



Latrobe Health Services
Core Families Extras

\$93.50 / month

(Before Rebate, Discount & Loading)

Available in TAS

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/I17/TBNC20

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 \$150 per person up to \$450 per policy combined limit for acupuncture, dietetics/dietary advice, remedial massage & other services	<ul style="list-style-type: none"> Initial visit: \$30 Subsequent visit: \$30
✓ Ante-natal/Post-natal classes	2 \$200 per person up to \$600 per policy combined limit for ante-natal/post-natal classes, chiropractic, exercise physiology, osteopathy, physiotherapy, speech therapy & other services	<ul style="list-style-type: none"> Initial visit: \$30 Subsequent visit: \$30
✓ Chiropractic	2 \$200 per person up to \$600 per policy combined limit for ante-natal/post-natal classes, chiropractic, exercise physiology, osteopathy, physiotherapy, speech therapy & other services	<ul style="list-style-type: none"> Initial visit: \$30 Subsequent visit: \$30
✓ Dietetics/dietary advice	2 \$150 per person up to \$450 per policy combined limit for acupuncture, dietetics/dietary advice, remedial massage & other services	<ul style="list-style-type: none"> Initial visit: \$30 Subsequent visit: \$30
✓ Endodontic	2 \$375 per person combined limit for endodontic & general dental	<ul style="list-style-type: none"> Filling of one root canal: \$131.8
✓ Exercise physiology	2 \$200 per person up to \$600 per policy combined limit for ante-natal/post-natal classes, chiropractic, exercise physiology, osteopathy, physiotherapy, speech therapy & other services	<ul style="list-style-type: none"> Initial visit: \$30 Subsequent visit: \$30
✓ General dental	2 \$375 per person combined limit for endodontic & general dental	<ul style="list-style-type: none"> Fluoride treatment: \$20 Scale & clean: \$60 Periodic oral examination: \$32
✓ Health management / Healthy lifestyle	12 \$225 per membership across all appliances every 2 years	<ul style="list-style-type: none"> Health management: 65% of charge

✓ Optical	6	\$200 per person	<ul style="list-style-type: none"> Single vision lenses & frames: \$200
✓ Osteopathy	2	\$200 per person up to \$600 per policy combined limit for ante-natal/post-natal classes, chiropractic, exercise physiology, osteopathy, physiotherapy, speech therapy & other services	<ul style="list-style-type: none"> Initial visit: \$40 Subsequent visit: \$40
✓ Physiotherapy	2	\$200 per person up to \$600 per policy combined limit for ante-natal/post-natal classes, chiropractic, exercise physiology, osteopathy, physiotherapy, speech therapy & other services	<ul style="list-style-type: none"> Initial visit: \$40 Subsequent visit: \$40
✓ Psychology	2	\$225 per person up to \$675 per policy	<ul style="list-style-type: none"> Initial visit: \$30 Subsequent visit: \$30
✓ Remedial massage	2	\$150 per person up to \$450 per policy combined limit for acupuncture, dietetics/dietary advice, remedial massage & other services	<ul style="list-style-type: none"> Initial visit: \$35 Subsequent visit: \$35
✓ Speech therapy	2	\$200 per person up to \$600 per policy combined limit for ante-natal/post-natal classes, chiropractic, exercise physiology, osteopathy, physiotherapy, speech therapy & other services	<ul style="list-style-type: none"> Initial visit: \$30 Subsequent visit: \$30

Periodic Oral Examination - 1 free up to \$60 and \$32 for additional services. Scale and clean - 1 free up to \$120 and \$60 for additional services. Fluoride Treatment - 2 free up to \$36 and \$20 for additional services. A benefit is also payable for myotherapy, health appliances & aids such as crutches, knee braces, splints, cam boot, nebuliser, asthma and peak flow meters 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

✗ Audiology	✗ Home nursing	✗ Orthotics (podiatric orthoses)
✗ Blood glucose monitors	✗ Major dental	✗ Podiatry
✗ Chinese medicine	✗ Non PBS pharmaceuticals	✗ Vaccinations
✗ Eye therapy (orthoptics)	✗ Occupational therapy	
✗ Hearing aids	✗ Orthodontic	

Ambulance cover

Ambulance cover is provided by the State government for residents of Tasmania. This may include cover whilst interstate, except for South Australia and Queensland where no cover applies. In other states please check with Ambulance Tasmania - https://www.health.tas.gov.au/ambulance/fees_and_accounts.

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

Insurer Details



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Core Families Extras

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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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<https://privatehealth.gov.au/dynamic/Premium/PHIS/LHS/I17/TBNC20>