



HBF Health Limited
Top 70

\$204.61 / month
(Before Rebate, Discount & Loading)
Available in TAS

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: One adult & dependants (2 or more people, only one of whom is an adult).

Children (0 - 17), non-classified* dependant (18 - 20) and students (21 - 30), as well as persons with a disability who qualify as a child, non-classified* dependant and student in these age ranges.

*Non-classified dependant: Non-classified Dependant

A person who meets all of the following criteria:

- is aged 18 to 20 (inclusive); and
- does not have a partner (a person in a marital or de facto relationship with the Non-classified Dependant)

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/I30/TBPUS1D

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	\$300 per person combined limit for acupuncture, chinese medicine, remedial massage & other services	<ul style="list-style-type: none"> Initial visit: 70% of charge Subsequent visit: 70% of charge
✓ Blood glucose monitors	2	\$500 per person sub-limits apply	<ul style="list-style-type: none"> Per monitor: 70% of charge
✓ Chinese medicine	2	\$300 per person combined limit for acupuncture, chinese medicine, remedial massage & other services	<ul style="list-style-type: none"> Initial visit: 70% of charge Subsequent visit: 70% of charge
✓ Chiropractic	2	\$400 per person combined limit for chiropractic & osteopathy sub-limits apply	<ul style="list-style-type: none"> Initial visit: 70% of charge Subsequent visit: 70% of charge
✓ Dietetics/dietary advice	2	\$400 per person	<ul style="list-style-type: none"> Initial visit: 70% of charge Subsequent visit: 70% of charge

✓ Endodontic	12	\$1,000 per person combined limit for endodontic & major dental	<ul style="list-style-type: none"> Filling of one root canal: 70% of charge
✓ Exercise physiology	2	\$600 per person combined limit for exercise physiology & physiotherapy	<ul style="list-style-type: none"> Initial visit: 70% of charge Subsequent visit: 70% of charge
✓ Eye therapy (orthoptics)	2	\$400 per person	<ul style="list-style-type: none"> Initial visit: 70% of charge Subsequent visit: 70% of charge
✓ General dental	2	No annual limit sub-limits apply	<ul style="list-style-type: none"> Fluoride treatment: 70% of charge Scale & clean: 70% of charge Surgical tooth extraction: 70% of charge Periodic oral examination: 70% of charge
✓ Health management / Healthy lifestyle	2	\$350 per person	<ul style="list-style-type: none"> Health management: 100% of charge
✓ Hearing aids	12	\$700 per person every 3 calendar years	<ul style="list-style-type: none"> Hearing aid: 100% of charge
✓ Major dental	12	\$1,000 per person combined limit for endodontic & major dental	<ul style="list-style-type: none"> Full crown veneered: 70% of charge
✓ Non PBS pharmaceuticals*	2	\$400 per person combined limit for non pbs pharmaceuticals & vaccinations sub-limits apply	<ul style="list-style-type: none"> Per eligible prescription: 70% of charge
✓ Occupational therapy	2	\$400 per person	<ul style="list-style-type: none"> Initial visit: 70% of charge Subsequent visit: 70% of charge
✓ Optical	2	\$275 per person	<ul style="list-style-type: none"> Multi-focal lenses & frames: 100% of charge Single vision lenses & frames: 100% of charge
✓ Orthodontic	12	\$800 per person \$2,400 lifetime limit sub-limits apply	<ul style="list-style-type: none"> Braces for upper & lower teeth, including removal plus fitting of retainer: 100% of charge
✓ Orthotics (podiatric orthoses)	12	\$400 per person combined limit for orthotics (podiatric orthoses) & podiatry sub-limits apply	<ul style="list-style-type: none"> Orthotics supply & fit: 70% of charge
✓ Osteopathy	2	\$400 per person combined limit for chiropractic & osteopathy	<ul style="list-style-type: none"> Initial visit: 70% of charge Subsequent visit: 70% of charge
✓ Physiotherapy	2	\$600 per person combined limit for exercise physiology & physiotherapy	<ul style="list-style-type: none"> Initial visit: 70% of charge Subsequent visit: 70% of charge
✓ Podiatry	2	\$400 per person combined limit for orthotics (podiatric orthoses) & podiatry	<ul style="list-style-type: none"> Initial visit: 70% of charge Subsequent visit: 70% of charge
✓ Psychology	2	\$500 per person	<ul style="list-style-type: none"> Initial visit: 70% of charge Subsequent visit: 70% of charge
✓ Remedial massage	2	\$300 per person combined limit for acupuncture, chinese medicine, remedial massage & other services	<ul style="list-style-type: none"> Initial visit: 70% of charge Subsequent visit: 70% of charge

✓ Speech therapy	2	\$400 per person	<ul style="list-style-type: none">• Initial visit: 70% of charge• Subsequent visit: 70% of charge
✓ Vaccinations*	2	\$400 per person combined limit for non pbs pharmaceuticals & vaccinations	<ul style="list-style-type: none">• Per service: 100% of charge

Top 70 also includes cover for: CLINICAL PSYCHOLOGY (waiting period 2 months, 70% initial or subsequent visit up to combined limit - see Psychology); HYPNOTHERAPY (waiting period 2 months, 70% initial or subsequent visit up to combined limit - see Acupuncture); MYOTHERAPY (waiting period 2 months, 70% initial or subsequent visit up to combined limit - see Acupuncture); APPLIANCES, PROSTHESES AND AIDS (waiting period 2-12 months, 70% up to combined limit - see Blood glucose monitors); NUTRITION (waiting period 2 months, 70% initial or subsequent visit up to combined limit - see Dietetics/dietary advice). **Note: Orthotics (podiatric orthoses) has a \$250 sub-limit.

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

✗ Ante-natal/Post-natal classes

✗ Audiology

✗ Home nursing

Ambulance cover

Ambulance cover is provided by the State government for residents of Tasmania. This may include cover whilst interstate, except for South Australia and Queensland where no cover applies. In other states please check with Ambulance Tasmania - https://www.health.tas.gov.au/ambulance/fees_and_accounts.

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

Insurer Details



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Call now **133 423**
Sponsor link

HBF Health Limited

<http://hbf.com.au>

memberservices@hbf.com.au

133 423

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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/HBF/I30/TBPUS1D>