

**Medibank Private Limited**
My Choice Extras Move 60**\$48.30 / 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: Only one person.

At Members' Choice extras providers you may get more for your cover. This includes 100% back on a dental check up, scale and clean each year and great optical deals. See <https://www.medibank.com.au/health-insurance/find-provider/#/>.

Policy ID: MBP/I110/TNGB10**Source:** Private Health Information Statement (PHIS)

Extras Cover

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

Note, for treatments marked with *: A 12 month waiting period applies to surgical tooth extraction. Exercise physiology benefit is \$16.00 for individual consultations and \$10.00 for group consultations. Counselling (no waiting period) shares an annual limit with Psychology. Vaccinations - non-PBS listed flu vaccinations only.

Treatment & waiting period (months)		Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ Acupuncture	2	\$300 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, osteopathy & physiotherapy	<ul style="list-style-type: none">Initial visit: \$28.8Subsequent visit: \$21.5
✓ Chinese medicine	2	\$300 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, osteopathy & physiotherapy	<ul style="list-style-type: none">Initial visit: \$16Subsequent visit: \$16
✓ Chiropractic	2	\$300 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, osteopathy & physiotherapy	<ul style="list-style-type: none">Initial visit: \$33.2Subsequent visit: \$24
✓ Endodontic	12	\$350 per policy combined limit for endodontic & major dental	<ul style="list-style-type: none">Filling of one root canal: \$124.8
✓ Exercise physiology*	2	\$300 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, osteopathy & physiotherapy	<ul style="list-style-type: none">Initial visit: \$16Subsequent visit: \$10
✓ Eye therapy (orthoptics)	2	\$150 per policy combined limit for eye therapy (orthoptics) & optical	<ul style="list-style-type: none">Initial visit: \$37.5Subsequent visit: \$27.5

✓ General dental*	2	\$400 per policy	<ul style="list-style-type: none"> Fluoride treatment: \$14.2 Scale & clean: \$43.6 Surgical tooth extraction: \$107.6 Periodic oral examination: \$26
✓ Major dental	12	\$350 per policy combined limit for endodontic & major dental	<ul style="list-style-type: none"> Full crown veneered: \$500
✓ Non PBS pharmaceuticals	2	\$200 per policy combined limit for non pbs pharmaceuticals, psychology & vaccinations	<ul style="list-style-type: none"> Per eligible prescription: \$21
✓ Optical	6	\$150 per policy combined limit for eye therapy (orthoptics) & optical	<ul style="list-style-type: none"> Multi-focal lenses & frames: 100% of charge Single vision lenses & frames: 100% of charge
✓ Osteopathy	2	\$300 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, osteopathy & physiotherapy	<ul style="list-style-type: none"> Initial visit: \$33.2 Subsequent visit: \$24
✓ Physiotherapy	2	\$300 per policy combined limit for acupuncture, chinese medicine, chiropractic, exercise physiology, osteopathy & physiotherapy	<ul style="list-style-type: none"> Initial visit: \$33.7 Subsequent visit: \$28.1
✓ Psychology*	0	\$200 per policy combined limit for non pbs pharmaceuticals, psychology & vaccinations	<ul style="list-style-type: none"> Initial visit: \$94.99 Subsequent visit: \$82.6
✓ Remedial massage	2	\$150 per policy	<ul style="list-style-type: none"> Initial visit: \$31.4 Subsequent visit: \$21.5
✓ Vaccinations*	2	\$200 per policy combined limit for non pbs pharmaceuticals, psychology & vaccinations	<ul style="list-style-type: none"> Per service: 100% of charge

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

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|---------------------------------|-----------------------------------------|----------------------------------|
| ✗ Ante-natal/Post-natal classes | ✗ Health management / Healthy lifestyle | ✗ Orthodontic |
| ✗ Audiology | ✗ Hearing aids | ✗ Orthotics (podiatric orthoses) |
| ✗ Blood glucose monitors | ✗ Home nursing | ✗ Podiatry |
| ✗ Dietetics/dietary advice | ✗ Occupational therapy | ✗ Speech therapy |

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.

Insurer Details



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Call now  **132331**
Sponsor link

Medibank Private Limited

 <http://medibank.com.au>

 ask_us@medibank.com.au

 **132331**

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Private Health Information Statement is available from the Private Health Insurance Ombudsman website at <https://privatehealth.gov.au/dynamic/Premium/PHIS/MBP/I110/TNGB10>