

**Latrobe Health Services**  
Top Extras**\$74.63 / month**  
(Before Rebate, Discount & Loading)  
Available in NSW & ACT

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:** Only one person.

This health insurer does not operate a preferred provider scheme.

Policy ID: LHS/I15/NCIS10

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

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

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

Health Care Concession Card, Pensioner Concession Card, and Commonwealth Seniors Health Card holders are entitled to free ambulance transport services. If you are not eligible for a concession and want to be covered, you can purchase insurance from a private health fund.

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

## Insurer Details



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Top 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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