



**Latrobe Health Services**  
Advantage Family Care Extras

**\$113.06 / month**

(Before Rebate, Discount & Loading)

Available in QLD

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, including non-student dependants (2 or more people, only one of whom is an adult).

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/I2/QBDW1Y

**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    \$300 per person	<ul style="list-style-type: none"><li>Initial visit: \$25</li><li>Subsequent visit: \$17</li></ul>
✓ Audiology	2    \$300 per person	<ul style="list-style-type: none"><li>Initial visit: \$25</li><li>Subsequent visit: \$17</li></ul>
✓ Blood glucose monitors	12    \$200 per person up to \$400 per policy	<ul style="list-style-type: none"><li>Per monitor: 70% of charge</li></ul>
✓ Chiropractic	2    \$300 per person up to \$600 per policy combined limit for chiropractic, eye therapy (orthoptics), home nursing, non pbs pharmaceuticals, occupational therapy, osteopathy, physiotherapy, remedial massage, speech therapy & other services	<ul style="list-style-type: none"><li>Initial visit: \$26</li><li>Subsequent visit: \$19</li></ul>
✓ Dietetics/dietary advice	2    \$300 per person	<ul style="list-style-type: none"><li>Initial visit: \$25</li><li>Subsequent visit: \$17</li></ul>
✓ Endodontic	3    \$1,000 per person up to \$2,000 per policy combined limit for endodontic, general dental & major dental sub-limits apply	<ul style="list-style-type: none"><li>Filling of one root canal: \$93.1</li></ul>
✓ Eye therapy (orthoptics)	2    \$300 per person up to \$600 per policy combined limit for chiropractic, eye therapy (orthoptics), home nursing, non pbs pharmaceuticals, occupational therapy, osteopathy, physiotherapy, remedial massage, speech therapy & other services	<ul style="list-style-type: none"><li>Initial visit: \$25</li><li>Subsequent visit: \$17</li></ul>

