

**Latrobe Health Services**
Top Extras**\$149.26 / month**
(Before Rebate, Discount & Loading)
Available in NT

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/I15/DCJJ20

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	\$450 per person up to \$900 per policy combined limit for acupuncture, chiropractic, osteopathy, remedial massage & other services	<ul style="list-style-type: none">Initial visit: \$26Subsequent visit: \$26
✓ Audiology	2	\$300 per person up to \$600 per policy	<ul style="list-style-type: none">Initial visit: \$30Subsequent visit: \$30
✓ Blood glucose monitors	12	\$250 per person up to \$500 per policy sub-limits apply	<ul style="list-style-type: none">Per monitor: 80% of charge
✓ Chiropractic	2	\$450 per person up to \$900 per policy combined limit for acupuncture, chiropractic, osteopathy, remedial massage & other services	<ul style="list-style-type: none">Initial visit: \$26Subsequent visit: \$26
✓ Dietetics/dietary advice	2	\$300 per person up to \$600 per policy	<ul style="list-style-type: none">Initial visit: \$30Subsequent visit: \$30
✓ Endodontic	2	\$1,200 per person up to \$2,400 per policy combined limit for endodontic, general dental, major dental & other services sub-limits apply	<ul style="list-style-type: none">Filling of one root canal: \$109.8
✓ Eye therapy (orthoptics)	2	\$350 per person up to \$700 per policy combined limit for eye therapy (orthoptics), occupational therapy & speech therapy	<ul style="list-style-type: none">Initial visit: \$30Subsequent visit: \$30
✓ General dental	2	\$1,200 per person up to \$2,400 per policy combined limit for endodontic, general dental, major dental & other services sub-limits apply	<ul style="list-style-type: none">Fluoride treatment: \$23.2Scale & clean: \$57.6Surgical tooth extraction: \$104.3Periodic oral examination: \$30.5

✓ Health management / Healthy lifestyle	2	\$70 per person	<ul style="list-style-type: none"> Health management: \$70
✓ Hearing aids	12	\$650 per person	<ul style="list-style-type: none"> Hearing aid: \$650
✓ Home nursing	2	\$250 per person up to \$500 per policy	<ul style="list-style-type: none"> Initial visit: \$25 Subsequent visit: \$25
✓ Major dental	12	\$1,200 per person up to \$2,400 per policy combined limit for endodontic, general dental, major dental & other services	<ul style="list-style-type: none"> Full crown veneered: \$556.8
✓ Non PBS pharmaceuticals	2	\$350 per person up to \$700 per policy combined limit for non pbs pharmaceuticals & vaccinations	<ul style="list-style-type: none"> Per eligible prescription: \$35
✓ Occupational therapy	2	\$350 per person up to \$700 per policy combined limit for eye therapy (orthoptics), occupational therapy & speech therapy	<ul style="list-style-type: none"> Initial visit: \$30 Subsequent visit: \$30
✓ Optical	6	\$200 per person	<ul style="list-style-type: none"> Multi-focal lenses & frames: \$200 Single vision lenses & frames: \$200
✓ Orthodontic	12	\$300 per person \$2,000 lifetime limit	<ul style="list-style-type: none"> Braces for upper & lower teeth, including removal plus fitting of retainer: \$900
✓ Orthotics (podiatric orthoses)	2	\$300 per person combined limit for orthotics (podiatric orthoses) & podiatry	<ul style="list-style-type: none"> Orthotics supply & fit: \$70
✓ Osteopathy	2	\$450 per person up to \$900 per policy combined limit for acupuncture, chiropractic, osteopathy, remedial massage & other services	<ul style="list-style-type: none"> Initial visit: \$26 Subsequent visit: \$26
✓ Physiotherapy	2	\$350 per person up to \$700 per policy	<ul style="list-style-type: none"> Initial visit: \$30 Subsequent visit: \$30
✓ Podiatry	2	\$300 per person combined limit for orthotics (podiatric orthoses) & podiatry	<ul style="list-style-type: none"> Initial visit: \$25 Subsequent visit: \$25
✓ Psychology	2	\$300 per person up to \$600 per policy	<ul style="list-style-type: none"> Initial visit: \$50 Subsequent visit: \$50
✓ Remedial massage	2	\$450 per person up to \$900 per policy combined limit for acupuncture, chiropractic, osteopathy, remedial massage & other services	<ul style="list-style-type: none"> Initial visit: \$26 Subsequent visit: \$26
✓ Speech therapy	2	\$350 per person up to \$700 per policy combined limit for eye therapy (orthoptics), occupational therapy & speech therapy	<ul style="list-style-type: none"> Initial visit: \$30 Subsequent visit: \$30
✓ Vaccinations	2	\$350 per person up to \$700 per policy combined limit for non pbs pharmaceuticals & vaccinations	<ul style="list-style-type: none"> Per service: 70% of charge

A benefit is paid for state ambulance subscriptions when paid voluntarily but not as a state tax or levy. Benefit is 100% of the cost. Benefits are also payable for myotherapy, blood pressure monitors, CPAP machines, air compressors, TENS machines, lymphoedema garments, non-surgically implanted prostheses, nebulisers and health screenings. The orthotic benefit shown is a guide only and benefits will differ according to the orthotic prescribed. Vaccines are limited to travel and allergy 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

Other features of this general treatment cover: Orthodontic and major dental benefits increase with years of membership.

Ambulance cover

Pensioner Concession Card and Commonwealth Seniors Health Card holders are entitled to free ambulance transport services. St John's ambulance offers a subscription service for ambulance cover in the Northern Territory (<https://www.stjohnnt.org.au/ambulance/ambulance-cover.php>). Cover is included whilst interstate for less than 21 days.

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

Insurer Details



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Call now **1300 362 144**
Sponsor link

Latrobe Health Services <http://www.latrobehealth.com.au> info@lhs.com.au **1300 362 144**

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