

**Latrobe Health Services**  
**Core Essential Extras****\$52.63 / month**

(Before Rebate, Discount &amp; 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:** One adult & dependants (2 or more people, only one of whom is an adult).

Children (0 - 17), non-classified\* dependant (18 - 20) and students (21 - 31), as well as persons with a disability who qualify as a child, non-classified\* dependant and 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 policy must be purchased with a hospital policy.

This health insurer does not operate a preferred provider scheme.

**Policy ID:** LHS/I16/DBLH1D**Source:** Private Health Information Statement (PHIS)

## Extras Cover

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

Note, for treatments marked with \*: Periodic Oral Examination - 1 free up to \$60, Scale and clean - 1 free up to \$120, Fluoride Treatment - 2 free up to \$36.

| Treatment & waiting period (months) |   | Benefit limits per 12 months unless otherwise stated                                                                                                                                                        | Examples of maximum benefits                                                                       |
|-------------------------------------|---|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| ✓ Acupuncture                       | 2 | <b>\$350 per person up to \$700 per policy</b><br>combined limit for acupuncture, chiropractic, dietetics/dietary advice, exercise physiology, osteopathy, physiotherapy, remedial massage & other services | <ul style="list-style-type: none"><li>Initial visit: \$30</li><li>Subsequent visit: \$30</li></ul> |
| ✓ Chiropractic                      | 2 | <b>\$350 per person up to \$700 per policy</b><br>combined limit for acupuncture, chiropractic, dietetics/dietary advice, exercise physiology, osteopathy, physiotherapy, remedial massage & other services | <ul style="list-style-type: none"><li>Initial visit: \$30</li><li>Subsequent visit: \$30</li></ul> |
| ✓ Dietetics/dietary advice          | 2 | <b>\$350 per person up to \$700 per policy</b><br>combined limit for acupuncture, chiropractic, dietetics/dietary advice, exercise physiology, osteopathy, physiotherapy, remedial massage & other services | <ul style="list-style-type: none"><li>Initial visit: \$30</li><li>Subsequent visit: \$30</li></ul> |
| ✓ Endodontic                        | 2 | <b>\$375 per person</b><br>combined limit for endodontic & general dental                                                                                                                                   | <ul style="list-style-type: none"><li>Filling of one root canal: 50% of charge</li></ul>           |
| ✓ Exercise physiology               | 2 | <b>\$350 per person up to \$700 per policy</b><br>combined limit for acupuncture, chiropractic, dietetics/dietary advice, exercise physiology, osteopathy, physiotherapy, remedial massage & other services | <ul style="list-style-type: none"><li>Initial visit: \$30</li><li>Subsequent visit: \$30</li></ul> |

|                           |   |                                                                                                                                                                                                             |                                                                                                                                                                                                                          |
|---------------------------|---|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ✓ <b>General dental</b>   | 2 | <b>\$375 per person</b><br>combined limit for endodontic & general dental                                                                                                                                   | <ul style="list-style-type: none"> <li>Fluoride treatment: \$36</li> <li>Scale &amp; clean: 50% of charge</li> <li>Surgical tooth extraction: 50% of charge</li> <li>Periodic oral examination: 50% of charge</li> </ul> |
| ✓ <b>Optical</b>          | 6 | <b>\$175 per person</b>                                                                                                                                                                                     | <ul style="list-style-type: none"> <li>Multi-focal lenses &amp; frames: \$175</li> <li>Single vision lenses &amp; frames: \$175</li> </ul>                                                                               |
| ✓ <b>Osteopathy</b>       | 2 | <b>\$350 per person up to \$700 per policy</b><br>combined limit for acupuncture, chiropractic, dietetics/dietary advice, exercise physiology, osteopathy, physiotherapy, remedial massage & other services | <ul style="list-style-type: none"> <li>Initial visit: \$30</li> <li>Subsequent visit: \$30</li> </ul>                                                                                                                    |
| ✓ <b>Physiotherapy</b>    | 2 | <b>\$350 per person up to \$700 per policy</b><br>combined limit for acupuncture, chiropractic, dietetics/dietary advice, exercise physiology, osteopathy, physiotherapy, remedial massage & other services | <ul style="list-style-type: none"> <li>Initial visit: \$30</li> <li>Subsequent visit: \$30</li> </ul>                                                                                                                    |
| ✓ <b>Psychology</b>       | 2 | <b>\$200 per person</b>                                                                                                                                                                                     | <ul style="list-style-type: none"> <li>Initial visit: \$30</li> <li>Subsequent visit: \$30</li> </ul>                                                                                                                    |
| ✓ <b>Remedial massage</b> | 2 | <b>\$350 per person up to \$700 per policy</b><br>combined limit for acupuncture, chiropractic, dietetics/dietary advice, exercise physiology, osteopathy, physiotherapy, remedial massage & other services | <ul style="list-style-type: none"> <li>Initial visit: \$30</li> <li>Subsequent visit: \$30</li> </ul>                                                                                                                    |

Periodic Oral Examination - \$60 for 1 service, 50% for additional services. Scale and clean - \$120 for 1 service, 50% for additional services. Fluoride Treatment - \$36 for 2 services, limit 2 services per person per year. A benefit is also payable for myotherapy, health appliances & aids such as crutches, knee braces, splints, cam boot and a 50% rebate on full ambulance subscriptions when paid voluntarily but not as a state tax or levy. When this extras cover is coupled with a hospital cover a benefit bonus will also accumulate.

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

- |                                 |                                         |                                  |
|---------------------------------|-----------------------------------------|----------------------------------|
| ✗ Ante-natal/Post-natal classes | ✗ Health management / Healthy lifestyle | ✗ Occupational therapy           |
| ✗ Audiology                     | ✗ Hearing aids                          | ✗ Orthodontic                    |
| ✗ Blood glucose monitors        | ✗ Home nursing                          | ✗ Orthotics (podiatric orthoses) |
| ✗ Chinese medicine              | ✗ Major dental                          | ✗ Podiatry                       |
| ✗ Eye therapy (orthoptics)      | ✗ Non PBS pharmaceuticals               | ✗ Speech therapy                 |
|                                 |                                         | ✗ Vaccinations                   |

**Other features of this general treatment cover:** When combined with hospital, also includes a Benefit Bonus of \$50 each year per person capped at \$100 per membership, accruing up to \$250 per person capped at \$500 per membership. For Couple and Family memberships, each person may only claim up to 50% of the accrued benefit bonus in any one year. Benefit Bonus limits refresh each year on join anniversary. If unused, benefit bonus rolls over up to a maximum of 5 years' benefit (\$250 per person capped at \$500 per membership)

For further information about this policy see: <https://www.latrobehealth.com.au/health-cover/cover-extras/core-singles-and-couples/>

## Ambulance cover

In NT 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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**\$52.63 / month**

(Before Rebate, Discount & Loading)

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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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