

**Medibank Private Limited**

Better Health 90

**Corporate Policy****\$382.30 / month**

(Before Rebate, Discount &amp; Loading)

Available in NSW &amp; 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:** Two adults (and no-one else).

**Corporate policy:** Available to employees of a company that has an agreement with Medibank

This policy can only be purchased with certain hospital policies.

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/I79/NRNV20****Source:** [Private Health Information Statement \(PHIS\)](#)

## Extras Cover

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

Note, for treatments marked with \* : A 12mth waiting period applies to Surgical tooth extraction.

| Treatment & waiting period (months) | Benefit limits per 12 months unless otherwise stated  | Examples of maximum benefits   |
|-------------------------------------|---|--|
| ✓ Acupuncture                       | 2 <b>\$1,000 per person</b><br>combined limit for acupuncture, ante-natal/post-natal classes, chinese medicine, dietetics/dietary advice, exercise physiology, non pbs pharmaceuticals, occupational therapy, psychology & speech therapy | <ul style="list-style-type: none"><li>Initial visit: 90% of charge</li><li>Subsequent visit: 90% of charge</li></ul> |
| ✓ Ante-natal/Post-natal classes     | 2 <b>\$1,000 per person</b><br>combined limit for acupuncture, ante-natal/post-natal classes, chinese medicine, dietetics/dietary advice, exercise physiology, non pbs pharmaceuticals, occupational therapy, psychology & speech therapy | <ul style="list-style-type: none"><li>Initial visit: 90% of charge</li><li>Subsequent visit: 90% of charge</li></ul> |
| ✓ Blood glucose monitors            | 24 <b>\$600 per person</b><br>combined limit for blood glucose monitors, eye therapy (orthoptics), hearing aids & other services  | <ul style="list-style-type: none"><li>Per monitor: 90% of charge</li></ul>   |
| ✓ Chinese medicine                  | 2 <b>\$1,000 per person</b><br>combined limit for acupuncture, ante-natal/post-natal classes, chinese medicine, dietetics/dietary advice, exercise physiology, non pbs pharmaceuticals, occupational therapy, psychology & speech therapy | <ul style="list-style-type: none"><li>Initial visit: 90% of charge</li><li>Subsequent visit: 90% of charge</li></ul> |
| ✓ Chiropractic                      | 2 <b>\$700 per person</b><br>combined limit for chiropractic, orthotics (podiatric orthoses), osteopathy & podiatry   | <ul style="list-style-type: none"><li>Initial visit: 90% of charge</li><li>Subsequent visit: 90% of charge</li></ul> |