<b>✓ General dental</b>	3	<b>\$1,000 per person up to \$2,000 per policy</b> combined limit for endodontic, general dental & major dental sub-limits apply	<ul style="list-style-type: none"> <li>Fluoride treatment: \$19.5</li> <li>Scale &amp; clean: \$50</li> <li>Surgical tooth extraction: \$88</li> <li>Periodic oral examination: \$26</li> </ul>
<b>✓ Health management / Healthy lifestyle</b>	2		<ul style="list-style-type: none"> <li>Health management: \$55</li> </ul>
<b>✓ Hearing aids</b>	12	<b>\$500 per person</b>	<ul style="list-style-type: none"> <li>Hearing aid: \$500</li> </ul>
<b>✓ Home nursing</b>	2	<b>\$300 per person up to \$600 per policy</b> combined limit for chiropractic, eye therapy (orthoptics), home nursing, non pbs pharmaceuticals, occupational therapy, osteopathy, physiotherapy, remedial massage, speech therapy & other services	<ul style="list-style-type: none"> <li>Initial visit: \$25</li> <li>Subsequent visit: \$17</li> </ul>
<b>✓ Major dental</b>	12	<b>\$1,000 per person up to \$2,000 per policy</b> combined limit for endodontic, general dental & major dental	<ul style="list-style-type: none"> <li>Full crown veneered: \$456</li> </ul>
<b>✓ Non PBS pharmaceuticals</b>	2	<b>\$300 per person up to \$600 per policy</b> combined limit for chiropractic, eye therapy (orthoptics), home nursing, non pbs pharmaceuticals, occupational therapy, osteopathy, physiotherapy, remedial massage, speech therapy & other services	<ul style="list-style-type: none"> <li>Per eligible prescription: \$25</li> </ul>
<b>✓ Occupational therapy</b>	2	<b>\$300 per person up to \$600 per policy</b> combined limit for chiropractic, eye therapy (orthoptics), home nursing, non pbs pharmaceuticals, occupational therapy, osteopathy, physiotherapy, remedial massage, speech therapy & other services	<ul style="list-style-type: none"> <li>Initial visit: \$25</li> <li>Subsequent visit: \$17</li> </ul>
<b>✓ Optical</b>	12	<b>\$135 per person</b>	<ul style="list-style-type: none"> <li>Multi-focal lenses &amp; frames: \$135</li> <li>Single vision lenses &amp; frames: \$135</li> </ul>
<b>✓ Orthodontic</b>	12	<b>\$300 per person</b> \$1,800 lifetime limit	<ul style="list-style-type: none"> <li>Braces for upper &amp; lower teeth, including removal plus fitting of retainer: \$900</li> </ul>
<b>✓ Orthotics (podiatric orthoses)</b>	2	<b>\$300 per person</b> combined limit for orthotics (podiatric orthoses) & podiatry	<ul style="list-style-type: none"> <li>Orthotics supply &amp; fit: \$70</li> </ul>
<b>✓ Osteopathy</b>	2	<b>\$300 per person up to \$600 per policy</b> combined limit for chiropractic, eye therapy (orthoptics), home nursing, non pbs pharmaceuticals, occupational therapy, osteopathy, physiotherapy, remedial massage, speech therapy & other services	<ul style="list-style-type: none"> <li>Initial visit: \$25</li> <li>Subsequent visit: \$17</li> </ul>
<b>✓ Physiotherapy</b>	2	<b>\$300 per person up to \$600 per policy</b> combined limit for chiropractic, eye therapy (orthoptics), home nursing, non pbs pharmaceuticals, occupational therapy, osteopathy, physiotherapy, remedial massage, speech therapy & other services	<ul style="list-style-type: none"> <li>Initial visit: \$27</li> <li>Subsequent visit: \$22</li> </ul>
<b>✓ Podiatry</b>	2	<b>\$300 per person</b> combined limit for orthotics (podiatric orthoses) & podiatry	<ul style="list-style-type: none"> <li>Initial visit: \$25</li> <li>Subsequent visit: \$25</li> </ul>
<b>✓ Psychology</b>	2	<b>\$300 per person</b>	<ul style="list-style-type: none"> <li>Initial visit: \$50</li> <li>Subsequent visit: \$50</li> </ul>

<b>✓ Remedial massage</b>	2	<b>\$300 per person up to \$600 per policy</b> combined limit for chiropractic, eye therapy (orthoptics), home nursing, non pbs pharmaceuticals, occupational therapy, osteopathy, physiotherapy, remedial massage, speech therapy & other services	<ul style="list-style-type: none"><li>Initial visit: \$25</li><li>Subsequent visit: \$17</li></ul>
<b>✓ Speech therapy</b>	2	<b>\$300 per person up to \$600 per policy</b> combined limit for chiropractic, eye therapy (orthoptics), home nursing, non pbs pharmaceuticals, occupational therapy, osteopathy, physiotherapy, remedial massage, speech therapy & other services	<ul style="list-style-type: none"><li>Initial visit: \$25</li><li>Subsequent visit: \$17</li></ul>

Benefits are also payable for pressure garments, non-surgically implanted prostheses, CPAP machines, air compressors, nebulisers and TENS machines. The orthotic benefit shown is a guide only and benefits will differ according to the orthotic prescribed. A benefit is paid for state ambulance subscriptions when paid voluntarily but not as a state tax or levy. Benefit is \$44 for family memberships.

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

<b>✗</b> Ante-natal/Post-natal classes	<b>✗</b> Exercise physiology
<b>✗</b> Chinese medicine	<b>✗</b> Vaccinations

## Ambulance cover

Ambulance cover is provided by the State government for Queensland residents (<https://www.ambulance.qld.gov.au>). This includes cover whilst interstate.

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

## Insurer Details



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Advantage Family Care Extras

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Available in QLD

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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