptics)              | 2  | Combined limit - see Podiatry                | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge |
| Health management / Healthy lifestyle | 6  | Combined limit - see Non PBS pharmaceuticals | Health management - 80% of charge                                 |
| Occupational therapy                  | 2  | Combined limit - see Podiatry                | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge |
| Orthotics (podiatric orthoses)*       | 2  | Combined limit - see Podiatry                | Orthotics supply & fit - 80% of charge                            |
| Osteopathy                            | 2  | Combined limit - see Chiropractic            | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge |
| Speech therapy                        | 2  | Combined limit - see Podiatry                | Initial visit - 80% of charge<br>Subsequent visit - 80% of charge |

\*Service limits apply to Preventative Dental, Optical, Orthotics, Hearing Aids, Health Aids (Blood Glucose Monitors). Preventative Tests (e.g. thin prep, bone density testing, bowel screening) is combined with Healthier lifestyle, Acupuncture, Remedial Massage, Chinese Herbalism, Exercise Physiology, Dietetics and Non PBS Pharmaceuticals (\$900). Healthier Lifestyle includes nib approved weight management, quit smoking and health management programs (gym, personal trainer) and more. Myotherapy: combined limit of \$900 with Acupuncture, Remedial Massage, Chinese Herbalism, Exercise Physiology, Dietetics, Non PBS Pharmaceuticals, Healthier Lifestyle and Preventative Tests. Sublimit of \$650 for Remedial Massage. Digital CBT: combined limit of \$600 with Psychology, Occupational Therapy, Podiatry, Orthotics, Speech Therapy, Audiology, Antenatal & Postnatal, Health Aids, Hearing Aids and Eye Therapy. Sublimit of \$150 for Digital CBT. Health Aids (e.g. spacer, peak flow meter, nebuliser, Irlen lens) is combined with Hearing Aids, Psychology, Digital CBT, Occupational Therapy, Podiatry, Orthotics, Speech Therapy, Audiology, Antenatal & Postnatal and Eye Therapy (\$600). Use nib Rewards to access a range of rewards and discounts on services like groceries, petrol, entertainment, health, wellbeing and more!

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

By choosing an nib First Choice provider it means you could pay less on dental treatment, physiotherapy and optical.

For further information about this policy see

<https://my.nib.com.au/product-collateral/2818>

### Ambulance cover

Ambulance cover is provided by the State government for residents of Tasmania. This may include cover whilst interstate, except for South Australia and Queensland where no cover applies. In other states please check with Ambulance Tasmania - [https://www.health.tas.gov.au/ambulance/fees\\_and\\_accounts](https://www.health.tas.gov.au/ambulance/fees_and_accounts).

### Other features of this ambulance cover

Emergency ambulance costs are covered by the state government for residents of Tasmania.

For further information about this policy see

<https://my.nib.com.au/product-collateral/2818>

### 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.