Defence Health Limited

Value Extras

Restricted Insurer

$65.22 / month
(Before Rebate, Discount & Loading)
Available in NT

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: Only one person.

Restricted insurer: Membership of this insurer is restricted to current or former members of the ADF and the Defence community and their families.

Visit a network dentist for quality dental care at special member prices. Plus, network optical providers offer no-gap glasses and discounts on other optical purchases up to the optical limit. See https://www.defencehealth.com.au/Health-Insurance/Find-Providers-and-Hospitals.

Policy ID: AHB/I4/DCER10 **Source:** Private Health Information Statement (PHIS)

Extras Cover

This policy includes General treatment (Extras) cover for

Treatment & waiting period (months)		Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ **Acupuncture**	2	**$300 per policy** combined limit for acupuncture, health management / healthy lifestyle, remedial massage & other services	• Initial visit: $31 • Subsequent visit: $27
✓ **Ante-natal/Post-natal classes**	2	**$900 per policy** combined limit for ante-natal/post-natal classes, audiology, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, podiatry, psychology & speech therapy	• Initial visit: $30 • Subsequent visit: $30
✓ **Audiology**	2	**$900 per policy** combined limit for ante-natal/post-natal classes, audiology, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, podiatry, psychology & speech therapy	• Initial visit: $69 • Subsequent visit: $47
✓ **Blood glucose monitors**	12	**$1,000 per policy** combined limit for blood glucose monitors, hearing aids & other services sub-limits apply	• Per monitor: $400
✓ **Chiropractic**	2	**$550 per policy** combined limit for chiropractic & osteopathy	• Initial visit: $45 • Subsequent visit: $32
✓ **Dietetics/dietary advice**	2	**$900 per policy** combined limit for ante-natal/post-natal classes, audiology, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, podiatry, psychology & speech therapy	• Initial visit: $57 • Subsequent visit: $31

✔ **Endodontic**	12	**$900 per policy** combined limit for endodontic & major dental	• Filling of one root canal: $117.4
✔ **Exercise physiology**	2	**$900 per policy** combined limit for ante-natal/post-natal classes, audiology, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, podiatry, psychology & speech therapy	• Initial visit: $29 • Subsequent visit: $23
✔ **Eye therapy (orthoptics)**	2	**$900 per policy** combined limit for ante-natal/post-natal classes, audiology, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, podiatry, psychology & speech therapy	• Initial visit: $62 • Subsequent visit: $42
✔ **General dental**	2	**No annual limit**	• Fluoride treatment: $20.6 • Scale & clean: $70.8 • Periodic oral examination: $37.6
✔ **Health management / Healthy lifestyle**	2	**$300 per policy** combined limit for acupuncture, health management / healthy lifestyle, remedial massage & other services	• Health management: $100
✔ **Hearing aids**	12	**$1,000 per policy** combined limit for blood glucose monitors, hearing aids & other services sub-limits apply	• Hearing aid: $1000
✔ **Major dental**	12	**$900 per policy** combined limit for endodontic & major dental	• Surgical tooth extraction: $124.7 • Full crown veneered: $801.6
✔ **Non PBS pharmaceuticals**	2	**$400 per policy** combined limit for non pbs pharmaceuticals, vaccinations & other services	• Per eligible prescription: $80
✔ **Occupational therapy**	2	**$900 per policy** combined limit for ante-natal/post-natal classes, audiology, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, podiatry, psychology & speech therapy	• Initial visit: $72 • Subsequent visit: $42
✔ **Optical**	2	**$255 per policy**	• Multi-focal lenses & frames: 100% of charge • Single vision lenses & frames: 100% of charge
✔ **Orthodontic**	12	**$800 per policy**	• Braces for upper & lower teeth, including removal plus fitting of retainer: $800
✔ **Osteopathy**	2	**$550 per policy** combined limit for chiropractic & osteopathy	• Initial visit: $45 • Subsequent visit: $32
✔ **Physiotherapy**	2	**$600 per policy**	• Initial visit: $52 • Subsequent visit: $39
✔ **Podiatry**	2	**$900 per policy** combined limit for ante-natal/post-natal classes, audiology, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, podiatry, psychology & speech therapy	• Initial visit: $45 • Subsequent visit: $32

✓ **Psychology**	2	**$900 per policy** combined limit for ante-natal/post-natal classes, audiology, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, podiatry, psychology & speech therapy	• Initial visit: $87 • Subsequent visit: $72
✓ **Remedial massage**	2	**$300 per policy** combined limit for acupuncture, health management / healthy lifestyle, remedial massage & other services	• Initial visit: $31 • Subsequent visit: $27
✓ **Speech therapy**	2	**$900 per policy** combined limit for ante-natal/post-natal classes, audiology, dietetics/dietary advice, exercise physiology, eye therapy (orthoptics), occupational therapy, podiatry, psychology & speech therapy	• Initial visit: $92 • Subsequent visit: $47
✓ **Vaccinations**	2	**$400 per policy** combined limit for non pbs pharmaceuticals, vaccinations & other services	• Per service: $80

Health and Wellbeing annual limit $300 includes: Acupuncture, Remedial Massage, Health Management, Myotherapy - initial consultation: $31.00, subsequent consultation: $27.00, Group Physiotherapy - $18.00 per session and Group Exercise Physiology - $13.00 per session. Also covers: School accident - annual limit: $600. Health appliances limit also includes: Orthopaedic shoes – sub-limit: $250; Nebuliser – sub-limit: $250 every three financial years; Spacer – sub-limit: $250.

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

- ✗ Chinese medicine
- ✗ Home nursing
- ✗ Orthotics (podiatric orthoses)

Other features of this general treatment cover: No lifetime limit on orthodontics. All benefits are per person. Benefits reset on 1 July each year. Details and claim conditions are in product guides available at defencehealth.com.au

For further information about this policy see: https://www.defencehealth.com.au/

Ambulance cover

In NT this policy provides:

Emergency: Unlimited with a waiting period of 2 months.

Non-emergency: Unlimited transport with a waiting period of 2 months.

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

Other features of this ambulance cover: Comprehensive cover for ambulance services by state-appointed ambulance providers across Australia. This includes emergency services, non-emergency dispatch, mobile intensive care and air and sea ambulance services. Non-emergency services are those that are classed as clinically necessary; for example, you need to be monitored by a paramedic during transport. Patient transfer services and transport services by Patient Transport vehicles are not ambulance services and are not claimable.

For further information about this policy see: https://www.defencehealth.com.au/

Insurer Details

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Private Health Information Statement is available from the Private Health Insurance Ombudsman website at https://privatehealth.gov.au/dynamic/Premium/PHIS/AHB/I4/DCER10