|   |    |   |   |
|---|----|---|---|
| ✓ <b>Dietetics/dietary advice</b>       | 2  | <b>\$1,000 per person</b><br>combined limit for acupuncture, ante-natal/post-natal classes, chinese medicine, dietetics/dietary advice, exercise physiology, non pbs pharmaceuticals, occupational therapy, psychology & speech therapy | <ul style="list-style-type: none"> <li>Initial visit: 90% of charge</li> <li>Subsequent visit: 90% of charge</li> </ul>   |
| ✓ <b>Endodontic</b>                     | 12 | <b>\$1,900 per person</b><br>combined limit for endodontic, general dental, major dental & orthodontic  | <ul style="list-style-type: none"> <li>Filling of one root canal: 90% of charge</li> </ul>  |
| ✓ <b>Exercise physiology</b>            | 2  | <b>\$1,000 per person</b><br>combined limit for acupuncture, ante-natal/post-natal classes, chinese medicine, dietetics/dietary advice, exercise physiology, non pbs pharmaceuticals, occupational therapy, psychology & speech therapy | <ul style="list-style-type: none"> <li>Initial visit: 90% of charge</li> <li>Subsequent visit: 90% of charge</li> </ul>   |
| ✓ <b>Eye therapy (orthoptics)</b>       | 2  | <b>\$600 per person</b><br>combined limit for blood glucose monitors, eye therapy (orthoptics), hearing aids & other services   | <ul style="list-style-type: none"> <li>Initial visit: 90% of charge</li> <li>Subsequent visit: 90% of charge</li> </ul>   |
| ✓ <b>General dental*</b>                | 2  | <b>\$1,900 per person</b><br>combined limit for endodontic, general dental, major dental & orthodontic  | <ul style="list-style-type: none"> <li>Fluoride treatment: 90% of charge</li> <li>Scale &amp; clean: 90% of charge</li> <li>Surgical tooth extraction: 90% of charge</li> <li>Periodic oral examination: 90% of charge</li> </ul> |
| ✓ <b>Hearing aids</b>                   | 36 | <b>\$600 per person</b><br>combined limit for blood glucose monitors, eye therapy (orthoptics), hearing aids & other services   | <ul style="list-style-type: none"> <li>Hearing aid: 90% of charge</li> </ul>  |
| ✓ <b>Major dental</b>                   | 12 | <b>\$1,900 per person</b><br>combined limit for endodontic, general dental, major dental & orthodontic  | <ul style="list-style-type: none"> <li>Full crown veneered: 90% of charge</li> </ul>  |
| ✓ <b>Non PBS pharmaceuticals</b>        | 2  | <b>\$1,000 per person</b><br>combined limit for acupuncture, ante-natal/post-natal classes, chinese medicine, dietetics/dietary advice, exercise physiology, non pbs pharmaceuticals, occupational therapy, psychology & speech therapy | <ul style="list-style-type: none"> <li>Per eligible prescription: 90% of charge</li> </ul>  |
| ✓ <b>Occupational therapy</b>           | 2  | <b>\$1,000 per person</b><br>combined limit for acupuncture, ante-natal/post-natal classes, chinese medicine, dietetics/dietary advice, exercise physiology, non pbs pharmaceuticals, occupational therapy, psychology & speech therapy | <ul style="list-style-type: none"> <li>Initial visit: 90% of charge</li> <li>Subsequent visit: 90% of charge</li> </ul>   |
| ✓ <b>Optical</b>                        | 6  | <b>\$300 per person</b>   | <ul style="list-style-type: none"> <li>Multi-focal lenses &amp; frames: 100% of charge</li> <li>Single vision lenses &amp; frames: 100% of charge</li> </ul>  |
| ✓ <b>Orthodontic</b>                    | 12 | <b>\$1,900 per person</b><br>combined limit for endodontic, general dental, major dental & orthodontic  | <ul style="list-style-type: none"> <li>Braces for upper &amp; lower teeth, including removal plus fitting of retainer: 90% of charge</li> </ul>   |
| ✓ <b>Orthotics (podiatric orthoses)</b> | 2  | <b>\$700 per person</b><br>combined limit for chiropractic, orthotics (podiatric orthoses), osteopathy & podiatry   | <ul style="list-style-type: none"> <li>Orthotics supply &amp; fit: 90% of charge</li> </ul>   |
| ✓ <b>Osteopathy</b>                     | 2  | <b>\$700 per person</b><br>combined limit for chiropractic, orthotics (podiatric orthoses), osteopathy & podiatry   | <ul style="list-style-type: none"> <li>Initial visit: 90% of charge</li> <li>Subsequent visit: 90% of charge</li> </ul>   |

|                           |   |                           |  |
|---------------------------|---|---------------------------|--|
| <b>✓ Physiotherapy</b>    | 2 | <b>\$700 per person</b>   | <ul style="list-style-type: none"><li>Initial visit: 90% of charge</li><li>Subsequent visit: 90% of charge</li></ul> |
| <b>✓ Podiatry</b>         | 2 | <b>\$700 per person</b>   | <ul style="list-style-type: none"><li>Initial visit: 90% of charge</li><li>Subsequent visit: 90% of charge</li></ul> |
| <b>✓ Psychology</b>       | 0 | <b>\$1,000 per person</b> | <ul style="list-style-type: none"><li>Initial visit: 90% of charge</li><li>Subsequent visit: 90% of charge</li></ul> |
| <b>✓ Remedial massage</b> | 2 | <b>\$400 per person</b>   | <ul style="list-style-type: none"><li>Initial visit: 90% of charge</li><li>Subsequent visit: 90% of charge</li></ul> |
| <b>✓ Speech therapy</b>   | 2 | <b>\$1,000 per person</b> | <ul style="list-style-type: none"><li>Initial visit: 90% of charge</li><li>Subsequent visit: 90% of charge</li></ul> |

Health appliances and external prostheses (2mth waiting period), Breathing appliances (12mth waiting period) and Blood pressure monitors (24mth waiting period), 90% back up to annual limit, \$600 annual limit shared with Hearing Aids. Various benefit replacement periods apply. Counselling (no waiting period) shares an annual limit with Psychology. Please contact Medibank for more information.

**This policy does not include General treatment (Extras) cover for****✗** Audiology**✗** Health management / Healthy lifestyle**✗** Home nursing**✗** Vaccinations

## Ambulance cover

In NSW & ACT 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.

**Other features of this ambulance cover:** Cover for an ambulance when you require immediate professional attention and you need to be transported to hospital or other approved facility and your medical condition is such that you cannot be transported any other way, or where an ambulance is called but transport is not needed. Cover for air ambulance where pre-approval has been obtained from Medibank. In all cases the ambulance provider must be Medibank approved. Please contact Medibank for further details.

## Insurer Details

**Medibank Private Limited**

Better Health 90

**Corporate Policy****\$382.30 / month**

(Before Rebate, Discount &amp; Loading)

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**Call now 132331**  
Sponsor link**Medibank Private Limited**

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