

**Latrobe Health Services**  
**Premier Extras****\$259.04 / month**

(Before Rebate, Discount &amp; Loading)

Available in QLD

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:** LHS/I10/QCBK20

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

## Extras Cover

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

| Treatment & waiting period (months)     |    | Benefit limits per 12 months unless otherwise stated                               | Examples of maximum benefits                                                                                                                                                              |
|-----------------------------------------|----|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ✓ Acupuncture                           | 2  | \$1,000 per person                                                                 | <ul style="list-style-type: none"><li>Initial visit: \$34</li><li>Subsequent visit: \$34</li></ul>                                                                                        |
| ✓ Audiology                             | 2  | \$1,000 per person                                                                 | <ul style="list-style-type: none"><li>Initial visit: \$65</li><li>Subsequent visit: \$65</li></ul>                                                                                        |
| ✓ Blood glucose monitors                | 12 | \$250 total per person every 3 years. \$500 total all appliances every 3 years     | <ul style="list-style-type: none"><li>Per monitor: 90% of charge</li></ul>                                                                                                                |
| ✓ Chiropractic                          | 2  | \$350 per person                                                                   | <ul style="list-style-type: none"><li>Initial visit: \$45</li><li>Subsequent visit: \$45</li></ul>                                                                                        |
| ✓ Dietetics/dietary advice              | 2  | \$1,000 per person                                                                 | <ul style="list-style-type: none"><li>Initial visit: \$45</li><li>Subsequent visit: \$45</li></ul>                                                                                        |
| ✓ Endodontic                            | 2  | No annual limit<br>combined limit for endodontic & general dental sub-limits apply | <ul style="list-style-type: none"><li>Filling of one root canal: \$145</li></ul>                                                                                                          |
| ✓ Eye therapy (orthoptics)              | 2  | \$1,000 per person                                                                 | <ul style="list-style-type: none"><li>Initial visit: \$50</li><li>Subsequent visit: \$50</li></ul>                                                                                        |
| ✓ General dental                        | 2  | No annual limit<br>combined limit for endodontic & general dental                  | <ul style="list-style-type: none"><li>Fluoride treatment: \$27</li><li>Scale &amp; clean: \$75</li><li>Surgical tooth extraction: \$140</li><li>Periodic oral examination: \$42</li></ul> |
| ✓ Health management / Healthy lifestyle | 2  | \$600 per person                                                                   | <ul style="list-style-type: none"><li>Health management: 70% of charge</li></ul>                                                                                                          |
| ✓ Hearing aids                          | 12 | \$1,000 per person                                                                 | <ul style="list-style-type: none"><li>Hearing aid: \$1000</li></ul>                                                                                                                       |

|                                  |    |                                                                                  |                                                                                                                                            |
|----------------------------------|----|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| ✓ Home nursing                   | 2  | \$1,000 per person                                                               | <ul style="list-style-type: none"> <li>Initial visit: \$40</li> <li>Subsequent visit: \$40</li> </ul>                                      |
| ✓ Major dental                   | 12 | \$1,500 per person                                                               | <ul style="list-style-type: none"> <li>Full crown veneered: \$680</li> </ul>                                                               |
| ✓ Non PBS pharmaceuticals        | 2  | \$400 per person<br>combined limit for non pbs pharmaceuticals & vaccinations    | <ul style="list-style-type: none"> <li>Per eligible prescription: \$100</li> </ul>                                                         |
| ✓ Occupational therapy           | 2  | \$1,000 per person                                                               | <ul style="list-style-type: none"> <li>Initial visit: \$50</li> <li>Subsequent visit: \$50</li> </ul>                                      |
| ✓ Optical                        | 6  | \$250 per person                                                                 | <ul style="list-style-type: none"> <li>Multi-focal lenses &amp; frames: \$250</li> <li>Single vision lenses &amp; frames: \$250</li> </ul> |
| ✓ Orthodontic                    | 12 | \$300 per person<br>\$3,000 lifetime limit                                       | <ul style="list-style-type: none"> <li>Braces for upper &amp; lower teeth, including removal plus fitting of retainer: \$900</li> </ul>    |
| ✓ Orthotics (podiatric orthoses) | 2  | \$600 per person<br>combined limit for orthotics (podiatric orthoses) & podiatry | <ul style="list-style-type: none"> <li>Orthotics supply &amp; fit: \$100</li> </ul>                                                        |
| ✓ Osteopathy                     | 2  | \$1,000 per person                                                               | <ul style="list-style-type: none"> <li>Initial visit: \$45</li> <li>Subsequent visit: \$45</li> </ul>                                      |
| ✓ Physiotherapy                  | 2  | \$1,000 per person                                                               | <ul style="list-style-type: none"> <li>Initial visit: \$55</li> <li>Subsequent visit: \$55</li> </ul>                                      |
| ✓ Podiatry                       | 2  | \$600 per person<br>combined limit for orthotics (podiatric orthoses) & podiatry | <ul style="list-style-type: none"> <li>Initial visit: \$30</li> <li>Subsequent visit: \$30</li> </ul>                                      |
| ✓ Psychology                     | 2  | \$450 per person                                                                 | <ul style="list-style-type: none"> <li>Initial visit: \$80</li> <li>Subsequent visit: \$80</li> </ul>                                      |
| ✓ Remedial massage               | 2  | \$350 per person                                                                 | <ul style="list-style-type: none"> <li>Initial visit: \$45</li> <li>Subsequent visit: \$45</li> </ul>                                      |
| ✓ Speech therapy                 | 2  | \$1,000 per person                                                               | <ul style="list-style-type: none"> <li>Initial visit: \$60</li> <li>Subsequent visit: \$60</li> </ul>                                      |
| ✓ Vaccinations                   | 2  | \$400 per person<br>combined limit for non pbs pharmaceuticals & vaccinations    | <ul style="list-style-type: none"> <li>Per service: \$100</li> </ul>                                                                       |

A benefit is also payable for myotherapy, health appliances & aids, such as CPAP or TENS machine, non surgically implanted prosthesis, health screenings and a 100% rebate on full ambulance subscriptions when paid voluntarily but not as a state tax or levy. Orthodontic benefits increase with years of membership. The orthotic benefit shown is a guide only and benefits will differ according to the orthotic prescribed. Vaccinations are limited to travel vaccines and must be Latrobe approved.

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

✗ Ante-natal/Post-natal classes

✗ Chinese medicine

✗ Exercise physiology

## Ambulance cover

Ambulance cover is provided by the State government for Queensland residents (<https://www.ambulance.qld.gov.au>). This includes cover whilst interstate.

For further information about this policy see: <https://www.latrobehealth.com.au/health-cover/emergency-ambulance-cover/>

## Insurer Details



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Premier Extras

**\$259.04 / month**

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Available in QLD

Call now  **1300 362 144**  
Sponsor link

### Latrobe Health Services

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

 [info@lhs.com.au](mailto:info@lhs.com.au)

 **1300 362 144**

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