Navy Health Ltd

Healthy Living Extras

Restricted Insurer

$77.77 / month
(Before Rebate, Discount & Loading)
Available in VIC

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.

Restricted insurer: Membership of this insurer is restricted to Cover for the ADF community - serving, ex-serving ADF, employees of contractors to ADF and families.

This health insurer does not operate a preferred provider scheme.

Policy ID: NHB/I20/VFGC10

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	**$320 per policy** combined limit for acupuncture, chinese medicine, exercise physiology & remedial massage	• Initial visit: $32 • Subsequent visit: $32
✓ **Audiology**	2	**$300 per policy**	• Initial visit: $60 • Subsequent visit: $40
✓ **Blood glucose monitors**	6	**$400 per policy**	• Per monitor: 85% of charge
✓ **Chinese medicine**	2	**$320 per policy** combined limit for acupuncture, chinese medicine, exercise physiology & remedial massage	• Initial visit: $32 • Subsequent visit: $32
✓ **Chiropractic**	2	**$550 per policy** combined limit for chiropractic, osteopathy & other services	• Initial visit: $48 • Subsequent visit: $35
✓ **Dietetics/dietary advice**	2	**$300 per policy**	• Initial visit: $60 • Subsequent visit: $40
✓ **Endodontic**	12	**$1,500 per policy** combined limit for endodontic, major dental & other services sub-limits apply	• Filling of one root canal: $129
✓ **Exercise physiology**	2	**$320 per policy** combined limit for acupuncture, chinese medicine, exercise physiology & remedial massage	• Initial visit: $32 • Subsequent visit: $32

✓ **Eye therapy (orthoptics)**	2	**$300 per policy**	• Initial visit: $60 • Subsequent visit: $35
✓ **General dental**	2	**No annual limit**	• Fluoride treatment: $21 • Scale & clean: $68 • Periodic oral examination: $42
✓ **Hearing aids**	12	**$900 per policy**	• Hearing aid: 100% of charge
✓ **Home nursing**	2	**$1,000 per policy**	• Initial visit: $60 • Subsequent visit: $60
✓ **Major dental**	12	**$1,500 per policy** combined limit for endodontic, major dental & other services sub-limits apply	• Surgical tooth extraction: $135 • Full crown veneered: $619
✓ **Non PBS pharmaceuticals**	2	**$500 per policy** combined limit for non pbs pharmaceuticals & vaccinations	• Per eligible prescription: $120
✓ **Occupational therapy**	2	**$400 per policy**	• Initial visit: $45 • Subsequent visit: $33
✓ **Optical**	6	**$260 per policy**	• Multi-focal lenses & frames: 100% of charge • Single vision lenses & frames: 100% of charge
✓ **Orthodontic**	12	**$2,000 per policy**	• Braces for upper & lower teeth, including removal plus fitting of retainer: 70% of charge
✓ **Orthotics (podiatric orthoses)**	2	**$200 per policy**	• Orthotics supply & fit: 85% of charge
✓ **Osteopathy**	2	**$550 per policy** combined limit for chiropractic, osteopathy & other services	• Initial visit: $48 • Subsequent visit: $35
✓ **Physiotherapy**	2	**$600 per policy**	• Initial visit: $55 • Subsequent visit: $42
✓ **Podiatry**	2	**$300 per policy**	• Initial visit: $45 • Subsequent visit: $35
✓ **Psychology**	2	**$400 per policy**	• Initial visit: $90 • Subsequent visit: $70
✓ **Remedial massage**	2	**$320 per policy** combined limit for acupuncture, chinese medicine, exercise physiology & remedial massage	• Initial visit: $32 • Subsequent visit: $32
✓ **Speech therapy**	2	**$300 per policy**	• Initial visit: $90 • Subsequent visit: $40
✓ **Vaccinations**	2	**$500 per policy** combined limit for non pbs pharmaceuticals & vaccinations	• Per service: $120

Other treatments covered include: Laser Eye Surgery ($1,200 per person per benefit year), Medically Prescribed Appliances (includes Blood Glucose Monitors) ($400 per person per benefit year) and CPAP Devices ($600 per benefit year). Members can access special offers from any of Navy Health's preferred optical providers: OPSM, Laubman & Pank, Specsavers, Teachers Eye Care, Eyebenefit and Q Optical Network (QON). General treatment benefit year runs from 1 July to 30 June.

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

- ✗ Ante-natal/Post-natal classes
- ✗ Health management / Healthy lifestyle

Other features of this general treatment cover: Telehealth services available for Physiotherapy, Psychology, Dietetics and Speech Therapy.

For further information about this policy see: https://navyhealth.com.au/healthy-living-extras-cover

Ambulance cover

In VIC this policy provides:

Emergency: Unlimited with a waiting period of 2 months.

Non-emergency: Unlimited transport with a waiting period of 2 months, or 2 months for pre-existing conditions.

Call-out fees: Will be paid for each attendance, including emergency treatment without transport to hospital.

Other features of this ambulance cover: We cover 100% of the cost of ambulance services within Australia, provided it is provided by a state based run Ambulance service, by either air/sea or land. We do not provide benefits for privately run patient transport services.

For further information about this policy see: https://navyhealth.com.au/healthy-living-extras-cover

Insurer Details

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Navy Health Ltd
https://navyhealth.com.au/why-navy-health/
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