



**GMHBA Limited**  
GMHBA Ultra Extras

**\$149.50 / month**  
(Before Rebate, Discount & Loading)  
Available in WA

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.

This health insurer does not operate a preferred provider scheme.

**Policy ID:** GMH/I14/WBMF10

**Source:** Private Health Information Statement (PHIS)

## Extras Cover

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

Note, for treatments marked with \* : Non PBS Pharmaceuticals must be a private Schedule 4 or Schedule 8 and dispensed via a provider in private practice. PBS contribution applies to Travel Vaccinations

Treatment & waiting period (months)		Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ Acupuncture	2	<b>\$600 per policy</b> combined limit for acupuncture, remedial massage & other services sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ Audiology	2	<b>\$350 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ Blood glucose monitors	12	<b>\$650 per policy</b>	<ul style="list-style-type: none"> <li>Per monitor: 80% of charge</li> </ul>
✓ Chiropractic	2	<b>\$700 per policy</b> combined limit for chiropractic, osteopathy & other services sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ Dietetics/dietary advice	2	<b>\$350 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ Endodontic	12	<b>\$2,000 per policy</b> combined limit for endodontic, general dental, major dental, orthodontic & other services	<ul style="list-style-type: none"> <li>Filling of one root canal: \$86.45</li> </ul>
✓ Eye therapy (orthoptics)	2	<b>\$500 per policy</b> combined limit for eye therapy (orthoptics) & speech therapy	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ General dental	2	<b>\$2,000 per policy</b> combined limit for endodontic, general dental, major dental, orthodontic & other services sub-limits apply	<ul style="list-style-type: none"> <li>Fluoride treatment: \$45</li> <li>Scale &amp; clean: \$120</li> <li>Periodic oral examination: \$56</li> </ul>

✓ <b>Hearing aids</b>	12	<b>\$800 per policy</b>	<ul style="list-style-type: none"> <li>Hearing aid: 100% of charge</li> </ul>
✓ <b>Major dental</b>	12	<b>\$2,000 per policy</b> combined limit for endodontic, general dental, major dental, orthodontic & other services sub-limits apply	<ul style="list-style-type: none"> <li>Surgical tooth extraction: \$101.15</li> <li>Full crown veneered: \$300</li> </ul>
✓ <b>Non PBS pharmaceuticals*</b>	2	<b>\$350 per policy</b> combined limit for non pbs pharmaceuticals & vaccinations sub-limits apply	<ul style="list-style-type: none"> <li>Per eligible prescription: 80% of charge</li> </ul>
✓ <b>Occupational therapy</b>	2	<b>\$500 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ <b>Optical</b>	6	<b>\$300 per policy</b>	<ul style="list-style-type: none"> <li>Multi-focal lenses &amp; frames: 100% of charge</li> <li>Single vision lenses &amp; frames: 100% of charge</li> </ul>
✓ <b>Orthodontic</b>	12	<b>\$2,000 per policy</b> \$2,900 lifetime limit combined limit for endodontic, general dental, major dental, orthodontic & other services sub-limits apply	<ul style="list-style-type: none"> <li>Braces for upper &amp; lower teeth, including removal plus fitting of retainer: \$400</li> </ul>
✓ <b>Orthotics (podiatric orthoses)</b>	12	<b>\$115 per service up to \$230 per policy</b>	<ul style="list-style-type: none"> <li>Orthotics supply &amp; fit: 80% of charge</li> </ul>
✓ <b>Osteopathy</b>	2	<b>\$700 per policy</b> combined limit for chiropractic, osteopathy & other services	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ <b>Physiotherapy</b>	2	<b>\$700 per policy</b> sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ <b>Podiatry</b>	2	<b>\$350 per policy</b> sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ <b>Psychology</b>	2	<b>\$500 per policy</b> sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ <b>Remedial massage</b>	2	<b>\$600 per policy</b> combined limit for acupuncture, remedial massage & other services sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ <b>Speech therapy</b>	0	<b>\$500 per policy</b> combined limit for eye therapy (orthoptics) & speech therapy	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ <b>Vaccinations*</b>	2	<b>\$350 per policy</b> combined limit for non pbs pharmaceuticals & vaccinations	<ul style="list-style-type: none"> <li>Per service: 80% of charge</li> </ul>

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

- ✗ Ante-natal/Post-natal classes
- ✗ Exercise physiology
- ✗ Home nursing
- ✗ Chinese medicine
- ✗ Health management / Healthy lifestyle

**Other features of this general treatment cover:** Annual sub-limit up to \$450 per person, per calendar year applies for preventative dental. Rates discounted for direct debit payment.

## Ambulance cover

Aged Pensioner concession holders are entitled to free ambulance transport services. If you are not eligible for a concession and want to be covered, you can purchase insurance from a private health fund or a subscription through the state ambulance service.

## Insurer Details



**GMHBA Limited**  
GMHBA Ultra Extras

**\$149.50 / month**  
(Before Rebate, Discount & Loading)  
Available in WA

Call now  **1300 4 GMHBA (46422)**  
Sponsor link

### GMHBA Limited

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

 [service@gmhba.com.au](mailto:service@gmhba.com.au)

 **1300 4 GMHBA (46422)**

**Disclaimer:** This document is not a Private Health Information Statement (PHIS), and it is not intended to replace that document. The details contained in the **healthslips.com.au Policy Information** was provided by the insurer to the Australian Government. It is intended as general information. It may not take into account your circumstances. For further information contact the insurer. Information used is Licensed from the Commonwealth of Australia under a Creative Commons 3.0 licence.

Private Health Information Statement is available from the Private Health Insurance Ombudsman website at <https://privatehealth.gov.au/dynamic/Premium/PHIS/GMH/I14/WBMF10>