

**Australian Unity Health Limited**
Corporate Vital Extras

Corporate Policy

\$106.90 / month

(Before Rebate, Discount & Loading)

Available in QLD

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.

Corporate policy: -

Using a preferred provider means you may have lower out of pocket costs and can access more No Gap treatments on dental, plus discounts on some optical purchases. A preferred providers list is available from Australian Unity.

Policy ID: AUF/K98/QJOA10

Source: Private Health Information Statement (PHIS)

Extras Cover

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

Note, for treatments marked with *: 1) No waiting period for preventative dental and selected diagnostic services. Treatments claimed as No Gap Dental benefits (where available) do not count to the yearly limit. 2) Full denture replacement limited to once every three years. 3) Gum disease treatment included under Endodontics (12 month waiting period). 4) 70% for chiropractic x-ray, limit one per person per calendar year. 5) Orthotic benefits are for supply only. 6) Travel vaccinations only.

Treatment & waiting period (months)		Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ Acupuncture	2	\$250 per policy combined limit for acupuncture, orthotics (podiatric orthoses), podiatry & remedial massage	- Initial visit: 70% of charge - Subsequent visit: 70% of charge
✓ Audiology	2	\$500 per policy combined limit for audiology, dietetics/dietary advice, eye therapy (orthoptics), non pbs pharmaceuticals, occupational therapy, psychology, speech therapy & vaccinations	- Initial visit: 70% of charge - Subsequent visit: 70% of charge
✓ Chiropractic*	2	\$600 per policy combined limit for chiropractic, exercise physiology, osteopathy & physiotherapy	- Initial visit: 70% of charge - Subsequent visit: 70% of charge
✓ Dietetics/dietary advice	2	\$500 per policy combined limit for audiology, dietetics/dietary advice, eye therapy (orthoptics), non pbs pharmaceuticals, occupational therapy, psychology, speech therapy & vaccinations	- Initial visit: 70% of charge - Subsequent visit: 70% of charge
✓ Endodontic*	12	\$700 per policy combined limit for endodontic & major dental	Filling of one root canal: 70% of charge

✓ Exercise physiology	2	\$600 per policy combined limit for chiropractic, exercise physiology, osteopathy & physiotherapy	- Initial visit: 70% of charge - Subsequent visit: 70% of charge
✓ Eye therapy (orthoptics)	2	\$500 per policy combined limit for audiology, dietetics/dietary advice, eye therapy (orthoptics), non pbs pharmaceuticals, occupational therapy, psychology, speech therapy & vaccinations	- Initial visit: 70% of charge - Subsequent visit: 70% of charge
✓ General dental*	2	\$700 per policy	- Fluoride treatment: 70% of charge - Scale & clean: 70% of charge - Periodic oral examination: 70% of charge
✓ Health management / Healthy lifestyle	6	\$200 per policy	Health management: 70% of charge
✓ Major dental*	12	\$700 per policy combined limit for endodontic & major dental	- Surgical tooth extraction: 70% of charge - Full crown veneered: 70% of charge
✓ Non PBS pharmaceuticals	2	\$500 per policy combined limit for audiology, dietetics/dietary advice, eye therapy (orthoptics), non pbs pharmaceuticals, occupational therapy, psychology, speech therapy & vaccinations	Per eligible prescription: 70% of charge
✓ Occupational therapy	2	\$500 per policy combined limit for audiology, dietetics/dietary advice, eye therapy (orthoptics), non pbs pharmaceuticals, occupational therapy, psychology, speech therapy & vaccinations	- Initial visit: \$70 - Subsequent visit: \$70
✓ Optical	6	\$270 per policy	- Multi-focal lenses & frames: 100% of charge - Single vision lenses & frames: 100% of charge
✓ Orthodontic	12	\$700 per policy \$2,400 lifetime limit	Braces for upper & lower teeth, including removal plus fitting of retainer: 100% of charge
✓ Orthotics (podiatric orthoses)*	12	\$250 per policy combined limit for acupuncture, orthotics (podiatric orthoses), podiatry & remedial massage	Orthotics supply & fit: 70% of charge
✓ Osteopathy	2	\$600 per policy combined limit for chiropractic, exercise physiology, osteopathy & physiotherapy	- Initial visit: 70% of charge - Subsequent visit: 70% of charge
✓ Physiotherapy	2	\$600 per policy combined limit for chiropractic, exercise physiology, osteopathy & physiotherapy	- Initial visit: 70% of charge - Subsequent visit: 70% of charge
✓ Podiatry	2	\$250 per policy combined limit for acupuncture, orthotics (podiatric orthoses), podiatry & remedial massage	- Initial visit: 70% of charge - Subsequent visit: 70% of charge

✓ Psychology	2	\$500 per policy combined limit for audiology, dietetics/dietary advice, eye therapy (orthoptics), non pbs pharmaceuticals, occupational therapy, psychology, speech therapy & vaccinations	- Initial visit: 70% of charge - Subsequent visit: 70% of charge
✓ Remedial massage	2	\$250 per policy combined limit for acupuncture, orthotics (podiatric orthoses), podiatry & remedial massage	- Initial visit: 70% of charge - Subsequent visit: 70% of charge
✓ Speech therapy	2	\$500 per policy combined limit for audiology, dietetics/dietary advice, eye therapy (orthoptics), non pbs pharmaceuticals, occupational therapy, psychology, speech therapy & vaccinations	- Initial visit: 70% of charge - Subsequent visit: 70% of charge
✓ Vaccinations*	0	\$500 per policy combined limit for audiology, dietetics/dietary advice, eye therapy (orthoptics), non pbs pharmaceuticals, occupational therapy, psychology, speech therapy & vaccinations	Per service: 70% of charge

Annual benefit limits apply per calendar year. Myotherapy - 70% of the consultation fee, maximum \$250 per person (combined limit - see Podiatry), 2 month waiting period. Braces, Splints and Garments - up to 70% of the cost, maximum \$250 per person (combined limit - see Podiatry), 12 month waiting period. There are Preventative Health Services available on this cover. Please refer to the product Fact Sheet or contact Australian Unity for further details.

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

- | | | |
|---------------------------------|--------------------|----------------|
| ✗ Ante-natal/Post-natal classes | ✗ Chinese medicine | ✗ Home nursing |
| ✗ Blood glucose monitors | ✗ Hearing aids | |

Ambulance cover

Ambulance cover is provided by the State government for Queensland residents (<https://www.ambulance.qld.gov.au>). This includes cover whilst interstate.

Other features of this ambulance cover: Some authorities provide certain ambulance services at no cost to eligible residents. Refer to your local ambulance provider for more information. Australian Unity won't pay a Benefit if you're eligible to claim from, or are covered by, another source. Australian Unity doesn't pay a benefit towards ambulance subscription services. If you're not covered, this cover includes emergency ambulance to hospital, if transport is coded and invoiced as emergency transport by a state/territory ambulance service/authority. Call-out fees where you're not taken to hospital are limited to 2 ambulance attendances per person per calendar year. This cover doesn't include non-emergency ambulance transportation

Insurer Details

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Call now  **13 29 39**
Sponsor link**Australian Unity Health Limited** <http://www.australianunity.com.au> healthcover@australianunity.com.au **13 29 39**

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