

**Latrobe Health Services**  
**Premier Extras****\$323.80 / month**

(Before Rebate, Discount &amp; 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, including non-student dependants (3 or more people, only 2 of whom are adults).

Children (0 - 17), non-classified\* dependant (18 - 20), students (21 - 31) and non-students (21 to 31), as well as persons with a disability who qualify as a child, non-classified\* dependant, student and non-student in these age ranges.

\*Non-classified dependant: A person who is between the ages of 18 & 20 who does not have a spouse or partner.

This health insurer does not operate a preferred provider scheme.

**Policy ID:** LHS/I10/WCCB2Y**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 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 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 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 \$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 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 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 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

In WA this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

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

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

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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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