**GMHBA Limited**
GMHBA Top Extras Corporate

**$185.20 / month**
(Before Rebate, Discount & Loading)
Available in VIC

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:** Two adults (and no-one else).

This health insurer does not operate a preferred provider scheme.

**Policy ID: GMH/I6A/VAAF20**

**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.

| Treatment & waiting period (months) | | Benefit limits per 12 months unless otherwise stated | Examples of maximum benefits |
|---|---|---|---|
| ✓ **Acupuncture** | 2 | **$350 per person up to $700 per policy**<br>combined limit for acupuncture, remedial massage & other services<br>sub-limits apply | • Initial visit: $25<br>• Subsequent visit: $20 |
| ✓ **Audiology** | 2 | **$350 per person** | • Initial visit: $25<br>• Subsequent visit: $20 |
| ✓ **Blood glucose monitors** | 12 | **$200 per policy** | • Per monitor: 100% of charge |
| ✓ **Chiropractic** | 2 | **$350 per person up to $700 per policy**<br>combined limit for chiropractic, osteopathy & other services<br>sub-limits apply | • Initial visit: $26<br>• Subsequent visit: $21 |
| ✓ **Dietetics/dietary advice** | 2 | **$350 per person** | • Initial visit: $60<br>• Subsequent visit: $45 |
| ✓ **Endodontic** | 12 | **$2,000 per person**<br>combined limit for endodontic, general dental, major dental, orthodontic & other services | • Filling of one root canal: $86.45 |
| ✓ **Eye therapy (orthoptics)** | 2 | **$500 per person**<br>combined limit for eye therapy (orthoptics) & speech therapy | • Initial visit: $54<br>• Subsequent visit: $25 |
| ✓ **General dental** | 2 | **$2,000 per person**<br>combined limit for endodontic, general dental, major dental, orthodontic & other services<br>sub-limits apply | • Fluoride treatment: $45<br>• Scale & clean: $120<br>• Periodic oral examination: $56 |

| | | | |
|---|---|---|---|
| ✓ **Hearing aids** | 12 | **$800 per person**<br>sub-limits apply | • Hearing aid: 100% of charge |
| ✓ **Major dental** | 12 | **$2,000 per person**<br>combined limit for endodontic, general dental, major dental, orthodontic & other services<br>sub-limits apply | • Surgical tooth extraction: $101.15<br>• Full crown veneered: $300 |
| ✓ **Non PBS pharmaceuticals*** | 2 | **$350 per person up to $550 per policy**<br>combined limit for non pbs pharmaceuticals & vaccinations<br>sub-limits apply | • Per eligible prescription: 100% of charge |
| ✓ **Occupational therapy** | 2 | **$500 per person up to $800 per policy** | • Initial visit: $54<br>• Subsequent visit: $25 |
| ✓ **Optical** | 6 | **$250 per person** | • Multi-focal lenses & frames: 100% of charge<br>• Single vision lenses & frames: 100% of charge |
| ✓ **Orthodontic** | 12 | **$2,000 per person**<br>$2,900 lifetime limit<br>combined limit for endodontic, general dental, major dental, orthodontic & other services<br>sub-limits apply | • Braces for upper & lower teeth, including removal plus fitting of retainer: $400 |
| ✓ **Orthotics (podiatric orthoses)** | 12 | **$230 per person up to $115 per service up to $460 per policy** | • Orthotics supply & fit: 80% of charge |
| ✓ **Osteopathy** | 2 | **$350 per person up to $700 per policy**<br>combined limit for chiropractic, osteopathy & other services | • Initial visit: $26<br>• Subsequent visit: $21 |
| ✓ **Physiotherapy** | 2 | **$500 per person up to $800 per policy**<br>sub-limits apply | • Initial visit: $36<br>• Subsequent visit: $26 |
| ✓ **Podiatry** | 2 | **$350 per person**<br>sub-limits apply | • Initial visit: $43<br>• Subsequent visit: $43 |
| ✓ **Psychology** | 2 | **$500 per person up to $800 per policy**<br>sub-limits apply | • Initial visit: $54<br>• Subsequent visit: $25 |
| ✓ **Remedial massage** | 2 | **$350 per person up to $700 per policy**<br>combined limit for acupuncture, remedial massage & other services<br>sub-limits apply | • Initial visit: $20<br>• Subsequent visit: $20 |
| ✓ **Speech therapy** | 2 | **$500 per person**<br>combined limit for eye therapy (orthoptics) & speech therapy | • Initial visit: $54<br>• Subsequent visit: $25 |
| ✓ **Vaccinations** | 2 | **$350 per person up to $550 per policy**<br>combined limit for non pbs pharmaceuticals & vaccinations | • Per service: 100% of charge |

Benefits also available towards Home/Bush Nursing, please contact GMHBA for further information.

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

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

**Other features of this general treatment cover:** Annual sub-limit up to $300 per person per year applies for preventative dental.

# Ambulance cover

Pensioner Concession Card and Healthcare Card holders are entitled to free clinically necessary ambulance transport. If you are not eligible for a concession and want to be covered, you can purchase insurance from a private health insurer or take out a subscription with the state ambulance service (https://www.ambulance.vic.gov.au/membership).

# Insurer Details

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Call now 1300 4 GMHBA (46422)
Sponsor link

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**1300 4 GMHBA (46422)**

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