



**Medibank Private Limited**  
**Top Extras 60**

**\$120.60 / month**

(Before Rebate, Discount & Loading)

Available in WA

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 - 30) and non-students (21 to 30), 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: Medibank considers a child dependant to be aged up to 21.

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/I97/WLU01Y

**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. Orthodontics has a \$400 opening balance then a top up of \$200 per year up to a \$1200 lifetime limit.

| Treatment & waiting period (months) |    | Benefit limits per 12 months unless otherwise stated                                                                | Examples of maximum benefits                                                                           |
|-------------------------------------|----|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| ✓ Acupuncture                       | 2  | <b>\$200 per person</b><br>combined limit for acupuncture, chinese medicine, exercise physiology & remedial massage | <ul style="list-style-type: none"><li>Initial visit: \$34.8</li><li>Subsequent visit: \$28.4</li></ul> |
| ✓ Blood glucose monitors            | 24 | <b>\$150 per person</b>                                                                                             | <ul style="list-style-type: none"><li>Per monitor: 100% of charge</li></ul>                            |
| ✓ Chinese medicine                  | 2  | <b>\$200 per person</b><br>combined limit for acupuncture, chinese medicine, exercise physiology & remedial massage | <ul style="list-style-type: none"><li>Initial visit: \$16</li><li>Subsequent visit: \$16</li></ul>     |
| ✓ Chiropractic                      | 2  | <b>\$200 per person</b><br>combined limit for chiropractic & osteopathy                                             | <ul style="list-style-type: none"><li>Initial visit: \$38.2</li><li>Subsequent visit: \$26.4</li></ul> |
| ✓ Dietetics/dietary advice          | 2  | <b>\$200 per person</b>                                                                                             | <ul style="list-style-type: none"><li>Initial visit: \$40.3</li><li>Subsequent visit: \$22.3</li></ul> |
| ✓ Endodontic                        | 12 | <b>\$500 per person</b><br>combined limit for endodontic & major dental                                             | <ul style="list-style-type: none"><li>Filling of one root canal: \$107.7</li></ul>                     |

|                                  |    |                                                                                                              |                                                                                                                                                                                                     |
|----------------------------------|----|--------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ✓ Exercise physiology*           | 2  | \$200 per person<br>combined limit for acupuncture, chinese medicine, exercise physiology & remedial massage | <ul style="list-style-type: none"> <li>Initial visit: \$16</li> <li>Subsequent visit: \$10</li> </ul>                                                                                               |
| ✓ Eye therapy (orthoptics)       | 2  | \$200 per person                                                                                             | <ul style="list-style-type: none"> <li>Initial visit: \$37.5</li> <li>Subsequent visit: \$27.5</li> </ul>                                                                                           |
| ✓ General dental*                | 2  | \$800 per person                                                                                             | <ul style="list-style-type: none"> <li>Fluoride treatment: \$12.8</li> <li>Scale &amp; clean: \$43.6</li> <li>Surgical tooth extraction: \$90.6</li> <li>Periodic oral examination: \$23</li> </ul> |
| ✓ Hearing aids                   | 36 | \$400 per person                                                                                             | <ul style="list-style-type: none"> <li>Hearing aid: 100% of charge</li> </ul>                                                                                                                       |
| ✓ Major dental                   | 12 | \$500 per person<br>combined limit for endodontic & major dental                                             | <ul style="list-style-type: none"> <li>Full crown veneered: \$500</li> </ul>                                                                                                                        |
| ✓ Non PBS pharmaceuticals        | 2  | \$200 per person                                                                                             | <ul style="list-style-type: none"> <li>Per eligible prescription: \$21</li> </ul>                                                                                                                   |
| ✓ Occupational therapy           | 2  | \$200 per person                                                                                             | <ul style="list-style-type: none"> <li>Initial visit: \$41.2</li> <li>Subsequent visit: \$23.2</li> </ul>                                                                                           |
| ✓ Optical                        | 6  | \$200 per person                                                                                             | <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>                                        |
| ✓ Orthodontic*                   | 12 | \$400 per person<br>\$1,200 lifetime limit                                                                   | <ul style="list-style-type: none"> <li>Braces for upper &amp; lower teeth, including removal plus fitting of retainer: 100% of charge</li> </ul>                                                    |
| ✓ Orthotics (podiatric orthoses) | 2  | \$200 per person<br>combined limit for orthotics (podiatric orthoses) & podiatry                             | <ul style="list-style-type: none"> <li>Orthotics supply &amp; fit: 60% of charge</li> </ul>                                                                                                         |
| ✓ Osteopathy                     | 2  | \$200 per person<br>combined limit for chiropractic & osteopathy                                             | <ul style="list-style-type: none"> <li>Initial visit: \$38.2</li> <li>Subsequent visit: \$26.4</li> </ul>                                                                                           |
| ✓ Physiotherapy                  | 2  | \$300 per person                                                                                             | <ul style="list-style-type: none"> <li>Initial visit: \$37.1</li> <li>Subsequent visit: \$32.1</li> </ul>                                                                                           |
| ✓ Podiatry                       | 2  | \$200 per person<br>combined limit for orthotics (podiatric orthoses) & podiatry                             | <ul style="list-style-type: none"> <li>Initial visit: \$35.4</li> <li>Subsequent visit: \$26.5</li> </ul>                                                                                           |
| ✓ Psychology                     | 0  | \$200 per person                                                                                             | <ul style="list-style-type: none"> <li>Initial visit: \$115.29</li> <li>Subsequent visit: \$100.25</li> </ul>                                                                                       |
| ✓ Remedial massage               | 2  | \$200 per person<br>combined limit for acupuncture, chinese medicine, exercise physiology & remedial massage | <ul style="list-style-type: none"> <li>Initial visit: \$37.8</li> <li>Subsequent visit: \$25.5</li> </ul>                                                                                           |
| ✓ Speech therapy                 | 2  | \$200 per person                                                                                             | <ul style="list-style-type: none"> <li>Initial visit: \$66.3</li> <li>Subsequent visit: \$31.5</li> </ul>                                                                                           |

Health appliances and external prostheses 2 mth waiting period. Fixed benefits and various benefits replacement periods apply. \$200 annual limit. Breathing appliances (12mth waiting period) and Blood pressure monitors (24mth waiting period) 1 appliance every 36 months, shared annual limit with Blood glucose monitors. 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**

- |                                 |                                         |                |
|---------------------------------|-----------------------------------------|----------------|
| ✗ Ante-natal/Post-natal classes | ✗ Health management / Healthy lifestyle | ✗ Home nursing |
| ✗ Audiology                     |                                         | ✗ Vaccinations |

**Other features of this general treatment cover:** One of Medibank's top extras covers with generous annual limits that apply to each person covered on the membership. Easy online and electronic claiming.

## Ambulance cover

In WA 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



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Available in WA

Call now  **132331**  
Sponsor link

**Medibank Private Limited**

 <http://medibank.com.au>

 [ask\\_us@medibank.com.au](mailto:ask_us@medibank.com.au)

 **132331**

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