

**Health Insurance Fund of Australia Limited**  
**Special Options****\$125.10 / 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:** Two adults & dependants (3 or more people, only 2 of whom are adults).

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: HIF describes any child dependant up to the age of 20

HIF has partnered with a network of providers to make a selected range of services more affordable. By choosing an HIF Choice Network provider you'll receive low or no out-of-pocket costs. See [www.hif.com.au/choice-network](http://www.hif.com.au/choice-network)

**Policy ID:** HIF/A1/WASI2D**Source:** Private Health Information Statement (PHIS)

## Extras Cover

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

Note, for treatments marked with \*: Optical benefit paid on frames and prescription optical items. The limits detailed below are subject to a combined overall person limit of \$450 (\$900 per couple or family membership) for complementary therapies, chiro, osteo, physio and podiatry consultations. Our Complementary Therapies sub-limit \$200 per person (\$400 per couple or family membership) includes: acupuncture, myotherapy, remedial massage and traditional Chinese medicine. Treatment must be provided by a practitioner who is registered with HIF in the speciality for which the charge is raised. Benefits are not payable on medicines.

Treatment & waiting period (months)		Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ Acupuncture*	2	<b>\$450 per person</b> combined limit for acupuncture, chinese medicine, chiropractic, osteopathy, physiotherapy, podiatry, remedial massage & other services sub-limits apply	<ul style="list-style-type: none"><li>Initial visit: \$25</li><li>Subsequent visit: \$25</li></ul>
✓ Chinese medicine*	2	<b>\$450 per person</b> combined limit for acupuncture, chinese medicine, chiropractic, osteopathy, physiotherapy, podiatry, remedial massage & other services sub-limits apply	<ul style="list-style-type: none"><li>Initial visit: \$25</li><li>Subsequent visit: \$25</li></ul>
✓ Chiropractic*	2	<b>\$450 per person</b> combined limit for acupuncture, chinese medicine, chiropractic, osteopathy, physiotherapy, podiatry, remedial massage & other services sub-limits apply	<ul style="list-style-type: none"><li>Initial visit: \$27.5</li><li>Subsequent visit: \$27.5</li></ul>
✓ Dietetics/dietary advice	2	<b>\$252 per person</b>	<ul style="list-style-type: none"><li>Initial visit: \$36</li><li>Subsequent visit: \$18</li></ul>

✓ Endodontic	2	<b>\$1,000 per person</b> combined limit for endodontic, general dental, major dental, orthodontic & other services sub-limits apply	<ul style="list-style-type: none"> <li>Filling of one root canal: \$113.8</li> </ul>
✓ General dental	2	<b>\$1,000 per person</b> combined limit for endodontic, general dental, major dental, orthodontic & other services sub-limits apply	<ul style="list-style-type: none"> <li>Fluoride treatment: \$33.2</li> <li>Scale &amp; clean: \$110.35</li> <li>Periodic oral examination: \$54.35</li> </ul>
✓ Health management / Healthy lifestyle	2	<b>\$75 per person</b>	<ul style="list-style-type: none"> <li>Health management: \$75</li> </ul>
✓ Major dental	12	<b>\$1,000 per person</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: \$104.15</li> <li>Full crown veneered: \$684.65</li> </ul>
✓ Non PBS pharmaceuticals	2	<b>\$200 per person</b>	<ul style="list-style-type: none"> <li>Per eligible prescription: \$80</li> </ul>
✓ Optical*	2	<b>\$200 per person</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>
✓ Orthodontic	12	<b>\$1,000 per person</b> 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: \$1000</li> </ul>
✓ Osteopathy*	2	<b>\$450 per person</b> combined limit for acupuncture, chinese medicine, chiropractic, osteopathy, physiotherapy, podiatry, remedial massage & other services sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: \$27.5</li> <li>Subsequent visit: \$27.5</li> </ul>
✓ Physiotherapy*	2	<b>\$450 per person</b> combined limit for acupuncture, chinese medicine, chiropractic, osteopathy, physiotherapy, podiatry, remedial massage & other services sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: \$35</li> <li>Subsequent visit: \$35</li> </ul>
✓ Podiatry*	2	<b>\$450 per person</b> combined limit for acupuncture, chinese medicine, chiropractic, osteopathy, physiotherapy, podiatry, remedial massage & other services sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: \$32</li> <li>Subsequent visit: \$23</li> </ul>
✓ Remedial massage*	2	<b>\$450 per person</b> combined limit for acupuncture, chinese medicine, chiropractic, osteopathy, physiotherapy, podiatry, remedial massage & other services sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: \$25</li> <li>Subsequent visit: \$25</li> </ul>

A 12 month waiting period applies to dental items: 322-324, 331, 595, and 596. Benefits for replacement dentures and partial dentures are not paid within three years of previous supply. Pharmacy benefit paid after deduction of the PBS co-payment at 100% up to \$80 per script. A \$20 benefit (1 per person, per calendar year) will be paid on eligible claims for flu vaccinations from a registered pharmacy only. Like most Extras health covers, there are annual limits (a limit on how much we will pay toward your claims) for most services under Special Options. However, your benefit limits will be refreshed every year on January 1. What's more, we'll increase your annual limits on a number of services. For example, benefits and annual limits for major dental services increase each year for the first five years of membership.

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

- |                                 |                            |                                  |
|---------------------------------|----------------------------|----------------------------------|
| ✗ Ante-natal/Post-natal classes | ✗ Eye therapy (orthoptics) | ✗ Orthotics (podiatric orthoses) |
| ✗ Audiology                     | ✗ Hearing aids             | ✗ Psychology                     |
| ✗ Blood glucose monitors        | ✗ Home nursing             | ✗ Speech therapy                 |
| ✗ Exercise physiology           | ✗ Occupational therapy     | ✗ Vaccinations                   |

**Other features of this general treatment cover:** Special Options includes all those essential services like dental, optical, podiatry, chiro, pharmacy, physio, ambulance and more. It's a step up from Saver Options, covering those more complex 'major' dental services like orthodontics, crowns and bridges. It also offers bigger benefits for services like optical, chiro and physio.

**For further information about this policy see:** <https://www.hif.com.au/specialoptions-factsheet>

## Ambulance cover

In WA this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

Non-emergency: Unlimited transport with a waiting period of 30 days.

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

**Other features of this ambulance cover:** There is no limit to the number of emergency ambulance services you use. If you're taken to a hospital's emergency department for urgent treatment, we'll cover 100% of the charge. If it's a non-emergency ambulance service, you only make a \$50 co-payment per trip. Not covered: Inter-hospital transportation except for inter-hospital transfers relating to an emergency or new illness where approved on a case by case basis by HIF. Transportation from a hospital to your home, nursing home or other hospital. Transportation for ongoing medical treatment. Off road, sea or air ambulance (plane, helicopter or boat).

**For further information about this policy see:** <https://www.hif.com.au/ambulance>

## Insurer Details



Health Insurance Fund of Australia Limited  
Special Options

**\$125.10 / month**

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Available in WA

Call now  **1300 134 060**  
Sponsor link

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

 [hello@hif.com.au](mailto:hello@hif.com.au)

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