HBF Health Limited
Complete 60

$92.51 / month
(Before Rebate, Discount & Loading)
Available in NSW & ACT

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.

HBF members have hundreds of participating optical stores nationally to choose from with access to a range of fully covered glasses. See http://www.hbf.com.au/health-insurance/find-a-provider.

Policy ID: HBF/I29/NBPNV10

Source: Private Health Information Statement (PHIS)

Extras Cover

This policy includes General treatment (Extras) cover for

Note, for treatments marked with * : Before a benefit is payable on an eligible Pharmacy item, a co-payment amount reasonably determined by HBF is deducted from the cost of each script.

Treatment & waiting period (months)		Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ **Acupuncture**	2	**$350 per policy** combined limit for acupuncture, blood glucose monitors, chinese medicine, health management / healthy lifestyle, remedial massage & other services	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Blood glucose monitors**	2	**$350 per policy** combined limit for acupuncture, blood glucose monitors, chinese medicine, health management / healthy lifestyle, remedial massage & other services sub-limits apply	• Per monitor: 60% of charge
✓ **Chinese medicine**	2	**$350 per policy** combined limit for acupuncture, blood glucose monitors, chinese medicine, health management / healthy lifestyle, remedial massage & other services	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Chiropractic**	2	**$500 per policy** combined limit for chiropractic, exercise physiology, orthotics (podiatric orthoses), osteopathy, physiotherapy & podiatry sub-limits apply	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Dietetics/dietary advice**	2	**$500 per policy** combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, psychology & speech therapy	• Initial visit: 60% of charge • Subsequent visit: 60% of charge

✓ **Endodontic**	12	**$800 per policy** combined limit for endodontic, general dental & major dental	• Filling of one root canal: 60% of charge
✓ **Exercise physiology**	2	**$500 per policy** combined limit for chiropractic, exercise physiology, orthotics (podiatric orthoses), osteopathy, physiotherapy & podiatry	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Eye therapy (orthoptics)**	2	**$500 per policy** combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, psychology & speech therapy	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **General dental**	2	**$800 per policy** combined limit for endodontic, general dental & major dental sub-limits apply	• Fluoride treatment: 60% of charge • Scale & clean: 60% of charge • Surgical tooth extraction: 60% of charge • Periodic oral examination: 60% of charge
✓ **Health management / Healthy lifestyle**	2	**$350 per policy** combined limit for acupuncture, blood glucose monitors, chinese medicine, health management / healthy lifestyle, remedial massage & other services	• Health management: 100% of charge
✓ **Hearing aids**	12	**$600 per person every 3 calendar years**	• Hearing aid: 100% of charge
✓ **Major dental**	12	**$800 per policy** combined limit for endodontic, general dental & major dental sub-limits apply	• Full crown veneered: 60% of charge
✓ **Non PBS pharmaceuticals***	2	**$300 per policy** combined limit for non pbs pharmaceuticals & vaccinations sub-limits apply	• Per eligible prescription: 100% of charge
✓ **Occupational therapy**	2	**$500 per policy** combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, psychology & speech therapy	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Optical**	2	**$250 per policy**	• Multi-focal lenses & frames: 100% of charge • Single vision lenses & frames: 100% of charge
✓ **Orthodontic**	12	**$600 per policy** $1,800 lifetime limit sub-limits apply	• Braces for upper & lower teeth, including removal plus fitting of retainer: 100% of charge
✓ **Orthotics (podiatric orthoses)**	12	**$500 per policy** combined limit for chiropractic, exercise physiology, orthotics (podiatric orthoses), osteopathy, physiotherapy & podiatry sub-limits apply	• Orthotics supply & fit: 60% of charge
✓ **Osteopathy**	2	**$500 per policy** combined limit for chiropractic, exercise physiology, orthotics (podiatric orthoses), osteopathy, physiotherapy & podiatry	• Initial visit: 60% of charge • Subsequent visit: 60% of charge

✓ **Physiotherapy**	2	**$500 per policy** combined limit for chiropractic, exercise physiology, orthotics (podiatric orthoses), osteopathy, physiotherapy & podiatry	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Podiatry**	2	**$500 per policy** combined limit for chiropractic, exercise physiology, orthotics (podiatric orthoses), osteopathy, physiotherapy & podiatry	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Psychology**	2	**$500 per policy** combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, psychology & speech therapy	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Remedial massage**	2	**$350 per policy** combined limit for acupuncture, blood glucose monitors, chinese medicine, health management / healthy lifestyle, remedial massage & other services	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Speech therapy**	2	**$500 per policy** combined limit for dietetics/dietary advice, eye therapy (orthoptics), occupational therapy, psychology & speech therapy	• Initial visit: 60% of charge • Subsequent visit: 60% of charge
✓ **Vaccinations***	2	**$300 per policy** combined limit for non pbs pharmaceuticals & vaccinations sub-limits apply	• Per service: 100% of charge

Complete 60 also includes cover for: CLINICAL PSYCHOLOGY (waiting period 2 months, 60% initial or subsequent visit up to combined limit - see Psychology); NUTRITION (waiting period 2 months, 60% initial or subsequent visit up to combined limit - see Psychology); HYPNOTHERAPY (waiting period 2 months, 60% initial or subsequent visit up to combined limit - see Acupuncture); MYOTHERAPY (waiting period 2 months, 60% initial or subsequent visit up to combined limit - see Acupuncture); APPLIANCES, PROSTHESES AND AIDS (waiting period 2-12 months, 60% up to combined limit - see Acupuncture). **Note: Orthotics (podiatric orthoses) has a $200 sub-limit.

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

- ✗ Ante-natal/Post-natal classes
- ✗ Audiology
- ✗ Home nursing

Ambulance cover

In NSW & ACT this policy provides:

Emergency: Unlimited with a waiting period of 7 days.

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

Other features of this ambulance cover: Emergency ambulance provides full cover for emergency treatment and urgent ambulance transport (by road) within Australia by a State Government ambulance provider or an HBF approved ambulance provider. Services not covered include air ambulance services, transport between a public hospital to your home and transport not provided in an ambulance.

For further information about this policy see: http://www.hbf.com.au/health-insurance/ambulance-cover.html

Insurer Details

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Available in NSW & ACT

HBF Health Limited
http://hbf.com.au
memberservices@hbf.com.au
133 423

Private Health Information Statement is available from the Private Health Insurance Ombudsman website at https://privatehealth.gov.au/dynamic/Premium/PHIS/HBF/I29/NBPNV10